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Hello. Hello everybody. I have my lovely guest Jennifer back today, and this is our third podcast together and creep I'm creeping out on you. In case people haven't listened to the other two. Could you give them just like a little intro about yourself and your work? Sure. Yeah. So my name's Jennifer Summerfelt and I'm the founder CEO therapist for Ask Therapy for Moms.

And what we do is we offer virtual counseling to moms across Canada right now. And we specialize in nervous system informed, which is also known as polyvagal therapy and trauma informed and childbirth informed. Yeah. Do you want me to go into more of my background or can we just like.

Pause it there. And they could learn more about me by going to the website. If you wanna go into it a little bit more, I think you come at this work from a really unique vantage point, which is partially, I think what makes it so effective and so interesting. So yeah, if you wanna give this. Okay.

So the short version, I've worn many hats within the field of what I would call maternal health. And let's see, 20, Ooh, started out when I was doing my master's in performance psychology going on 24 years ago. And took my knowledge of performance psychology applied it to my first birth experience, which was 22 years ago, which opened up the door to the world of midwifery, the world of doula, the world of childbirth education.

And so that all started about 22 years ago. I was super passionate about learning everything I could learn about the field of maternal health and birth. And in particular, what really stood out for me back then was the dichotomy between kind of what the mainstream literature was saying about birth.

And then what I was starting to get the hands on to learn a bit more about some like alternative ways of birthing and how I felt that was just not accessible. It had been kept from me. So it was, a shock to come into the world. Of birth and realize this is this huge experience that women go through.

And nobody really talks about it, except maybe some of the horror stories until you're being initiated into the club. And that's how it felt. I was young. I was 23 when I was pregnant. And some of the amazing things that I did back then was I fired my obstetrician when I was about seven months pregnant with my first

child, because I started to learn about midwifery care and I wanted that more informed consent approach.

And I was starting to feel that I would be in a better environment at home based on the research that I was doing in particular, because I trusted my body and I had studied so much about. Biology and physiology and peak performance. It just made sense to me. And so I made a radical decision at seven months old seven months pregnant to to say, thank you very much to the team of obstetricians, but yeah, you're not gonna, you're not gonna provide me with the care that I'm looking for.

So I hired a midwife and I love the story that, I paid for that midwife because it was out of pocket by selling my motorcycle. So I was 22, 23 years ago and I still don't have my motorcycle. Started looking this year, thinking maybe it'll be this year and this year might be the year.

Huh? Might be the year. Although now I feel older and a little bit more scared, but I had rid my motorcycle for six years. I got it. I think about my motorcycle at 17, which blows my mind. Cause my daughter, my youngest now is 17 and I'm thinking there's no way I would let her get on a motorcycle. so I, I was a bit of a, badass athlete back then.

And anyway, so that just opened the door to the world of birth and I was enamored with it. And in particular, things that have really stayed with me through it all was back then we didn't use the word birth trauma, but we did use the word obstetrical violence and or violent violence and birth.

And, one book that really stood out was I think it's Suzanne a immaculate deception. . And I think it's Frederick Leboyer's birth without violence. I think it was Frederick Leboyer . Those two books like really woke me up to, the world of violence and birth that we now call birth trauma.

So it's interesting that I'm where I am today. So through all that I did study traditional midwifery or traditional birth work if you wanna call it that direct entry style. and thought that was gonna be my path and it wasn't, it isn't. And, we spoke about that in the last episode on my origin story and.

And then from there I just got awakened to, you could say the world of trauma through my own trauma and the need to heal my own trauma, which then translated into, oh my goodness. Everything that I've been passionate about was trying to mitigate trauma in birth. And so just made sense for me to merge the two worlds and to specialize in therapy in this domain.

So I am the author of healing after birth and midwifery for the soul healing after birth was my baby. And really at the time, it was only 2018, maybe 2017 that I self-published it. And, based on a group program that I was running. And that was my first attempt to bring these two worlds together, the world of therapy and birth or therapy and trauma, and the world of childbirth through the kind of the lens through which I understood it and had been studying it for so many years.

So at that time I was told that was like the only thing out there about birth trauma since then, it's exploded so since then, this is not a new word. This is not a new idea. There's definitely a lot more services out there, specializing in providing care for moms in, in the postpartum who've experienced traumatic births.

But yeah, that's a bit of where I am today. Yes. So that, so ask therapy is the. Right now, I would say like the toddler of all of that were in our toddler years. And and that really came through launching it during the pandemic and realizing not only that I wanted to reach more moms just outside of my local community, but I also wanted to reach more therapists to share the knowledge that I've obtained over these years so that they too can be a bit more childbirth informed and understand more of the whole paradigm.

So that was my vision and is my vision. So yeah, there I am. Yeah. And I just wanna point out, I think it's important to point out that. like you said, it's exploded this whole birth trauma conversation in the last couple years. And yet, so many of the people talking about it, aren't people who are, as you have eloquently put childbirth informed.

Like they're not people who in from what I've seen, there's really not someone else out there that I know of who is marrying these two worlds from a place of actual experience of having attended births and like really gone down the rabbit hole fully themselves, and really understand what's happening in the world of birth for women.

And so I think that may, that must just make your work extra valuable in that I think that's really rare, and that's why I really enjoy your perspective and, refer people your way, because there are people local to me, for example, who are all about wanting to support moms and post giving postpartum support, but they.

They don't understand the language always. And they don't really understand the realities of especially clients like mine who are choosing home birth and maybe had a transport to the hospital maybe had a really unexpected and

unwanted C-section or they're struggling in the post-partum and they're co-sleeping and not getting any sleep and they're totally sleep deprived.

And, that's probably not the typical postpartum client that these therapists are seeing. And so I know in my own experience that I found some really valuable support in terms of therapy, but I often felt like there was a piece missing where they didn't totally. My reality as someone who yeah.

Was breastfeeding around the clock co-sleeping and they didn't have an embodied understanding of what that meant or had, and, or hadn't worked with other women like me. So just putting that out there that I think that's so valuable, I really appreciate the feedback. And and that you see value in it, because that helps.

That helps me feel like, yeah, there is something important here that I'd like to be able to offer to that conversation. And I'm not just making that up. I would love to chat a bit about how maybe we are different and I am different in my approach. And how I've come to see it. Like I'm trying to formulate a word here.

Typically, what ends up happening is, if a therapist is focusing on the postpartum, it's a siloed approach. It's okay, you've had your baby and now you're suffering or struggling with these certain symptoms. And we can maybe label those symptoms. We can maybe check off the boxes we can, and then we're gonna apply a treatment protocol to those symptoms based on, the world of whatever cognitive behavioral therapy or right based on this treatment oriented world.

And what I noticed is that so much of the focus was just going towards after the baby was born and beyond. And there wasn't a lot of attention that was given to the experience of the birth and how that might have dysregulated, that mom's nervous system And again, that's, something I'd love to get into is how we are different.

Also that I love saying that we work with moms who are free birthers and we work with moms who have elective caesarean and everything in between . So there's room for that full spectrum. Of that birth experience. We work with moms who have struggled with fertility who have experienced multiple losses, and so they wanna a highly medicalized birth experience because of what they have had to go through to, to conceive and.

Maintain that pregnancy. So just because I personally have come from, what is considered to be more of a radical approach to the birth industry, that doesn't mean that we don't have capacity to hold everybody's experience. And I love that about us, in our staff right now, we've all had very different experiences with our own journeys, with birth.

And they're, they often come to me and ask a lot of questions. Hey, my client just told me this, and this is what happened with, let's say their midwife for this is what happened with their obstetrician. Can you help me fill in the gaps? And why is that so traumatizing or so disheartening to my client, I don't totally understand so that I love I love being able to offer that mentorship where there is way more scope.

And understanding the, look, if we're working with a free birthing mom, you gotta understand the mentality that's coming in totally versus if we're working with a mom who's really afraid and wants all that medical intervention, because that's gonna give her the best experience.

Then we need to understand what's motivating that, so there's room for all of it. I think that's what must, I mean that, I think that is what gets left out in some of the spaces that I've seen or been a part of, it's oh, birth is just this one monolith where it sounds like you're really teasing out and helping educate these other.

Therapists providers, whatever coaches, whatever we're calling them. They are therapists. Yes. About all this nuance and how the experience can be so different depending on the paradigm someone's coming from. And that's really cool. Yeah, absolutely. And also so I, I did this talk once.

I don't know if you're familiar with January Harshi I think was her name. Yeah. Yeah. Okay. So this was before pandemic pre pandemic. I presented a talk to two of her conferences in the talk was what your doctor isn't telling you about postpartum, depression and anxiety. And in that talk, what wowed the audience.

Was how I wove together. We gotta look at these factors. We have to look at historical factors. So is there unresolved trauma from childhood that might be causing dysregulation of the nervous system? And we can get into what I mean by that. So we're looking at the history, we're looking at what the imprinting was before you even got pregnant and had your birth experience, because birth will blow that open, right?

The experience of birth, regardless of what the outcome is or how you gave birth. The experience of birth itself is such a transformative event that it's going

to open up, maybe pieces that were compartmentalized or held at bay from your history. Because of the experience itself. So not even saying if there was trauma or no trauma, just the experience itself could bring all that shit to the surface.

Yeah. Because it's so discombobulating. And I think it's meant to, I think it's meant to be like, Hey, look, you're being initiated into motherhood. Let's deal with your shit. So that, you can show up as the best version of yourself. So we have to look at the history in terms of what were you already bringing?

What was your nervous system already holding onto? What was your heart and emotional system already holding onto? What was your mind and cognitive system already holding? Could that have shown up at some point? And then we look at the birth itself, right? So did the birth dysregulate your nervous system through.

Behaviors or through experiences that were either experienced as traumatic or experienced as highly stressful. And is that why maybe you are struggling in the postpartum and then we look at the postpartum because things can happen in the postpartum too, right? Totally. So we look at the whole system and then we look at all the factors, the relational factors, financial factors, right?

Like we're looking at all of these things that really are part of our lived experience. So that opening of saying, Hey, look, a birth is a huge moment in time that if it's not integrated effectively, in the postpartum period, it lingers and it dysregulates your system. And then, we just normalize that and or we label it as postpartum depression, postpartum anxiety, or, so if we can label it, if we can point at it, then it's something like outside of us that we can just point at and say that's what's going on.

And so I really wanted to challenge that by bringing this information forward, which at the time was considered to be trauma informed, but really what it was nervous system informed because I was saying, look, we need to look at it. This look at, postpartum mental health, through the lens of regulation of your nervous system, right?

And dysregulation of your nervous system, which is a result of having experienced highly stressful events too much, too soon, too fast, which can result into trauma. Can result in trauma. I don't know if it's into or in as I think it would be as can result as trauma. And we could talk about that because one birth experience over another birth experience doesn't mean that they're both going to have experienced that birth as having been traumatic.

And I'm seeing a picture of you yeah I turned my my wife is Rocky. Okay. And I think this will make it smoother. Okay. So that they don't have to hear so then people can hear your lovely words. Perfect. Without glitches. Okay. No glitches started raining. So I think my wife got weird, but you okay.

So backing up for one moment. Would you say then let me pause. Cause I'm gonna probably edit that whole little section out. So would you say then that this is a different model of thinking about perinatal mood disorders, postpartum depression, postpartum, anxiety than is typically presented in the mainstream?

Yeah, that is what I believe to be true. I have been told that it is different and that it is a different way of seeing postpartum mental health. I haven't, I can't confirm that with some kind of research or studies or anything like that. And now that we have a larger conversation going around, as it pertains to polyvagal theory, which is nervous system stuff and trauma theory, I would say that it's maybe that more people might be thinking through this lens.

Just because there's more information available. Does that make sense? Yeah, it does. Yeah. But I would say that, as I started out that not a lot of, not a lot of maybe postpartum therapists were necessarily seeing it through that particular lens. Yeah. A lot of the stuff that I've read and gathered for, our students at the Indie Birth before school, so much of that seems to focus well.

And I intentionally didn't include a lot of this because it doesn't feel right to me, but a lot of the stuff that's out there focuses on the hormonal piece. Exclusively oh, the hormones tank and people just go crazy was the feeling from reading it instead of yeah.

This more yeah. Nuanced approach of you know what's actually going on instead of just again, labeling and blaming. Not that those can't, there can't be issues with hormones and not that hormonal shift isn't huge. In the body, but it feels a little hollow for me, walking with women and being like, I don't think that's the whole picture.

So I really appreciate that you have a wider lens. And can you tell us a little bit more about what do you mean when you say nervous system informed? If someone is, has never heard that before and this polyvagal theory stuff like what's, what do we wanna tell people about that? Absolutely. Can I answer something about the hormones?

Yes. And then come back to that. So yeah, you do hear a lot of that, where it's just the expectation that if you're struggling in any way in the postpartum, it's

because your hormones are, you're doing the postpartum hormone dip kind of thing as your hormones try to regulate pre-pregnancy state.

And another thing that I would like to mention is, through a systems lens, which is basically what I'm doing and inspiring my therapist to do the same is yeah, we are gonna look at things like the physiology and nutrition and hormones. Oh my gosh. . How, it is part of the, it is part of the picture for sure.

And it needs to be considered. Absolutely. Because we do know that if the thyroid tanks and the gut health is off and maybe nutritionally there's, a lot of like high sugars or low fats or high carbs, and it's just not nourishing enough, not enough fluids, for example, then yeah. The mom's mental health can be greatly impacted by that.

Nourishment and hormones are an important part of our mental health for sure. But it's not the only picture. And yeah, so that's what I wanted to say about that. When you were talking about that, thank you. Okay. So you asked me to talk about what is polyvagal therapy and nervous system therapy.

So to answer that question, I'm gonna start by saying that we have what I would call four centers of knowing. And typically therapeutically, we do focus on three, but I like to include the fourth. I think it's very important that we include the fourth and I'll explain why. So first we have a biology, a body center of knowing, which is your nervous system.

So when I talk about your biology, I'm talking about your nervous system, which is part of your brain structure. And we have a heart center of knowing, which is your emotional system. We have a mental center of knowing which is your cognitive system or your mind. And then we have a spiritual system of knowing which you could connect to as your soul or your higher self, whatever works for you.

And what we know based on more current studies, especially studies that are coming out of the heart math Institute studies that are coming out of neuroscience and the study of consciousness. What we know is that mental health is the derivative of mental health is the expression of the coherence and harmonious state of all four centers.

So let me explain that. Basically the idea is when all four of those centers are singing in harmony, With one another, when their information and energy flow is one that is fluid, coherent, not jagged, right? Not disharmonious. Then that

actually sends the system, the entire system into a state of health and what I would call the state of thriving and flourishing.

So the goal is that you want to be able to support your clients towards that state of flourishing, which is to align those four centers so that they can communicate with one another in this harmonious flow of energy and information, which is the definition of coherence. So the nervous system is just one center.

That we focus on. And it's usually the primary one because we are a biological organism experiencing life through this bodysuit. And we're very plugged into our nervous system because our nervous system is, it's the thing. It's our personal surveillance system. That's in, in relation to life itself. So as a biological being, we can't escape our relationship to our nervous system because that nervous system is actually what's informing our heart system, our mind system, our spiritual system at all times, it's sending and receiving cues signals of either welcome or warning or safety or danger. And that this all comes out of the work of Steven Porges'. Who's considered to be like the polyvagal father. And, he was a, I understand him to be, I think, I'm gonna get this wrong. I think he was a medical doctor, but he's definitely like a researcher, like a neurophysiological researcher kind of guy from my understanding.

So forgive me if I got that wrong. And then Deb Dana took his material that he had researched and applied it to the world of therapy. And that's where this idea of polyvagal therapy has been born out of. So some of the things that I'm saying come from that theory and then, but the theory of coherence comes elsewhere.

Okay. For example, Dan Siegel talks a lot about coherence. So his entire field of interpersonal neurobiology is about creating states of coherence and Jodi Benzo's work talks a lot about coherence and some of the more metaphysical kind of like out there, health stuff is talking about coherence as well.

So coherence is like a buzzword, so if we're wondering, what is it that supports our system to be healthy and not only healthy, but to actually step out of survival and step into thriving? It's what do we need to do to create this beautiful flow of energy and information that is flowing in coherence so what happens is when we are met with.

Survival stress when we are met with highly stressful experiences. And if the, if we have a bunch of those experiences coming at us at once too much, too soon, too fast, it disregulates the nervous system, right? So it sends the nervous system into Mayday, and throws, and then what comes to the forefront is the survival system, the survival state.

And, the system goes into high gear. And if we get trapped in that state, we call that trauma. And what happens when we're constantly sifting through stressful experiences externally, internally, right? When we're in a state where it's just chronic stressors, one after the other, the nervous system is now in a state of dysregulation because the nervous system was never intended.

To be in a survival state for a long period of time. It's supposed to be a short burst of energy that actually helps mobilize the body, the meat suit towards safety. So then it can restore itself back into coherence and attune itself towards social engagement connection again. So when we're in a state of dysregulation, and if that state of dysregulation is chronic, it starts to, the way I described it is it's like it starts to pull at the circuitry, like the circuit board.

And it starts, tugging at these kind of live wires. And sometimes those live wires are just like flinging all over the place and everything feels discombobulated and disoriented. And we call that mental. What are some ways that you see this show up in your work? Around maternal mental health?

If someone's listening and they're like, oh, is this me? Am I dysregulated? Am I, and I don't know if it's bad, black and white, but what would you say to that person? Yeah, so I okay, so before I answer that question, I'm gonna just finish one train of thought and then I'll answer that question because it'll make more sense.

Sure. First of all, we need to understand that when that a, we have a survival state and we have a thriving state and that's innate to our biology. So that means that at all times we can access, unless our polyvagal nerve has been hot severed, right? Unless there's been an actual physical injury to the polyvagal nerve, this might not apply, but typically we all have an intact polyvagal nerve.

And that means then that we can access this thriving state it's within us, it's within our reach. And I believe it to be our birth rate. That being said, I think the greatest struggle as a human, not just a parent 'cause parents, we're just gonna put this in the same category, but the greatest struggle is that we chronically live in states of survival stress and we're in those states of survival stress because there's so much coming at us in our environment externally.

And then there's so much that we're experiencing internally. Both of that causes, both of those experiences create a ton of dis ease, right? It feels uncomfortable. And so then we go into protective patterns. Those protective patterns have been with us since we are born. And those protective patterns have actually kept us alive.

They've served. And so generally speaking, we operate in either like high functioning survival stress, where it's not causing a ton of dysregulation where it's disrupting the health and wellbeing of our lives and our relationships, but we've normalized that. Yeah. And so I just wanna acknowledge that this is a shared experience.

And then now let's add in new birth and new parenting. Into the mix. And now all of a sudden what we've been managing up until that point in this, maybe like somewhat tolerable, survival stress state now has become intolerable. It's become too much and it's tipped the system out of balance. So you ask the question what might be showing up for those moms, for example?

First of all, what might be showing up are symptoms of severe intrusive negative, critical, or dark thoughts, right on repeat, what else might be showing up for those moms? Is like ton of emotional, what we would call survival emotion, so anger or fear or despair being dumped into their system uncontrollably.

So they feel like they, that their emotions are running the show that they can't control them, that they're flipping their lid, they're raging and they have no control over it. Or they're like chronically in a state of terror or they are weeping uncontrollably, but it feels more than quote what you were saying.

The hormone shift that's happening, it's just an uncontrollable amount of emotional material that is flooding their entire, so their heart system, their body system, their mind system. And they don't know what to do with it because it's maybe too much too fast, too soon and unfamiliar.

So those are, and then other symptoms that might show up are like chronic pain, for example, right? The body is just feeling different. The body is always revved up shaking uncomfortable to be in the body, not wanting to feel what they're experiencing in the body. That might be another symptom that could show up.

And then often what we can see, and I'm speaking from experience, it's not like I've never experienced any of these things. I've experienced all of them. And what else might show up is way more conflict in your primary relationships than you are accustomed to. And all of a sudden, you feel like you don't recognize yourself, you don't think you can do this job that, you signed up to do, or maybe you didn't sign up to do it, but you're in it, right?

The job of motherhood, parenthood. And now, the relationships in your life that were maybe nourishing or nurturing or safe, or, what you leaned on to be supported in. Now those are blowing up and. Now all of a sudden you're in this state where everything feels discombobulated and dysregulated, and you're like I'm, there must be something wrong with me.

There must be something wrong with my brain. Cause we've been told for so long that, mental illness is a brain chemistry imbalance. So people still, typically go there, even though we have so much more information about, the impacts of unresolved trauma. And so then it's I need to look outside of myself to.

Find some kind of support that will alleviate all of these symptoms of suffering. And, often that is, looking at the pharmacology to be, so that it can help to regulate. Cause that's what we're told with pharmacology is it's gonna help regulate, it's gonna help dim down the intensity of, those emotional outbursts.

And that can be very supportive in a short period in the short term, to just woo, dial that down a bit. But it's not enough typically it's not enough. And I know that because most moms who come to us are like, yeah, I'm on psycho pharmaceuticals and it's helped a little bit, it's numbed me out a bit, but I know it's it's not stopping.

I'm not, I don't feel better. I just feel like I'm going through the emotions and that's not how I wanna live my life. Yeah. So those are some of the symptoms that will show up. And of course when it's coming in so fast like that, and the nervous system is so dysregulated.

And you can imagine as like those live wires flinging all over the place and of course, to differing degrees, somebody doesn't have to be in an extreme state to be like, whoa, I think I'm not really in a state of coherence right now. How do I get into coherence? Some of us have never been there.

We don't know what that would feel like. I think what I was wanting to say about that, but when I was saying the live wires Yeah, it's just I lost my train of thought.

that's OK. It was a great train. That was just a, that

Is there anything else like foundationally you wanna talk about before I ask you about the last couple years and how you've seen that impact this additionally?

No, I think we can jump into that. I answered your question. Hey. Yeah. Yeah. The question about what might a mom be showing up with? Totally. Yeah. And I think those I outlined more severe symptoms, that, but generally speaking, it's this sense of feeling either totally disconnected from yourself, not recognizing who you are not feeling like you could connect to others, your children, your baby, your partner, there's this sense of not just disconnection to self, but disconnection outside of yourself too. And one could be stuck in high sympathetic. State, which is more of that woo anxiety, like everything is high alert kind of presence, or one could be collapsed and immobilized and can't get outta bed and feeling like there's no, no hope, no purpose.

And that despairing state, both of those states tell us that nervous system is a trapped in a traumatic stress response and it's trying to survive. It's trying to keep the organism alive. And so that's all I wanna say. Okay. Yeah, I guess I just wanted to add too that I think something I have seen other women struggle with and I think something I've thought at various points in my own postpartum journey is if we're talking about that in particular, It's like this question of is this just what it feels like?

Especially with the first baby or something, is this just what it, this is just normal for, having a two month old three month, whatever, maybe even one year old, two year old, three year old especially when there is this cultural narrative around parenthood is terrible and it's hard and you'll never sleep and you're gonna feel like crap.

And like you said, it's been normalized. And so it's hard, I think for a lot of women to try to discern between, is this just normal or is there something that I could be doing or getting, be getting support with to be in more of a state of coherence and just feel better and feel more like myself.

So I don't know if you have any wise words, if someone up, I just was imagining someone listening and being like. Wondering those kinds of questions. No, these are really good questions 'cause I often think really deep or high level and it's helpful to have something zero in, right on specific challenges.

And I think the first thing that came up for me is there is nothing normal about our postpartum experiences. So first of all, we have to acknowledge that what we're experiencing in our postpartums in this modern kind of what I call curated society system is that being alone in the postpartum, first of all, trying to figure it out all on your own, not being nourished in the ways that you need to be nourished, right?

Not being supported in your birth experiences and the ways that we need to be supported in. All of this is not normal. First of all, we're being asked to adapt to a way of experiencing, the initiation of motherhood we're being asked to adapt and our nervous systems need to adapt to experiences that are unnatural to us.

And so it's understandable that for many of us bonds in the postpartum, that we're gonna struggle. And, but that doesn't mean that we should just struggle so it doesn't mean that we should normalize the struggle. I think we name it and we understand that the struggle isn't because you are doing it wrong.

That's not why you're struggling. Which is, of course what ends up happening is so many so many of us just internalize that this must just be that I'm doing it wrong or there's something wrong with me. Totally. Or I'm not cut out to do this mothering thing because I can't seem to be okay with how challenging things are.

In. Let's say how challenging the birth was, how challenging the pregnancy was, how challenging the postpartum was. It's why is this so hard for me? But on Instagram it seems like it was okay for so and so that's my initial response to what it was that you said we could obviously go deeper into that.

No, that was great. Thank you. Okay. So yes I wanted to definitely get to this other piece, which is how have you seen. This whole COVID pandemic thing, impact maternal mental health. And I'm just super curious as somebody who's deep into that world, what that's looked like and what you might share with people who are wondering, especially maybe they're having their first babies amidst all of this an added level of is this just normal? Yeah, no. Yeah. I so appreciate the question and I think it's fair to say that I'm still integrating the, what I have noticed therapeutically and what I obviously have experienced individually. Sure. Still early days, it's still early days that being said, I think it is important that we do, bring this conversation to the forefront.

And, one of the things that we know right, is that cases of depression, anxiety have skyrocketed and so have suicides, right? So we are in a mental health crisis. This is not surprising. I anticipated this from the very beginning because what's happening is so dysregulating to the nervous system and to what we, not just to the nervous system, but it's, it has been so dysregulating to, to the foundational needs of what foster health and wellbeing for the nervous system.

So I'm just gonna highlight those. And then we can talk about then how did that show up? Internally. So in polyvagal theory, we're taught that there are these four are these three foundational factors that support the health and wellbeing of

that nervous system. And we, I call them the three CS and we have the sea of context, the sea of choice and the sea of connection.

So context is all about information and we are in an information overload time. And we are also, we could also argue that we're in an information war and when we can't access supportive information that we need to be able to make sense out of crisis. The system goes into confusion. It's in it, internalizes it as a threat.

It experiences it as a threat. Confusion is a threat. To the system. And one could say these last two and a half years have been confusion written for multiple reasons. And then we have choice, right? So choice of course, in the birthing world, informed choice is everything right? This, especially a midwifery, right?

It's all about informed choice. So we say, and not only is it about informed choice, it's about freedom of choice. And when we don't have freedom of choice, the nervous system experiences, that is a threat and a danger because it experiences itself is being trapped. So you put any wild animal in a cage, what tends to happen.

It's not good for them. There's a consequence to that. It's, we're no different. The nervous system is responding to a lack of choice through that experience of being trapped. So this comes up anyways in maternal health, that a mom thinks that she's getting informed choice. And the next thing she knows that was taken away, that was revoked. And is revoked typically under the guise of safety right. In the maternal world. My informed choice was trumped because I was told that, my baby might die. Of course, in any of those circumstances, if you're told your baby might die, you're going to hand over your freedom of choice.

And you're going to let whomever that quote expert is, do whatever they need to do. That is instinctive. So when we don't have choice, we feel trapped, the nervous experiences that is a threat. And then it goes into a state of survival stress. And then the final one is connection. This is actually a primal need, right?

When we are born, we need another human nervous system to regulate our nervous system, to attune, to our nervous system to keep us safe and alive. If we don't have another nervous system to attune to, we literally can die. We are a socially engaged species. We thrive in social engagement. So if that is interrupted and we lack connection to the nervous system that is neuro received as life threat.

So an interruption of connection is neuro received as a threat to our existence. And this dips into the sense of belonging and all of that. So I. Okay. So let's think of these past two and a half years, generally speaking to the majority of the population, all three of those CS have been interrupted for a long time for a prolonged period of time, which just based on that logic alone, I'm not even getting into any debates about any of it.

Just based on that logic alone. One could anticipate that we are going to see a mass, societal like increase uptick in dysregulated nervous systems that are going to be trapped in that state, which then turns into trauma. That's a traumatic stress state. And then they're in that holding pattern.

Why are we in that holding pattern? Because many of us are still waiting. Especially here in Canada. But like it's there's not been a lot of relief. And remember that our nervous system is not intended to stay in prolonged survival stress without severe consequences to the health and wellbeing of that organism.

Yeah. So just based on that, now let's super impose that onto the maternal population is already generally speaking. If a mom has experienced birth trauma, when I talk to a mom and we go through the three CS, they're like, oh yeah, all three of those were interrupted.

I didn't have any of that. Yeah. And there's this light bulb moment where they're like, yeah, no wonder I've experienced it as traumatic. We didn't, we haven't even gotten into the story yet. The story we tell ourself about what we're experiencing is the psychological side of it. We're just talking about the physiological side here.

It's yeah, just based on that, my nervous system was dysregulated and trapped in that state of dysregulation because I haven't yet received the repair. So what we know is that, and this comes through attachment theory and Dan Siegel talks a lot about this. So does Gordon Newfeld. And so based from that theory, again, of course I'm talking about theories that are out in the open that seem to make sense.

And of course, Like with anything, it can change . But right now we know this to be the truth that we're going along with. So what we know is that in order to help that nervous system turn the needle like shift, turn the dial, shift the needle. I'm not great at those. What are those things called?

I do I'm following . OK, good. So in order for us to be able to do that for that nervous system to, restore itself, back into a state of coherence, so it can access

that thriving state, it needs repair. So we're taught this as parents. We're like, oh, guess what? The best thing you can do is like repair.

So you're gonna have ruptures in parenting. You're gonna do things. You're gonna yell at your kids. You're, you're not gonna be on your best behavior some days. And that's okay. What we know is that lots of repair is what is needed and what matters more is how often you repair and in the repair, you're fostering resilience.

And so yay repair, and parents are like super, the parents we work with anyways, like typical, generally speaking, you tell a parent, this they're gonna be like, oh, I'm off the hook, okay. I can do that. I can repair better. Yeah. And they're like, that's gonna make me a good parent.

It's yeah, that makes you a good parent. Just repair, it's okay. When you screw up, we're all gonna screw up. Yeah. Okay. So we know this we're like, that makes sense. That's fantastic. Yes. Repair. Okay. So how do we repair. What we know is that foundationally, we need these SS and the SS come out of, like I was saying out of attachment theory.

And we need to be seen, we need to be soothed. We need to be safe. And safety is physical safety, as well as mental, emotional safety. We need to be seen soothed Safed. And according to Dan Siegel it's securely attached. But I like a more recent version of it, which I heard through. Jason Gaddy's work from getting to zero.

He says we need to be supported. And then in that we develop secure attachment . So let's say it's to be seen soothed safe and supported when we are met with another nervous system. That leans in with those factors, the S's and offers that to our system where we feel seen, we feel soothed, we feel safe and we feel supported.

Then we get repair and our nervous system goes

and it aligns itself and it moves into nice data coherence. And typically if it were measured the flow of energy and information between yourself and that other nervous system would be coherent. So we're actually attuning and we influence each other in that invisible plane. Okay. So now that I've given you all of that, let's come back to the three CS.

How, we're talking about these past two and a half years, we're looking at it through the nervous system lens only. Yeah. The impact of this only is to say no

wonder it's a mess and no wonder. So many of us are, struggling with mental health issues. And some of us are just in total protective patterns and I won't get into that right now.

And what's lacking repair. Yeah. There. We're still waiting for repair from a, on a cultural level. This is a huge societal, we can even say global level, we're still waiting for repair so that our nervous systems can regulate again. So now I just said that, the transformative experience of becoming a mother as an initiation is hard in and of itself and typically will result in some dysregulation.

That's part of it, and generally speaking, as young families who maybe are just starting out, you already are carrying so many survival stress, experiences or factors, right? There's already the financial vulnerabilities. There's already the, technology speeding up and everything is fast, and there's already the pressure to be somebody in this world and there's already food food not being well nourished anymore because soil isn't well nourished, right? We've already got so many things that are external that are, that were added to the plate. And so it's already challenging enough.

And now you add on this huge trauma, this huge global trauma to the maternal situation. I have to say that I'm actually impressed, like impressed that it's not as chaotic as I expected it to be. Which tells me a lot about, what I believe in which is that there is an innate intelligence in our biology that wants to thrive and flourish and is gonna fight for that.

And so I see today's moms in these situations that are incredible. Some of the experiences that moms have gone through that I've worked with are incredible because of the imposed mandates, for example, that you would never even imagine could even be there as a potential trauma prior to the pandemic.

And I'm seeing them determined to step into the best version of themselves. So it's almost as if this tipping point of the pandemic maybe it's actually like lighting something up in today's young families or new families or it's initiating something.

Maybe it's okay, enough already. Like I am going to really heal. I'm gonna step into something that I can't even imagine is possible. I'm gonna overcome this and there's like a determination or a dedication that's, being lit inside, the spirit of each and every, new parent out there.

I don't know. That's based on what I just said, I actually would've anticipated even like a bigger explosion of like mental health challenges and disorders. And

I know it's out there and I know it is severe. And one of my theories also is, so that's my like very like high level hopeful theory.

Yeah. And my other theory is we haven't even touched the trauma yet. That we haven't even breathed it in that we can't even look at it because we've been in survival. We've had to be in survival. It's just been like, get through.

And I think we're gonna start to see that is, the trauma is gonna start to surface the collective trauma is what I'm talking about. Totally. Thank you for painting that picture and really breaking it down into such a. Just impactful way with those CS and SS and superimposing, the pandemic stuff on top of the maternal stuff.

That was really helpful, I think, and puts, it gives me some context. I think speaking of the CS, like it gives the listeners context as well, which is of course very helpful right now.

Is there anything else that I would like to share, of someone who's like either a woman out there listening, who's maybe identifying with some of these pieces around dysregulation and feeling like, okay, where do I go from here? What's next for me?

Or, maybe a midwife listening. Who's wondering what to recommend for a client. Okay. In that position. Okay. So I think excellent question. And few things are coming up for me. So first of all, I wanna acknowledge that really. We got deep into that first place of knowing I talked about the biology.

We really didn't touch on the other three centers. So I just wanna acknowledge that. And those other three centers are part of the conversation and, are necessary components to the healing journey, right? So learning how to move that stressful emotional material. So learning how to be with, and metabolize sadness is sadness, anger and fear, for example, and then learning how to be with.

Joy and gratitude. So that would be part of the work as well. And then the cognitive piece is learning how to pay attention to the stressful thoughts, the limiting beliefs, the core limiting beliefs, right? Bringing that to the surface, cuz the mind is always attaching a story to the experience. And then finally the spiritual piece, very much is dependent on each person that we work with.

But I believe that there is a spiritual component to our healing journey. And stepping out of trauma, stepping out of survival stress, stepping into that

thriving state, it's big work. I'm not saying it's simple. It's innate to us. It's available to us. I believe it's our birthright and it's big work.

And so it taps us into the bigger questions, the existential questions, right? The meaning, the purpose, the belonging the trusting in, in a possibility that might not even be available to us right now. So I just wanted to add all of that. And so yeah, if, if there's a mom who is aligning with what it is that what we're talking about so first of all, if they're Canadian, they can access services through our therapists and that's through ask therapy for moms or sorry, therapy for moms dot CA.

And we'll put these in the show notes. If there are moms who are from the states and they're aligning with all of this and they would like to learn a skill, a process, to be able to, create more coherence, to be able to step into that thriving state then through coaching and you and I have chatted about this through a coaching process I teach a 10 step process called flowing fears that brings all of this together.

So you could access access more, support through that coaching paradigm. And then for midwives or birth workers, there's a few things, one is becoming nervous system informed, I think is critically important to the work that you do. It will help you tune in even more with your client, with your birthing mom, it will help you look for signs and symptoms of maybe a dysregulated nervous system and be a regulating nervous system in the presence of their birth and postpartum, which in and of itself.

If you show up with that regulated, nervous system and offer repair. That could be enough to help shift that mom out of a chronic state of dysregulation that could turn into trauma or turn into, a big, huge mental challenge. It could be enough to actually just shift out and metabolize that experience and then restore the nervous system towards health.

So with that I offer the foundational program called nervous system informed training for birth workers. And you can learn about that on a different website called NSI doula training.com actually. Did I answer your question? Yeah. yeah. And I just wanted to put a plug in for the coaching work that you do since I've found it super beneficial for myself and have been raving about it to friends and clients and former clients, and have just found out to be really powerful.

And I'm sure I'll say more at some point maybe on a podcast or maybe in a write up just that. Yeah, it's been. Super helpful for me getting to a new level of nervous system regulation in my own life. And I'm sure there are more levels to

come, but yeah, feeling just so grateful for your work in my own life, which is one of the many reasons I wanted to have you back on.

Thank you. I feel like we just dipped our toes in, yeah. But that's awesome. Yeah. I'm so grateful to be here even though I not can't see you and yeah, I love chatting with you and I love the work that you and Maryn are doing within Indie Birth. And so it's always a pleasure to have these conversations.

So thank you. You're so welcome. Anything else before we wrap up that you want to say to our listenership? Is that a word ? No, just that, let's collectively start to believe that there's a pathway for us to go from surviving to thriving and, my wish and my, whole mission really is to, elevate us to step into thriving and for us to know it's possible.

And the more of us that plug into it, I think it's like a ripple effect, we can connect over that. That's beautiful. Thank you so much for sharing that and for being here and sharing your wisdom with us and for all your work in the world. Thank you. My pleasure.