

Reviewed by Nancy Eichhorn



[David Treleaven](#)

Synchronicity prevails.

Here I am talking with Stephen W. Porges about his new co-edited anthology, *Clinical Applications of the Polyvagal Theory: The Emergence of Polyvagal-Informed Therapies* (see pg. 32), and his Safe and Sound Protocol (SSP) and its expanded use with trauma survivors (see pg.86).

Then I read [David Treleaven's](#) new book, *Trauma-Sensitive Mindfulness*. He is clearly Polyvagal informed and savvy; furthermore, he's talking about incidents in the past that I'm reading about in my local paper, today.

Some background is necessary—there is social, cultural, and racial trauma occurring in grand proportions in my hometown.

Stephon Clark, a 22-year-old African American man, died when police fired 20 rounds, eight of which impacted the young man's body—six in his back.

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The officers believed he had a gun; it was a cell phone. Black Lives Matter, an organization Treleaven mentions in his book, has been staging massive protests. Unrest is an understatement. Trauma is widespread.

To toss in more trauma, Stephon's 25-year-old brother Stevante Clark has been in and out of police custody since his brother's death. He first stated that he was having mental health issues, difficulties dealing with his brother's death but was then quoted as saying, "I thought I had mental health issues, but I talked to a chaplain in there (*in jail*) and they told me I gotta quit saying that, 'cause I don't have that." He was recently released on personal recognizance, facing four criminal counts including assault with a deadly weapon and making a death threat.

The local papers are bringing up past police killings including Freddie Gray whose neck was broken while in police custody in Baltimore, and Eric Garner, a young African American living in New York who was arrested for selling single cigarettes on the street. When police couldn't handcuff Garner, they used a choke hold, Garner was quoted as saying, "I can't breathe." He died on the way to the hospital.

The traumatic stress from these events, impacting those in the respective families and in the surrounding communities is apparent, real. The outreach moves beyond our locale, beyond the United States. It is resonating around the world.

Now, why, you may ask, am I talking about all of this when I'm supposed to be reviewing Treleaven's book?

Because he talks about it, too. He brings up Gray and Garner and other experiences to ground the realities that we live with in terms of trauma. He talks about race, ethnicity, affiliation, sexual orientation, gender and gender identity, and more, all of which have been associated within a person's trauma story because of social and cultural bias, prejudice, abuse. "Oppression—defined as an "unjust exercise of power and authority" (pg. 183)—"continues to engender traumatic

experiences every time there is another hate crime or police killing," Treleaven writes (pg. 10).

Treleaven is clear that understanding the social context of trauma is a central part of what he calls 'trauma-informed' or 'trauma-sensitive' work (pg. 17).

While many may consider trauma to be an individual experience and work with a client in isolation, i.e., focusing on systems inside the body—the relationship between the sympathetic and parasympathetic nervous systems, or parts that split off in the aftermath of trauma, Treleaven widens the arc and factors in systems that are alive outside of the body (pg. 178). He includes the relationship between an individual and the larger social system that surrounds them. Integration—which, he says, is at the crux of recovery—asks us to connect the internal and external systems that are involved in traumatic stress (pg. 179). As therapists, he asserts we must look at our client's social context—one's social identity, locale, peers, community, and country of residence.

"Absent an understanding of how individual and social systems interact, we can potentially cause harm, break people's trust, and perpetuate systems of domination. This isn't a matter of political correctness or saying the right thing but offering a truly liberatory framework for those we work with" (pg. 179).

If we put blinders on, if we ignore the entirety of a person's experience, including the impact of our own background, our own sense of have and have not, we are setting up yet another dysfunctional experience. Per Treleaven (pg. 190), who quotes from Nieto et. al., 2010, pg. 42:

"It's a sign of privilege for Whites to say they are going to view people of color only as people. If I don't see their race, I'm not going to see their lives as they really are. I'm seeing them as an abstract 'human beings', not as people who've had certain experiences. I'm going to miss or misunderstand how their experiences have shaped them."

Getting to the book

Treleaven writes from personal experience—with trauma, with mindfulness. He incorporates his movement to seek solutions, to take an activist's stance, and connect with others putting forth energy to create balance and find answers that aren't easy but may save lives. His work is well cited, data is given, names of and theories from people well-known in the trauma field are discussed i.e., Bessel van der Kolk, Pat Ogden, Babette Rothschild, Stephen W. Porges, Peter Levine.

He uses Jon Kabat Zinn's definition of mindfulness: "paying attention in a particular way: on purpose, in the present moment, and non-judgmentally" (1994, pg. 4) and looks at the process of mindfulness as enhancing self-regulation including: attentional, emotional, and body awareness. He also brings in Rothschild's 'observing self' and 'experiencing self' when he talks about the importance of dual awareness—the ability to maintain multiple perspectives at the same time, which he says is an important skill for survivors.

Part of Treleaven's work also includes training with Peter Levine, learning Levine's trauma intervention program trademarked as Somatic Experiencing. While he appreciated the process, Treleaven felt something was missing in the work. Although the teachers talked about the *biological roots* of trauma, he says, they never discussed the *social roots*, including systems of oppression that correlate with trauma (xxi). He sought a bridge between personal and social change.

Then he met Staci Haines who, together with Spenta Kandawalla, founded generative somatics—a national, nonprofit organization based in Oakland, CA., that combines social analysis with trauma healing (xxi). (Treleaven is donating 60% of his book proceeds to generative somatics, The Healing Justice Program of Black Lives Matter, and the Sogorea Te' Land Trust).

Things were coming into place.

Immersed in mindfulness meditation, Treleaven experienced emotional discomfort while sitting in meditation. His process to

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understand what was happening, why, and what to do about it formed part of the foundation for his current work. Over the years he learned that he was not alone.

Today, with mindfulness exploding on the scene—be it Buddhist, Taoist, Zen, Mindfulness Based Stress Reduction and so forth—the process of coming within is seen as beneficial, and it can be. But, it turns out, mindfulness meditation can create distress for participants who are dealing with trauma.

Treleaven cites that “an estimated 90% of the world’s population will be exposed to a traumatic event during their lifetime” (pg. 16). As such, there is a greater chance that someone struggling with traumatic stress will be in a mediation class. Meditation, as he experienced himself and has heard from clients repeatedly over the years, can increase agitation, trigger thoughts, images, memories, physical sensations of traumatic events that create distress. Unfortunately, many trainers are not aware of trauma’s impact nor are they prepared to adequately help these people.

Offering a reassuring note, Treleaven writes that mindfulness itself doesn’t cause trauma but “the practice of mindfulness meditation offered without an understanding of trauma can have a negative impact” (xxv). It is a resource, he says, but not a cure. It can help regulate arousal and support stability, but we need to “adapt mindfulness to meet the specific needs of trauma survivors as opposed to expecting them to adapt to us” (xxiii).

Defining Trauma-Sensitive Practice

To start, it’s important to know Treleaven’s definition of trauma-sensitive practice, which comes from the U.S. National Center for Trauma Informed Care:

“A program, organization, or a system that is trauma-informed *realizes* the widespread impact of trauma and understands potential paths for recovery; *recognizes* the signs and symptoms of trauma in client, families, staff, and others involved with the system; *responds* by fully integrating knowledge about trauma into policies, procedures, and practices; and seeks to actively resist *re-traumatization*” (xxiii)

From this basis, he extrapolates what he calls the ‘Four R’s’: realize, recognize,

respond and avoid re-traumatization. These are then woven within his framework, which consists of five core principles:

- (1) Stay within the window of tolerance
- (2) Shift attention to support stability
- (3) Keep the body in mind
- (4) Practice in relationship
- (5) Understand social context

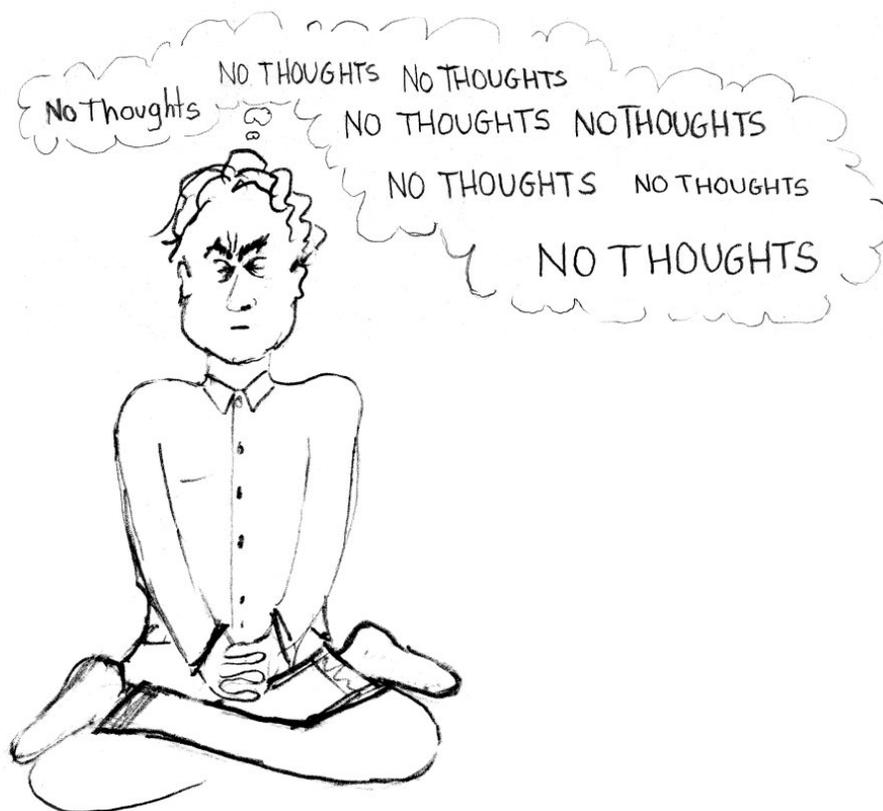
Each chapter is titled with one of the principles in which he offers suggestions for modifications to mindfulness practices that support the four R’s and the five principles. His interventions follow a phase-oriented approach to trauma:

- Stabilization and safety
- Remembering and processing trauma memories
- Integration with family and culture, normal daily life

The book is divided into two parts. Part 1 discusses mindfulness and traumatic stress. Part 2 covers the five core principles, presents theories, and modifications to apply in client work. There are case studies in each chapter, used rather creatively. The material offers a concrete look at what he is discussing, but more than being a pull-out-box or a story at the end of the chapter, he comes back to each case study throughout the chapter and elsewhere in book when relevant. First, we meet the client (or collage of clients), then we learn a bit of David’s thoughts, he offers some analysis, then, when he introduces theory and practices with modifications, he brings the clients back in . . . clever. I appreciated the complete integration.

Integration is an important term in this book. Treleaven notes that trauma creates disintegration and rather than label someone PTSD, it might do more to ask: “Is this person struggling with a traumatic experience they were able to integrate?” (pg. 14) as a starting point.

Treleaven covers trauma’s effects on the brain and body. He looks at our neurophysiology and barriers to integration that include fear and shame. He offers a list of potential signs that someone might be experiencing traumatic symptoms in meditation (noted as dysregulated arousal) that include:



How not to meditate. Image used with permission from <https://www.sunship.com/sit-illustrated>.

- Hyperventilation
- Exaggerated startle response
- Excessive sweating
- Muscle tone extremely slack or rigid
- Noticeably pale skin tone
- Emotional volatility (enraged, excessive crying, terror)
- Disorganized speech, slurring or words
- In ability to make eye contact during interactions
- Reports of flashbacks, nightmares, intrusive thoughts (pg. 102).
- While talking about shifting the client's attention to support stability to avoid the fear/immobility cycle, he reminds readers

that sustained attention on traumatic stimuli can cause dysregulation, retrigger traumatic states and land one outside their window of tolerance (pg. 113). He weaves in Porges' work with the vagus nerve in several ways. One, he talks about the need to create and keep a balance between *hyper arousal* (increased sensation, emotional reactivity, hypervigilance, intrusive imagery, disorganized cognitive processing) and *hypo arousal* (relative absence of sensation, numbing of emotions, disabled cognitive processing, reduced physical movement (pg.94)—we want to be in the center, in our window of *tolerance*. He then ties in hyperarousal with the sympathetic nervous system, with flight or fight; hypoarousal aligns with our dorsal vagus activity, and tolerance ties into the ventral vagal nerve—aka our social engagement system.

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Safety and neuroception are mentioned as well. Dr. Porges coined the term neuroception to describe how our neural circuits distinguish whether situations or people are safe, dangerous, or life threatening. Perception depends on cognitive awareness of sensory input while neuroception is an unconscious experience occurring in the most primitive parts of the brain. As Treleaven writes: "If we 'neurocept safety' our nervous system inhibits our animal defenses (flight, fight, freeze) and grants access to social engagement system" (pg. 155).

Conclusion

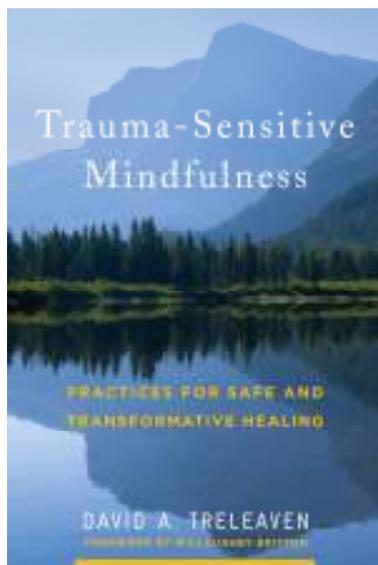
There's more to say, but it is Treleaven's story to tell after all and best for you to learn from him, in his voice, not mine. I offer his "footnote", on pages 202-203, as a rather spectacular statement to end this book review:

"For practitioners who have grown up being treated as 'White' (which we know to be a social rather than a biological category and therefore fluid), we have a lot to gain from engaging in these questions. Not only can we better serve clients, work with peers, and love our families and friends. Not only can we come to know our selves better. These alone are vitally important and life-affirming grains. But there is a layer below. It may take courage to interrogate what we've taken for granted our whole lives, including the subtle and not-so-subtle lies

that racism tells us about who we are and who other people are. It many take determination and support to change the behaviors we've been conditioned into for years. The reward that lies on the other side? We can stop participating in the massive divide-and-rule scheme that constitutes racism's historical origins and current purpose on this continent. We can align ourselves with equality and justice, and in this way, step toward the possibility for true healing on the collective as well as individual levels" (pg. 203).

References

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Curious? Want to read a bit of the book?

Excerpted from *Trauma-Sensitive Mindfulness: Practices for Safe and Transformative Healing* © 2018 by David A. Treleaven. Used with the permission of the publisher, W. W. Norton & Company. The following is from the Introduction.

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