

Speaker 1:

You're listening to The Journey on Podcast with Warwick Schiller. Warwick is a horseman, trainer, international clinician and author, whose mission is to help people achieve a deeper connection with their horses through his transformational training program.

Robyn Schiller:

Hi everyone, it's Robyn, again. I had the opportunity to work one-on-one with Jane Pike from Confident Rider recently, and it was in a time of need. I was having a pretty bad panic attack and I called her kind of like an SOS and she stepped up and helped me. And what I wanted to do was get her on the podcast and have her explain the steps that she took with me. We were on a zoom, I could see her, so there were some things that she did with me that helped bring me back from the panic attack, and I wanted to share the steps that she did and the reasons why it worked with everyone, because I thought it was super helpful.

Robyn Schiller:

Some back ground on what was happening, about a year ago, I had a tor in my femur found by accident and all the testing had proved that or indicated that it was benign and they started calling it a lesion, which was a lot better. So, I had a checkup, so that happened in January 2020. I had a checkup in April 2020, it looked the same. So they told me that I could have a checkup nine months from then, which ended up being January 2021, so a year from when they first saw it, again, totally by accident.

Robyn Schiller:

And so, I think what happened was, even though everything was fine and it all looked good, last year, I had nine months to really not think about it, but I guess I was thinking about it somewhat, and then when I needed to have my checkup in January, my appointment was for the 25th and I went to get the x-ray done on the fifth, which probably should have been done a little bit later because that gave me a couple of weeks to think, not think about it.

Robyn Schiller:

So, I'm thinking that had something to do with the panic attack that I had on the day that I had my appointment. And there were a couple interesting things about that. So I didn't believe I was... I thought that everything would be fine. I saw the x-ray that they took and I compared it to my last one and I couldn't see any difference. But it was at slightly a different angle, so if I really wanted to think negatively, I could have, because maybe it did look a little different, but it was probably just the angle, so those thoughts went through my head.

Robyn Schiller:

I think I did a pretty good job most of the month, not really thinking about it. Then the day before my appointment, I started having some negative thoughts and worry about what if, what if, what if. I did some yoga, some meditation trying to get it under control and I felt fine and I slept fine that night. My appointment was at about 10:30 on the Monday morning on a video conference. And so that morning I did yoga, I did a meditation, but I was pretty anxious. And I got on the call a few minutes early, I guess it was at 10:40. So I got on the call at 10:35. She didn't get on until 11:00. So 25 more minutes of just kind of holding my breath and wondering what she was going to say.

Robyn Schiller:

When she came on the line, she greeted me and said, "How are you?" And I said, "I don't know, how am I?" And she said, "You're perfect. It hasn't changed in one year. It looks exactly the same." And so, of course I was relieved and I was grateful and all of that. And so she said, I could either wait and see if I ever had symptoms to have another x-ray, I could do it in a year. And so, kind of where I left, it was all... I'll kind of just wait and see. Because the stress of it outweighs maybe the benefit of it. I don't know.

Robyn Schiller:

So that's a wait and see for me. So a couple of things happened. Right before she got on, I felt this really weird, interesting pain in my chest and I just kind of dismissed it. But afterwards I went out to try to get on with my day, I let all my people know that everything was fine, and I went out to ride Oscar and I started having this chest pain again, and then my mind went to the, "I'm having a heart attack, I need to go to the hospital, but it's COVID, so what? Should I really go to the hospital?" And then my panic, it just kind of took over into a panic attack where all those things happened.

Robyn Schiller:

It didn't happen as bad as my panic attack used to be, like, I didn't get the ear closing and all of that, it was just... I just felt like I couldn't get my mind under control and my heart rate was up and I was just feeling like I was crawling in my skin. And so I tried to ride and see if that helped and I figured it wasn't fair to Oscar, he was doing his best to help me. But I got off and I texted my friend Jane Pike from Confident Rider, who I'm so blessed that she is a friend that I can do this with because she has lots of tools other than being... That's not why she's my friend, but it just so happens that she does have these great tools that she could help me with.

Robyn Schiller:

So I texted her and I said, "Hey, I had a really stressful morning. I had my leg appointment and everything's fine, but I feel like I'm either having a heart attack or a panic attack." And I said, "This is totally normal, right?" You know, thinking that it was all of the suppressed energy needing to liberate itself. And so, logically I knew what was happening. I knew that I needed to discharge this energy. And my first thought was, "Well, I should go for a run." And then I'm like, "Well, no, I'm having a heart attack, so I can't go for a run." So that's a really bad idea.

Robyn Schiller:

So anyway, luckily Jane said, "Hey, do you have time for a call?" And I said, "Oh yes, please." And so she got me on zoom and she walked me through this sequence of coming back to my body, but in a very delicate and hane way that was super effective. And she even mentioned... I said, "I was going to just go for a run or jp to do the shaking." And she's like, "No. That probably would have been too much at that point in time." And so, she explained in our discussion after, that I've recorded for you. The steps that she took and why she took them, plus just a ton of more information that will be helpful for anybody.

Robyn Schiller:

And I just would love for you to listen to this and I hope that it resonates as it did with me and know that the rest of the day was... That day I felt so much better, I didn't go to the hospital. I wasn't having a heart attack. She brought me back to myself and I am forever grateful for her and walking me through what she did. So please enjoy this conversation with Miss Jane Pike.

Robyn Schiller:

Well, I'm now here with Miss Jane, and she is going to walk us through what she did in real time with me when I called her desperate, almost going to the hospital, and she totally facilitated me back to... I don't know, you can tell me what you facilitated me back to. I just want-

Jane Pike:

[crosstalk 00:09:05].

Robyn Schiller:

I think it's... I think it will be super helpful for people to hear the process that you took me through and what we did and why it worked? And yeah, I would just love it for you to walk us through.

Jane Pike:

Totally. And would it be okay to start out with a bit of background understanding as to what might happen to kind of precipitate something like this? Or, because I think there's so many of us right now horse related and otherwise finding ourselves in much more activated states than we might have identified with previously. And when I'm talking about activation, I'm talking about more energy, more kind of feeling, more sensation in the system that precipitates us toward sympathetic activation if you think of it like that.

Jane Pike:

Like I said, lots of us are identifying right now with being more anxious than we previously might have understood ourselves. And part of that reason is because our nervous system is really primed to respond to localized threat. So what I mean by that is, if I'm out in the wilderness and we'll use the old saber-toothed tiger example or the line example, I can see something on the horizon that my nervous system gears me towards. And as a consequence of that, I'm able to mobilize myself in order to, in whatever way, is appropriate for the moment to get myself to safety.

Jane Pike:

So in that situation, there's something on the outside of me, that's identifiable that I can orient myself towards, I can put my focus towards and I can make decisions based on what I need to do in order to get myself to a safe place, right? So hopefully what happens at the end of that, is that I've ridden that way with activation, that's what we would call that sympathetic energy entering the system. The physiological response goes alongside of that, so we have the adrenaline, the cortisol, everything that comes with being able to move away from what it is that we're afraid of, or even face up to what it is that we're afraid of, if we're talking about the fight response.

Jane Pike:

And then on the other side of that in what we would consider to be a healthy or a regulated system, we would ride that wave back down to a balanced baseline. So there would be a discharge of the energy and we would come back down with the settling to a place where we're like, "Okay, that's gone, and now I'm back in the present moment." In situations such as COVID and the likes, we don't have a localized threat. The threat feels like it's all around us. So all of us are in the situation where we're much more switched on. We're much more highly activated because we're not sure what it is that might be out there that will cause us concern or alarm.

Jane Pike:

And we're also getting lots of feedback from the news, from social media, from different people around us that it's triggering our nervous system to feel alarmed. And so, in my experience, what I'm seeing in my work and what I've also felt myself, is that we're just sitting at a much higher baseline, we're not in a place that we would consider to be perhaps as settled as we might normally have understood. And so, when we have something that comes on top of that, that might activate us a little more than we find ourselves really easily moving up the channels of sympathetic activation to a stage that we either might not have experienced previously like panic and, or, it feels more exacerbated or more exaggerated than perhaps we've been in before for that reason. Does that make sense?

Jane Pike:

So the other thing that it's important to understand about anxiety is that there are various levels of anxiety, right? So the nervous system model that I base my understandings of, is one called the window of tolerance. And basically when we're inside our window of tolerance, or when we're inside our window of capacity, we feel like we've got this, like we're able to contain the emotion and energy within the edges of our skin and we can ground and center in the midst of that, which means we're intentional about how we direct what it is that's going on. Now, that doesn't mean that it won't be uncomfortable, it doesn't mean that it might not really challenge us, but we still feel like we have a sense of agency in the midst of that experience.

Jane Pike:

Now, anxiety in and of itself is a flight response. So we're trying to move away from something. And typically what will happen is we'll have a little bit of worry or concern. So that's an example of that little bit of sympathetic activation coming into the system and then there's levels of that, that take us further up the sympathetic chain all the way through to panic and then a different level of kind of shutdown and what we might identify as collapsed, depending on how far through the continuum that we get to.

Jane Pike:

When we are in that place where really operating from the smoke alarm part of our brain. So when we're inside our window of tolerance, we have access to our higher wisdom in functions. We can logic our way through things, we can reason our way, we can rationalize our way into understandings and into different ways of being. But once we get into a level of sympathetic activation, that's more about really making sure that we're safe, that part of our brain goes offline and we're operating from the smoke alarm part of our brain, which is just looking out for threat.

Jane Pike:

And this is where you find people trying to introduce techniques that are more involved to mindfulness, more involved to kind of thinking your way out of situations which are experientially and also circumstantially not that useful, in those situations, because you're simply not able to access the part of your brain that would be online in order for those techniques to work. Yeah. So that's sort of one reason why kind of talking yourself out of something or being talked to when you're in that space is perhaps not that useful.

Jane Pike:

If you have had some kind of previous experience with panic or when we talk about panic attacks or anxiety attacks, you're like, "Oh yeah, that's kind of being part of my makeup in the past." What can also happen is that we become more sensitized to the sensations of the experience, and as a consequence, they're much easier to set off meaning that when I have an experience of panic or I have an experience of anxiety the sensation becomes familiar to me, my brain maps that sensation and starts to develop an association and an understanding of it.

Jane Pike:

And just little examples of that, a little experience because of that sensation have taken up so much real estate in my brain and it's very easy for me to switch into that place. So it's like we've primed the neural pathways to get very good at being anxious, if you think of it that way, and we can kind of slip down that slope relatively easily without feeling like we have much option about what happens in between. And in that case, it's like the reference points that we have, like I say, are more highly sensitized, they're easier to access, and we slide down that slope a little more easily.

Jane Pike:

This is all making sense so far?

Robyn Schiller:

Yep.

Jane Pike:

Yeah. Awesome. So in the case of what we went through the other day or what we were kind of dealing with the other day, I think, it's also helpful to have an understanding about why things don't work and when. And what happens when we're in a state of panic and it's not related to something that's on the outside, that's specifically identifiable? So usually there's a disconnection between what it is we're experiencing on the outside and what's happening within us. The threat is actually an intrceptive or an internal threat, right? So we have a level of sensation in the body that feels really alarming. We might have a decreased breath capacity, so there's like a tightness in the chest or in the throat.

Jane Pike:

We have an increased heart rate. And so, all of those things are causing the fight flight response to be activated from, into the internal reasons. So we're setting off that empathetic activation, but the thing we're trying to escape from is ourselves. So it compounds this cycle that feels like we're trapped within the edges of our skin, like busting to escape, but we don't really have a place to put that energy. And so, the panic compounds on itself and so on and so forth, and it's just a really super miserable place to be.

Jane Pike:

So lots of prompts such as focusing on the breath in the first instance can actually exacerbate the feeling because what we're doing is asking the person who is trying to escape their internal world to focus more on their internal world. And so the feeling of perhaps not being able to take a deep breath, because the actual casing of the body, the way that the fascial container of the body is taking shape, is simply just unable to facilitate the body breathing itself in that way. Getting them to focus on mindfulness techniques, like we mentioned previously, the prefrontal cortex and the more rational parts of our brain and in the building at that point.

Jane Pike:

So again, that exacerbates the feeling of feeling out of control because you can't follow through on the instructions that the other person is giving you. And then also, if we can just understand that it's predominantly a lack of safety that's happening right now. We don't feel safe inside the edges of our skin, inside what is happening, and so being met with potential feelings of frustration, or kind of like, "Let's just get through this and kind of get on with life," is really not helpful because it causes that threat with those threat receptors to fire up even more, the fight and flight response is to fire up even more.

Jane Pike:

Basically, the unconscious mechanisms of your brain and body have decided for whatever reason that we may not understand that that was the most necessary place for you to be in, to keep you safe. And if we try to forcibly change that from the outside, the unconscious reasoning of our body sees that as more of a threat. They're like, "Oh, they're trying to contain us, they're trying to change us." And so this escalates and accelerates the feelings that we're having on the inside.

Jane Pike:

So it's really important, I think to meet these situations with compassion and patience, and to also really recognize that this isn't a choice. Like there's someone who's not choosing to do this. This is a really unpleasant way of feeling, and no one would purposely put themselves in that state. I think that... Yeah. I did a webinar recently on the five pieces of advice to avoid when you're experiencing writing related anxiety and this comes in a lot. It's like someone can't consciously choose to move out of this because it's not a conscious choice to be in it. So we have to find other ways to kind of get to the place that we... To a better feeling place, basically. Yeah. Any questions around that? I think...

Robyn Schiller:

I loved what you said about the breathing and why the breathing... I've thought of this several times. My problem is I'm too much in my body, right?

Jane Pike:

Mm-hmm (affirmative). Yeah.

Robyn Schiller:

That's what triggers me is being... So if you had said, "Just start breathing." It's like, I don't want to be more in my body. Then I can't be more in my body than I am at the moment. You know?

Jane Pike:

Yeah. Exactly. Exactly.

Robyn Schiller:

That's why I feel jealous of Warwick, who is not in his body because I'm in my body all the time, a hundred percent. That was what you just said that makes sense.

Jane Pike:

There's a lot of misconception and as well, I'm really going against the grain with this. I'm going against some old stuff that I taught as well around what it means to focus on the breath, because I there's a lot of over-simplified discussion about the breath. Like, yes, it's true that the inhalation relates to the sympathetic nervous system. Absolutely, the exhale relates to the parasympathetic nervous system, but what you'll hear point blank over time is focusing on the breath is always the right thing to do, or always a good thing to do, and in my experience, it's not.

Jane Pike:

And also this emphasis on really full and deep breathing, the way that the body breathes itself is much more finely tuned than we give it credit for, meaning that, as we're sitting here right now and you and I are in a pretty relaxed place, we're just having a conversation. You're not taking these massive deep belly breaths, right? There's not like a lot of activity that's going on. Those deep, big breath and not actually synonymous with a calm and relaxed state, right? They're more likely actually to send us into a place of hyperventilation. Then they get us back to a state where the body is naturally choosing how the breath rate needs to be in response to what it is that's happening.

Jane Pike:

So if we can think of it this way, that your unconscious mind is, or your brain is always deciding what is the most appropriate response of the body in conjunction with whatever it is it's involving itself in, and us physically manipulating the breath, in many instances actually triggers that sympathetic response because your unconscious brain recognizes that as a threat, someone's trying to manipulate us out of a decision that we've chosen, that we consider to be in our best interest, and again, sends us on that loop.

Jane Pike:

So for me, I'm trying to look at ways that we can, A, honor the decisions of the body and the mind and why it's chosen to be in that place, and then from that situation, how is it that when we can say that there is a disconnect between what it is where the state that we're in right now, and the situation that we find ourselves in, like the case of the other day with the panic. How is it that we can actually create a situation where the body chooses itself to renegotiate that in a different format?

Jane Pike:

So a lot of that experience that we're talking about is a hallmark of traumatic stress, where we have unresolved experiences of activation, where that haven't been able to ride that wave of settling back down and so we have this stored energy in the system that's looking for a release in some shape or form.

Jane Pike:

So to me, when we think about what it means to be anxious, and we think about what it means to be in a place of high activation freeze, so as you go into a place of panic, what happens, is there's kind of a locking up of the body and that is basically based on a decision for the need for containment, right? So everything feels really big in that moment, like life feels big, energy feels too big, everything just feels so freaking big. So what we're going to do is we're going to lock down and we're going to make ourselves as small as possible, we're going to contain the energy within as tight frame as possible, and we're going to hold ourselves there in the knowledge that we are just teetering on the line of what it is, our body is able to hold without having a full explosion, right?

Jane Pike:

So if you think about this in horsey terms, that's where your horse freezes, we feel their body go like concrete. There's the heart rate thping through the saddle. And you know in those situations that if you were just to squeeze or do something, it's going to be too much for what it is that's happening for them, because they're in that state of high activation freeze. The outer container of the body is solid, but underneath the surface, there's a huge amount of stored survival energy that's causing through the system.

Jane Pike:

And so, the process that we did the other day was recognizing that, A, what your body has chosen is the need to keep itself very contained and very still. And the reason for that is that the amount of energy that is underneath it feels so huge that we're not sure how to let that out in a way that will allow us to contain what it is that's going on, right?

Jane Pike:

So we simultaneously understand that we need to release that energy, that pressure valve needs to be released. But we need to do it in a way that doesn't blow the system because we don't want to end up on the moon, and we don't want to end up in a bit of... We're in a worse place than we started with. So how we came into it, was to go, okay, what we understand about where it is we are right now is that you feel, A, unsafe, you've lost a connection of your own self in relation to the world, this experience feels bigger than your skin.

Jane Pike:

So, we want to actually just get like a visceral sense of where your boundary is, like where the edges of your body are, because everything's feeling like opting out of space right now. And so the very first thing we did was just, I said, "Hi." And he was like, "This is okay, this isn't a predictor of the future, this is just your moment right now." And we gave ourselves a hug, which is like just taking hold of either side of our arms, giving ourselves a hug, which might sound a little worthy to start with, but actually there's a real functional purpose up for it.

Jane Pike:

It's like, "Let's feel this container." There is a separation between you and the outside world. Let's come back to you... To let you come back to yourself for a little bit and feel into those edges, feel into the edges of your very visceral boundary. And then from that place we started tapping. It's one of my favorite things that I teach called the butterfly hug, which is basically, if you were to give yourself a hug right now and really just tap with a hand, I'm looking at myself on the screen, but I know this is just audio tapping on either side of the body.

Jane Pike:

Then that also gives us a little bit of a rhythmic cue to feed back into which the reticular activating system of our brain and the other quality, which are really associated to rhythm and everything else, all that other good stuff that us hans love. It allows us basically to co-regulate with something outside of ourselves.

Jane Pike:

Now, when we first did this, what was really interesting was Robyn did this, the tapping on the arm super fast. It was like, tap, tap, tap, tap, tap, tap, tap. And I'm like, "Oh, it's really curious to just notice how fast you're moving right now, right?" Because that's kind of a demonstration of where it feels like the energy's at, it's kind of like coursing through. So there's nothing wrong with that, but what would happen if we were to just slow that tapping down, would that give you something a little bit more rhythmic and measured to regulate with and to kind of balance yourself with? So that's the first reason for that.

Jane Pike:

The other thing is touch is such a primal way of triggering our social engagement system. And when we are in a place of feeling kind of outside of ourselves and really concerned about life and where it is we're sitting right now, the touch that we give, so whether that's giving ourselves a hug or giving someone else a hug, the brain can't tell where that touch is coming from and accused the body in the same way. So you can really utilize touch to bring yourself back down from places that don't feel very good for you. And there will be a response in your system because we're simply wired in for connection that way.

Jane Pike:

So when I talk about the social engagement system, it's one of the facets of polyvagal theory that I've found to be really useful. And it's basically, if we're in that place of being offline in terms of this higher wisdom part of our brain has left the building temporarily, we're operating from the threat center. What we want to do is be like, "Are you with me?" Like if I'm having a conversation with you, it's not good if you're not with me, like if you're not vaguely with me.

Jane Pike:

And so, what I was interested in doing is doing something, A, that was novel and slightly playful, that the brain had no previous association with that was going to cause alarm. And B, doing something that would require a degree of connectivity between us. And so, what I did was it's sort of similar to Simon says, I guess, and things that you would have done at school, which is just mirroring each other and we were on zoom or on FaceTime. So, it's like I'm going to put one hand here, and all I want you to do is match me.

Jane Pike:

And so again, you're orienting to something on the outside. There's a connection between both of us. I can match my movements for you to move in a very specific way. I can also cross over the midline of the body, which is a really good way of starting to connect up the left and right Hemispheres and bring everything back online. And I don't know what your experience, Robyn, but my observations were even at that point, there was a little bit of downregulation. There was a little bit of coming back to yourself as a consequence of doing those two things. Is that lining up for you so far?

Robyn Schiller:

Yes.

Jane Pike:

Or was I delusional?

Robyn Schiller:

No, you're right. When I think back to it, the first... Like I'd forgotten what we did first and now that you said it, I remembered and then... But I do, and I remember telling Warwick after, that that part was really great. And that was the part that I haven't ever heard about, or if I had, I've forgotten about it, but that was super helpful.

Jane Pike:

Yeah. Awesome. That the novelty is really important because if we think about what's happening, and this is very black and white, layman's kind of explanation. If we think about what's happening, there's a sensation in the body that's actually pretty familiar to you. Like it goes through a relatively predictable process of feeling that might still feel overwhelming, but it's not unknown to you in some way. And so, the brain is kind of clicking into these really predictable ways of responding. We get more and more concerned about it, and there's a super highway of how things are going that we easily click into and slow down.

Jane Pike:

So doing something like, that you would do when you were a kid, like getting you to mirror me, is like, "Oh, hang on a minute." Like, that's not something I'm familiar with, I really have to concentrate a little bit to do that. And so, if you think of anxiety as essentially a distraction, like there's just... You're so distracted with everything you can't focus, having to actually match your movements to someone else allows us to co-regulate together and also brings your focus back into the moment and outside of this kind of like scattered place where it's the one calling your attention to.

Jane Pike:

So that's the basis of that. I'm just trying to think what we did next. I'm moving through it in my brain. So if we think back, again, to this idea of what it means to be in a really high state of anxiety or activation, we've got a really amid outer casing of the body and where the fascial container, this beautiful fascia, which is underneath our skin and over the top of our muscles gets very tight. And what's interesting to know about how the body structure changes shape in both sympathetic and parasympathetic activation, is there's actually a lot of different changes which occur, which make it also very difficult for us to breathe in the ways that we might have been instructed.

Jane Pike:

So when we're in a parasympathetic place, the structure of the body moves more horizontally. There are different ways that the body allows for movement. That means that we can kind of occupy more space side to side. When we're in a sympathetic state, we're just really designed to locomote forward and back, so there's more of a vertical motion that happens. So when we got into sympathetic activation, the diaphragm, which evolutionarily was originally a muscle of stability before it was a muscle of respiration, actually locks down around the midline of the body, and the ribs do as well.

Jane Pike:

There's a movement of the rib cage down and around the center, and the fascial container of the body gets very tight, right? And all of this is simply designed for us to be able to protect our vulnerable front and get away from what it is that we're needing to get away from in the most efficient fashion possible. So if you think about the diaphragm's, actually, much more... I mean, it's not fully static obviously, but

it's in a place that makes it much less pliable and much less movable at that stage, than actually trying to influence that through deep breathing is causing that, again, internal trigger system to get activated and for us to feel more and more concerned.

Jane Pike:

So, on the one hand, what we're wanting to do, is loosen this fascial container, loosen this armoring and loosen the attachments of the diaphragm, so the body can start to breathe itself. And hopefully at the same time release some of this huge amount of energy that storing beneath the surface in a way that's manageable and kind of titrate the experience rather than you kind of getting thrown in the deep end and making it worse. And so, what we did was a variety of different movements of the shoulders and of the trunk and of the torso.

Jane Pike:

Either that required a little bit of concentration, so for instance, one shoulder forward, one shoulder back at the same time, and then swapping, you can't really do that without having to think fully about what it is that you're doing, but it's a very small movement, movements of the torso, and really just using the principle that smaller movements unlock the ability for us to move in bigger ways over time. And so, what we were doing was, yes, meeting the energy where it's at, recognizing that there's a big amount of energy, but if I was like, "Let's dance it out," it would have increased your heart rate, it would have just sent everything into overdrive.

Jane Pike:

And so, we went on this kind of continu of movement, starting with very small, fine motor movements, moving through the bigger movements of the torso and ending up in a place where we're shaking and inviting more vigorous movement to release things physiologically, so that, over time that safety prerequisite was in place, you felt like it felt safer to move in bigger ways. And at the same time we can discharge the energy, which allows the system to naturally down-regulate from the place that it was in previously, yeah.

Robyn Schiller:

Yeah. And that was against... If I hadn't thought I was having a heart attack, I was going to go for a run.

Jane Pike:

Mm-hmm (affirmative). Yeah.

Robyn Schiller:

I wouldn't pick a thing.

Jane Pike:

Yeah. Yeah. It's interesting. I mean, I'm down so many rabbit holes with this right now. And running is a curious one because after a while... I think, I was saying this to you at the time, as well, from the studies I've been doing after you've run three miles, the body automatically clicks into sympathetic, because it's like, "Well, what are we running from?" Like, "what is the purpose behind this?" Whereas if you were running to the shop for a specific purpose, there'd be an understanding that fuels the body's need to express in that way, but when that's not there, it's actually easy to exacerbate the concern faculties that

fuel that amount of activity, because it's sort of there's a lack of understanding or context there for the brain to make sense of it.

Jane Pike:

So I think that when we're looking at discharging energy or the kind of aftermath of it, on the one hand, we have this very real physiological response, which is, there has been a huge amount of adrenaline released that needs to be used up, you know that needs to be met in a way that's appropriate.

Jane Pike:

And then we have the conscious renegotiation of things, which is right. I did meeting yourself with kindness. Like, how is it that I'm going to support myself through this for the rest of the day. Understanding this isn't a predictor of the future, because I think that can be a real deflation point, as well, thinking that it's a regression or this means this is always going to happen, or now you're out of control.

Jane Pike:

It's like, "No, that was just the moment." That was whatever happened in the moment and it doesn't mean it's going to happen all the time. And so, how is it that we can allow gently that release to happen physiologically through walking or you were saying like water blasting you could do, which is kind of like something out there that has a purpose, that I think is a really lovely thing.

Jane Pike:

And also, any movement which really doesn't have an outcome in terms of like, "I'm not pounding the pavement," because now I feel like I just want to escape this energy. It's like, "How do I move in a way that brings curiosity back to my body, that actually is novel in some way?" So I'm starting to myelinate some new sensory pathways, which allow my brain to think about things differently.

Jane Pike:

Horizontal movement is a very parasympathetic, like we don't rock from side to side, we don't dance unless we feel like there is a safe space for that to happen and we're not escaping something. So if you can think of just movement for the sake of the enjoyment of movement, is a really lovely way to discharge energy. And I think that there are so many things that we've kind of locked into place that form part of what we should be doing, or this is like more purposeful, or this will mean that I lose weight or so on and so forth, it's like agenda focused movement.

Jane Pike:

And so, part of the liberation is what's playful basically. Like what's playful, what's novel, what's enjoyable just for the sake of it, that will allow me to kind of come back to myself, so I feel like I've talked to my head off, sorry.

Robyn Schiller:

[inaudible 00:37:49]. Before we pressed record, I also told you something that we... And then we said, "Well, we can talk about that too." In the past, this would have been a complete panic attack. And I didn't get to the point where the extreme symptoms of my ears closing, like blacking out, I didn't get to that point, where in the past that has been the path.

Jane Pike:

Mm-hmm (affirmative). Mm-hmm (affirmative). Yeah.

Robyn Schiller:

And you [inaudible 00:38:25].

Jane Pike:

Yeah. Absolutely. I thought you were going to say the tongue thing, which is what I forgot to mention as well, we can get into that too. Yeah. I was like the tongue thing. So-

Robyn Schiller:

[inaudible 00:38:35] the tongue selects that, without hanging on, we'll have a-

Jane Pike:

Yeah, yeah. Yeah. So sympathetic activation has six or seven different levels. And so, we move into it. The first level of sympathetic activation would be the startle response. So I get a shock from something and then I'm interested or curious to observe what it is that's going on. So, maybe I'm sitting here on my chair and a book falls off the bookshelf, and I get a shock, and that's the sympathetic switch that gets clicked on. Then I'm like, "Oh, what was that?" And I look around and I say that the books falling off the shelf and I come back down. So, that would be an example of the first level of sympathetic activation.

Jane Pike:

Now, we can move through to the place where sympathetic activation hits level five or six, which means that the only option really to bring ourselves back down before we go into a stage of total collapse, is to completely remove ourselves from the situation in question. And if we were to give an example, a writing example, which I know so many people struggle with, it's like, "Oh my horse spooks at something or they get a shock from something." And I just find, I completely cannot reset from that point, and that's until I'm all for a way, and then I find myself feeling okay.

Jane Pike:

And the reason for that is that we're so far up the scale of sympathetic activation at that point. And if we think of the pegs to come back down, being moving in the opposite direction, that the only option for our system to actually find a point of safety and reset, if you like, is to remove ourselves completely from whatever it is that caused the alarm in the first place, like the horse spooking.

Jane Pike:

Now, if you're in a state where you're more regulated where there's a more fluid movement, a more appropriate, quote, unquote, movement between parasympathetic and sympathetic activation. And what I mean by appropriate is that there really is no bad place for the nervous system to see it. Like collapse isn't bad, phrase isn't bad, none of these things are bad. It's just that what we want is our nervous system making the choices that are appropriate for the moment and when it's no longer appropriate, we're able to move out of that place and back to a settled place.

Jane Pike:

And so, when we talk about your situation, like in the past, where you may have found yourself feeling derailed from an experience like this for much longer afterwards, kind of having like a panic attack hang over, it would be in my understanding, because the place that you were sitting prior to that panic attack occurring was much higher than what it is now. So your baseline now is in a much different position, even though the stressors around you are still present and still high. Like there was a lot of stuff going on that contributed to causing this to come to a head, that are all understandable.

Jane Pike:

It's just that the resources that you had, the skills that you had and the understandings that you had allowed you to contain those at a much earlier stage. And even though they still got to the place where it felt really scary for a moment, that still, your capacity hadn't been exceeded as early or in the same way as what it might have been previously. So yeah, I think that's a total high-five moment as well, right? Like that's a really big deal.

Robyn Schiller:

So the work that I've been doing has worked?

Jane Pike:

Yeah. Yeah. It has. And I think-

Robyn Schiller:

[inaudible 00:42:01] I got to that point, I should be like, "No, it is working."

Jane Pike:

Yeah. It is working, totally. And as well, it's a... I use terms like regulate, dysregulate, settled baseline, all of this stuff, but I also don't want to reduce us to systems and mechanisms. And neuroscience is amazing, understanding our biology is amazing, but we're also mystery and magic and there's lots of things about the body and the universe that we don't understand yet. And I think that we have to give ourselves credit in that way, and also not seek to reduce ourselves to a person operating on this nervous system continu, because we do exist outside of that zone as well.

Jane Pike:

And so, one of the things I believe that's really important to do in any situation, but in this situation, as well, is like, "How do we introduce more wonderment into our day, into the period after?" It's like, "Oh, that was a big trip that I took, emotionally right now." And so, what is it that I can do to... I support myself, but also introduce more playfulness in, because playfulness is really the antidote to stress or to concern or to panic and we don't play unless we feel okay about playing. And even the mirroring that we did at the start of the session, it's playful, right? Like you think, "What are we doing?" And you can even do, like Simon says, tight things in there. And it's so much more than we give it credit for, I think. So it's kind of a cool thing to play with too. Yeah. The tongue-

Robyn Schiller:

All right. Let's talk about the tongue.

Jane Pike:

Yeah. So, I'm doing a lot work around holistic biomechanics at the moment, which is how the structure of our body really reflects where it is our nervous system is sitting. And the thing about that, that I find so fascinating, is that all of us can have very subjective experiences of feeling sensation and emotion, and they don't necessarily indicate where it is we are on a nervous system level. The only thing that is a true representation, that is an accurate representation of where it is we're sitting, is how the structure of our body is positioned in space.

Jane Pike:

So if we're in sympathetic mode, the structure of our body, the pelvis, the rib cage, the shoulder girdle, everything changes to support what is considered to be necessary in that moment. And in parasympathetic, the same thing happens, we change in support of that.

Jane Pike:

So the other thing to understand, and this is, again, a really deep rabbit hole that I've only just touched the surface of at the moment, is that the breath and the way that we respire, it happens on so many different levels. And that when we're in parasympathetic, respiration is happening through the skin, it's happening through different valve systems that are working in the body, it's not just this really functional in our breath that we think of in terms of how the breathing's working. And so, when we're in parasympathetic, it's the valve systems that essentially are, not mainly in control, but also in control of how air is being taken in and out of the body.

Jane Pike:

Now, the tongue is really associated to our reticular activating system, which is when we're in a place of shock that tends to get kind of frozen if you like. Again, this is really incorrect terminology for any scientists listening out there, going, "What is she talking about?" I just find this the easiest way to sort of understand it. The brain starts to map in more to sensation rather than location. So to give a little bit of a brief background about that, when the brain is deciding how it is the body needs to be safe, there are two different forms of information that it is giving out and receiving in.

Jane Pike:

So the information coming into the brain is coming from our sensory nervous system, right? So it's deciding what it is that's going on in our environment and the brain is receiving information from the sensory nervous system that's deciding how it needs to be structurally. Now the motor nervous system is receiving information from the brain based on that sensory input. Is this making sense so far? That then allows it to make a decision about how it is, it needs to be positioned in space. So when we're in a place of feeling really like we've got this, we're kind of what we would consider to be again, functional, quote, unquote, where adaptive and responsive to what it is that's going on.

Jane Pike:

Our body is constantly moving in and out of parasympathetic and sympathetic. So there's really healthy versions of sympathetic, of course, like getting up in the morning, feeling motivated and so on and so forth. And parasympathetic, as well, takes its place when it needs to.

Jane Pike:

So there are two sort of competing systems if you like, the most accurate one that the brain seeks to map is location. So the location of the body in relationship to each other and the other competing system is sensation. Now, when we start to map more for sensation than we do for location, meaning that I start to pay really big attention to how it is my body is feeling and it's attaching a certain meaning to that, the sensation maps take the place of the location maps.

Jane Pike:

And what happens is the body starts to receive a limited amount of new sensory information in and is only making its decisions based on past information that it's sending out to the body. And this is where we get stuck in these repetitive patterns of feeling the same way, of moving in the same way, of doing the same things. And gradually what happens over time, is that, the sensory pathways become demyelinated, meaning that we are no longer getting as much input in. So we're only basing what it is that we're doing on past references that we've experienced obviously in the past. Does that make sense so far? Yeah.

Jane Pike:

So if you think about how... Chronic pain, for instance, is a really good example of this. When I feel pain in a certain area of my body, I start to become really sensitized to that area. Each part of my body takes up a certain amount of real estate in my brain. Let's say, I have a tight shoulder, all of a sudden my brain starts to pay more attention to my shoulder and that takes up a bigger amount of real estate in my brain and the other areas of my body.

Jane Pike:

So what that means is that area of my body that would have previously been associated specifically to my shoulder, that real estate in my brain now incorporates perhaps my upper arm and my neck and perhaps the front part of my chest. So anytime something associated with that area gets triggered off, the sensation that gets fired up and we send out the information to that area that says, we have to be protective, that's going to hurt, we have an anticipation that gets fired off and so on and so forth. Yeah, it's following along?

Robyn Schiller:

Yep.

Jane Pike:

I haven't talked about this very much, so I'm just hoping that I'm not tripping over my words. Then what happens is we compound this cycle where we get protective of what it is that we are doing with our body. And the same thing happens in the case of anxiety. So we start to limit our experience to the very defined zones that we feel like we can control. Now, when we limit ourselves to very defined zones of either emotional experience of, or a physical experience, we also limit the amount of sensory information that is coming into the body, right?

Jane Pike:

So we don't do things which challenge us in different ways. We don't move differently, we don't take, we don't explore differently, we don't do anything which would be outside of the normal range of what we do. And so, the amount of sensory information in, is getting vastly eliminated, are limited, those

pathways become more, I say de-myelinated, but basically sort of atrophied, like they become weaker, less used, less informative over time. And what is basically really guiding the show is the information of the past experience that the brain has stored that's constantly just firing off these same channels because we no longer have new stuff that allows it to make a different decision about how to be.

Jane Pike:

So when we are... What I did with the tongue, that was a really long explanation to get to that point. Well, really start to mapping two different parts of the body, so the brain can start to locate information related to location rather than sensation. Now, the tongue is important because it relates to the reticular activating system, like I said, it relates to the valves, this valve pps that I said. But it also, is something that you don't typically think about. So like if I said, let's focus on your chest or let's focus on your stomach, if you're in a situation of feeling anxious that would have perhaps had a lot of pre-loaded material, the tongue typically doesn't have a lot of preloaded material on it and feels kind of like, "What is she doing?"

Jane Pike:

So again, there's a novel experience and we're providing two points of reference for the body to start to understand where it is in space and make different decisions about how it might be. So for us, what we focused on was the tendon, the lower tendon of the tongue and the front of the teeth, and also the outer edge of the tongue and the side of the cheek and we did each of those for 60 seconds. And then I think we had you turn your head from side to side and just be curious about what was leading. So whether the tongue led the head turn or whether the head led the head turn.

Jane Pike:

And like I say, there's no right or wrong. They're not loaded or trick questions, it's just giving your brain different information about how it is, it is in space, so that it can adjust things accordingly. The more that you sent into that area, as well, and I don't know what your experience was with this, I think, the latter stage of that was asking whether you could feel any movement of the tongue or any pulse of the tongue in relationship to the breath. And that's a signal of the parasympathetic coming back online, there being a sort of like a... It's amazing actually what happens in that space too, when you observe things and I can share another story after it. But did you have any experiences with that?

Robyn Schiller:

No, I couldn't. I didn't feel that.

Jane Pike:

Yeah. And that's completely regular as well. It's just bringing, like I said, bringing in that new sensory awareness and new novel awareness to what it is that's happening, and allowing things to kind of reset.

Jane Pike:

My mother-in-law had a really serious accident last year and she was in a state afterwards of shock and she stayed in shock basically like nervous system shock for maybe six months. Where she was just frozen in space. Her whole body was hunched over. She didn't look up, like it was sort of like she didn't notice or realize that she was in this, but everything because she was moving in a really big block, so there was

like, if the eyes turned her whole body oriented to what it was she was saying, and we started doing this tongue work together as a way of moving her body out of shock in a way that felt accessible.

Jane Pike:

And it was really interesting because for her, she's 76, this was super out there, she's never done anything like this before. And the thing that I had on my side was that she really trusts me. So she lets me experiment on her with different things because she knows that I've got her best interests at heart.

Jane Pike:

And so, we did this tongue stuff and for her, her tongue got really hot. She developed a really hot tongue and she got a really strong throbbing pulse in her mouth, which was really interesting. And we also had her put a clock in her room that had a really definite tick because that's something that your reticular activating system, again, can orient to on the outside that allows for regulation to occur.

Jane Pike:

So these are all little ways that you can start to co-regulate with your environment in circumstances where your internal world is feeling a little bit chaotic. I find it all fascinating.

Robyn Schiller:

Yes. So I have a couple more questions pertaining to the other day. So tell me why the crying?

Jane Pike:

Crying is a release. Yeah. Crying is a release. It's also a hormonal release. And it's just a way for emotions to move through. I think this is part of the mystery and the magic that we talk about. It's like when you allow space for a situation to occur, for an experience to occur, A, you realize it's mercurial like the panic past, right? It doesn't feel like it's going to pass at the time, that's part of the issue, right? But if you can ground and center, if you can find a way to ground and center in the midst of it, you realize the mercurial nature of the experience.

Jane Pike:

And also if you allow the body, if you support the body through the experience. So, everything that we did to my mind wasn't really layering something on top of what it was. It was a way of accessing your body to allow it, to make decisions for itself that allowed it to naturally down-regulate. Does that make sense?

Robyn Schiller:

Yeah.

Jane Pike:

Yeah. And so if we can allow for the natural intelligence of the body to decide what needs to happen next, in order for us to move to the next phase or to move to a better feeling place, we get to that place so much faster, but part of the barrier to that, I think, and I see time and time, again, and that I experience time and time, again, is the notion of what's acceptable and what's not acceptable. And what is able to be where the container that we're in at that time. So the people that we're with, this space

that we're in. Like what is going to the net with the amount of openness and kind of okayness that allows us to actually just cry if we need to cry or rage, if we need to rage.

Jane Pike:

And all of the rules that we have around what's acceptable, and the amount of times we apologize, like, "I'm sorry, I'm crying," it's like, it's not a weakness, it's just a beautiful way that your body has decided to move through to the next part and if we can allow that, we get there faster.

Robyn Schiller:

My body, I have noticed, if I try to hold it in, I get a headache.

Jane Pike:

Yeah.

Robyn Schiller:

I've learned-

Jane Pike:

It mutates, right? That energy goes somewhere.

Robyn Schiller:

Yeah. So I cry a lot these days.

Jane Pike:

Yeah. Yeah. I think there's so much to this discussion. Like there's so many rules, there are so many cultural rules, there are so many social rules, there's so many ridiculous assumptions that we have around weakness and bravery and what it means to be either or both. And I'd tell you a story that seems like a slightly random one, or probably all my stories are a bit random, but when they were putting together the resistance for the Gestapo that were the special forces that were going in, they chose women as their cheap spies and their chief interrogators.

Jane Pike:

And the reason that they chose them was because they were a bit under pressure. They found that they didn't give up the secrets as easily as the men and the pressure generally speaking. And one of the observations that was made, was that, the women all cried. They all cried before the men, but they didn't give up the secrets. And it's like crying was not seen as a symbol of weakness, it was just seen as a mechanism for being able to kind of move through whatever it was that you were moved through, but still kind of hold true to yourself.

Jane Pike:

And it's probably a terrible example, and I'm not suggesting that anyone can runaway and join the special forces or anything like that, but it's just this idea that we have of crying being a weakness is just really not true. We need to really come into relationship with all of the emotions in a different way, anger, sadness anxiety. And I've got so much to say about anxiety because I feel like it's one of the more

socially acceptable emotions to express, and oftentimes when you start to pass it apart, a lot of what sits under anxiety, is frustration, is pissed-off-ness, is like not being supported, is like anger actually for a lot of women.

Jane Pike:

In a workshop I was doing the other day, we had to do a women's self-defense course. And one of the... As I went around the circle, introducing ourselves, one of the women said that as she moves through town, she wants to have a sense of steady power, that she wants to feel like a well fed predator, which is, I'm calm and I don't want to do anything, but I want to feel like if I had to do something, I could access that energy. And I thought, "Oh, that's such a cool description that gave me goosebbs," of like, I'm out there with my pride of cubs and if I need to, I will take you out, but I don't want to have to take you out. It's kind of that connection to your backbone that I'm pretty passionate about. Yeah.

Robyn Schiller:

I mean, about the crying and you do have to be in a place where you feel like it's with you. Thank you. Because I didn't feel, I don't think I apologized because it just felt like the most normal thing to do, so...

Jane Pike:

Yeah. Oh no. And it's such a pleasure. It's such an honor to be present for those experiences. It's like, we have this delusional idea and I've certainly had this in the past that like, your friends, or your family, or people around you only want to see you when you're happy and showing up for the world in ways that are joyful. But actually, I've had friendships where it's been only positive in terms of people only telling me good stuff and then slinking away when it's bad. And it's so unsatisfying, you're like, "I want the whole show." This is the reality of being here, and to me, I guess, I have so many experiences with anxiety personally and professionally now that literally, it just doesn't, it's just ease, it just is what's happening right now, and it's not... That's okay.

Jane Pike:

I think that there's a lot of sensitive souls out there that haven't had the skills that we've needed or been met in the ways that we've needed to allow us to meet those sensitivities in healthy ways. And we're just starting to come into that as adults. And so, it's just like dealing with the horses, isn't it, we've just got to be kind to ourselves, which can be really hard, make the experience differently.

Robyn Schiller:

And you're amazing, kudos and credit where credit's due. It's a big thing to be in those feelings. And you were a goddess in graciously navigating those waters, even though it might not have felt like it at the time.

Jane Pike:

Oh, thank you. Yes. I just am so grateful and I want to share you with everyone.

Robyn Schiller:

Yeah. I did notice, so you have that opportunity for people maybe not to be on the video with them, but you do have a function of, what is it? Coach for a day or you have it...

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Jane Pike:

Oh, coach on coal. Yeah, yeah, yeah.

Robyn Schiller:

So you are available for people for this, and I would highly recommend anybody who's finds themselves in a situation where you need somebody like a fantastic Miss. Jane, there.

Jane Pike:

Well, thank you.

Robyn Schiller:

All right.

Jane Pike:

Okay.

Robyn Schiller:

It's totally a great option. So yeah. Check that out on the website.

Jane Pike:

Thank you Robyn. I really appreciate you guys.

Speaker 3:

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