



997: The Science of Safety: How to Rewire  
Your Nervous System For Resilience & Joy  
With Brittany Piper

Child: Welcome to my mommy's podcast!

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This podcast is brought to you by Hiya for children and especially I love to talk about their new greens line for children. Now, I have tasted these vitamins and they're delicious, and my kids are the ones who really love them though. And I love that they're getting the nutrients they need without the sugar because most children's vitamins are basically candy in disguise with up to two teaspoons of sugar and dyes and unhealthy chemicals or gummy additives that we don't want our kids to have.

So Hiya created a superpowered children's vitamin that's chewable, without the sugar or the nasty additives and it tastes great. My little ones love it. They especially are designed to fill the most common gaps in modern children's diets to provide full body nourishment with a taste kids love. And it was formulated with the help of pediatricians and nutritional experts and pressed with a blend of 12 organic fruits and vegetables, then supercharged with 15 essential vitamins and minerals, including vitamin D, B12, C, zinc and folate among others.

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testing methods so you can be completely at ease knowing it's safe and nutritious and it's designed for kids and sent straight to your door so you don't have to worry about ordering.

My kids really like these and I love that refills show up on schedule with no stress. Also, again, honorable mention to their new greens because if you are tired of battling your kids to eat more greens, their Daily Greens Plus Superfoods is a chocolate flavored greens powder designed specifically for kids and packed with 55+ whole food ingredients to support kids' brains, their development, their digestion, and kids actually like it. We've worked out a special deal with Hiya for the bestselling children's vitamin. Receive 50% off your first order. To claim this deal you must go to [hiyahealth.com/wellnessmama](https://hiyahealth.com/wellnessmama). This deal is not available on their regular website. To get your kids the full body nourishment they need.

Katie: Hello and welcome to the Wellness Mama Podcast. I am Katie from [wellnessmama.com](https://wellnessmama.com). And I loved this episode, which is all about the science of safety, how to rewire your nervous system for resilience and joy. And I think this is such an important topic and one that there's a lot of misconceptions around.

And I'm here today with Britt Piper, who is an amazing voice in this realm, and you'll understand why when you listen to her. She's a renowned speaker, author, and she's a somatic experiencing practitioner specializing in sexual violence prevention and trauma-informed care.

And as a survivor and leading advocate herself. She has helped thousands worldwide, including the US Army and the Department of Justice. Her upcoming book is called Body First Healing, which is a groundbreaking approach to nervous system regulation and recovery through harnessing the wisdom of the body. And in this episode, we go into things like somatic experiencing and what that even means.

Why humans have a biological imperative to be in connection with others and what happens when that isn't honored? Misconceptions about nervous system regulation that can be counterproductive. Steps you can take to support your body and your nervous system daily that don't have to be stressful.

How to know if your exhaustion is a shutdown response or a normal response to healing. Why things can sometimes feel worse before they feel better. And why we're never fully healed and why that's okay and so much more. So let's jump in. Britt welcome and thank you so much for being here.

Brittany: Thank you. I am excited to be here.

Katie: I am really excited for our topic today. And we're actually gonna get to have two conversations that I think are gonna be especially relevant and helpful to the audience, which is largely a lot of parents and moms. And in this first one I would love to really learn from you and go deep on the science of safety and how we can rewire our nervous system for resilience and joy.

I've talked before quite a bit about how one thing that was really impactful for me was even just learning to decipher things that I was doing that were either sending stress signals or safety signals to my nervous system. Which were, for me at least, beyond the things of just like emotional stress. But, like, if I was undereating or under nourishing my body, my body interpreted that as a stress signal.

Even if, like, I didn't feel stressed. Or if I was, like, exposed to things in my environment that my body wasn't handling well, that was a stress signal. Or if I wasn't getting enough sleep, that was something my body perceived as stress. So I know at least for me, like, there's a lot of, it's very multifaceted. All the things that come into our communication with our nervous system.

And I also have firsthand seen how drastically, like when we understand and address this piece, it can ripple out into literally every area of our life. So all that to say, I would love for you to give us some background on what exactly comes into play here when we're talking about the science of safety.

Brittany: Yeah, so the science of safety is something that we focus on a lot from a polyvagal lens. So, you might be familiar with polyvagal theory. Polyvagal theory is, like, the newest, or you could say the updated, science of the nervous system. And the polyvagal theory was developed by Dr. Stephen Porges and was presented in the early nineties. And so today what we're seeing is that there is a lot of therapists, practitioners, helping professions, that are using the framework of the polyvagal theory in order to support, you know, people through healing, through recovery, through regulation.

And so as a somatic experiencing practitioner myself, I also trained at the Polyvagal Institute. So a lot of the language from the polyvagal world comes into the work that I do. And the polyvagal theory is based on three principles. First of all, what Porges found is that the nervous system does have a hierarchy of responses when we get activated. Which we can see in the illustration of what we call the polyvagal ladder, the nervous system ladder. Maybe we'll talk about that later.

The second founding principle of the polyvagal theory is this concept of co-regulation. So, what he found is that us human animals, and I say human animals because we are, we are primal animals, but we have also this wonderful conscious brain as well, this human brain.

But we have the same nervous system, the same working nervous system that animals in the wild do. And what Porges discovered is that we have a biological imperative to be in connection, to be in community. Because it means that our chances for survival are higher when we're in tribe, when we're with others.

Not only is there this biological component where we can help each other to co-regulate, like when babies are born. When I, when my kiddos were born, right, the doctor said, put your kids on your chest. And that's gonna help them to co-regulate, to regulate their body temperature, their breathing, their heart rate. So co-regulation is there not just this, as this biological imprint, but it's also there because when we're in numbers, again, we have a higher chance of survival. So that's founding principle number two.

And then the third principle, which is kinda what you're speaking to, is this concept called neuroception. So neuroception is the science of safety. And what Steven discovered is that we have, kind of like, I often refer to it as our security system. So, our brain and our nervous system and our body is always detecting for threat or safety without our conscious mind's awareness. So think of it as your internal surveillance system that is scanning for, am I safe? Am I not safe? Am I safe? Am I not safe?

What feels unsafe is a neuroceptive cue of threat or danger, otherwise known as a trigger, in our, you know, just our simple terms. And what feels safe is a neuroceptive cue of safety, what we call in the polyvagal world, a glimmer. But this scanning happens in three places. It happens inside, outside, between. So this surveilling happens internally within our body. So, do I feel safe in my body? That might feel like, oh, my breathing is regulated, my body temperature feels regulated, there's no pain. I have, you know, there's no digestive issues today.

What might not feel safe is my heart is pounding right now, or my circulation is off, or my stomach is in knots. My viscera isn't right. And so then that sets off this alarm, which then creates a whole cascade of things that happen. So inside am I safe? Outside in my environment, am I safe? So is there a car coming as I'm crossing the road? Or is there a storm on the horizon? Or is it sunny? Is it peaceful? Do I feel safe? Do I have access to food and shelter and a roof over my head?

And then between. So the between neuro perceptive cues are you and other nervous systems. So your nervous system is always scanning other nervous systems. Again, subconsciously, for signs of either welcome, is safety, or signs of warning, which is threat. And this happens through, you know, facial expression through body posture, through the tone of someone's voice, through the gaze in their eyes. So we are always scanning for, again, am I safe or not safe? And when we don't feel safe, or what in the SE world we call

activated, or in the normal world we call triggered, then our nervous system goes into those predictable responses of fight, flight, shut down, freeze, fawn, functional freeze.

But what can happen when we get dysregulated, which means we're chronically stuck in that state of activation or what we call a stress response cycle, which is synonymous with our threat response cycle... you can kind of think of it like we have a security system or this internal surveillance system that's kind of flawed. It's constantly alarming for danger, even though the threat might no longer be there.

And then it creates these attentional networks where it's only scanning for danger. And it misses o... and it, not misses over, and it, you know, kind of scans over. It misses the cues of safety that are actually available to us to experience and to feel into, to start to turn down the alarm of the nervous system. So yeah, that's the very long-winded answer of the science of safety.

Katie: I love that. And I love the, like, triggers versus glimmers. I love that that terms emerged. I think even just, like, the focus on noticing those versus noticing the bad, like that alone seems like it over time helps us rewire to, like, find the positive more. And you explained this so well in relation to nervous system dysregulation. And I would love to get into the practicality of some of the things we can do to signal safety and also how to kind of be aware of doing this maybe in a non bypassing type way, if that is a concern at all.

Only in that I feel like there's maybe a misconception that's grown that a regulated nervous system means we're always calm and zen. And I at least have heard a couple times from kind of experts that actually if you are in fight or flight and you're feeling dysregulated to just like override that and naturally be calm immediately is actually kind of like a bypassing, like it's a dysregulation, not a regulation.

If you're forcing something that's actually not in alignment with your nervous system. So I don't know if that's an actual concern. But I would love to talk about, like, how do we, in an aligned way that's actually in tune with our nervous system, start to send these safety signals and how do we know if it's working?

Brittany: Yeah. Yeah. So, you know, it's interesting because I experienced somatic healing in my own personal recovery, oh goodness, 12 years ago. And at the time when I experienced it, I had been in and out of conventional talk therapy for most of my life. And then somatic healing, I kind of fell into it and I was like, oh my gosh, this is so impactful. Why is no one talking about this? And how transformative it can be and how much healing can actually take place on a nervous system level.

And so I desperately started, you know, screaming it from the rooftops and I got professionally trained in it. And I think a lot of people who are in this space, we've been

waiting for this moment where these more bottom up modalities are becoming more mainstream. And a lot of the convers I've... conversations I've been having lately is that us humans are very extreme beings. So we go from one edge of, one edge of the aisle to the other. And now it's so exciting that everyone's talking about the nervous system and how... nervous system work, how impactful it can be.

However, there's a lot of, as you said, misconceptions. And a lot of, I don't wanna say misinformation, but misinformed guidance that people are giving. So, from the polyvagal perspective, regulation, and from an SE perspective, and I'll explain SE a little bit too, regulation does not mean being calm, cool, and collected all the time.

And I'll give you the analogy of that polyvagal or the nervous system ladder. So at the top of the nervous system ladder is our rest and digest state, what's known as our ventral vagal state. As we get activated, the first predictable response that the nervous system has, we come down that ladder to the middle section, which is our sympathetic state of fight or flight.

Here we are mobilized. We go into a mobilizing stress response where we have adrenaline and cortisol to mobilize the body to fight or flee. If we cannot fight or flee or we override the emotional charge of fight or flee, which is usually anger or fear, which we're really good at as humans, right? We suppress anger, we suppress our fear, or we try to calm down.

I'm using air quotes here. If we suppress the emotional charge and don't allow the body to metabolize it, then we come down into what is known as our dorsal state at the bottom of the ladder. Which is kind of like a free state, but we call it our shutdown state. It's our state of immobilization. So most people would assume that having a regulated nervous system means being at the top of that nervous system ladder every day, but that's actually not, that's not true.

A regulated nervous system is what we call a resilient or a flexible nervous system. One that moves up and down that ladder all day without getting stuck. And from a physiological perspective a healthy bio rhythm or a resilient system moves up and down that ladder roughly 100 times a day. Which means are in and out of moments of activation, of stress, of frustration, of anxiety. And so there is this misconception that healing our nervous system means that we need to be calm, or that regulation means being calm or never being triggered or never being activated.

Regulation is more so about being in our body. Being with the experience and not getting stuck in it. And if we are overriding or not allowing the body to express or feel what's coming up, then that actually keeps us stuck in what we call a functional freeze state. And we have

a number of what we call hybrid or mixed states in the nervous system where it's one of one state and a little bit of another.

And functional freeze is where a lot of us live in this modern world. Where we're a little bit in a freeze shutdown response. We're going through the motions without emotion, right? We're overriding. But we're also in a bit of a flight response. So we're functioning, we're going through the motions. But over time, if the adrenaline and cortisol is not being, you know, metabolized, felt, expressed, because we go straight to our glimmer or our safety or what feels good to calm down, then we stay stuck in that stress response cycle.

And the adrenaline and cortisol stays trapped within the body and the system. And over time, that creates chronic stress, chronic inflammation, chronic disease, chronic illness. Most of the clients that I work with, on the outside they would say, well, I'm good with my emotions because, you know, they don't take over my life.

However, I'm dealing with all these physical symptoms. So there's a lot of digestive issues, maybe fatigue, migraines, TMJ, fibromyalgia, autoimmune. This is a lot of the physical or the somaticized symptoms that we see in our practices because of emotional suppression. Because of this armoring up and muscling through and trying to stay positive.

So I have a lot to say about that. But yeah, it is a really big misconception. And I don't know where we got to the place where we came to believe that having emotions means that there's something wrong with us, right? Or that we're failing. It's normal to be emotional when something upsets us and when we're not upset, that's actually not normal. So, and what we find is that the quicker that we allow the body to be with activation, to be with a trigger, the body knows exactly how to metabolize that and how to move through it, and how to discharge if we just allow it to.

Katie: Yeah I'm so glad you brought that up. I think that this actually is tremendously important and impactful for people. And it definitely is an area that I did not understand for a long time. And I'm still on a journey of understanding. But for a lot of years, sort of did all of the physical things. And I've talked about this before, but like, I had the checklist of supplements and I was doing everything quote unquote, like, perfectly and by the book.

And I still had all these physical symptoms. And I thought I had no emotions at all. And it turns out it wasn't until I started to let the emotions be felt that any shifts even in my physical health started happening. And I know I've talked before about, like, the body keeps the score and how we're starting to understand more and more, and you've talked about in this episode, like, the somatic connection.



But I feel like some people still maybe don't fully understand how much these emotions very much can physically show up in our body. Even if we feel like we're not even having emotions. Probably especially if we feel like we're not having emotions.

And I feel like this is actually very timely for me. Because currently the universe has created a perfect scenario where I get to face every old pattern that I'm aware of at least. So I would love to get into the practicality of this a little bit because I would guess most people listening have at least some small example of this they can think of somewhere in their life.

And often when there's these uncomfortable emotions, we don't really wanna feel them, we don't really wanna face them. So it can be easier, especially if we have that pattern, to suppress them. But as you said, then they tend to show up in our bodies if we don't listen. So how do we begin to listen to them?

Brittany: So this is a great question and a big question. I think this might be a good area where I can introduce somatic experiencing. So somatic experiencing is another modality that I'm trained in. And this is where a lot of the practical, you know, polyvagal has given me such a good educational framework of the work that I do. Somatic experiencing is now the, okay, now how do we apply this in practice in an everyday life? So somatic experiencing.

Soma means of the body. And somatic experiencing is a naturalistic approach to trauma recovery through the body. It's a body first approach. And in somatic experiencing... This was developed by Dr. Peter Levine back in the seventies, and Peter and Steven Porges are actually very close friends. So the modalities are very blended together.

But in somatic experiencing what we help our clients to do is to better be with the experience of the body, both the good and the bad. So both what feels good and what doesn't feel good. But what we work with is we work with body memory. So the book that you mentioned, the Body Keeps the Score. It talks a lot about, you know, Bessel Van Der Kolk, he's the author of that book. And Bessel says that trauma doesn't come back necessarily, always as a memory. It comes back as a reaction. Patterns.

And what he's talking about are the reactions of the nervous system. What we call procedural patterns. And procedural patterns are known as procedural memory. So it's the way that we subconsciously react to things without even consciously thinking about it. So for instance, when someone raises their voice or they're shouting at a sports game or you're in a loud environment and you start to notice that your heart is fluttering and that your stomach is in knots, and that you're looking for the door and you're salivating and you're sweating and you feel fidgety, that is traumatic memory. So that's body memory.

That's a procedural pattern of how your body is now in a stress response. Likely because of a traumatic or body memory from the past that didn't feel safe. And you might not

recognize consciously that your body is going back to this emotional age regression where you felt fear or terror when your parents screamed at night as they were fighting while you were in your bed.

And so what we work with in the SE space is we help our clients to notice patterns in their everyday life today. And we help them to create new patterns. Because what can happen is when, and kind of what Peter's work focuses on, is that trauma can be defined as any experience that overwhelms the nervous system's capacity to cope. And when that happens, the nervous system gets stuck in the survival responses that it enacted, or the survival state that it enacted in order to survive.

And so we can get stuck in a flight response. Which can feel like fear, anxiety, panic, worry. And over time, that starts to feel like a personality. But it's really just that our nervous system is stuck in this experience. So in the SE world what we do is we work with the body to notice patterns.

And that might show up... I'll give you an example of how that would show up in a, in one of our sessions. Is, I would ask my client, you know, what's something that's been a challenge for you lately? What's a pattern that's been showing up? What's something you wanna work on? And they're like, I'm finding I'm having a really hard time setting a boundary at work with this one coworker, right? And so I might say, okay, well, and even as you're talking about that now, what do you notice in your body? You know, as if you think about a recent time where you had a hard time setting that boundary, and they might be like, well, I'm noticing that there's tension and constriction in my chest. I'm noticing that it's hard to breathe.

And then as a practitioner, I'm noticing things I'm observing that there's now a downward gaze that the shoulders are curling in and there's a hiding posture. I might notice that they've crossed their arms and their legs, and so they're going into a shutdown response. Which is deactivating the healthy fight response that's needed to set a boundary. Healthy aggression.

And so this is likely a pattern that was learned early on which now shows up as people pleasing, fawning, placating, not setting boundaries, right? Being the peacekeeper, pacifying, all of these things that we do when we fawn. And so I might say, yeah, do you notice that in your posture? And they say, yes. And I would say, is that okay for that to be here?

And we'll give it a moment for the body to kind of hide. And then I'll say, is there any part of you that feels like it wants to lift up a little bit? Or what would it feel like? You know, can we start to imagine that you did start to, to set a boundary? What do you notice? And they're like, well, I'm noticing that my hands are sweating. I'm noticing that my heart is racing.

So they're now coming from this state of shutdown, which is like, hibernation state, to ,oh, I'm coming back up the ladder into fight. And even as I'm talking about that now, I feel perspiration in my armpits, but they're like, I'm starting to notice heat. And I would say, is that, does that feel tolerable for that to be here? And they're like, yeah, that's okay. So they feel the heat, they feel the racing heart, which again, is necessary. We're allowed to feel activation.

And then we allow it to be here for a moment and we see what the body does next. And it might be, wow, now their eyes are coming up and they're taking up a little bit more space in their posture. And now it's, wow, I just wanna open up my arms a little bit and kind of move around.

And now the body is naturally moving through that adrenaline and cortisol, through the body. And so in somatic experiencing what we do is we allow the body to have now the experience or the choice that it maybe couldn't have back then. Maybe back then we weren't allowed to set boundaries. Maybe back then we weren't allowed to run away.

And so, again, we work with the procedural patterns or the body memory. Kind of think of it like muscle memory. Your body subconsciously, emotionally through sensations, through our viscera, our joints, our posture. It is always telling us a story. Of our history and of our trauma. And so we work with the body to create new patterns, new experiences, touching into, oh, I can be with a moment of anger and healthy boundary setting.

We show that to the nervous system that I can do that. And then afterwards I would say, okay, let's do some resourcing. Let's look around the room. Notice our cues of safety. Right? What feels pleasant to notice right now? And, oh, I'm noticing the picture of my kid over in the corner. And I'm feeling, oh, I noticed there's a hand on your heart as you're saying that. Can you be with that for a sec?

And even as we're with that, then we start to get teary eyed. Oh, there's this feeling of I'm okay. And so, again, that's some of the way that we work with body memory to start to rewire the nervous system, to have new patterns. And of course I, you know, I can share how that shows up every day outside of a session. But giving an example of how that comes up in session really, I feel like gives some good context.

Katie: Yeah, that feels really helpful. And you touched on it a little bit. I would love it in a second for you to kind of go deeper on the nervous system ladder. That seems like a really helpful thing to understand. And as you were explaining that, I could think of anecdotal examples in my own life. Especially when I was initially in that phase of kind of addressing those emotions in the nervous system side.

Was I had times where, I think because I had been in sympathetic dominance for so long, when I started to enter parasympathetic, my body wanted to rest like all the time for months and months and months and months.

And as I started to, like, maybe get a little bit more in touch with the fight or flight that I had repressed for so long, I noticed that I would have times where I'd be like, I really need to go for a walk or I need to go like do some kind of like intense activity to like move through my body. And I'm curious if that's also kind of what you're talking about in ways that can express and show up.

But yeah, I would love to go deeper on that and also the nervous system ladder. Because that seems like a really valuable concept.

Brittany: Yeah, absolutely. Yeah. So, it's funny that you mentioned that, Katie. Because I, the Body First Healing Program is a program, it's a somatic healing program that in, it's a, that I've had since 2017. It's a group program and it blends the modalities of polyvagal theory, somatic experiencing, internal family systems, which is parts work, and attachment theory.

And we have group calls every week. And yesterday during our Q and A call, someone asked, how do I know if my exhaustion is me going into shut down and dorsal, or if this is just because my body has been in sympathetic for so, so long that I'm finally having, that I'm finally able, to rest for the first time.

So for people who are in sympathetic dominance for a long time, think of it like your foot is on the gas pedal. You are fueled and you are guided by this adrenaline, cortisol inducing lifestyle. And you might be like, well no, like I, you know, I could rest. And the question is, right, but when you're resting are you actually allowing the body to be at ease, relaxing, yielding in your muscles and allowing things to really let go?

So anyways, but what you find is that when you have your pedal to the metal all the time, there comes a time where as we start to finally let the foot off the brakes, we realize, oh, as I'm letting the foot off the brakes, I'm actually outta gas. And I need to, I think of dorsal in this response as being the refueling station.

So down in dorsal, a lot of people, there's this, I don't know where it came from, but there's this misconception that if I'm chronically in shut down, or if I'm chronically at the bottom of the nervous system ladder in dorsal, that means that I'm really, really bad. And this is where we often experience burnout, chronic fatigue, dissociation, disconnection, withdrawal, retreating. But this is the state, also, of conservation. This is the state of rest and repair.

So sometimes we need to be in dorsal in order for our system to kind of recover in order for us to refuel, refill, so that we can go back up the nervous system ladder. Now speaking to that, the nervous system ladder. It would be nice to be able to Spider-Man our way from the very bottom of the ladder to the top. But unfortunately we can't do that.

So when we're stuck in a state or we're in that state of shutdown, and dorsal at the bottom, in order to get back up to the top of the ladder of rest and digest or ventral vagal, that means that we have to go through fight or flight. In order to get there. And so this can be really confusing for people. Because when we're in this state of dorsal, we have much higher levels of numbing hormones in the body. Okay?

And that means that dissociation, like I said, is pretty common. So we can dissociate from our body, from our emotions, from others, from the world. We can kind of feel like a shell of ourselves. And so as we start to come up the nervous system ladder through fight or flight, to finally allow the adrenaline and cortisol that entered into the system when we came down in the first place, to finally allow that out.

I always say, think of it like a pressure cooker. This pressure cooker of chronic stress hormones or adrenaline and cortisol that's built up over time. Coming up the ladder means that we are opening the lid and releasing that stress so that we're not overflowing anymore, so that we're not exploding or imploding.

And so for a lot of people, when they come up out of shutdown and they start to feel, why am I feeling anxiety all of a sudden in my life? Why am I feeling angry all the time? Or frustrated? Why do I start to now feel the physical sensations of pain or fatigue or digestive issues? Or why do I have insomnia?

For a lot of people, it feels worse before it gets better, and you can kind of think of it as like you're coming up out of that dorsal, that shutdown, kind of that free state. Which means that you're thawing out and you're now reassociating with all of the sensations, the emotions, maybe the thoughts, the stories that have been disconnected from your experience. And so for some people they see it as regression.

But in the SE space, we definitely see that as progress. Your body is now coming online and it's allowing you to start to move through some of that discomfort. And what that means too is that people now have, as you're coming up the ladder, that means that your nervous system has a greater capacity now to be with both what feels not good and what feels good.

And so that's why the first kind of step in the SE space when we are working with a new client, for instance, is we do not jump straight into the deep end of trauma. And for a lot of people that can be confusing because in traditional therapy, we go in and we immediately

start talking about our trauma. But what we find is that that can reactivate the system and put you back into the same symptoms.

Instead in the SE world, in the SE world, in the somatic world, we work with this concept called titration. Which is a concept that Peter borrowed from chemistry, which means one little drop at a time, one small step at a time. So instead of throwing people into the deep end of trauma, we walk into the shallow end. We allow them to work with a little bit of activation. It's much more gentle.

Again, what was a moment recently where you felt upset? When I couldn't set the boundary with my boss. Like, we're not going to, Hey, what happened when you were seven years old and someone crossed your boundary? Instead, we're working with the present, the here and now, and recognizing we're still working with the reactions and the patterns of trauma without having to go to this treasure trove of painful experiences. Which for some people is really nice. Because that means I don't have to go back to the hurt in order to heal. And for some people, they don't remember their experiences, but the body still remembers and we can still work with those reactions.

So anyways, we take it into this titrated approach where we work with very gentle, slow moments of activation. And then we step back out and then we step back in and step back out. And so people are learning how to, like, tread water. Now they're learning how to float on their back. Now we take off the floaties. Now they're starting to go into the deeper end. And it doesn't feel overwhelming. It feels gentle. It feels tolerable.

And over time that's what builds nervous system resilience is actually touching into the discomfort in these small, tolerable ways rather than just throwing people right into it. So as you create a deeper capacity to be with activation, your system will start to process a lot more of the things that it felt like it couldn't process back then.

Katie: I love this. And we're gonna get to do a follow-up episode specific to moms. Because I feel like this is also especially relevant to parents, especially moms. Because it seems like when moms do this work that actually, like, ripples throughout the entire family. And we know that, like, especially when they're young, kids are very connected in a nervous system way to their moms.

So I'm very excited for that episode as well. But before we wrap up this one, like, I feel like this work is so valuable and important and I'll of course link to the resources you have and where people can work with you. But from an expectation perspective, how long would you say it typically takes for someone to start to see shifts within their nervous system and to rewire the nervous system?

And what are kind of the big factors in that process? Because I know from firsthand experience this can be overwhelming and also seems like it can be, it can take a little while.

Brittany: Yeah. Yeah, it's, it's certainly not a quick fix approach. And again, keeping with that whole concept of titration, these small baby steps that add up over time is really what you're looking for. Your nervous system, again think of a pressure cooker, when it's stuck in dysregulation, either because of chronic stress in your life or unresolved trauma, your pressure cooker is so full. You have enough stress on your plate already.

And so forcing healing can feel like another big change to your nervous system, which can feel threatening. We always say that same equals safe with the nervous system. It craves familiarity. It does not like change because it wants to be in positions and situations that are predictable, even if they're not, quote, safe for you. So, the healing takes time, but that is for a good reason. We always say that we wanna stretch your nervous system but not further stress it.

And for some of us, we have this urgency, which makes sense. This urgency to heal, which makes sense when we're living with chronic conditions, right? There's this desperation of, I just want the symptoms to end, or I just wanna get my life back, or there's this hopeless feeling. And that's kind of the first step is trusting that your nervous system in your body is not working against you, it's working for you. Even though it might not feel like that.

And that if we give it the space and not war against it, right? If we don't look at our body as something else, that is a threat, again, in this neuro perceptive cue and we recognize that there's nothing wrong with us. We are not broken. We do not need fixing, and that our body is having a very natural reaction to overwhelming experiences in our life. That would be the first step is trying, and again, I know it's a lot easier said than done, trying to change that perspective a little bit, is that your body is on board with you, not working against you.

But I will say, so for instance, in the Body First Healing Program, it's a six month program and we actually don't even get into trauma work or core wounds work until month three. So that maybe sets the expectation for people. The first three months we spend educating on the nervous system and your nervous system, which are two very different things. And building up your foundational tools of regulation. Your somatic tools, which are so different for each unique system. Understanding the concepts of trauma and the nervous system doing your own polyvagal ladders.

And so we do all of this foundational work so that when we get into the core wounds work and the trauma work in the second half of the program, it never feels overwhelming. And so for some people, you know, it's gonna depend on how long your system's been stuck in

chronic survival mode. It could take three months, six months to a year. For some people it takes longer.

But just having that expectation that you're looking for small, subtle, tiny changes over time, that's what's more sustainable. Peter often says that slower is actually faster when it comes to the nervous system. And, but also recognized too, that I think this is important to state, we will never be fully healed. I see this a lot in the SE space or people who are coming into the somatic world. There's this concept of like, how do I just release my trauma, right? I just wanna do trauma release. How do I get rid of it?

We can release the hormones and the survival energy that's been, again, built up over time. That chronic stress, we can release that. However, we can never forget our traumatic memories. The body will never forget and it will consistently remind us or trigger us when it feels like it's happening again. So it's less of getting rid of it or getting away from it and learning how to be with it. So yes, healing can take time but also it is a bit of a lifelong thing.

Katie: It seems like, yeah, a very important perspective and I will link to your website and your work and where people can work with you. And like I said, everybody stay tuned. We're gonna get to do a follow up episode specifically on somatic healing for Moms. But for this episode, Britt, thank you so much. This was really, really in depth and helpful and I'm sure everybody listening gained a lot from it. Thank you so much

Brittany: Of course. Thank you.

Katie: And thank you for listening, and I hope you will join me again on the next episode of the Wellness Mama Podcast.