

Week 145, Day 1

Working with Common Issues That Can Often Fuel Avoidance

One Approach for Working with Trauma-Based Avoidance

with Peter Levine, PhD, and Ruth Buczynski, PhD

Dr. Buczynski: *For clients who've experienced trauma, avoiding certain experiences has become a reliable way to protect themselves from painful sensations or memories.*

Problem is, this protective avoidance can often stall progress and prolong the healing process.

So how can we help traumatized clients feel safe enough to begin to confront situations that they think are potentially triggering?

Here, Dr. Peter Levine shares his approach for working with avoidance with clients who have experienced trauma.

Dr. Levine: When people have become traumatized they have essentially two or three choices. One is just to go into the black hole and the vortex of trauma. The other is to dissociate. The third one is to just narrow their life's experience so they don't do anything that evokes the sensations.

A very simple example: a person is driving in their car and they're stopped at a stop sign. All of a sudden somebody comes up and hits them from behind. They're feeling okay and they are feeling actually charged up and adrenalized, but then the next day they start feeling achy.

Then a few days or a week later they feel some anxiety. Then they really feel anxiety if they're driving a car towards that same street. Then what they do is they avoid that street and go around. That seems to work for a little bit, but then again just getting in their car causes the anxiety so they avoid driving the car. Generally, avoidance builds on avoidance and you start avoiding more and more things that are somehow coupled with each other.

The reason they do that is because it brings up certain sensations that are associated with the original trauma or traumas. When these sensations start to arise, people will do anything to

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get away from the sensations; again, that's what happens with different situations. They'll do anything to get away from the sensations because they associate the sensations with the original problem. The trick in working with clients is to be able to have them gradually touch into the sensations that are underlying all of these issues and situations and experiences, so that they can experience these sensations in a safe way. They get to become aware that these sensations arise. I call this titration, again, because touching them they arise then

settle. Each time they settle the person feels more settled, more in themselves, and less avoidant of these situations.

In other words, in many forms of therapy you talk about the issues and so forth, so it's a top-down process. In my approach, somatic experiencing, it's also very much a bottom-up process as well. On the bottom of all of this is, as I

mentioned, when we're able to work with the physiological sensations that go on in our bodies in a productive way we'll start to see shifts in all the other aspects. That doesn't mean you don't have to address them; because even as you work bottom-up you still may have to look at particular situations or issues that have been triggering in the past so that they say, "Oh, wait a minute, that really, doesn't trigger anymore these difficult sensations and feelings and emotions."

It's working both sensation levels but also working with the cognitive aspects of [inaudible 00:03:00]

Remember again that trauma is a fear of annihilation, breaking apart, and fragmenting. People will do almost anything and everything to stay away from those horrendous sensations that seem completely overwhelming. When we're able to touch into the sensations and work

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with them in different ways and the person becomes aware of, okay, well this just felt worse when I started to feel it, but [inaudible 00:03:36] years or decades.

It feels worse but then I actually notice there's a contraction, but then there's an expansion. Being able to follow this through takes the bite and venom out of the sensations and brings

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the sensations more into the here and now experience. You could say all of these symptoms and trauma in general is a disorder of not being able to be in the present moment; because as soon as we feel anything in the present, it links back to the trauma. Then we are experiencing a future no different than the past -- that is to say, a continuing trauma.

Again, when people come to touch into these sensations, for the first time their response is to recoil and go away. Because of their own comfort with their sensation, the therapist has to be able to guide the person to just maybe experience it for a moment;

then come back and look around the room or enter into the room until it's not terrifying and not unmanageable, but manageable, and finally befriending these very sensations because they are sensations. They are underneath the fear and the gripping and so forth. These are the feelings of goodness. Underneath all these difficult sensations are always the feeling of okayness, goodness, and inner settling.

When a client discovers that, as they move through these different sensations, they come to the wisdom of the body and the unspoken language of the body. It's really a source of a tremendous sense of connection to our sense of self but also to our gut instincts and our intuition. If we don't have contact with that, we overuse our head to try to outthink every situation. Again, that's why one of the beneficial side effects of working with trauma in this way is it connects people to their deeper selves, inner landscape, and capacity for intuition and feeling and connection to self and others.

Dr. Buczynski: *So a bottom-up approach can often help clients begin to explore the painful sensations or triggers they'd rather avoid.*

Now tomorrow, we'll look at the inextricable link between anxiety and avoidance. Lynn Lyons will discuss how to help clients take action even in the face of uncertainty.

But first I'd like to hear from you: how will you use the strategies you heard today in your practice? Please leave a comment below, and I'll see you tomorrow.