

Resilience and the Body: Our Blueprint for Resilience – 2014 update

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Humans, as well as animals, are born with a blueprint for resilience. We are born with a predisposition to survive in order to keep the species thriving. Part of the program is to enable an organism to fight, flee or freeze, depending on the type and frequency of challenges and threats in its life. During the formative years, we become skilled at responding to certain types of threats. When humans and animals are repeatedly exposed to the same kinds of threats, their survival response becomes habituated. When *not* exposed to a lot of threats and challenges, survival responses are less predictable and automatic. Any threat can be perceived as life-threatening, when in fact, it may not be. For instance, being put on the spot, sensing a change in a relationship or a loud noise in the middle of the night may actually be life-threatening for a very few, but simply feel momentarily life-threatening for others.

The two primary types of survival “software” are: hyperarousal and hypoarousal, both are assets for different types of threats. The “hyperarousal” style prepares the body to *TAKE ACTION*. Fight responses move us toward the threat and flee (flight) move us away from the threat. The “hypoaroused” response prepares the organism to surrender, hide or even to die without extreme pain. Some theorists believe that there may be a genetic predisposition to the styles, as well as an environmental influence.

The survival style engages all aspects of the body. Heart rate, blood pressure, speed and placement of respiration, size of pupils, and the parts of the brain activated which impacts how we process information, the timing and type of hormones released, how the blood pools in the body all depends on our type of survival “software.” Each style has assets which serve to assist us and liabilities which can have negative consequences.

HYPERAROUSAL



During a hyperaroused (fight or flee/flight) survival response, the body is preparing for movement, so heart rate, blood pressure and respiration increases and the breathing becomes high in chest, rapid and shallow (instead of diaphragmatic breathing or “yoga breathing”). Stress hormones, such as adrenaline and cortisol, flood the body to enable the engine to move. During a this type of response, the eyes focus in, narrowing, usually causing the eyebrows to furrow (unless Botoxed!) and making others possibly perceive them as hostile, irritated, impatient or disrespectful. Although a fight response is the expression of taking action by moving toward the threat, it typically does not result in verbal or physical aggression. An emotionally healthy person with this habituated response may become directive and take charge (like the photo of Margaret Thatcher to the right) when a challenge or threat looms, which can be an asset in situations which require immediate action, but a liability when more subtlety or restraint is needed. Because an activated fight response usually moves an individual into an “efficient communication style,” statements may be short, to the point, with a clipped, pressured tone and higher volume and hand gestures may be choppy and emphatic, but not usually menacing.



The fight response individual gives off an alpha-like energy, much like the dominant animal in a pack. “Efficient communication” is the antithesis of “relational communication” and this is one of the primary liabilities of fight style individuals. Sometimes a “fight” response person may get a focusing facial expression (think Snoopy when he is in the tree pretending to be a vulture). The facial expression in conjunction with the louder volume and efficient communication may appear to be angry when it may have nothing to do with that emotion. In fact, a fight response can activate another’s survival style. Let the games begin!

The flee response is also a hyperaroused response with similar physiology as the fight response, but with a much simpler goal – to be removed from the threat at hand. The asset is

decreased exposure to intensity and the liability can be removing themselves prematurely from situations that may be *worked through*. The flee style is often very animated physically, sometimes giving off the impression of being nervous or flighty, which may not be true.

HYPOAROUSAL

The single hypoarousal response is seen, initially, as outward inactivity. In particularly intense situations, the organism may “fold” or “collapse.” The inactive response can give time to stop – look – listen and assess without being noticed.

A person with a fold response typically becomes very quiet, very still while as their heart rate and respiration slows. They may hold their breath (on the exhale) for long periods of time, causing flat affect and muscle flaccidity. Because of the inability to project their voice without the breath support, their vocal tone often changes as well, particularly common with women. In intense situations the voice may get breathy, soft, higher pitched or strained. Men often yawn (the photo above is of Tony Blair – who may or may not have a preference for hypoarousal) repeatedly when the response is activated and females may be more likely to sigh a lot under these circumstances. When the person becomes less animated and less vocal during conversation, their body stills and they often automatically protect their core (abdominal) area, such as their legs coming up in a casual fetal positive, hugging their legs, placing a pillow or blanket in front of them. The bodily responses which helped the hyperaroused responders respond to the threat, temporarily disables the fold responder. The release of stress hormones are delayed up to 24 hours and the respiration and heart responses are inverted.



HYPOAROUSAL + HYPERAROUSAL

A “freeze” response is a combination of hyperarousal and hypoarousal. Internally the body may be revving, much like the hyperaroused fight/flee but outwardly it may look like fold. They, often, hold their breaths – more often on the inhale which often creates muscle rigidity and tightness. The assets for a slight freeze or fold response is being less likely to interrupt others, they may come across as more of a “team player,” less likely to activate overt conflict, and may be perceived as cautious and thoughtful, which may or may not be accurate. There may be the desire to verbally or physically response or react, but may become “stuck” in acting on the desire. The liabilities can be, difficulty being assertive (particularly in the situations when they most need them), may not take a stand and may not outwardly show their abilities and strengths as easily during high-stress or fast paced situations. These behaviors will be seen in all types of situations, from early childhood, school and work settings and in relationships. In cases where these individuals have experienced a great deal of life trauma, they are more vulnerable to being re-traumatized because of the freeze/fold response.

Most individuals have preferential styles when under great stress, ill health, chronic pain, grief or in a chaotic environment. It is essential to recognize the resilience assets of these styles, yet not use them to put people in a box. Understanding the body styles, as we might the Myers-Briggs Type Indicator (MBTI), can help family and work systems understand and work together more effectively. With training, therapy and/or education, people can learn to modify their style when it is no longer serving them. So, embrace your resilience blueprint and go forth and thrive.

Superb additional resources are any books and articles by:

- Bruce D. Perry, M.D.
- Pat Ogden, Ph.D.
- Peter Levine, Ph.D.

SUDS – Subjective Units of Distress Scale

7 to 10 – RED ZONE – “HALT!” (Hungry, angry, lonely, tired)

(A person in the victim stage “functions” primarily at this level the majority of the time)

Very high stress levels

Stress usually managed poorly

Stress causes subjective distress and dysfunction

Sleep architecture highly disrupted

No RESTORATIVE sleep, only sedating sleep (typically with chemical assistance)

Immune system is compromised

Growth hormones disrupted

Cannot retain newly acquired skills easily

Distracted, forgetful

Stress chemicals

Primitive brain is driving the bus – poor decisions making, bad judgment, less creative

Very reactive with others – fight, flee, freeze

| | |
|----|----------------|
| 7 | SPACE OUT |
| 8 | GET DEFENSIVE |
| 9 | OVER REACT |
| 10 | CAN'T FUNCTION |

4 to 6 – YELLOW ZONE – “CAUTION!”

High stress levels

Stress managed poorly at times

Stress causes subjective distress, but no dysfunction

0 to 3 – GREEN ZONE – “Neutral”

Normal stress of day-to-day living

No dysfunction

(This could also be a numbing response number – which would actually be red zone)

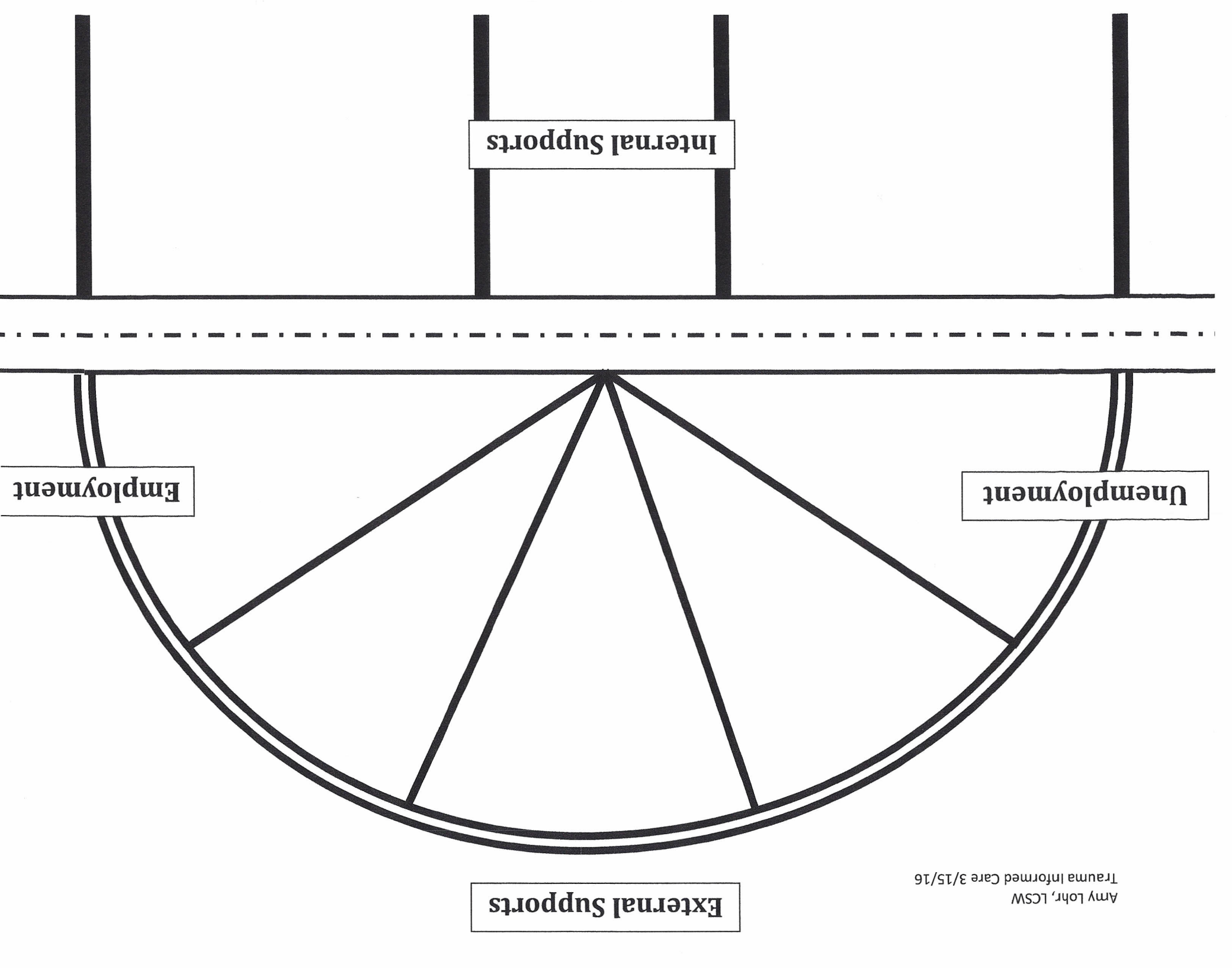
Internal Supports

Unemployment

Employment

External Supports

Amy Lohr, LCSW
Trauma Informed Care 3/15/16



Bridge Exercise

What are the Internal Resources needed to reach goal of _____?

What are External Resources needed to reach goal of _____?

What are the "Accidents", "Roadblocks", or "Traffic Jams" that you might encounter on the Bridge that make it challenging or delay you in reaching your goal of _____?

Which External and/or Internal Resources do you need to deal with those "Accidents", "Roadblocks", or "Traffic Jams"?

Are there resources that you need to develop or enhance to deal with these "Roadblocks"? (List these)

****CONTENT TAKEN FROM WEBSITE: <http://crsok.org/self-care-plan/> on 3/8/16**

Self-Care Plan

This Self-Care Worksheet will help you create a way to take care of yourself each day. Use your answers to these items to create a Self-Care Plan. You should keep your Self-Care Plan and refer to it often to make sure that you are caring for yourself.

Physical Self-Care

- Eat regularly and healthy foods
- Identify and take part in fun physical activities
- Get regular medical care for prevention and illnesses
- Take time off when needed
- Get massages
- Get enough sleep
- Take time to care for your appearance
- Take vacations
- Take day trips or mini-vacations
- Make time away from telephones and social media
- Other:

Psychological Self-Care

- Make time for self-reflection
- Have your own therapist
- Write in a journal
- Read literature that is unrelated to work
- Do something at which you are not expert or in charge
- Decrease stress in your life
- Say “no” to extra responsibilities sometimes
- Other:

Emotional Self-Care

- Stay in contact with important people in your life
- Give yourself affirmations, praise yourself
- Love yourself
- Identify comforting activities, objects, people, relationships, places and seek them out
- Allow yourself to cry
- Find things that make you laugh
- Other:

Spiritual Self-Care

- Make time for reflection
- Spend time with nature
- Find a spiritual connection or community
- Identify what is meaningful to you and notice its place in your life
- Meditate
- Pray
- Sing
- Other:

Workplace or Professional Self-Care

- Take a break during the workday (e.g. lunch)
- Make quiet time to complete tasks
- Identify projects or tasks that are exciting and rewarding
- Set limits with others
- Balance your day
- Arrange your work space so it is comfortable and comforting
- Other:

Balance

- Strive for balance within your work-life and workday
- Strive for balance among work, family, relationships, play and rest

RESOURCES

Hotlines

- **Resolve Crisis Network** (Allegheny County Crisis Hotline – mental health crises)
 - 1-888-796-8226
- **Pittsburgh Action Against Rape**
 - 1-866-END-RAPE (363-7273)
- **Warmline (Allegheny County)**
 - 1-866-661-WARM (9276)
 - Peer Support for Mental Health issues/concerns
 - Operated 10am to midnight daily
 - Not a crisis number
- **Women’s Center & Shelter (Pittsburgh Shelter)**
 - 412-687-8005

Counseling/Mental Health Treatment

Counselors in Private Practice

**Please note, most of these professionals only have the ability to accept commercial insurance or provide a fee for service; some professionals utilize a sliding scale (most are not able to accept Medicare or Medicaid)*

**All of the following professionals have the ability and experience to effectively treat symptoms of trauma & PTSD as well as other disorders (please inquire with the professional if you have counseling needs beyond addressing trauma & PTSD).*

Amy Lohr, LCSW

412-254-3441

lohrcounseling@gmail.com

www.lohrcounseling.com

Downtown Pittsburgh

Lauren Burke, LSW

412-589-9458

lburkecounseling@gmail.com

Downtown Pittsburgh

Alicia Bisaha, MA, NCC, LPC

www.abcounselingnow.com

Abcounselingnow@yahoo.com

Fox Chapel/Aspinwall

Alexa Stern, LCSW
Bloom Counseling LLC
412-440-7598
alexajstern@gmail.com
Oakland/East End

Jodie Hnatkovich, MS, LPC
Forward Wellness Counseling and Consulting Services, LLC
412-660-6100
forwardwellnessllc@gmail.com
<http://www.forwardwellnesscounseling.com>
Downtown Pittsburgh
Has additional specialized training working with women who have experienced a birth trauma (e.g. pregnancy loss/complications, stillbirth, perinatal/postnatal complications, etc) resulting in PTSD symptoms

Tory Butterworth, PhD
412-841-9872
torybut@gmail.com
www.torybutterworth.com
East End/Regent Square

Bitner Counseling
412-925-5087
www.bitnercounseling.com
Murrysville/Monroeville/East Pittsburgh

If none of the above providers work for you, refer to following website to find a mental health professional in private practice in your area (just enter your zip code):
www.psychologytoday.com

Community Mental Health Centers

Typically accept all forms of insurance, including Medicare & Medicaid

Western Psychiatric Institute and Clinic (multiple locations)
412-624-1000

Mercy Behavioral (Multiple Locations)
1-877-637-2924

Vista Behavioral (Multiple locations)
<http://vistabehavioral.com/>
412-641-7016

Family Services of Western PA (multiple locations)
888-222-4200

Mon Yough Community Services (McKeesport)
412-675-6927

Jefferson Regional Behavioral Health (South)
412.881.2255

Staunton Clinic (North Side/North Hills)
412-749-7341

New Directions Pittsburgh – located North
<http://newdirectionspgh.com/>
(724) 461-1743

Pittsburgh Action Against Rape – South Side
1-866-363-7273
All services are at no cost/no insurance needed

Websites

Meditation/Podcasts/Self-Help materials

- FREE - Meditations by Tara Brach
 - <http://www.tarabrach.com/guided-meditations/>
- FREE- List of podcasts & talks (many talks include focus on self-help as well as meditations); use as inspiration and grounding
 - <http://www.dharmaseed.org/> lists a variety of podcasts of talks focused on personal growth. Tara Brach's talks are listed on this site – just search for her name (she has 500+ talks).
- www.soundstrue.com For purchase: many self help books, meditation MP3s, etc.
- www.brainsync.com Kelly Howell's website. A great resource for meditations (for purchase & some samples for free), including calming music to fall asleep (significantly helps insomnia and stress reduction as she matches the music to the appropriate brain wave rhythm that triggers sleep)

Additional Information on Trauma

- Melissa Bradley-Hall's website. Many articles, handouts, worksheets around trauma, stress
 - <http://theomnibuscenter.org/articles/>
- Amy Lohr's website: www.lohrcounseling.com click on Resource tab for updated resource list.

- <http://childtrauma.org/> Other articles on the effects of childhood trauma, treatment, etc
- Sanctuary Model (Sandy Bloom): <http://www.sanctuaryweb.com/> (Model for human service organizations to utilize in providing care to those who are traumatized)

Eating Disorders

- Eating Disorders Anonymous: www.eatingdisordersanonymous.org
- Array of resources: www.eatingdisorderhope.com

Recovery

- Alcoholics Anonymous - <http://www.aa.org/>
- Narcotics Anonymous - <https://www.na.org/>
- Sex Addiction - <https://saa-recovery.org/>
<http://www.slaafws.org/>
- Codependents Anonymous - <http://coda.org/>
- Al – Anon (for family members/loved ones of alcoholics) - <http://www.al-anon.org/>

Healthy Relationships

www.loveisrespect.org

Books

Spirituality/Healing

- **"Legacy of the Heart: Spiritual Advantages of a Painful Childhood" by Wayne Muller**
 - Provides meditations, exercises, and information on how to heal from the pain in our life. Great insights on many of the dysfunctions and defenses we learn from our childhood pain and how to develop positive resources. Addresses topics ranging from almost all issues/areas of life that we struggle with (pain, intimacy, shame & judgment, control, drama). One of my favorite books to aid in healing and recovery.
- **"Radical Acceptance" by Tara Brach**
 - Full of essential tools for any and everyone to use in daily life to make contact with our pain, learn to heal, and not control, cling to or resist pleasure and pain in our lives (as everything is impermanent). A powerfully transforming book and a wonderful resource for learning self-compassion and mindfulness.
- **"True Refuge" by Tara Brach**
- **"The Gifts of Imperfection" by Brené Brown**

Recovery

- **"Codependent No More" by Melody Beattie**
- **"Codependents' Guide to the Twelve Steps" Melody Beattie**
- **"The Language of Letting Go: Daily Meditations for Codependents" by Melody Beattie**
- **"A Course in Weight Loss" by Marianne Williamson**
- **"Breaking Free from Emotional Eating" by Geneen Roth**

- **"Feeding the Hungry Heart" by Geneen Roth**
- **"Facing the Shadow: Starting Sexual & Relationship Recovery" by Patrick Carnes**

Trauma

- **"Trauma & Recovery" by Judith Herman**
- **"Waking the Tiger" by Peter Levine**
- **"Joyous Sexuality" by Mic Hunter**
 - Explores "sexual dysfunction" in families and helps individuals reclaim healthy sexuality; very useful for those who have suffered sexual abuse
- **"Seeking Safety" by Lisa Najavits (2002)**

Love/Relationships

- **"The Path to Love" by Deepak Chopra**
- **"Passionate Hearts: The Poetry of Sexual Love" Wendy Maltz**
- **"Why Marriages Succeed or Fail" John Gottman**
- **"All About Love" by Bell Hooks**
 - Challenges the societal notions and definitions of love and explores research on the authentic definition/experience of love. Provides thought-provoking challenges about the true definition of love vs. care.

Other

- **"Power vs Force: The Hidden Determinants of Human Behavior" David Hawkins**
- **"Asses & Angels" by Gail Black**
 - Inspirational story of survival from domestic abuse to achievement & success as entrepreneur (you will laugh, cry, & be inspired)
- **"The Soul of Money" by Lynne Twist**
 - wonderful book to challenge your ideas about money and to learn how to "align your money with your soul's integrity".
- **"To Be a Man" by Robert Augustus Masters**
 - A useful self-help book for men to relate to.