

## About Psoma Yoga Therapy and the Polyvagal Theory

Here is more information for those of you who are interested in psoma yoga as a personal practice and/or as a therapy method. Stephen Porges has developed what he calls the Polyvagal Theory to give us a new understanding of how our nervous system is on automatic and determines the kinds of experiences we can have depending on which state we are in. This scientific explanation of how our nervous system affects how we feel, how we think, how we perceive, how we react, how we relate, and so much more, is completely compatible with the principles of psoma yoga and validates the way this approach offers a very unique approach to understanding and transforming our lives. It also confirms and validates the importance of embodied self-awareness and points to accessible ways of understanding ourselves and influencing our own embodied reactions to and experiences of life.

In psoma yoga therapy, as in Hakomi, we know that the key to being able to support someone on their journey of self-discovery and self awareness is our own state of “mind”, which is actually our embodied state or way of being. Hakomi calls the ideal state “loving presence” and it is foundational to how Hakomi works as a method of assisted self-discovery.

I think it would be useful for psoma yoga teachers and therapists to understand a little about what Porges means by the Polyvagal Theory. Deb Dana is a therapist who uses the Polyvagal Theory as a clinical therapist and as a way to teach therapists how they can be more effective. (See her book “Polyvagal Theory in Therapy”.)

In the simplest possible terms, as I understand it, the Polyvagal theory describes three basic states of our autonomic nervous system. You’ve probably learned about the two states called the sympathetic nervous system (fight or flight) and the parasympathetic (health, growth and restoration). Porges’ theory explains that the parasympathetic nervous system itself has two different states: one (the ventral vagal) is the state from which we feel safely able to relax and/or connect (socially engage) with another. The other parasympathetic state (dorsal vagal) is a more primitive state and is a state we naturally move into under threat to our survival, real or imagined. It is a state of immobilization which might look like freezing, collapsing, withdrawal or dissociation.

Like the fight or flight state, this dorsal state is one of protection rather than connection. Remember that these states are all on automatic. Our autonomic nervous systems are constantly scanning for information about our environment and whether we are safe or need to protect ourselves. This scanning in Polyvagal terms is called neuroception, a term coined by Porges to describe this natural subconscious way our nervous system decides what state to be in based on the presence or absence of danger or life threat “triggers”.

What we call “loving presence” is really about being in the ventral vagal state, or enough of it for us to be able to stay present (socially engaged) with others in a calm, curious,

caring, and compassionate way. It is a state from which we are aware of ourselves while attending to the other person, making whatever adjustments we need to make to stay or at least return to feeling safe, calm, interested, and present. This is a practice of autonomic nervous system self-regulation in relationship.

Polyvagal Theory talks about something called co-regulation - how we influence each other's embodied state of mind. In psoma yoga therapy, as in Hakomi, the practitioner's self regulation makes possible co-regulation, and this makes possible the client's own capacity for self-regulation.

This co-regulation happens in many places in life. The degree to which a new mother stays calm with her distressed infant, for example, affects the degree to which the infant can calm down. The degree to which anyone in a stressful interpersonal experience can self-regulate determines how much the situation escalates or de-escalates.

The yoga teacher's own state and demeanour is often enough to invite the participants in the class into a ventral vagal state of safety, mindfulness, and relaxation. So, in a yoga class or in the therapeutic relationship, what we call the "personhood" of the teacher or practitioner has a lot to do with their capacity for self-awareness and self-regulation and, as such, it creates the foundation of the relationship with students or clients.

What we call loving presence involves much more than simply self-regulation. The more I learn about what Porges and Dana refer to as our "ventral vagal stage", based on safety and connection, the more I recognize that it is exactly what we are calling "loving presence".

Another aspect of this ventral vagal state is the capacity for mindfulness, which is one of the key characteristics of psoma yoga. There is a natural vulnerability in anyone coming to a yoga class or to a yoga therapist for support. The invitation to be mindful, to slow down and turn attention to present moment experience - whatever it is - is an invitation to be vulnerable, to be open to uncertainty, to the possibility of a discovery of something previously hidden or outside of conscious awareness. To allow oneself to be vulnerable in this way requires enough safety and trust in the relationship and the conditions present to let down one's guard, to lower one's defences, to relax and enter into connection rather than protection.

The implication of this for psoma yoga therapy is that until the client feels safely engaged with the practitioner, doing experiments in mindfulness for self-discovery must wait. The first priority is what Polyvagal Theory calls co-regulation, what we might call the therapeutic relationship - based on the foundational ventral vagal state of the practitioner. This co-regulation may take several sessions, even when the practitioner is anchored in "loving presence", or ventral vagal, or it may happen almost instantly.

One thing we track for or pay attention to throughout a psoma yoga therapy journey is what seems to be the person's present moment somatic experience. We track for

nonverbal signs of their present embodied experience, partly to support our capacity to understand them and to support them to relate to us from a place of safety. Also, in psoma yoga therapy we want to pay attention to what kinds of habits the client has, how they seem to be habitually, and probably unconsciously, organizing their embodied experience to enact their sense of self and their model of the world or reality they think they're living in. These are what in Hakomi we call "indicators" - characteristic habits that seem to indicate how someone sees and embodies a sense of self and how to be safe in the world. It is how they automatically and unconsciously shape their experience - often in limiting or inaccurate ways - to fit with what they expect rather than responding to the present moment just as it is.

In psoma yoga therapy, these habits may include chronic tension patterns, posture, head position or movements, gestures, movement styles or qualities, even facial expressions. When we see something like this, we want to bring it to the person's attention using mostly nonverbal experiments done mindfully in order for the person to become more conscious of the habit and possibly to discover something relevant about it. The discoveries help to reveal not only some of the underpinning of the person's experiences in life but also, most importantly, they can point to what is needed - what would be a more nourishing alternative.

Here's an important point that Polyvagal Theory makes. There's no point inviting someone to self-study when the person is busy protecting themselves in a habitual way. Their embodied state is the first thing to attend to, to bring attention to, and to track for shifts.

Rather than trying to help someone to shift their embodied state by offering a somatic solution or correction, we want to pay attention to, and bring attention to, what is already happening. We want to help the person to learn more about it. It is important that this happens in a nonjudgmental way, not only to build the safe container we need for this approach to work, but also because any judgment is irrelevant since the nervous system is designed to be on automatic. We can't help it. It is how our nervous system is programmed for survival.

Our nervous system is designed to be able to detect signs or even hints of danger in order to protect us and to recognize signs of safety in order for us to be able to relax and "socially engage" with others safely. We don't get rid of our automatic reactions, which are often triggered by something outside of conscious awareness, nor do we get rid of habitual ways of organizing our embodied experience. However, by bringing awareness to our present state and by observing our reactions, we can learn to pause and study or interrupt them sooner to allow for the possibility of a healthier response. To repeat what Moshe Feldenkrais used to say, *we cannot do what we want until we know what we are already doing*. This approach trusts in the power of consciousness, embodied awareness, to be the precursor of positive change.

So, as psoma yoga therapy practitioners thinking in Polyvagal terms, we want to ask ourselves if the client is able to safely connect with us and with themselves or are they

in a protection mode. If the latter, are they in sympathetic (fight or flight) or in what Polyvagal Theory calls the “dorsal vagal state” (frozen, withdrawn, or dissociated)? Can we bring attention to this state without implying a judgment, since the nervous system and neuroception is on automatic? Can we use our own state of presence (ventral vagal) to offer some healthy “co-regulation” and see clear signs of the person becoming more and more able to connect, to relax, perhaps become more animated if they were withdrawn or become less agitated if they were in fight or flight?

In a psoma yoga therapy session, if we are paying attention, there is almost always a clear shift of the person’s embodied state - the state of their nervous system - from one of the protection states to more of what Porges calls the “ventral vagal state”. I notice it sometimes as a simple postural shift, perhaps more upright, perhaps the shoulders dropping, perhaps more openness in the chest or a change of head position. Often it’s evident with a change in the breath, perhaps a sigh. The person may look softer, or more settled, as if they feel safer or more confident. They may look stronger, as if more resourced or empowered.

When I see what seems to be a positive spontaneous shift, I name it and invite the person to study it, to report what they notice, to stay in it for a while. I might even invite a movement back and forth between this new embodied state once they’ve studied both it and the old pattern. I like to find something simple as a way to access each pattern, perhaps a hand gesture, a tension pattern somewhere, or even a different head position.

These embodied patterns, old and new, not only involve the whole body but also express how the person feels, what the emotional tone is and how intense it feels, the story the person is telling themselves, the meaning and relative importance they make of a situation or experience, in fact, their self-image and the reality they seem to be living in. Bringing these patterns or states into conscious awareness helps the person move from feeling like a victim to feeling resourced in a new way, not because of a solution being offered from outside but because they’ve discovered how their own embodied state determines the way they are experiencing life. They find tangible ways of recognizing what state they are in and how to invite a shift that allows for a more resourced way of meeting others and life. In Porges’ words, survivors of trauma, for example, “shift to feeling heroic and not victimized.”

In psoma yoga therapy, we begin by training ourselves to see everyone as sources of inspiration. We know from research that the key ingredient predicting success in any kind of therapy has to do with “client factors”... what the client already has going for them, especially the client’s capacity for self-study and to have a healthy relationship with the therapist. We begin by anchoring in a state of loving and reflective presence and then supporting clients to develop more capacity for mindful self-study. In Polyvagal terms, this means supporting clients to be able to spend more and more time in a ventral vagal state.

When Deb Dana teaches therapists and clients about Polyvagal Theory, she tells them that they are learning about the science of safety - about helping people to feel safe enough “to fall in love with life”. When we practise psoma yoga for ourselves or as a therapy for others, isn't this exactly what we are doing? We are moving through relational mindfulness and experimental embodied self-study to discovering how unconscious habits may have been limiting or causing pain and finding new ways to experience life and relationships as nourishing and joyful. Anchored in our own ventral vagal state, we are inviting others to experience the grace of living life from this state of safety and connectedness.

One aspect of safety that Porges emphasizes is that external conditions are secondary to the nervous system's autonomic reactions. What triggers one person might have little effect on another. Trying to create safety by managing external conditions is limited. I love hearing from people in a psoma yoga class or workshop that they were surprised how quickly they felt safe. We do this partly by creating as ideal a setting as possible for people to feel welcome and comfortable but mainly by inviting them into practices that promote the embodied state of mind of curiosity vs judgement, connection vs protection, acceptance vs correction or trying to make something happen. In this kind of environment, each person's degree of sense of safety will be more dependent on their own nervous system habits, on what triggers them, and on their degree of self-awareness. People will respond to this invitation in different ways and at their own pace. There's no judgment about this. Everyone's nervous system is on automatic and until what's happening comes into conscious awareness where it can be studied with simple curiosity and safely shared with others, the status quo naturally persists.

Simply turning attention to our embodied experience as it is and engaging with it from a place of curiosity, with an experimental attitude and with confidence in the power of consciousness to invite change, predictably brings about a transformation. With this practice we begin to develop more *responsiveness* rather than living from a place of knee jerk reactivity. We begin to discover the freedom of choice. We begin to remember our internal resources and resourcefulness. We begin to come home to who we really are - loveable and resourceful relational beings. We rediscover how to meet and embrace life as it is - rich, abundant, nourishing, and full.

For more understanding of how Porges' Polyvagal Theory helps us to understand the power of any somatic therapy or practice, I recommend Deb Dana's books, including a wonderful audible book called *Befriending Your Nervous System*.

## Bibliography

The Pocket Guide to the Polyvagal Theory: the Transformative Power of Feeling Safe, by Stephen Porges, Norton and Co, New York.

Polyvagal Theory in Therapy: Engaging the Rhythm of Regulation, by Deb Dana, Norton and Co. New York.