

EMOTIONAL — AND — DISORDERED EATING

Trauma-Informed Clinical Tools to Heal Your
Clients' Relationship with Food and Body

Ann Saffi Biasetti, PhD; LCSWR; CEDS

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

1

“Materials that are included in this course may include interventions and modalities that are beyond the authorized practice of mental health professionals. As a licensed professional, you are responsible for reviewing the scope of practice, including activities that are defined in law as beyond the boundaries of practice in accordance with and in compliance with your professions standards.”

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

2

Arrival- Welcoming Your Body Into the Room

Practice-

- Feet, Spine and Seat

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

3

Deconstructing the Term 'Emotional Eating'



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

4

Deconstructing the Term 'Emotional Eating'

- Exploring my own feelings- Working with countertransference
- What do I see in this picture?
- Do I see this as a “positive movement?”
- How do I imagine many of my clients would see this?
- Do you believe your clients can live with *feelings and food*??
- What has created such a confused relationship?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

5

Deconstructing the Term 'Emotional Eating'

- Questions to Contemplate:
- Is it okay to overindulge during a celebration and/or holiday?
- Is it okay to overindulge on a date?
- Is it okay to overindulge at lunch or dinner?
- Is it okay to overindulge by yourself?
- Is it okay to eat when you are emotional? Sad/angry/ frustrated/ annoyed?
- Is it okay to eat when you are emotional? Happy/joyful?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

6

Deconstructing the Term 'Emotional Eating'

■ Questions to Contemplate:

- What does the term emotional eating mean to me?
- Am I or my clients allowed to comfort with food?
- Do you consider that it also may mean the *withholding* of food?
- Would you react differently to a client in a thin or small-sized body telling you they ate a gallon of ice cream after a break-up as opposed to a client in a large-sized body?
- Do you notice clients in different sized bodies holding a different emotional response to eating in response to emotions?
- Do you hold a different response to your clients in different sized bodies when they tell you they are eating in response to emotions?
- Do you assume larger-sized clients reporting 'emotional eating' have an eating disorder as opposed to your thinner clients?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

7

Deconstructing the Term 'Emotional Eating' Diet Culture's Influence

■ Diet Culture's Influence and What It Has Left Us With:

- *The belief that eating in response to particular emotions is wrong and shameful*
- *That food is only for fuel and never for comfort*
- *Food is void of relationship and/or emotion*
- *That there is a "right and wrong" way to be with food*
- *What can be allowed and what cannot be allowed*
- *What body size is allowed to eat for fun, pleasure, enjoyment and what body size is not.*
- *What body size is allowed to comfort with food what body size is not*
- *A disregard for cultural influence and difference*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

8

Deconstructing the Term ‘Emotional Eating’

- Lit review of emotional eating measurement scales

“The construct of emotional eating is more nuanced than is typically presented...It is concluded that emotional eating scales lack predictive and discriminative validity; they

cannot be assumed to measure accurately what they intend to measure, namely increased food intake in response to negative emotions”

(Bongers, P., & Jansen, A. (2016)

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

9

Deconstructing the Term ‘Emotional Eating’

Three studies focusing on emotional eating compared to habit strength in snack intake.

“Both studies demonstrated that snack consumption was not predicted by emotional eating but depended on the

“habit of unhealthy snacking and on restraint eating.”

Habit- Context behavior (triggered by cues) associations in memory that require little to no thought

“Study 3 addressed the alternative hypothesis of emotional eating being an expression of ***concerns about eating behavior***

...the concept of emotional eating may not capture the tendency to eat under emotional conditions, but rather reflects ***“beliefs about the relation between emotions and eating”*** (Adriaanse, Ridder, Evers, 2010).

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

10

Deconstructing the Term 'Emotional Eating'

"Common characteristics of high scorers on all sub-scales are their

concerns about food intake and their more or less successful intentions to control their eating in response to all possible kinds of disinhibitors, like emotions, experienced diet-breaking, and palatable food cues"

(Jansen, A., Nederkoorn, C., Roefs, A., Bongers, P., Teugels, T., & Havermans, R., 2011).

**** CONCERN & CONTROL ****

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

11

What Are We Really Meaning?

■ Cue-Reactive/Concerned Eaters/Restrained Eaters



There is something important happening here!

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

12

What We Are Left With

■ When Diet Culture Beliefs, Emotions, Food and Response Collide-

- Beginning to help our clients make sense of the beliefs they hold, what they feel, how it impacts them *inside* and how to make sense of it all



Nervous System
Dysregulation- What am I left
with inside?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

13

Turning The Lens Inward- Moving Our Clients Away From the Obvious to the Subtle

■ Client:

- "I overate this past weekend and I'm so upset"
- "I was running around all week and I just forget to eat lunch!"
- "I can't go near candy bars. Candy bars set me over the edge"
- "Whenever I'm alone at night I just turn toward food."

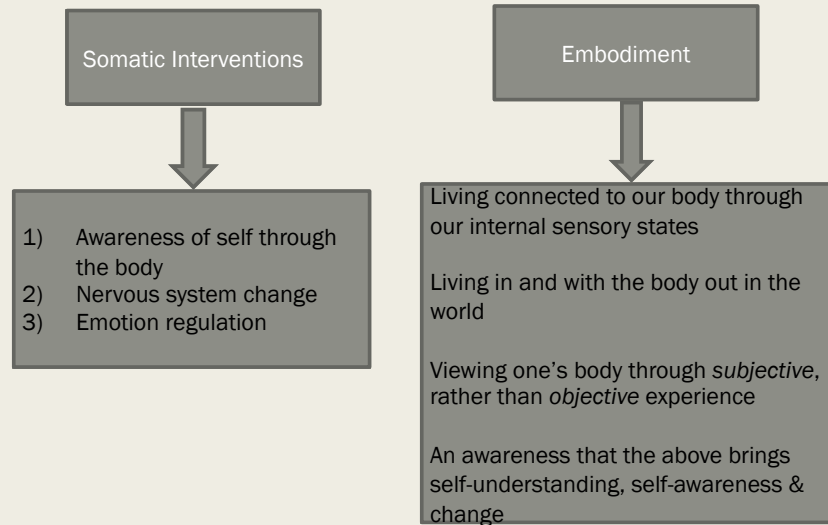
■ Therapist:

- I see, there was something your internal system was trying to tell you. Maybe you and I can figure out what that was.
- Oh yes, but of course! We discovered that when your system is in that state that the result is disrupted sensations of hunger or fullness.
- Let's see if we can understand what happens inside your body and the beliefs you hold when you are with that particular food.
- Yes, you are noticing that time of day and whether you are with others or alone matters to what happens inside

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

14

Turning the Lens Inward- Helping Our Clients to Embody



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

15

Turning the Lens Inward- Helping Our Clients to Embody

■ Where do we begin? Where we all began!

From the start we begin to teach our clients about their unique nervous and sensory systems and how they have lost the ability to listen in and how we will be learning that together again.

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

16

Turning the Lens Inward- An Immediate Teaching of Self-Compassion

- It immediately reduces the cycle of self-identification- “what’s wrong with me?”
- It starts to create curiosity
- It creates a new self-understanding
- It shifts our clients into agency and action rather than defeat and despair
- It is actually felt and observed, not just thought about
- They begin to observe a very long-standing history of these states and often report,
- “I wished I knew this sooner.”
- That wish opens the door to greater self-kindness toward the complexity of what was once thought to be a simple act of “self-control.”

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

17

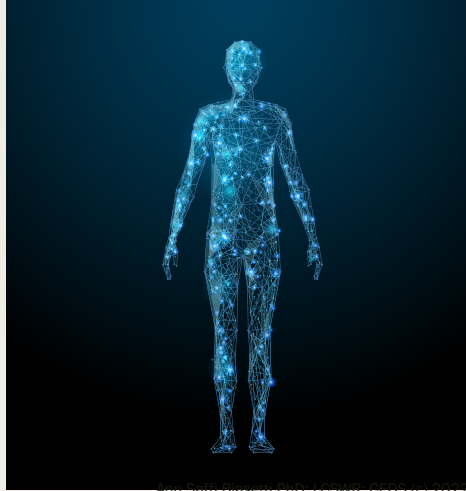
Somatic Skills A Harm-Reduction Model of Care Is Trauma-Sensitive Care

- It respects each individuals system rather than a “cookie-cutter approach” to treatment
- Mindfulness is at it’s core
- Moves away from behavior & toward self and body curiosity
- It moves toward internal understanding
- It moves into understanding food in a new & different way
- It moves into understanding the body in a new & different way
- It’s protective and pro-active
- It increases agency and action

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

18

The Body- The Missing Link in Treatment- The Importance of Psycho-Education About the Autonomic Nervous System



VVC- Ventral Vagal Complex- Our social engagement system;
"face/heart connection"; motion, emotion & communication

SNS-Sympathetic Nervous System- Our active defense system;
mobilization; fight/flight

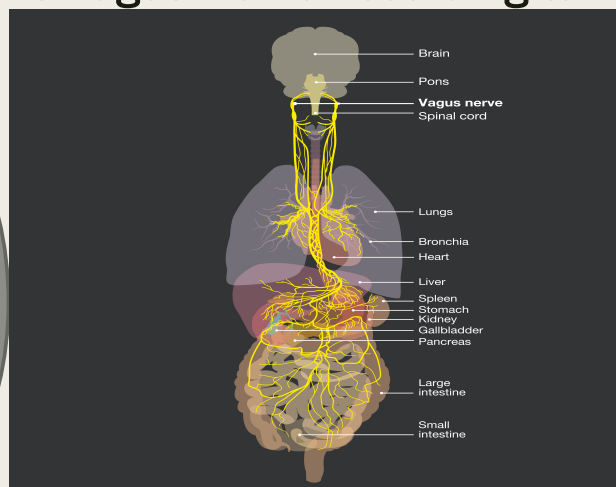
DVC- Dorsal Vagal Complex- Our passive defense system & system for conservation; immobilization; dissociation

Ann Saffi Biasetti PhD; LCSWM; CEDS (c) 2022

19

The Vagus Nerve According to PVT

Sympathetic State-
Adrenaline releases. Heart rate increases. Sweat glands become active. The bronchi & pupils dilate. Blood pressure increases.



Ventral State-
Rest & Digest; heart rate & breath slow down; increased ability to bond, attach and socially engage "optimal functioning" for growth, health and restoration.

Dorsal State-
Heart rate slows down (bradycardia), or may remain increased, change in our rate of respiration, digestion, elimination.

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

20

Embodying the States of Our Nervous System

- Practice
- Fluid Breath: “loosening & opening”
 - *For blended experience; vagal break*
- 3-Stage Breath: Bringing in the “middle”
 - *For engaging the vagal break*
- Release Breath: aka: “re-set & release the moment breath”
 - *For sympathetic & dorsal moments to re-engage the vagal break*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

21

The Nervous System Intake

- What do you know about your own nervous system? What words immediately come to mind?
- Do you consider yourself to be a sensitive person? If so, in what ways?
- Do you believe you have a sensitive system? In what ways?
- Do you feel connected to your internal body? If yes, how do you know that? If no, how do you know you are not connected?
- Looking back, would you say this is how it's always been for you or has it changed and if so, when and in what ways?
- Are there certain areas of your body that feel more sensitive or reactive than other areas?
- Are these areas familiar to you? If so, for how long?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

22

The Nervous System Intake

■ Exploring Sympathetic:

- What do you know about the state of *overwhelm* or *sympathetic*?
- What does the experience of this feel like in your body? Is there tension? Is there holding? Does your body feel shaky, energized, alive, or frightened, agitated, alarmed? List the internal sensations and feelings that stand out the most to you:
- How does your body first signal you when you are in this sympathetic state?
- What is the *experience of sympathetic from inside your body*? How does your body let you know you are in this state?
- What happens to your mind in this state? Is it clear and focused? Confused or cloudy? Slow or dull? Fast or speedy? Any other words you would use to describe this state in your mind?
- Is this internal experience something you are familiar with? If yes, how “old” is it? When do you believe your body first started feeling this way?
- If not familiar with it, do you ever experience this state now? If so, when is it most likely to take place?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

23

The Nervous System Intake

■ Exploring Dorsal

- What do you know about the state of *shut-down* or *dorsal*?
- What does the experience of this feel like in your body? Is there tension? Is there holding? Does your body feel shaky, or frozen, still or stuck? What are the internal sensations and feelings that stand out the most to you:
- How does your body first signal you when you are in this dorsal state?
- What is the *experience of dorsal from inside your body*? How does your body let you know you are in this state?
- What happens to your mind in this state? Is it clear and focused? Confused or cloudy? Slow or dull? Fast or speedy? Any other words you would use to describe this state in your mind?
- Is this internal experience something you are familiar with? If yes, how “old” is it? When do you believe your body first started feeling this way?
- If not familiar with it, do you ever experience this state now? If so, when is it most likely to take place?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

24

The Nervous System Intake

■ Exploring Ventral

- What do you know about the state of *grounded, balanced or ventral*?
- What does the experience of this feel like in your body? Is there any tension present or an opposite sensation? Is there a slowing down that happens? If so, where can you sense and feel it in your body? Are there internal sensations and feelings that stand out the most to you?
- How does your body first signal you when this ventral state is present?
- What is the *experience of ventral from inside your body*? How does your body let you know you are in this state?
- What happens to your mind in this state? Is it clear and focused? Is it attentive and alert? Any other words you would use to describe this state in your mind?
- Is this internal experience something you are familiar with? If yes, how “old” is it? When do you believe your body first started feeling this way?
- If not familiar with it, do you ever experience this state now? If so when is it most likely to take place?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

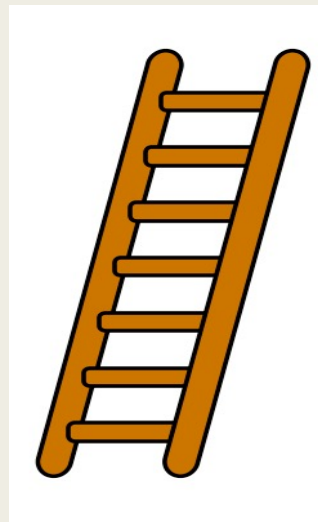
25

Embodying the States of Our Nervous System

The Embodied Experience
of Sympathetic Energy- 7-
10

The Embodied Experience
of Ventral “The Middle”-
4-6

The Embodied Experience
of Dorsal- 0-3



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

26

An Embodied Understanding of Disordered Eating- ALL Behavior is Now Seen Through The Lens of What is Happening *Inside!* And as *ADAPTATION*

- “Out of Fairness, This is Hard!”
- “I’ve only been trying to regulate all along!”
- “I had no idea all that was going on inside me”
- “I always thought it was just about the food”
- “I think I’ve always been this way”
- “I am starting to understand what happened”
- “What do I need now?”

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

27

Mapping the Embodied States of Your Nervous System With Food

- In the morning:
- My Body feels_____
- My Mind feels_____
- The Emotion I most notice is?_____
- The Food I most long for is?_____
- What may my body need?_____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

28

Mapping the Embodied States of Your Nervous System

- In the afternoon:

- My Body feels _____
- My Mind feels _____
- The Emotion I most notice is? _____
- The Food I most long for is? _____
- What may my body need? _____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

29

Mapping the Embodied States of Your Nervous System

- In the evening:

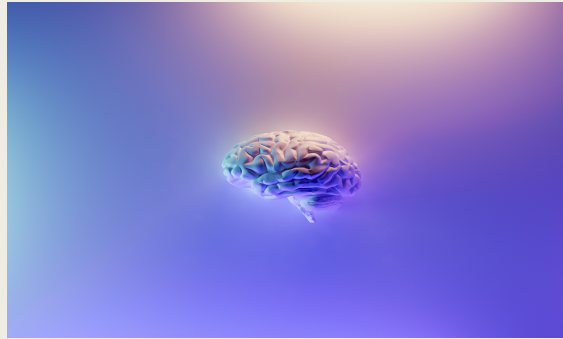
- My Body feels _____
- My Mind feels _____
- The Emotion I most notice is? _____
- The Food I most long for is? _____
- What may my body need? _____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

30

What Happens in My Body, Happens in My Brain- The Brain-Body Connection

■ The Limbic System and IA

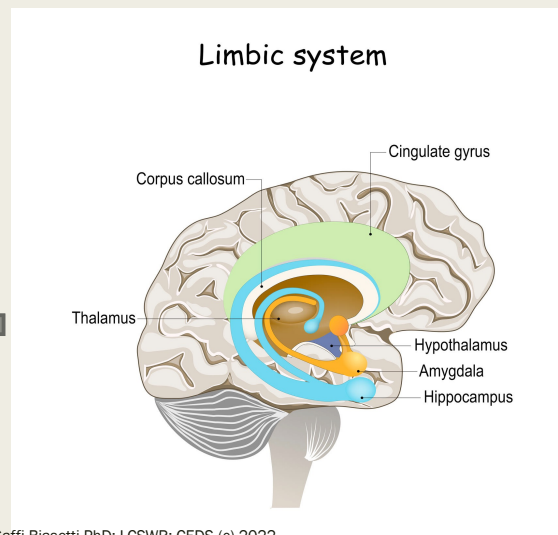


Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

31

The Limbic System

Under the perception of threat the system responds



Responsible for behavioral & emotional responses

Key area in the brain for central control of the Autonomic NS & activation of the sympathetic response

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

32

The Limbic System

- **The Limbic System- Amygdala, Thalamus, Hypothalamus, Hippocampus and The** registry of sensory information. Responsible for translating the messages of bodily signals and emotions into thought.
 - **Amygdala** –An area in the hindbrain that when calm is calm, but when not triggers a fear response through the whole limbic system which continues the mis-firing of messages throughout. It sits above the hippocampus which stores memory.
 - **Insula (insular cortex-a limbic-related cortex)**– (Midbrain located deep within the cerebral cortex) A number of structures in the insula either connect to or send signals to portions of the limbic system. All bodily sensations are transmitted and filtered through here

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

33

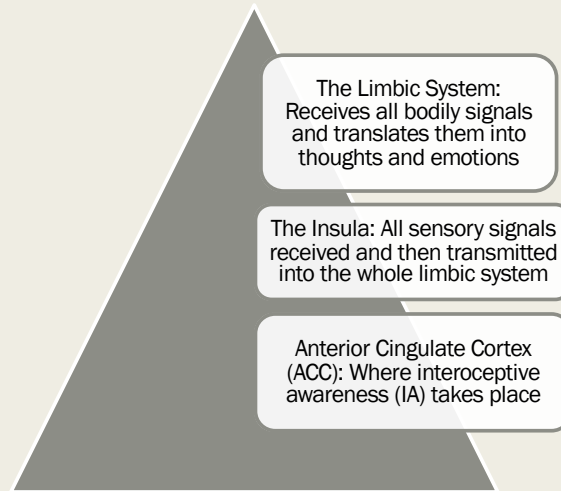
The Limbic System

- **Anterior Cingulate Cortex (ACC)** – (Midbrain located deep within the insula) Registers signals of
 - **Interoceptive Awareness (IA)** such as bodily hunger, fullness, taste, and bodily pain. All other bodily signals get processed here as well. Sensations are taken in through the cortex and then processed through the insula.
- **IA is the register and interpretation of our bodily signals and the ability of our nervous system to represent our internal world, as well as how our nervous system senses and integrates the information about the inner state of our bodies** (Chen, W. G., et. al.2021).
- This area of the brain is responsible for organizing a **sense of self** or
 - **“who we are.”**

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

34

“The Onion”



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

35

Interoceptive Awareness (IA)

- The register, aka “noticing and naming” of bodily sensation is associated with the parasympathetic, or Ventral Vagal response in our nervous system. The “rest and digest.”

- **Increasing IA Calms the NS!**



- **Calming bodily responses increases IA awareness!**

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

36

Bringing Interoception on Board- Begin with Body Literacy

- Developing Body Literacy is the first step in the development of Interoceptive Awareness (IA)
- Dr. Cynthia Price (2018) and *Mindful Awareness in Body-Oriented Therapy* (MABT)
- “improves sensory (physical and emotional) awareness, reduces distress, and improves regulation.”
 - 1) Identifying
 - 2) Assessing
 - 3) Appraising
- Body Literacy-
 - Improved Sensory Awareness

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

37

Body Literacy- Observing, Sensing and Learning

- Practice: Body Scan for Body Literacy
 - What did you notice?
 - What area/s stood out the most?
 - Was this surprising or is this a familiar area of holding/tension/stuck/tight etc.?

■ Practice: Brain-Based IA with Touch

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

38

Body Literacy

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

39

Trauma-Sensitive Language

Words We Use For Body Literacy

- *Naming*
- *Noticing*
- *Invite you*
- *Explore*
- *Choice*
- *Awareness*
- *Sense*
- *Observe*
- *Describe*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

40

Interoceptive Awareness and Hunger/Fullness Cues

■ Why It's the "missing link"

- You cannot register a sense of fullness and/or hunger cues without proper IA!
- When we are in nervous system dysregulation we are unable to have corrective IA experience and sensitivity.
- Link between Interoceptive Sensitivity and eating according to one's hunger and fullness cues (Herbert BM et. al 2013)
- The greater one's ability to perceive and process internal cues, the greater they were able to practice intuitive eating based on it's three facets:
 - *A) Reliance on internal hunger and satiety cues (RIH)*
 - *B) Eating for physical rather than emotional reasons (EPR)*
 - *C) Unconditional permission to eat when hungry (UPE)*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

41

Interoceptive Awareness and Hunger/Fullness Cues

- Irregular eating, not eating sufficient amounts, may have direct consequences on interoceptive capabilities (Nandini et. al, 2021)
 - Restriction decreases interoceptive sensitivity AND increases sympathetic activation!
 - "hangry"
 - "moody"
 - "irritable"
 - "inattentive"
 - "increase in impulsivity"

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

42

Co-Regulation- Relationship Matters!

- One of the most important skills to develop during somatic work- It's all about the
 - WE!
- Neuroception (Porges 2003)- The detection of what is
 - INSIDE- sensory experience
 - OUTSIDE- the environment
 - IN-BETWEEN
our relationship and nervous systems operating together
 - co-regulation
- Operates in the background often in unconscious awareness
 - We feel the outcome of neuroception and change a state
 - We help to make it conscious!

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

43

Neuroception

- Performs two important adaptive tasks:
 - 1) **Assesses risk**
 - 2) **Detects safety or unsafety** in the environment. *If safe, it inhibits the more primitive limbic structures involved in fight, flight, or immobilization (e.g., death-feigning) behaviors.*

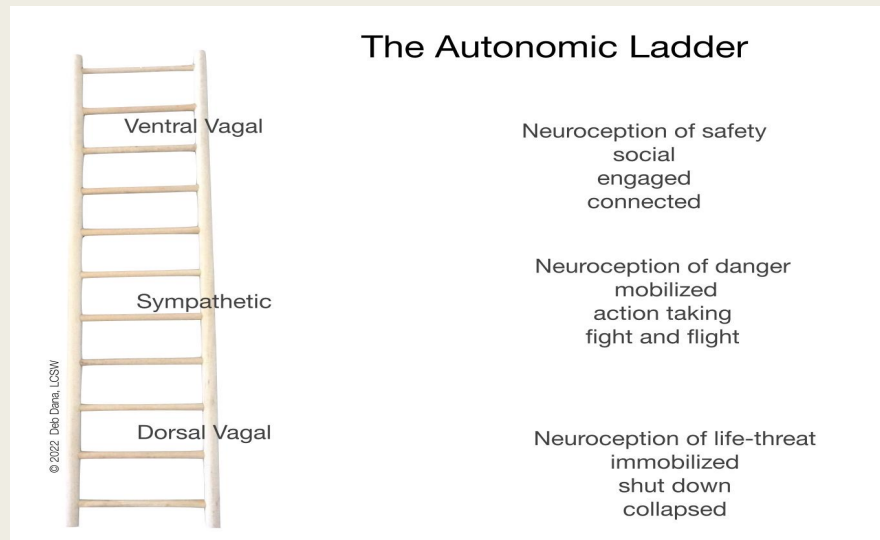
Our limbic system responds to tone of voice, gestures, facial expressions (no blank slates!), body movement and hand gestures!

As clinicians, somatic work requires us to be “actively engaged!”

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

44

Co-Regulation- Relationship Matters!



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

45

Co-Regulation- Relationship Matters!

- Somatically “tracking” our own nervous system throughout a session as well as our clients!
- Noticing and feeling the outcome of the state and the change of the state within yourself and with our clients.
- What tracking does:
 - “It’s not about the nail!” It moves us away from **stories** about food and surface body and into the truth about what’s happening inside.
 - When our client’s vent about distressing behavior we can notice and name this inside now.
 - We can help them deconstruct emotions from beliefs and stories
 - Each session we are constructing a support system- “Can you feel me with you here?”
 - **WE** help our clients switch from defensive system to the mammalian social engagement system, the ventral state.

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

46

Somatic Tracking



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

47

Neuroception for the Clinician

■ Things to consider:

- *How do I feel when I am around this client?*
- *What happens inside for me when I have an actively engaged client as opposed to a still, quiet and less engaged client?*
- *How do I regulate myself before I start my day? Before a session? After a session?*
- *How have I taken care of my own system throughout the day? Am I feeding myself properly throughout a day? Is my intake consistent no matter how hypo/hyperaroused I may get?*
- *What may I need during my day to bring in more safety and protection?*
- *Is there a position in my body that may help me with this? Is there something in my environment that may help me do this? Can I bring something into my environment that may help me with this?*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

48

Helping Our Clients to Use Neuroception

- *Bring attention to their internal world through “environmental cues” in their home, office, alone, or with others*
- *“Is this a moment of safety and regulation?”*
- *“If not, how can I bring that in?”*
- *Bring back to awareness what they know about their internal state and their relationship with food and body in these moments*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

49

Safety & Protection

- Practice- Embodying Safety & Protection
 - Calms a moment
 - Brings on the vagal “break”
 - Eases the moment of suffering
 - We can use it in session
- They can use it on their own during difficult food/body moments

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

50

Safety & Protection

Emergent Properties of a Ventral Vagal State



...a story of possibility

co-regulate and self-regulate
 connect to self, others, the world, Spirit
 tune into the moment and tune out distractions
 resourced and resourceful
 reach out for, and offer, support
 explore options
 hope
 compassion, self-compassion
 flexible, resilient

© 2022 Deb Dana, LCSW

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

51

Helping Our Clients To Use Neuroception

– *Behavior Follows State!*

- So far, I am discovering, that when I feel sympathetic, or hyperaroused, my emotions are (happy, sad, angry, scared)_____when I am in this state.
- My relationship with food becomes _____ when I am in this state
- I believe food is _____when I am in this state.
- My body responds to food by _____when I am in this state.
- My thoughts about food are _____when I am in this state.
- When I am with food in this way I believe I am_____
- What do I notice in my environment? _____
- Am I alone in this moment? With others?_____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

52

Helping Our Clients To Use Neuroception

Behavior Follows State!

- So far, I am discovering, that when I feel dorsal, or hypoaroused, my emotions are (happy, sad, angry, scared)_____when I am in this state.
- My relationship with food becomes _____when I am in this state
- I believe food is _____when I am in this state.
- My body responds to food by _____when I am in this state.
- My thoughts about food are _____when I am in this state.
- When I am with food in this way I believe I am_____
- What do I notice in my environment? _____
- Am I alone in this moment? With others?_____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

53

Helping Our Clients To Use Neuroception

■ *Behavior Follows State!*

- So far, I am discovering, that when I feel ventral, or balanced my emotions are (happy, sad, angry, scared)_____when I am in this state.
- My relationship with food becomes _____when I am in this state
- I believe food is _____when I am in this state.
- My body responds to food by _____when I am in this state.
- My thoughts about food are _____when I am in this state.
- When I am with food in this way I believe I am_____
- What do I notice in my environment? _____
- Am I alone in this moment? With others?_____

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

54

Helping Our Clients to Use Neuroception

Behavior Follows State!

- In what state is it most difficult for me to stay consistent with feeding myself?
- What do I notice happens in my body and in my mind during these times?
- What sensations do I notice? Describe them. I.e.: Is my stomach tight? Butterflies? Heart racing? Disconnected and detached?
- Before I eat I notice the following internal sensations, emotions and thoughts:
- How may I bring safety to this moment?
- When I am eating I notice the following internal sensations, emotions and thoughts:
- How may I bring safety to this moment?
- When I am done eating I notice the following internal sensations, emotions and thoughts:
- How may I bring safety to this moment? Is there something I can change in my environment?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

55

The Intersection of Culture & Disembodiment

– *Embodiment or Disembodiment?*

“To be a consciousness or rather *to be an experience* is to hold inner communication with the world, the body and other people, to be with them instead of being beside them” (Merleau-Ponty, 1962)

At the heart of embodied experience is interconnectedness rather than separation



Dualism

 The word "Dualism" is written in a large, black, cursive script on a light-colored, textured background that resembles paper. A black pen is shown at the bottom right, as if it has just finished writing the word.

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

56

Disembodiment- The “Invitation Out”

- What Does This leave Us With?
 - A view that the body has little to nothing to offer in the way of self-understanding and awareness
 - A view that it can/should be easily discarded and disregarded
 - A belief that we *cannot know our own body*
 - *A wide opening for systems that target and oppress bodies to easily come in and take over*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

57

Diet Culture- A System of Oppression

- Worships thinness with sizeism at its roots as it equates size to health and moral virtue.
- Promotes weight loss as a means of attaining higher status and value.
- Demonizes certain ways of eating and foods while elevating others, which further encourages disembodiment by moving people away from their inner knowing toward an external means for internal knowledge.
- Oppresses people who don't fit the ideal of body size and “health.”
- It disproportionately harms women, femmes, trans folks, people in larger bodies, people of color, and people with disabilities, damaging both their mental and physical health.
- -Christy Harrison- Anti-diet Dietitian

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

58

Diet Culture- A System of Oppression

- “The Body Shame Profit Complex”- Sonya Renee Taylor
 - A system that profits off of your body shame and hatred and has a 96% failure rate!
 - A system that manipulates through predatory marketing practices
 - A system that exists because of disembodiment and loss of internal power and trust
 - A system that can be challenged and broken down if we learn to embody. Why? Because embodiment is also **empowerment!**
 - A system that can no longer exist once we trust our own body and it's internal messages

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

59

Systems That Dysregulate

- Internal Dis-Ordering is Inextricably Bound in the Dis-Ordering of Socio-Cultural Systems and Messages
 - *Our clients WILL feel dysregulated when out in the world if they are in a body that is marginalized in any way*
 - *They WILL feel dysregulated if they are in a larger body in our medical system*
 - *They Will feel dysregulated as they attempt to make peace with their body and food and are around others*
 - *They WILL feel dysregulated in our office IF we don't bring up the hard stuff!*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

60

Image, the Nervous System, & What We See

- In states of hyper or hypoarousal, image WILL be distorted AND there WILL be a hyperfocus on image.
 - Body Image is comprised of a mix between cognition, affect, perception, and behavior.
 - We must add in **sensory experience!**
 - **The Insula** is the “hub” of sensory processing in the feedback loop of the **Limbic system** and **Autonomic Nervous system**
 - **The Parietal Cortex** is involved in sensory integration, body awareness and visual information
- When there is dysregulation, there will be body image disturbance

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

61

Image, the Nervous System, & What We See

- Practice: In This Moment, With These Feelings
 - *Feelings first over image! Before fixating on the surface body, “what may I be feeling in this very moment?”*
 - *This is a moment of dysregulation- bring in the posture of safety & protection*
 - *It’s not my fault!- we all struggle with body image concerns! This is common humanity*
 - *My moment of joy- keep the focus here*
 - *Staying present- body image moments are moments of distraction. Mindfully come back*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

62

“Your body was never the problem. Our culture’s lack of relationship with bodies IS!”

No One Is Born Hating Their Body!



We were all born as sensing, feeling beings
and have just lost this internal messaging

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

63

Knowing- The Way You Were Born

- **Neural representations of the body in 60-day-old human infants** (Meltzoff, Saby & Marshall, 2018)
 - *Touch is the first sensory system to develop in the baby’s brain prenatally. Interoceptive awareness is present before we come into this world!*
 - *Infant mental health: <https://infantcrier.mi-aimh.org/interoception-and-infant-mental-health-an-exquisite-fit/>*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

64

Trusting What Was and What Can Grow

- *May I remember and remind myself of the way I was born,*
 - *As a knowing, sensing, feeling, observing being*
- *May I understand that this became lost along the way due to many causes and conditions*
- *May I remind myself that I am capable of re-learning and growing this awareness once again*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

65

Embodying Self-Compassion



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

66

Self-Compassion As A “Life-Giving” Skill

- “Cue-Reactive” or “Concerned Eaters”
 - *Past behavior*
 - *Fear*
 - *Guilt*
 - *Anxiety*
 - *Associations*
 - *Dieting*
 - *Beliefs*
 - *Shame*
- Self-Compassion Mediates and is a skill of emotion regulation

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

67

Where We Start

- Self-compassion begins with the understanding of what is around us and within us!
- For self-compassion to be received as a regulation skill we must start with integrating and modeling common humanity and psychoeducation first
 - “We all have a brain!” and nervous system!
 - We are all living in a disembodied culture
- Some of us are exposed to more systemic dysregulators than others

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

68

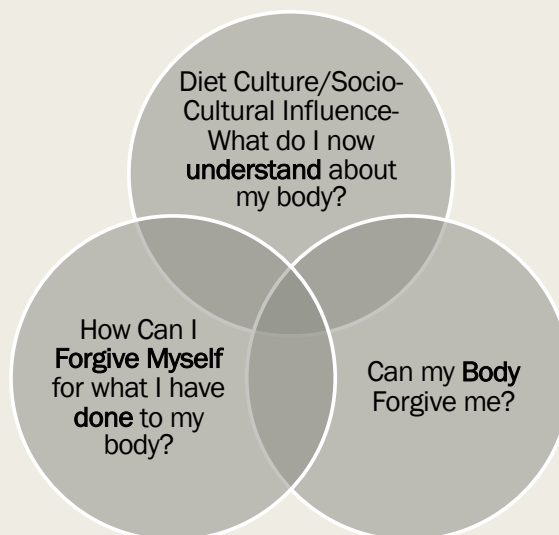
Self-Compassion Meets Dysregulated Moments

- Practice:
 - *Embodying Self-Compassionate Phrases*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

69

Body Forgiveness©- A Model of Body Neutrality & Relationship



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

70

Body Forgiveness

- A) **What do I now understand?**
- What my body has been subjected to- Socio-Cultural/familial influences that impact disordered eating/eating disorder development and body image disturbance.
- B) **What have I done to my body? What role have I played?**
- The recognition that they have done harm in some way to their body
- C) **What does my body now need from me?-**
- How can a new communication and relationship now develop?

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

71

Forgiveness *IS* Self-Compassionate

- "It wasn't all my fault!"
- There were multiple reasons I "left" my body
- There are multiple reasons that make it so hard to come back
- There were so many things I didn't understand
- There are so many things I now understand!
- There are so many things I have left to know and discover!
- I now understand "I need to be on my body's side"
- "I didn't mean to hurt myself!"
- I now understand why I focus externally rather than internally!

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

72

Relationship = Neutrality & Positivity

- Moving from an **OBJECTIVE** to **SUBJECTIVE** experience
- It is through the development of a new, internal relationship with one's body that we develop a new relationship with body image!
 - My body is more than just an image
 - My focus is now on listening in rather than focusing out!
- When I listen in is when I can remain more regulated and neutral and eventually positive toward what I see!
 - I will no longer harm myself to achieve an outward image
 - I will no longer harm myself to comply with the standards of diet culture
 - I forgive myself for harming my body in attempts to fit in to these standards

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

73

Disordered Eating or an Eating Disorder?

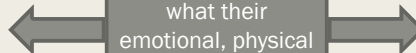
Requires further
assessment for
an eating
disorder

Behaviors such
as bingeing,
restriction any
purging,
including
chronic over
exercise,
happening
once a week or
more

Client reports eating and body image
concerns and/or we suspect this



Inquire about their
relationship with
food; frequency of
behaviors AND
what their
emotional, physical
and mental
response is



Inquire what
they are
noticing
happening
within their
body- physical
changes from
the INSIDE!
Please do not
rely on
surface body
changes!

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

74

Disordered Eating or an Eating Disorder?

Assess for the following:

- *Body image disturbance*
- *Restriction of food intake*
- *Fear of weight gain*
- *Lack of concern regarding medical conditions/reports*
- *Compensatory behaviors such as excessive exercise, laxatives, diuretics, Vomiting, diet pills*
- *Eating rapidly and beyond fullness and excessive large amounts*
- *Co-occurring high levels of anxiety, depression, obsessive and ruminating thoughts*

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

75

Disordered Eating or an Eating Disorder?

■ Our Own Bias

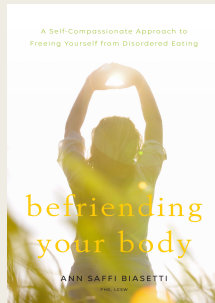
■ The biggest obstacle to proper diagnosis and assessment!

Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022

76

Staying In Touch With Me

- www.befriendingyourbodyprogram.com
- www.anembodiedlife.com
- info@anembodiedlife.com
- Instagram- anembodiedlife- Dr. Ann Saffi Biasetti
- Facebook- An Embodied Life with Dr. Ann Saffi Biasetti



Ann Saffi Biasetti PhD; LCSWR; CEDS (c) 2022