Rewiring Your Brain For Healing: How To Escape The Trauma Loop Transcript

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Introduction and Guest Background

Hello. Welcome back to the Hormones and Mental Health Summit where we're overcoming anxiety, depression and ADHD in women. I'm your co-host, doctor Sharon Stills.

It's my pleasure to be here with you. It's even more of my pleasure to have a very special guest here with you this morning. There's not many people I will wake up early for and get ready to do an interview early in the morning, but for Mr.

Alex Howard, I will. I'll flesh out. Coming from across the pond. He is. You're in for a treat, ladies. He's the founder and chairman of the Optimum Health Clinic, one of the world's leading integrative medicine clinics.

Has a team of over 25 full time practitioners supporting patients all over the globe. He's the creator of the therapeutic coaching methodology, and since March of 2020, he's been documenting his therapeutic work with real life patients via his in Therapy with Alex Howard YouTube series.

He's created some of the largest online conferences in the health and mind body markets, including the world leading Trauma Super Conference. So we're going there today, ladies.

His conferences have been attended by over a million people. He has published academic research and publications such as the British Medical Journal, Open and Psychology and Health.

And he's the author of books. It's like, what haven't you done? His book Why Me Decode Your Fatigue? And his latest book, which has been out, I found out for around 15 months called It's Not Your Fault Why Childhood Trauma Shapes You and How to Break Free, and I just love that title.

I think it's something that some portion. So I know I'm going to pick up a copy should all go pick up a copy, but for right now you're going to listen in and we're going to talk and have a very special conversation.

So welcome, Alex. Thank you for being here. Thank you for having me Sharon. I'm happy to be here. Looking forward to getting into that. Yes, yes. So gosh, just such a profound and prolific background you have.

So this is certainly not your first rodeo. So I know that you do a lot of work around the nervous system. And maybe just briefly, you can tell us how how you got to be involved in this and why you do what you do.

Yeah, yeah, I hear my CV. I think I must have started when I, when I was a baby, and I guess we all didn't believe is that's, that's where we first get shaped and get impacted.

And I the kind of the short version is I suffered from, otherwise known as chronic fatigue syndrome for seven years from my mid-teens to my early 20s.

And that that was really what catalyzed my passion for health, for healing. The first two years of that journey was really just waiting for sort of someone else to find the answers, and that that didn't work very well.

And then I spent the next five years pretty obsessively. So maybe that's not the way you want to do it. But really, my whole life became about getting my health back.

And along that five year journey, I saw dozens of different practitioners, took dozens of different supplements, read hundreds of books to thousands of hours of meditation and yoga and courses and workshops.

Alex Howard's Healing Journey and Clinic Work

And along the way, one way I could put it is I was searching for the answer. And what I realized is there isn't one answer. There's lots of pieces of a jigsaw that one has to figure out the way to put together.

And that's really what. So the last, 22 years, I think it is now since I made a full recovery, really, my career has been about how do we figure out what those jigsaw pieces are, build effective protocols around them, and then how do we take those protocols to as many people as we can?

And so soon after I recovered, I founded the Optimum Health Clinic. And as you, as you mentioned in the intro, has become a very successful, integrative medicine clinic.

And one way I think about is it's sort of become my laboratory for research and development of trying to figure out what are the most effective ways to help people with chronic health issues, with mental health challenges.

But particularly this piece we'll talk about today of trauma seems to be one of the pieces that underpins really all the work that we do. And sure does.

I really get to the point in my own practice where if you are going to work with me and do the physical piece, you have to be committed to doing the trauma piece as well, or you're just never really going to reach that pinnacle of healing that we're all capable of.

Yeah, yeah. And that's right. And I think I am always keen to say it's not trauma healing instead of functional medicine. It's not trauma healing. Instead of making good lifestyle choices.

It's not trauma healing instead of working on your relationships. It's not any of these things on their own. It's how all of these pieces fit together.

And sometimes the challenges we get so overwhelmed. Where do we start? And so actually, it's figuring out the right sequence of the right interventions at the right time.

Exactly, exactly. So what is this framework? What is your what is your jigsaw puzzle? Well, I think it's almost like a collection of jigsaw puzzles, but but in terms of the context of trauma, that's what I think we're going to focus.

So, let me say a few things to set this up. And then we can we can explore a bit more from that. So I think the first thing to say is often people will say, I had a basically happy childhood, therefore I don't have trauma and sometimes trauma.

The word is the problem because people have connotations and expectations that they think the trauma means something very dramatic and very, very clearly, obviously traumatic that that happened.

But sometimes the things that shape us the most are actually much more subtle. And sometimes the more explicit and, and sort of overtly obviously traumatic something is were actually more likely to get effective help, an intervention.

And it's actually the more subtle, the repetitive things that maybe we normalized to, because maybe they were normalized in the in the environment that we grew up in.

It's sometimes actually them that shape us the most. And so as I was thinking for for my last book and through our Trauma Super Conference series, I've interviewed, you know, literally hundreds of the world's experts on the subject of trauma.

And I've started nearly all of those interviews by asking the question, you're basically asking me like, what is trauma? So it's like, I can't have a good answer to the question.

Having asked also many other people, and as I thought about it, I realized that that trauma can't just be the events that happen, because you can have a bunch of people have the same experience, but not everyone is traumatized

by the events that happen.

I also realize the trauma is not just, yeah, the the the context within what the environment within which the event happens is also important. But then also we can't just think about trauma as what happened because the issue is what is happening.

Like, how is that history still alive in our experience now? And so as I was looking for a map, for a framework to make sense of it, I sort of put together a few different pieces, the first of which was to recognize the trauma that happens in the past echoes in our life now.

Right. It's like something that the original source of the sound still has those echoes that are alive. It's not that it happened, that it's in the past.

It's still alive in our life now. And then I realized that also Echo could be an acronym, that it's actually four stages of what happens with trauma, which in a way brings together some of these pieces that we just touched on.

So the E of echo is the events that happen now, those events could be overtly traumatic events, and that would be things like adverb people are one of, I'm sure, heard of adverse childhood experiences and some of the fascinating research that's been done around those that we know that if someone has experienced, physical abuse, sexual abuse, you know, a parent being incarcerated, parents that have, you know, addiction issues, we recognize that those things are likely traumatic.

But there's also kovat traumas. This is what I was mentioning a minute or two ago around the things that where everyone's normalized to so they don't get perceived as trauma, but they still shape us.

Right.

Trauma as Events, Context, and Nervous System Dysregulation

And that that could be as simple as, you know, our parents being more interested in what we do and what we achieve than what we feel and who we are. And so maybe, you know, one day we come home from school and we got, you know, 98 rather than 100 out of what, you know, not out of 100 in a test.

And we get punished for that because they're more interested in the two that we got wrong than the 98 that we got. Right. So we learn that the world is not really a supportive, kind, loving place and that actually our worth is defined by what we do and what we achieve.

We wouldn't call it a trauma because it's just what we need. But it's not healthy for our optimum emotional, psychological and actually physical development.

So we've got the the E of X, which is the events I'm gonna sort of go quite quickly. There's a lot of pieces, but I want to give you the model. We can talk more about it.

There's then the C of echo which is the Conte text within which those events happen. And we all have basically three core emotional needs the need for boundaries, the ability to say yes and to say no to other people and to ourselves, the need for safety as a baby.

We get that through co regulation with our caregivers that teachers are nervous system, we're safe. And then that's the foundation of our ability to self-regulate.

On nervous system as an adult. Like that ability to self-soothe effectively and the core emotional need of love. And that's not love for what we do and what we achieve.

It's love for who we are and as we are. And that's basically the foundation of our self-esteem and our self-worth. So if we have overt or covert events of trauma in a context where those core emotional needs are not met in the

optimum way, we then go to the third step or the H of echo, which is the homeostasis, the homeostatic balance of our nervous system shifts, so we become dysregulated.

We go into what I, what I call, a maladaptive stress response, a healthy stress response. You and I walking down down the street, we don't see the big, big.

We have electric busses now in London. So those big red busses you see in the movies are now often electric. So we don't hear it coming towards us. And in that moment, we've got to get out of the way because a sudden threat and danger, we get a big hit of adrenaline, cortisol, various other stress hormones.

That is a healthy stress response to allow us to survive that immediate threat danger. A maladaptive stress response is when we're responding to danger that isn't actually there.

Maybe it's a perceived danger in our mind. Or maybe we've learned the world is a dangerous place and we're now just responding, even when it's not dangerous.

So the homeostasis, the balance of our nervous system changes, and we get normalized to being in a maladaptive stress response. We then have the outcomes in our life of that anxiety because on nervous system is constantly, kind of over, over kind of running depression.

Depression to me is not typically feeling sad all of the time. Depression is often an absence of feeling like it's a feeling of emptiness, which really comes from a shutting down from that, from that maladaptive stress response.

We go, in fact, into a free shutdown response. Addictions are often attempts to self-medicate a dysregulated nervous system. A lot of the attachment issues we see in relationships are often a result of people trying to find ways to manage a dysregulated nervous system, so many of the symptoms, physical health symptoms, we also chronic illness can often be heavily impacted by this.

A lot of the physical symptoms or the mental health symptoms that people struggle with, to me are outcomes. The O of echo. They are outcomes of this sequence.

We've had events that have overloaded us in a context that didn't support us. The homeostasis of our nervous system is shifted and the outcomes of the symptoms.

And the problem is, if we try and address this by just treating the symptoms, we're not really dealing with the core issue. And to me, that's why understanding the sequence of trauma is so important.

Mike drop brilliant I just really you just said it so eloquently. Of course the British accent doesn't hurt. But it just that that is so true. And when we come at this I'm anxious.

And do I need Gaba or theanine. And we're totally missing the events that led up to it and that this is just the echo and I don't think you can escape it being a human.

I think even with the most well meaning regulated parents, there's still going to be times just how life is that you are going to perceive something as being abandoned or being shut down, or not being loved for the way that you need to be.

I think every single person, I think it's kind of you come into the world and you're like, okay, I'm signing up for this, I think. Right? Is there is there anyone you know that hasn't had some sort?

Because, you know, we say at the big T or the little T trauma and you're talking a lot about these little T traumas that we don't recognize, but I don't think anyone can escape that.

Have you have do you have any anything to. I haven't met them but it doesn't mean they don't exist. I just want to play two narcissistic that I know that that's the. No.

But think about it like this. Like, does our physical body get through childhood without getting some injuries right now? If it does, we probably had a really boring childhood, right?

It's like, you know, we can all check in with our body. And it's like, I could think about, you know, bones, that I've broken, I can think about, you know, the.

Yeah. So we've all had physical impact now can they heal? Yes, they can. But when we get physical injuries, we normally address them at the time. Do we have emotional impacts and injuries?

Sure we do the differences. We typically don't address them. Right. So let's say the physical injury is let's say we are playing a game of I don't know, we're playing baseball.

And you know, someone hits the ball when it catches in the rips, right? Like we get bruised every week. Maybe our rib gets a bit cracked. We go to the doctor, get taken care of, and we would be really careful not to let that happen again.

The equivalent of that in what we're talking about here is that happens to us every day, again and again and again. And everyone pretends that it's not happening or everyone pretends that that's normal.

So the difference has here, yes, we can heal from emotional, from psychological wounds, but if we're not even aware they're happening, then they and everyone's it's kind of like the Emperor's new clothes.

Everyone's acting like like it. It's it's it's it's fine as it is, but actually we are being impacted and we are being shaped by those things. And then a lot of the suffering we have in life is not necessarily what happened.

It's the things that we've done to try to navigate what happened. So another way that I talk about this is the walls of the prison that we built to survive childhood.

Also the walls of defense that we built to survive childhood become the walls of the prison that trap us in adult life. And so, going back to my earlier example, if we learned that the way to feel safe and the way to feel loved with mom and dad or grandma or foster care or whoever it was that were our primary caregivers, if the way to get that was to always be the best at everything that we do, then we may be managed to do that most of the time, the best that we could anyway.

And we survived childhood, but now that's become our default kind of approach to our whole life. And that's now the cause of suffering in our life. So it's like people often say, well, you know, how can I be shaped by things that are in the past and the point that I always want to make as well, if they really are in the past, then that's one thing.

But typically we're still recreating that environment every day in our life now, because we're defining our self-worth, or we're trying to find safety, or we're struggling to put place in boundaries using the strategies that we learned.

But actually, are any of themself in a way, like a form of self-harm, like we've gone from being the victim of the circumstance to being the perpetrator of the circumstance.

Yeah. And I was I just was thinking while you were talking about a moment ago with the, the baseball and how if you get hit in the ribs, everyone comes and there's, are you okay?

Healing Sequence: Regulation, Boundaries, and Inner Safety

And you go to the hospital and it is a thing, and maybe you get your chicken soup or whatever, and you get tended to and you heal, but say you missed the ball and, you know, didn't hit, you just fell and everyone ridiculed you and you felt horrible.

No one, no one rushes to that. No one really sits and handles that. And that could be what then carries you. You're fair. Fear of failure. You're you're embarrassment.

And it never got spoken about. It just got. And as a child, that's how we're creating I think. Correct me if I'm wrong, it's to the age of seven where our inner child is being developed and what's happening.

We're deciding how the world works, and our whole inner program of how we believe is being created. And so I it's funny because I'm a grandparent now, and literally in this moment, my daughter in law, like 20 minutes ago, dropped the two and a half year old off at preschool.

And wow, big moment, I know. And I'm going, oh my God, is this like her first trauma? Is she going to feel abandoned? You know, and it's like it's exciting.

It's a great place. We checked it out. She's going to have fun. But that's going through my mind. Like how is she perceiving this I like texted I'm like, how did it go?

Did she cry? What was she like? And you know, and it it's unavoidable. But we often especially I think now being a grandparent rather than a parent, I have a lot more wisdom.

And when I was parenting, I never thought about these things. Right. You're just trying to survive and get literally. Yeah. I often joke that I was, I was, I was an expert in childhood trauma and parenting until I had my own kids.

And I realized how much I had to learn. Exactly, exactly. So, I mean, your frame work is is beautiful. And so what would you say? Because even I mean, I've done I mean, you're making me laugh.

I said, God, I remember when my life was just one workshop after another workshop after another workshop, and so even having done all that work as you were talking, I'm thinking about things in my own life and I'm sure everyone felt like, well, I wonder if I probably could go back and do some more eMDR in that place.

And so what would you say to the women listening who are going, okay, I understand, that's me now. Now what? Now what do I do? Yeah, yeah. So it's a big question.

I want to focus on a couple of pieces of it. One way to think about it is to take the echo model and reverse it. Right. And so we've got the symptoms.

We've got the outcomes of trauma. If we go back to the step before a lot of what's driving that is this dysregulated nervous system. So working to regulate the nervous system is super important.

There's lots of ways to do that. And you know in my in my last book and I have a, a very successful online program called the Reset Program. You know, we go to this stuff in, in a lot of detail, but kind of the headline I would say is that there's there's lots of ways to regulate the system.

Meditation, yoga, Tai chi, chi gong, breathwork. I have opinions around sort of, you know, nuances. But the key thing is we need a practice which is going to teach our system how to regulate.

So that's often a critical starting point. And then if we go back a step before and we go back to these three core emotional needs, of course in childhood we are dependent upon our caregivers to meet those needs for us.

And that is sort of in a way, if you get if you get a skill for attentive, loving parents, that sort of the blessing of childhood. But if you don't, it's sort of the curse of childhood.

And sometimes it's not that our parents don't love us is they just don't know how to love us in the way that we need. And so a big part of our healing work is learning to meet those core emotional needs for ourselves, right?

Learning how that builds on what we just talked about in terms of working on the homeostasis of our nervous system, right. Cultivating a sense of inner safety cult of eating a place of of inner love, learning how to have healthy boundaries with ourselves, but also healthy boundaries with other people.

And so those three themes of inner work for me, and that's really what most psychotherapeutic work is focused on those on those three key things. And then and I would say, and really only then we may need to go back and do work on those specific events.

But one of the things that I see people do is be very quick to go and do things like eMDR or other kinds of processing work, but what they're actually doing is taking a dysregulated adult self to try to heal a dysregulated child self, you need to have a regulated adult self to heal a dysregulated child self.

And so a personal observation is that people can be very quick to want. It's a little bit like in you traditional work. People are very quick to want to go to heavy detox protocols, and they don't want to do the work to build the system up fast, like people go and see practitioner go, I want to do a full on liver detox or I want to do it, and then they just feel massively worse and then they're like, oh my God, nothing ever works.

Well, your system wasn't strong enough to do it. And the same thing is true with with doing trauma processing. The a quite a good percentage of people, if they really get the other steps in place, the trauma processes itself, it doesn't actually require specific intervention.

When it does require specific intervention. It's much it's much more effective, but also much less uncomfortable to do it. When we've got a well resourced system in the first place.

So for me, it's not just we need to do each of these things, but the sequence of how we do them is also really important, really. And, you know, I'm just thinking wherever you go, there you are.

And I, I work with patients on that all the time because if you come so dysregulated, it's like, I need the hormones. I need the hormones. It's like, no, we're not going to put hormones into a dysregulated nervous system.

We have to who are you? It's like, and yeah, yeah, you were making me chuckle, but it's what do I eat? And I always talk about it's more important about who are you being when you're eating rather than eating the organic blueberry.

ADHD, Neurodiversity, and Trauma

It's got to go into the so just so, so powerful, so, so important, so I'd like to kind of unfortunately we're going to run out of time soon. But I'd like to see if you could take that lens of yours and just apply it to ADHD.

We've talked a lot about, depression. Anxiety seems to be more well known about and talked about. So I haven't really had a more of a conversation about ADHD and trauma, and I'd love to just hear your lens on that.

Yeah, yeah, yeah, I know there are some schools of thought that will say that ADHD is an outcome of trauma, you know? So take my model. You could put that in the eye of of of outcomes.

That isn't my personal opinion. My personal opinion is that it can be exasperated, can be worsened by by trauma. But actually what I'm more, I'm more keen to highlight is that undiagnosed or poorly understood ADHD is its own trauma event.

Right? So if you grow up as a neurodiverse person in either a neurotypical environment or a neurodiverse environment that doesn't recognize neurodiversity, then that is a significant trauma event, right?

Because one of the things that people often learn is who they are is broken, or who they are is wrong, right? Like they are different to other people.

And as opposed to that being a different wiring of that brain, it's like that something is broken or going wrong. And I'm always at great lengths as a father of three neurodiverse kids in a hospital to ensure our diverse wife and and I suspect I they're not alone in their neurodiversity.

It's like the recognition that neurodiversity managed and understood well, yes, it can still have its challenges, but it's also a superpower, right? You look at some of the most brilliant people in history, and what part of what made them brilliant is they weren't neurotypical in the way that they thought.

The way they approached challenges, the way that they solved problems. But when we don't have an understanding and a recognition of both our experience, but also what we need to help regulate ourselves within our experience, that becomes another load on the bow of our of our trauma.

Right. And and then taking ADHD as an example, an ADHD brain doesn't necessarily respond in the same way as a non ADHD brain to a lot of the practices that one might learn to regulate their nervous system.

Right. So there's a whole category of folks that will go and learn meditation, for example, and feel like they're the only person in the room that can't do it.

And again, it's like they're wrong, they're broken. They're this, they're that as opposed to their brain needs a different way of approaching it. That might mean they need to do more movement based practice.

That might mean that they need to do physical activity, significant physical exercise before then being able to come into more down regulated state. There's a bunch of different ways we might understand that.

And what would that? But. And the other thing I want to say is that, you know, the kind of rise of awareness around neurodiversity, particularly ADHD and autism.

I think I've had a particular big rise in understanding in recent time, I think has been great. Obviously it's been great. It feels like, in a way, what happened for trauma five years ago has been happening for neurodiversity in the last year or two, but we also have to be a little bit careful of a trap that I think a bunch of folks fell into a trauma.

And I see the same thing happening now with ADHD, which is that the breakthrough at one stage becomes the trap of the next stage. And what I mean by that is the breakthrough is to recognize I have trauma.

The trap then becomes, oh, I can't do that because I have trauma or oh no, well, I have trauma. So it goes from being a way of understanding our experience to becoming an identity.

And the same rest can happen with things like ADHD, where it goes from, oh, it's a breakthrough to understand that my brain is wired differently, therefore I need to have it. Adaptations.

I need to recognize what my needs are two actually now limiting ourself and going oh well, no, I have ADHD, so so it's finding that really healthy and sometimes quite hard to find balance between understanding of ourselves, advocating for our needs, recognizing where our edges are but not then creating a new present that we get trapped in.

Yes. Oh, I, I didn't know where you were going to go, but I love where you went with that answer. Because that is so real. And realizing that ADHD, you're not wrong, you're just different.

And we what I have found is that I think there are more neurodiverse people than we've. Oh, totally. It's not like they're the minority. We have kind of set it up that they are, but it's more and more popping up and just being unearthed because we didn't give the space to even be in that.

And I always I have a lot of, experience with this and realizing that we have kind of created this society. Oh, everyone needs a hug. That's how you'll feel better.

Resources, Reset Program, and Closing Remarks

And there are a lot of neurodiverse people who that is not going. Totally, 100%. Better. And so I've become really conscious about changing the way we speak.

And you hear it everywhere, well-meaning people. Right? But it's so it's really this taking this stands for opening up and really allowing diversity. And I think it's a very exciting time for that.

For people to really come into who they are and to be able to say, wow, because they're so used to masking to fit in and not realizing there's another option or that it's not.

So it this is a bigger topic for it. But, for those of you listening, I hope that just really opens up a space. So tell me more about this reset program and where the audience can.

What's the best way to hang out with you online and learn more and all the things. Yeah, the best place to go is my website which is Alex howard.com. And that signpost towards everything that I do.

So that signpost towards the Optimum Health clinic at signpost towards our Therapeutic coaching practitioner certification program. Towards the reset program.

The other thing that's worth pointing out is you mentioned kindly in the introduction that, I have a YouTube series where we film people's therapeutic work with me.

So you can find that on YouTube. You just search in therapy with Alex Howard. There's about 100 episodes, I think, of that now. So that's a really good way of seeing a lot of these ideas in, in sort of a real life kind of context.

That's awesome. Okay. Well, I'm going to go down the Alex Howard rabbit hole, and I hope you don't join me. No. But in all, thank you. I mean, the work you do is profound.

And just the conversation you brought to this summit, I think is going to help a lot of the listeners, just really opening up this space, this really is, is the medicine.

I remember when I was a baby in medical school in the late 90s, and I got introduced to mindfulness based stress reduction with John Kabat-Zinn. Yeah, yeah.

It really. Real pioneer. Yeah. Everything. And I was like, this is the medicine. I love my herbs, homeopathy, I love my hormones. But this is the this is the medicine for the soul, for the human, for evolution and for happiness, for joy, for all the things.

So I think you all should listen to this, this conversation again, because it will just deepen. And so I just want to thank you again for being here. Thank you everyone for listening.

This was truly, truly an important one. And if you're if you're thinking, okay, but I gotta get to the one where it tells me the top five foods to eat to reduce my anxiety.

Listen to this again and again and again, because this is the healing, I promise you. So we'll be back with another talk. Stay tuned and thank you all for being here.

Sending you all the love.