

Season 3 Episode 10 Hannah

Voice over – Season three of the Options Save Lives podcast is brought to you with the support of our presenting sponsor R Street Institute and is hosted by Executive Director, Jenny Williamson.

Jenny Williamson – So today we want to welcome Hannah to the Options Save Lives podcast. Hannah is joining us from Australia today. Thank you for agreeing to come on our podcast.

Hannah – Thank you for asking.

Jenny Williamson – Well, let's start by letting our audience get to know you a little bit. What was your life like before you found the Sinclair Method?

Hannah – Long and arduous mostly with alcohol with the exception of five years completely alcohol free from 2012 to 2017. AUD has been part of my life since the gate basically, from around 14 or 15 years old. As soon as it entered my system, my entity, my body as a substance it just was a match made in heaven right away. And fast forward to 36 and I, so this is about a decade ago, I hit the classic rock bottom, stopped drinking very difficultly, difficultly if that's a word, with much difficulty, but I once I was free physiologically and psychologically, I just ran with it and I loved being alcohol free. And then I had a supplement in 2017 that was preserved in hardcore ethanol, but I had no idea. None whatsoever that it wasn't just like cheap vodka. It was a very specific form of methyl alcohol. So not ethyl, not isopropyl but methyl. And it was annoying I didn't realize it. And by the time I did realize it the physiology of neurochemical addiction had taken root for sure. So that was 2017. And then, you know, a massive epic level of binge cycle for years occurred. Quite disastrous, quite life threatening. It was bad. There is no other way to describe it. It was as extreme as I could have ever imagined and it was horrible. And then I started TSM in May of 2021 and things changed from the gate immediately for me, so the opposite of what happened when alcohol entered my system. I'm protected with, by naltrexone and then what happened after TSM, polar opposites.

Jenny Williamson – How did you first hear about the Sinclair Method? What was your first reaction to that?

Hannah – Honestly, I can't remember if I, I think I told Claudia this and we laughed I think, but I saw her TED Talk. And this was while I was, you know, in the middle of my well established AF life, and I just happen to stumble across the TED talk. And I kind of felt a bit smug to be honest. I was like, Okay, well, that's pretty cool. I'm glad for you, but I stopped drinking without medication. That was what was going on in the back of my mind, because I was very indoctrinated to, not so much AA, I'd long since left that singular paradigm, but I was very much aware that my own intense experience was stopping without pharmaceuticals. So using that as a measuring stick rather than looking at the science, which is what I do now, I just took it with a grain of salt. I had no concept the magnitude of what it could offer people because I wasn't at a place where I needed it yet. And when I was even, well when alcohol came back into my life and I realized My god, I'm actually drinking again and these binge cycles are extremely dangerous, it came to a point where abstinence only methodologies were well and truly killing me. Honestly, you know, I even tried going back to AA. That didn't last long. You know, it just, I had moved out of that paradigm of thinking about AUD. So that's what it boiled down to. Abstinence only methodologies, I was just getting worse and worse and worse. And I'd been watching TSM from afar for a number of years actually, and studying it on my own in terms of the neuroscience and neurobiology. And I just realized at one point in May or so, I have to think laterally. I can't keep banging my head up against this wall to just stop, just stop, just stop and stay stopped. What the hell am I going to do? It was bad, and I, on a wing and a prayer, I started TSM and it changed the course of my entire life immediately.

Jenny Williamson – So, many people find the Sinclair Method, when they, especially Claudia's TEDx talk, you know, when they're already fed up and they need help and they're searching

for help. And you came at it differently having found a successful at the time for you recovery method that worked, that you were stable in, and had you not been sideswiped unknowingly would have been able to maintain. So that that's a very different way of coming into the Sinclair Method. And I'd love to explore that a little bit more because we do get a lot of people and I know you've seen this in the peer support groups, who say, Okay, I've been abstinent for a year. I've been abstinent for two years, but I'm thinking about trying this. What's your reaction to that knowing that yes, you then tried this and it worked but you would not have left your sobriety, on purpose? That was something that was not a conscious choice for you.

Hannah – Right, but I was also someone who was actually really, really content and happy to not, even now I don't actually ideally want alcohol in my life at all just simply because it just doesn't give me anything. It's not worth what it costs financially, physically and all of that even though if I drink it's not much because of TSM. But I was coming, you know, I was definitely in the state of mind of, alcohol just has no place in my life. But if people want alcohol because it does add something and it's just something that they want to include in their lives then, you know, I think if you've worked to come out of maladaptive addictive behaviors, then the protection of TSM really is the golden ticket to be able to then safely moderate from that point forwards. Not everyone necessarily will need it depending on I think brain chemistry mostly, and other things going on in one's life. I mean I didn't, you know, I went to AA for a little while and then I left, and then my methodology and my way of living for years was just living a full life without alcohol. I wasn't practicing anything abstinent specific, it just had left my life. So in that context, my brain was fully rewired, just not pharmacologically. I had every way, every definition of extinction, that was how I felt, that was how I lived. I just hadn't gotten there through the more pharmacological route that TSM offers. Once I came, once alcohol came back into my body, and the absolute tremendous cascade of neurochemistry just exploded in my brain, you know, looking back on that it's just shocking at how fast and furious it happened. So for me at that stage using a medication to block that Armageddon really was just a no-brainer once I wrap my head around voluntarily putting alcohol back in my body and trusting that it will be safe. But for people who want to explore options to moderate safely, TSM is at the absolute top of my list for sure in addition to looking at the why. The why you want to reintroduce something back into your life as massive. There's no right or wrong answer. It's just reflection and introspection, and what else has sustained your time AF that you can also bring into working with TSM to help the pill do what it's designed to do. Those would be just my first thoughts off the bat really.

Jenny Williamson – It sounds like after having, what the way you're describing, something like 22 years or so, 20 plus years of problematic drinking, followed by about five years of no drinking, so your tolerance is now ultra low. And the introduction of alcohol, it sounds like you had, you also dealt with the alcohol deprivation effect in that huge immediate spike. Can you walk through from a psychological standpoint how scary that can be? When all of this came especially because this was not a conscious choice that you made to go start drinking.

Hannah – Yeah, I mean, that's a really interesting question if ADE and reward deficiency syndrome were actually in play, because I, neurobiologically I had actually filled my life with really healthy, happy hormone inducing activities. I wasn't deprived really of anything, you know, in terms of alcohol. I think there are often perfect storms in life and the perfect storm for me that coincided with that supplement coming into my into my life and body was that it actually just wasn't that great of a time. There was a lot of pretty intense stresses and, you know, just life stuff like we all have, but they all coalesced at once, at the same time that the supplement came in. So psychologically it was a minefield, it was a total absolute minefield to go from stability to Holy crap I am now; I actually went into denial for the first time. I can honestly say from my teens, I knew that I was, in the language at the time, an alcoholic. I knew it. There was no denial. In my early 20s with my drinking friends, very small close knit very, you know, very close circle, we all knew that we were alcoholics. I was never in denial, but after that supplement, I was actually in denial that I was caught by alcohol again. And then I had to just give up the ghost and say okay, I am well and truly addicted. But this is my only, then you get into that circle of, Well, it's my only coping mechanism. It's the only way I can sleep. It's the only thing that's working. But then I medically detox, pull myself back together and go the abstinent route and rebuild and rebuild and rebuild. But inevitably

something would happen that I just, that's where I think I fell into that neurochemical cesspool that, you know, the brain just wants to be in homeostasis. It doesn't want this GABA glutamate imbalance. It doesn't want the dopamine dance, you know, it actually wants stability. It wants function. And psychologically it was really hard to have the both of, you know what I was about to say, the best of both worlds but really like either of both worlds, because, you know, living without alcohol usually meant cleaning up the, you know, incredible distraction of a drinking binge. And then being in a binge I was just in a blackout and, you know, bad things occurred, you know. So, it was a living hell, it was a total living hell for myself and the people in my life. And then to branch out into TSM which was like this, you know, unfathomable idea was really scary for everyone involved. Yet here we are.

Jenny Williamson – And how much did you have to deal with the thoughts of knowing that you had been capable of quitting on your own for five years and then facing not being able to do the exact same thing? What kind of mental gymnastics did that put you through?

Hannah – The circumstances had changed. I had changed. My life had changed. The incredible level of traumatic stress in that present time was tremendous compared to 2012. So I understood it was that balancing act of, I understand why this is so difficult this time, but I still thought that I was strong enough. I still thought that because I've done this before I can do it again. I know what to do, but it's just not working. And now I understand, and this is a real turning point for me, is understanding the intensity and complexity of the neurochemistry. That made it makes sense to me. That made me understand where my mind was going offline when, you know, when I would just go into that beginning of a binge cycle before even drinking. I just gained awareness for why this time was much different than the other times when stopping that I could do it with ease in comparison. So that was a horrible kind of no man's land to be. I saw what wasn't working, but I hadn't found what would work, which was TSM, all the while watching it for two years from afar but still being too scared to try it. You do what you do, right?

Jenny Williamson – Absolutely. And you've alluded to it a little bit but can we pause? You have a unique perspective in the sense that you have some professional training in the area of mental health. So take a moment and talk about the training that you have as a professional that has also helped you along the way on your own personal journey.

Hannah – I've worn a handful of different hats so it's a bit hard to describe, but the CliffsNotes, the edited version is basically my initial training in my 20s and early 30s was in acute care, mostly remote health care. Psychology, counseling, acute crisis, acute mental health care, that all sort of was involved within that same field. I've broken away from acute care in terms of disaster management and the health care aspect, and gone very much more so towards the psychotherapeutic rounds. And one of the areas that I specialize in is the neurobiology, neuropsychology and psychophysiology of AUD specifically. And I have a few other sort of niche fields that I work in, but, you know, in the context of TSM it's really that fact that wrapping my head around. I mean I've got notebook after notebook, handwritten and highlighted and color coded to understand what the hell was going on in my brain, my brain in particular, that led to this lack of, seemingly lack of capacity to make conscious decisions that I just couldn't make to stay away from alcohol and stay safe. So that's why it's really become my focus now and, you know, 80% of my work is on AUD in particular, but TSM but also dealing with acute withdrawals and detox because I've been through that myself as well to extreme extents, and there's not adequate help for that whatsoever. So those are the two main hats I wear these days in terms of the neuroscience of AUD. And in addition to just trying to, I was just listening to the first part of Bruce Rose's talk that you just recently did with him, and it's like, you know, cultivating change from, you know, a macro level place in terms of governmental organization, health organizations, all the way trickling down to here in Australia your local GP clinic. It's really, really hard to do, as you would well known. But if we don't get the awareness out there, then it's just gonna stay really, really difficult and unknown. So that's a big portion of the work that is just grunt work, but it's really necessary grunt work. Because without that, people are still suffering.

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Jenny Williamson – Walk us through your journey on the Sinclair Method. I mean like most people you've had some ups and downs, so why don't you take a few moments to talk about what your specific journey was like.

Hannah – Well, again that perfect storm thing. I think that when I finally bit the bullet and started TSM. It was 11 days after, I mean I think in one year in particular, I had like 20, at least 20 medically assisted detoxes, either in hospital or at home. And this is after withdrawal seizures, you know, severe DT's, coma. That kindling effect where each binge gets worse and worse, the time in between them shortens and each detox becomes more and more dangerous and hellacious, that had certainly happened. So I was 11 days past coming out of a medically assisted detox, and I was already, I already knew I just knew, Okay, I'm drinking again, and I just thought this is, it's only been 11 days this time, like throw me a bone. And I thought, no it's time, I've got to try TSM. So I did it and I did the wrong thing, I took fifty milligrams on an empty stomach, and I was absolutely fine. So, you know, just for those people who, you know, a lot of some people do have side effects and challenges. I didn't at all ever, I could take the full 50, it was just a non issue. And I waited an hour and had a drink or two, and for me I was a lucky fast responder. I had actually had a decent day that day. So that's, when I'm working with people one on one, that's one thing that I encourage if possible. If you can actually have a day, or choose to start TSM when you've had a decent day, totally sober and substance free, where you have those naturally occurring happy hormones going through your body, mind and soul, then have an extinction session. For me it was, I'll never forget it. It was like a truth serum. I was like, this is what alcohol feels like without the dopamine dance in my head of alcohol. I can feel it. I feel altered, which kind of was enough for me to be honest, because I still see feeling the euphoria from alcohol years ago, but I felt altered. But when I really sort of like settled down into like, how am I actually feeling, I felt kind of dull and gray and lifeless and just blah. It wasn't bad. It was just now I get why people don't drink a lot. And for me to have even that thought, now I understand why people have one drink and think oh, I'm stopping because I'm starting to feel it now, the light bulb went off, because now I had blocked those opiate receptors, the whole neurochemical exchange in my mid brain wasn't happening. I not only didn't get the high, which I wouldn't have gotten anyway, but I didn't crave more of the feeling that I didn't particularly enjoy. So no reward, no reinforcement to, no motivation to continue the behavior of drinking. I was like oh, it was just, I was pretty gobsmacked to be honest.

So over time I stayed very similar, to lessening degrees though, and this is one thing that I think is really important that most people understand or come to understand about TSM. It is ever changing. It's definitely a fluctuating experience. There might be spikes and plummets. Ideally there's nice rolling hills. So for me, while I stayed compliant I just had nice rolling hills. I put parameters around my, what I would allow myself to drink and what I was okay with and it was never a struggle. I was satiated with at most half a bottle of red wine a night between four and 9pm. It didn't cost me anything the next day. I more often than not I didn't even finish that much. I worked, well I didn't even work, it just was a natural rhythm in my life to have things in my day to day life that brought me true joy and physical, spiritual, psychological health and well being. So I had that that second tier aspect of TSM that I think is sometimes overlooked, but it's so important. My success was directly related to how proactive I was, and I was motivated. I didn't want to wake up with all four limbs strapped to a bed and a ventilator tube down my throat from a coma, without knowing my name, without knowing how to walk, without being able to hold a banana to eat even though I couldn't eat. I was motivated. So I was really proactive and it worked a treat.

My downfall was non compliancy and I am perfectly happy to be the poster child for non compliancy because it, you know, I just would go into this mental blankness even after all that success. I could not have asked for anything more from TSM, but I would just go into this emotional overload and kind of mental blankness where I just would think one time without the pill won't hurt, because I wanted to drink and I wanted to drink then. Or just honestly, I

know it sounds absurd, but I would just forget to take the pill. It wouldn't occur to me and if you look at the neuropsychology of traumatic stress, the prefrontal cortex goes offline and you're in primitive response mode. And in brains that are primed for AUD that primitive response mode is wired for survival, and survival in that brain means immediate safety. And immediate safety in that brain, what's more immediate and accessible than alcohol? It doesn't even take that long to get into your system, you know. So for me drinking non compliantly would end, would then lead to, no joke, 36 hours or so I would be in a blackout and I would literally disappear for weeks, up to a month at a time. And my work at the time was taking me from place to place to place, which was rather disorienting in and of itself, but there were times when nobody could find me, you know. I mean I had a ridiculous number of ambulance trips and it was just all bad. All the while I had my, what's the word? My Holy Grail really. And I don't mean to, you know, I'm really careful about words like cure, a miracle and the be all end all, because I just happen to have an extraordinarily positive experience that I will be eternally grateful for. It's not going to be like that for everyone. Other people won't struggle with compliancy. I did and it was hellish. So we're all going to have our benefits and detriments. We're all going to have our things to navigate. That just happened to be mine.

So yeah, with compliancy I can remain safe to drink, anytime I want. I just really don't, don't want to. So then now where I'm at is that if I do want to drink, I sit with it, and 95% of the time it just goes away. It's just a habitual thinking pattern in my head, and it goes away. Sometimes it goes away as fast as it comes in, like, well, that was that. Other times, you know, at noon, I'll think oh, it's really, I really just want to relax with some red wine tonight. And then if it doesn't go away, I'll seriously consider, do I really want to drink? and then often it's still it goes away because I just don't want to physically put that substance in my body. And if it doesn't, or I feel like it's bugging me too much, to be honest, that's not even anywhere near white knuckling to me. That's just this petulant little toddler in my head going we want, we want, we want, we want. Or in a time when I'm incredibly emotionally activated, you know, sympathetic nervous system is sky high, I'm in fight, flight, freeze, collapse, fawn, whatever you want to call it, and I just want that parasympathetic nervous system regulation to come in, I personally think that sometimes that is the time to take nal, have an extinction session responsibly, mindfully. Because that's a really powerful time to be able to answer that call of that survival part of our brains going help me, that's what it is. I need help. I need to feel safe. Take nal, respond to that need with alcohol, but that need isn't going to be met with alcohol, so it's going to look for other pathways. It's going to create new neural pathways to answer that same call for health and security.

So yeah, those are just some of the considerations I have when when I decide whether to drink or not. Most often I just kind of decide not to, but it, you know, again, it has got to be 100% compliancy for me. I think my brain is so hardwired through the extremes of physiological change that I experienced that were enough to put me, I mean, I don't even, I went unconscious 12 hours after my last drink. I have no, it could have been 8, it could have been 14, but I've averaged around 12, because so I put it, you know, all together. I went unconscious. I was found four to six hours later still seizing, severe DT's in the hospitals that I once had privileges in. That's pleasant, ripping off your gown and clawing out your own IVs, severe delirium tremens. That took a lot to get over with my colleagues. And then the next thing, I don't remember any of this, and then I woke up, on and off throughout that induced coma and then had to relearn some basic functions. Couldn't write legibly for a good month. I'd write down, a nurse had to write down seizures, so I knew what happened to me. So that's some pretty significant brain change, that when my body didn't have even nearly enough alcohol after 12 hours, it was unable to survive. So, you know, that was, I remember thinking, Hah, maybe now it is time to consider pharmaceuticals, you know. That's what they're there for. And they're also there for the person who just wants to take that approach because it works. And because these things are at our disposal for a reason, in terms of naltrexone, and the support that we now have, thanks to people like you and Claudia, and the handful of others who have been doing the work for a long time and I hope to be part of continuing.

Jenny Williamson – Compliance was your biggest struggle. What tool, what did you use to employ to go to get yourself to the point where you said, That's it? 100% of the time from here on out I'm going to make sure I don't forget, I'm going to make sure I'm not complacent.

What? How did that come about? What steps did you do so that those who are having some compliance issues can hopefully take some nuggets away and employ them themselves?

Hannah – I'm still in it to be honest. I mean, I haven't been non compliant for I don't know how long but I haven't also been drinking a lot for most of, what is it November, in most of this year, but when I haven't been compliant, this has gone horribly. There's no one thing. For me it's the fact that I am still in the place where I have to be very vigilant about being compliant. I don't have to be vigilant about not over drinking or trying to out drink the nal, so that's a bonus. But I do have in my conscious mind, and we I think have to work to keep these things in our conscious mind, to not be hijacked by the part of the brain that just wants to drink. So that's one thing you know. I'm not out of the temptation mode of oh, one time won't hurt. I have to remember that, I don't have to it just really helps, to remember that Oh, that's right, if I drink without naltexone that horrible craving is just not going to end. And that is the worst. It's like you crave, crave, crave and then you think that having that one or two or three drinks, that'll be enough and I'll be fine. And then you have those drinks and it's like, oh, no, now I want it more than before, you know. Remembering that.

What else? I think it's just staying really mindful of the fact that this is a non negotiable. There's a few non negotiables in life. There's I think a lot of us, myself included, don't have that many non negotiables. One of them is I'm pretty much not going to leave my house in the morning without brushing my teeth. Just probably not going to happen unless something strange occurs. So I am trying to put taking nal before drinking into that category of non negotiable and you know, just a mindset change. And of course all the logistics of having it everywhere. You know, I have it in my car. My key chain holder I think I lost with my last set of keys but I haven't ever been anywhere without it. And that's fundamentally important. It's always within arm's reach, no matter where I am, pretty much. And, you know, I think remembering how bad things have gotten. I don't dwell at all, but it helps because the mind can forget and have very selective memory on what can and can't happen, you know. It might be okay once. It really might. I've actually had that experience. Non compliancy. I drank. I still didn't, you know, I actually didn't feel that different, but do that more than once or twice and it's just a recipe for disaster. It's really quite simple. Which neural pathways do we want to rewire? The ones that scream addiction, or the ones that shut that one up and create new ones that actually serve us for the rest of our lives on this planet? And it just takes a little pill and the other things that we do along the way to help it along, which I think cannot be underestimated, you know.

Jenny Williamson – Which actually leads to my next question. So you did a little bit of AA. That wasn't really something that even into your sobriety, really resonated with you. But you also had professional background in some of the tools that you could employ to help you be a partner with your Sinclair Method journey. So can you talk about some of those tools that you've used that you've picked up along the way that were beneficial in helping you with the Sinclair Method?

Hannah – Yeah, I mean, it did start with AA. I left after not too long, but there are some great takeaways like being of service to others. You know, one of the reasons I stayed in AA the longest, as long as I did was because I was taking meetings into a men's maximum security prison and working with people that were in pretty horrid conditions, and that's what I gravitate to. I like working with people in the trenches, in the struggle, in the hell and, you know, being of service, you know, being along my peers, alongside and helping people when I have the capacity and also accepting help when I don't have the capacity and need someone to stand by my side, which then offers a broader sense of community. You know, I mean, AA was great for that, ready made community, as long as you were a part of AA of course. But even after I left, I mean I think one reason after I took the supplement, one reason I think it got me is that I had lost touch with every single soul on the planet, and mind you very few people knew in Australia, but only one person left in my life, my best friend from the States who I stopped drinking with in 2012, only he knew about that supplement situation. No one else knew. A lot of people in Australia except for AA people even knew that I was alcohol free for five years. No one knew. I was very secretive. So building a, coming out of the closet basically and building a broader community of people in recovery, which I don't use that term anymore.

To me, it's, now that I see AUD as an accelerated learned behavior, so the learned behavior model of AUD rather than the disease model, connecting with anyone who is in on that same path. I have a relationship with a substance or behavior that I want to change. I don't care what the substance is or behavior or what you want to call it, but things like SMART, you know, SMART zoom calls, there's Lifering, there's all sorts of methodologies and modalities, and those for me just helped to stay connected on that level, even though it's via zoom, but on that level with others in the same place where you're in moderation management is you know, definitely extremely aligned with TSM and I've become more and more involved with them. It just means we get to talk to people and not have to explain ourselves, you know, and know that we're not alone and know that what we're doing is in a different paradigm. So I think it's critically important to find people who are in your paradigm, one in terms of AUD, and also because I don't have anybody really in my real life other than in person colleagues, and then it gets, you know, there's always that professional and personal line that you walk, but on a very 100% personal level, I just try and surround myself with people who love doing the same things I do but don't love alcohol. For me that's trail running and working with animals, horses and behavioral dogs with behavioral issues, mainly. Not a whole lot of drinking going on in those two sort of hobbies, you know, maybe there is with the trail running, but I'm not part of it. So it's just being part of a grander whole that encapsulates what paradigm you want your life to live in. And TSM and being compliant and extinction sessions is one part of that. But you know, until we have as many TSM meetups as we do AA meetings – wouldn't that'd be fantastic, you know, you just scroll through a list every day and it's like, oh, I can be there in an hour – we get to create our own. And again, this is like I could look at that as a detriment, Oh this sucks, I'm so alone in this, but really it's more like, what can I create here, you know?

So, yeah, and those are kind of the main things. But also just being really, one thing I always ask myself when I'm, especially when I'm struggling is, are the decisions I'm making in the best interest of my physical, mental, spiritual, emotional and psychological well being? And that's always directly related to what I'm going to do or not going to do with alcohol, you know. And when that supplement came into my life again, I wasn't in a great place. So you know, that sort of daily maintenance thing that AA talks about sounds like a job that should be remunerated to be honest. But to me, it's just how do I? What's going to best serve me in how I live my life on a day to day basis? and working things into a daily rhythm that offer endorphins, you know. I happen to live in a place now that's a great community. It's not that isolated. And that's, and they don't know anything about AUD with me. It's not an issue, but we know about being humans together. We know about going next door and just saying Hey, you know, I need some help. Can you do this, this and this? Like, Yep, sure. That's medicine for the soul in whatever form it comes in.

Jenny Williamson – You talk about reflecting and asking yourself questions. Can you talk a little bit about how these are techniques and forms of mindfulness that you're employing, and talk about the importance of what stopping and asking yourself questions and reflecting on how you're feeling and why you want alcohol or why you want other things has been helpful along your journey?

Hannah – Yeah, exactly. Exactly. And, you know, it's usually, well, it's always either running away from something or running to something. Because if you're equanimous, if you're in the middle, then there's no craving and clinging to something outside of ourselves, and there's no hatred, aversion to something and wanting to change that. So. Yeah, I mean, it really is just reflecting on why do I feel the way I feel on a, you know, on a given day and a certain whim of emotion? and is that emotion or feeling transient, or is it sticking around like, you know, sandpaper? Like, not sandpaper, but you know, like some stuck to me like glue kind of thing it's like. And if it is that niggling thing that I just can't shake, then where's it hitting me, at my core? and what can I, you know, if I can identify it, what can I do about it? And for me, that's what I love about trail running, because I often can't identify it in this overly used head of mine. You know, sometimes that thing just needs to shush. Often that just needs to shush, and put me on a trail out in the bush alone, and the mind wanders. Well like the emotional psychological mind wanders, and you can, you know, I think this is applicable to a lot of different things we do physically. You do, is it discus?

Jenny Williamson – Disc Golf.

Hannah – Disc Golf. Yeah. So you know, I think it's applicable to anything we do like this. Our physical bodies are doing one thing, our minds are focusing on that, but different parts of our minds are going off to something that irritated us five years ago. But because we're engaged in something physical, there's the capacity for that emotion to work itself out psychosomatically through the body, and that's where the psychophysiology background that is a huge part of my life comes in. And you know, on the trail, it's like, yeah, I'm thinking don't clip that rock, don't fall on that, you know, where's this trail going? Is there something? you know, you're always thinking, thinking, thinking. For me, there's no chance, there's no opportunity for those highly emotive thoughts, until they come at me like a flash, and I remember something someone, you know, said yesterday that irritated the hell out of me. And then I find that my pace changes or my posture changes. And for me, it's just sheer gold because there's that direct link between the mind and body.

And that also happens when I'm working with animals, particularly horses because you have to be so present to deal with a, you know, 1200 to 1500 pound animal that may or may not shy from a little fly, they're the funniest animals, and be a physical danger to you just by accident. So being present in the moment and allowing those thoughts to come in, come through and out in whatever capacity. And having other heartbeats around is so helpful. Trail running is a, you know, very much a solo thing for me, but I just can't stress the tremendous work that is working with animals because they are other heartbeats. We need other heartbeats to regulate our central nervous system. Physiologically, that's a huge reason why the majority of people drink. That's a huge reason why there's such a link between trauma and addiction. You know Gabor Maté is classic. He's like I've never met a person who has problems with addiction who has not experienced some degree of trauma. Not everyone who experiences traumatic stress will experience addiction for a variety of reasons, but there's usually some level of traumatic stress in the body and/or extreme exposure to high amounts of a substance that's going to change your physiology in and of itself, even if you just drink for joy.

But yeah, for me, it's definitely just being really in touch and reflective, you know. I mean some of the things I do I look back and I just have to laugh at myself, you know, and I'm nearly 47 now, so I like sharing these really ridiculous things I do as well, because it's, you know, in Australia it's called taking the piss. It's like, oh, yeah, I did the dumbest thing yesterday, and it just doesn't matter, because you're aware of it and you learn from it and you move on, you know. But being, you know, going down those shame spirals and guilt spirals, and, you know, that's why when I was in the throes of struggling, really, really struggling with not compliancy, I would show up at our meetups, you know, that beautiful group that is the TSM meetups zoom calls. I would just show up and tell the truth, with no shame, no guilt and know that I will be wholeheartedly, unconditionally still loved and accepted, you know, and when other people offer that to us, it's kind of hard to not offer it to ourselves. And that's the antidote to that shame and guilt nonsense that is from an external factor. Our birthright is not shame and guilt, you know. No baby doubts their worthiness of being loved or cared for and we should be no different, you know. We just have to also put in our part, so um, yeah.

Jenny Williamson – And then what advice would you give to someone who is either still looking into using the Sinclair Method or at the very beginning of their journey?

Hannah – I think for everyone, look at it all. Look at everything, like there's not a single methodology or approach or community that I've stepped into or explored that I haven't gained something from. Whenever I hear, that didn't work for me, I just think really? Nothing? There's no, there's nothing to take away? And maybe that's the case. I'd be willing to bet that there's always something to be gained from something or someone, and with TSM specifically, maybe that's why I was such a fast responder. Maybe that's why, I mean I didn't expect that truth serum effect because I had never heard of that before. I mean that was just like a bolt of lightning. But maybe I was and have been so blessed to have TSM work exactly how it's kind of designed to work because I knew it, you know, intellectually to then translate that into experience was seamless. So when people take TSM, take naltrexone, but don't understand it in the context of TSM or even how – I'm doing a talk with Moderation Management in a few

hours about TSM and naltrexone in general – you have to understand the mechanisms of how it works because this is based in science, full stop, period, at the beginning that's the core and then you can look at your own life and see what might benefit you and how to not just help extinguish those neural pathways but build new ones. And then you can just take flight in life, honestly, that's what it offers, you know.

Jenny Williamson – Right. Well, thank you so much for taking the time to be with us today. Definitely appreciate your insight. Wish I had even more time to continue chatting because I have so many more questions that I could ask. But we are limited on time. So thank you so much for sharing your story and your experience.

Hannah – Thank you so much for having me, Jenny. It's an honor truly.

TSM Tip Voice over – This TSM quick tip is brought to you by the C Three Foundation with support from our sponsor, Alcure.

Claudia Christian – Sarah, how do I maintain mindfulness while on the Sinclair Method?

Sara Michael Novia – Carefully Claudia

Claudia Christian – I think an act of mindfulness would be keeping my drink log

Sara Michael Novia – Absolutely

Claudia Christian – Keeping that up to date and also asking myself after the first glass of wine has gone, do I really want or need another one and why?

Sara Michael Novia – It's so important to be drinking mindfully as well.

Claudia Christian – Yes. Why do I want another drink? If you're not asking yourself that then you're just drinking mindlessly.

Sara Michael Novia – For the sake of drinking.

Claudia Christian – It would be like being on a diet and you want to have a cookie or whatever

Sara Michael Novia – Or two

Claudia Christian – Yes, okay. We always want cookies. But what if we're on a diet and we want to be mindful about our diet and caloric intake? For me I would take a cookie and bring it into the room where I want to eat it. I would not bring the entire bag of cookies with me.

Sara Michael Novia – That's a great idea

Claudia Christian – Yeah, you put it on a little plate and bring that portion

Sara Michael Novia – So you only eat the one.

Claudia Christian – So you only eat what's on the plate.

Sara Michael Novia – So what happens if I want to go back to the bag and have some more cookies.

Claudia Christian – Ask yourself why.

Sara Michael Novia – That's a great idea.