Somatic Experiencing

How Trauma Can Be Overcome
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Daniel – Seeing Life in Two Dimensions

Meet Daniel, a man in his 60’s, who is suffering from symptoms of anxiety, hyper-vigilance, difficulty trusting others, and frequent depression. These symptoms have hurt the quality of his life, especially his primary relationship, where Daniel provokes too many arguments.

Like many others, Daniel’s had a long history of traumatic events since childhood.

Several weeks into therapy, he reveals that he does not have depth perception—Daniel sees things only in two dimensions—but loves 3-D photography where he can actually see things with depth, looking at the pictures and seeing the 3-D patterns emerging. It’s a strange presentation; clearly Daniel has the capacity for depth perception, so something other than an organic cause is interfering with this aspect of his vision.

As therapy continues, one of the early traumas is worked through: witnessing the suicide of his father when he was four years old. The cause of death had never been discussed with him and his mother was not able to protect him or provide nurturing and comfort. But as Daniel re-processes his experience of his father’s suicide, he suddenly realizes that his depth perception has
Trauma Happens. Then Symptoms Happen. All Kinds of Symptoms.

We have only gradually come to appreciate that people in a wide variety of circumstances can suffer the symptoms of Post-Traumatic Stress Disorder (PTSD). We all know that traumatic events like war, severe accidents, or rape can lead to PTSD, though we may not know why. But, in fact, anything that is experienced as threatening our survival or wellbeing can generate PTSD-like symptoms and have a negative impact on our day-to-day interactions and activities. And we may not recognize what we are experiencing as symptoms of PTSD.

Daniel was traumatized early in life and symptoms showed up in obviously psychological forms, like depression and anxiety, but also in the form of life-long visual disturbance.

Similarly, sexual difficulties may emerge as the result of trauma, especially if someone has experienced a sexual form of what we call inescapable attack, such as molestation, rape, or incest. But, these difficulties can emerge from even less obviously traumatic events, such as repeated negative childhood events in the family, at school, or with friends. Sometimes, it is about feeling different from others, such as when a kid grows up to be bisexual, gay, or transgender and suffers from the lack of support for the emergence of that identity.

If so many kinds of things can lead to so many kinds of symptoms, what really defines trauma?

A simple working definition is: anything that is too much, too soon, or too fast for our nervous system to handle, especially if we can’t reach a successful resolution. Note that when we talk of trauma, or sexual trauma, it does not imply that the trauma leads to complete breakdown in adulthood; it may simply be a decreased ability to feel satisfaction or emotional or physical pleasure.

But, how is it that different people can go through similar events with different outcomes? And more importantly, what can we do to heal the consequences of these traumatic experiences? Must we simply accept what happened and learn to live with our symptoms?

Until recently, the state-of-the-art treatments for trauma were exposure therapy and various forms of desensitization, which can themselves be difficult to undergo, even overwhelming. Might there be a way to resolve these disabling symptoms without having to undergo a treatment as uncomfortable as the symptoms that lead us to seek help in the first place?

Somatic Experiencing

What really needs to happen is not to just face the pain with gritted teeth. Rather, after being overwhelmed by something that has thrown us off kilter—whether a moment ago or decades ago—our nervous system needs to be “re-set.” Daniel got help from a therapy called Somatic
Experiencing (SE), which is a holistic approach to establishing this natural flow between mind and body.

Developed by Peter A. Levine, PhD, SE draws from many different disciplines to address the physiology of stress and trauma. Dr. Levine was curious about the fact that animals in the wild aren’t traumatized by their life-and-death existence, while people can be traumatized by events that seem inconsequential to many of us.

What he realized was that animals will complete the full sequence of a response to danger, by noticing, reacting, and recovering from the threat. Humans often interrupt it. When in jeopardy, animals will access and expend enormous amounts of energy providing the” fuel” to escape the danger. Dr. Levine observed that, once the threat has been successfully overcome, there is a discharge of excess energy through the body. The body returns to baseline by allowing a chemical discharge to move through the nervous system—for example by trembling, shaking, bucking, or running further than necessary simply to escape the predator—which re-sets the mind and body and prepares it for the next challenge.

Re-establishing the Rhythm of the Nervous System

Applying this insight to humans, as Dr. Levine describes in his books Waking the Tiger and In an Unspoken Voice, SE focuses on the physiological responses that occur when someone experiences or remembers an overwhelming or traumatic event, in his or her body, rather than only through the thoughts or emotions connected to it.

The reason to do this is to restore the nervous system’s normal cycling between alertness and rest.

- The excitation is when we’re stimulated in some way, whether to feel pleasure or to respond to danger.
- The settling is to allow for the relatively quiet states necessary for digestion, rest, and recharging. This settling also permits us to prepare for the next time we need to react, with yet a new demand for energy.
- This cycle continues smoothly, up and down, when we’re functioning well.

When any part of this normal cycle is interrupted, the charge of energy gets ‘stuck’ in our bodies. We can then fail to fluctuate easily between states of different intensity. And the charge stuck in our systems will likely be triggered when in the future we encounter events, people, or things that remind us of the earlier experience that was never completed.

Thus, our present lives are colored by our past, often in a negative way, and when the past intrudes, we can’t fully be present in the present.

Trauma and Sexuality

What could more illustrate the normal cycling of excitation and settling than healthy sexual expression? Sex, when it works as it should, is fully experienced! Sex is enjoyed not only in the
mind but also in the body, where sensations live. But the avoidance of sex, the fear of arousal, and the lack of libido are often closely linked to trauma.

Kaitlyn – Sexual but Not Intimate

Survivors of trauma may fear being touched. They can feel out of control in sexual situations, which might unleash fearful sensations. Expressing feelings, restoring normal escape responses, building the ability to trust, and capturing a sense of personal awareness can restore both body, and boundary, understanding. We begin to identify sensations and notice what is actually pleasurable. We find a sense of support for our choices both from within and from the environment. We feel more comfortable in our own skin.

After a long history of incest by her father (including physical and emotional abuse) from age 6 to 11, a young woman named Kaitlyn is anxious to deal with past demons by working to incorporate the ability to experience sexuality fully and in a way that’s not bound by prior negative responses.

To survive as a child, Kaitlyn dissociated from the horrific events, distancing herself from the trauma to which she was subjected. She has a long history of being able to act out sexually, but she had no access to full participation, cognitively or physically.

With gentle and gradual assistance from her therapist, Kaitlyn begins to re-awaken her body to ‘feel’ more fully. Slowly and in a measured way, she embarks on the journey to invite parts of her body into full awareness and the possibility for true pleasure.

SE treatment allows Kaitlyn to incorporate each new physical experience fully, before adding on the next layer of information. It is like playing with “Lego blocks” to create new structures, possibilities that are not laced with negative images but have new and clean associations. Next, she is respectfully invited to decide when she is ready to proceed, awaiting a level of comfort with each exercise before moving on. By incorporating each aspect of awareness, Kaitlyn develops a new way to understand touch and to approach her sexuality more fully. This discovery is empowering in and of itself.

Kaitlyn discovers a new capacity to experience and express intimacy.

Fight, Flight or Freeze?

In any situation, sexual or not, where there is or there might be a threat to our well-being, it’s important to understand that we have no choice but to respond, and we have only three fundamental possible responses: flight, fight, or freeze.

These self-protective responses come pretty quickly and automatically from very deep and primal parts of the brain. Nothing else matters but survival. The first impulse is usually flight, to try to get away. If that’s not possible (or we’ve learned from the past that it won’t work), then we go to fight. Finally—and only if neither of these will work—our systems go to freeze. When we freeze, our nervous system is doing two things: it is “playing dead” in the hope that the
danger will pass without paying more attention to us, and it is shutting down to some degree so that if the danger doesn’t pass, we won’t feel the pain or suffering that’s coming.

This happens automatically.

**Getting Rid of What Is Stuck**

From an SE perspective, we understand that these symptoms merely indicate unresolved activation or energy “stuck” in the body. We want those symptoms to resolve. By noticing what happens and allowing those natural self-protective impulses to be felt, sometimes with awareness of the micro-movements that allow the body to sense more fully the capacity to protect itself, we experience the actual reality that the danger is over and we can finally settle, bringing the entire cycle to completion.

Let’s return now to Daniel, the man who had lost depth perception since his early youth. At the tender age of four, this man experienced a massive trauma—his father’s suicide. As a result of the trauma Daniel’s nervous system froze, and his eyesight was psychologically altered, with an accompanying change in his depth perception. Daniel wasn’t offered the information, protection, and nurturing that could have helped him integrate what had happened, and yet he couldn’t flee his family situation, either. As a result, this man had lost his depth perception for nearly 61 years, and he recovered it by re-experiencing the early trauma in a way that allowed him to see it, feel it, and survive it.

By the end of Daniel’s three-year therapy, he no longer had any of his original symptoms. His relationships improved significantly and the quality of his life had increased remarkably. While the therapy focused on a small sample of the traumatic events this man had suffered, the healing of several events generalized to all the others.

As the therapy came to an end, Daniel reviewed the original list of traumas and there was no charge left in any of them, regardless of whether the therapy had specifically addressed them.

Little by little, we come to know what is safe and what is not safe, and we are able to stay present and in our bodies. We have a curiosity to explore sensations without avoidance or judgment. We become more resilient and we begin to trust that we can navigate our way through what is uncomfortable. Healing takes place, symptoms disappear, and we are free to be in our present day-to-day lives without interference from the past.

Somatic Experiencing helps us to learn to pay attention to what is happening inside and to make sure that there each bit reaches completion—like doing our laundry as we go—and the dirty laundry no longer piles up!

**For More Information**

We hope that this brief description of Somatic Experiencing has sparked your interest in learning more about how SE can help you or someone you love to move past the debilitating but understandable symptoms of living with trauma.
As Dr. Levine has written, “Trauma is a fact of life. It does not, however, have to be a life sentence.” For more information, visit www.traumahealing.org (link is external), where you will also find a description of the SE training and a listing of Somatic Experiencing Practitioners worldwide.

A recently published article by Payne, Levine and Crane (“Somatic experiencing: Using interoception and proprioception as core elements of trauma therapy,” available online at http://journal.frontiersin.org/Journal/10.3389/fpsyg.2015.00093/full (link is external)) describes from a scientific point of view the components of SE and how it is believed to work.

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Note: In the cases presented, names and identifying information have been altered to protect privacy.