

Body-First Approach To Healing Trauma

Guest - Brittany Piper

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[00:00:09] Meagen Gibson

Hello and welcome to this interview. I'm your co-host, Meagen Gibson. Today I'm speaking with Brittany Piper, an internationally renowned speaker, author and Somatic Experiencing practitioner, and expert in sexual violence prevention and trauma-informed care.

Over the last 13 years, she's delivered more than 400 programs across three continents. As a rape survivor and leading advocate on sexual violence prevention, Brittany speaks to tens of thousands each year.

She's also a forensic neurobiology expert conducting trauma-informed trainings with the US Army and sex crimes detectives. Founder of the internationally acclaimed Body-First Healing Program. Brittany continues to inspire and lead in the field of trauma recovery. Brittany Piper, thank you so much for being with us today.

Brittany Piper

Yes, thank you for having me.

Meagen Gibson

So I would love it if you could start by telling us why a Body-First approach to healing trauma is so impactful?

Brittany Piper

Before we started recording here, Meagen, you and I were talking about how there's so many different definitions of what trauma is. And as a survivor who's done a lot of personal research...

But as a professional in this space, my definition is that trauma is any experience that overwhelms the nervous system. That causes the nervous system to become chronically ensnared or stuck in

survival mode. And it's these incomplete responses... What we couldn't do back then, but we can do now that I feel offers an incredible opportunity for healing.

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And with the newest upgraded science on trauma, we know that the nervous system predominantly operates through the language of somatics, which is body-based. So sensation. Emotion. Feeling. Impulse.

As someone who was for many years sitting across from traditional therapists and who kept hitting a wall. And then saw tremendous progress when I switched to that Body-First approach. It just really opened a whole new world of healing up to me. And yeah, so I would probably say that.

Meagen Gibson

I'm so glad that you brought that up, because I think... I was talking to one of the contributors that we have here, like Instagram DMs or something. And she was talking... She's also a Somatic Experiencing trainee. And I know you have already gone through the training, and she's in the middle of it.

And I think sometimes therapists forget that people who are seeking therapy don't know about all the training and certifications and modalities of treatment that are available. And we can be, because...

Unfortunately we don't know... It's just like if you get any other type of illness, you don't spend your life healthy figuring out which types of cancer treatment there are. It's just not something that's on your radar until you need that help.

And so we look at therapy sometimes as laymen as this one brush. Like I just go in and I talk to somebody and I feel better. And there's so many different modalities that it can be overwhelming.

And so it's really good to hear specifically about what this is, Somatic Experiencing, and why it helps. And I think so many people have experienced what you just detailed. Which is spending a lot of time in the chair, talking to someone, rehashing your trauma, going through your stories.

And just being like, "I feel almost worse every single time. I leave here feeling like I've been torn apart and not put back together." I hear a lot of these stories and experienced that myself.

Until I found somebody who could gently guide me without me even knowing. Because they had this training, they didn't have to explicitly say, "We're going to do Somatic Experiencing now." They just guided me gently through that type of an experience.

And I had a totally different healing experience. So it might be useful now for people to hear what a Body-First healing roadmap looks like, what to expect in that kind of a session?

[00:04:17] Brittany Piper

Well, so I think piggybacking off of what you just said is that I think we've come from a place where, again, we all considered this one form of therapy. And then when you are in it and you're like, "Okay, I need to start considering this for myself." It can be so over...

I mean, there's so many modalities out there. And how I like to envision it is like this big old pie, and everyone's pie is broken up and divided into so many different slices. So like one slice might be Somatic Experiencing, EMDR, DBT, CBT. But it's going to be unique to each person.

And there might be different slices that you take bites out of at different stages of your healing. I have a lot of clients that come through my program, the Body-First Healing Program, and I like to call it a one-stop shop because we do explore different modalities.

I am a Somatic Experiencing practitioner by trade. But I also trained at the Polyvagal Institute. I have a background in training in somatic parts work, somatic attachment. So we explore all of the things, and hear from clients later on...

They might be like during the program, "This one modality landed so well in that season of healing. But I just want to let you know I went back through the workbook like two years later. This one modality is really opening up a whole new layer of healing for me."

And so I think that's important to recognize that it's not what modality is right or wrong, it's what modality is right for me right now and in which way. Like how we use it as a tool. And that's really what they all are.

So anyways, I digress. But so the roadmap of a Body-First healing approach is really recognizing that it's hard to bring cognitive awareness and meaning-making and changing thought patterns and changing our mindset, if the body and the nervous system is also not on board.

So what's really important in that statement of body-first is the word first. It doesn't say body only, it says body-first. And you know Dan Siegel, he talks a lot about the "flipping the lid" analogy.

So, when our nervous system is regulated and we're in that rest and digest. That ventral vagal state of safety and connection, our brain, that triune brain, that amygdala, which is the threat center. It's turned off.

And so you have your thinking brain up here, which is that prefrontal neocortex. You have the emotional limbic brain, the reptilian brain, and everything is working together in unison.

But when we have any perception of threat to our safety, a trigger. Right when we're triggered, when we're stressed, what happens is that the amygdala turns on and we flip our lid. So cognitive thinking, rationale, meaning-making, making sense of things goes out the window.

And this part of the brain, the subconscious subcortical emotion feeling impulse brain takes over. And that's why when we're triggered we do things that don't make sense, that are very irrational, very reactionary.

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And so it's more so that we have to learn how to regulate through the body and how to bring this subcortical system and deactivate the alarm of the amygdala.

And we do that through that felt sense of safety. So through the body, we can notice that there are things around us that can feel safe. There might be people around us that feel safe, or there might be a part of our body internally that can feel safe, that we can use to anchor into.

And as we bring our awareness to that, the system starts to come back into regulation and slowly says, "Oh, I'm back." That meaning-making part is here. And so it's more bottom-up. And I know we talk a lot about bottom-up and top-down approaches.

But it's that sense of, we work with the Body-First. We work with regulating the body, regulating the nervous system, creating tools and greater capacity to feel safety in the body. But also greater capacity to not be safe.

I think a lot of people get hung up on... When they get into somatic work like, "I just need to feel safe all this time, this felt sense of safety." And that's not how we're wired as human animals. There are going to be moments where we don't feel safe. And so it's also creating a greater capacity to not feel safe.

And so as we do that, then we move into the meaning-making because we can now start to work with content, with trauma narrative, with that greater capacity.

But what we see instead and you mentioned this earlier, is that the traditional way of doing things is let's start with cognition. Let's start with meaning-making. Let's start with the story.

And what we know is that recall exposure therapy can really activate that amygdala, which then turns off the talking, thinking, remembering parts of the brain. So that's why so many people feel... And we hear this word a lot, "stuck" in traditional therapy.

So it's really about working with the physical somatic container first, creating tools, creating capacity for regulation and resilience, and then working with trauma content, narrative meaning-making. And I'm very long-winded by the way. So you are always welcome to cut me off.

Meagen Gibson

No, I would absolutely not. The reason we're here is you, not me. I talk enough as it is. But you made such a good point about... And I've heard you talking about this on social media recently about increasing our capacity to feel unsafe as well. And that doesn't mean, like, purposely put ourselves in unsafe situations.

But like unsafety will happen. You will encounter a traffic incident, car accident. One of your kids will get sick. You will experience extreme discomfort or extreme unsafety. And you have to be ready to do that.

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Part of what I'm hearing you say is that these are practices so that you're ready when that happens. So that you're as prepared as you can be to handle the discomfort.

Because I find that what so many of us are doing is responding to our inability to experience whatever we're experiencing. Not responding to what's happened. We're reacting to our discomfort and our inability to be in it. Is that right?

Brittany Piper

Yeah, absolutely. And there are so many wonderful statements and quotes by... People who I think are here in the conference by Peter Levine, Stephen Porges, Bessel van der Kolk, Dr Gabor. They've all made very similar statements that trauma comes back as a response or a reaction. Not as a memory.

Trauma is found in the nervous system, not in the story. And so it is more so... And what Somatic Experiencing is really all about. If you think about that term somatic, it means body-based, body-oriented. We are helping you to better be with the experience of the body.

So the goal is to be in the body. Not to quickly rush out of the body. So in moments when we feel discomfort, like you said, when we don't feel safe, it's gently. And this is a very important right phrase here.

It's gently providing tolerable moments of, "Can I be with this anxiety for a moment and see what happens next?" Rather than... And we're seeing a lot of this is, what practice can I do? What can I do to feel safe again?

I use the analogy of a hole in the sand to... I use a lot of analogies to talk about this. But imagine your hole in the sand. And there's a quote by Peter that says, "It's not that our emotions..." Like hard emotions.

"It's not that they're too big, it's that our capacity is too small." And that capacity is what we can actually change over time. So when you think about that capacity, which is our resilience to be with what's unsafe.

It's this hole in the sand. And that's our container. That's our capacity. The water that comes in is activation. Anything that feels unsafe. And the goal is to not...

And then you also have your sand tools. Your somatic tools. The things that you see a lot on social media, like shaking or air screaming. All these things that people love, which are so helpful. But they bring temporary relief, not resolution.

And I think that's a really important distinction to make. So you have your sand tools. So water comes in. And what we see a lot of is people are like, "What do I do? What tool can I use? What can I do to get this anxiety, to get this anger out of my body?" And then you're fine.

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But what happens is your capacity never expanded. And so by allowing the water to sit for a moment, what happens is that sand slowly starts to erode away. And then maybe if it starts to feel overwhelming, okay, we can use a tool. But we have a little bit more capacity than last time.

Now, we don't want to get obliterated by what doesn't feel safe. Because that could just wash away this hole. And then we are what we call your nervous system is blown out. So it's a delicate dance. It's a fine balance of learning how to lead the nervous system, but also being guided by the body and the nervous system.

We say it's when you know how to zig and know how to zag. Like, your body knows how to metabolize what doesn't feel good. It knows how to digest it, just like it digests food. And we often jump in and interrupt because we don't yet have that capacity. So anyways, a fun little analogy.

Meagen Gibson

Yeah, I like that. And it reminds me of one of the steps that you name of resourcing. And one of the resources that I found to be the most valuable for me in creating a felt sense of safety is pausing.

And to go with your analogy, it makes sense. The hole is filling with water. I'm next to the ocean. Just the moment of acknowledgment of whatever is happening makes sense.

Brittany Piper

Yes.

Meagen Gibson

It makes sense, my whole body just got hot. It makes sense that my stomach is in knots. Just to pause and be like, whatever that person said, hurt. And so of course, I feel like I'm going to cry. Because we move so fast.

We move so fast into tools or escape or whatever because of our histories and backgrounds to fix. That just to acknowledge that whatever's happening for me makes sense has given me so much more capacity to then do something or not do something or.

Brittany Piper

And that's why... Man, I love that point. And so many people get caught up in... I mean, we all have such great intentions in our healing. But it can start to feel like another form of self-judgment. And this urgency to fix then just adds more pressure on the system.

And so the definition of Somatic Experiencing is that it's a naturalistic approach to trauma resolution. And that word is incredibly important.

Because what it means is that this is a modality that turns people inward to the innate capacity and ability that they're biologically hardwired with to self-heal. We are a self-correcting system. We are

a self-organizing system. I mean, you just look at nature. We are tethered to nature. Nature knows how to heal.

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And so a lot of the work that's done is helping people to reframe that perspective of there's actually nothing wrong with me, and my body is having the exact correct response based on the circumstance and my past circumstances.

I don't know if you're familiar with Dr Maureen Gallagher and her work. So she's a senior trainer at Somatic Experiencing International. She was one of my trainers, and she does a lot of work with the Embody Lab. But she created and developed a modality called Inner Relational Focusing.

And it's essentially the relationship that we have to our feelings. So the way that she describes it is, "the feelings that we have about our feelings." Which is, oh, this anxiety, this heat as you mentioned. I'm having this constriction. I'm not allowed to feel this.

And so that's the first layer, is changing the way that we relate to, the way that we attune to... This is also where parts work comes in. The way that we attune to the very natural experiences that we have. And that's almost like half of the work. So, yeah...

Meagen Gibson

That's 100% been my experience.

Brittany Piper

And I will say there's a lot of parents that I work with. A lot of parents who, as they learn this language of somatics... Actually, in our group. We have weekly group Q&A calls in my program.

And yesterday for about 20 minutes, we all got off on a tangent talking about parenting. And in moments when I feel overstimulated as a mom... There were a lot of moms in the conversation.

And I don't want to blow up on my kids, like, what do I do? And so we all just had some discussions. But really, what it comes down to is that showing our kids that we are human before we are parents is important.

Because we're modeling to them that it's okay to feel anger in the body. And if we create capacity and room for it to be here and be present, we can allow it to move through in a way that's healthy.

And so, I've shared a little bit about what I do with my kiddos. Noah, my son, he's four. Shia is a year and a half old. But when they get angry, we do dinosaur stomps, we do lion growls.

And so I do think that on a systemic level, there is a shift where younger people, our little ones are starting to have and acquire this language that it's okay to feel things in my body. Which is just really, really cool to see.

[00:19:16] Meagen Gibson

And you named such an incredible thing, which is that I think most parents... When you're becoming a parent, you think about the things you're going to teach your kids.

But you don't think about the things they're going to invoke in you, and the things they're going to make you feel. You only think about the good things. And I live with three drummers.

Brittany Piper

Ah. Oh, man. That's fun.

Meagen Gibson

There's the part where I'm like, this is somatically so good for them. They're like... But it's somatically bad for me. And both things can be true.

That I can really deeply appreciate how incredible an activity it is for them and their nervous systems. And also how incredibly activating it is for mine, and that I'm allowed to have limitations on that.

And that doesn't make me a bad person, right? But how you experience your children's suffering or difficulty or struggles or what it does for you. That was a surprise for me.

I was like, ah, shoot! I didn't think I was going to have whole feelings about their feelings. Then thinking about the relationship of your feelings to your feelings. Yeah, it gets all twisted up, doesn't it?

Brittany Piper

It does. But also parenting... This might be my next book because it's something I just love talking about is... There is tremendous opportunity when you become a parent to nurture.

So they say that your brain experiences the most plasticity... The most development growth changes in your first three years of life. Your subconscious brain, for the most part, is wired by the age of three.

But one of the other biggest spurts in life that you have, and the opportunity for neuroplasticity is when you become a parent. And so those postpartum infancy years from 0 to 3.

And it's amazing to see how the experience of nurturing and caretaking changes the brain. And how it also brings up through implicit body memory, a lot of that nonverbal experience that we don't remember. As grown adults, because our hippocampus wasn't around back then.

But that body memory is there. And so it starts to show up. When I became a mom, I got really triggered by some random things. And I was like, what is going on? What is happening in my body?

And I had some really eye-opening moments of, wow, there were some things in those first few years of life that I experienced, and I remember talking to my mom about it, reaching out to her.

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I feel so blessed that we have a relationship where we can have these really honest conversations without backfiring. And she confirmed some things that I was feeling in my body. And so it was just...

But through parenting, you can give those younger parts of you a different experience, which is why I love that quote that, "It's never too late to give yourself the childhood that you deserve."

And so... Random tangent again. But just beautiful. What the body can do. What the body and brain can do when we are embodied. When we allow that to happen.

Meagen Gibson

100%. So we've talked about what Somatic Experiencing is. What is it not?

Brittany Piper

What is it not? So it's not fast. Somatic Experiencing, like I said, it's a naturalistic approach where essentially what we're helping our clients to do is to allow the nervous system to complete experiences that were not complete back then.

So we call it "completing the incomplete experience." So when there is an experience that overwhelms the nervous system, like I said earlier, it gets stuck in those trauma responses. Fight, flight, shutdown, freeze, fawn, functional freeze.

And so the system gets what we call the threat response cycle. We get stuck in this threat response cycle. And so healing is allowing through the body for those incomplete experiences to happen here in the present in a way that feels gentle and tolerable.

So maybe back then as a child developmentally, we experienced something where our boundaries were crossed. Maybe there was abuse. And so our fight response was maybe thwarted.

And so when that happens, all of the survival hormones of the emotional charge of adrenaline, cortisol that accompanies that fight or flight response. It's still stuck within the system. And over time, it creates this chronic stress within the body.

Allostatic load. And that contributes to mental, emotional and physical symptoms. And so it's like our body is bracing. Posturally within the viscera, the muscles. It is bracing and preparing. And we often don't recognize that this is happening.

And so the nervous system informs everything about our thought patterns, our emotional landscape, how we live and feel and take up space within the body, our reproductive system, our immune system, our hormones.

And so what we see... What I see is that I think there is somatic healing. But then there's also Somatic Experiencing, which is a much more concentrated form of somatic healing.

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And in the somatic healing space, or I would say I spend a lot of time on social media. That's where a lot of my community is. You see a lot of the movement, shaking.

And Somatic Experiencing is a little bit different than that. We don't focus so much on the practices. It's more so again, creating capacity to be in the body experience. And I'll share a little bit of my story here to give as an example.

But let's say that there's stuck and stagnant anger in the body. We wouldn't take you straight into your trauma narrative.

What we would do is we would work very slowly and gently over multiple sessions to just facilitate more capacity to be with anger. We don't need to go straight into that moment where our fight response was thwarted.

"What's a moment recently that really pissed you off?"

"Yeah, I got cut off the other day and ... "

"Okay. What happened?"

"Yeah, I got cut off. And this person, they made this gesture at me, and I'm like, it's your fault."

"And as you're telling me that, what are you noticing in the body?"

And then we slow it down. We take time to notice heat sensation, temperature, impulse, and muscle change.

"How's the viscera? How's your stomach? Whoa. How's your heart rate?"

And we just kind of... We allow ourselves to observe and see what happens next. And when it feels overwhelming. Then we'll come back into, we pendulate into a moment of resource.

"Okay. This might feel like a little bit too much. Okay. Can you maybe just take a moment to look around the room? What do you notice? Let's come back to the present."

So it's very slow. It's very gentle. The word that we use all the time is titrated. And I'm sure Peter talked about titration and why it's so important.

Because trauma is anything that feels like too much, too fast, too soon. And when we throw you into the deep end of healing, if you don't even have floaties or tools or capacity yet, you're going to sink.

And so what we do is we slowly walk into the shallow end, feel the water, figure it out. Here's some floaties. Let's practice without. We really take our time and that gentle pace. We're not going to go straight into like, "Let's punch a pillow today and pretend like it's that person that really hurt you."

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We do not do that. Now, some people who have a capacity. There are some clients who've been doing this work for some time. And you might end up there, but we do not start there. Because it could override the system. All those things.

So that's probably the biggest thing that I would say is that it's not fast. It is slow and it's gentle, but that is intentional. And again, what you're doing is you're creating that internal capacity that you can then carry on with you for life.

So a lot of the work that I was doing early on in my recovery, I felt like I was becoming very dependent on things outside of myself. Like my therapist, like my medications, like the practitioners or coaches.

And if I went time without them, I'd feel like I was drowning. That is not what we want for our clients. We try to get them to a place where they realize, again, you have innate internal capacity and tools.

You are hardwired to do this on your own. And we want to get you to the point where you feel self-empowered. And so that's really the cool part in all of it is showing people that the answers are not outside of them. The answers have actually always been here.

Then of course like the onion analogy. As you get deeper, there are seasons of healing where you're like, "Whoa, I just touched into something I never knew was there, and now I need support again." And that's okay. But it's not codependency.

Meagen Gibson

Yeah, I love that too, because I've experienced that with my own therapist of seasons of intense dependency when a new layer of the onion opened. And then I'm through that stage and I'm on my own. And then I can come back just when I feel a bit stuck.

I'm like, "Okay, here's what I have been trying and doing. But I can't quite see this objectively." And she's able to mirror back to me, some intuition there. But it's not codependency, like you said. I've slowly... It's been years. Been building toward my capacity.

And I think that's one of the things that trauma eats away at that we don't explicitly know, is our self-trust and belief in ourselves to handle hard things.

Because we so harshly judge the way that we responded to either when we were a child and we didn't have a choice. Or when we were adults, and we did have choice and think we should have responded differently to what happened to us.

That builds such a level of distrust in ourselves that practicing in these small moments like you described with traffic is like, if I can practice on something that was uncomfortable but innocuous.

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That won't stay with me past the moment that it happened. Then I know when these other big things come up that I've taught myself that I have the capacity to be with this. And then I know what to do.

Brittany Piper

I like to say that it's those small experiences. Those small, consistent experiences that create evidence that we can have more choice, that we can have a different outcome.

And experience with evidence over time creates a new expectation from the body. A new, subconscious expectation of like, "I'm going to walk into here and I'm going to ask for this raise, and I'm expecting something different." So you know, man, it's so cool. I get really excited sometimes talking about it.

Meagen Gibson

I'm glad that you mentioned that though, because the things that activate us aren't always negative. You just mentioned a raise. We're not always fighting our demons. Sometimes we're just asking for a raise or we've been given a really great opportunity.

Like, you're a public speaker. You've been given a huge stage to speak on and you're going to get activated. Even though this is a good thing and you're confused. You're like, "Why am I all of a sudden all activated about something that's good that I wanted? I'm confused."

Brittany Piper

Yeah, absolutely. I mean, I think it's creating more capacity to be with... Again, what feels good, what feels safe, which for a lot of people, they haven't really had that experience in their life. All they've ever known is unsafety. And then also creating the capacity to be with what doesn't feel safe. So it's both.

And that is, I'm not sure if Peter brought up. But in Somatic Experiencing we talk... It sounds very dramatic, but we call it "the trauma vortex."

So there's the trauma vortex, which is, when we live in our trauma, we are consumed by our trauma. Maybe even, our identity is our trauma. And then there is what we call our... Or we are so guided by our trauma. Maybe we just don't even recognize it.

And then there's the healing vortex, which is what we call "the counter vortex." And so in Somatic Experiencing, we work to first build that counter vortex. That healing vortex.

How do I feel safe in my body? What are my resources internally? Externally? And the more that you can build up that counter vortex of what feels good, the deeper you can go into the trauma vortex. So yeah, just random little factoid.

[00:32:41] Meagen Gibson

And then what I'm thinking when you said that was we need the Polyvagal Ladder to come down into the vortex.

Brittany Piper

I know, right? I interchange those things all the time. And so I'll be like, contraction, expansion. I'll use my Hoberman sphere ball here. And I'll be like, it's like deactivation, activation.

And then I'll go, just like the pendulation. Just like the up and down the ladder. So I'll find I go through like four analogies in the course of 30 seconds because I don't know which one lands with which person.

But that's also what I love about it is that a lot of these modalities, they really blend so beautifully together. And I know that Stephen Porges and Dr Levine, that their work has really crossed over in many ways. But a lot of the other modalities, too, they all translate well and blend well together, which makes my job easy.

Meagen Gibson

Absolutely. And I want to touch on too... And maybe this is.. I know that you said you were going to share a little bit of your personal story. So maybe this is where you'll come back to that.

But you mentioned in your book that first of all, that it only takes 90 seconds to metabolize and move through an emotion. So I love to remind people of that. I've heard that many times.

Brittany Piper

Yeah.

Meagen Gibson

Because I think that we think of this as... Especially if we've had trauma when we first start dipping our toes. And we're like, "This is going to undo me for days, if not weeks, if I start..." And so just being with one emotion. It might transform into another. Things might unfold. But like one emotion. 90 seconds.

But also just to remind people of what's at stake, which is that when we've been stuck in survival, it's harder to feel joy and safety. And that was what brought me to therapy initially, was that I recognized that I was completely disconnected and had inaccessible reach for joy, creativity, connection. A feeling of internal safety and like I had my own back.

And I was like, that's alarm bells. There is something wrong. I don't know what it is. I had no idea I had trauma. It's super obvious now. But that was like, this doesn't feel normal. I should be... When everything is good on paper, I should be able to feel joy and I can't.

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And that's, to me, what's at stake. That's why we do what we do. And that's why I talk to people like you. I just want people to know that that's what's possible. That's what's available to you if you engage in the work.

Brittany Piper

Yeah, absolutely. We use the term a lot, life-force and vitality. And I think that when we have... And it's interesting that you said, "I didn't realize I had trauma."

How many people come into this space with... I would say half of the people that come into my program are like, "I have the signs, the symptoms. I have these things going on. But I don't know why."

And then there's the people who are like, "I've definitely experienced trauma and we need to work through it."

But a lot of the work is when we haven't processed that trauma. We don't realize how much the nervous system... How much energy it takes from the body, how much it consumes, and how much it prioritizes survival without us even recognizing it.

And it can really dim our life. And so when we don't have this access to life-force... And again, when you think about that Polyvagal Ladder, right at the top is rest and digest, the middle is fight or flight, and at the bottom is that shutdown freeze.

But life-force really happens in that healthy aggression, that healthy fight response. And people think that healthy aggression is just like anger. But healthy aggression and vitality and life-force is also play, pleasure, passion, productivity.

And the word "ad gradé" comes from the Latin meaning of "to move forward, to push forward." And so if we are stuck on that ladder, that likely means that there is some fight or flight that is stuck within the system.

And when it becomes disconnected, when we're not able to be in that healthy life-force, it becomes dormant. And then we become like a doormat to life. We don't have that zest, that thrive for life and move forward. And so, yeah, it grays out your life.

And you see a lot of people now talking about functional freeze, which I explore quite a bit in the book. I think a lot of us are living in a functional freeze. It's that blended state of, like we're shut down, but we're functioning. And I think about culture in this modern world that we live in.

Gabor put out that wonderful book, *The Myth of Normal*. Normal is like living disconnected from here, down. And functional freeze is going through the motions without emotion. That's what I like to call it. Going through the motions without emotion.

And so there's a lot of people who... And a lot of the modern practices that we have today are like meditating and the spirituality and positive mindset and high vibe, and those are great things.

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But we talk a lot in the somatic space and oftentimes it's just another form of avoidance. Being up here and, "Oh, I'm feeling discomfort. So I'm going to just vibe out. I'm going to meditate." If we're doing it as a way to escape the body.

Then again, it brings temporary relief but not resolution. And we're just putting a Band-Aid on it. But yeah. So all that to say when we start to learn how to be with, and create that capacity to be in the body, with our emotions. Both what feels good and what feels bad.

Yeah we can... Life becomes much more vibrant for sure. And that we like to say... I don't know who said it. Someone said once, "When you dim the bad emotions, you're also dimming the good emotions as well." There's no way around that.

Meagen Gibson

Absolutely. And you spoke about energy, which I love when people bring up energy. Because it's a visceral felt sense when you reclaim those pieces of energy back and are able to stop.

It's like having a laptop with like 600,000 windows open and every application is going. And then when you restart and get all that memory back and all that RAM back. People that don't know computers are like, "What is she talking about?"

Brittany Piper

But I know about RAM.

Meagen Gibson

Yeah, yeah. It's just like, "Oh gosh, wow, I can do things effectively now with all of this energy back."

Brittany Piper

Yeah, it's like our computer is outdated, and it needs some updating a little bit.

Meagen Gibson

Absolutely. All right, so I want to talk about the book a little bit. Why did you decide to write this book? How much of it was informed by your personal life and experience? And also the people that you have in the Body-First Healing Program? And what you saw people needed in the world?

Brittany Piper

So I've been asked for many years to write a book and I didn't feel ready for the longest time. It was important to me that when it came time to write a book, that I felt I was at a good place in my own personal recovery. And that I had really put in the work from a professional standpoint.

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And that I had a tried and true... I wouldn't say formula. But a roadmap that I felt like really was consistently supportive for my clients. And so I was approached back in 2018, I believe, by a literary agent. 2019. "Hey, do you want to write a book?"

And at that point, I felt like I had done a decent amount and I was ready to start putting some pieces together. And so we started that process. Then, the world happened in 2020. Then I became a mom. And so I just kept putting it on the back burner and finally around, I think it was 2022.

I just said, "I think I'm ready. I'm excited. I feel like there's a lot of knowledge that I want to share. And I'm also at a place personally where I'm ready to take that step forward."

So I started writing the book and I think that the intention behind the book is that... When I worked with my literary agent and when I talked with publishers, they're like, "Is this like a prescriptive?" Which is like a self-help book. "Is it a memoir?" And so it's a blend of the two.

It is a relatable book that allows people to see themselves in my story, while also providing a lot of tangible takeaways, education, science. One of the things that I've heard in my community over many years. People ask me all the time for book lists. Like, "What books would you recommend?"

So I recommend books. And these are books that I love. And I'm looking at my bookshelves now. I mean, it's all the people we've been talking about today. And then some, and then a lot more. But people's response to that would be, "These are very science-heavy books. They're hard for me to understand."

And so for just the average reader who maybe doesn't have this language that we have by working in the trauma space. It was important to me that I put together a book that, again, was relatable.

That anyone could read, that people felt connected to, that they could again see themselves in the stories. But also provided some of that roadmap as well. So that was the intention behind the book.

Meagen Gibson

And having read it very recently, I can tell you it's excellent. That's exactly... You did what you set out to do. It's very approachable, and the front-end of it is very... Like what we've been talking about today, the understanding part. And then the back-end of it is so useful in like applying because...

Just like we were talking about with the trauma onion, if you will. What you're going through at the time and which layer of the onion that you're dealing with, is going to determine which approach, which tool, which modality you're going to use. And so you go through all of those at the end in a really skillful way. That's really nice.

[00:43:35] Brittany Piper

Thank you. The first... and it mirrors the Body-First Healing Program in the way that it's set up format-wise. So like the Body-First Healing Program, it's my six month program. It's a trauma recovery roadmap through a somatic and nervous system lens.

But, the first half of that six month program is a lot of psychoeducation. So it's learning about the nervous system and then learning about your nervous system, which can be two very different things. Like doing all of the polyvagal maps, learning what supports your system, learning your unique tools.

Then we get into... Kind of halfway, getting into some of the trauma narrative work and then later on, some of the integration work. And so it kind of mirrors titration. How we work as SEPs is that we really gently take people into the work.

And it's funny that you said earlier, some people might not want to go straight into... Or they might be hesitant to go into an emotion or a trauma because they might be out for days.

But I also see, almost just as much... Some people come into the program and they're like, "I want to talk about my trauma. I want to get through it. I want to do it now."

And so everyone comes in at a different speed. Some people are like turtle shelling. And I'm like, "That's great. Let's just follow that pace." But some people are like, they're jumping in...

Meagen Gibson

I can just imagine somebody is like, "I got a week. I'm going to get this done. I have to get back to work."

Brittany Piper

Yeah, there's a whole module or... I'm sorry, there's a whole lesson on pacing. And how slowing down the system allows the system to catch up to the present. So. Yeah, but that's what the book mirrors that pace as well, is that it's very titrated.

We get into traumatic memories. How does memory live within the body, within the brain? What is trauma? What is not trauma? Intergenerational trauma, epigenetics, attachment, all those things. Before we then get into the somatic roadmaps.

Meagen Gibson

Well, Britt, how can people find out more about you, about the Body-First Healing Program and of course, about the book?

Brittany Piper

So everything you can find at <u>bodyfirsthealing.com</u> and you'll be able to find information about the book, the program as well as myself. And then we have lots of free resources.

[00:46:14]

There's a blog and some exciting new offerings that are going to be coming out as well to better serve the community. And then they can find me on Instagram <a>@healwithbritt. Two T's.

Meagen Gibson

Fantastic. Brittany Piper, thank you again so much for being with us today.

Brittany Piper

Thank you. Love the conversation.