

SOMATIC EXPERIENCING COUPLING DYNAMICS

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THE HEALTHY STATE

In a healthy state, there is: 1) a mutual informing among the various aspects of SIBAM (sensation, image, behavior, affect, meaning); 2) both fluidity and connectedness; and 3) the organism charges and discharges spontaneously with flow and fluidity.

TRAUMATIC COUPLING

Traumatic coupling is a certain configuration in the body-mind system that occurs after a trauma and that serves to hold and bind the overwhelming energies of the trauma. There is a very high probability that any arousal will lead to this configuration. This adaptive configuration becomes the template for discharging and/or binding and coping with any arousal that is overwhelming to the organism. In other words, the organism tends to adapt to any new threat to its integrity by making use of these readily available “adaptive” patterns. (Technically speaking, this configuration should be called maladaptive after the trauma but that term can pathologize the condition which is not desirable).

This “adaptive” configuration takes up a significant portion of the available energy handling capacity of the organism. This leaves little reserve capacity for daily living. So when the organism is faced with an arousal that is overwhelming of its reserve capacity (which is minimal) this maladaptive template will be strained or stressed. This overwhelm can result from the release of traumatic energy bound in the system and/or from the maladaptive feedback loops in the system (which serve to intensify or increase the arousal).

Keep in mind that the source of the arousal need not be directly related to the original trauma. Suppose, for example, a person had experienced a medical procedure that was traumatic and every time they smell ether they experience an

intense arousal. That would be an example of an “organism faced with triggers that directly act on the template.” But that same level of arousal could occur in response to an event that has nothing to do with the person’s original trauma. The maladaptive template will be stressed and strained nonetheless.

The organism may use these readily available “adaptive” patterns in part or in whole, depending on the nature and type of the new arousal or trigger. If the organism is not successful in its attempt to adapt to the overwhelming arousal, a new configuration of over-coupled and under-coupled elements might emerge. This will further restrict the organism's reserve capacity. Like a flood plain after a new flood, it might somewhat resemble the old flood plain with a number of significant changes. How the terrain is altered would of course depend on the nature, duration, and the intensity of the new flood. Likewise with the nervous system configuration.

Traumatic coupling involves the overall stress response (which is made up of over-coupled and under-coupled components). Suppose, for example, a person hears a loud noise and instantly the right side of their body freezes. This is *over-coupling* in the sensory motor realm. Suppose another individual heard the same loud noise and suddenly they were no longer aware of their surroundings – they moved instantly into an dissociated state. This is an example of *under-coupling*.

OVER-COUPLING (OVER-ASSOCIATION)

Over-coupling is when two or more aspects of SIBAM are overly related -- overly connected. These elements come together in a rapid succession.

Signs of Over-coupling

- ***All roads lead to Rome phenomenon***: You know where you will end up before you get there. “This” is always followed by “that,” so it seems as though there is no way out. For example, suppose a person was physically attacked. Suppose at the very moment that the attack occurred there was a flash of bright light (perhaps from the headlights of an approaching car). It may be that every time this person sees a bright light, they see the attacker coming.
- ***Constriction***: Over-coupling always goes with constriction. When there is arousal, some part of the body may automatically constrict. Suppose for example, that every time the person sees a bright light, they see the attacker

coming, and then they tense or tighten in predictable ways. These constriction patterns in the body can be global (e.g., when the whole body goes rigid) or local (e.g., when one or more body parts becoming constricted).

Sometimes the sequence in a constriction is not clear. Or, the various pieces in a constriction is not clear. Suppose for example, you are working with a client with high anxiety who has a constriction in the chest. Within the constriction pattern there may also be anger and/or shame. You may not be aware of any of this in advance. It may just emerge as you work with the constriction.

Similarly, you may not know whether the shame comes first and then the anger, or the anger comes first, then the shame. You simply work with the pieces as they emerge (just as you would do if you *did* know all the pieces in advance or you *did* know the sequence in advance).

Physical constrictions might also contain thwarted defensive and orienting responses (e.g., eyes looking in a direction toward or away from threat; neck ducking into shoulders; head and neck extending to scan; fists forming; hands clenching; feet stomping or preparing to kick).

Whatever the case, see that you take the time to complete each piece. As you work with the constriction for example, shame may emerge. You work with the shame. Then there is fear and you work with the fear. Then there is anger, and you work with the anger. Then there is the release in the diaphragm. Then there is a release in the inter-costal muscles . . . etc.

Examples:

- Over-coupling can occur **across** different elements of SIBAM.

- ▮ *Meaning and sensation:* A person may think the thought, “It is my fault [meaning]. Then there is a constriction in the diaphragm [sensation].

- ▮ *Affect and behavior:* They feel angry [affect]. They are unable to contain the anger and they strike someone [behavior].

- ▮ *Sensation and behavior:* Often there is a predictable sequence of sensations that occur before the onset of a seizure or a headache. Becoming educated about the sequence and working to deactivate the charge early can keep the headaches or seizures from happening.

- Over-coupling can also happen *within one element* of SIBAM. For example:

- ▮ *Sensation*: Warmth in abdomen leads to a headache.

- ▮ *Image*: A client may see an image – and then several images are triggered and these images come in rapid succession. For example, they see brake lights come on the car in front of them -- then they see a crash -- then they see the car crash into the central divider, then they see the car flip over.

- ▮ *Behavior*: The hand starts to tremble, the shoulder goes stiff, and the neck goes stiff as well. (Recall that behavior, in the SE Model, includes anything that is observable).

- ▮ *Affect*: They feel anger -- then immediate sadness. The same feelings keep repeating themselves without resolution or change.

- ▮ *Meaning*: One thought after another in rapid succession.

How To Work With Over-Coupling

The basic strategy is to un-couple or pick apart the over-coupled pieces – helping the client gain awareness of the sequence. For example, they may not be aware that first there was a tension in the right hand, and then in the shoulder, and then in the neck . . . So you help them to track the sequence. That awareness alone often starts to change things. This also helps to establish coherence – i.e., some sense of order.

It's possible that multiple over-coupled sequences or, over-coupled elements with no apparent sequence, might emerge simultaneously. In these cases, choose one part or sequence to work with. Otherwise, the client might go into overwhelm. As you pick apart the various components involved in the over-coupling, there may be a re-association of those elements in the client's awareness. That awareness alone might bring a new charge.

Suppose for example, that you are working with the jaw in a jaw neck-diaphragm in an over-coupled constriction pattern. The constriction in the jaw is released, and then the client begins to feel angry. There is a charge from simply releasing the constriction. But there may also be a new and additional charge when

the anger becomes conscious and begins to integrate. The charge from the anger may not integrate but instead overwhelm the organism. This, in turn, might lead to under-coupling. The client, for example, may dissociate, and no longer feel the anger. In cases like this, you might decide to work with the under-coupling in the moment. Or, you might decide to work with it later.

Watch for the emergence of orienting and defensive responses (particularly when working with constrictions). Again, these might include: eyes looking in a direction toward or away from threat; neck ducking into shoulders; head and neck extending to scan; fists forming; hands clenching; feet stomping or preparing to kick. Keep in mind also, that *trembling discharge* of a prolonged nature can happen in working with over-coupled parts (It can also happen when under-coupled parts are brought together). Reassure, educate, and normalize their experience. This helps to uncouple the fear from the discharge and helps the discharge complete.

As stated earlier on, just having a client pay attention to a part that is involved in over-coupling is often sufficient to start to resolve it (provided there is enough resource in the system). If that does not happen you might try one or more of the following:

Stretch out the response -- like stretching taffy. You can do this for example, by slowing it down and/or asking for details. Then, titrate, pendulate and track for those elements that begin to reflect aspects of the healing vortex. Recall that *titration* means breaking down stimulus or charge into manageable pieces that can be integrated and moved through. *Pendulation* is the organic flow between organization & disorganization.

The idea then, is to slowly allow activation, body sensations and feelings to be accessed and assimilated so that the nervous system can adjust to each level of excitation.

Intentionally switch channels: Change to another element of SIBAM. You can initiate this by simply saying something like, "Let's come back to this later."

Backtrack: Educate the client by telling him or her that the body can remember the sequence. Backtrack to the beginning with questions like: What happened before that happened? And what happened before that happened, and so

on. If you don't know the sequence, you can start with a symptom (like nausea) and then backtrack to pick it apart. For example, the sequence may end up looking something like this:

(Beginning Symptom)

Anger ← Bracing ← Tension in neck ← Sadness ← Confusion ← Nausea.

Once you know what the sequence is, you can bring that sequence into the awareness of the client.

Stay with one element of SIBAM (Staying with sensation is particularly useful). Or, if you are working with over-coupling that is occurring *within* one element of SIBAM, stay with just one piece. Using one of the examples cited above (Warmth in abdomen leads to headache), you would stay with the sensation of warmth and expand upon that by asking for more detail. Or, in the case of a series of flashbacks (images), stay with just one image and ask them to allow the opposite image to jump out. You could also simply state the opposite of the image they present.

NOTE: If they keep going into more detail in one element, this might put them deeper into the trauma vortex. So watch if they are getting stuck or if they are getting increasingly activated. If they are, you need to help them to move through time. Questions that can be useful are: What happens next? What changed?

NOTE: Whether you are working with over-coupling or under-coupling, you might have chosen a piece that is hard for the client to work with. Let it go and go for another piece. But make sure that the activation from having worked with it has been discharged or absorbed in some way. Otherwise, the client might go into overwhelm with the next piece.

Grazing: At times, staying in one place for too long – trying to butt one's head against it -- might drop the person deeper into the constriction and into the trauma vortex. So keep in mind that it might take a number of attempts to work through an over-coupled complex. Just paying attention to it slightly might at first release enough energy for you to titrate towards a completion. You can then wait and see how that

changes the whole configuration of over-coupled and under-coupled patterns in a person's process.

Techniques for helping over-coupled complexes in the body to release:

- Support with one's hands where the over-coupling is – where the constriction is.
- Bodywork – anything that gives a slight expansion through movement is optimum.
- Using sounds like "Voo" to get over-coupled diaphragm and thorax (chest cavity) to uncouple.
- Inviting movement or suggesting movement to see if something starts to happen. For example, you might see the jaw is constricted and you know that the movement (in this case the fight response) is being held back. So you start encourage the movement that needs to come through by asking them to slowly move their jaw a bit. It's a way of breaking the block. Other examples might be asking them to push against you (or a ball) or kick against a pillow or a ball. Use this sparingly. Optimally, movement will emerge spontaneously. So, to the degree possible, let it start involuntarily (e.g., in image and/or in a micro-movement).

UNDER-COUPLING (DISSOCIATION)

Under-coupling is a lack of coherent connectedness among *and* within the elements of SIBAM. It's the opposite of being over-coupled. A client hears a loud noise, for example, and then reports that they can't hear anymore. Or, they hear a loud noise and then they are no longer aware of their surroundings.

The purpose of under-coupling is to help the organism to survive an overwhelming event. If there is one less piece, then the person might be able to cope. In short, elements of SIBAM are kept away from each other in order to protect the organism. In under-coupling, there is no sense of where it is going. While pieces might be connected, the connection is not obvious (e.g., every time they see an image, their hand starts tapping).

In a way, you are always working with under-coupling when you are working with trauma. As new pieces come into the client's awareness -- one by one -- you help them to associate that piece to what you already know -- what has already

emerged in the process. You link the new piece -- to another piece -- that is related to it (and which has already been associated with yet another piece or pieces that are already known and integrated).

Signs of Under-coupling

- There is no pattern to it.
- There is often a quality spaciness or fogginess
- There is fragmentation -- aspects of SIBAM do not seem to go together. There is no sense of coherence. (This fragmentation may be sensed in the energy as well).
- The client may dissociate into emotionality. The lower brain (reptilian brain) is not organized so everything comes out through the available circuitry -- in this case the limbic brain (the emotional circuitry). So, every time they see a certain image, for example, they cry.
- There may be a disconnection, or walling off, from an aspect of SIBAM like sensation, image, etc. In "walling off," the image or the sensation is not available to the client at all. For example, suppose it is well-documented that the was consistently beaten as a child, but they have no memory of it. The image is totally absent -- totally "walled off."
- There may be disorientation in time and space (Again, you may sense it in their energy. It seems diffused, fragmented).
- The cognitive presentation can be quite confused and difficult to follow. The client may for example, present a series of jumbled thoughts that don't seem to have any connection or to make any specific point.
- Under-coupling can be global (much easier to see but less common) or local (more common). Leaving the body completely or a flaccid overall body collapse are examples of global under-coupling.

Again, keep in mind that under-coupling may be followed by over-coupling. When the person becomes aware of the under-coupled elements and thus re-associates the under-coupled elements -- it often leads to over-coupling in the body and other elements of SIBAM.

Examples

- Partial or local under-coupling **within** same element of SIBAM:

▮ *Sensation*: A twitch here, a twitch there, a tension there, a relaxation there, not making any sense.

▮ *Image*: Being flooded by images that are disjointed – they don't make sense.

▮ *Behavior*: Leg shakes, arm shakes, with seemingly no connection.

▮ *Affect*: Different emotions that don't make sense. Here you can connect two emotions together or take one and associate it with another element of SIBAM.

▮ *Meaning*: Different thoughts that are not connected.

Note: Initially, you might not be able to make the connection among the elements presented. In some cases, you have to make connections to elements that were presented in the past by the client. The client, may have, for example, told you something in the past, that you can use to help them connect to what they are presenting currently. In other cases, you may have to take an element and go to another element of SIBAM and then to the overall felt sense. You can consider, theoretically, what might be missing. For example, you know the client was abandoned when they were an infant, but there is no anger when the event is brought up. In this case then, the affect element might be missing.

- Partial or local under-coupling **across** different elements of SIBAM. This is where there are two or more elements of SIBAM that are seemingly unrelated. For example, the *image* of being beaten is there, and then there is a certain thought or *meaning* expressed. But there is no obvious connection between the image and the meaning.

How to work with under-coupling

Remain calm and reassuring so that you can help them to cohere.

Track for connection. If you dump all the pieces of a jigsaw puzzle on the floor, you do not know what the picture looks like because you have not seen the picture. But you notice the connectedness of the pieces through similarities and complementarities. You track for similarities by noticing that two pieces have a similar shade, color, or some other similarity -- they are alike in some way. Or, you notice complementarities -- that two or more pieces somehow complement each other -- they balance each other -- they belong together, they begin to make a bigger whole (e.g., when you see that one piece is a stem of a flower, and another a bud).

- ∏ You can think of *different elements* of SIBAM being *complementary* to each other. A feeling, for example, may be associated with an image of being betrayed by one's mother. You ask yourself: Does the client know that the feeling of anger that she has and is directing toward you may have to do with an image of her mother standing idly by as her father abused her?
- ∏ You can think of *different pieces* of the *same element* of SIBAM as being *complementary* to each other. Does the client know, for example, that the tension in the right upper back and the tension in the back of right upper arm might be complementary to each other? The client may report the two tensions but not make a connection between the two pieces. Nonetheless, it might be that if the client could hold these two tensions together in their attention, the two pieces might connect and cohere thereby completing an incomplete defensive response.
- ∏ You can think of *different pieces* of the *same element* of SIBAM being *similar* to each other. You may notice for example, that the client is angry with you -- angry with their father -- angry with their spouse. And in the last session they processed anger about being abused by a teacher. But you notice that the client is not making the connection -- not seeing that there is a theme [anger] and that it is connected to what happened in the last session.

Note: If anger is not completing it may be because 1) There is not enough charge in the anger that the client is expressing towards any one of the parties, or, 2) The anger is not directed at the right party. It is being diffused in multiple displacements. The right connection is not there or, 3) There is a constriction (e.g., in the jaw) and the client may be unaware that this constriction is connected to their anger. The constriction may have to be worked with first.

In a case like this, if you point out the common theme of anger and suggest the possibility that it might have something to do with their anger in the last session, the different charges may come together in a big enough charge for the client to complete their anger. If it seems that is not completing because there is a constriction around the jaw you might bring the client's attention to the jaw constriction and have them open and close their mouth. Then, at the same time, bring their attention to the anger that they are feeling towards their father (By doing this, you are bringing in a different element of SIBAM which is complementary).

Track to make sure that they are not re-associating too quickly. This might release far too much energy into the system. This is especially true when the person is outside the body. If re-associating through sensation is too much, use other elements of SIBAM instead. For example, let them tell you about the abuse that they see as a story from up above and titrate from there before you start to ask them about body sensations.

If they become very activated, educate them about the idea of over-coupling. Explain to them that under-coupling may be followed by over-coupling. Explain that when a person becomes aware of the under-coupled elements and thus re-associates the under-coupled elements, it often leads to over-coupling in the body and other elements of SIBAM and a subsequent increase in activation. As the therapist, keep in mind that if you keep adding parts without discharging activation, the activation will go deeper into the viscera creating newer and deeper patterns of over-coupling and under-coupling.

Look for what is missing. Sometimes you might get to a stage with a client, and nothing is moving. There is an element of stuckness. That might indicate the need for a piece that is missing -- a piece that needs to be associated with what is going on. That piece might be:

- ∟ Something that the client has presented to you before;
- ∟ Something the client might not be not conscious of or,

∏ Another element of the SIBAM that is missing from this experience.

Whatever the case, a piece is missing and a connection is not being made. Taking the client down steps in a visualization deeper into the unconscious -- down the corridor -- into a room -- asking them see what is there -- might bring forth or lead to the missing element in the process at the moment.

You might also bring in a piece by suggesting what you think might be missing. Again, don't play this card too often. To the extent possible, you want the pieces to come up spontaneously in the process. You do not want to go fishing for things that have not come up. It may result in re-association too fast leading to a resultant charge that they cannot handle.

Go back and forth between any two aspects (e.g., between image and sensation).

Stay in the felt sense through sensation: This helps to re-establish continuity. If the client is dissociating into excessive emotionality (e.g., excessive grief or rage) you could ask: "When you feel that, what happens?" Or, you could ask: "Where do you feel that?" Or, "what happens in your body when you feel that?" In general, you might say some of the same things that you would say with over-coupling but the intention is different. The intention is not expansion, but rather connection and deepening into the felt sense.

Note: A client may be presenting many pieces that might not make sense. Or, the client might be jumping from one piece to another through a large number of pieces. There are a couple of ways that you might proceed:

- 1) Sometimes simply tracking one or more pieces -- one after the other -- getting some deepening into the felt sense with each one -- might be enough to get the ball rolling and to get greater coherence in the system.
- 2) You can re-associate one or more pieces that make some sense to you as a possible connection. You can take one piece, and start associating it to other elements of SIBAM to get some re-association (e.g., going from an image that is floating around to a sensation that is not).

*Note: When you are working with partial or local under-coupling **across** different elements of SIBAM, there might be two or more elements of SIBAM that are seemingly unrelated (e.g., anger (affect) and spontaneous movements of the head and neck (behavior). In these instances, there are a few strategies available to you:*

- 1) Associate the pieces that are presented in the current session to another piece within the same element of SIBAM.
- 2) Associate the pieces that are presented in the current session to pieces that were presented in past sessions.
- 3) Associate one or more pieces presented in the current session to other elements of SIBAM (Associating them with sensation and then to the overall felt sense can be especially useful).

Note: Not all the pieces that you are associating need to be seen or presented to you in some way. It could be an image reported to you by the client that you associate to an invited sensation or movement. A client, for example, may have been held at gunpoint. The gun was held to their temple. And the client reports that they keep getting a headache and they tell you that it is also at their temple. You might suspect then that it has something to do with the gun being held there. So you ask them to close their eyes and hear a gun click and see whether that helps them to discharge and complete that piece.

RELATIONSHIP BETWEEN OVER-COUPLING AND UNDER-COUPLING

The purpose of both over-coupling and under-coupling is to keep activation down in the system. Energy is released when two or more under-coupled parts are brought together. Energy is released when two or more over-coupled parts are taken apart (not unlike nuclear fusion and nuclear fission). As you slow down the over-coupling, activation increases, so it is often (but not always) followed by under-coupling. If you bring back in an under-coupled element – then activation increases and so it is often (but not always) followed by over-coupling. One has to find the right relationship.

There are numerous ways in which over-coupling and under-coupling might emerge. Sometimes you may work with one over-coupled complex (where there is no clear sequence). Sometimes you may work with several over-coupled sequences -- one after another. There may be times when you work with several under-coupled sequences – one after another.

Sometimes under-coupled pieces dominate the client's process. Sometimes the over-coupling dominate the client's process. But there are also instances when they appear together. In such cases, focus on working with one or the other even though both might present themselves at the same time.

As long as the energy that is released is integrated in the organism without further straining it, the organism's process of self-regulation seeks out under-coupled elements to re-associate into the overall felt sense. It also seeks out over-coupled elements to take apart and absorb into the overall felt sense.

In working with over-coupling, we might have to work with under-coupling from time to time in order to complete over-coupling work. In the same way, in working with under-coupling, we might have to switch to working with over-coupling from time to time to complete the under-coupling work.

Consider the following video-taped session of a woman working with Peter Levine.

- ∏ He started with working on the over-coupling in the neck.
- ∏ He then had to work with the under-coupling (her leaving her body) in order to complete the over-coupling work that he had started to do.
- ∏ She was leaving her body because a piece (an aggressive impulse that she could not handle) uncoupled from the constriction in the mouth.
- ∏ By re-associating her under-coupled energy with her physical body by preventing her from going out, he was working with an under-coupling (that occurred as the result of the energy released from the over-coupling work).
- ∏ The aggressive impulse is an example of a piece that was over-coupled that Peter initially did not know was there.

∟ Ultimately there was more charge and discharge and then the completion of the aggressive impulse in the archetypal animal realm.

Self-regulating clients will go between working with over-coupling and under-coupling. With your help, they will re-associate and get activated spontaneously when they are renegotiating their traumas. Some people are more frightened by over-coupling and some more by under-coupling. Educating them about their process helps to remove, or at least lessen, the fear when these sudden changes happen. This makes them less likely to start applying the brakes and abort the self-regulation.

Again, remember that in working with both over-coupling and under-coupling, there is energy release. So after each piece, care has to be taken to ensure that there is resolution to this energy through a combination of discharge and integration of this energy. Otherwise, the “flood plains” might not change at all. Or, there might even be new flood plain that is worse than the previous one.

In de-sensitization therapies, for example, the energies that are released with a sequence of re-associations may go deeper into the organism (for example into the viscera) and create an even larger or more entrenched maladaptive pattern of over-coupled and under-coupled elements.

Ideally, in the process of trauma resolution, one piece after another enters consciousness, activates the organism, and, with adequate resource and support, is integrated in such a way so as to move the organism towards more wholeness, capacity, and resilience.

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