



Conscious Life presents

Overcoming Adverse Childhood Experiences

Guest: Donna Jackson Nakazawa

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[00:00:03] Meagen Gibson

Welcome to this interview, I'm Meagen Gibson, your conference co-host. Today, I'm speaking with Donna Jackson Nakazawa, an award-winning science journalist and speaker. Her newest book, *The Adverse Childhood Experiences Guided Journal*, offers targeted writing techniques to help readers recognize childhood trauma patterns, and reset their brains' internal stories for newfound resilience.

Donna's other books include *Girls on the Brink*, *The Angel and the Assassin*, and *Childhood Disrupted*. Donna is also the creator and founder of a popular narrative writing to heal program called Your Healing Narrative.

Here's the thing I want you to know about Donna, she's always following her curiosity and her unanswered questions from her last research project to get deeper into the solutions for healing and thriving. That's why I keep asking her back. I can barely keep up with the awesomeness of Donna Jackson Nakazawa's research and writing, yet I make time for it because she is so good at this. Donna, thank you so much for being with us today.

Donna Jackson Nakazawa

It's such a pleasure to be with you. You're my favorite interviewer, so let's roll.

Meagen Gibson

Thanks for starting off with a compliment for me, it's not about me.

Your newest book teaches people actual tools to help readers reprogram their brains out of trauma and anxiety, we're going to share some of those today. But first, I want to start with the research that the book is based on, which is ACEs or Adverse Childhood Experiences evaluation. So what is it? Where did it come from? And what did that original study leave out that has changed since the original research?

[00:01:44] Donna Jackson Nakazawa

The name of the book is *The Adverse Childhood Experiences Guided Journal*. And we worked all that in, which usually we try to avoid doing in book titles, because the term itself, Adverse Childhood Experiences, is a term that has been around, most people don't realize, since the 1990s. Research began on how adverse childhood experiences, and we'll get into what they mean, can shape the nervous system, the brain, and physical and mental health across a lifetime.

We wanted to honor this field of research in the title of the book. Adverse Childhood Experiences, which I think we can also call ACEs, for short, just so that we shorten that up for people. They're experiences in childhood that meet a couple of criteria.

They could fall into one of four categories. They could be household dysfunction, that's definitely the most pressing and usually has the biggest effect on the developing nervous system, the architecture of the brain, and how the immune system will function, and factor in mental health across the lifespan. Those are things like growing up with a parent who had an untreated mental health disorder, or growing up with parents who bickered and fought all the time, and/or divorced or separated. It's not just divorce, it's what was that emotional climate in the home around your parents' relationship?

Losing a parent, I lost a parent early in life, he died very suddenly, my father. That sudden traumatic loss, obviously. Growing up with parents who regularly put you down, or make fun of you, or joke at your expense, or humiliate you. These types of family dysfunction, researchers had never looked at whether or not they had a cost on human well-being until the mid-1990s.

Another one, and I certainly... I've interviewed thousands of people across my career, neuroscientists, individuals who are suffering from anxiety or trauma, psychologists, psychiatrists... My career has been to bring together how adversity and trauma affect us emotionally, what that means for our health, and more importantly, pathways to resilience. Pathways to thriving and resilience.

Another big category of ACEs is feeling that your family doesn't have your back in one of a couple of ways. Emotionally, if you're in emotional distress, is there anybody you can turn to? Or physically, you're sick and nobody takes you to a doctor, or you're just not that important. People who feel like they had to parent their parents, that their needs were not relevant. That is a category of adverse childhood experiences.

What they all have in common under this umbrella. I'm on the umbrella of household dysfunction, and I'm going through categories of household dysfunction. We also have things like watching there be abuse in the home, or being sexually or physically abused yourself, watching your mother be abused. It encompasses a lot.

But what they all have in common is that something was happening that shouldn't happen, and you had no adult to turn to, you had nobody to say to you, "Hey, I know this is happening, it's not okay. You are precious and loved unconditionally. And we are here to help you through it." It's that combination of factors, bad things are happening and they're a secret, and/or there isn't enough support for you to process in your mind, Okay, this is my mom or dad, I'm in the living room and I can't tie my shoes and no one's helping me, but they're making fun of me.

[00:06:06] Donna Jackson Nakazawa

These feelings that we have that come about because of that household dysfunction do a couple of really significant things. They begin to give us the message that we're not okay, but because our little brains are so active and so busy trying to help us, instead of saying, my situation is not okay, we don't have the wherewithal to do that. The developing brain doesn't have the wherewithal to do that.

Instead, we go, I am not okay in who I am, in my body, in my being, I'm wrong, I'm terribly, terribly wrong. And that begins to shift the action of our nervous system, our self beliefs, how we see ourselves, and how we respond to ourselves in adversity for the rest of our lives.

Quickly, other categories of the umbrella of types of adversity are community-oriented. If you grow up with poverty, or discrimination, or sexism, or racism, or substandard schools, or inability to get good medical care. That is a very, very intense type of Adverse Childhood Experience.

Another category is environmental, growing up with school shootings, and growing up with climate change. There are all of these different types of Adverse Childhood Experiences. Now we've added social stressors through social media, this idea that I don't fit in, I'm not good enough, I won't be loved, I can't be accepted 24/7.

All these together begin to change the brain, change the nervous system, change the immune system, and we see those effects across 2,000 studies over the past 30 years. Showing a greater likelihood of autoimmune disorders, mental health concerns, depression, anxiety, bipolar, cancer, irritable bowel syndrome, and heart disease. There is almost not an illness, or medical concern, or mental health concern that is not tied to a history of Adverse Childhood Experiences.

Meagen Gibson

That's incredibly compelling and remarkable. Now, I think many more people are aware of them, and understand what they are. Just the other day, I was visiting with my mother-in-law and she said, "I just learned about this thing called the Adverse Childhood Experiences," I was like, "You're kidding," she was like, "I didn't realize I had had," and of course, I had clocked that a while ago.... I know you have.

Donna Jackson Nakazawa

You know.

Meagen Gibson

I knew, but I wasn't going to tell her.

But the impacts and the effects... It's something that once people know, when you first learn about it, I don't know if you remember, but there's a developmental thing that happens. You learn about ACEs, and all of a sudden, you can be alarmed like, Oh, my gosh, you start doing the math, there are quizzes online and things like that, it can be a little bit shocking, where you're like, Oh, dear!

Donna Jackson Nakazawa

100%, one of the things that I wanted to do with *The Adverse Childhood Experience's Guided Journal* is knowledge is great, knowledge is wonderful, but we have very good evidence that knowledge in and of itself is not enough to help us change old patterns of responding. If we

respond to stress in our current life as a parent, or at work, or when we are facing a chronic condition. If we respond to stress, with that same sense of, I'm wrong, there's something wrong with me. And we engage in that ruminative self-judgment and self-derogation, which if you have a history of Adverse Childhood Experiences, those patterns of rumination literally get formed in the brain at an early age.

[00:10:37] Donna Jackson Nakazawa

The more Adverse Childhood Experiences you have, the more they affect you, and the more likely you are to get caught up in mind drama and rumination later in life. Those patterns in the default mode network get set fast. It's that fight, flight, freeze, something's not right here, it must be me, there's something wrong with me. And those voices, those voices of self-criticism that you messed up, you did it wrong, you're not good enough, of course, you're sick again because it's your fault. Those are really, really, really hard to shake.

And knowing that Adverse Childhood Experiences, or ACEs, play a role in how you move through your lived experience right now, today, knowing that is A) a little overwhelming.

Meagen Gibson

At first, for sure.

Donna Jackson Nakazawa

At first, it can hit hard, I hear from thousands of people about this, gobsmacked. They'll read one of my books and like, Whoa, I had no idea.

We have great evidence that the brain is so neuroplastic, that it remains neuroplastic throughout life. Knowledge in and of itself is not enough to change these patterns that we're talking about. We may find that we're more reactive to stress than we want to be. We may find that we're harder on ourselves than we want to be. We may find that we engage in more judgment of ourselves and others than we want to be. We may recognize that my head is not a lovely garden, and wow the things that happened to me growing up, the things I was told about myself, the way I was treated, the messages that I received from the environment around me were not good. For whatever reason, we talked about all the different categories and what it could be.

But knowing that, once we understand it, and we also embrace the fact that this is changeable, just that knowledge is not enough Meagen, it's not enough. We have really good science to show us that we actually have to intervene and apply tools. The brain will overlay its old patterns on top of new approaches and ideas. If we don't get in and practice them, that is how we change neural structure.

What I have found as an expert on Adverse Childhood Experiences, and author of many books on that topic, and lecturing all over the world, is that we don't have enough tools. People want more tools. If knowledge and acceptance are not enough, what are the tools? Well, a lot of them are really fantastic and obvious. I don't need to tell everybody, that meditation is awesome, yoga is great, gosh, talk therapy is mind-blowing. All these things are important, but when we have a history of Adverse Childhood Experiences, the brain can get really, really sticky in these areas that I'm talking about, the default mode network, where it's just spitting up and generating, literally we can see it on brain scans, all these messages that you suck and other people suck. Sorry to use that language.

[00:14:29] Donna Jackson Nakazawa

That things are really big, that when something happens, when your teenager comes in the room and has a really distressing thing to tell you, that your distress is here, and you're like, How do I bring it down so that I have the lowest heart rate in the room because this beautiful person in front of me deserves that from me.

But all of those experiences of adversity and trauma in your own past can prevent you from being who you want to be toward yourself and others. We need more tools. We need more tools, that is why I wrote this book, *The Adverse Childhood Experience's Guided Journal*. It's based on my 30 years of research into trauma, emotions, adversity, healing, and resilience. I began to see that this was the single most underutilized science-proven tool in the healing toolbox, and I had to do it.

Meagen Gibson

I'm so glad that you did because you're absolutely right. We have lots of tools that are scientifically proven, but we don't have them yet in a way, until you wrote this book, that applied to people with Adverse Childhood Experiences. I viscerally remember, that I was a meditation avoider for 20 years and had intentionally put myself in positions where workplaces, environments, and social circles where meditation and mindfulness practices were not only encouraged, but part of group activities and part of the culture, and I hated it.

Donna Jackson Nakazawa

It's hard to heal it if you can't feel for yourself first.

Meagen Gibson

Exactly, and one of the things I want to go back to for a second before we get into the tools, because so many of them are so good, just to further validate people, is that we don't go into therapy saying, I don't know why I'm here. I took this Adverse Childhood Experiences thing and it said I was a 6, but I'm not really sure why I'm here. And we don't also go in saying, My voice in my head is mean to me. We go in saying, I can't advocate for myself at work, or I'm afraid to ask for a raise, or I can't stand up to my partner when they say something mean to me.

Donna Jackson Nakazawa

Great point.

Meagen Gibson

Those are the things that we complain about, and then what ends up happening is we start peeling back an onion layer by layer. And once we've dealt with, Okay, I'm able to set a boundary or advocate for myself at work. I've got a tool for that. Now, all of a sudden, I can actually hear that horrible voice, I'm aware of that horrible self-deprecating, self-hating voice in my head. I don't yet understand, because I don't talk to psychologists like you and I do every single day. I don't yet understand that that was built in my childhood to protect me and that I am literally, because of attachment science, incapable of hating my parent or my caregiver, I have to hate myself.

There are so many layers of that onion, and so we need more than one tool. We don't just need the acute tool to deal with the boss situation at work. We need a box of tools like you've given us, that we can go back to as we peel each layer of that onion off and be like, Oh gosh, here's a new aspect of this, or a new lens I need to look at this thing that I'm getting better at, I'm getting faster at, I'm getting more compassionate with.

[00:17:57] Meagen Gibson

Sorry, I'm talking too much.

Donna Jackson Nakazawa

You're not, I love it, and I agree 100% with everything you said. We go at these things because we have an acute issue. It's like, Okay, my teenager X, or in my marriage Y, or my boss is toxic. And then finally, over time, with a really good therapist, we get to... And here's what it was like in my living room when I was 6. Here was the emotional climate of my home, or here's what happened to me when I was 12. It's a very traumatic thing that was life-changing. And then with a good therapist, we go, Well gosh, there are associations between how that felt then, how I feel about myself now, how I respond to stress in my life now, and those things are the same thing.

And that knowledge begins to open the door to self-compassion and tools that help us to understand our own story with compassion, see the relevance of it, see that harsh narrative we've created around ourselves, that incomplete narrative around who we've been, who we can be, who we can become. Once we start to see there's a path forward, the hunger for the tools and also the fear like, Okay, I have to do this work now, what does it mean? It'd just be a lot easier for me if I fall into default mode, which is, Oh, I'm terrible at this thing, or of course people react to me this way because I'm not any good in these conversations or whatever it is, or of course I'm sick again because I'm always sick and I'm a loser.

Whatever those default feelings are that we have about ourselves, these default self-beliefs. We actually can intervene, we can change them, and we need guides, we need tools to do it. The brain will not just do it out of sheer will, it won't happen. I wish that it would. But like I said, I've been reporting in this field for 30 years, it happens, we can change. But we have to put in tools.

What I've tried to do is make the tools as invitational and wonder-making and self-compassionate and, Wow, okay I really want to do this. This feels good and right and important, while also keeping them little bite-size actionable pieces, that we can spend 10 minutes a day doing, if that's all we have.

Meagen Gibson

Absolutely, and that's such an important factor because it's such an opportunity. It feels very intimidating, and a little bit scary, when we learn all of the hopeful research about how capable we are as human beings of changing those brain patterns, making adjustments, and steering very, very slowly the ship in a different direction. It is completely possible, which is why it's so hopeful. But it is also scary, it's an opportunity and you're like... Because you don't know what you'll think like and how you'll feel on the other side. It feels like, who has the time to dismantle their entire childhood? I don't have 6 hours to sit here wallowing in a chair with my journal, and that's not what we're talking about here, is it?

Donna Jackson Nakazawa

No. And if you are someone who grew up with Adverse Childhood Experiences, then guess what? We also know that you are far less likely to feel that you are deserving of doing this work on yourself. We also know that in certain professions, teachers, and nurses are much more likely to have had Adverse Childhood Experiences. Putting yourself in a profession, or forget a profession, just in a place in your household, or your family, where you are the obliger, you are the fixer, you

are the caregiver for all and any at all times. These are roles we take on, and often, statistically, we know we're more likely to be that person if we had a higher history of adversity growing up.

[00:22:58] Donna Jackson Nakazawa

But we also know that we're much less likely to be able to turn that caregiving and compassion on ourselves. So we become that obliger, and yet we have like cement in the fire hose when it comes to turning it, that self-compassion and that care, on ourselves. We can be the fixer, the firefighter out there. We can be the obliger, we are the first person people to pick up the phone often, but we cannot, because our brain learned early on that the way to survive was to ignore the self.

And that could look like mild dissociation. It could look like you don't matter. It could look like you're not lovable. All of those messages do a wipe on the mind in those areas that are so central to self-compassion. We just don't grow those networks in the same way. And that doesn't mean there's anything wrong with you. This is a very common experience. It is more common than you can possibly believe or know.

However, over a lifetime, that thing that served you, that exiling of parts so that you could take care of the adult who needed you, or be the perfect student, or get through terrible discrimination, or whatever it was, you will pay the price at some point. And when the price is felt, it can be life-changing, and also feel quite devastating, at that first instance to know I can't turn that love on myself. I can't process these very difficult experiences from my childhood, or chronically feeling like I didn't matter.

These don't have to be big dramatic experiences. We know that childhood adversity is really that combination of not feeling seen, safe, soothed, heard, and known as things happened that were difficult to process, or made you feel unworthy, or that you didn't matter, or that you didn't belong and not having adults to help you.

That can come in so many different flavors and categories as we've discussed. And when you first get it, and you realize there's something in me that doesn't know how to love me, or help me heal from this, that is the most crucial moment in the healing journey. The second is committing to doing something about it so that you can truly, truly wake up on your own side for the very first time in your life. That is what positions you to live as you hope and dream to live, and to be in relationships that you hope and dream to have. It all comes from that moment.

Meagen Gibson

Absolutely. You said something earlier that I really want to come back to when we talk about some of the tools, which is the architecture of the brain. You and I probably both remember the Saturday Night Live sketch, when you sit yourself in front of the mirror, and kind self-talk. It's a trope, but this is more than that, but that does go into it. But this is not just an, I need to be kinder to myself, which is also true. It's literally the systems of your brain.

If you can talk about one of the tools in the book and then how it applies to those different systems of the brain, because I was going to ask you a bunch of questions about the systems of the brain first, but let's talk about a tool, and then how it impacts default mode network, and all of these systems that impact that idea of ourselves and how we're changing it.

[00:27:50] Donna Jackson Nakazawa

Yeah, I'll start with the simple act of creating a narrative about what happened to you. We're not even getting into the how to shift it tools yet, but this simple act of creating a narrative. We have excellent studies that show that creating that narrative about what happened to you helps to integrate the areas of the brain.

Let me explain that when we have a history of adversity, the default mode network, which is where we begin to create, even in the womb, and then with our early caregivers very early in life, those first weeks, months, years of life, the default mode network is going, Am I safe? Do I belong? Do I matter? And when those messages are there, of safety and belonging and mattering, it wires and fires up in all these groovy ways, with over 200 other areas of the brain. It syncs up with your whole brain, we call this brain integration. For the nerds in the room, your connectome in your brain gets really lit up, it's like, I'm loved, this feels good, oh I matter, oh if I fall it's important, somebody cares. Whatever it is, fall emotionally, physically, in all those ways. I fall, I matter. I get up, I matter.

When we don't see that in the early brain, in the child's brain, and when there has been a history of Adverse Childhood Experiences, that area of the brain that's forming our story of self, the default mode network, and that story we want it to be, I matter, I'm cared for. That is the story of me, and I will take that forward with me throughout my life.

That wires up in the default mode network, our sense of who we are, who we've been, and who we can become. The whole brain syncs up around it. I mean, your prefrontal cortex where you make decisions, your amygdala where you either go on threat alert or you don't, your hippocampus where your memories are processed, and also you draw relevance for what's happening right now. Is it scary or not scary? All of those areas in your limbic system sync up. I'm ready for life. I matter. I belong. Life is hard, but I'm here to handle it because I know I matter, and I know that other people care about me.

When there's been a history of Adverse Childhood Experiences, the default mode network does not wire up on care. It wires up on a feeling of not belonging, a feeling of not being cared for. It wires up in a feeling of self-degradation. It wires up to spend its time putting you down because that is how you survive to minimize your needs, your desire to be cared for, your longing for love and compassion, it had to be shut off. It had to be silenced for you to survive.

That did not exist in your environment. You didn't have the capacity to understand that wasn't your fault, it wasn't about you. That it was the fault of the adults around you, or the environment you were in. But the brain in the default mode network wires up for self-criticism, reactivity, judging others, and judging yourself, and those areas of the brain go on lockdown. They do not sync up with those other 200 areas of your brain. There is no brain integration, and we feel it when we're caught up in rumination, when we're caught up in something that's making us feel distressed, or we're overwhelmed, caught in rumination, or mind trauma, you can feel that. Can't you feel that, Meagen? How hard it is to get your brain out of it?

Meagen Gibson

Viscerally, I know exactly how that feels.

[00:32:11] Donna Jackson Nakazawa

And you know what? It shouldn't be that hard, it's not supposed to be that hard. You are supposed to be getting other messages like, No girl you matter. Or, Hey actually there is someone you can call about this. Or, Hey there are these things that you've done in the past that really helped you. Or, Hey no you are that good parent, you do know how to do this, you know how to bring your heart rate down, come on, let's get with it.

All of that coaching in the brain should be there, and it is there for you. But first you have to create a narrative of what happened, where it happened, how it happened, with whom it happened, and how it affected you. Really, the first half of the journal, the guided journal, is to take you softly, gently, invitationally, and soothingly into tiny baby steps of seeing and creating your own story.

One of the places where I begin, is if you were going to give the story of your childhood or adolescence, those first 20 years of your life, if you were going to give it a movie title or a book title, knowing your story of adversity what would it be?

Lots of little exercises, I mean, there are hundreds of exercises in this book. Please know that I am a very skilled science journalist, so if one exercise doesn't work for you, I'm going to come at it 8 different ways until you, as a person on a healing journey, find that voice and that question that resonates for you.

I have drawing exercises, we draw your childhood home, we draw a map, a floor plan, and then go in and create that emotional climate around it. What was that like for you?

We give your childhood a movie title, or a book, it might be the girl's mother didn't love her, or the boy who had no one to turn to, or the one no one liked, or dread and loathing. It could be whatever it is, we begin with the truth of what happened to you while interspersing it with the science and the knowledge that this is changeable.

Meagen Gibson

It's so interesting, too, because so many people haven't done that when they have experienced adversity. Oftentimes, the first time they're doing that narrative is in front of a helping professional. It's the first time that they're getting somebody who actually makes them feel seen, heard, understood, validated in, however...

Or even the reflection of like, Wow, that was not typical, was it? Without judgment. Or like, That was not in the ordinary of most people's childhoods. So that's the first time when we get that reflection of, Oh that doesn't happen in every... Because we don't know anything different than what happened to us.

Donna Jackson Nakazawa

Your brain won't let you know that. Growing up your brain has to believe that what is happening inside these four walls, or in your community, or your environment, it has to believe and normalize it. Because where are you going to go? You cannot run out the door. You're not going to survive out there. And if you call it out in the house, you're not going to survive in there. So what other choice do you have than to normalize it?

[00:36:23] Donna Jackson Nakazawa

Normalization, it's okay, you had to do it to survive, but you don't have to do it now. But to not normalize it now in ways that affect how you feel about yourself, and how healthy you are in your relationship with yourself and everyone you love around you, or work with, you have to now not normalize it.

But to do that, you've got to have tools. You have to go through a step-by-step, gentle, invitational process. What I've really tried to do, I want to say this to everybody very clearly, try to make it enjoyable and fun. I really have. I know this isn't fun. I've been reporting on this. I'm an expert on adverse childhood experiences. I know this is not fun.

I also know that when we awaken those other 200 areas of our brain that go, Wait a minute. I'm curious about... Wait, that's a good question. Oh, that's interesting. Okay, well, let me just take this quick little checklist. Well, oh, let me think about my life as a book. Let me draw this floor plan, let me ask this really powerful question about my childhood to myself.

We can step past our own resistance. We can step right over the fact that we may not feel the self-compassion that we long to feel. We can step right over being a capitulator, or an obliger, or a fixer, or a chronic caregiver. We can step over that.

Sorry, I have a little dog who's 14 years old under my desk.

Meagen Gibson

I love it.

Donna Jackson Nakazawa

She has Cushing's disease, and she's never more than a foot from me, and you are going to hear her cough. I'm sorry.

Meagen Gibson

That's all right she's there.

Donna Jackson Nakazawa

Her name is Winnie, and she's dear to me.

Meagen Gibson

Hi, Winnie welcome.

Donna Jackson Nakazawa

I welcome Winnie, yes.

Meagen Gibson

Absolutely. What you were saying was so great in that it made me think of what you talk about in the book around, even if we have had the... Or we attempted to formulate our story, or get validation of our story in our childhood, or even our young adulthood from the people that cared for us, ideally those people respond as they should, with care, and compassion, and belief, and validation, and reflection. Often, the people that care about us the most and should respond the

best, don't and don't have the capacity to do that. There are a lot of reasons for that we don't need to get into.

[00:39:28] Meagen Gibson

But one of the things that I wanted to come to when we're talking about this, is that because in some of these exercises, they can obviously activate ourselves. And you've built it with a lot of compassion, and care, and safety.

Donna Jackson Nakazawa

Safety and play built into it.

Meagen Gibson

Before I get to the point that I'm trying to make, it's that the invitation in this book, which is so wonderful, is to initiate and build on tiny micro actions of self-trust.

Donna Jackson Nakazawa

I love that.

Meagen Gibson

And that for me... Because I read the book, I did all the exercises, and that, for me, is the most powerful way for us to get into what you're talking about, which is play, curiosity, and open-mindedness. But you can't get there without building those tiny micro actions of self-trust, and we build them.

Donna Jackson Nakazawa

Yes.

Meagen Gibson

That's what I love about the book, and what I'm building to, is because I wanted to say that first, because some of the things that we're talking about, and we're making our stories, or when we're trying to look at things with curiosity, comes a lot of shame. Shame around how we behaved, how we responded, why didn't we do this? Because we don't come to those messages on our own. Those messages are fed to us initially when we come to our caretakers and we say, this hurt, or this didn't feel good, or this didn't feel right, or I needed more from you, and they shame, or belittle, or deny us. We come to those messages honestly.

You talk about an incredibly important factor to keep in mind when we're talking about that fight, flight, freeze, the amygdala, and the default network, which is that when we're activated, the logic and reason, and verbalization go completely offline. I think it's just such an important factor to keep in mind, and keep really present as we're talking about these exercises, and as all of our feelings come up.

Because I know for me personally, when I was going through the toughest stuff, that's the first thing that comes up. And that used to stop me before I could even consider, before I could even walk in the room with a difficult emotion, or memory, or feeling in my body. It was, Why didn't you? Why didn't you say this? Why didn't you do this? Why didn't you blah, blah, blah, blah, blah? Learning that about my brain from you, from Dan Siegel, from other researchers and scientists. Learning that about my brain created such a pocket of self-compassion for me, that I keep under

my arm when I went into this territory of difficulty, of exploration. It was like I finally had a pouch full of the right supplies.

[00:42:15] Donna Jackson Nakazawa

Yes, I love that. I love everything you just said, that idea that we have to build these little tiny micro-moments of self-trust and self-compassion.

We do spend time doing that in the beginning of the book, because here's the thing our narrative begins to integrate the brain, but it also gives us a little bit of what we call Zoom. Zoom out, it gives us a tiny bit of zoom out. When we begin to take these tiny little steps, writing our story, writing little bits of our story, seeing the associations between the past and now, we begin to get that sense that we matter, that we belong, and we can take that leap over that feeling of not belonging and that sense of self-trust. Like, Oh okay my story matters, it matters to me right now.

What that does is it helps to bring the brain back online. When we are totally out of our window of tolerance, logic, reason, and self-understanding, they all go offline. But guess what brings it back online? This really little simple act of putting pen to paper and writing words on a page. We are anchoring our brain at that moment in self-trust.

By doing this, we are anchoring our brain, I trust you to look at this question, write an honest answer, and we're doing something else. We're sneaking past the default mode network to get the rest of the brain to listen up. And in that, we build that really powerful trust.

The brain that wants to fly out, lose logic, lose reason. We've all been there. You're standing there and you're in the kitchen with your family and somebody says something, and all of a sudden it's a bad day as a family. We've all had bad days as a family. If you haven't, well, God love you, but most of us had a day.

Meagen Gibson

Lucky you.

Donna Jackson Nakazawa

Somebody's mood affected somebody else, and somebody said, and then all of a sudden you were standing there going, Hey this is not who we are. The reason those happen is because as parents, we come to parenting with our own adversity, and when we are activated or overwhelmed, logic and reason, and all the good intentions and the heartfelt love that we feel go offline. Old stories crowd in, they take over mission controls.

The old stories could be anything like, nobody ever helps me, or nobody cares what I think. They're all going back to that initial sense of not having been seen, known, or mattering. And don't forget, your nervous system is set on fight, flight, and freeze, so you're just more reactive in general.

But once we begin to do this work and these little micro changes of self-trust that you talked about, which I just love. We sneak past the default mode network and we begin to sneak in self-compassion into the neural network, so that slowly it integrates with the default mode network, and we begin to feel those feelings the first time.

[00:46:11] Donna Jackson Nakazawa

When we first begin to say, My story matters, I matter, I feel something for myself, I feel a glimmer of something for my story, a glimmer of something for me. It's like an oasis in the desert. It's like, Oh it's hard to hold on to, wait, I get it, I feel it, but wait, what is this thing? And then it's gone.

What I'm trying to do in the Adverse Childhood Experiences Guided Journal is spiral you back to it over and over, increasingly over time, and take you to the other side of that integration.

Here's what I want for you when you've done *The Adverse Childhood Experiences Guided Journal*. I want you to be able to be in a situation, right now, today, this afternoon, that brings up those same feelings that you had as a child. No one looks out for me, no one's going to care for me, I don't matter, I'm a piece of crap, of course, this is happening to me. And that self-judging, self-deprecating, other-judging, I'm bad, they're bad, mind.

And I want you to be able to go, I see you, I see that happening, I get it, but guess what? No, I have now 50 tools that I've learned doing this journal that I can bring in. We get a couple of seconds to intervene, shut down those inner thoughts, those inner critics, that desire to jump on others, and jump on ourselves, and relish in that few seconds the joy of being able to notice your own story, notice how it feels, the scenes in your head, the somatic sensations in your body, the intensity of emotions, how these are all the same as what you felt back then, and that you do not want this for yourself. You do not want this for yourself, and you will do whatever you can to get on the other side of it. A, you have the tools, and B, you can do them right now in less than a minute. That's the goal.

Meagen Gibson

At this point in the interview, Donna actually has an interruption from a family member about an urgent matter. Normally, I would cut that thing out of this interview, but what happens afterward and what she says is so incredible, and such a testament to the work that she has done, and the work that she put into this book that I wanted to keep it in.

Do you need to talk to him?

Donna Jackson Nakazawa

No, no, no, no, we're not. But what I'm not doing in this moment, which is new, is, Oh, I messed up, I should have been here for that person who needed me right now. But I'm also doing this interview, so how did I screw up that I'm not available for something really important that's happening in the background, and yet I should be. Oh, dreaded, drated Donna did it again.

I'm not doing that, I'm going, Here is how it is for me, I'm a caregiver, I'm an obliger, I'm a helper. And the things that I'm doing right now in this moment of my life, to try to help other people, as part of a heartfelt mission that comes right from the deepest, brightest light inside me, which also nurtures me to do this work. This matters right now, it matters, and other people matter, and the texts coming in matter, and the stuff going on matters.

But I didn't mess up, I'm just where I need to be. And that's what we're trying to get to here, is not to turn the shame and blame on ourselves in each moment where we're activated. Because if you had a history of childhood adversity, you're going to be activated.

[00:51:19] Donna Jackson Nakazawa

But you can become less activated, and your default can be to see yourself in all your competence, in all your fortitude, in all of your bravery, in all of your resilience, in all of your goodness, in all of your belonging, and plant your feet right there for whatever comes.

Meagen Gibson

Absolutely. Gosh, I don't want to ask you anything after that. I'm just so I'm empowered, that was awesome. We need to leave there. Okay, everybody needs to go buy Donna's book.

Donna Jackson Nakazawa

It's so sweet.

Meagen Gibson

The Adverse Childhood Experiences Guided Journal.

Donna Jackson Nakazawa

Yeah, it was a long title, but again, we wanted to pay homage to those words, Adverse Childhood Experiences. Most of us have them, if you're listening, I'm just going to do a Gestalt guess that you have a story of childhood adversity that you deserve to tell, that you deserve to get out there so that you can wake up on your own side.

The journal is a way of getting trauma out of your body and onto the page in an integrated way so that you can not only rewrite your story for who you can become, but you are literally rewiring your brain in the process, which is how we create resilience, and how we know that when life comes at us, because it's wobbly out there, we're not going to fall over.

This is how we do it, this is how we do the work. Narrative writing, writing to heal, is so vastly underutilized. It's so easy, it's so inexpensive, and it's got such fabulous results. We have literally half a dozen studies in the last two years showing that we bring down our over-activation of our immune system. We bring down our over-activation of our nervous system. We see immune markers improve. We see people's asthma improve. And crucially, our sense of who we are changes radically. I want that healing for everybody.

Meagen Gibson

Absolutely. Donna, where can people find your book and more about you?

Donna Jackson Nakazawa

I'm at donnajacksonnakazawa.com, just my name and .com.

The Adverse Childhood Experiences Guided Journal is available everywhere books are sold, wherever you buy your books, whether it's independent bookstores, Bookshop.org. I'd love to support independent bookstores, Amazon, Target, Walmart, Powell's, you name it. It's out there.

I guess I want to say, please try this, please try this technique. I'm not here to sell books. I want you to have this book and try this technique and let me know. Let me know how it goes. You can email me on my website. I really would give it away to everybody if I possibly could. Publishing does not work that way. Not yet. But I want you guys to have it. I want you to have these tools. I've spent 30 years researching them, reporting on them, and owning them.

[00:55:14] Donna Jackson Nakazawa

And this entire book is built on a workshop that I have workshopped at national conferences for seven years. So it's become the best study, based on the science and working with real live people across the country. I want everybody to have it, so let me know how it goes.

Meagen Gibson

All right, everybody, you've got an assignment. Buy the book and then email Donna. Donna Jackson Nakazawa, thank you again so much for being with us.

Donna Jackson Nakazawa

It's always a pleasure to talk to you.