

Guidelines to navigate in chaos

Notes from the Science Café 18/2/2022

1. Theoretical discussion (p.1-10) / 2. Experiential and conclusions (p. 11-14)

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Basics on trauma physiology and de-escalation techniques are always helpful while working with trauma but most important –in my opinion- is the inner position of the dance therapist. To understand what is going on, we have to be attentive to the person in front of us and to our own body. We pay attention to any changes in our posture, breath, sensations, thoughts, and impulses. We, dance therapists always work based on our kinesthetic experience. But, we are human beings, we also are afraid... Coping with strong feelings while working with trauma we may become detached or over engaged. In both cases, we lose accuracy and proper availability.

So, what do we need in order to work effectively in the midst of urgency, danger and chaos?

First of all, we need to create "safety anchors" for ourselves (*Babette Rothschild, 2003*). We can't take someone out of the water if we are drowning. My personal "safety anchor" is the image of a compass and a plumb-line... My plumb is my kinesthetic experience, channeled through de-escalation / revival techniques in a relational context. My compass is a wider view of the situation and my personal - spiritual values. Urgency always forces us to narrow our point of view and abandon some of our cognitive evaluation skills. But, in order to support people in crisis we need to stay connected to the here and now, without losing the "big image". We need to be able to feel AND think at the same time. To decide quickly AND take time to listen. To exchange between direct and flexible, quick and sustained, lightness and force, flow and focus. We need to be able to deal with uncertainty while maintaining the appropriate amount of certainty, necessary for efficiency ... A lot of contradictive qualities to contain...

War is a great force, a hurricane. Approaching it, makes me feel like losing myself, my pace, my balance and my orientation. The compass helps me to know where I stand, to contain polarities and to accept my position in the situation with humility: I accept my privilege of safety as a temporary gift that I can use to help others in a therapeutic context and I accept my guilt feelings as energy supply that I use as motivation for social change work. Once I accepted my position in the whole, the plumb line helps me to be present, to empathize, and to feel the other person's situation without losing my center.

The Compass: to know where you're standing in historical space / time

If we intend to work with war trauma we need to take in consideration important differences in relation to the context. The crisis zone, the first reception refugee camps, long term detention-segregation camps, resettlement and integration are different contexts that require different goal setting and procedures. Trauma takes a lot of time to heal. There is always a lot of work to do with transgenerational / cultural transmittance. Let's not forget that a therapist needs to envision working towards healing with the trauma of the victim as well as with the trauma of the offender...

Knowing where we're standing on the continuum of war trauma repercussion helps us to know better what we are facing, how we should prepare / take care of ourselves, what are the main transference issues in each case. It support us to define our limits, comprehend in which context we can be more effective and thus clarify our intention.

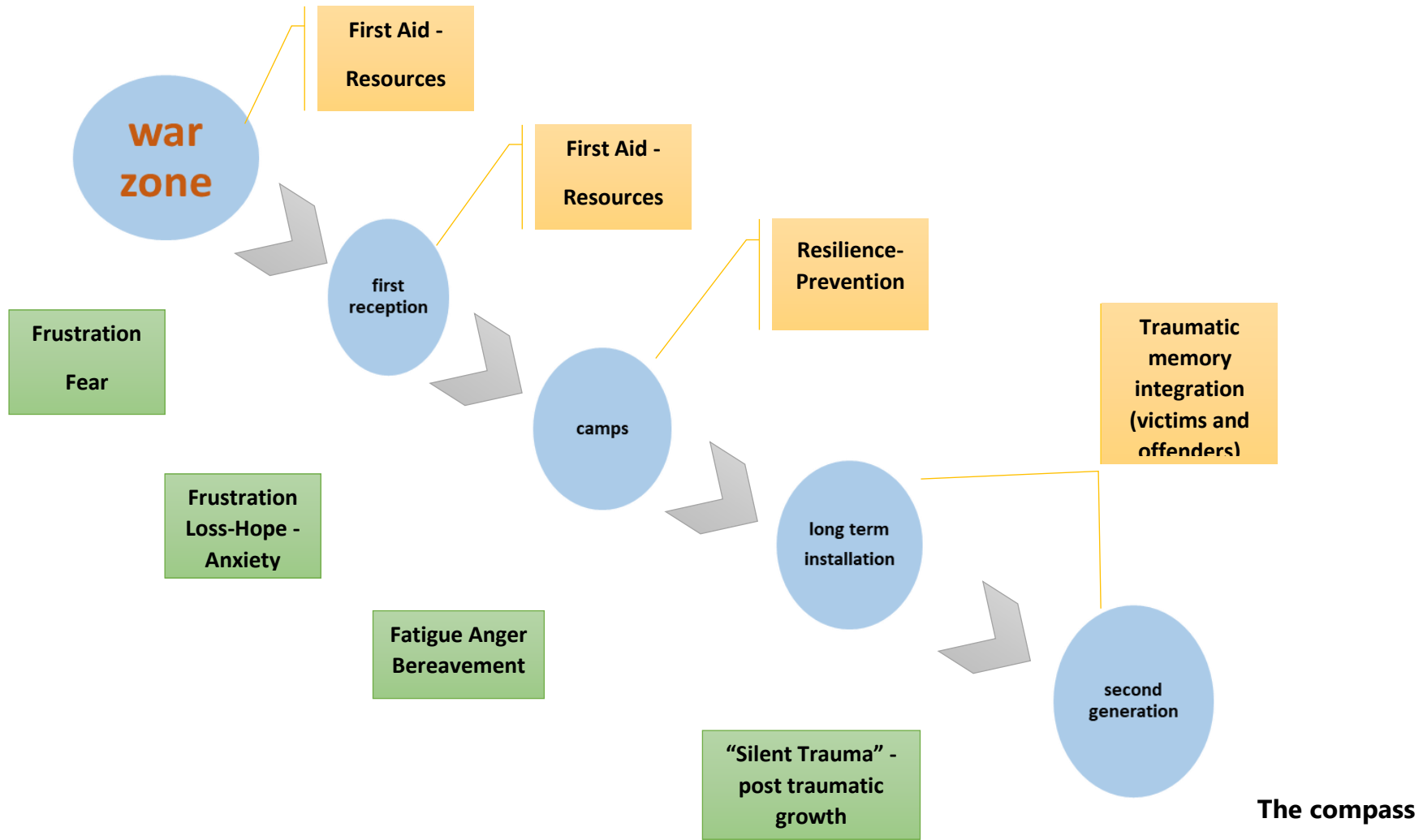
Being clear in our intention is necessary in order to be able to use our kinesthetic experience appropriately, amidst chaos and intense emotions.

Knowing where I'm standing means to know how far / close I am in relation to the crisis as well as in relation to my resources.

In this this way, I can go back and forth: exposing myself / resourcing / exposing myself / resourcing...

This is an experience I can share with the people I am working with (=> see Rothschild 2003, "putting on the breaks')

Where do I stand???

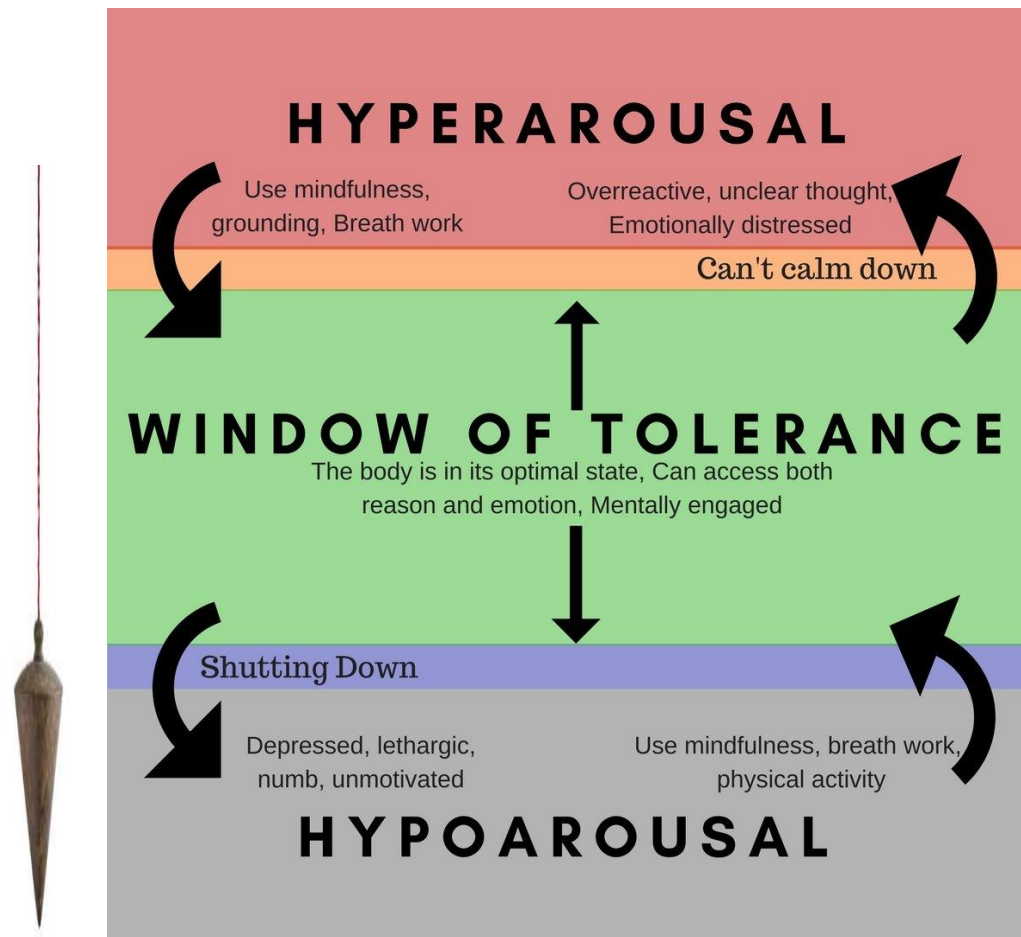


The compass chart indicates roughly different sites of possible engagement (in blue), levels of intervention – goal setting (in orange) and themes emerging in each context (in green). Each situation may “touch” different counter transference issues related to the emerging themes. The chart will be elaborated in the future, aiming to help practitioners to prepare themselves and to choose the context in which they feel they can be more effective.

The plumb-line: to know how you’re standing here and now

Under conditions of safety and low stress, two branches of the Autonomic Nervous System, the sympathetic and parasympathetic systems work together in a complementary manner, to regulate body state and assure social engagement availability. Under threat and danger, the ANS responds by activating signals of distress (face expressions-voice) aiming to transmit a call for help. If no one responds, the sympathetic system takes over, mobilizing for fight or flight. If there is no escape, and nothing can be done, the parasympathetic system activates our last emergency response: we “freeze”. Awareness is shut down and we collapse. Reactions to trauma depend on the nature of the event and – also- on the person’s history. Emergency systems shut down temporarily other areas of the brain, like Broca area (responsible for speech function), frontal lobes (responsible for reflection and empathy) and dorsal lobes (responsible for time and meaning contextualization). This is why people who pass through traumatic events may lose their sense of time, their capacity to focus, to concentrate, to articulate and make sense of the events.

- “Being safe is not the same as feeling safe” (*Van der Kolk, 2014*). This is valid for the people we are working with as well as for ourselves. Working with someone under traumatic stress means that our nervous systems interact / influence each other. We may be drifted along, or, our own traumas and coping strategies may be triggered.



The plumb-line: -connect to your center – breath – regulate

Chart by Pat Ogden

- Being aware of the signs of hyper / hypo arousal in the client as well as in our own bodies helps to restore appropriate boundaries in order to use this information for therapeutic goals. "Learning how to breathe calmly and remain relatively relaxed while approaching painful memories is a tool for healing" (*Van der Kolk, 2014*) By paying attention to our breathing, and connecting to our center we are capable to regulate our nervous system, to maintain our "self" and use our kinesthetic experience in the therapeutic relation.

Indications of Hyperarousal - Sympathetic System Activation

- dry mouth
- cold hands / fingers
- increased heart rate, 'thumping heart'
- increased breathing rate / sensation of not getting enough air
- sweatiness
- irritability / tightness in the muscles of the body
- dilated pupils and widening of the eyes
- face color changes
- Digestive system disturbances
- Nightmares, disturbed sleep
- sudden changes in body temperature / feelings of heat on the inside

- abdominal pain, 'feel sick to the stomach'
- "black or white", "either – or" way of thinking

Indications of Hypoarousal – Parasympathetic System Activation

- bradycardia – slow heartbeat
- dizziness – giddiness - fainting
- nausea - vomiting
- no focus – concentration
- fatigue – numbness – lack of emotion / motivation
- pale face
- urinary frequency
- lack of motivation, emptiness, "I cannot"

Crying

Emphasis on the inhale => increases hyperarousal

Emphasis on the exhale => release

Shaking

Frisson + shaking = natural release, reduces arousal

Tension, erythema, excitation + shaking = creates more distress

De-escalation Techniques

Hyperarousal

Grounding => Directing attention to the "here and now" situation

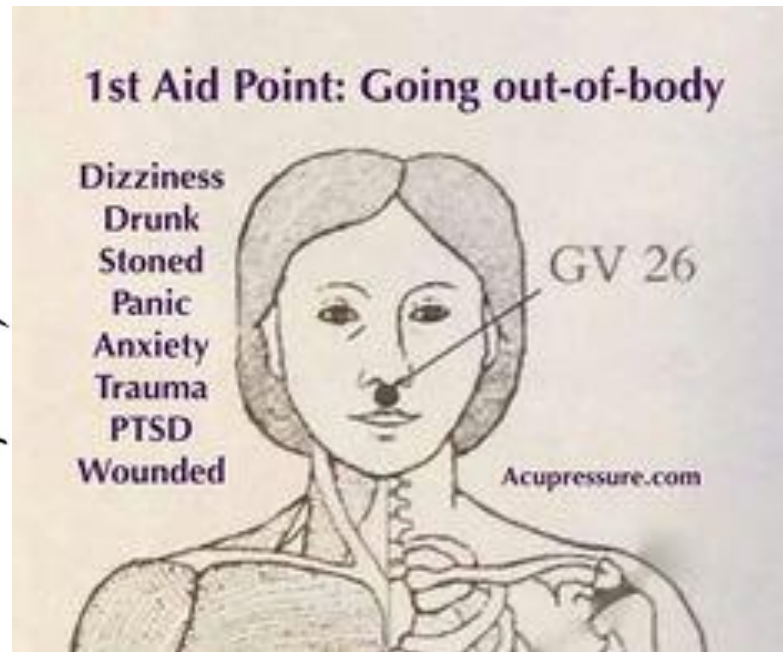
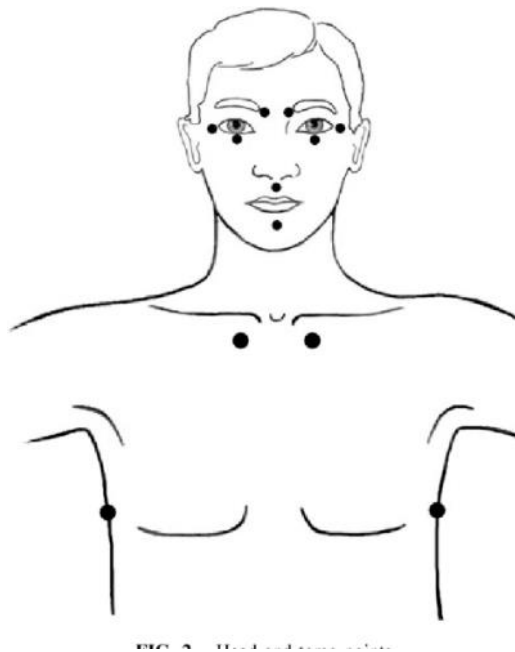
(5 senses, objects and / or persons in the here and now)

Push – release

Getting up / feeling the soles and the weight

Breathing – emphasis on exhale

Acupuncture points



Hypoarousal

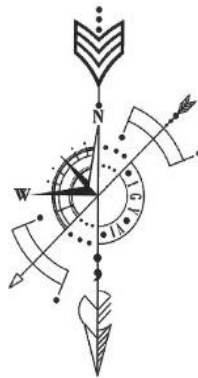
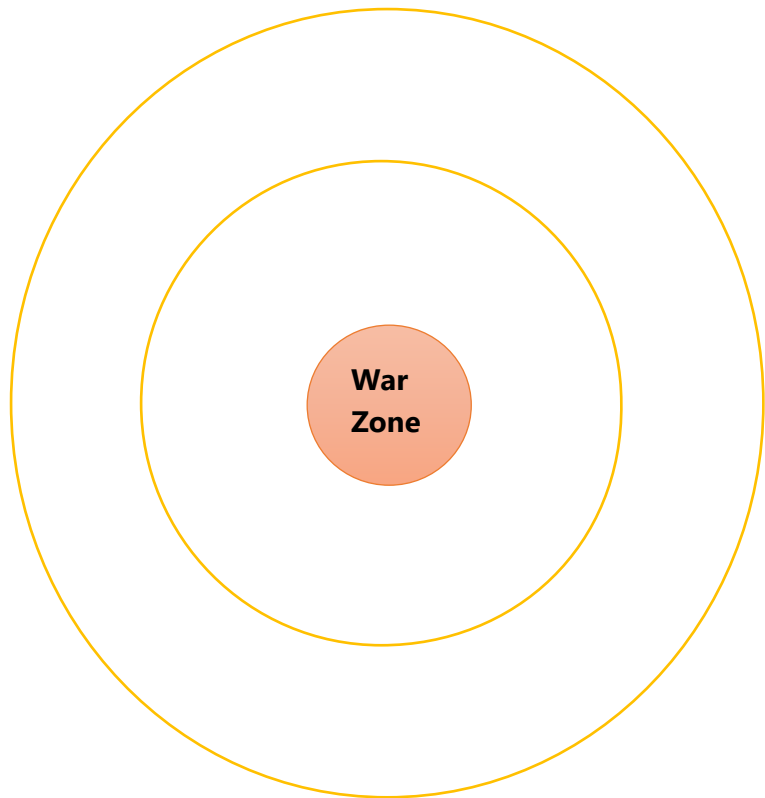
While we should directly intervene to de-escalate hyperarousal, hypoarousal asks for a much more delicate, indirect approach. We should not hasten to “change it”. It is important to accept the situation and work to “re-warm” gradually the person who responded to stress by freezing. Directing attention to the body may not be immediately helpful because “freezing” shuts down proprioceptive circuits in the brain. What is helpful is to be present, “be with” the person where he /she is, to share their tension flow and shape qualities, to direct attention to inner images and micro-movements. Breath with emphasis on inhale may also be helpful.

References

Kita E. (2020) "With compass and plumb-line: A dance movement therapy systemic approach in the field of refugee crisis" *Body, Movement and Dance in Psychotherapy*, 15:3, 171-188, DOI: [10.1080/17432979.2020.1778529](https://doi.org/10.1080/17432979.2020.1778529)

Kolk B. (2014) *"The Body Keeps the Score"* Penguin Group NY.

Rothschild B. (2003) *'The Body Remembers'* Norton & Co.



The experiential: "Dancing in a dangerous space"

Approaching war mentally, makes me feel like losing my pace, my balance and my orientation. My body is affected, my nervous system is alarmed, so how can I trust it?

What helped me in my preparation for this kind of work has been to create in my mind the image of big circle with the war zone in the middle. A strong center that creates a lot of concentric circles around / battles in the middle, refugees fleeing like a river, first reception camps, and everything that is happening... Moving in this space gave me the opportunity to discover my strengths and my limitations, to find how near to the center I can go, how far from my safety nest I can carry myself, without losing the inner stance through which I can be effective. I also found that using the image of a plumb line and a compass helped a lot. When I feel lost in this dangerous space I use my compass to locate myself, to see how near or far I am from the center and the periphery but also to change levels and points of view. It always helps when I look from above. Then, I use my plumb line to center myself, to connect with here and now. If nothing works, I use my safety anchor which I always prepare before this journey. Personally, I find the appropriate inner position when a view from above is integrated with grounding, but you will discover your own resilience in your own terms.

Guidelines

Always try the experience with someone there to hold the space for you.

Always start by creating a safety anchor (*Rothschild B., 2003*)

Remember: The task of this dance is to find a place where you feel that you can be connected to what's happening AND relatively calm in your body.

While you're moving, keep in mind your distance from the center AND your distance from the periphery.

Make one step at a time.

Do what you need to regulate before the next step - alternate between moving and sensing

Be aware of what is destabilizing you but focus on what is helping you – dance the antidote

Try different points of view - Explore to see how does your vision of the space and your sense of grounding influence each other

When you find the right place for you, stay there for a while and record the constitutive elements: locate yourself in this imaginary space (how far / near you are, what your point of view is), crystalize the feeling in a gesture or a short movement sequence and record bodily senses, movement qualities, feelings and thoughts.

When you come back to the periphery, do what you need, take care of yourself.

Report of the experience at the Science Café (18th April, 2022)

Comments of the participants have been integrated into one text by the author

I was surprised by the intensity of the experience!

While asked to locate myself in the imaginary space, I was surprised realizing that I was looking away from the crisis zone. I didn't expect this from myself, thus through the experience I had the chance to recognize it and clarify my intention. Approaching to the center made me lose control. Bodily symptoms of stress were present, my movement was held and I felt that I was absorbed by an immense tension. I realized that to take back control I had to establish a personal relationship with what is going on and to work on it. I explored how changing points of view offers the possibility to change my bodily state. Looking through a "bird's eye" opened up perspectives and gave me freedom of movement.

Conclusions: when I am affected, my kinesthetic sense informs me about but I cannot effectively restore my balance using only my body. Changing my point of view and / or my position in the system, and establishing my personal relationship to what is happening is also necessary to consolidate regulation.

"I wish it need not have happened in my time," said Frodo. "So do I" said Gandalf, "and so do all who live to see such times.

But that is not for them to decide. All we have to decide is what to do with the time that is given us."

(Tolkien J., 1954, "The Lord of the Rings")