Introduction and Guest Background

For. Welcome back everybody. I'm your host, doctor Greg Eckel. This is the bioenergetics summit, and we have my esteemed guest and colleague, Doctor Kisha Ewers, on talking about the bioenergetics of childhood trauma and how it impacts adult life.

She is an integrative doctor of sexology, family practice, advanced registered nurse practitioner, psychotherapist, herbalist, and is board certified in functional medicine and Robotic Medicine, and is the founder and medical director of the Academy for Integrative Medicine Health Coach Certification program.

Doctor Kesha has been in the medical field for over 30 years and after conducting her own research titled Healing Unresolved Trauma in 2013, she developed the heart model for understanding how past childhood traumas impact adult health is such an important topic.

This led to the creation of her online program You Unbroken, for patients to heal their own trauma, and the Mystic Medicine deep Immersion healing retreats up on San Juan Island in Washington state, doctor Kesha is a popular speaker, including at Harvard and from the Ted stage bestselling author of Solving the Autoimmune Puzzle The Woman's Guide to Reclaiming Emotional Freedom and Vibrant Health, The Quick and Easy Autoimmune Paleo Cookbook, The Anti-inflammatory Recipes with seven ingredients or less for busy people.

I need to read that one. And Your Libido Story a workbook for women who want to find, fix and free their sexual desire. Doctor Kisha, welcome aboard. Am so happy to be here.

Thank you for having me. You know, this one is so important. And, you know, we think about bioenergetics is kind of being in the ether, but this is really bringing it home for us.

And you have so many credentials, so much study in different facets of functional and integrative medicine. How did you come to this work? You know, we all have a story, right, of how we got here, and I'm definitely no exception.

So I started out as a registered nurse. We were just talking about that off air, LDS Hospital in Salt Lake City and gravitated immediately. You know, from the age of 19, all the way through my 20s, I was a marathon runner, skydiver.

And I loved the high intensity adrenaline junkie, you know, and thoracic ICU and life flight and things like that. And just like it was a perfectionism driven, pushed myself so hard.

And then around age 30 and, you know, this is the way my patients describe it to you, and it's patently not true. But all of a sudden, I got sick, right?

Personal Autoimmune Journey and Ayurveda

One day I woke up with ten extra pounds of puffiness all over my body where my joints were, and I was just flattened with exhaustion. They were red, they were inflamed, and it was like someone had taken the batteries out of the Energizer bunny.

And so I got in to a doctor and in the course of the history taking process, she asked me if I had a family history of autoimmune disease. And I said, you know, I think my grandfather had rheumatoid arthritis, and he died in his 50s, actually, the age I am right now.

And he was wheelchair bound, I think, you know, and I just kind of said, yeah, I think so. And I never knew him.

And she said, well, that's what you have.

And here are two prescriptions. One is for methotrexate and one is for a strong non non-steroidal anti-inflammatory drug. Take them until you get worse.

And when you get worse come back and we'll change your meds. And I you know it wasn't if it was when you know. And I just remember saying well hang on just a second.

You know, I'm very disciplined. I make my own food, you know, I'll do anything. And she said, no, this is genetic, right? So go home. Yeah. I just remember thinking like it was this sort of dismissive.

Close the bag, put it on the shelf. It's genetic. There's nothing you can do. And on my way home, really contemplating that and saying, you know, I wonder if there's another way of looking at this and getting home and and looking on the computer, PubMed, where we keep our medical research and looking for something.

And I remember finding an article on yoga and autoimmune disease. And so the next day I was in my first yoga class. And in the course of that class, as they're wont to do, the yoga instructor, he had us holding these postures for for a long period of time, and he was wandering through the studio talking about this framework of medicine for a little bit called Iron Veda.

And he said, enough. It's the sister science of yoga at 10,000 years old from India. And he said enough that it piqued my interest. And again I went home, looked it up, and what I discovered was really revolutionary for me at the time.

I mean, I always tell people if an herb had bitten me, I wouldn't have known it. You know, like, I just I was not in. And what I do today, nothing. And, and, you know, I went home, I let this, this framework of medicine up and it was like the clouds parted and the angels saying, you know, like, oh, this makes so much sense.

We're not all the same. And the attempt that we make, you know, I came from this intensive care unit branch of medicine where it's very cookbook. You know, you're triaging constantly.

And if this happens, then you do this and there's there's always a decision tree that you're following that, that that has drugs that go with it, you know, and it's not at all about root cause, like investigating why this happened.

It's getting the person out of the fire. Right. And then someone else is going to go figure the other stuff out, maybe. And so this was really new for me.

And, and I remember reading about it and going, oh my gosh. Like, of course, this is why when I push in that scene for someone that's nauseated, you know, one person will go crazy with anxiety and they can't stay in their skin and the other one will go to sleep like, oh, of course we're different.

And it really started flooding through these examples that I had met in my medical career of how we are not the same and don't respond the same to drugs.

And so I just remember thinking, there's something to this. And then I read further and it said, by the way, autoimmune disease is undigested anger. And that concept, right, of not only are we not all the same and shouldn't eat the same, you know, feed water, take walks differently.

Right. But also we have to digest our emotions, our memories, our feelings, our experiences. And that was just foreign, right? The idea that the same is an apple, you digest your experience.

And so that was something that had me rocking back on my heels a little bit and sit back in my seat and kind of go, but I'm not an angry person. Yeah.

And then the next spot was, well, that might be the fact that you can't identify with anger, might have something to

do with where you are today. And so I was learning how to become a yoga teacher, learning how to meditate.

And, you know, really going into this. And one day I was, I was I was meditating this word autoimmune started coming across my third eye space and I was swatting it away.

Because when you're new meditator, you think you can't have any thoughts. And then finally I started focusing on it and looking and and I thought, oh no.

And then that means I'm attacking my self. That means I'm committing suicide in this societally acceptable manner based. Yeah. Is there a time in my life that I wanted to die, you know, and I asked that question instead of how do I get out of the mess I'm in as quickly as possible.

Is there a time that I actually wanted to die? And so I started what I think of as like following this little breadcrumb trail backwards in my memory, banks and I landed on a ten year old girl version of myself that was being sexually abused by the vice principal of the elementary school that I was attending.

And I remember, like, really looking at her and feeling into the space and the energy of her, her thoughts, the bioenergetics of her thoughts. Right. And where she was at on the planet.

And she went it off. She went out. Right. And I remember thinking, yeah, like you tried to tell mom and teachers and and didn't have the right words.

Childhood Trauma and the Heart Model

People couldn't really understand what you're trying to say, and you didn't understand what was going on and just couldn't figure out, like, why people treated others badly like this.

And maybe this wasn't the life that you really wanted. So, you know, just really kind of wanted to go. And so I had a really thriving relationship with angels at that time.

And, you know, like obviously looking for if people aren't so great, then where can I find and just really solidified a strong relationship with the divine.

And I remember looking at that and going, oh, I wonder if this aura has something to do with this time period. And sure enough, science tells us that it does.

And because I wondered that and decided that this was a doorway I needed to go through, I went into some really heavy trauma healing, like really took it on and said, okay, I think this does have a connection.

And my rheumatoid arthritis was gone within six months and it's never been back. You know, I mean, just clearing out in your Vedic medicine, there's this understanding that your more than your physical structure.

You have your energy body, your emotional and mental body. And in that emotional mental body, your beliefs, thoughts, feelings, experiences get stored here and they run through to your physical body, through your energetic system.

They think of it as 72,000 different channels that come through your energy body that then actually impact how your genetics express how your organs, you know, the health of them, your immune system, your hormone relay system, like all of it, is impacted by your perceptions that are pinging off of these stored belief patterns that you created in childhood.

And until you go there and really start cleaning that up and detoxing that, then you're having this subconscious unconscious impact on your physical structure in adulthood.

And it's interesting because science actually bears this out. That is incredible. And such a great way to explain

what is happening for us as adults and and where illness and disease is coming from for some.

And that component I love your tying in with the Army of medicine and the 72,000 channels through which it filters into our energetic body is so fascinating.

And thank you for sharing your story and and doing this work. It's, you know, really interesting to to hear how people come to the work and and turning that personal tragedy into like really a lot of support for so many people.

So thank you for that work. Doctor Kisha and the one I wanted to talk about, that that component of the trauma and getting stored in these energetic in the bio field or in the in the bioenergetics in the field around the body, because so many people like you mentioned in Western medicine, it's let's just treat the symptom to give something to get rid of the symptom and why that's not working, you know, of course we want that medicine for acute trauma care.

And like if your legs falling off, like you need that type of care, having a heart attack, your appendix burst like this is what you do, right? Acute care medicine. And we do it really well.

So well I'll do chronic. And in this chronic front is when these traumas get hit in the body. So why do you say everyone has trauma. Yeah because it's part of the human experience.

And they're like, people will hear my story and and they'll say, oh my gosh, thank goodness I never had sexual abuse. And I say the same thing. Yes. Good. Thank goodness. Right.

And that's considered a category of what we call capital T trauma. That's the way I think about it. Like there's capital T trauma and there's a lowercase t drama.

And not everybody has experienced capital T trauma and wonderful. Right. And capital T trauma would be domestic violence and sexual abuse. Emotional psychological neglect, abuse, having a mother also violated and a domestic violence situation where you witnessed it as a child, having a caregiver that was incarcerated or or mentally ill or incapacitated in some way, addicted to a substance, you know, or dead like, these are big capital T traumas for children under the age of 18 years old.

And they were studied and the adverse childhood experiences study in this way and and found that, oh gosh, you know, the more of those that I just rattled off then the higher your aces score, then the higher your risk for all of the chronic illnesses that we see in our society today, including a whole lot of other things.

Now, that is where the Aces study took us, and it was huge. It was 3500 participant between 1995 and 1997 that we're studying now. Big study. So that's capital T trauma, lowercase t trauma.

If you think about the way that our our brains develop. So before we're 26 years old we don't have prefrontal cortex. It's fully developed as children.

And so you know, as we go through these naive experiences as we're growing up, new things, we've never had them before. Right? We we're going to run up against a lot of those experiences that we don't understand what's happening.

Maybe we had three friends that we played on the playground with. And then one day you go outside and they've all said, we don't want to play with you anymore.

That's a trauma, but it's not ever going to be listed as a capital T trauma. That is very traumatic, because the way that we're wired biologically is in tribal days, you know, sitting around the firelight circle, if the tribe puts you on the outside of the firelight circle, then there's a very big risk.

And you biologically are wired to know this, that the sabertooth tiger could eat you and so, you know, when you feel any kind of experience of rejection or betrayal, then that is registered in the child mind, in the limbic system as a trauma.

So when we think about trauma, we have to think about childhood as a jungle of this. Right? I've done therapy on thousands of people now, and I'll often talk about a fellow that that works for a big software company here in the Seattle area, whose job as a computer engineer was to get up in front of teens, you know, groups to present information.

And he would sweat out his shirts and have, like, social anxiety and and the hyperhidrosis. Right. And he'd gone to doctor after doctor gotten Botox injections and his arm had been put on by the Floppers been given anti-anxiety medications and someone gave him my name, and he finally came to see me.

And when we were chatting about this, you know, I started doing the work from the heart model that you talked about in the intro. And, you know, it was so interesting because it quickly became apparent that when he was in middle school, he had encountered a trauma that for him was off the charts capital T, but it would never be talked about as a capital T trauma anywhere else.

In the lunch room. He had tripped and fallen and his tray and clattered and his food went flying and everyone in the cafeteria, including the girl that had the crush on, was sitting at a table right there, started laughing, just erupted in laughter.

I mean, what a middle school kids, right? Of course they're going to laugh. And in that very moment. So there's this moment that happens. We have a feeling.

And for him, that was a feeling of shame and embarrassment and terror. And then from that feeling, because we're perceiving ourselves as in danger right there, danger that the tribe is not accepting us, okay, that we're being rejected because we're somehow different than them, or we've just created this moment, then the nervous system is going to respond in that fight, flight, freeze or faint.

Now, when we're children, it's it's always freeze. We don't have autonomy and power. We're not fighting and we're not fleeing, right. Or freezing. And so in that moment, you know, there's this frozen feeling of embarrassment in front of this group of people that are laughing at him.

So then from there, what we do is we make up a meaning to match what just happened, the feeling and the nervous system response. We create a meaning. Now what heat and we'll all do this differently.

So what he decided was he was an idiot, and the belief that he came away from that moment with was, I can't be trusted in front of large groups of people.

And so then from there, a child is going to create a behavior that is adaptive to that belief and that meaning and that nervous system response and that feeling.

So, so it's a little circle that happens. So you create an adaptive behavior for the moment that's adaptive to the child brain. So what he decided was I never go in a cafeteria again.

And so he ate in the library for the rest of his educational career. And including in graduate school. And he didn't even go in the cafeteria on the campus where he worked.

He just didn't do public eating spaces. So now he's being asked with this job to get up and talk to people. And of course, he goes into a complete freeze stage, right?

And he's sweating. He can't like it's just he's panicked. Grab it.

Healing, Forgiveness, and Brain Changes

And so when we heal that right, that belief and that meaning, we went through and we started taking each one of those right and confronting them and healing it.

Then he was able to learn how to get up in front of groups of people and know that he was safe and it was okay. He wasn't a 12 year old boy anymore where there was a risk of being expelled from the tribe.

So this is a lowercase t trauma, and it's in the same kind of category that we have all encountered. Many times in various ways, right? Girls that start their periods and, you know, they don't know and you know what I mean?

And yeah, just like things like. Yeah. And making stories up of how to reconcile for yourself with not knowing. Right. It is like, it's so fascinating and it also it emphasizes this component of, you know, the inherent wisdom of the body to heal itself.

And, you know, if we're just listening to it like you had mentioned it at the beginning of, like, how you kind of leave those breadcrumbs back, right, of following for yourself and coming back to those origins of the imbalance, or where we kind of took that turn to make things right in the moment, which served us at that time, but now is are no longer serving us.

It's called maladaptive. Yes, right. It gets in our way if if the behavior you chose was, oh, I'm going to eat something to ground myself. And my favorite thing is Oreos, right?

Or when you become a teenager, your maladaptive strategy is to smoke weed or drink a lot of alcohol. Right. And then you take that into adulthood. And that's your adaptive strategy.

It's now become maladaptive. You might be struggling with inflammation, weight gain. You know, alcoholism, addiction of many different sorts are have an origin of being an adaptive coping strategy for a child.

But it is an outgrown story. Yeah, I like to say that those are like friends that don't serve you anymore. Yeah. And there's the fight is what I call them.

Yeah. Love it. So now we all have trauma. I mean, we and we're seeing that in all of the research playing out. What's the first step we can do to heal past childhood trauma?

Well, I wrote a book called Solving the Autoimmune Puzzle, and I talk about the Hurt model, and that came from my research. So we have that first circle there cycle, right where there's the event, there's the feeling, there's the nervous system response.

There's the meaning belief and adaptive behavior response. Then the model bifurcates into two other wheels. The one over here is you don't self confront ever and you keep doing the same thing.

And that leads to disease because it's like ruminating on automatic negative thoughts, self-sabotaging behaviors, judgment and it keeps you in that sympathetic nervous system arousal that does lead to disease.

If you come over here on this side of the model in the middle of the wheel, it says willingness to self confront. That's actually the first thing is just being willing to say, oh, every time I'm unhappy and upset, I'm present.

I wonder if maybe it has something to do with me. Not always something going on out here, right? Yeah, just that willingness to start sitting with, I wonder and really being willing to question your own thoughts.

Just because we have a thought doesn't make it a pearl. Right. And so we have these patterned thoughts that are automatic. And in fact, research tells us that our thoughts, 94% of them every day, are recycled.

We've already had them. And so rumination on automatic negative thoughts, that kind of a pattern, that thing, if you can be willing to take the time to start investigating that, like in questioning, is it really true that this person had a motivation that you're projecting onto them that is somehow injurious to you?

You know, like, is that really true? Or is there an experience they're having that has to do with their perceptions and their patterns and beliefs and behaviors from a long, long, long time ago that are clashing with yours?

And maybe a willingness to open up a space where both can happen at the same time will keep you from triggering every single time you come across that behavior from another person, you know?

And so it's like really starting with and I call this the misery, the motivation ratio. What I've discovered is people have to get pretty miserable before they're motivated to start investigating themselves.

But once you're willing to start doing that compassionate, curious, questioning your own patterns instead of everyone else's, then that's the first step.

I love it that curiosity and the asking of questions is so critical, and that's great. I'm glad you brought that back up because that's in your own discovery.

You were, you know, shooing off the autoimmune, like coming across in your field and your thoughts. And then you decided like, you know what? Actually, I'm going to tune in to that and get curious, like, why is that keep coming up.

And that component we hear from all the great techs of like the answer lies within. And I think as amazing providers, what we do is provide that presence and listening deeply and intently because people tell us what the path is, right?

They've left the crumbs, but they're just not able to see it. So I want to just emphasize that for folks listening and watching this is that curiosity and asking your symptoms like, what are you telling me?

I love that, thank you, Doctor Keesha. And that's first. Right. And the truth of the matter is, is like I was victimized as a child. We are all victimized as children in some way, shape or form, all of us.

We've all gotten a raw deal at some point in life, and we've also been perpetrators at some point in life, whether we know it or not. We've hurt. We have also hurt other people.

And so being able to hold the space of, oh, I was a victim of this and, and the perpetrator, or if I can broaden my scope of awareness, I call this going from the mouse to the eagle.

You know, like when we're children, we're mice. We only see what's in front of us. We're not exactly safe. The smaller we are, the we're not. You know, it's not guaranteed that this life on the planet is going to be safe for us.

But once you get into adulthood, you can take more of an eagle perspective and fly over the top of the forest and not just see the gigantic mushroom in front of you, you know, as a mouse.

And so you can go between those. There's some resilience and flexibility of perspective if you're willing to go there. And so you can hold that. Those can be true.

And oh my gosh from an Eagles perspective, this is the nature of human life on planet Earth that we are hurt and we hurt. So how do I work with this so that I can see all the places that I've been hurt, and learn how to forgive myself when I've been the one that's done the hurting.

So it's forgiveness. In my doctoral research was a big intervention. But what I always teaches, you can't go there first. You know, you need to go through a process first, and then you get to forgiveness.

And forgiveness is like the way that I teach. It is you're not doing lip service, pulpit forgiveness, like I forgave them a long time ago, you know, and forgiveness is not reconciling either.

It's not condoning behavior. You don't reconcile with someone that's hurt you if they have not shown contrition and shown up as someone that's safe to be around, that forgiveness is something that if we're going to have ourselves, that bioenergetics, if they're going to be bathed in a hot tub of resentment, you're never going to get better.

So you have to drain that hot tub of resentment and bring in gratitude, appreciation. You know, like, I can talk about

all the stuff that I've been through in my life, and I can also tell a story of being a perpetrator of hurt, you know?

I mean, on my watch, two of my kids got sexually abused by a neighbor boy. And when I found that out, I got breast cancer four months later. Having to go through the process of forgiving myself for that was the hardest thing I've ever done in my whole entire life. Wow.

And again, within four months, my breast cancer was gone. But I had to go in there, and I actually had to forgive that woman who had allowed her children to be sexually abused under your watch.

So, I mean, this is the stuff like, this is where we gain our wisdom. This is how we get our health back, because these are I call this the missing piece of the puzzle.

And that's beautiful, you know, going through it. And you cannot bypass any and not you cannot. And, you know, it's like, this is not for the faint of heart and nobody gets out of here alive.

But having these tools and the ability to have the conversation and understanding, you know, forgiveness on that level is so powerful. And you're right, it's not just lip service.

It's actually you're going deep in and and doing that work. So that's awesome. On this component too, I want to talk about how trauma also changes brain architecture because we get rewired in these in these events.

And so there's like some backfilling. And so can that be reversed. In my research I was looking at brain scans and hundreds of them.

Practical Self-Inquiry and Boundaries

And there's a well documented shrinkage of prefrontal cortex in an adult brain and a growth in the amygdala in the limbic system, especially on the right side, when there is PTSD, post-traumatic stress disorder, in response to these capital T traumas.

But what I discovered is that there are a couple of studies that indicated that lowercase t trauma actually causes the exact same brain architectural changes.

So if you fill out like a personal stress inventory scale and you know, that's the one that says in the last year, have you moved, been divorced, changed a job, lost someone you love.

Like, these are big stressors, right? And the more of those that you have, the higher that number is. Well, it turns out that people that fill that out, if they describe themselves as perpetually overwhelmed, they have the same brain changes as someone with PTSD.

So it's the same exact thing. It doesn't matter if it's capital T or little T. Yeah, like war vets and soccer moms. Same brain changes. So that's revelatory.

You know, it's like when I teach for the Institute for Functional Medicine and I'll teach doctors about this, you know, and and I'll say, you have to stop telling your patients to get rid of their stress.

Like here you have like perhaps a parent with a special needs child or someone that's caregiving and, you know, an elderly parent or someone that loves their job.

But it's stressful. Like, what are you saying? You have to reduce your stress or get rid of your stress. Instead, you have to help them change the relationship they have with the parts of their lives that they are perceiving as overwhelming their reaction about perception to it.

I love that, yeah, rewriting it, creating a new PR story around what that what your experience is with a very full life is what that is one of the busiest people that I know.

And I feel so blessed and grateful that I get to do the work in the world that I do, you know, and I never feel stressed by it and overwhelmed. And when I was younger, I did.

So, you know, it's like I have come to that place where I just feel grateful. Yes. So then my body responds differently. Then my 30 year old body was responding, oh, I love that.

That's that is revelatory at the kind of the end of our interview. Is there anything that you would like to share with folks, Doctor Keesha well, I mean, just kind of what you brought out that there's no sometimes people that are, self identified as being spiritual will engage in what we call spiritual bypass.

And that's because you've done a lot of work from your adult brain. But come on, I see often because a lot of I attract that person into my practice, highly evolved spiritual people, and they haven't gone through and actually healed the trauma triggers.

And so I get people that are kind of angry at the medical complex. I've gone to doctor after doctor and cleaning functional medicine, like, people get really burned out on spending thousands of dollars on supplements and diets and not having their autoimmunity completely gone.

And they'll roll up on my shores, you know, upset by this. And one of the things that I point out is you haven't wasted your time or your money. What you've gotten to is where you are now. But what's been left behind is this missing piece of the puzzle, the trauma part.

And you can't bypass it. You can't build a school on top of a garbage dump. You know, eventually what's going to come up through the floor is going to kill people.

So you have to really go and do that healing work. And it doesn't mean you have to revisit your traumas like you don't have to go experience them again.

It really like I do these deep immersion retreats and people are shocked, like I didn't realize this was going to be almost as easy as it is, you know?

Awesome. What's an action item for somebody that's listening in to get into action? Because each of the interviews, I want to get people into action and back on the road to Wellsville, so to speak.

What do you recommend there? Well, one of the things that I like to have people start with is kind of what I said, like, here's here's the first step.

When you're willing to do that curious, compassionate self-inquiry. Then for 24 hours, just start watching your own thoughts and not judging them, but perhaps making note of them, like, how often do you have shoulds in there?

How often are you speaking to yourself in a tone that maybe you wouldn't use with anyone else? How often are you opting out of life because of some pattern that maybe is from an upset four year old that's driving your car of life, so to speak?

And so what you're doing is you're learning to develop a little bit more of an observer's mind and and really watching, like, what are my patterns. And and again, without judgment, there's a really lovely practice you can do where you get a little bag of white pebbles and a little bag of dark pebbles, and at the end of the day, you can sit on your floor.

And as you have been observing these thoughts, put a pebble that is white in the middle of the floor for every life affirming, gracious, appreciative thought that you've had.

And for every that one that's not that. Put a dark pebble, and in the beginning you'll notice you have kind of a heap of dark pebbles, if you're honest.

And as you learn to see that and feel it and have the kinetic right connection to these different colors of pebbles, and know that at the end of the day, you're going to be sitting there again.

Okay, I want to really have more white battles this time. You learn how to change the channel or the frequency of the bioenergetics of your own thought stream.

And I always teach people leaky boundaries leads to leaky gut, which leads to a leaky immune system. And so with a leaky boundary part, people will often assume that when you're setting good boundaries, it's with all those toxic vampires out there, you know, emotional vampires and terrible, toxic people.

But actually, the first person to set boundaries with is yourself. Your own thoughts. Right? And this is a really great practice that you can do with the pebbles to start witnessing it.

And again with patience, grace and compassion and not judgment, I love it. Yeah, the curiosity. And that is so nice with the grace, compassion. Non-Judgment.

Thank you so much, doctor Keesha Ewers on the bioenergetics summit. Thank you all for listening. To.