Military Moves and Client Fears

I am a management coach and my client has fears from childhood. What are some coaching models and activities that I could use with my client.

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Here are several coaching models and activities that can help you work with a client who has childhood fears affecting their current life:

**Coaching Models**

**GROW Model with Trauma-Informed Approach** Adapt the classic GROW (Goal, Reality, Options, Will) model by being especially gentle in the Reality phase. Focus on current impacts rather than diving deep into past trauma details. Ask questions like "How do these patterns show up in your work life today?" rather than "Tell me about your childhood."

**Narrative Coaching** Help your client reframe their story from victim to survivor to thriver. Use questions like "What strengths did you develop because of these experiences?" and "How has overcoming these challenges prepared you for current situations?"

**Solution-Focused Coaching** Concentrate on times when the client successfully managed their fears. Explore what was different about those situations and how those strategies can be applied now. This avoids getting stuck in problem analysis.

**Cognitive Behavioral Coaching (CBC)** Work with thought patterns and behaviors without requiring deep emotional processing. Help identify limiting beliefs stemming from childhood and develop evidence-based alternatives.

**Practical Activities**

**Resource Anchoring** Have your client identify their adult resources, skills, and support systems. Create a physical "resource anchor" - a gesture or object that reminds them of their current capabilities when triggered.

**Timeline Visualization** Create a visual timeline showing their journey from childhood to now, highlighting growth, achievements, and developed strengths. This reinforces their evolution beyond their childhood experiences.

**Values Clarification** Help them identify their core adult values and how these can guide decision-making, often revealing how they've grown beyond childhood conditioning.

**Reframing Exercises** Practice reframing childhood-rooted thoughts. For example, "I'm not good enough" becomes "I'm learning and growing" or "I have valuable contributions to make."

**Somatic Grounding Techniques** Teach simple breathing exercises or body awareness techniques to help them stay present when childhood fears surface.

**Important Boundaries**

Remember to distinguish between coaching and therapy. If childhood trauma requires processing, refer to a qualified therapist. Your role is helping them leverage their existing resources to move forward, not heal past wounds.

Stay focused on current goals and future possibilities while acknowledging how past experiences inform present patterns. This approach honors their history while empowering their growth.

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the client's fear comes from being a military family that moved every two years. Now he rejects changes at work.

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This specific background gives you a clear framework to work with. The client likely developed survival mechanisms around frequent moves that now create workplace rigidity. Here are targeted approaches:

**Resource Anchoring** Have your client identify their adult resources, skills, and support systems. Create a physical "resource anchor" - a gesture or object that reminds them of their current capabilities when triggered.

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**Control Mapping** Create a visual map of what they can control, influence, or must accept in workplace changes. This builds on military training about focusing energy where it's most effective.

**Gradual Exposure Planning** Start with small, voluntary changes they can initiate and control. This rebuilds confidence in their ability to navigate change successfully.

**Root System Visualization** Unlike childhood where they had to constantly uproot, help them identify their current "root system" - relationships, skills, reputation, and resources that travel with them through workplace changes.

**Targeted Questions**

* "What did you learn about building relationships quickly that serves you now?"
* "How did your family maintain connection despite constant moves?"
* "What would 'healthy stability' look like versus 'fear-based control'?"
* "How might your change-navigation skills be an asset your workplace needs?"

**Practical Strategies**

**Change Preparation Rituals** Help them develop personal rituals for processing workplace changes that honor their need for stability while building confidence.

**Stakeholder Mapping** Teach them to quickly identify key relationships and support systems in new situations - a skill they likely developed but may not recognize.

The key is helping them see that their childhood experience, while challenging, actually equipped them with rare change-management abilities that they're now underutilizing due to fear. what neurotransmitters and brain regions are activated when the following statements are made by a client: Fear + Anticipation, Resignation (Sadness + Acceptance), Protective Defensiveness (Fear + Anger) ,(Disgust + Sadness, Dread (Fear + Sadness) and Defeat/Resignation (Sadness + Acceptance)

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neurotransmitters brain regions fear anticipation resignation sadness acceptance

10 results



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Subgenual anterior cingulate cortex controls sadness-induced modulations of cognitive and emotional network hubs | Scientific Reports

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Anterior Cingulate Cortex: Unique Role in Cognition and Emotion | The Journal of Neuropsychiatry and Clinical Neurosciences

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Frontiers | Lateralized Deficits of Disgust Processing After Insula-Basal Ganglia Damage

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Increased activation of the anterior cingulate cortex during processing of disgust faces in individuals with social phobia - ScienceDirect

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The spontaneous brain activity of disgust: Perspective from resting state fMRI and resting state EEG - ScienceDirect

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Limbic System: What It Is, Function, Parts & Location

clevelandclinic.org



The Subgenual Anterior Cingulate Cortex in Mood Disorders - PMC

nih.gov

Based on current neuroscience research, here's what happens in the brain when clients express these emotional states:

**Fear + Anticipation**

**Brain Regions:** The fear response starts in a region of the brain called the amygdala [What Happens in the Brain When We Feel Fear](https://www.smithsonianmag.com/science-nature/what-happens-brain-feel-fear-180966992/), along with heightened activity in the prefrontal cortex and anterior cingulate cortex for anticipatory processing.

**Neurotransmitters:** norepinephrine-fear (anger) [Neurotransmitters and Electrophysiological Changes Might Work as Biomarkers for Diagnosing Affective Disorders - PMC](https://pmc.ncbi.nlm.nih.gov/articles/PMC8476281/), with elevated cortisol and decreased GABA. fear conditioning is dependent on dopamine signaling in the amygdala [Dopamine and fear memory formation in the human amygdala | Molecular Psychiatry](https://www.nature.com/articles/s41380-021-01400-x) for learning and memory consolidation.

**Resignation (Sadness + Acceptance)**

**Brain Regions:** increases in limbic-paralimbic blood flow (subgenual cingulate, anterior insula) and decreases in neocortical regions (right dorsolateral prefrontal, inferior parietal) [Reciprocal Limbic-Cortical Function and Negative Mood: Converging PET Findings in Depression and Normal Sadness | American Journal of Psychiatry](https://psychiatryonline.org/doi/10.1176/ajp.156.5.675). subgenual anterior cingulate cortex controls sadness-induced modulations of cognitive and emotional network hubs [Subgenual anterior cingulate cortex controls sadness-induced modulations of cognitive and emotional network hubs | Scientific Reports](https://www.nature.com/articles/s41598-018-26317-4).

**Neurotransmitters:** serotonin-disgust (sadness) [Neurotransmitters and Electrophysiological Changes Might Work as Biomarkers for Diagnosing Affective Disorders - PMC](https://pmc.ncbi.nlm.nih.gov/articles/PMC8476281/), with decreased dopamine and norepinephrine, elevated cortisol.

**Protective Defensiveness (Fear + Anger)**

**Brain Regions:** the amygdala has been recognized as the central site for all negative emotions [Frontiers | Editorial: Neurotransmitters and Emotions](https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2020.00021/full), with increased activity in the anterior cingulate cortex and reduced prefrontal cortex regulation.

**Neurotransmitters:** High norepinephrine and dopamine, elevated cortisol, reduced serotonin and GABA.

**Disgust + Sadness**

**Brain Regions:** the insular cortex (IC) and the basal ganglia (BG) in the experience, expression and recognition of disgust [Frontiers | Lateralized Deficits of Disgust Processing After Insula-Basal Ganglia Damage](https://www.frontiersin.org/journals/psychology/articles/10.3389/fpsyg.2020.01429/full). Happiness, sadness, and disgust were each associated with increases in activity in the thalamus and medial prefrontal cortex [Neuroanatomical correlates of happiness, sadness, and disgust | American Journal of Psychiatry](https://psychiatryonline.org/doi/10.1176/ajp.154.7.926).

**Neurotransmitters:** Decreased serotonin and dopamine, with altered GABA function.

**Dread (Fear + Sadness)**

**Brain Regions:** Combined amygdala hyperactivity with subgenual anterior cingulate cortex involvement, reduced prefrontal cortex activity.

**Neurotransmitters:** Elevated norepinephrine and cortisol, decreased serotonin and dopamine, disrupted GABA.

**Defeat/Resignation (Sadness + Acceptance)**

**Brain Regions:** Similar to resignation above - increased limbic activity (subgenual cingulate, anterior insula) with decreased dorsolateral prefrontal cortex activity.

**Neurotransmitters:** Significantly reduced dopamine and norepinephrine, altered serotonin function, elevated cortisol.

**Coaching Implications**

Understanding these patterns helps you recognize that when clients express these states, they're experiencing real neurochemical shifts that affect their cognitive processing, decision-making capacity, and emotional regulation. This knowledge can inform your pacing, intervention timing, and the types of questions that might be most effective during different emotional states.