



## Conscious Life presents

### Why Deeper Healing Is Required to Resolve Anxiety

Guest - Irene Lyon

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**[00:00:00] Alex Howard**

Welcome everyone to this interview, where I am super-excited to be talking with my good friend, Irene Lyon. We're going to be talking about how anxiety is ultimately survival stress stored in our body.

We're then going to talk about what it takes to really heal that and how this industry of what Irene calls "nervous system influencers"... So people talking about tools and strategies to bring regulation, have a place.

But what does real deep healing of the nervous system look like and what does it feel like? And what are the pieces that need to happen to really support that? Put in a different way, to have a lasting shift in anxiety, what really needs to happen?

To give you a little bit of Irene's background... Irene Lyon, MSc and nervous system expert, teaches people around the world how to work with the nervous system to transform trauma, heal body and mind, and live full creative lives.

To date, her online programs have reached over nine and a half thousand people in over 90 countries. Irene has a master's degree in Biomedical Health and Science, and also has a knack for making complex information easy for all to understand and apply to our lives.

She has extensively studied and practices the work of Dr Feldenkrais, Peter Levine, Kathy Kain, and Irene spends her free time eating delicious food, hiking in the mountains, or walking along the Pacific Ocean in her hometown of Vancouver, British Columbia. Irene, welcome, and thank you for joining me.

**Irene Lyon**

Thanks, Alex. Always good to be here.

**Alex Howard**

Why don't we start off by just contextualizing a little bit of what we're talking about. From your perspective, when we're talking about anxiety and when we're talking about particularly how we

experience anxiety in our body and in our nervous system, what do we mean? What are some of the definitions that can help open this up for us?

**[00:02:26] Irene Lyon**

From my perspective, so my background... I always like to honor my teachers, the work of Peter Levine, Kathy Kain, Steve Terrell, even Moshé Feldenkrais, all those big giants. I've learned through them, and this is my way, that anxiety... And I like to say this in air quotes, is "stored survival stress", namely stored sympathetic fight/flight survival stress of the autonomic nervous system.

Why is it there? There's many, many reasons. It could be from one old trauma that is bound up somewhere in the system because it was too much to handle. Or, and this is typically what I find in my clients and students, and I have no doubt you have seen this with your people as well, if there is a core level dysregulation of the nervous system, of this autonomic nervous system, that for whatever reason... And we can go into some of the reasons because examples are always good.

When we were young, when we came into the world, and even our in utero experience, and as we know, I'm sure you've had talks with people... Our transgenerational experiences, we come into the world, and for whatever reason, we don't get good self-regulation at our core at this autonomic nervous system level.

We get popped out into the world a little shaky, a little "anxious", quote unquote. And what that often represents as is this unsettled quality in the somatic physiology, this worrying. We think of anxiety as very mental, and yes, we can get into that, but we also know that mental rumination can create physiological distress. It goes both ways.

I would say whenever someone says anxiety, it's not that I correct people, but I say, actually, think of this as stored survival stress. It's not a disease. It's not a life sentence, it's a physiological state that we can definitely get out of and come into balance with such that we're not having it all the time. Does that answer that question?

**Alex Howard**

That's great. And Irene, as you're talking... One of the things also I just want to just point out, which I think is interesting as well, is that often people's experience of anxiety is typically anticipatory anxiety about the future. We're worrying about things that may or may not happen in future. But I think what's important that you're pointing to here is that often the driver of that anxiety is not those things, even though it feels like about that. It's the history.

**Irene Lyon**

The past. Yeah, I've actually heard that saying. I was thinking, trying to remember that saying before we jumped on. I think it was maybe Tim Ferriss was the first person. I heard him say this, that depression is worrying about the past and anxiety is worrying about the future. For me, personally, with full respect to him, it's too simple when you get into nervous system physiology and all those things.

However, if we do have survival stress that's stored in our system that is unresolved and we don't know what it is, yeah, that's going to make us really worry not only about the future, but about the current moment, and we're going to ruminate on all the stuff that we did before that we didn't like. It's this time-space continuum. It's quite quantum. It's everywhere.

**[00:06:02]**

Anybody that lives with what I would call stored survival stress, this nervous system dysregulation, they will say, "This is a holographic experience. I feel this in my entire being." This is one of the reasons why a lot of the practices, a lot of therapeutic modalities that have tried to help people get out of their ruminations, and we just know this now, it's not enough to be cognitively based.

We have to get into the sensations, specifically into the body responses, into the physiology, and into our safety in the environment, into how we connect with ourselves, others. It's like this long list. That's why I say it's very holographic. It isn't one thing. But of course, as humans, because of how most of us are when we start this work, we do have to start with one thing and then a second thing. Then eventually, it does build a more holistic self, but it takes time.

**Alex Howard**

Yes. Of course, one of the key ways that one experiences anxiety, and in the frame what you're talking about is in the nervous system.

**Irene Lyon**

Yes.

**Alex Howard**

You used a phrase that I thought was really interesting before we started recording. You talked about nervous system influencers. It made me chuckle because, of course, you and I, in our own different ways... We've been talking about this for many, many, many, many, many years. It's tickled me over the years.

A bunch of things that have been life passions have become trendy. It doesn't mean they'll be trendy forever, but they become trendy for a chapter. I remember 25 years ago being the only guy and the only person below 50 in a yoga class. Then it got to the point 10 years ago where I couldn't go to them because they were so trendy, like not the right clothes to wear. The whole place just felt like a place I didn't want to be in.

We're in a chapter at the moment where there are a lot of folks talking about the nervous system. Some of that stuff is good, some of that stuff helps, to bring awareness.

But maybe you want to... Firstly, actually, just because I realized I want to bring everyone on this journey with us. Maybe just speak a bit more explicitly to what we mean when we talk about the nervous system, why it is in a way this place that a lot of this is being held and is manifesting. But let's then talk about some of the challenges and limitations of some of those surface-level approaches before we then take a deeper dive.

**Irene Lyon**

Sure. When we say that the anxiety is in the nervous system, and there's lots of words there to just really state it. It's the fight/flight, the sympathetic nervous system response. The fight/flight. I think everyone knows that.

It's like, "Oh, something's coming at me. I got to fight, got to protect." Or, "Oh, my goodness, I can't fight this. I can't engage. I'm going to flee." Or, as we know, if we can't do those, we go into this spectrum of shutdown, which starts with freeze, shutdown, collapse.

**[00:09:07]**

When we talk about the nervous system... And this is where there's some layers here where I think that this nervous system influencer world. Again, full respect, I know why they're doing it. It's because they know that this is important, and so they're trying to stay relevant as health influencers.

But it would be like someone saying, "Wow, we just found out that there's a new way of doing a type of internal surgery for gastric ulcers. Let me start talking about that, even though I'm just a nutritionist." It wouldn't make any sense. It's a strange analogy.

**Alex Howard**

I track you. I got you.

**Irene Lyon**

Did you? Okay, good.

**Alex Howard**

I think the real point you're making here is that there are people that are passionate about the idea, but that doesn't mean they have the depth of experience to really speak about the idea in an important way.

**Irene Lyon**

100%. When we think of the nervous system and this stored survival stress, we have to also remember... So everyone listening, think about this or feel this, your nervous system isn't just one nerve. The autonomic nervous system is part of the peripheral nervous system. It's not the brain and the spinal cord. It's everything that comes out of the brain and the spinal cord.

Everyone's talking about the vagus nerve. That's a cranial nerve. It comes out of the brain. All the nerves that make our arms move and our digestion work and our reproductive organs work and the hormone release, it's coming out of the spinal cord, these nerves. When we have this high level of stuck, fight/flight, it isn't just impacting the nerves, it's impacting all the things that those nerves touch.

When we talk about anxiety, it can show up in physiological ways. I want to make that connection because people might say, "Oh, I don't have any anxiety. I'm calm as a cucumber, cool as a cucumber. But I have IBS, I have chronic pain, I have fibromyalgia, I've got an autoimmune thing. I'm constantly in relationship troubles. I can't sleep." The list is long, all these symptomologies that come from dysregulation.

When we say nervousness or anxiety, it isn't just mental, it's physiological. I want to put that out there for the reason that in order to improve our regulation at the nervous system level, it isn't just about getting out of these sympathetic responses. A lot of the stuff that I see in the nervous system influencer world is that.

You got a high stress response? Let's contain. Let's tap. And there's nothing wrong with these things. Let's do a vu. Peter was very popular with that. Let's orient. Again, I teach these things, but it isn't enough to just do that. You have to then bounce it back into your internal perception and see if there's a change, and then notice how that changes over and over again.

**[00:12:16]**

But then it's the time, the consistency, the waiting, the trial and error. Oh, my digestion just got worse. Oh, my immune system just felt a bit stronger today. Oh, tonight I actually slept a bit better. Oh, how come tomorrow or yesterday, I didn't sleep as well? What was going on? So there's less of a cause and effect, I think because of the medical system... And I'm all for parts of it because it saved me in many ways with orthopedic stuff.

Great for emergency medicine, real trauma, like car accident medicine. But because we've been trained to see that as health, which I think is starting to shift... And I think you're seeing that, too. We think, "Ah, nervous system, I have a problem. I feel this trouble in my body. I need to fix it."

So what I'm seeing with the nervous system influencer world... And people will see this. If you go to my social media accounts, you will not see me showing anyone a quick tip, one-minute exercise.

I can't ethically do that. I took my own oath that I'm not going to give someone something without context because it could throw them down a path that is not good. I won't have any of that stuff. What I'll have is a lot of education, a lot of talking, a lot... Too much talking.

Sometimes people are like, "Get to the point, Irene. I want the solution." I'm like, "The solution is learning and re-engaging with the dysregulation you have and then knowing, I want to learn this new language of regulation. It's going to take time. And by the way, here's what I teach, here's the journey."

So this ability to move out of anxiety, it's not like, oh, there's a stain on the shirt. Let's get rid of it with some bleach. If it was that easy, then we wouldn't be here. And as we know, Alex, the pharmaceutical world has been instrumental at keeping people in their dysregulation by calming certain things or shifting things.

Again, I have many students who have had to use pharmaceutical meds to find balance, but then they found a way to come off of them with regulation. But it isn't about just the chemicals. It isn't just about the brain signaling. It's about the entire physiology and it finally feels safe. Again, and also in tune with self. Because, again, so much fight/flight growing up, we get into this freeze response, this shutdown collapse. We don't even know that we still have fight/flight in our body. We think it's gone.

**Alex Howard**

Yeah.

**Irene Lyon**

I was that person. I had no idea that I had so much stored survival stress until just about six years ago. That was a wake-up call to me to go, "Wow! Our human system, we are masters at covering shit up." Our physiology knows how to keep us safe because we've created this world we have to keep going.

But under a lot of our "calm and cool as a cucumber", and "I can handle anything" energy... And I think this is like exploding, generally speaking. People can't keep this stuff under the rug anymore. Now everyone... Not everyone. I'm generalizing, many people are feeling this anxiety around their bodies. I hope that answers your question about that.

**[00:15:49] Alex Howard**

Totally. I think another piece to bring into this, that in a way, part of what I'm hearing you say is that the symptom... Like anxiety being an example of this, the symptoms that one experiences are often symptoms of deeper pieces of a jigsaw that also need addressing. And so do tapping, regulation strategies, tools, and techniques, of which there's many.

If we're just doing those, really what you're saying is it's not that different to taking a pharmaceutical to regulate the symptom. What's actually driving this in the first place? So I'd love you to speak a little bit to what... On a deeper level, what's often driving the dysregulation in the first place? What are some of those pieces?

**Irene Lyon**

There's two bucket examples. The easy one is you had an intense accident, war, life event. We would call this a shock trauma. In your childhood, old enough that you remember cognitively something occurring. And that could be such a massive boulder of trauma, of stress physiology that we don't even realize we're still holding onto it somewhere in our nervous system, in our gut, in our organs. That kind of thing.

And so that can create this quote unquote "anxiety", this fear of driving, this fear of getting on a plane. The classic one that's outdated but is still accurate is the war veteran who comes back from Vietnam. They're sitting having their apple pie at the American Diner. The big muscle car backfires and they jump because they think they're back on the battlefield with explosions. That is that stored survival stress being triggered.

Then the other bucket is the early stuff. We would classify this as early trauma, developmental trauma. Something that made it such that when we came into the world, and also in utero, there was some form of constant stressor, constant adversity... And I can list a bunch of these things if we want to, that didn't allow us to build proper self-regulation at the... I'm going to say some big words, at the parasympathetic nervous system level, specifically the ventral branch of the vagus nerve that governs social engagement and the regulation of our...

It's called the SA node, the sinoatrial node of the heart. It's the pacemaker. This part of our ventral vagus nerve goes to our heart to calm down, to slow down in a refined, smooth human, mammalian way. If we don't get that good co-regulation from a primary caregiver... It doesn't have to be a mother, it could be a nanny, an older sibling, someone that is there and safe and connected and attuned.

If we don't get that, we don't get that good building. It's actually a myelination of that vagus nerve, that portion of that vagus nerve. We don't get that, we just don't get that goodness. What happens is our system gets co-opted into being more dominant in sympathetic fight/flight, and then dominant in the other portion of the vagus nerve, another portion of the parasympathetic that still slows the system down, but it slows it down abruptly. That's where the freeze response comes in.

So if we don't get that good start, we come out with a nervous system that still kind of works because let's face it, you and I survived. I know you've got your own history of chronic stuff. I have my history in utero trauma, and holy cow, we're still here. We're also here because we've done a lot of work on ourselves, and we're no longer chronically ill. At least I don't think... We're doing pretty good. We've moved through some of these things.

**[00:20:07] Alex Howard**

It seems okay today, but tomorrow's another day.

**Irene Lyon**

It's like we've moved through a lot. It's not over. We're still working on that deep, deep, deep stuff, but we're out of it because we've moved through and worked on all the different somatic levels, emotional levels, sensory levels, cognitive levels, relational levels. But it is that early, early upbringing.

We know this through the research that Felitti started with the ACE study, the Adverse Childhood Experiences study. I don't want to say factual because dare say that's fact. But we have enough evidence through all of the other research and other people like Maté and Bessel.

We know that when we don't get that good, connected, attuned, secure, safe upbringing, our nervous system is a mess. So I've lost my train of thought, but I wanted to start with just that because when we have that, Alex, everything else later in life is easier. I'll use one example. I remember watching a very popular blogger, vlogger, Casey Neistat. Maybe your kids know him.

**Alex Howard**

I know who Casey Neistat is.

**Irene Lyon**

Okay, good. I love his... I don't really watch him anymore, but he's got some fun stuff. I remember he was in the Philippines after, I think, one of the devastations of a hurricane. He went there to help. I think it was the Philippines, and he's like, "I can't believe how resilient these people are in these villages."

They just had everything washed away, literally, and they're happy. They know that there's been loss, but they have so much resiliency. I see that and I hear that, and I go, well, it's because they had good upbringings. They were with their mother. They were probably breastfed. They weren't pushed into a gazillion sport teams.

They weren't given to daycare to be looked after. They were looked after by grandma or their older sibling. I come from the Philippines. That's where my mother is from. I see that regulation when I go back to the rural, Philippine world. Filipino world. It's like, yeah, so if you have that start, if you have good regulation at the beginning, the bigger things later in life are less intense. But when it starts that way, we have to do some catch-up.

**Alex Howard**

And of course, if we then contextualize that and what you're speaking to here in terms of the nervous system surface level, it's like the practices that one learns to calm the surface of the system, I guess sometimes are the same tools that one uses to work with the deeper stuff. Other times it isn't.

But it's like, the way I was thinking about it is when one is being very structured, focused, potentially rigid in terms of all the stuff that they're doing, on some level, there's also at least an illusion of control that happens there.

**[00:23:14]**

But my experience of doing the deeper work is anything but a sense of control. That's what makes us often work harder because the thing that may have helped us until that point is... We're committed, we're dedicated, we're focused, but there's a letting go, a surrender that has to happen. I'd love you to speak to that.

**Irene Lyon**

I first learned about this through my SE mentor, Steve Hoskinson, who did my primary basic training. I'll paint you an image because this is how he showed it on the blackboard or whatever he was using. He had three columns, and the first column was out of control. So he would say that that's chaos, dysregulation.

The middle is staying in control, so that's containing, keeping things under check, which I think a lot of these influencer practices are doing. It is keeping people contained. It's keeping people in control.

But then the third column he had was letting go of control. That is really what we want from a truly regulated system: stress comes in and it ruffles us a little bit, but it doesn't put us into a puddle or it doesn't build more armor from a Reichian point of view, more body armoring.

Oh, gosh. Wow, that was big. I'm going to feel it. I'm not going to tap away the feelings or contain the feelings or soothe myself or make a sound to tone my vagus nerve or take that puff of cannabis or whatever it might be. Nothing wrong with these things.

But rather than do those things, I'm going to work on feeling, sensing the stress physiology in my body. I'm going to attune to it, I'm going to acknowledge it, and then I'm going to ride this wave with myself or with the environment or with another person. Now, this is akin to what happens when a baby is in distress. You've had babies, you know it. Well, you haven't personally, but you raised them.

**Alex Howard**

I was going to say, don't give me too much credit here.

**Irene Lyon**

Let's give your wife credit. She had the babies, you supported her, and you got her there. This baby is in distress. People think that they're feeling distressed. It's not a feeling. It's physiological distress. I'm going to just pause on that because that's so important. They're hungry, they might have gas, the temperature is off, they feel fear, they're tired, something isn't right in the environment. It's usually quite simple.

You have to discern as the parent, as the caregiver, what is that sign of distress? That's the sound of this. Oh, they're red in the face. They're too hot. I need to take some of the clothes off to cool them down. Then what happens is you are with them. You hold them, you connect with them, you feed them. They feel the meeting, the secure attachment, the attunement, and then they come out of the physiological distress into more regulation with co-regulation.

Fast forward to the adult that never got that, it's a completely foreign language. To even consider being with this distress. I have to get rid of it right away. This is why we know addiction is definitely



connected to early childhood trauma because we're looking to soothe, we're looking to escape from that distress.

**[00:26:59]**

Back to those three columns, a lot of the practices and management and coping tips, strategies are some of the stuff that I would teach my students, but the context is different. There's more layers of, yep, let's build capacity by letting you know you can hold your arms.

You can exhale slowly. You can gently orient. You can move your body. You can shake your body. You can pick up a phone and call a friend. You can have a warm cup of tea and have a resource. A blanket that's cozy, a picture that lights you up, music that soothes you or ramps you up. All that is great.

But at the end of the day, this ability to find deep regulation means we use those practices in an attempt to not need them, basically. To quote another mentor, Kathy Kain, she'll say, "Regulation is... As an adult, it is just waking up in the morning and going about your day."

If you choose to sit and have some mindfulness, wonderful. But if you don't have that mindfulness practice, you're still okay. You don't need to have that hit of cold plunge, which is getting really, really popular. It's just another form of stimulation, essentially, and I'm all for that from a therapeutic perspective.

But again, it's state-shifting us so that we feel something different because what we're feeling is either confusing, we're numbed out, or it's too much. And so humans tend to constantly, we're constantly trying to come back to this baseline, what we might call a window of tolerance. But a real window of tolerance, it's not about trying to get there. It just happens. That's when we have real regulation. It just happens.

**Alex Howard**

You know what came to mind as you were talking, Irene, is that there's... One of the ways that I talk about it is that people try to think their way to a feeling of safety. If I think about it enough, then I'm going to feel safe.

The thing that just came to my mind is it's like people try to regulate their way to a feeling... I do all of these things so I can feel that deep sense that I really am safe and okay. But it's like that isn't a state of doing. It's a state of being that comes from a place of surrender.

**Irene Lyon**

Have you ever worked with people... And this isn't a hit against these people because this is just where we are, but you ask them, "What do you notice in your body? Or where do you feel that in your body? Or what's going on in their body?" And their eyes literally go up.

**Alex Howard**

Oh, I was one of those people.

**Irene Lyon**

Okay. Guilty.

**[00:29:48] Alex Howard**

I joke about my... Therapists would ask me how I feel, and I would begin the answer with, "I think." That was the hiding.

**Irene Lyon**

Again, there's no shame in that. It just shows how disconnected we are. For me, I hear it. It's like a drop down. Like a "Wuuf." It's like you just land inside, and it's like you start going through. You're looking in the cupboard, you're looking through what you want to pick for dinner. What do I want? Or what's my snack tonight? Or whatever.

There's something about this noticing of internal that has no cognition, no thought. In a good regulated world, in a regulated body, it is instantaneous, but it's also happening when you're engaging. This is the part that takes so much practice because we've siloed our awareness. We've siloed our meditation. This happens on this day. This only happens in the morning. I only exercise at the gym. I'm not going to take those stairs.

Why would I do that? We've really compartmentalized these things. But again, I always go back to the baby. A good healthy baby is feeling everything in their system all at once because their cognition isn't yet on board. It really doesn't come on board until much later. It's building. It's growing. It's hearing things. It's hearing words and sounds and seeing things, but it's just taking it all in.

That is big part of our apprenticeship as adults. When we know we've got this anxiety on board, we know we have dysregulation, the quick fixes are very tempting, but inevitably... I'll see this in my students, and I'm sure you see this in your students and clients. They're like, "I've been doing this for years and years. Why am I still triggered by this XYZ?"

It's like, okay, if you're getting triggered, then that shows... It doesn't mean you don't get stressed about something. But I use the word "triggered" very intentionally. That throws us out. They're like, "Oh, I'm so dysregulated."

I would say, "Well, actually, it's possible you weren't regulated. You were just surfing through a false window of tolerance. This is showing up because your system is not getting more dysregulated. It's just dysregulated." There you go. That's another, I think, it's like some humble pie. You have to swallow a little bit of that. It's like, "Oh... uh oh.. Really?" It's like, "Yeah."

**Alex Howard**

Yeah, I really like this piece that you're pointing to as well... It's almost how I'm thinking about it is the number of conditions that have to be true for you then to be regulated. I talk about it being like a controller pattern that I need to be in control of all of these things in my environment, in my internal landscape. If all of that's that way, then I can feel safe, as opposed to safety being the foundation from which everything then is experienced.

**Irene Lyon**

It's internal. Again, I'll bring a question that one of our teachers, I think it was again, Kathy Kain said this. It was like a little exercise we did. The question was, "Can you remember the last time you felt safe?" She said, "It's a dead giveaway question because if someone has to really think about that, then they're not safe."

**[00:33:31]**

Because safety is something that is inherently in your body, in your cells, from that secure attachment, that attunement, that co-regulation that created real self-regulation. That comes back to my example of the folks in the Philippines who had just had everything devastated, and Casey couldn't figure out why they were still so happy. It's like, well, they're regulated. They're in mourning of their village and their things, but they know that they're going to be fine because they're internally regulated and safe.

So many of us grew up in environments, whether it was because of abuse or constant medical trauma, which is more common than we realize, the school system that we are often terrified at as little ones, or if we had to be put away to daycare and we're with foreign people all day long, we don't feel safe.

It becomes this, okay, I'm going to look for safety in an action. I'm going to look for safety in my habit, in my behavior. This is where OCD funnels in, too. It isn't to me, and I think we can all agree with this now, it's not a psychiatric disease. It is an attempt to control and have something that we can control.

Same with eating disorders, same with addiction to exercise, same with all these things. People will often ask or say, "Oh, my gosh, this is me. I have no idea what it's like to feel safe as a human."

And I just go, "Yeah, you and lots of other people on this planet, and it's okay. It's okay. And we need to... If you want to, we will work with this. How can we work with this?" And then we go through that process.

### **Alex Howard**

I mean, someone that's watching this that identifies themselves as someone who's doing a lot of what we're speaking about, but they're working hard to try to get to that place of safety. They're being very diligent. There's not a lack in this case of this person being motivated. There's a lot of compliance that's going on. What helps this shift? This shift from doing, controlling to surrendering and allowing. What helps someone make that shift?

### **Irene Lyon**

Everyone's a bit different, so I can't, again, give you one thing. But often what we'll say first is don't change the things that keep you sensing that you have safety. Don't change those things yet. If you need your routine in the morning, then keep doing that routine. If you know that you need to check the doors at night three times to make sure they're locked, do that. These behaviors are there and they've served us, so keep those going.

But then on the other hand, one of my simplest things is to start to listen to your biology, and not in a fancy way, actually. It's a very basic, crude, rudimentary way, which is, when are you thirsty? Drink some water. Are you even recognizing that you're thirsty? Are you hungry? Eat a little food, preferably good, clean, whole food.

Are you not hungry and you're eating? What's that all about? We know this is a very common thing because eating soothes us. It activates that portion that I mentioned of the vagus nerve, the chewing, the swallowing. Temperature.

**[00:37:18]**

Again, these are the things that babies cry about. I'm hungry. I have to go to the... I just went to the bathroom. They don't say, "I got to go to the bathroom." They just do it, usually in their diapers.

How were you touched when you were an infant? When you had a poopy diaper, did your caregivers... And you probably aren't going to know the answer to this question, but did they treat you with venom? Were they like, "Oh, you're disgusting and stinky. Let's change this."

Or did they just scoop you up and say, "Let's get you feeling a little better. Yeah, you're a little wet. Yeah, you're a little uncomfortable. Let's clean you up", with gentleness. But how many of us were held with vicious force and anxious hands and stress from mom or the caregiver?

When you are taking care of your bodily functions, notice if you are holding yourself, touching yourself with force, with almost a dissociation. Are you shameful? Do you feel shame when you pass gas, when you burp? We've been taught... You're British, Alex, so you know this. Don't... Everything is, "Excuse me." My best friend is British. The amount of times that girl says, "Sorry." Why are you sorry?

### **Alex Howard**

The joke is that someone bumps into us and we apologize. That's a very British thing. Someone knocks us in the street, "Oh, I'm so sorry for existing." They just walked into me.

### **Irene Lyon**

Yeah, sorry, sorry. Or you asked sorry, but can I... And again, it's so cultural and it's deep, but it's like, how can you just own your biological processes? Because that's what taught you regulation, self-regulation as an infant, or it didn't. I don't think I know when we have not been treated and handled well as infants, we start to shut down to our bodily responses.

Then it goes into childhood. You're at school, you're not allowed to go to the toilet because only one person is allowed to go, or you're hungry. You say, "Mom, I'm hungry", and she says, "No, you're not. Wait for dinner." All these sorts of things. It stifles our capacity to listen.

The only way to move these old survival energies out, these chunks, these boulders of old traumatic stress and wounds and emotional pain out, is to start listening to this body of ours because that is where it all comes from. Again, the simplest way is to start by listening to these processes and then honoring them.

What many will find is how often they feel an impulse of need, biological need, and they'll instantly repress it. Or they'll be like, "I'll wait. Another email. Yeah, I got to go to the bathroom, but two more... Oh, another thing. I'm going to cut one more piece of carrot, even though I really have to go to the bathroom because I got to get this soup for dinner."

I find myself in this, too. It's like, pause. Unless it's a real emergency, right? I mean, then, of course, that's a whole other situation. But I have found Alex, when my students focus on that as a first point, they go, "Wow."

**[00:40:38]**

Then what happens is they start to feel more. Why do they start to feel more? Because the autonomic nervous system physiology is less gripped. It's less in distress, and it's being listened to. Then it's almost like the armoring that loosens up a little bit.

Then that allows us to see the world a little bit more. Now, for some people, noticing inside is too scary. This is where it's not one size fits all. It might be like, okay, if it's a bit too much to notice your biological processes, that is okay. What would it be like to just sense the world around, to just see and orient?

This is where that orientation process comes in. Can you see something in your environment that is less bad? I often won't say, "Find something in your room that feels really safe." The problem with that is if someone grew up in an environment that was absolutely unsafe, nothing is safe. You have to be very careful with the words.

What is something in your environment that feels a little more safe or a little less unsafe? The wording can be very interesting because, of course, we have cognition as adults, so we also have to be very careful with that. Or find somewhere safe in your body. What? What does that mean?

Can you sense something in your body that has a temperature? Or even just, this is where touch comes in. A lot of people have done these movements and exercises, but they've never really sunk into them. It's just this rote, "Okay, I'm just going to do this." But there's no connection to it. Does that make sense?

### **Alex Howard**

Totally. It's like what I'm hearing you say is that there's an active process that can be relatively straightforward of actively reconnecting the mind and the body, seeing those signals as opportunities to actually... Rather than, again, trying to think one's way back into the body to actually build that connection.

### **Irene Lyon**

Exactly. I'll say this in a different way. My sense from working with many people is that many people will say that they meditate. Again, nothing wrong with meditation. It is a more advanced practice. Working with our consciousness is of different types. But I have seen with a lot of people, their meditation is them trying to not feel the bad stuff.

There's this thought that I have to just be in this bliss, in this Zen, in this... But we know the deep, deep, say, practices of vipassana, it's about feeling the yucky, intense stuff. But if we don't have the capacity to even taste a little bit of that yuck and a little bit of that disgust, we're going to pop out into more dysregulation or dissociation.

So this process can be darn slow, but it's the same as when we raise an infant. It is darn slow. You have to do the same things over and over again for years. The good news, though, is when you do things slowly for years as an infant or as an adult, the foundation that gets laid is that much stronger.

**[00:44:05] Alex Howard**

I think that's the important distinction here, right? I think just to summarize as we come towards the end, it feels like a lot of people are doing a lot of really well-intentioned hard work, but that same effort applied in a different way is actually really addressing the core of the issue.

**Irene Lyon**

100%.

**Alex Howard**

So, Irene, people that would love to find out more about you and your work, tell us the best place to go, but also walk us through some of what people can find.

**Irene Lyon**

Sure. Just my name, [irenelyon.com](http://irenelyon.com), no S. There you will find a plethora of information.

**Alex Howard**

You will.

**Irene Lyon**

Maybe a bit too much, so I apologize in advance. No. Obviously, I have courses. I have two online courses. One is a starter course, the 21-day Nervous System Tune-up. The more robust curriculum is Smart Body, Smart Mind, dubbed SBSM. That one is really my earliest and original program because it brings... Not everything, but as much as I can put into 12 weeks from my learnings from Peter Levine, Kathy Kain, Steven Terrell. They're really focused on this early regulation part.

I think the glue, though, that brings this together, and what people have said makes these courses unique, is the Feldenkraisian component, bringing in the deep listening to the body movement, the body behavior, and how to really pace and pause, are re... Really, it's a re-initiation into being in our body.

It's so important because for me to make this distinction, if we've never been safe in our body or we never had that regulation from the beginning, it can be terrifying to slow down. I think that is the part that is so tricky for some is they want to move through at a survival-paced level because that's their MO.

They know how to be in survival physiology. That's what anxiety is. So part of the journey is slowing down, but slowing down at a pace that works for you because we also don't want you to feel so much that the system fractures, which also occurs in well-intentioned healing circles and such... If there's too much, too soon, I'm out.

So the courses are very much paced. It's not like you have to get through it in those periods of time. We had one woman the other day who it's her fifth round on our 12-week curriculum, and she finally got through all 10 modules. Took her five times, and I was like, "Yes!"

There's those. Then I have a YouTube channel with hundreds and I think 500 videos and lots of audio samplers, too. If people want to just learn a little bit about the practice that I teach, I call them neurosensory exercises. It's all there.

**[00:47:11] Alex Howard**

Amazing. Irene, thank you so much. I appreciate you. I appreciate your work and I appreciate your time. Thank you so much.

**Irene Lyon**

Thanks, Alex. Bye, everyone.