An Explanation of The Body's Role in Trauma

Excerpt taken from "My Grandmother's Hands: Racialize Trauma and the Pathway to Mending Our Hearts and Bodies" by Resmaa Menakem

"Our bodies have a form of knowledge that is different from our cognitive brains. This knowledge is typically experienced as a felt sense of constriction or expansion, pain or ease, energy, or numbness. Often this knowledge is stored in our bodies as wordless stories about what is safe and what is dangerous. The body is where we fear, hope, and react; where we constrict and release; and where we reflexively fight, flee, or freeze.

New advances in psychobiology reveal that our deepest emotions—love, fear, anger, dread, grief, sorrow, disgust, and hope–involve the activation of our bodily structures. These structures–a complex system of nerves–connect the brain stem, pharynx, heart, lungs, stomach, gut, and spine. Neuroscientists call this system the *wandering* nerve or our *vagus* nerve; a more apt name might be our *soul* nerve. The soul nerve is connected directly to a part of our brain that doesn't use cognition or reasoning as its primary tool for navigating the world. Our sole nerve also helps mediate between our bodies' activating energy and resting energy.

This part of our brain is similar to the brains of lizards, birds, and lower mammals. Our lizard brain only understands survival and protection. At any given moment, it can issue one of a handful of survival commands: *rest, fight, flee, or freeze*. These are the only commands it knows and the only choices it is able to make....Our lizard brain cannot think. It is reflexively protective, and it is strong. It loves whatever it feels will keep us safe, and it fears and hates whatever it feels will do us harm.

All our sensory input has to pass through the reptilian part of our brain before it even reaches the cortex, where we think and reason. Our lizard brain scans all of this input and responds, and a fraction of a second, by either letting something enter into the cortex or rejecting it and inciting a fight, flee, or freeze response. This mechanism allows our lizard brain to override our thinking brain whenever it senses real or imagined danger. It blocks any information from reaching our thinking brain until after it has sent a message to fight, flee, or freeze. In many situations, our thinking brain is smart enough to be careful and situational. But when there appears to be danger, our lizard brain may say to the thinking brain, "Screw you. Out of my way. We're going to fight, flee, or freeze."

Many of us picture our thinking brain as a tiny CEO in our head who makes important executive decisions. But this metaphor is misguided: our cortex doesn't get the opportunity to have a thought about any piece of sensory input unless our lizard brain lets it through. And in making its decision, our Reptilian Brain always asks the same question: *Is this dangerous or safe?*

Remember that *dangerous* can mean a threat to more than just the well-being of our body. It can mean a threat to what we do, say, think, care about, believe in, or yearn for. When it comes to safety, our thinking mind is third in line after our body and our lizard brain. That's why when we put a hand on a hot frying pan, the hand jerks

away instantly, while our thinking brain goes, *What the hell just happened? OW! THAT SHIT IS HOT!* It's also why you might have the impulse to throw the pan across the kitchen– even though doing so won't help you.

The body is where we live. It's where we fear, hope, and react. It's where we constrict and relax. And what the body most cares about are safety and survival. When something happens to the body that is too much, too fast, or too soon, it overwhelms the body and can create trauma.

Contrary to what many people believe, trauma is not primarily an emotional response. Trauma always happens *in the body*. It is a spontaneous protective mechanism used by the body to stop or thwart further (or future) potential damage.

Trauma is not a flaw or a weakness. It is a highly effective tool of safety and survival. Trauma is also not an event. Trauma is the body's protective response to an event–or a series of events –that it perceives as potentially dangerous. This perception may be accurate, inaccurate, or entirely imaginary. In the aftermath of highly stressful or traumatic situations, our soul nerve and lizard brain may embed a reflexive trauma response in our bodies. This happens at lightning speed.

An embedded trauma response can manifest as fight, flee, or freeze –or as some combination of constriction, pain, fear, dread, anxiety, unpleasant (and/or sometimes pleasant) thoughts, reactive behaviors, or other sensations and experiences. This trauma then gets stuck in the body–and stays stuck there until it is addressed.

We can have a trauma response to anything we perceive as a threat, not only to our physical safety, but to what we do, say, think, care about, believe in or yearn for. This is why people get murdered for disrespecting other folks' relatives or their favorite sports teams. It's also why people get murdered when other folks imagine a relative or favorite team was disrespected. From the body's viewpoint, safety and danger are neither situational nor based on cognitive feelings. Rather, they are physical, visceral sensations. The body either has a sense of safety or it doesn't. If it doesn't, it will do almost anything to establish or recover that sense of safety.

Trauma responses are unique to each person. Each such response is influenced by a person's particular physical, mental, emotional, and social makeup–and, of course, by the precipitating experiences themselves. However, trauma is never a personal failing, and it is never something a person can choose. It is always something that happens *to* someone.

A traumatic response usually sets in quickly–too quickly to involve the rational brain. Indeed, a traumatic response temporarily overrides the rational brain. It's like when a computer senses a virus and responds by shutting down some or all of its functions. (This is also why, when mending trauma, we need to proceed slowly, so that we can uncover the body's functions without triggering yet another trauma response.)

As mentioned earlier, trauma is also a wordless story our body tells itself about what is safe and what is a threat. Our rational brain can't stop it from occurring, and it can't talk our body out of it. Trauma can cause us to react to present events in ways that seem wildly inappropriate, overly charged, or otherwise out of proportion. Whenever someone freaks out suddenly or reacts to a small problem as if it were a catastrophe, it's often a trauma response. Something in the Here and Now is rekindling old pain or discomfort, and the body tries to address it with the reflexive energy that's still stuck inside the nervous system. This is what leads to over-the-top reactions.

Such overreactions are the body's attempt to complete a protective action that got thwarted or overridden during a traumatic situation. The body wanted to fight or flee, but wasn't able to do either, so it got stuck in freeze mode. In many cases, it then develops strategies around this “stuckness,” including extreme reactions, compulsions, strange likes and dislikes, seemingly irrational fears, and unusual avoidance strategies. Over time, these can become embedded in the body as standard ways of surviving and protecting itself. When these strategies are repeated and passed on over generations, they can become the standard responses in families, communities, and cultures.”