



Understanding the Nervous System

When the Nervous System dysregulates, and Anxiety,
Pain and Fatigue become chronic.

Prepared by

Danielle Wilson

Mindshift Studio | Aotearoa New Zealand
contact@mindshiftstudio.nz | mindshiftstudio.nz



Table of Contents

01

Understanding Stress and Regulation

02

What is Nervous System Dysregulation

03

Polyvagal Theory

04

Trauma-Aware, Compassionate
Framework

05

Dhronic Symptoms through a Nervous
System ILns

06

An Empowering Nervous System
Philosophy



Disclaimer

This booklet is educational in nature only. It does not provide medical advice, diagnosis, or treatment.

All physical and psychological symptoms, including pain, fatigue, anxiety, depression, or other health concerns, must always be evaluated by a qualified medical professional. Any discussion in this booklet of potential connections between the nervous system and physical symptoms assumes that appropriate medical investigation has already taken place and that serious medical causes (such as infection, cancer, or other structural or pathological conditions) have been assessed and ruled out or are being appropriately managed.

This material is intended to complement, not replace, medical care, psychotherapy, or mental health treatment.



Understanding the Nervous System

The nervous system is responsible for maintaining balance, a state known as homeostasis. It continuously adjusts heart rate, breathing, digestion, immune response, and attention in response to internal and external demands.

Regulation Defined

Regulation is not the absence of stress. It is the capacity to:

- * Move between physiological states
- * Respond appropriately to challenges
- * Return to a baseline of relative calm and safety

A regulated nervous system is flexible, not rigid.



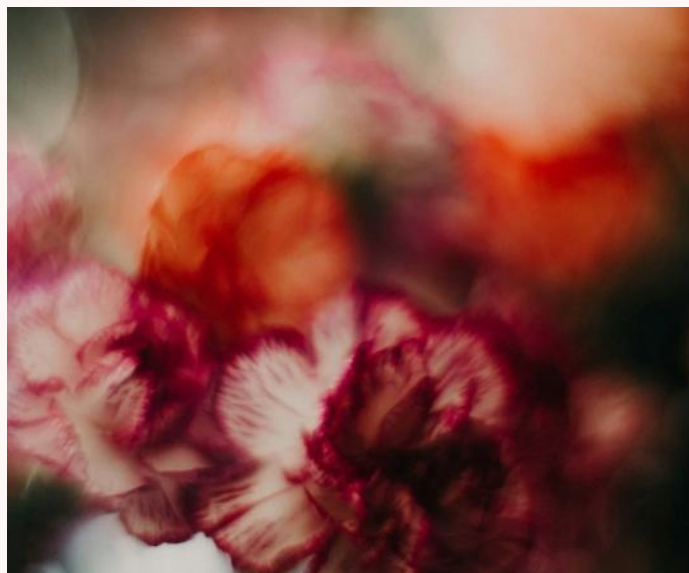
The Two Primary Branches

- Sympathetic Nervous System: mobilises energy (“fight or flight”)
- Parasympathetic Nervous System: restores and repairs (“rest and digest”)

Allostasis

Allostasis refers to achieving stability through change. Short-term stress responses are adaptive. However, chronic activation leads to allostatic overload, the cumulative wear and tear on the body associated with prolonged stress.

This is not a failure of the system. It is a system doing its job for too long, remaining on alert after the threat has past.





What is Nervous System Dysregulation?

A useful illustration comes from stress biologist Robert Sapolsky.

A zebra escapes a lion. Its stress response activates intensely, then turns off once safety is restored.

Humans activate the same biological stress responses as zebras, but in addition to physical threats, we do it in response to psychological and social threats. For example:

- Financial uncertainty
- Relationship conflict
- Work pressure
- Identity disconnect
- Unresolved emotional experience
- Uncertainty

Unlike zebras, humans replay stress internally, day after day, year after year.

Dysregulation occurs when the nervous system remains oriented toward danger even when danger is no longer present.

This is not a failure of logic or willpower. It is a mismatch between:

- A modern psychological environment, and
- An ancient biological survival system

The body reacts as if a threat is ongoing, mobilising or shutting down accordingly.



Polyvagal Theory

Developed by Dr. Stephen Porges, Polyvagal Theory describes how the autonomic nervous system organises responses to safety and threat.

The Three States

1. Ventral Vagal (Social Engagement)
 - Active when safety is perceived
 - Supports connection, curiosity, digestion, immune repair
2. Sympathetic (Mobilisation)
 - Activated by perceived threat
 - Prepares the body for action (fight or flight)
3. Dorsal Vagal (Immobilisation)
 - Activated when threat feels overwhelming and inescapable
 - Leads to shutdown, numbness, dissociation, collapse

These states form a hierarchy and exist on a continuum.

Neuroception

Neuroception is the nervous system's unconscious surveillance system.

It continuously scans:

- Other people
- The environment
- Internal bodily sensations

For individuals with a history of stress or trauma, neuroception may become biased toward detecting danger, even in objectively safe contexts.

Co-regulation

Humans regulate best together.

Facial expression, tone of voice, presence, and relational safety are biologically necessary signals that help calm the nervous system.



Trauma-Aware, Compassionate Framework

A trauma-aware approach asks not:

“What’s wrong with you?”

But instead:

“What happened, and how did your system adapt?”

Behaviours often labelled as “disordered”, such as people-pleasing, numbing, hypervigilance, or withdrawal are frequently adaptive strategies developed in environments where safety was inconsistent or absent.

Dysregulation is not chosen. It is learned protection.



Chronic Symptoms through a Nervous Systems lens

This section explores one explanatory framework used in mind-body medicine and neuroscience-informed care. It does not claim that all symptoms have nervous system origins.

Anxiety

Chronic stress sensitises the amygdala, the brain's threat-detection center. Over time, it becomes hyper-responsive while safety-signaling pathways weaken.

As a result, the nervous system begins to interpret neutral or mildly stressful situations as dangerous. The body remains on high alert, even when no immediate threat is present.

This creates:

- Persistent unease
- Anticipatory fear
- A sense of being “on edge” or unable to relax

Importantly, this is not a cognitive choice. Anxiety reflects a nervous system that has learned, often through repeated stress or earlier life experiences, that vigilance is necessary for survival.





Pain

Dr. John Sarno proposed that some chronic pain conditions are psychophysiological, meaning the pain is real, but generated by neural pathways rather than ongoing structural damage.

Nicole Sachs expands on this work by emphasising that the body may express unprocessed emotional material through physical symptoms when direct expression feels unsafe or overwhelming.

Importantly:

- Pain is real
- The suffering is real
- The nervous system is involved in pain signalling

Why the Symptom Is “Protection” Not “Punishment”

Many people living with chronic symptoms feel, consciously or unconsciously, that their body is punishing them for:

- stress they “should” have handled better
- emotions they believe are unacceptable
- perceived personal failure or weakness

This belief is reinforced by cultural narratives that equate health with discipline and illness with inadequacy.

The Nervous System does not Punish

However, modern neuroscience rejects this framing. The nervous system does not punish. It protects.

It has one primary function: to keep the organism alive and socially connected. It does not possess:

- Moral judgment
- Intent to harm
- A concept of blame or deserving

From this perspective, symptoms arise not as retribution, but as adaptive strategies. When emotional expression, rest, boundaries, or self-protection once felt unsafe, the nervous system learned alternative ways to reduce perceived threat, including physical symptoms.

Pain may:

- Divert attention away from overwhelming emotional experience
- Slow the body when stopping does not feel permissible
- Create a socially acceptable signal of distress when direct expression felt dangerous

These strategies are not chosen. They are learned. And they are rooted in survival, not self-sabotage.

That is to say, symptoms are not intentional or conscious, but are protective responses shaped by learning and experience, rather than by moral judgment.

Healing, therefore, is not about fighting the body, but about helping the nervous system update its understanding of safety.



Fatigue and Depression

When stress is unrelenting, the nervous system aims to conserve energy.

Dopamine levels decline. Motivation drops. Pleasure becomes inaccessible. The system reduces output in an attempt to preserve energy and prevent further depletion.

This can manifest as:

- Profound fatigue
- Low mood or numbness
- Loss of interest or joy
- Difficulty initiating action

This is not laziness. It is an exhausted system attempting to endure.

Your nervous system did not fail you. It adapted.

With the right conditions – safety, compassion, support, and time – it can learn again.



An Emerging Nervous System Philosophy

This work is grounded in several widely supported principles:

Neuroplasticity: The nervous system can change in response to new experiences

Safety before insight: Regulation precedes transformation

Resilience over elimination: The goal is not to remove stress, but to move flexibly between states

Bottom-up regulation: Breath, movement, rhythm, journaling, self-compassion and connection directly influence survival circuits

Progress is not measured by perfection, but by increased capacity in your day-to-day experience.



A Metaphor: The Adaptive Navigation System

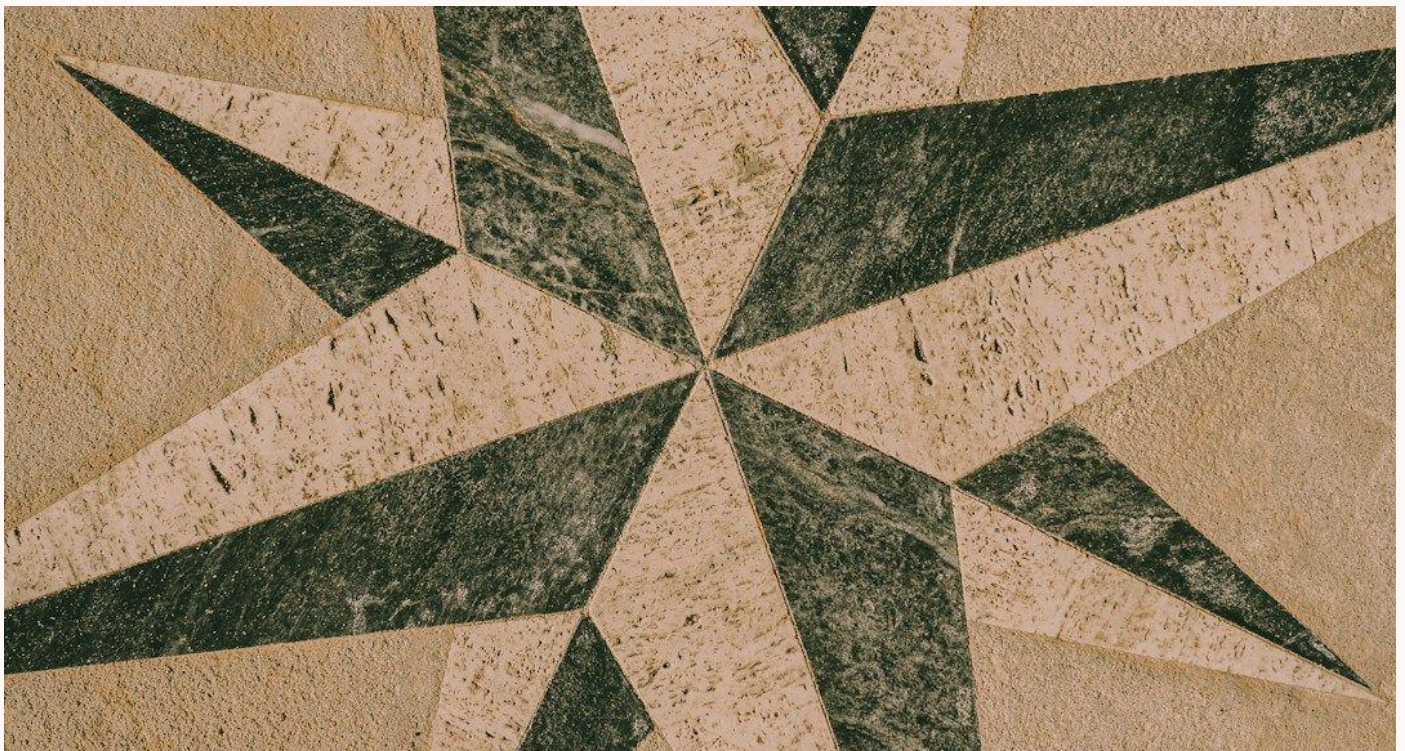
Your nervous system is not broken. It has been navigating with an outdated map; one shaped by past conditions that may no longer apply.

In unfamiliar or dangerous terrain, it chooses what it perceives to be the safest known route, even if that route is slow, uncomfortable, or inefficient.

Through daily practices and awareness, you can begin gently updating that map so your system can once again distinguish between real danger and passing shadows.

Safety is not a thought. It is a felt experience.

Healing is not deleting the system. It is updating the map.



How to use this information safely

Use this framework to build understanding, not to self-diagnose

- * Always investigate symptoms medically first
- * Hold this model as one lens among many
 - * Move slowly; regulation is not a race
 - * Seek professional support when needed
 - * If distress increases, pause and reach out

This work is about restoring trust, not forcing change.

