

Information Handout

Professional Version | US English

Window Of Tolerance



Description

The 'window of tolerance' metaphor is particularly helpful when working with traumatized clients, or with clients who struggle to tolerate wide ranges of emotional arousal.

The window of tolerance concept was coined by Dan Siegel in his 1999 book *The Developing Mind*. Siegel proposes that everyone has a range of intensities of emotional experience which they can comfortably experience, process, and integrate. This is their 'window of tolerance' or zone of 'optimum arousal' (Ogden et al, 2006).

Some people's window of tolerance is relatively wide: they can feel comfortable despite relatively high degrees of emotional intensity, and a broad range of emotions (from pleasant emotions such as excitement and happiness, to unpleasant emotions such as guilt or anger) may be tolerated and available to consciousness. People with a wide window of tolerance are able to think, feel, and behave flexibly and effectively despite high degrees of arousal: Ogden et al. (2006) give the example of a woman who was able to distract her potential rapist by engaging him in a discussion about his sister.

Everyone's window of tolerance – or zone of optimal arousal – has an upper and a lower boundary. Above the upper boundary is a zone of 'hyperarousal', and below the lower boundary is a zone of 'hypoarousal'. When a person's level of arousal moves beyond the boundaries of their window of tolerance their thinking and behavior can become disrupted. Siegel describes how:

"A flood of energy may bombard the mind and take over a number of processes, ranging from rational thinking to social behavior. At this point, emotions may flood conscious awareness. Some have called this an emotional "hijacking," "breakdown," or "flooding." In such a situation, one's behavior may no longer feel volitional, and thoughts may feel out of control. Images may fill the mind's eye with visual representations symbolic of the emotional sensation."

Description

In Siegel's conceptualization, windows of tolerance are not fixed. There are individual differences in their width which are determined by:

- **Temperament** – Siegel gives examples of children with a shy temperament who find emotional intensity disturbing, and those with irritable or unpredictable temperaments who have outbursts when outside their windows of tolerance.
- **Experiential (trauma) history**, which might include experiences of trauma or neglect. Siegel proposes that children who have repeated experiences of 'out of control' emotions without a sense of other people helping them to calm down may be less able to self-soothe.
- **Social context**, such as the presence or absence of 'safe' attachment figures who can facilitate approach behavior.
- **Physiology** – non-optimal physiological states such as hunger, thirst, tiredness can narrow an individual's window of tolerance.
- **State of mind** – including pre-existing level of stress.

Siegel suggests that the window of tolerance can be understood in terms of the function of the autonomic nervous system. Above the upper boundary, excessive activity in the sympathetic branch of the autonomic nervous system results in an increase in energy-consuming processes. Below the lower boundary, excessive activity in the parasympathetic branch of the autonomic nervous system dominates – decreases in physiological processes such as heart rate and respiration are observed and occur alongside psychological experiences of 'numbness' and 'shutting down'. Siegel also proposes that other combinations of sympathetic and parasympathetic activity are possible.

Other authors, such as Ogden, Minton & Pain (2006), have mapped the window of tolerance metaphor onto Porges' polyvagal theory (Porges, 2011). The polyvagal theory extends traditional sympathetic/parasympathetic conceptualizations of the autonomic nervous system to describe three hierarchically organized subsystems that govern our neurobiological responses to environmental stimulation. These three branches are the ventral parasympathetic branch of the vagus nerve (responsible for social engagement), the sympathetic system (responsible for mobilization), and the dorsal parasympathetic branch of the vagal nerve (responsible for immobilization). Ogden et al (2006) propose that each subsystem corresponds to one of the three arousal zones of the window of tolerance model: the social engagement (ventral vagal) system correlates with the optimal arousal zone, the sympathetic system with the hyperarousal zone, and the dorsal vagal system with the hypoarousal zone.

The window of tolerance model can also be described at the level of brain function. Siegel suggests that:

"In states of excessive arousal, the "higher" processing of the neocortical circuits is shut down. In addition, the direction of the energy flow within the brain, usually coordinated and balanced by the prefrontal regions, is then determined more by input from the "lower" processing centers of the brainstem, sensory circuits, and limbic structures. In this way, the beyond-tolerance state of hyperarousal leads neurologically to the inhibition of higher perceptions and thoughts; more basic somatic and sensory input is favored. In this situation, people don't think; they feel something intensely and act impulsively. What this means is that an individual who enters a state outside the window of tolerance is potentially in a "lower mode" of processing, in which reflexive responses to bodily states and primitive limbic and brainstem input are more likely to dominate processing."

Description

Clinically, the window of tolerance metaphor is popular amongst therapists working with survivors of trauma, particularly clients who experience dissociation. Murray and El-Leithy (2022) describe how one goal of CT-PTSD is to help clients to identify and change strong beliefs and emotions in therapy by “re-experience[ing] the emotions that they felt at the time, but not feel overwhelmed by them or lose track of the fact that they are in a safe environment”. Like Siegel, they suggest that “if trauma memories are activated too strongly, they can overwhelm our client’s ability to think clearly, verbalise, and update their thoughts and feelings”.

When working with survivors of trauma, the window of tolerance concept suggests two approaches:

- The first is to help clients to stay within their window when working with their trauma memories and beliefs. Murray and El-Leithy (2022) suggest that when clients are below their window, therapists can use techniques such as increasing the intensity of reliving, focusing on emotions and body sensations, and site visits. When clients are above their window of tolerance therapists can use ‘colder’ forms of reliving, focusing on conceptual rather than sensory elements of the experience, and using techniques to introduce distance.
- The second is to ‘widen the window of tolerance’ so that clients can achieve more space in which to tolerate and process their experiences. The window of tolerance can be ‘widened’ through a process of education about different arousal states, their role in the clients’ experiences, and the practice of new behaviors to regulate autonomic states. Corrigan et al. (2010) propose that soothing strategies such as exercise, yoga, and physical activities requiring focused attention be used to manage states of high arousal. For states of low arousal, general activity, movement, and humor are recommended.

Instructions

Suggested Question



There's an idea called the 'window of tolerance' which helps us to understand why people have experiences like flashbacks, numbing or dissociation. Would you be willing to have a look at this handout with me?

- Can you relate to any of the experiences described here?
- When you're **in your window of tolerance**:
 - How do you feel?
 - What helps you to stay there?
- What kinds of experiences or triggers push you **above your window of tolerance**?
 - What do you feel (emotionally and in your body)?
 - What do you do to cope?
- What kinds of experiences or triggers push you **below your window of tolerance**?
 - What do you feel (emotionally and in your body)?
 - What do you do to cope?

References

Corrigan, F. M., Fisher, J. J., & Nutt, D. J. (2011). Autonomic dysregulation and the window of tolerance model of the effects of complex emotional trauma. *Journal of psychopharmacology*, 25(1), 17-25.

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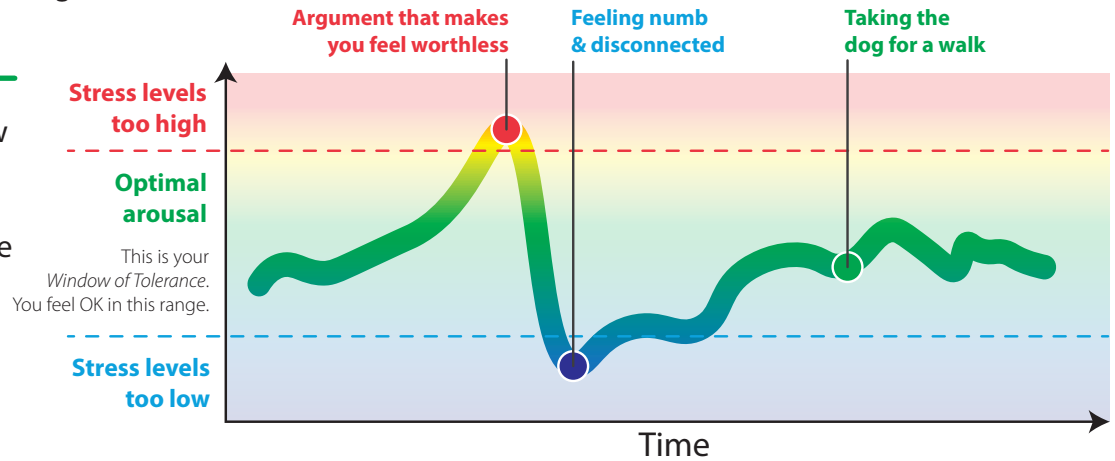
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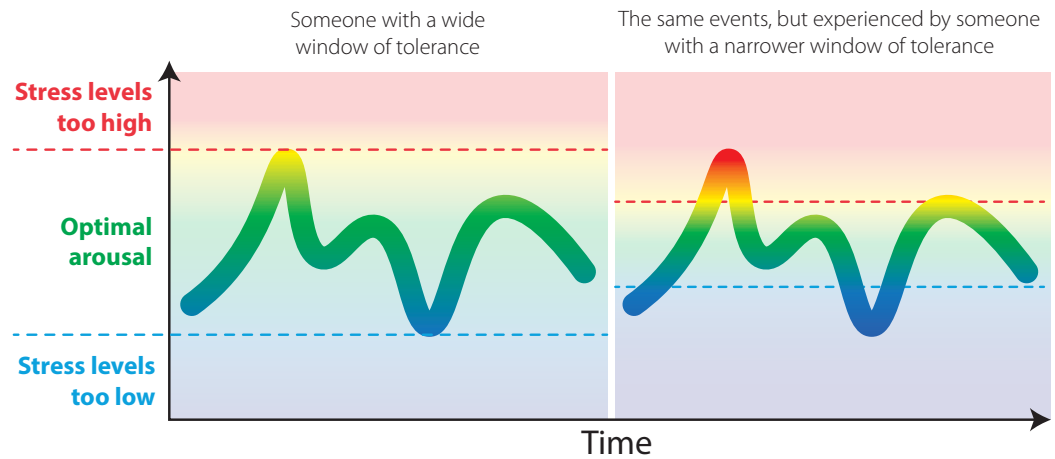
Window Of Tolerance

Do you ever find your emotions hard to cope with? For everyone there is a range of situations in which they can feel *comfortable enough*. This is your **window of tolerance**. Not everybody is the same though: an experience that is OK for somebody else might not feel OK for you, and things like stress and trauma can mean that you are more easily nudged outside your comfortable range.

No matter how wide your window of tolerance, stressful, triggering, or uncomfortable situations can take you outside your comfortable range.



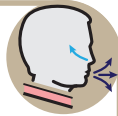
Some people's window of tolerance is narrower than others – often because they have experienced trauma in the past or are under other stresses in the present. When your window is narrow, you find things that other people can tolerate unbearable.



Widening your window of tolerance

The width of your window can fluctuate throughout the day – things like stress and tiredness can make it narrower. An important first step is to learn how to get back into your comfortable zone when you have been triggered. After that it can be useful to learn how to widen your window so that you can comfortably cope with more situations.

Grounding: use grounding techniques to bring your attention back to the present moment where you are safe. Focus on your senses, speak to yourself kindly.



Therapy: having 'safe' experiences of being at the edge (or beyond the edge) of your window of tolerance, learning new skills to manage states of high arousal, can all help to widen your window of tolerance.



Take care of your body: make sure you are not too hungry, thirsty, hot, cold or tired – all of these can temporarily narrow your window. Exercising, taking time to relax, and eating healthily can all widen your window.



Face your fears: challenging your beliefs and predictions by facing your fears helps you to learn that you can cope. Overcoming fears this way can widen your window of tolerance.



Connect with other people: we're programmed so that our window of tolerance is wider when we're with others who make us feel 'safe'. It can help to reach out and connect with people you feel close to.



Process trauma memories: trauma memories can get 'triggered' and push you outside your window of tolerance. If you are affected by them, you may need to 'process' them with the help of a therapist.



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