

PSA · ESF SERIES

Words Worth Defending

Regulation, allostasis, metabolism, resilience — what they actually mean, and what they collapse into inside the wrong model.

Each of these terms names something real and irreducible in the systems model. Each is also being absorbed, softened, and turned into a wellness slogan or productivity frame as pathology logic reaches for the vocabulary without adopting the framework underneath. The words aren't broken. The model trying to hold them is.

TERM 1

Regulation

The dynamic process of maintaining functional coherence across changing conditions.

WHAT IT ACTUALLY MEANS

A multi-scalar dynamic — operating across cellular, autonomic, behavioral, and social levels simultaneously. Both stabilizing and destabilizing dynamics are part of regulation; the system continuously modulates. Cost-bearing: the work of regulating accumulates as load when conditions don't fit the architecture.

WHAT IT COLLAPSES INTO

'Self-regulation' as a behavioral skill to teach. Emotional regulation as compliance with norms. Dysregulation framed as personal failure rather than system response. The word becomes a target for intervention — *make the person more regulated* — instead of a phenomenon to understand and support.

TERM 2

Allostasis

Stability through change. Sterling & Eyer, 1988. McEwen's 'load' extension.

WHAT IT ACTUALLY MEANS

The active process by which a system predicts, anticipates, and adjusts set points to meet expected demands — achieving stability *through* variability, not despite it. The architecture isn't homeostatic (hold one value steady); it's allostatic (continuously recalibrate). Allostatic load names the cumulative cost when prediction is repeatedly wrong, or when the architecture is running under sustained mismatch.

WHAT IT COLLAPSES INTO

'Allostatic load' reduced to generic 'stress.' The predictive-regulatory content gets stripped, leaving a vague gesture at chronic strain. *Manage your stress* replaces *understand why this architecture is operating under sustained mismatch*. The cost framework becomes a moralized health message rather than a diagnostic window into architecture-environment fit.

TERM 3

Metabolism

The cellular economy of energy production, allocation, recovery, and reserve.

WHAT IT ACTUALLY MEANS

Far more than calories in / calories out. Tightly coupled to regulatory state — sympathetic dominance reallocates resources; parasympathetic engagement is required for recovery; chronic mismatch produces measurable changes in mitochondrial efficiency. The metabolic substrate is what limits regulatory bandwidth: how much the architecture can carry, for how long, before recovery is required.

WHAT IT COLLAPSES INTO

Weight management. 'Boost your metabolism' as productivity language. Calories in / calories out reductionism. Metabolic syndrome reduced to lifestyle risk factors to fix. The cellular-energetic architecture compressed into the number on the scale, with recovery state — where regulatory cost actually shows up — disappearing from view.

TERM 4

Resilience

The capacity of a system to maintain function across perturbation, or recover it after.

WHAT IT ACTUALLY MEANS

A property of the *system in context* — depends on supports, reserves, environmental fit, and recovery state, not the individual alone. Includes both robustness (resistance to change) and flexibility (ability to reconfigure). Can be exhausted: resilience under sustained mismatch eventually becomes overload.

WHAT IT COLLAPSES INTO

Grit. Bouncing back. 'What doesn't kill you makes you stronger.' An individual character trait, often moralized. Used to blame people who can't bounce back ('not resilient enough'). Disconnected from supports, reserves, fit, and recovery — treated as something the person should generate from inside themselves.

BOTTOM LINE

The words aren't broken. They're being used inside a model that can't carry their meaning. Pathology logic doesn't have room for multi-scalar dynamics, predictive regulation, system-in-context resilience, or the cellular economy of recovery — so when it absorbs these words, it strips them to what its own framework can hold. The vocabulary survives. The meaning doesn't. Defending these terms isn't gatekeeping language; it's keeping the architectural content intact so the systems model has the tools it needs to do its work.

The words aren't the problem. The model trying to hold them is.

Companion to the Neurodiversity-Lite addendum, Single-Source or Regulatory?, and Stigma Keeps Shifting — the same pattern at four scales: vocabulary, clinical care, advocacy history, and the words doing the work in between.

Lori Hogenkamp · Director, Center for Adaptive Stress · ndstress.org · evostress.blog