



# **TRAUMA AND THE MIND-BODY CONNECTION**



**A zine exploring the connection between  
trauma and embodied experience.**

TW: discussion of trauma, s3xual assault. and mental health.

# HAVE YOU EVER FELT DISCONNECTED DURING A SEXUAL EXPERIENCE?

## EMBODIED EXPERIENCE

When our minds and bodies are **present** and **integrated** together.

## DISCONNECTED EXPERIENCE

When our minds and bodies are **not present** and **integrated**.

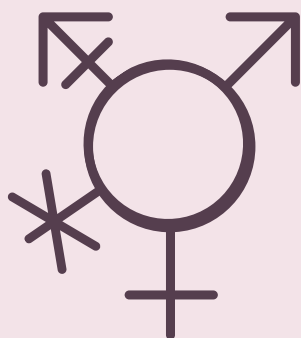
### A MIND-BODY DISCONNECTION CAN FEEL LIKE:

- Not feeling present in the experience
- Feeling distracted with all of the other tasks
- Paying attention to a partner over your sensations

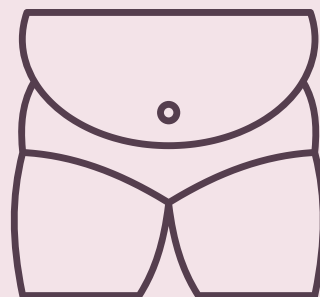
There are many reasons we may have trouble being embodied in our sexual experiences.



RELATIONAL DYNAMICS



GENDER DYSPHORIA



DIFFICULTY WITH BODY IMAGE



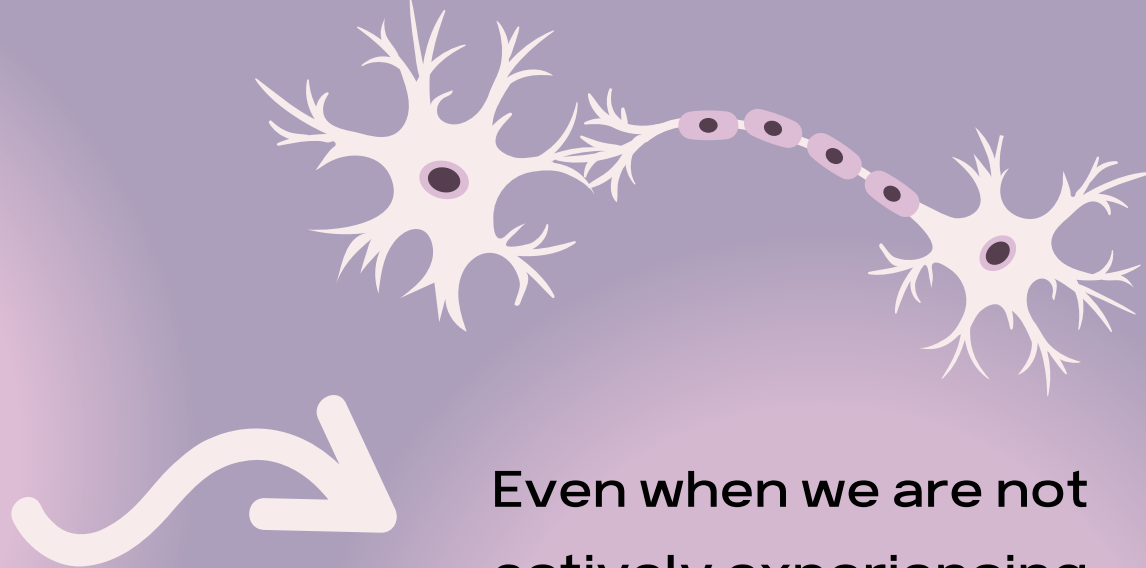
GENERAL, DAILY STRESSORS

Another reason some people experience difficulty being present in their bodies is trauma.


# HOW DOES TRAUMA AFFECT THE MIND-BODY CONNECTION?



When we experience any form of **trauma**, our minds store these **sensory memories**.




Even when we are not actively experiencing something traumatic, our nervous system may **perceive certain stimuli as a threat to our safety**.

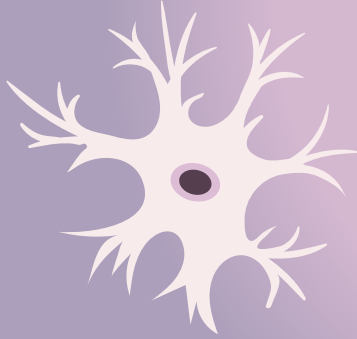


Sources of trauma may include:

- systemic
- physical
- emotional
- mental
- sexual
- (and many more)



These are also known as "triggers."



**Trauma affects your ability to use imagination; it affects our ability to let our minds play, which is an important piece in sexuality.**

# WHAT IS A TRAUMA RESPONSE?

## AND HOW DO I KNOW I AM HAVING ONE?

An important part of understanding a trauma response is identifying your arousal states.



### HYPER-AROUSAL

Hyper-arousal is when we experience the “fight or flight” mechanism. It may present as *anxiety, ruminating, panic attacks, or quick-paced breath.*



### HYPO-AROUSAL

Hypo-arousal is when you experience a shut-down or “freeze” response. It may present as *feeling numb, disassociated, slowed breathing, or exhaustion.*

After a trauma, we may feel “stuck” in *hyper-arousal* or *hypo-arousal* states.

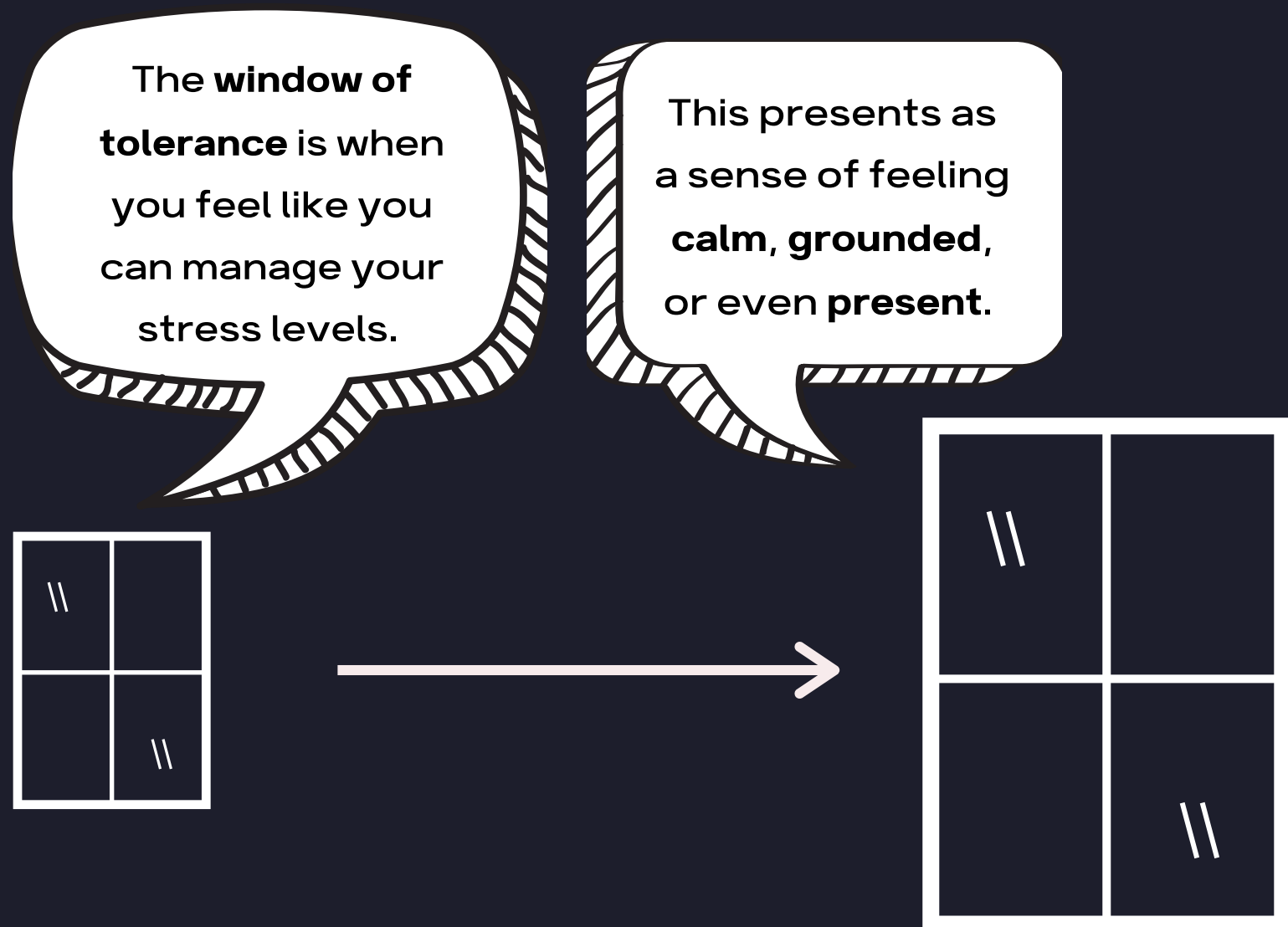
*These states serve to protect us. Our bodies are responding to a perceived threat to keep us safe.*

*This is us processing an event as though the trauma is happening in real-time.*

# THE WINDOW OF TOLERANCE

Trauma doesn't get smaller, but your *container* for holding it can get bigger.

Your container is your skills for understanding triggers, processing trauma, and integrating coping strategies.



Cultivating your coping toolbox can help you stay in the window of tolerance more often.

*Note: For many folks, it is important for this to be explored with a therapist or health professional.*

# HOW DO I ESTABLISH SAFETY IN MY OWN BODY?

**1** **Establishing safety in your own body** surrounding sexuality can look many different ways depending on where you're at in your healing journey. *For example:*

- Gentle self-touch is one way to get reacquainted to your body.
- Guided self-touch exercises to create body awareness.
- Mindful masturbation is also a wonderful way to learn more about your body and sexual desires.

**2** **Psychoeducation, or learning about how trauma affects you, can be helpful.** Try finding a health care provider who can help you identify triggers, track arousal states, implement grounding techniques, and combat shame.


**3** **For many trauma survivors, shame is one of the largest pieces to the puzzle.**

- Processing shame with sexual health professionals can be a powerful experience in your journey.
- Most importantly, consider your own sexual scripts.
  - Does your definition of sex need to be broadened to be inclusive of new ways to have pleasurable experiences?



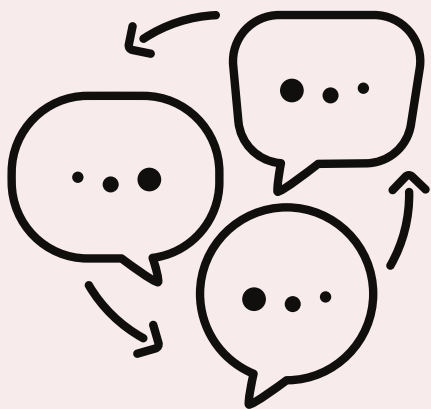
# HOW DO I ESTABLISH SAFETY WITH A PARTNER OR PARTNERS?

Once we have done some self-exploration of our **triggers**, **body awareness**, and **desires**, we can begin to communicate this with partners.

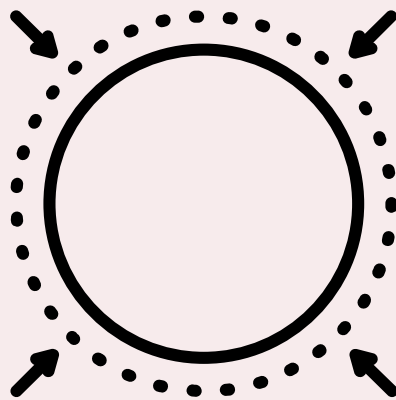


Establishing safety with partners starts with cultivating safety in ourselves.

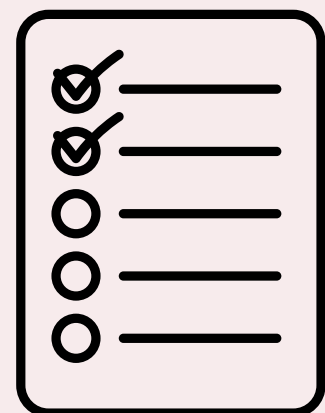
## THIS COULD LOOK LIKE:



*Discussing consent*



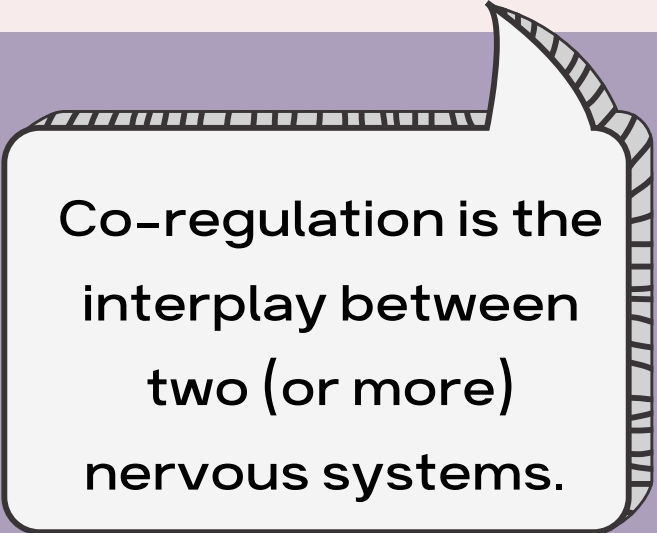
*Setting boundaries*



*Constructing a plan for aftercare*

## CO-REGULATION

Co-regulation happens verbally, such as *expressing empathy*, and non-verbally, such as *safe touch*.



Co-regulation is the interplay between two (or more) nervous systems.

*\*This is NOT the process of relying on someone else to regulate you, but instead a connection with another.*

# WHAT TYPES OF THERAPY SHOULD I SEEK OUT?

Therapy is a great tool for folks who are looking to process trauma further.

*A therapist may be able to help guide you through integrating mind and body experiences.*

**Some therapies that are particularly helpful for trauma include:**

- EMDR (Eye Movement Desensitization and Reprocessing)
- Somatic experiencing
- Sensori-motor psychotherapy
- Internal family systems
- Hakomi method.



Exploring your trauma history can be a big step and beginning this journey can be a vulnerable experience.

**Remember it's worth it: it can be healing to gain more education on how trauma affects them, and how to gain tools to cope.**