

How To Overcome Trauma - Justin Sunseri

Trauma – Justin Sunseri is a licensed marriage & family therapist as well as the host of the Polyvagal podcast.

In the interview about Trauma, we discuss

- how to recognize Trauma,
- How to acknowledge Trauma,
- how to deal with Trauma, and
- How to overcome Trauma

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Transcript:

Bill 0:00

Sometime down the road, they realized they'd physically recovered. But there's some ongoing trauma from that experience. And I'm unsure if I've grasped what happens with Trauma when you experience many traumatic events. But too many traumatic events over a lifetime compound and become big. Or what happens when you are traumatized many times and then deal with the Trauma of an injury from a stroke, for example? And it seems like a more overwhelming space for people to overcome Trauma if they haven't dealt with their traumas for a lifetime.

Intro 0:45

This is recovery after a stroke with Bill Gasiamis. Helping you go from where you are to where you'd rather be

Bill 0:52

Bill Gasiamis here; this is Episode 63 of the Recovery after Stroke podcast. And today, I'm speaking with Justin Sunseri, from the Polyvagal podcast, about Trauma, how to recognize it, acknowledge it, deal with it, and move on from it. Justin, welcome to the podcast.

Justin Sunseri 1:16

I am super happy to be here. Thank you so much.

Bill 1:18

And I'm pleased to have you, man, when I came across your poly bagel podcast, and we'll get into that in a little bit. I got excited. Because you're a therapist, a family therapist, and a marriage therapist, tell me a little bit about your work.

Justin Sunseri 1:34

And the titles are a little bit misleading. It's a family-licensed Marriage Family Therapist, though I can work with almost anybody. So I I've done currently, I'm a therapist in a school district. So, I work primarily with high schoolers. I've also worked with little kids, done family therapy and parenting groups, and I've been in those for the past 11 years. I've worked in substance abuse. So, the amount of leeway I have with the degree and the licenses is vast. So, just the marriage and family therapy doesn't quite capture everything we can do.

Bill 2:08

Yeah, great.

Justin Sunseri 2:09

But I'm working in a school district doing therapy with high schoolers.

Bill 2:14

When I heard some of your episodes, it seemed that the theme for many podcast episodes is about Trauma. And you start every episode of your podcast talking about the possibility that this episode you're about to do will trigger people. Why is it important to have that conversation at the beginning of your attack? And? And does that we'll say that that was important to hear at the beginning of the episode this

Justin Sunseri 2:44

The simple is that there are, I guess, a couple of different layers here. The simple answer is that I don't want to trigger my audience. I mean, I know it's bound to happen. I know that as we talk about Trauma and keep the podcast very safe, we don't talk about details. It's not necessary. I know that people who have survived the Trauma going to go there anyway. So I don't need to explicitly, really, you know, say those details out loud. So, it will be very general. But you know, I wanted the best I could to educate safely.

Because I want people to benefit from and grow from it, the easy, straightforward answer is that I want this to be a safe experience.

Bill 3:22

Yeah.

Justin Sunseri 3:23

A more complex answer would be that if we can, I don't know if we've gotten this far yet. But, if we can approach these things Little by little, in short segments, it will increase our ability to handle them in greater doses so that when they do have a flashback when they are talking about these things in therapy, they are coming at it from hopefully, it's something called the vagal break. Hopefully, their vagal break is a little bit strong. We haven't gotten that far. But yeah, but basically, they'll be able to handle it. The next time, we talked about it a little bit easier.

That's kind of the idea is this help someone just by having new information. And I'm hoping by having further information and an excellent solid explanation for why they went into a shutdown state or why they're stuck in a fight mode or accessible flight mode, having a new resolution that in and of itself can be very relieving. So, the next time these things come up, it might be more accessible. So that's a couple of minutes, an easy answer, but also a bit more in-depth as I don't want to help people build their ability to tolerate these things.

Bill 4:32

That's beautiful because that's a lovely way to start a podcast, by the way. I say there's a great way to start a podcast because you're doing precisely that: allowing people to learn something new and understand the application of what they learned. And then when it's time for them, and they're feeling brave enough, start applying it to their own experience of Trauma, and then have baby chunks of achievements, things that get through that allows them to get eventually to that higher level challenge that's causing them the drama in their life.

Justin Sunseri 5:07

Yep, learning these things just by themselves can be so illuminating. And so normalizing and reducing fear, and blah, me and self-judgment. And that alone is a huge relief. Because it's like you've lived through the Trauma, it still lives within you. People are having nightmares about it; they're having flashbacks during the day. So that's already there. They have all this, like self-judgment, blame, and shame. And you know, I should have done this, I should have done that. If we can at least bring a new level of education and alleviate those thoughts, it was my fault. Suppose we can at least lessen that. Just by learning information that can be very healing, I get messages from people saying like this: Just hearing this was a big deal for me.

Bill 6:01

It's a big deal because they are starting to learn what they didn't know they needed to know. And having that awareness is just a brilliant thing. Imagine the first time you go through life, the majority of your life experiencing something, and then you learn something you didn't know you needed to know to help heal. And that is often I see with the people I coach and the people I speak to about stroke; I see that that first thing starts to expand and become this thing. And the Curiosity takes over. And it's like if that was good for me, and I realized that now, what's the next thing I need to find?

Jun 6:39

That's exactly what's exactly it is. You tell someone who's survived a trauma and is not kind of, you know, really stuck in a very raw place, we'll just do some meditation for them. It's like Nana, we're not, we're not quite there yet. My level of safety and ability to tolerate what's happening inside me is not even close to being able to close my eyes and sit still. But I'll have a new piece of information in doses at a time. I'll do that. And is that precisely it is so I can tolerate that? And I'm a little bit curious about the next episode. I've noticed something that I have seen with my podcast looking at my stats because I'm kind of stats obsessed with from the first episode where there's a drop-off from the first episode to the second episode, there's a drop-off. And maybe it's because the podcast or one only gets worse. It's good. I've heard from people. I've heard people saying, I've listened to the first three times, and I'm not ready to get to the next one. That's, that's fine. There's plenty of time, and it will be there forever.

But I've heard that from people telling me I'm not quite ready to get to the next one. And I see that there is a drop-off in the stats, and then once people get the episode two, it stays, you know, look at the stats remain pretty much flat as far as p, opping off as far as listenership. But, uh, yeah, if we can get some curiosity going. I think it's like a snowball effect. And that, you know, eventually, they may be open to therapy, meditation, yoga, or whatever that looks like regarding their healing process.

Bill 8:12

Yeah.

Intro 8:13

If you've had a stroke, and during recovery, you'll know what a scary and confusing time it can be. You're likely to have a lot of questions going through your mind. Like, how long will it take to recover? Will I recover? What things should I avoid? In case I make matters worse, doctors will explain things. But because you've never had a stroke, you probably don't know what questions to ask. If this is you, you may miss out on doing things that could help speed up your recovery. If you find yourself in that situation, stop worrying and head to recovery after stroke calm, where you can download a guide that will help you. It's called seven questions to ask your doctor about your stroke. These seven questions are the ones Bill wished he'd asked when he was recovering from a stroke. They'll not only help you better understand your condition, they'll help you take a more

active role in your recovery. Head to the website now, recoveryafterstroke.com, and download the guide. It's free.

Bill 9:25

Can you give me some explanation about what Trauma is? It doesn't have to be a dictionary definition. But what do you feel Trauma is?

Justin Sunseri 9:36

We have to train Trauma. We have to go deeper. But the basic idea is that there are a couple of detrainment paths, too. We. One of them is a chronic disruption of connectedness; I forgot different it was probably Dr. Porges's chronic disruption of connectedness, which means that your connection with a safe adult, especially pretty much in childhood, was chronically disrupted through abuse or abandonment or neglect, but that you were not able to have a secure relationship with a safe adult.

So that was a chronic issue that leaves you in this state of flight, potentially from abuse, usually from emotional abuse, or in a fight state or a wholly shut down, alone withdrawn form. It is no fault of the victim. They didn't have a safe caregiver to build a healthy attachment with, so that's one path to trauma. The other path to Trauma that I would label was surviving at least one acute intensive episode where you were sympathetically charged like you wanted to run away; you tried to fight but couldn't. And that might be because somebody immobilizes you, is something I was traumacouldn'tther human being, like a tiger attacks you don't I guess you could be traumatized yeah, you'd be traumatized. Yeah, that's right.

But, um, but I always think about from human to human, though. But, um, the shame is that there was that because my point is that when you survive a car crash, there's no shame. I think you can be traumatized, but guilt is always connected to human beings. But yeah, so the second path of Trauma, I would say, is that you've survived a thing like you want it to mobilize and get out of the situation, but you were stopped from doing so. And so your body went into this frozen state where you're highly charged like your motors running but can't escape.

So you kind of like shutting, like, it's like you're simultaneously hitting the brake and the gas in a car. And it can; the day-to-day experience might be something

like panic, where if someone's had a panic attack, you're highly charged up, the thoughts are running wild, heartbeats going, but then they freeze up. And I think it's like a day-to-day flow of freeze experience. So I think it's two paths to Trauma: a chronic disruption of connecting this or surviving at least one of these highly intensive episodes where you cannot escape even though your body is ready to run or find somebody off.

Bill 12:20

On your website, there's a statement that says that Trauma has been a constant underlying factor with nearly everyone I've worked with since 2008. And therefore, those people who are traumatized, are they having trouble in life generally speaking, and are struggling to have strategies to get through life because this underlying Trauma is rearing its ugly head?

Justin Sunseri 12:44

Yes.

The only thing I would do is the caveat here: when we say they're having trouble with strategies, they're not even in a place to strategize. So when you're traumatized, one thing that gets compromised is your ability to think and make a plan; you're always kind of in this flight, fight, or shutdown state. And biologically speaking, when we go into those states, we compromise our ability to think clearly and to be able to problem solve and to be able to cooperate with other people to, you know what I mean, like, those skills as cognitive, higher functioning kind of skill to get lost or compromised.

So it's not just a matter; I can't strategize or cope. It's like my body's not in a place to learn a new coping skill or to apply it effectively. I'm always in this defensive state where my body thinks I need to run away, fight, hide, or be invisible. So it's, yeah. Because I've worked with the adults I've worked with. The parents I've worked with carry stuff from their childhood, and the adults I've worked with in parenting groups. The way they parent and the things they're doing that they want to change, like yelling or being abusive, are directly connected to it. It is always connected to the way that they were their parents raised them.

And I don't know if they've. I don't see how they realized how traumatizing those things were. And I think we, as adults, laugh those things off like, yeah, I put my

mom or my dad hit me or whatever. But that sticks with us; it affects how we parent; it leaves us in a state of being more aggressive or anxious like it affects us. Yeah, absolutely. Day to day, the kids I've worked with use drugs. They're attempting to be in some traumatized state day in and day out. And they're trying to get relief from that, to regulate their defensive state, even though they're incapable of it, just by thinking their way through it.

But maybe a drug could help them out and help alleviate what they're going through. So yeah, it's underlying, the kids I work with that. Don't go to school or have lost motivation. It's not just because there's always something underneath that. Absolutely.

Bill 15:15

So they're trying to change their state because the condition they're experiencing regularly is unproductive; it doesn't help them; it makes them feel unwell. It makes them act out; it makes them not be able to connect to people. I imagined that it makes their life seriously difficult as far as being able to move through life and attend and turn up to the things that people need to consider themselves to have a successful life regularly. It's not based around stuff or cars or anything like that. But just generally being able to function, yeah

Justin Sunseri 15:48

basic functioning, when you don't have a safe attachment to a parent, or you feel like that a parent, even though they might be in your life, but they emotionally are not connected to you, that's going to affect your daily life that I mean, to not to be so alone. Not having the basics of a safe connection with an adult for a kid is crippling? Like, what? Why would I go to school? What does this even matter? And I don't think they're cognitively like picking out, like, that doesn't matter anymore. I'm not going to go. But nothing else matters if you don't have the basic building blocks of life, just a primary, safe, healthy attachment. It just doesn't matter.

Bill 16:26

Yeah.

Justin Sunseri 16:27

So their motivation level is not just about it's like they're in this shutdown state where they've lost their motivation; it is just gone. Seeking the importance of

their future value of school, or the value of challenging themselves to do better, like all this stuff is gone, it doesn't matter anymore. They don't have that fundamental piece that we build on, that we have, like, we have to start with the safe, adult, a parent, and then build on that from there. We don't have that like it throws everything else off.

Bill 16:58

Yeah,

Justin Sunseri 16:59

That's like that's the template for friendships. That's the template for relationships. And if your parents have abused or abandoned you, that's your template, sadly, not that it's. I don't think it's, I guess, untreated or ignored or stuffed down, and it can be chronic. And I don't want to say permanent. I wouldn't say I like that. But you have to be established. But it doesn't have to be permanent. I don't think, and I've seen. I've seen the people I've worked with get a lot of relief, have healthy relationships and friendships, and do better in school. So it's not, it's not a life sentence. I don't think.

Bill 17:35

Yeah, I think that's all. This is

Justin Sunseri 17:36

just happening.

Bill 17:37

I think some old parents can be unlearned, and new parents can be learned. And it's a process. I imagine that people can go through several years of understanding what they need to know so that they can leave, deal with Trauma, leave it in the past where it belongs, and then move on—but coming up with regards to going through Trauma in the past? How is it that people deal with it? Is it that they lived it in the past? Or is it that I've dealt with it somehow, like what happens when people can move forward from the Trauma?

Justin Sunseri 18:10

Well, it's, I don't want to. I don't want to pick your language here. But the way we work things is exciting to play; there's nothing wrong with what you're saying

Bill 18:20

please, please

Justin Sunseri 18:20

at all because that is not for real. That's like the common language we use, like, let it Leave it, leave it behind. But for someone traumatized, it's they don't choose to. First off, of course, they don't decide to carry this stuff with them. But it's not that they're the issue is that their body is stuck in a defensive state. So that the thing they survived is fresh within them, it's still alive with them, and they're going away, they quickly go back to that scary place, or that time or that memory or wherever it was, even when they dream like when they're asleep, they can't escape it.

So it's not a matter of just unlearning something or leaving something behind. It's not a choice exactly; it's not a choice. If it were, they would choose to stop, you know, living through the right thing. Yeah, of course. So, it's not a matter of learning something new or letting something go.

It's a matter of going from the defensive state you're stuck in and moving up into a, and I say up, because of how we're built. Just the biology that the circuitry for being shut down is down in your gut, the circuitry for mobilizing in your chest. And it's circuitry for being safe and social and having healthy relationships, and the connection is a face-to-heart area.

Bill 19:41

Okay.

Justin Sunseri 19:41

So that's why I say up. Yeah. So when you're stuck in a traumatic state where that means you're in flight or fight, which is like you're stuck, your heartbeat is always going. If you're if you're stuck in a shutdown state, you're going to like your speech, you're stuck. You know what I mean? You're going to feel depressed, you're going to feel numb, you're going to handle this like a pit in your stomach. So, the issue is not leaving things behind. It's, it's allowing; Peter Levine is perfect for allowing that stuck trauma energy to work its way through your body. And it's much more difficult. I know, I'm just saying that.

Bill 20:21

Yeah, that's okay

Justin Sunseri 20:21

but it's so it's letting that energy come through. And that might be through therapy, yoga, meditation, or whatever. But working your way up back into your safe and social system. And that's the alleviation of traumas is to let the energy go, let the stuck energy work its way through your system. And then, to be able to return to a safe and social state, people who are traumatized have a hard time working hard, and I hate to say they have a hard time with it because it's like they're choosing it. But being able to tolerate things like eye contact is a terrifying experience. Being able to maintain eye contact is essential for social engagement.

But you know, so if they have, trusting someone can be difficult. People in a defensive state will interpret the world as scary; they will solve the world as being aggressive or something to run away from. So that it's not because they're defective, it's because they're stuck. They're stuck in a defensive state. So it's not like they're doing something wrong. It's just that their body is stuck in a defensive state.

Bill 21:28

When you say the body is stuck in a defensive state, is that stuckness occurring in the autonomic nervous system?

Justin Sunseri 21:35

Yeah. Yeah, exactly. So it's not a, I'm glad you said it. Because it's not a choice. The autonomic nervous system happens without our conscious awareness; it just happens. So, being in a defensive state, like a fight, flight, or shutdown, being in one of these states is not a choice. It's autonomic, which means you survived something or stayed, like an abusive home; the way you survived was by being in more of a flight mode or being in flight mode or being shut down. So you're stuck; your autonomic nervous system was either conditioned to stay there, or you had to drop there and stay there to survive and get your needs met. Or you survive some acute incident. And I hate to call it an incident, but

Bill 22:20

experiences

Justin Sunseri 22:23

Yeah, there you go. Thank you. It's better. Yeah. But it's an autonomic thing. You

don't choose to go into flight, fight, or shut down. You do, and you do it in that sequence, which I think is essential. Ideally, we're in a safe and social state like you and I can make eye contact; even though it's computer-like, we're a good place, right? But? If we were in a situation where we were being attacked, we would drop down into flight mode, we would get sympathetically aroused, or our heartbeat would increase, adrenaline would start going, we'd go into flight mode, we want to run away, but we can't run away.

If we get cornered, then we drop down into fight mode. And we become aggressive, we would use our arms, fists, we, you know, we fight. But if that didn't work, or if we were held down or pinned down, or if we perceived that we were overpowered and had no chance, we would just be shut down. But if we're held down while we're sympathetically active, that's called freeze. We have this sympathetic energy plus and are immobilized. That's called freeze. But it's autonomic.

We don't choose these things, we don't choose to run away, we do all of us, that's the sequence of events we do. And that looks a little bit different for each person. Because one person may be able to tolerate more sympathetic arousal, one person may drop down into shutdown than someone else based on their history, history up, rump, ng cultures, and all kinds of stuff. But it's the thit'ssequence of events that, through flight, fight, then shut down.

Bill 23:53

Okay

Justin Sunseri 23:54

And it's not. It is autonomic; we get stuck there.

Bill 23:57

Can I ask the people listening who might be curious about what the autonomic nervous system is actually? As I understand, the autonomic nervous system is part of the nervous system that operates our eyes, moves our heart, and uses our lungs; it won't need to go to the toilet, etc. So it's those things that we don't have to think about doing that just n because the autonomic nervous system manages those processes.

Justin Sunseri 24:29

And breathing, breathing, too, I mean, all those things that we don't have to think

about, it just happens, and all those things change. When we have to defend ourselves, our breathing changes and becomes more fast-paced. Or we become stiffer as our muscles tense up; all these things happen without conscious awareness.

Bill 24:50

Yeah. So, we've spoken several times about the somatic nervous system. And we haven't talked about the parasympathetic jumpy system. Is the sympathetic part of the autonomic nervous system?

Justin Sunseri 25:03

The sympathetic is when the motor gets going; it's when your heart starts pounding. And your flight. I'm so sorry you ran or fought first. And if you can't run, it fights; that's called the sympatric system, where your motor is. You're going, and you have to be more mobile. That's the Olympic nervous system or sympathetic autonomic nervous system,

The parasympathetic autonomic nervous system is when is, it's a couple of things. So ideally, it's when you're resting, and you're relaxed. And you're you can meditate if you want to, tally the more we see that, but it's also this very, very old, evolutionary old year we shut down completely. An; that's fantastic for animals in the wild that are playing dead. Because a predator stands a better chance of living, if predators ignore a corpse, and predators will, they might likely miss predators and prefer a fresh kill. So they, the; ifll keep running after the herd while you lay down, and quote, unquote, play dead.

.Or if you have a predator, you kill or kill. But if a predator tackles you, and you go limp, and that predator brings you back to his cave, there mikill or kille where you can escape. So, if you stay in the shutdown state, there is nothing to choose from. But suppose the body stays in a shutdown state. In that case, it's not like it's still present enough to look for that.

There is unity to choose from. At the same time, the predator cashed down the cave to feed its cubs, wherever another person may come along and challenge it for victory for the prey, soothe the y. And while it's being challenged to pretty much spring up, like out of the shutdown state, and use its sympathetic arousal to run away. So that's why compassion is fight and flight. Parasynthetic is the shutdown defensive state. But parasympathetic is just the social engagement

system.

Bifight-flight.

Awesome. I contacted you for this episode because, in the stroke community, people experience a stroke and then go through a healing of the brain, attempt to heal the body, get back to walking, etc. And often, some time down the road, they realize they'd made a physical recovery. But there's some ongoing trauma from that experience. I'm unsure if I've learned what happens with Trauma when you experience many traumatic events. But are many traumatic events over a lifetime a big one, or what happens when you are traumatized many times? Then you're dealing with the Trauma of an injury, y from stroke, for example? And it seems like it's a traumatized helming space for people to deal with Trauma. Suppose they hadn't sold with the traumas over a lifetime. Do you know what I'm saying?

Justin Sunseri 28:03

Yeah, yeah, I don't know if I have an excellent answer for you. But I do think it compounds. Based on my experience working with the people I've worked with, I'm trying to guess, like, yeah, there, I think there. There can be levels of Trauma, and that could be, you know, it's not uncommon for me to work with someone who has experienced, like, abuse in the home, for a parent, but then also experienced the death of the one person that they could trust like a grandparent usually. And so there are levels of, we can deal with the sudden death of, or even not, not just premature, but we can deal with the Trauma, really there an area of losing the one person in your life you're connected to. But that doesn't address the Trauma of a lifetime of abuse, abandonment, or whatever it is. So, I think there can be levels of trauma that compound each other. It's not a super in-depth answer. But I, you think I believe that I don't know; I don't quite have that all mapped out.

Bill 29:06

Yeah.

Justin Sunseri

I would say, Yeah, I think I have a much more in-depth answer for you about that one. But you know, if someone has some sort of Trauma they've experienced, and they're re-deported with a new experience that might be challenging, their body may be primed to go back to a particular state that they were in, like, their body is kind of stuck in a flight by sort of state, when they confront particular a challenging

they're going to go they're going to drop down into that flight fight state, probably a lot faster than someone who has not survived. Any Trauma. Yeah,

Bill 9:48

That makes sense. Yeah, that' so

Justin Sunseri 29:50

okay.

Bill 29:51

When we're dealing with being stuck in a sympathetically charged situation in the body? How do we begin to become unstuck from that sympathetic space? The



Justin Sunseri 0:11

I wish I had a straightforward answer; I have an easy answer. But it's not easy to do. And the easy answer is that the energy has to be used. But the problem is that you don't just move around; it goes away. Meaning I think the movement can be significant. You know, I like someone more like a fight mode. I guess Box Ng is fantastic for them. But, my dress boxing, where you're just hitting stuff, is not going to be helpful,

Bill 30:42

right.

Justin Sunseri 30:43

But the issue is attaching mindfulness to your bodily experiences and sensations. And the challenge there is that if you survive Trauma, and you're stuck in some defensive state, being aware of that and bringing mindfulness to your body sensations is a terrifying experience; we're very comfortable sitting up here, in our thoughts, even if the ideas are uncomfortable and full of blame, shame, and

whatnot, we can do that. But when we're asked to look down and to notice, not only to see but to hold on to and experience what is happening inside of us, it's a terrifying experience. And that's, I think, a big reason why people stay stuck in Trauma is because it's frightening to look inward and notice what's there.

So, the key is to bring mindfulness to what's happening inside you. And then what you're doing, I mean, in my opinion, can be darn near anything. And I think it's possible to. I know it is, and Peter Levine says in his books that it's possible to release little bits of the little doses of this traumatic energy at a time. And he said that was what I was reading in a book called *In An Unspoken Voice*, and he said that the key may not necessarily be to release it all at once. But it may be too little at a time to release this traumatic energy through safe experiences while being mindful.



So you can do that. I think if you're boxing or doing, you know, meditation, as long as you can bring, it doesn't have to be though it can be really like anything I with the kids I work with, or the teenagers I work with. We use fig in session; there are toys, just toys. But there's one in particular that's it's just like a rubbery oval thing. And it has these likes, rubber spiky things all around it. So it's like this tactile sensation kind of thing. But it's pretty much unbreakable. And when kids are in a state of being more like fight mode, I'll give that to them. And I'll say here, play with this.

And it's interesting to see how each kid plays because it's always different. But I like to pull on it if I'm a little bit more sympathetically charged. I want to play on it and release my chest muscles, our muscles, like, try and break it. And doing that doesn't do a whole lot. But when you bring mindfulness to it, you notice how it feels in my fingers. How does it feel in my bicep? How does it feel in my chest? And to see and experience it and allow the body to go through what it's going

through. If you do, in little bits, that can be a safe way to kind of relearn about your body sensations, your own body, to bring mindfulness to it, to learn about yourself, and to get yourself a lot of, I think love and respect and to treat yourself like a friend in a way.

And listen to what's happening inside of you rather than covering it up and Ignoring it, stuffing it down.

Bill 33:44

Yeah.

Justin Sunseri 33:45

So, I think that's the key to bringing mindfulness to these experiences. And it can be literally like, just what does it feel like to breathe deeply? What does it feel like to live? And to extend the exhale? In a very slow, you know, way? It's noticed, like, how does that feel? And into it like, that don't like to experience it and let your body share without judgment. So, being mindful of what your body is going through without judgment is a big part.

Bill 34:20

Yeah, and it sounds like without judgment, without putting a meaning to it. So if you're in a safe space, and you're experiencing, you've allowed yourself to share this Trauma and become aware of how your body's responding and reacting. Still, you're in a safe space and can not put a label on it at that moment. Then, it'll be an excellent place to observe what just happened so that you know what's occurring. Is that you, right?

Justin Sunseri 34:45

I think so. The, you know, judgments are, are an obstacle to healing. It's a, I wouldn't say, I like saying recovery to becoming unstuck. It's an obstacle to because you're not broken or not. There's nothing to heal. It's an issue of becoming unstuck. So yeah, the judgments, the self-blame, and all the shame are obstacles to becoming unstuck. And I know it's not as easy as just turning it off like it's not a light switch. But the most that you can come from a place of genuine Curiosity. Like, I want to know how I'm feeling and I really want to experience what's happening inside of me versus what's wrong with me. And why am I feeling like this?

Okay, now, I'll try meditation, like, Well, hold up. It's like, it has to come from a

place of like, genuinely, genuinely being curious just like a friend was like a close, trusted friend. They wanted to talk to you if they were having some issues. You wouldn't come at that with why you feel like this? And what's wrong with you? And why didn't you react this way? Should you have done this, or should you approach them with, I care about you. And I'm seriously genuinely concerned about you. And I want to be here for you. So it's the same thing as bringing that level of love and Curiosity to yourself and what you're going through in your bodily experiences and sensations and whatnot.

Bill 35:57

Yeah, I can relate to that. I remember, in my early 20s, I did a fair amount of therapy with a psychologist, and I had some challenges that were just told to things that weren't so serious but enough that they were interfering with my being fully active in my lifestyle, you know, in my life. It was, and the challenges I experienced interfered with my work and the people around me. And I was looking back now in a fight or flight state, but not one that anyone would notice and say, Well, this guy's been traumatized.

So I didn't know what it was. And specific people around me didn't know what it was. They just thought I was an angry kid, you know, an angry guy. Yeah. And I remember going to therapy and bitching and moaning for the majority of it at the beginning. But then La er saying, Why does my body feel this way? Or Why do I act this way? Or Why do I react this way? And then, once I understood why I was doing it, I would ask my therapist why a person would say something like that. Not that he had the answer. But she was able to explain that we're all different. And we all have; we all come from other spaces. And she made it so that it wasn't a personal response to me; she made it so that person wasn't personally attacking me; they were expressing something. And maybe they didn't have the skills to express it appropriately. And I didn't need to get upset by it.

Justin Sunseri 37:29

Yeah,

Bill 37:29

and I should have taken it personally; that helped me immensely. It made me more curious about why people behave in specific ways and eventually end up not contacting somebody like you to ask questions like this, so

Justin Sunseri 37:43

Let me try and understand. So you were in more of a flight-fight state? And someone would say something to you. And you would interpret it in more of a negative way. Right? Not that you chose to know the chose to

Bill 37:53

no,

Justin Sunseri 37:53

but it just, it just happened. But, and that's, I think, I'm glad you brought that up. Because when we drop down to these defensive states, it changes how we perceive the world.

Bill 38:01

Yeah.

Justin Sunseri 38:02

And if we're in a fight state, we interpret our world as more aggressive for fight mode. And we are like, you know, think about the person that gets wrong, I don't know, hamburger, McDonald's, they flip out. This person is not in their safe and social state; they're in some fight mode for whatever reason. And they experienced that as a personal insult. You have insulted me by, like, what's wrong with you? You're an idiot, like they, you know, call names and whatnot. And they yell and they, whatever, make a mess, maybe. But this is not someone who can rationalize and think clearly and say, Oh, you're having a bad day, or like, it's not a big deal, whatever, as I can, I can wait two more minutes for a new hamburger. So they're not in that place to be able to use those rationalizations. They're in a place where they're they experience the world as threatening, or they experience the world as a danger. And that's where they're coming from, and they behaviourally react that way; it was as well. The other thing that I love is that what you said is, yeah, that's fair.

Bill 38:59

Enough, almost identical. So, no matter who I interacted with, they were the problem. And I had real issues interacting with people. After many sessions, months, and even years, it got to the point where I was rational enough, and I could understand enough for my therapist to say, Is there a chance that all the things you've experienced were because of you? And not because everybody else

was mad, or crazy, or rude or something? So, the result was

Justin Sunseri 39:27

It's not, And she's not wrong, but then you have to ask nicely, okay, but why? Why Am I a man? I don't.

Bill 39:33

That's it.

Justin 39:34

I think it's okay to ask why. It's OK to invite all, if it is me, why? Where does it go? Where does it stop having come from? It's not a lie you're choosing to, you know, why am I in this sort of defensive state? And that'll probably connect with something from your past.

Bill 39:45

Yeah.

Justin Sunseri 39:46

But the other thing that you said that I thought was essential was that nobody would be able to tell. Right? It. When we talk about these defensive states, we talk about them as if they're this one-dimensional, very cartoony version, like someone who's ready to fight and box, but that's not necessarily reality. The reality is that people exist, I mean less, in some gradient. So, you may be safer and more social one day, but 40% of you might be in this flight mode. And you might feel that as like a little bit of anxiety.

And that's kind of what anxiety is: your body wants to run away. And that can intensify and whatnot. Or if you like sitting I get, I get bored out of my mind and meetings. And I like playing with a ball. So, my body is mobilized, and I'm not in a safe and social state. But I'm also not like running out of the room. So there's like a, a percentage or a ratio, or, you know, I mean, nobody would know.

But I know that I want to get out of here. I want to get out of here. I was born on my Yeah. But I'm also not in a place to socially engage and whatnot. So I'm just fidgeting, like when you pitch it was stuff, you're more mobilized, which means you're a little bit down the polyvagal ladder, we call it, you're a little bit down into your defensive state of wanting to run away. But you're not running away; you're not in that cartoony version where you're getting up and running away.



Bill 41:08

Yeah, I understand. What you said about movement reminded me of something I've seen previously in animals in the wild, with an animal being chased down by a lion. The Gazelle, for example, being chased down by the lion, gets away from the lion. And from time to time, you see, in the documentaries, you know, that I watch on T.V. about animals, that Gazelle will do these intense shakes at the end of the chase. So is that the type of movement that creates that release from this Trauma that it may have experienced, and is the movement that you're talking about helping to mimic this type of release, or are you aware of that?

Justin Sunseri 41:56

The way is how it's supposed to happen, and we are animals; they were men, just like the Gazelle. The way it's supposed to happen is that if we're in a situation where we have to run away, we are sympathetically active; the point of the sympathetic activation is to release the activation and a burst of running. And then when we get to safety, we, you know, our we come back to baseline. So that's why it's sympathetic activation, being flight and fighting is not supposed to be chronic; it is supposed to be short term.

But what happens with people who are abused, or grow up in homes where they're, you know, used, that they become chronically in these states of flight and fight, and that's not what they're for. So it causes all these sorts of health issues down the line, or potentially could, as well as relationship issues. So these A.C. invitations are supposed to be short-term, even when you go into pull shut down and collapse. That's supposed to be short-term; when things are safe, you pop out of it. And that's where you see more of the shaking; there is a Polar Bear video online that Peter Levine has, where the polar bear is running away from a helicopter chasing it,

Bill 43:08

yes,

Justin Sunseri 43:09

That's what's happening.

Bill 43:09

Yeah, I have seen it

Justin Sunseri 43:10

and they tranquilize it while it's running away. So it's very simplistically active, running away, and can't run away. And so what you'll see us doing is, is using its teeth to signal like back off. So it's act ally. It's like, fight state while running away. So it's given the signals of like back out. But then, when it is sympathetically activated, it gets immobilized because it's shot with the tranquilizer. So as it goes under, into its shuts down, into its forced shut down state, it still has all that sympathetic arousal inside it.

So it's still prime to run or fight. But now it's shut down. So it's stuck in, in the video, as it comes out of the shutdown state as a tranquilizer wears off, and it comes out of the shutdown state, it starts to shake and tremble, and its breathing becomes spontaneous. And that's, it's, it's like it's releasing the sympathetic energy coming back, returning to a baseline. But animals do that, no problem, human beings, but they don't have like human beings don't. And when we get into a shutdown state, or if we get to, when we feel those feelings of wanting to shake things off, it's called crying. By the way, when we cry, we can breathe spontaneously from our gut; we spasm, and our muscles tighten.

We do all these things that are out of our control. But when we feel these cryin' and a need to cry, come on, which is the need to shake? In just straightforward terms. Yes. When we think that, we stop it and say, be substantial.

Bill 44:39

Wow.

Justin Sunseri 44:40

You know what I mean, especially, especially men, right? We say not; I won't even say that. Because the kids I work with, no matter what gender they are, I think it's more of a cultural thing that the belief to like and be strong. Get over it and

leave it in the past; we say these two things to ourselves. And so it eps the energy it kee, it doesn't allow us to shake off the power through crying,

Bill 44:57

wow.

Justin Sunseri 44:58

in a healthy way. That's really what I think crying is about. And when you call and successfully call, you feel better, you feel lighter, you feel like I've let something off my shoulders, like something has shifted, and you can connect with people and whatnot. Especially think about, like, there's particular crying that you do, like, when you're alone, that you're calling. But it doesn't seem to help. And I hear a lot from people: it doesn't help when I cry. But. It's like this sort of unsafe crying; it's crying full of judgment.

All these thoughts are going through your head about how weak you are and how you should get over things. And so it's not a safe crying experience. But when you go to a funeral, and people cry together, it's more of a secure experience. And it's more of a cathartic sort of like you're letting that grief and that sympathetic energy out from the person, you know, that passed away that brings all this stuff along with it. But that's a different type of crying. It's a safe cry, and you're with people. And so it does seem to help, at least briefly, in that moment. Right?

Bill 45:57

Yeah,

Justin Sunseri 45:57

It doesn't solve the problem of the proof. But it helps.

Bill 46:00

Yeah, it helps.

Justin Sunseri 46:01

That's the difference.

Bill 46:02

Yeah, it helps you at that moment. I recall experiencing the loss of loved ones and then crying several times in several situations after that person's past. Every time, the calling felt like it released something, and every time, it was okay

because it was about the passing of somebody. And I have experienced people who experienced a stroke will often wake up with unregulated emotions. And part of what seems to happen for people after a stroke is they cry a lot. And I was one of those people. And I did get a lot of uncomfortable responses from people around me at the time saying, You know, you shouldn't cry, you know, why are you crying, man, you know, everything's all right, you know, don't worry about it.

Justin Sunseri 46:48

So that's not; it's not a safe experience and crying for you. Or anyone, that situation may not be a secure experience if you're being judged for this natural process that your body needs to go through. That's not exactly helpful. But your boy knows what's up about your body and knows what it needs, but then it has other people judging it. And then if you take those beliefs on that, you know, I am weak or I shouldn't be doing this, I shouldn't get over it. All you're doing is solidifying the fact, all that, that energy within you that grief shut down sort of energy, you know

Bill 47:18

Yeah, I went into the training many years ago, about four or five years ago. The first time I read about and understood the work of Stephen Porges was through a friend of mine, Grant Soosalu, who wrote a book called Multiple Brain Integration Techniques with a gentleman named Marvin Oka. One of his training was learning to understand the intelligence of the head, the heart, and the gut, and how those things can be tapped into to understand emotions better, for lack of a better way or enough time to give you the complete detail.

So, in this experience, they spoke about the Polyvagal theory at the training. And then, one of the exercises that we did was the shaking exercise. He asked us to relive a traumatic experience that was as close to a two out of 10 on the scale of dramatic, right, so I went through this process where I just put myself as a child back into a space where I was getting attacked by my brother, just standard brotherly love kind of stuff.

And I remember reliving that experience, and then part of the exercise was, while you're reliving that experience, start shaking and do the shake from the bottom of the toes all the way up through the body out through the fingers, and, you know, up into the head, and continue to do that.

And I remember doing that, getting to a point where I was in tears, after having felt precisely what you just said, had a safe cry in a safe environment about this situation that I never thought would have been traumatic. But it seemed to do something more profound. And it seemed to release something far more significant than I ever could have in my head worked out. And that makes me feel like I have a better relationship with my brother.

Justin Sunseri 49:12

Sure. Yeah. You've released some stuck energy, which has changed your thoughts about your brother, right? Yeah. You're not carrying that around precisely anymore. But I think the key here is I think the shaking is helpful. But you're also in an environment where you're encouraged to be mindful and feel what you feel you're around other safe people. Like a whole package comes with that, it's not just that you're shaking.

Bill 49:34

Yeah,

Justin Sunseri 49:34

it's that you have permission to it's in that in the culture of that room itself. It's acceptable. It's encouraged. It's a good thing. So the whole package, I think, sounds like it was ideal. So, if people listen to this and go home and shake, I don't know how helpful that is.

Bill 49:49

Yeah,

Justin Sunseri 49:49

I know. It was like a shaking movement that I don't know much about.

Bill 49:52

Yeah.

Justin Sunseri 49:52

But I think the key is being mindful. And I don't believe you have to recall a specific traumatic event. And if you're ready for that, go ahead. But if you're just more curious about where you're at, I would start with just noticing what's happening and what you feel. And where are you feeling? And, just from a place of Curiosity, begin with a benign area, like how do your toes feel? Like, how do

your toes feel? And when you move your toes?

How does that feel? How does that affect your breathing? How does that affect your calves? How does it affect it? Just like J.T., Be genuinely curious and start from there. And then, if you feel something, be curious about that, notice it. I think that's it's a safe way. But if you're worried about telling people who've experienced Trauma and are stuck in some traumatic state, go home, shake, and think about it wrong. Yeah, I agree.

Bill 50:40

No, I agree. I wouldn't encourage it, either.

Justin Sunseri 50:42

Absolutely. It's a whole like; it's a package like you were in the right place with the right people in the right, like the whole package was there.

Bill 50:50

Yeah, that's important that you said that; I wouldn't have said that. But it's important that you said that to give people the context of how it happened when it happened, and why I got a result, and you're right. I don't stay at home on my own. Like, I've never done that before. But this was an exciting experience. It was brought forward to us; it was suggested to us as part of what we saw with the video of the polar bear and what we were learning about Stephen Porges's work.

So you're right; it was the complete education package, plus experience and support afterward. So that's exactly how I would prefer people to go about it. Absolutely. So now, as we come to the end of the podcast, I just wanted to get a little bit of an understanding of what your p

Polyvagal podcast is about. And I asked you that because I think the work of Stephen Porges is vital. It's tough to explain. And I think it's important that people experiencing Trauma in any aspect of their life, especially after a stroke, understand some of it and how they could apply some of the work of Stephen Porges. So I'm just curious about your podcast, what it's about, and the things you discuss.



Justin Sunseri 52:05

The podcast's first nine episodes are me talking about political theory. And in straightforward, safe terms, no details, trauma, stories, nothing like that. Understanding flight, fight, freeze, and shutdown concepts is significantly easy. Talk about home; talk about generational Trauma. There were some problematic things, but I handled them respectfully and safely. That's nine episodes worth of pure information; I share a lot of therapy examples or examples of the school system.

And then I brought on a co-host. And now she and I are hosting together. Her name is Mercedes Corona. She's a co-worker of mine; we're good friends. And so, from episodes 10 to 14, there is a lot of school-based Polyvagal theory. So, we apply the Polyvagal to the school system. And now we're doing this thing where we're using the Polyvagal approach to therapy and what therapy should be like. We're sharing harmful therapy examples we got from people on Instagram.

So we lay out the basics of the Polyvagal theory, and now we're more doing or how to apply it to everyday life. And because it's not just like a theory that sits in and of itself, it affects everything we do because it's the Connect; it's like the theory of how we connect as mammals and shift down to defensive states. So it's ever-present, like everything we do. So now we're just talking about how to apply that. I think therapy is a huge deal for people or our audience. Many therapists listen, and many people are going to therapy or maybe done with therapy because of bad experiences. So, the focus of the podcast is on how to explain Polyvagal theory in straightforward terms and then how to apply it to daily living as well.

Bill 53:54

Yeah, beautiful. Now, Polyvagal just before we wrap up Polyvagal is what?

Justin Sunseri 54:00

The vagus nerve is the nerve that connects the brain to the body. So, in my field, we talk a lot about the brain and body, but no one explains it very well, until my opinion, Dr. Porges. And so he can explain the connection between our bodies, thoughts, and experiences like this. He did a fantastic job. So, the vagus is the nerve that connects the brain to the body and through the autonomic nervous system. So Polyvagal means more than one. So there's the Vagal conduit, which connects to these different branches of the autonomic nervous system. So, just multiple uses for us. That's why it says Polyvagal.

Bill 54:44

Awesome. Justin, where can people learn more about your podcast and your work?

Justin Sunseri 54:49

The PO, the Polyvagal podcast, is available on all major listening platforms. JustinLMFT.com is my website where you can; I have a blog I always answer. I love and ring questions. Justin LMFT on Instagram is the best place to get new quotes and content like videos. We do live streams there every Sunday night before we record our episodes, which is a lot of fun. Mercedes and I do a live stream. So yeah, JustinLMFT.com or Justin LMFT on Instagram are probably the best ways.

Bill 55:23

Excellent. Justin, thank you so much for being on the Recovery After Stroke podcast, man. I appreciate it.

Justin Sunseri 55:27

You're very welcome. You're so welcome. Thank you for inviting me

Intro 55:30

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