

Emotional trauma stored in your body? Release it through somatic experiencing therapy (#69)

Jean 0:00

Hello, everybody! You're about to meet Danielle Murphy, a licensed social worker who specializes in somatic experiencing therapy. She and her colleagues work with people who have experienced trauma, and are now stuck in their trauma, sometimes even experiencing post-traumatic stress syndrome (PTSD), post-traumatic stress disorder. Their approach is not just through talk, but through helping people experience their bodies, where the trauma is stored in their bodies, and how to release it.

Hello, Danielle.

Danielle 0:46

Hi! Thanks for having me.

Jean 0:49

I am so delighted to have you. When I found your article on racial trauma, I got all excited. And I said oh, she would be perfect for the blog; blog and vlog, is what we call it. And so, I'm delighted you accepted and delighted to have you here. So, everybody, this is Danielle Murphy, who is an LCSW (Licensed Clinical Social Worker).

Danielle 1:22

A Somatic Experiencing Practitioner.

Jean 1:25

Somatic Experiencing Practitioner, which we will explain. She's a psychotherapist and consultant in private practice in New York City. She has a master's in social work from New York University. And you know, I went to Columbia, my master's in social work is from Columbia. So, we're from the big city.

Danielle 1:48

Yes.

Jean 1:49

She's been working with the resolution of traumatic stress for 10 years, incorporating different treatment modalities into her work, and she has an emphasis on body-oriented techniques. And in their practice because she supervises a group of people, and they are all people of color, as you've explained to me. So, she works with depression, anxiety, traumatic stress, all of the above. And she'll explain all that. So, Danielle, welcome.

Danielle 2:30

Thank you.

Jean 2:32

So, let's start off, I want to get to who you are and how you got here. But, let's get clarity on our terms here. What is trauma? What is traumatic stress?

Danielle 2:45

Okay. Yes, these are good questions. These are words that I think are pretty popular in our culture right now. But it's good to get clear about what it is we really mean. And when I'm

talking about trauma, I'm really talking about any event in our lives, any experience in our current lives, or actually in our history as well, that was overwhelming for our nervous system. So, it was just too much to take in and to process and understand it in the moment. And traumatic stress is the sort of energy that you feel in relationship to that overwhelming event.

Jean 3:30

Okay, so it's overwhelming to our nervous system, meaning our brains can't cope. Right?

Danielle 3:38

Yep, basically.

Jean 3:40

And so, when we're experiencing traumatic stress, what does that mean? What are we doing?

Danielle 3:47

Um, as in like the event that we might be experiencing, or like what our body is doing?

Jean 3:52

Oh, after. Okay, during the trauma everybody could get that during trauma, we fall apart. Okay, we get that. But after it is over, why does it linger? Why can't people just forget about it and move on?

Danielle 4:09

Oh, yeah. So, when something is traumatic and overwhelms our brain, our nervous system, overall, the way that our brain holds on to that memory is different than if it was an event that wasn't so overwhelming, where it would get kind of processed and stored away as a memory. Whenever it's something that is traumatic, it's stored in this sort of broken up way in our minds. It's not something that we can just integrate into our stored memories. And so, it hangs out with us, both in our minds but also in our body itself. Hangs out in the way that we hold our posture and our muscles and our body sort of has this memory of this thing that happened and is waiting for an opportunity to be able to express that memory and complete it so that we can resolve that stress and move on.

Jean 5:07

So, say that last sentence again, it is waiting for...?

Danielle 5:11

It's waiting for us to be able to give our body a chance to kind of share what it needs to share. So, to express that traumatic experience, whether that's in completing an action or words or emotional connection to the experience, and once we've had a chance to complete that the body is able to re-regulate and settle back in and the memory can integrate and we can move on.

Jean 5:48

Okay. So, let me say back to you what I think you're saying, and you correct me if I get the words wrong.

Danielle 5:55

Great.

Jean 5:56

Okay. So, trauma hits.

Danielle 5:59

Yes.

Jean 6:00

The stuff, memories of it, our muscles freeze, our muscles do things because the whole body is being affected and it sort of gets frozen.

Danielle 6:11

Yeah, I think that's essentially right. I mean, it's definitely beyond our muscles, right? Our whole body is involved in this. And, it could be on a muscular level, but it could be cellular heart rate, lots of different elements of the body that could be kind of frozen up here. And then it grabs on to that thing. And it's there and it's waiting, if it doesn't get to complete in the moment.

Jean 6:38

Okay, so it's there and it's waiting. And so, that's why if the trauma event happened at the grocery store, every time I go to another grocery store and it is over, my body remembers. It remembers the attack, and my body and everything gets reactivated?

Danielle 7:03

That's exactly right. There can be associations that trigger that fragment of a memory in it. For that, it can be the location, it can be a smell, it can be a color, the sound of a voice, the tone of a voice. Because those memories are so fragmented in how it's stored, really any piece, even something that seems totally insignificant in that moment, could bring back that memory and put us back in the state we were in in that moment in our bodies and minds. So, it's not just remembering that, it's reliving. Because it's not stored as a memory, this is a fragment that our body's like, oh, I'm back in this thing now.

Jean 7:48

Ah, okay. It's not stored as a memory, we're reliving it.

Danielle 7:56

That's right.

Jean 7:58

Okay. So, when you said it has to be integrated. Integrated means it gets stored as a memory, and it's no longer a current living experience. Is that what that means?

Danielle 8:11

Yeah. I think that's a significant part of it. Yeah.

Jean 8:16

Okay. So, I was talking with someone who experienced recently a traumatic event. And she called me up saying, I'm still discombobulated. I'm having trouble focusing. I'm having trouble doing what I'm supposed to do. What's wrong with me? Well, how would you answer her?

Danielle 8:44

Such a common experience, right? And, what I would say is that your body is still processing what happened, or trying to process what happened to you. And it needs the time and space to be able to kind of catch up to the present moment. And so, I would get curious about what that discombobulation is feeling like. If it feels like confusion, or if it feels like racing thoughts or something along those lines, or maybe it feels like feeling totally removed, and like you're moving through molasses. And so, you know, any of this flight or freeze responses, we can get stuck in that because it was too fast, too overwhelming for us to understand what happened and actually have the response that we needed to have to protect ourselves.

Jean 9:42

Okay. So, I had something that happened to me years ago that just knocked me to my knees. What happened was I had to go teach a class shortly thereafter, a graduate class, and I felt like I was in the twilight zone, I had been transported. So, the students are talking and I'm talking and I'm observing this whole thing going on and nobody seemed to notice that the world had shifted.

Danielle 10:19

Yeah. Yep. Yep. Yeah. So, I mean, such a classic sort of post trauma experience in our culture, and we don't get to slow down. So often, something happens and we have somewhere to be. You know, we get into a car accident, we're immediately moving into, okay, insurance and all of this. We haven't had a chance to even come back to ourselves after this big thing just happened. So, we're going to be in a state of confusion. Whereas, one really significant protective thing is that, if after something big happens, we can take the time and space to really feel what's happening for ourselves at a body level, emotional level to be able to notice what's happening. Maybe your hands are shaking, maybe your heart's still beating really fast. And if we can let ourselves be with that, and naturally settle, because our bodies are really designed to go through even intense activation and be able to settle. And so, if we can give it the space and time to do that, it's going to naturally release that traumatic stress energy, and you probably aren't going to experience any PTSD from it. But if you have to keep it moving, as we so often do, now we have a higher risk of that becoming more of like a PTSD event.

Jean 11:48

Wow. Okay, PTSD, explain that.

Danielle 11:51

So, post-traumatic stress syndrome, or disorder, is the official diagnosis for someone who's experienced a traumatic event, and is having long term symptoms that are...it's essentially these fight flight freeze responses that are showing up in our bodies and we've come up with labels for them.

Jean 12:20

Okay. I want to talk with you in detail about what you do with a person who shows up with those symptoms. But first, let's talk about you, okay? How in the world did you end up going into somatic healing? Just take us as much as you're comfortable with. I know you're a therapist and therapists don't talk about themselves, but so much. But as much as you're comfortable, tell us how you got into this field and why you are doing this?

Danielle 13:02

With somatic experiencing, and that training, I've learned that the human connection is such an important part of healing that I've learned that using my own self and experiences is sometimes so, so deeply important to the work. So, I might be a little more on the liberal side of sharing.

Jean 13:25

We're good. I'm all the way over.

Danielle 13:30

But so, let's see. So how I came to somatic healing. I mean, the first introduction I had to it was at an NASW Conference (National Association of Social Workers). And I went to a workshop and the person leading it was a Somatic Experiencing Practitioner, and started the workshop off with the simple orienting practice, which is an invitation to just let your eyes go where they want to go. You're not purposeful, or looking for anything, you're just letting your eyes sort of take a look around in the ways that they might want to, and then notice what happens. And I noticed such a distinct difference in my internal experience from something so simple that I was like, I want to know more about that. And so, I went home and I...

Jean 14:26

Wait. Hang on.

Danielle 14:27

Okay.

Jean 14:28

What was the before and after?

Danielle 14:32

Well, the before was like, probably just tension in my body. I'm at this conference, I've just sat down, I've been moving about and I'm among professionals. I was a very new professional at the time, and so maybe some social stress as well. And I'm feeling all that and then I do this sort of looking around and there's like a deep breath that comes in and my shoulders drop a little bit. And I'm just like, oh, I'm safe here. Okay, here I am.

Jean 15:05

Oh, how cool.

Danielle 15:08

Just so simple, but offers so much. Yeah.

Jean 15:11

Yeah. As you were talking, I could actually feel the difference. If I'm a professional on red alert, I'm supposed to be attentive, I got to pay attention. I got to, got to, got to. And then just sit and let your eyes do what you want to do. Oh. You can experience just being there, as opposed to being on performance.

Danielle 15:38

Right. Right, exactly.

Jean 15:40

How cool. Okay, so that's when you said, okay, I got to know more.

Danielle 15:45

That's right.

Jean 15:47

Okay. So, we're oriented toward racial and social justice. You made a point when we were talking before this, to say that the therapists you work with were all of color. And you focus on that. So, tell, what was your earliest racial experience?

Danielle 16:08

Oh, gosh, that's a great question. Earliest racial experience. My origin, you know, is that I'm a biracial person. My paternal family is Caribbean, African American from the Bahamas area. And then, my maternal side of the family is German and came here, like, hundreds of years ago at this point and have lived in Pennsylvania, farming since then. So, really different lineages that come together in my being. And so, you know, it's hard to even know like a first experience, because I think growing up in a multiracial family, you know, in the 80s, is like, this just wasn't as accepted then. So, it was something that I was pretty deeply impacted by from, like, in utero on, but that we didn't have language for in the way that we do now, or my family didn't anyways, and therefore I didn't. And so, while I was being really readily impacted by these things all the time, I definitely didn't understand. So, it was hugely impactful on my formative years, but not something that I was able to say like, oh, that was racially motivated, or this feels bad because of this reason. So, in a lot of ways, it's hard to identify a first.

Jean 17:51

I can get that. So, where did you grow up? I'm guessing the Northeast?

Danielle 17:55

It was in the Northeast. Yeah. I grew up in Pennsylvania.

Jean 18:02

Oh, Pennsylvania. Okay.

Danielle 18:03

In the Harrisburg area, which is the capital. Nobody knows that but it's true. It would make sense that it'd be Philadelphia, right? I grew up here. And, it's not necessarily like a small town but it's not a big city. And so, you know, the area that I grew up in did have some diversity. But it was often pretty segregated. So even if there were Black folks and White folks in the same school, it was very clear that, you know, people grouped off and often they grouped off by race.

Jean 18:48

Oh, they did? So, where did you go group?

Danielle 18:53

Well, I was never, I never really had a home base being, you know, multiracial it was definitely a conflict for me. And so, I sort of made my home base with other people who didn't fit in, in the same exact way.

Jean 19:10

Oh, yeah. I love it. That's right. Find your own.

Danielle 19:13

Yep. So other multiracial people, other people who just didn't fit in for whatever the reason is. And, you know, as a result, found my people, the people who I felt good with.

Jean 19:26

Okay. So, as a young child then, you were a survivor. You made it work. You figured out how to make it work for you.

Danielle 19:37

Yeah, I mean, for sure. I figured out how to make it work for me. And I think I didn't know what I didn't know too. I knew something wasn't quite right. And I also didn't know how to frame that until probably college when I got away.

Jean 19:54

Okay. So, what would you say to that young child who didn't know how to frame it? What words would you give her today?

Danielle 20:05

Wow. That's kind of a profound question. And you know, I have a five-year-old. So, it also resonates what I say to her and how we talk about it, which is that I guess there's no one thing, it's more like having identity be a part of the everyday narrative, allowing for my child to know who she is. And what I would say to myself at that age too, to be in conversation about what it is to have brown or Black skin and to be in a society where there are things happening that are harmful to people who have brown and Black skin, well to everybody, but, you know, in a unique way, to people of color. And I would have wanted me as a child to just know so clearly that who you are is wonderful and beautiful and enough, and people aren't always going to see that or treat you that way. But that is just so inherently and deeply true, what other people have to say doesn't define you.

Jean 21:40

Okay, that's beautiful. Yes. And to know what you're worth. I was raised in the segregated south. And what my parents told me was any White people who were mean to us were just ignorant. I was raised that that's just flat ignorance. And they are so ignorant. They don't even know how ignorant they are. They think we're the problem. So, that was the narrative I was given.

Danielle 22:11

Yep. Yeah. that feels right.

Jean 22:16

Okay. So, I get how you got into somatic healing. And that is manifest in the body. So, I didn't ask you this, you heard about traumatic healing when you were already a social worker?

Danielle 22:39

Yeah.

Jean 22:40

So, you had finished having your graduate degree. So, you had to switch up somehow and specialize, correct?

Danielle 22:50

Well, no. So, when I first decided to go to grad school, I knew that I wanted to do work around trauma. So, I had done internships in that area. And, what became a very important experience when I was in undergrad, and teaching, I was supported in like a teacher's aide support role at a local school. I went to Temple University, which is in North Philly, and it was my first time being really exposed to poverty, seeing. I certainly didn't grow up with a ton but we had what we needed. And so, I was exposed to something really different there. And teaching in that school, I was seeing a school of primarily young Black children, elementary age, who just didn't have their needs met and were meeting parents who were doing what they could, and they were in systems that were failing them and their children. And while working there, getting to know these children in the after-school program and just seeing this beautiful potential, these young hearts that were just so incredible but they already had faced more than anyone shouldn't in a lifetime and was really impacted by those stories. And, there was one particular child who struggled a lot and got in a lot of fights and just had a lot happening for him. And he ended up being expelled while I was working there for using a brick to hurt another child. And, it was pretty severe. And, you know, when we were reflecting on that, as a teaching team, like what happened? How did this happen? What it really, there's tons of things that came together but it was this child has been failed by a system and has no way to communicate that or hold that. And, this is what this child figured out how to do in that moment. And now it has a lifetime of consequences with it. And so, for me, it became clear at that point, I don't have the skills that I need to provide the kind of help that I want to provide. So that was when I was like grad school: here I come, I need to get some more education and have the freedom to help in a different way.

Jean 25:30

Okay. Is that what spawned your interest in trauma, that child and witnessing the other kids?

Danielle 25:36

I think that's what helps me to get clear that that was a professional path I wanted to follow. You know, certainly I have all my own life events that have contributed as well, because most of us do.

Jean 25:51

The wounded healers.

Danielle 25:52

Yes, indeed.

Jean 25:56

Okay. So, you had your own life events, which meant that when you saw this child and other children like them, you said, this is familiar enough that I want to make this my life's work?

Danielle 26:09

Exactly.

Jean 26:11

When you were a mixed-race child, biracial child that found your own tribe, did you think of yourself as "other"? We're the other people. The Black people and the White people, they were clearly defined. You understand what I'm trying to ask you? And you were "other" or did you say, "Black people," "White people," "Us" and we're all our own group?

Danielle 26:48

Yeah. It was very clear that I didn't fit into any particular category; I wasn't Black enough for the Black crew, I wasn't White enough for the White crew, and it was always a point of contention. There was frequently conflict with other students, I was quiet, kind of focused on education, really interested in reading, sort of person. So, I wasn't, I don't know, getting in fights and stuff. But there was always conflict when I was trying to find my social group. And so, it was really clear to me there's something different about me, and I don't fit in. I don't fit into these groups, there is not a place for me in the way that people have sort of separated themselves.

Jean 27:47

Did you have someone to talk with about this? Or was this all just in your head?

Danielle 27:52

This was in my head. At that point, there was no conversation about this in my home or my school. So, there wasn't, I want to say my siblings and I probably talked about this towards high school. I mean, this is so long ago now but I have some, like big memory of that. And that that was definitely supportive to have siblings that were close to my age who were having the same experience.

Jean 28:23

Yeah. Okay. So, you weren't really alone then. I mean, it was an alone feeling but you did have siblings. You eventually had your own tribe.

Danielle 28:32

Right.

Jean 28:33

So, you had a place to put it.

Danielle 28:38

Right.

Jean 28:40

Did you choose social just...this might be a tricky question for you. Did you choose social justice or did you choose social work? Or, were they the same for you?

Danielle 28:55

I chose social justice. And, I distinctly remember in my undergrad experience, there was a teacher who was also the dean of psychology, who I sort of started going to office hours and she became a mentor to me. And I started talking in my senior year about our junior year, probably about what's next for me, and what I wanted to do, and I was looking at masters in psychology programs, but not finding one that fit. And she was like, I hate to tell you this, because, you know, there's kind of a thing between social work and psychology, but it sounds like you're really like a social worker, your heart's in social work, and you're going to get the education you want in social work. So, I started looking at those programs and that's when it was like, oh, yeah, I'm definitely going to social work school.

Jean 29:45

Okay. So, for the listeners who don't know the difference. What's the difference between social work and psychology?

Danielle 29:56

Yeah, I mean, at the risk of getting myself in some gig here, psychology students who hear this, but, you know, in my experience, the sort of key difference is that in social work, we're talking about the person in the environment; we're really looking at the collective experiences around a person, their internal psyche but also all the systems that impact who that person is, and how they get to show up in the world. And then, as I understand it, in psychology, a focused master's program is really more about the internal psyche, and really understanding that internal experience. So, less focus on the environment.

Jean 30:40

And in social work, we can work at the level of environment or at the level of the individual. Whereas psychology, they don't generally work both areas unless it is organizational psychology.

Danielle 30:54

Right.

Jean 30:55

Okay. So, now we're getting to the good stuff.

Danielle 30:59

Yeah.

Jean 31:00

The good stuff is, what in the world do you do? The person shows up, in trauma, possibly in PTSD, sits down, starts telling the story and crying or they're too frozen to cry.

Danielle 31:19

Yeah. So, when a person comes in and they have a lot of trauma to talk about or to work with, often, they're coming in with a lot to say in that space. And most of us kind of think therapy, we're going to come tell our story. And so, the first point is surprises, I'm often looking to connect with that person, and to say, okay, let's slow this down. And we're actually not going to tell the narrative right now, we're going to start by learning how to be with the body, how to experience what's happening for us right now in this present moment. And to trust our body and ourselves to be able to be present to whatever's going on. So that then when we start to look at the trauma narrative that happened, we're going to work through it nice and slow, but we're going to do it in a way that we can really trust that we're going to be able to manage whatever comes up.

Jean 32:18

Ah, so the skill first. And I'm reminded of the exercise you talked about, where you let your eyes go where they want, experience your body. And so, you develop the skill of experiencing your body first, and trusting your body, before you delve into something so upsetting.

Danielle 32:43

Exactly, and that can look like a week or two of session, a session or two, for some folks, it can take a long time to be able to come back to access your own body and your being. I know for myself, right? Like when I first started the SE training, Somatic Experiencing training,

and I'm sitting there after, I don't know, eight years of talk therapy, and I'm like, all right, I think I've got my own trauma stuff in order that I can be in this trauma training, I'm going to be all right. And then it was just like, time to practice and I was like, you want me to actually feel my body? That's not happening. Are you kidding me? You've got to be kidding. And so, you know, I had to really work to be willing to do that. And, it took, I don't know that year or so to be able to really come into contact with myself and feel safe in contact with my own body, my own internal experience. And what made sense to me at the time was I have blocked this off because I've had so many experiences in my life, particularly being in rooms of mostly White folks, as was the case of this training and in my college experience and growing up as well. And, I've learned that in order to feel safe, I had to shut down. I had to really create a nice solid wall and protect myself. And so, I stopped really feeling.

Jean 34:19

Whoa. Okay. So, let me just sit with that a moment because I have exercises that I have people do that some flat won't do and I never understood why. And you're telling me that the reason some people don't--I call them emotional clearing--the reason people don't want to do that is they literally don't trust their bodies.

Danielle 34:46

Right. It's a very scary space to be, if you don't know that you're going to be able to handle whatever happens there. And so, we can become so separated from our own lived experience in our bodies that that can be a thing where if I invite somebody, a really common phrase I might use is like, how are you noticing that in your body? It's not uncommon at the beginning of treatment for someone to look at me like, what? What does that mean? And how would I feel that and I feel nothing? What do you mean, feel that in my body? And it can be that we have to really build that vocabulary, but also build that sensation awareness.

Jean 35:30

One person said to me, this is some years ago, Jean, you're asking me to go down into a pit hole that I will never be able to get out of.

Danielle 35:39

That's right. That's right. That's what people often think. That's what I thought. I thought if I start crying, if I feel this and I start crying, I may never stop. And then what? I have a life to live. And that's not true. That's not what happened. But that was the fear.

Jean 36:00

Oh, my goodness. Okay. So, you have to first get people accustomed to noticing sensation, noticing sensations in their bodies.

Danielle 36:12

Yeah, that's right.

Jean 36:15

And knowing they can go through that.

Danielle 36:17

That's right. And even befriending your body, if you can, really learning that this is a safe place, this is a place that protects me. This body is capable. Really developing a positive sense of empowerment in relationship with your own body and being, that's really the first step.

Jean 36:36

What does that mean?

Danielle 36:40

I guess it's sort of the element of trusting; it's the trust part, for sure, of knowing that if I get into this, whatever scary stuff that I've been avoiding, or trying really hard not to look at, that when I face that, this body of mine was actually designed to be able to ride that wave of stress, and I'm going to come out the other side, just fine.

Jean 37:12

Okay. So, when you say "befriending," you don't mean patting myself?

Danielle 37:17

Oh, not necessarily. Although maybe there's lots of wonderful physical and somatic exercises that you can do to build a relationship with your body in a way that's compassionate and kind and that could be really nice.

Jean 37:33

Okay. So, you can do that. You can learn to have compassion for your body. You can learn to notice your body, you can learn to realize that your body is a safe place. And that if you go deep into an emotion, you won't sink and be lost forever.

Danielle 37:53

Yes.

Jean 37:54

Your body is designed to bring you out of it.

Danielle 37:58

That's right.

Jean 38:00

Okay, now what?

Danielle 38:02

Okay, so when we develop that sense of safety, then from there, now we might actually really start to get into the events that a person experienced. And then what we're looking to do is, a combination of slowly working through whatever the experience is, if it was a single event that we can pinpoint, we might slowly work through telling that narrative and while we're doing that, we're going to be tracking what's happening in your body as you tell me the story in this present day. So, I might be telling you, okay, I was driving along and out of the corner of my eye, I saw a car coming really fast. And, that could be the whole session. It is just slowing down right there to the memory, and what happens is you're present in your body right now in this moment as you see that car coming really fast out of the corner of your eye. And it might be like your heart rate speeds up, you might notice that there's some tensing in your shoulder and your arm, your fist comes in, right? Like your body started to protect itself in that moment of orienting. You might notice, okay, so when a person is experiencing any sort of like abrupt stimuli, we naturally have this startle arrest moment where our body stops, and it's like deer in headlights, we find the thing that startled us and assess it really quickly, in a microsecond, if that's safe or not.

And so, in the treatment I'm slowing all that down, so that we can really notice each of those little moments that happened, and how it's still showing up in our body now. And there'll be some parts of it that it's like, yeah, there's nothing really there in the body anymore. And so, it's all good and we'll keep going. There'll be other parts where the body is really doing things, the muscles are tensing, you know, all these different things are happening. And for that, now we're inviting the body to do what it wanted to do in that moment. Say your hand wanted to come up and protect your face as that car was coming towards you. And in the moment, the collision happened too fast for you to protect yourself, your body still wants to complete that movement. And so, in that moment, you might be seeing less tension happening. And then as we're supporting that to organize by using our attention, to just notice the muscles, we're not making anything happen, we're just noticing on this unintentional level, your hand, your arm might start moving in this way. And if we could not be too freaked out by it, and just trust our body to do what it needs to do, we will come through that movement that needed to happen and then there will come a point in the experience of that where it feels complete. And it might be that there's some people report like a trembling, like a pretty deep in your body like trembling, that happens. Some people will have a lot of deep breaths, maybe there's tears, but there's often some level of sort of release that happens when the energy shifts over from this high stress to the body saying, I'm safe. And it's settling.

Jean 41:25

Wow.

Danielle 41:26

Yeah.

Jean 41:27

That just must feel like a miracle each and every time.

Danielle 41:34

Each and every time. It's incredible. I feel, as a practitioner doing this work, I genuinely feel like I'm witnessing a miracle when these things happen. And I also feel like, you know, I really believe that, like our bodies are designed to heal. And when people need support for that healing, I'm not healing anyone, I'm simply observing and supporting that body in finding its way back to the way it was designed to be. That organic internal intelligence is there and my job is just to help to reconnect to that. And that's, it's just, it's truly a beautiful, incredible thing to witness.

Jean 42:20

Okay. So, I'm trying to breathe here, because I was with you the whole time. Okay, so sessions for them to have to relive and experience the moment, to complete whatever it was that their body wanted to do to protect itself. So, we get through that, then what? Because, we've got to go live a life, right?

Danielle 42:49

That's right. And a lot of times, we don't make it through the whole event in a day, right? A single event might take a handful of sessions. But, if you live in a body that's experienced systemic oppression, and we're working with that, you know, this is something that could be taking a much longer time because there's probably a lot of different events. And even though we won't need to work every single event that happened because once we get some healing around a piece of it, it often kind of has an effect where you feel a difference across the board. But so, you know, so once we've maybe had a few sessions, and we've

worked through an event together, we are also going to be taking pauses to integrate. So, to notice what's different between last week and this week, or between last month and this month? What have we noticed that is different in our experience?

And, this is where the second part of the miracle happens. Not only did we get to see this miraculous experience of the body doing what it was designed to do, but then also you start to hear reports like, this week, this crazy thing happened. So, here's an example for myself: after doing some work, I went to get on the subway to go home in New York City, and there was an accident. And so, the train was shut down. I decided I am going to go get a cab and go home. And of course, everyone else had the same thought and I had to walk really far away from that subway station to get a cab. And so, it had been like 20 minutes and I was trying to get a cab and I'm on this corner far away and I see a cab and I'm like, yes, this is mine. The cab driver makes eye contact with me and is coming towards me and then on the other side of the street, this other couple decided they were going to try to take the cab and so they ran into the intersection. They started running into the street to catch this cab. And because of the way that trauma showed up in my body, I often would have just been like, darn it, that was mine. But something clicked in me in that moment and I was like, no, that's mine. And I raced into the street and hopped in that cab. The person was yelling at me. And I was like, it's my cab. And the cab driver was like, good for you.

Jean 45:25

So, before you would have said, oh, there's nothing I can do. I'm weak.

Danielle 45:30

That's right. That's right.

Jean 45:32

I can't protect myself. But, you switched on a dime and said, I can protect myself.

Danielle 45:41

That's right. And it was such a classic thing. I've now come to see where it's like my body was kind of clunky, where it wasn't just like a smooth oh, yeah, I should get that's my cab, I should run and get it. It was just like this weird sense of pieces coming together in my body that were like, yeah, this is actually what we do now. And then there was this triumph that comes too of yes, I successfully did what I needed to do to protect myself.

Jean 46:14

It's called empowerment.

Danielle 46:15

Yes, that is empowerment. And so, you get to start to hear those stories. And when clients start to share these sorts of shifts that happen in their lives, then we take the time to really sit with that and savor that to notice what is it like to have protected yourself? What is it like to have done something different? How did the people in your life respond to that? Maybe you stood up to your husband, maybe you stood up to your partner and said, no, we're not going to always do it your way. And how did that go? And how did that feel? And we start to integrate both our thinking brain and our feeling brain, so that we have had the experience and we also can have this thoughtfulness around it of understanding this is what happened and this is really how I've changed.

Jean 47:05

So, I want to ask you, I'm wondering, does trauma produce helplessness most of the time? Or is that, you know, you describe the boy who threw the brick. So that's acting out. So just talk to me about those two manifestations of trauma.

Danielle 47:24

Yep. So that's often true. And then the way that that trauma shows up can differ, people tend to get stuck in different ways of operating related to the trauma, where it could be like they have a fight response, right? So, they feel helpless, but they feel the need to try to protect themselves through fighting. And so, this person might become really easily agitated, this person might go to fight really fast. You know, this person maybe complains a lot. There's a whole range of how this might show up. This person is often really hyper vigilant, very aware of every possible slight that's happening to them.

And then there's someone who's in flight mode. And often I see the folks who are stuck in flight mode, who have panic attacks a lot, who just really need to get away when a relationship isn't going well, and so they're out before there's ever a chance to reconcile. Where, you know, if they are experiencing something they don't like, they are probably leaving, they're not sticking around to sort it out.

And then there's the freeze mode, which often comes about because whatever was so overwhelming, and their fighting or fleeing weren't possible, and so what's the final option that you have i to freeze up. Like evolutionarily, that's like animals tend to not eat things that are already dead. So, if we'd freeze and feigned death, then we're less likely to be eaten or current day conflicts, right? So, freeze might happen. And these people it might look like depression, it might look like just really low energy and very sleepy all the time. It might look like just kind of slow movement, slow speech, having trouble remembering things, having trouble organizing themselves. Yeah. A lot of symptoms that we classify as depression, a lot of times.

Jean 49:34

Okay. So, on the one hand, we have helplessness, people just go into helplessness. But you also mentioned this kid that threw the brick, so does trauma show up as helplessness?

Danielle 49:51

Well, I think the precursor to trauma often involves feeling helpless in the face of threat. But then, the way that we respond to that trauma is it's going to show up in some of these; people commonly have heard of this classic fight, flight, freeze. Those are the ways that we kind of respond to threats, right? And so, for this person, he was likely in the fight mode, where he had got stuck in this space of feeling like, in order to survive, I need to really be alert and ready to fight for myself. And especially as a young person who was in a really complex home dynamic and environment, he didn't probably have the sense that the adults in his life were going to take care of him. So he, at a very young age, decided I'm going to do what I have to do. And at that young age, you don't have the physical ability necessarily to protect yourself. And so, it doesn't surprise me that he used a brick, it doesn't surprise me that he went to what he needed to use to feel safe for himself. So, he probably felt helpless in his life. And so, he decided to do what he needed to do, decided is kind of the wrong word. His body propelled him to do what was necessary for survival. Because that survival instinct is more powerful than our thinking brain can stop us. I don't know if that's exactly how I want to say that.

Jean 51:41

That's good. So, let's talk about racial stress, racial trauma. Does that exist and is there a difference in trauma? Would you know? Because you, do you specialize in people of color?

Danielle 52:05

Mm hmm

Jean 52:06

Okay. But do you know if there's a difference between trauma as experienced by Whites, and that experienced by not just restricted to Blacks but people of color who have racial trauma on top of the other?

Danielle 52:21

Yeah. Well, so it's not that I would say that trauma itself is different, like the way it shows up in our bodies, has some universal qualities. Our nervous systems don't know the social construct of race.

Jean 52:41

Wait a minute. Just say that sentence again. That's a great sentence.

Danielle 52:47

Our nervous systems don't know the social construct of race. Right?

Jean 52:55

Right. Okay.

Danielle 52:56

Yeah. So, it's not that the way that trauma shows up in our bodies is going to be different, or looks different. But, the types of compounded stress that you're going to see with a person of color--Black person, indigenous person--is, I know that I can expect that most likely, certain things are going to show up. Like if a person lives in an environment that is set up in a way that they are considered as "other" or something about them is not accepted. I mean humans are pack animals, we're meant to be together. And so, if there's something that's separating someone out of the group, that's a mortal threat. So, our body is receiving this like, my life is in danger here. Because this group is not accepting me and I'm not safe. So, we have that happening outside of our awareness already.

Then you have like all the other microaggressions and macro aggressions that are happening, which are threatening experiences, compounding, and then there's also the genetic component of what's been passed down through generations that's in our bodies and we may be experiencing even though we weren't alive during enslavement, per se, or holocaust or something like that. But nevertheless, because of what we've come to know happens in the genetic coding is that stuff gets passed down, and we still are feeling that in our bodies now. And so, I know that when a Black person walks through my door--which is the majority of my clients--that they're walking in, regardless of what their present life circumstances are, they're walking in with all of this already there. And then on top of that is whatever trauma brought them in. Sometimes people will come in and just say I got promoted and I'm the CEO of this organization now. And, the amount of racism I'm experiencing is overwhelming. And sometimes, that's the prompt for coming in. But a lot of times, it's I got mugged, and I'm completely incapacitated now. And as we start to get into it, and they're so overwhelmed, it's, yes, this event happened but that was just the thinking that sent them over the edge, they have all these other complex experiences that had them kind of filled up to maximum before this new thing happened.

Jean 55:40

Do you do long distance? Do you do virtual?

Danielle 55:45

I do virtual therapy, because of licensing. It's tricky that I can only (myself and those in my practice), can only operate where we have a license, or we can only practice where we have a license. So even though I'm virtual, it's with New York and Pennsylvania, at this time, and then sometimes because I support teaching and the somatic experiencing program out, I am able to do somatic coaching sessions with people who are elsewhere who are learning the modality or who just want to have an experiential session, but not have a therapeutic relationship.

Jean 56:22

Because I'm thinking you're going to get some inquiries, and suddenly I had a flash, what are the people in Texas and California supposed to do if they want to work with you? Do you refer out?

Danielle 56:36

I do, I do. I have a robust network of amazing practitioners across the world who do this work. And we're building up the amount of practitioners of color, that's really a mission of mine. And so, we're increasingly getting more folks who have this knowledge and skill base out in the world who are all over, the country, but the world actually. So, yeah.

Jean 57:01

Well, I'm just overwhelmed. This has been an amazing experience with you. And I thought I understood trauma before today. But, it's like with any subject; the deeper you go into it, the more you realize there is to know.

Danielle 57:27

Absolutely. Yeah.

Jean 57:29

So, I'm trying to see if there's anything else. Okay. A listener, a watcher who's seeing this, who is saying she's talking about me. She's talking about me, what am I supposed to do now? What do you say to that person?

Danielle 57:53

I'd say I'd love for you to get into a somatic practice. And maybe that looks like finding a therapist who does this work, or another kind of practitioner. But also, even beyond that, because I know therapy is unfortunately, in our very broken healthcare system, not always accessible. What I would say is, you know, where I started with that orienting exercise, that is a beautiful place to start. And, I often encourage my clients who come in with these complex trauma experiences that this is a lifestyle, we're not just looking to work for an hour in the office a week, we're looking to change our life in a way that we are inviting ourselves to be in relationship with ourselves in the world in a different way. And this very simple orienting exercise often facilitates that in a profound way. And so, if a person can take 10 minutes a day, in a room, in an office, or go for a walk, whatever is accessible to you can allow themselves to just let their eyes go where they want to go, simply relaxing. We're not looking for anything. We're just allowing this relaxed awareness to see door, ceiling, there's a light

over there. Oh, my coffee is still half full. There are yellow flowers out the window, right? So very simple. We're doing that and then that allows our bodies to just have some access to safety. And for so many of us, we don't get to feel that ever. And so, to just begin to offer ourselves those little moments of a sense of safety is a massive part of feeling.

Jean 59:38

Okay, moments of safety. Okay, what you've described I've learned as a mindfulness exercise. So, it's the same thing?

Danielle 59:48

I would say it's pretty similar. There are definitely nuanced differences because with orienting, we're really focusing our attention outward, we're not focusing inward. And with mindfulness, we tend to be a little more oriented inward to what's happening. So, it's really about noticing what's around you so that the brain mechanism that allows us to be outward is actually turning off what's inward and vice versa. So, it just gives us a little break from that internal processing that we're all constantly doing.

Jean 1:00:21

Okay. Well, Danielle, this has been highly informative. I thank you. We're going to have footnotes below this and put that where we will have your information.

Danielle 1:00:34

Awesome.

Jean 1:00:35

Does your network have a name? If someone outside of Pennsylvania or New York wanted to find a practitioner, what should they do?

Danielle 1:00:46

They should go to traumahealing.org.

Jean 1:00:50

Traumahealing.org. Okay.

Danielle 1:00:53

Yes. And there's a practitioner directory there that they could look up.

Jean 1:00:56

Okay, traumahealing.org. Wonderful, let me write that down. And obviously, if you're in New York or Pennsylvania, check out Danielle. Give your website, please.

Danielle 1:01:12

Sure. It's DanielleMurphyLCSW.com.

Jean 1:01:16

Okay. And we'll post that also with this. So, any final thoughts?

Danielle 1:01:24

Um, I guess the final thing I'd want to say is that the thing that has been the most moving to me being a somatic therapist is learning that trauma is not a life sentence. No matter how

horrific the things are that we've been through, healing is so very possible. Our bodies are meant to heal and we don't have to live in that state forever.

Jean 1:01:47

So, then that prompts me to ask you this very last question. The person who's sitting there saying, but is it really for me? You know, there's that moment before you make the call or the moment you make the step. Any guidance on how to get over that hump?

Danielle 1:02:06

Yeah. That's a tough one. But what I would say there is that if you resonate with this material, and you're wondering, is this for me, even though it's really scary, I would say that the best thing you can do is try it. And if it doesn't fit for you after a session, you never have to come back. But give it a chance and see what happens for you and your body. Your body is so smart. It's going to let you know if this is the path for you.

Jean 1:02:40

Perfect. Thank you kindly.

Danielle 1:02:44

You're most welcome.

Jean 1:02:45

And it's been a sheer delight.

Jean's closing comments

Wow, that was so enlightening. As I said to Danielle, I thought I understood trauma, but listening to her, I realized how much more there is to learn. My key takeaways are what it means to say that trauma is stored in the body. I was fascinated to learn that the recipe for trauma is an event that overwhelms the nervous system, plus a feeling of helplessness.

After the traumatic event, some people stay stuck in their feelings of helplessness, while others may act out and still others may sink into depression. That's the fight flight or freeze phenomenon. Then we hear people talk about as she mentioned. But in the actual moment, we feel helpless.

The way she guides people through releasing all of that trauma from their bodies sounds like an art or science and a skill. She'd mentioned the word safety multiple times. Moving past trauma is restoring or regaining a sense of safety in one's own body. It was also fascinating to hear her say that if a person of color walks through her office door, she assumes that whatever traumatic event brought them there is on top of the racial trauma that may already be stored in their bodies.

If you think you might have lingering trauma, I sincerely encourage you to seek help. You might check her out and her amazing team of therapists in New York and Pennsylvania if you live there. She also talked about going to traumahealth.org if you live outside of those two areas. We talked about how hard it is to make that initial call. If you feel the impulse to do so, I hope you will trust it and act on it and make that initial call.

Thank you for listening.