



Conscious Life presents

# ANXIETY SUPER CONFERENCE

## Self-regulating for trauma healing

Guest: Dr Peter Levine

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**[00:00:09] Alex Howard**

Welcome everyone to this interview where I'm super happy to be talking with Dr. Peter Levine. Firstly, Peter, welcome and thank you for joining me.

**Dr Peter Levine**

Oh, sure. Gladly. Looking forward to it.

**Alex Howard**

Many people here will be familiar with your work in Somatic Experiencing, we will talk about that, but in this interview I'm also keen to get a little more into how people can work with some of those principles with themselves. I know a lot of people on their healing journeys are struggling with the lack of external support, and that obviously can be very important. But the more we can learn to transform our own inner landscape often is important.

Just to give people who aren't aware a bit of Peter's background. Peter Levine, PhD, is the creator of Somatic Experiencing, a clinical method to resolve trauma symptoms. He received his PhD in medical biophysics from the University of California in Berkeley, and holds a Doctrine of Psychology from International University.

He has worked in the field of stress and trauma for over 40 years. Peter received the Lifetime Achievement Award from the United States Association for Body Psychotherapy in 2010. And he's the author of bestselling books, including *Waking the Tiger: Healing Trauma*, *In an Unspoken Voice: How the Body Releases Trauma and Restores Goodness* and *Trauma and Memory: Brain and Body in a Search for the Living Past*.

So, Peter, just to give a little bit of context for those that might be newer to your work, maybe you could just say briefly what the Somatic Experiencing approach is and why it's so important in trauma healing?

**Dr Peter Levine**

When I started to develop the work I actually wasn't calling it Somatic Experience at the time. It was in the late 1960s into the mid 1970s, and there wasn't yet the definition, there wouldn't be for another decade, the definition of trauma as PTSD, where it was seen as a brain disorder, brain disease even, that one could, at best, manage it with medication and try to change one's negative thoughts. And so fortunately, I wasn't aware of that or it might have stopped me in developing Somatic Experiencing.

**[00:02:50]**

When something happens and we're overwhelmed, we're frightened or we recoil from something, like you just go outside your house and you see somebody being hit by a car and you go, ah. And that's something the body does. When we are traumatized our jaws clench, our guts tighten, our breathing becomes shallower, we hyperventilate. And these are all things that the body does. And that's what trauma really plays out in the theaters of the body.

And so if we understand that then we can learn to have new experiences in the body that, in a way, contradict those of the overwhelming helplessness, if we're able to stand back and observe the sensations that are going on in our bodies, the places where we get stuck, which is where trauma is, we're able to move through and to come back into ourselves and to feel our own vitality, our own energy. Being able to be in the here and now. I suppose, in a way you could say, trauma is a disorder of not being able to be in the here and now.

So that's really the key, it's a way of helping to take people from stuckness, from trauma into flow, into more flow and then into being able to transform these experiences by allowing the body sensations to move through.

### **Alex Howard**

One of the things that I think for many people was revelatory in your work was the realization that trauma is held in the body and it's held in a state of freeze or in a state of shutdown. Maybe you could say a little bit about that piece and how the unraveling of that can be so important.

### **Dr Peter Levine**

Again, when I started developing the work there was no understanding of the freeze or what I call the collapse response, when we just fall into overwhelming helplessness. And at the time the only thing people knew about was the fight or flight response, so called fight or flight response.

And I realized that this was a component in what happens to people, which we now call trauma, but there were another two that are even more important or as important, at least, in understanding trauma. And that is when our body, when we experience life threat, then our body just shuts down, we basically just tuned down our whole energy level. We don't move.

Now of course, when people are traumatized they are able to move, but the movement isn't flowing if there's not a movement in the flow or a flowing in the movement. What happens is when people get stuck in this freezing response, again, this is when the whole body freezes or when the whole body just collapses from the inside. And again, we have to find ways to be able to help people move out of that, to have new experiences that give us a different way of seeing the whole world.

One of the things that was really one of my discoveries, and Stephen Porges and I in the 1970s, we became very good friends and we really collaborated with each other in many ways. And his understanding of the social engagement system, again, being able to coregulate with somebody, as well as to self regulate within ourselves, we really need to have both, absolutely, we really need to have both. Because if we are only able to coregulate then we're vulnerable when we're not with the person that's coregulating us.

**[00:07:17]**

At the same time, if we just you use regulation to not be in relation to other people, that also can be a problem. Although I have a feeling that more or less people that are by themselves, only have to do it by themselves, are limited in how much they can regulate.

I can just, if you want, maybe do a little exercise with your audience. Give an idea of how we change these sensations from trauma to more slow.

**Alex Howard**

Yeah. Please do.

**Dr Peter Levine**

So just a little bit of a background. There's a nerve that goes from the brain, actually from the back of the brain stem, and down throughout the whole body and wanders. I actually call it the vagus, which is from vagabundum, which is the wanderer from Latin. And it goes to all of our internal organs. Especially to our gut, our gastrointestinal system, our viscera, it goes to our lungs, to our heart. And when we see something, like I was just describing, we go out the door and we see somebody being hit by a car, or we think of something that happened to us a long time ago, our guts go, ah. Again that's something that goes on in the body. I think most people can recognize that, at least times when that has happened in their lives.

And that nerve, which is the largest nerve in the body by far, again, it goes from the brainstem to the viscera. But there's another part of that nerve that actually goes and takes information from the state of the viscera and brings it up to the brain where it then can become amplified. So this nerve is 80% sensory afferent, in other words, the great majority of that nerve are actually taking information of the state of our guts and relaying that back up to the brain.

So again, we see, or something terrible happens to us or somebody we care about, and we go, ah. So that's sending the nerve fibers. The vagus nerve is the largest nerve in the body by far. And so even 20% is a lot of nerves. So it goes down to the guts, we go, ah. Now that nerve is afferent, in other words, it's taking information from the guts and relaying it to the brain. So you start with, ah, then that goes from the brain to the guts. Then the guts send the signal back up to the brain, and it amplifies that. So we have, (winces in pain).

And then after a period of time our digestion is off, we start having spasms in the gut, sometimes it's called irritable bowel syndrome, and that's when things get stuck. So how do you unstick and help the person return to their self and to their flow, to their sense of self and being? And I found an exercise that's very, very helpful, and it helps regulate both the breath and this vagus nerve.

So the idea here is to take an easy, full breath. And those of you who wish to do it with me, please be free. And if it doesn't feel right to you, please don't do it. Also, it can bring up feelings. Most of the time, people feel a deep, deep sense of settling and relaxation of regulation. But it could also bring up different sensations that might be a little bit strong at first, or might even bring up memories. But if you're able to just follow whatever it is that's happening in the body, then you move through it.

And again, in trauma therapy, so much is relegated to the mind, and the mind can just get stuck. But really you have to unstick what's underneath the mind, which again are our sensations, our feelings, and of course, any images or meanings that we have as well.

**[00:12:10]**

So the idea is to take an easy, full breath. Well, let's just take a moment first just to get comfortable in our chairs and just feel how the chairs are supporting us, supporting our back, supporting our bottom. And feeling our feet touching the ground and just noticing also our hands. And maybe just with curiosity, just open them and close them a little bit and just notice the way they open and the way they close. And just really, not just watching, but really putting your mind into your hands. So you feel your hands physically opening and closing.

Maybe even you might feel some kind of strength when your hands are closed. And when the hands open maybe there's some sense of receptivity. But anyhow just becoming aware of what's going on in the body.

Okay. So in the exercise we take an easy full breath and with the exhalation wave, make the sound 'voo' coming from the belly, vibrating in the belly. So you're getting a new signal, you're sending a new signal from the belly back up to the brain. And just letting the breath and the sound go all the way out and then just allow the next breath to come in, filling the belly and chest. And again once more, 'voo'.

So those of you who wish to join, also if it doesn't feel right, if it doesn't feel safe enough at the moment, just watch me and listen to me and just notice what effect that has, because we do affect each other profoundly, for better or for worse.

Okay. So let me demonstrate. I'll do one cycle and then we can do it together.

Letting it out right there. I let the breath come in on its own.

So those of you who wish, let's just do it together.

Easy full breath. That's it, just letting the sound and the breath all the way out. Let the breath come in.

Just rest and just notice sensations, feelings, thoughts, images. You might notice some tingling or vibration, maybe coolness or warmth, cold or hot. And notice the sensations and notice that they seem to spread throughout the body. And when they spread, how does that feel to have that inner movement?

So this is an exercise that you can practice. It can be done both alone or optimally to do it with somebody, to have a partner and to do the exercise, first, one person do the exercise and then the other person does the same exercise. And again, just to notice the difference in when you're doing that with a person.

### **Alex Howard**

One of the things that I noticed, Peter, I muted while I was doing it because the way that Zoom works, it focuses on the one that's speaking.

But one of things I noticed while I was doing it was that when often one's caught in their mind and the distractions, there's something about it I found very grounding. I found myself becoming much more rooted and much more embodied.

**[00:16:54] Dr Peter Levine**

That's a typical experience that people report. But what's really interesting is this is something that involves two breaths with the sound, and it takes a minute or two. And again, something like this frequently will happen. That we will really feel more settled in ourselves. The term we use is, grounded, more in the body, embodied. Really, the gift that trauma can give to us is it helps us because we need to heal. We need to find that embodiment, that connection to that deeper part of ourselves.

And again, sometimes people just report they feel more relaxed, they feel some tingling or they feel some vibration, they have a thought about something, maybe it's a thought about somebody that they know, somebody who's a friend of theirs. Many different things can happen, but what the key is, and you touched on it, is that the thoughts are secondary to the bodily sensations. And when the bodily sensations can change, like doing something like this, when that can happen, then the thoughts by themselves shift our perceptions of the world, whether we perceive the world to be safe or to be dangerous. To be threatening or to be nourishing. That really comes from our internal experience.

**Alex Howard**

It's really interesting because one of the things that I think is often the trap that one gets into with trauma, but also particularly, I think with anxiety as well, is that one feels unsafe, so one tries to think their way to a feeling of safety. It's like, if I can anticipate all the things that are going to happen or I can replay this event enough times in my head, then I can somehow think my way to that feeling. And what I'm hearing you say is that you can't think your way out of it. It has to happen.

**Dr Peter Levine**

And often the thoughts just feed on each other. If you try to think of how to feel safety, how can I feel safety? I don't feel safety. So you start getting frustrated and then you look for more thoughts, and the more thoughts maybe cause more frustration.

And by the way, I'm absolutely not against working with people's thoughts. We need to do that. And I call that top down. So it comes from the cortex down towards the body. And bottom up is coming from the body up to the brain, up to the psyche, to the mind. And we do need to unite them, the bottom up from the top down. But really, when we're stuck in the basement in that bottom part, then we really aren't able to tame those thoughts.

To some degree we can, of course, and people who practice meditation learn, I think, to take some distance from the thoughts, to be able to observe the thoughts rather than being gripped in the thoughts. But again, to shift the whole system. When you shift it from inside the body, then the thoughts, they may need a little help, but the thoughts then turn to a more positive, more hopeful. Instead of dwelling only on the past again, looking ahead for what might be happening in the future.

**Alex Howard**

One of the other challenges that I think can happen is when one comes more into their body, one also often gets closer to those places that haven't been metabolized, that haven't been processed. And often one can feel unsafe as one gets to the original trauma of not being held can start to arise. And that can often then lead to almost bouncing off that place back into the... What helps one cultivate that? The inner holding that allows them to stay with what feels difficult.

**[00:21:14] Dr Peter Levine**

Well, again, it has to do with the body's sensations. There are two really important basic concepts in Somatic Experiencing. One is called titration, and the other is called pendulation. Pendulation is a made up word. When we're working with a person, and with SE, we only guide them to just touch into the traumatic sensations one small amount at a time so that the person isn't overwhelmed. And a co-concept with that is pendulation.

So when we first experience our bodies in, like you said, the unprocessed feelings and emotions and trauma, we feel a contraction. Our body contracts. So our shoulders, our neck, our jaws, our whole body contracts. So when you touch into that initially, it doesn't feel good. But when you guide the person and titrate the experience again, only one more piece of experience at a time. When you do that, you can guide the person to feel into the contraction, because with every contraction there's going to also be an expansion. And again, another contraction and greater expansion, another contraction and a greater expansion. So you're moving between the polarities of contraction and expansion.

And the real trick is being able to hold them both without judgment. And if you are judging it, to not judge your judging. So it's really again, you learn to trust in the body that the body knows how to move through these unprocessed emotions. It has its own innate wisdom, something which we I think sometimes call embodiment. And we may have very, very clever minds, many of us do, however, our bodies are so much smarter and so much more clever if we learn to listen to the promptings of our bodies. And again to just touch into these uncomfortable sensations enough to where they expand and contract and expand.

And when we do that, we don't feel stuck because we know, okay, so we're feeling tight, we're feeling a contraction. And then as I learn to follow that, I sense that little expansion. So being able to be guided, having someone guide us through this, at least initially, is very important. But again, it becomes almost an automatic skill you could say. That whenever we feel upset that we are able to touch into those sensations.

And couples, if we're in a couple, in a relationship, and one of the partners is feeling anxious, and then the other partner picks up some of that anxiety and they feel anxious. And then that anxiousness escalates. That's often the time where there's something like an anger bout. You attack the other person, they attack you. You think they're attacking you, you attack them back, because we feel unsafe. And when we feel unsafe, we want to protect ourselves.

And again, biologically, we fight to protect ourselves. The flight or fight response. But if we can take a little time out and just be with each other and do exercises, like what I just demonstrated with the 'voo', then they can reconnect and say, my gosh. I realized I got really upset, and I think what I was upset about is that we had arranged to spend this time together, but you scheduled something else.

So you're able to say what it is that you are angry about. Say it clearly in a non-judgemental way and in a way that can be healing to both.

So the body really is the key to how our lives will go. Where we'll have productive lives, where we'll have nourishing relationships. It's really, really essential to learn to hear and respond to the promptings, the inner promptings of the body.

[00:26:38]

And this is called interoceptive awareness. We become aware of our muscles, of our joints, and of our viscera, our guts, and to again listen to their messages, see what they're needing, see what they're wanting at the time.

### **Alex Howard**

I'd love to explore a little bit more about the relationship one has with their body. You were mentioning about, with titration and pendulation, finding those edges and being gentle with those edges. And often when we've experienced trauma, often part of that is that the perpetrators of that trauma often have been overly harsh or have been insensitive towards us. And often that's how we've modeled that, we've learned that way of being with ourselves.

So I remember in my own healing journey that when I first started working with my emotions, as someone who'd been conditioned and learned to be very driven and pushy with myself, I used to get angry at my inability to feel my emotions, and a fighting of it, which, of course, caused more of a shutdown. So it's almost like we try to solve the problem at the level we created it. And something has to change in that relationship.

### **Dr Peter Levine**

Yeah. Very well said. I think Einstein said, "we can't solve problems by the same system that created the problems in the first place". And you gave a good example. If somebody is really harsh to us, if our parents, caregivers are harsh, they're impatient, we will then interject that, we will swallow that, and we will then be harsh with ourselves.

Also, if we're shamed chronically, then we begin to shame ourselves. And shame is also something that happens in the body. We fold and we collapse around our diaphragm. We lose our energy, our vitality just gets buried. And it's a really tough one to have happen in our adult life.

I did a talk for an addiction center called The Meadows, they're in Arizona, and shame is such a central driving force in the addictive process, because you feel the shame and you'll do anything to not feel ashamed. So you use a substance or act it out in some way, but that actually only increases the shame. I think somebody once said, "shame is as beneficial to an addict as salt water is to a thirsty person".

But again, if we understand how shame is registered in our bodies, we can also move through the shame. So, the shame, we tend to look away, avert our gaze, we don't want to look into the eyes of the person who's shaming us. We avert our eyes, we look down and we collapse here around the diaphragm. And it can be very subtle. I'm exaggerating it. But when people become aware of that in their bodies and they can again, like with pendulation, just slightly shift into that posture of shame, and then come back out again, just settle here. So that way you know you can go in, but you also then can come out. And again to do this a few times, go in a little bit more, and then come out, allow the spine to lengthen, allow the shoulders to rest, to feel the breath.

And those of you who are therapists, I think you realize that shame is probably one of the most difficult emotions to work with. And if you understand how it's registered in the body, then you can really help people move through that so they're not in a state of shame. And then they can look back at where that shame might have come from in the first place. But again, without that, if you're just trying to think about where the shame came from, what it was like to be shamed, again, it tends just

to regurgitate the shame, and it doesn't really give us the movement through to resolving it somatically, physically, internally.

**[00:31:41] Alex Howard**

I'm finding myself thinking, you were saying a bit earlier Peter, we often need that coregulation to support healing trauma but there's also the self regulation piece. And in a sense, in an ideal scenario, we have both of those. In terms of actual practices and tools, what do you find, the little exercise earlier is clearly part of this, and I can see how helpful that can be. But one that's learning to build that capacity for self regulation, what might that tool kit look like in terms of developing that?

**Dr Peter Levine**

Let's look at it developmentally. When we're newborn, basically the newborn is unable to regulate anything. They can't put on their shirt if they're cold. And they need somebody to hold them and to soothe them. And again, this is the role of the parent or the caregiver. And that's so important, because actually those rocking movements stimulate an area of the brain called cerebellum, they do that through the vestibular system in your ear. And that actually down regulates the rest of the brain, the cerebellum does. And again, it comes from those movements.

One of the things that we've lost in industrial society and technological industrial society is the hammock. And in so-called primitive cultures, you always, especially when it's not freezing outside, you see hammocks and you see the parents, the caregivers, with the infant in the hammock swinging together, regulating each other together. And that's the essence of coregulation. And as a child grows and then becomes a toddler, they start to become more independent. They want to have their own lives. The 2 year old wants to explore anything. You have to keep an eye on them because they could do mortal harm to themselves because they'll just push or pull or jump.

**Alex Howard**

Fingers in the power sockets.

**Dr Peter Levine**

In the power sockets or in the sister's eyes or pulling the tail of the cat or the dog. You have to say, stop and that arrests the behavior. But then you also have to say, sweetheart, you can't do that. We love you. You are completely lovable, but you can't do this.

So in other words, we stop the behavior with the shame, what I sometimes called the vagal brake, it stops the shame, it stops the behavior and it also leaves you with that feeling, because if you want to do it again at another time, put your finger in the socket, you hear the words in your mind, no, no. But you also hear the words, I care about you. I love you but this is dangerous.

And so that's coregulation again. But then we start to be able to, okay, something happens and we get upset. We start learning the skills, even the toddler, that it can take a moment when they have a fall to sit down and maybe to cry. That's a form of self regulation. You're discharging that emotion. And then again, as a child grows up, they learn to play act and they learn to tell stories when they get to about 5 years old. And they love their parents. That's when the child comes home with a picture of mommy or daddy in a big heart, we love you. And again, what they're doing is they're also giving some message of independence to themselves. And independence is also an important aspect.



## [00:36:27]

In Western society, especially in the United States, I think independence is overrated. The idea of competition rather than in sharing together work, cooperation. And cooperation requires some degree of co-regulation. But we also want to do our independent dance and then we have to learn to regulate ourselves. If we don't do this, if we are unable to do that, then after a while symptoms may start to occur. Anxiety may start to become a more common component of our experience.

So learning to regulate with another, it's going to be okay sweetheart, it's going to be okay. Sometimes when we're upset, assuming we had good enough mothering, we'll call up our mother and say, this happened to me, and I'm all upset. And then our mother says, sweetheart, it's okay. Just those words, it's okay, you're okay, just helps us settle.

So then can we take that experience, what it felt like when our mother or whoever it was said, it's okay, sweetheart, it's okay. How we take that, how we internalize that and how we can then give that to ourselves through these kinds of exercises, like the two that I just demonstrated.

### Alex Howard

And what strikes me as well as you talk about those different stages of development, there are different ingredients, in a sense, that one can recreate. Like that sensation of the rocking in the movement to one's internal dialogue in terms of how one is talking to oneself, to that sense of how one is being with themselves. That there's a lot that we can learn from that.

### Dr Peter Levine

Not just talking, but talking and being with ourselves.

There's another thing about this vagus nerve that's a little bit, not exactly mystical, but non-ordinary. And again, remember that 80% of that nerve is actually taking information from our guts, from our heart, from our lungs and sending it up to the brain. And we all have identity, we have our ego identities. I'm a therapist, I'm a parent, I'm a teacher, I work in a store. Those are all identities, but they really have very little to do with who we are to ourselves, to our deep selves, to our true selves.

And the true selves, and this is where the non-ordinary part comes from, the first sense of self really comes from our guts, comes from our viscera. This probably began when we were in utero, and that was our connection with the stream of life, was through our guts, through the placenta. And you see the happy Buddhist statues, and they all have these round open bellies. So this is a really fundamental pre-egoic, non-egoic sense of self coming from our being able to register those bodily sensations of our viscera, to register in our brains and be able to touch them and know that this is who we really are.

So this is how we begin to develop, not just self regulation, but really connecting to the deeper part of ourselves.

### Alex Howard

And that is an unfolding and evolving relationship. I like what you said earlier around, these aren't quite the words that you used, but in the sense one starts where they are. And if one can just manage a little piece of that, that's where one starts, as opposed to having this idealization of this thing, that people read a book like *The Power of Now*, it just seems impossible to get to a place like that. As opposed to one cultivates from the place they start.

**[00:41:35] Dr Peter Levine**

Yeah. You use really good words, unfolding and evolving. And this process is a gradual process. It isn't unfolding, it's an emerging, an emergence from these primitive self sensations filling our whole organism, filling our bodies. And this is a process that doesn't happen all at once. It happens over time. It's an evolution.

And when you see people who are evolving in this direction you know there's something special about them. There's some way that they're deeply connected to their selves, wouldn't it be nice if we could have some of that for ourselves?

And again, you meet somebody who really has that deep connection and you just know it right away. Not just the Dalai Lama, but if you happen to meet the Dalai Lama on the street and you say hello to each other, you're receiving something, he's transmitting something, you're receiving something from him about what this connection is like.

And taking it to relationships, if we don't have that sense of ourselves, we're always looking to the other to give us that identity, that sense of self. And that's a big burden to put on someone else. But if we feel our own selves, our own vitality, and then we choose to share that with somebody who also feels their own self-ness, their own vitality, their own aliveness, then we can come together in a relationship. Otherwise we're just playing against each other's childhood scenarios and our childhood traumas. And again, we find that we just keep getting into the stuck places, and then it leads to separation, which leads to divorce. And then we find the next person to play out the same theater game with.

So being able to self regulate and even more than just self regulating, to be connected to the self, and then to choose to share that with another person on that path themselves who is unfolding. Again, nobody's going to be anywhere near perfect. Not in this lifetime. But we could really get a good start. We can really get a good start and be able to celebrate within ourselves and celebrate with that chosen other.

**Alex Howard**

And I'm mindful of time, Peter, but maybe just as a closing point, to just reiterate what you said earlier about there is enormous wisdom in our body. There is enormous wisdom in the process. And maybe just say a little bit more about the surrender and the opening to that.

**Dr Peter Levine**

Yeah. In other words, to get the wisdom from the body we have to surrender to the bodily sensations. And sometimes surrender has a bad rap. Surrender means somehow that we're giving up, that it's not a positive thing. But really, if we look at what surrender means, for me at least, surrender means feeling our body sensations as they are, without confabulating them with a whole bunch of missed thoughts. It's really to feel our sensations as they are in their primary form, as they exist, as they live within our body. To me, that's what surrender is.

And when we're able to do that, then that wisdom starts to emerge. Just doing a small exercise like the 'voo' exercise, often people will report something like, I don't quite have the words for it, but somehow I feel more like myself. And this wisdom goes beyond the words. Gone, gone beyond, gone beyond the words where wisdom is. And that's where the wisdom is. It's in our bodies. It's in our connection, not just with our anatomical bodies, but our living sensing knowing bodies.

[00:46:31]

That is the greatest gift that we can give to ourselves and give to each other. And it's what happens when you're able to transform a traumatic experience. That, you could say, would be a beneficial side effect. I'm just thinking of when I first got my clue about developing Somatic Experiencing it was with a woman, Nancy, I don't have time to say the story, but it's in *Waking the Tiger*, and I think also *Unspoken Voice*, but anyhow, she was renegotiating. Also in SE we don't have people relive traumas, but we have them touch the trauma and renegotiate trauma.

And she was doing that when she was 4 years old and she had a tonsillectomy and they forced the ether mask on her face which caused severe panic. And when she was working that through, she said to me, it feels like I'm being held in warm, tingling waves. It feels like I'm being held in warm, tingling waves. That's wisdom. And that comes from the body, from our ability to have a growing trust of our connection with our bodies.

### Alex Howard

Beautiful. That's beautiful, Peter.

People that want to find out more about you and your work, they can go to [somaticexperiencing.com](https://somaticexperiencing.com). I know there's some downloadable resources, you have public programs, free videos and also your professional training. Anything you want to say about that?

### Dr Peter Levine

Yes, the professional training is through the Somatic Experiencing International Institute and their website is [traumahealing.org](https://traumahealing.org)

And they have training in 43 or 44 different countries. And practitioners in many, many countries. So if you're wanting to work with somebody, you can get that information also from that website. As I say some of the public events that I do, like the one I'm doing with you right now, those are from the [somaticexperiencing.com](https://somaticexperiencing.com) website.

And then there are the books that I've written, as I said, that look at this from very different angles. For people who are not therapists, *Waking the Tiger* is probably the best place to start. But the other books really deepen the exploration of embodiment and also look at the whole question of memory. Again, people think of traumatic memories is that you remember the memory from here. It's not. You remember it from its effect on the body. So how do you work with that? Those memories are called procedural memories or so-called body memories.

So there's a lot of resources there. And even just practicing some of these simple exercises. Actually, I'll be recording in January, forgot about this, a program with Sounds True for people who have a lot of these physical symptoms that are very frequently related to trauma. So for chronic pain, fibromyalgia, irritable bowel, we just mentioned some kinds of migraines and so forth, to help people using these tools to heal from these symptoms.

### Alex Howard

Wonderful. That's one to look out for. Peter, it's been a pleasure, as always. Thank you so much for your time today. I really appreciate it.

**[00:50:34] Dr Peter Levine**

Gladly. I hope it's a benefit to your viewers.