



Trauma as a lens to understand cultural mistrust

Guest: Dr Stephen Porges

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[00:00:10] Alex Howard

Welcome everyone to this interview where I'm super excited to be talking with Dr Stephen Porges. Firstly, Steve, welcome and thank you for joining me.

Dr Stephen Porges

Thank you, Alex. Thank you for inviting me. Looking forward to an interesting 45 minutes.

Alex Howard

So I always like the interviews where we make a plan last minute to go off script, and find ourselves going down a few little rabbit holes that I think are going to be actually really interesting and actually really important conversations.

So we will talk a little bit initially around Dr Porges' work with Polyvagal Theory and just give some context around that. But we're also then going to explore a little bit of how we can understand things like people getting pulled into conspiracy theories, some of the big tension that we're seeing in our communities at the moment around issues like vaccination, and how we can understand those through the lens of Polyvagal Theory, how a trauma-informed approach can help us unpack and make sense of some of what's I think causing a lot of difficulty for people, both in personal relationships and in family relationships. So I'm really excited to get Dr Porges' perspective here.

Just to give people a little background, Dr Porges is a distinguished university scientist at Indiana University, where he's the founding director of the Traumatic Stress Research Consortium. He's a professor of psychiatry at the University of North Carolina at Chapel Hill and professor emeritus at both the University of Illinois at Chicago and the University of Maryland. He served as the President of the Society of Psychophysiological Research and the Federation of Associations in Behavioral and Brain Sciences, and as a former recipient of a National Institute of Mental Health Research and Scientist Development Award.

Many people will know Dr Porges for his work with Polyvagal Theory, and more recently, he's one of the founders of the Polyvagal Institute that people can find at polyvagalinstitute.org.

So, Dr Porges, let's just give a little bit of a frame here around why a physiological model of trauma is so important, why bringing physiology into understanding what happens is critical.

[00:02:31] Dr Stephen Porges

But we have to kind of roll the clock backwards and realize that so much of our culture is based upon a behavioristic viewpoint, that we learn to do good things, we learn to do bad things. And if we're doing bad things, we need to stop. There's nothing in between the inputs and the output except, let's say, a cognitive appraisal and a responsibility. So something is missing regarding the organismic state of the individual. And Polyvagal Theory respects that your physiological state, your autonomic state, is this powerful intervening variable that literally transforms or biases how you respond to the world.

Now, if you have a stomachache, you know what I mean. If you have a stomachache, you're not going to be welcoming and loving to others, you're going to be in pain and reactive because your physiological state is tilted in that direction to take care, you need to take care of yourself and not others.

What we learn, what Polyvagal Theory gives us, is literally a script for our body. It tells us that we basically have different organizing circuits, basically in our brainstem that regulates our physiology. And these circuits evolved sequentially through the evolutionary history that has led to modern mammals, humans.

And what happens is these systems are basically hierarchical, meaning newer circuits inhibit older circuits. But when challenged, when diseased or injured or under certain severe threats, our body retracts these newer circuits and goes down to survival modes. We've talked about fight flight. Everyone understands that. And now, of course, in the trauma world, Polyvagal Theory was helpful in reintroducing people to shut down and immobilization as a defense reaction.

But those are hierarchically organized. So Polyvagal Theory basically says your bodily state, your physiological state, is important, and what state you're in basically determines your bias to how you see the world, negativity versus positivity, the ability to trust or the ability not to trust, based on your physiological state. And in the world of trauma, it now leads to marker variables and portals of intervention.

Alex Howard

And maybe you could say a little bit about just to speak to the different states that one's body can go into.

Dr Stephen Porges

All we need to do is basically look through our ancestral lineage and what made mammals different. And now we have to give it a kind of a narrative. Mammals and humans are on a phylogenetic, meaning evolutionary, journey to be social, for sociality. And what that required was an innovation on how the nervous system regulated physiological state. It needed a new tool. It needed a pathway that turned off our threat reactions. And that pathway is a newer vagal pathway. That's how the theory gets named polyvagal. And this pathway is uniquely mammalian.

But what makes this pathway really interesting is that it's regulated in the brainstem in an area that controls the muscles of the face and head. What does that mean? It means that we broadcast our physiological state in our facial expressions and in the intonation of our voice. So when you have these gut feelings, when you meet someone, you say they're not really being authentic. They're trying to put something over on you. You're probably right, because they're not broadcasting a physiological state that reflects their own safety. So it lacks truthfulness.

[00:06:27]

Now, below that is this fight flight, which we share with most of the vertebrae, especially with reptiles. And when we lose our newer vagal circuit, which is part of our, what I call, social engagement system, we become very reptilian. And the metaphor I've been kind of playing with, the little narrative, the script, is, if we don't expect reptiles to be social, why would we expect people whose physiology is really reptilian to be social, to trust? So the issue of trust requires a physiological state that enables us to co-regulate with another. But if we shift to this reptilian, more fight flight is how we would see it, a low threshold to be defensive, sociality is not part of the repertoire.

But even that defensiveness, at times, is not sufficient to save us. And often we revert to a very primitive physiological circuit that shuts us down. So reptiles really have done this beautifully, because when they're under threat, they immobilize, and that immobilization is even an inhibition of breathing, and they can stay in that immobile, not breathing position for hours. Why? Because they have small brains, their cortex, their brains don't need much oxygen.

But we have big brains, and so it's physiologically incompatible for us to utilize that circuit. It's potentially lethal. But people who experience trauma often have a shutdown response back in their early history, meaning that they had passed out or dissociated. And I think what happens over time, if they're in chronic abuse settings, they just become numb and dissociate, so their body doesn't go into this shutting down situation, which is potentially lethal.

So in this type of modeling, we can see that dissociation and freezing, which maintains a degree of sympathetic tone, so we don't pass out, so we immobilize without hitting the ground, we can see these as having evolutionary adaptive function, even though in terms of our mental health, they're not necessarily the best. But in the narrative of treating people who have this symptomatology, the polyvagal informed types of therapies would say, honor your body. Look what your body is doing for you to enable you to survive, as opposed to being angry at your body for immobilizing.

Alex Howard

In a sense, there is an inherent wisdom in that response, which is self-protective in its function.

Dr Stephen Porges

Right. And we start there with this honoring of the body, even though those reactions are far from being social, but they are profoundly successful in helping us navigate. The issue is, some of these reactions are initially adaptive, and then when we get kind of stuck in those circuits, they basically create what would be more of a pathology because we can't get out of it.

So once we start to honor and respect it, it will start to stop fighting with us for its own survival. And that leads into the people who do parts work. When they start talking about a part of you, you need to let it go or you need to repurpose it. From a polyvagal perspective, you assign to those parts different autonomic states, and you honor them for what they can do. And you say that's wonderful, but that's not where I want to be.

Alex Howard

Yes. And I think that this next piece I'm going to ask you about, I think is an important frame for where I think we're going to go in this conversation. That often we normalize to these states, and because

we normalize to them, we don't necessarily recognize that that's the place from which we're meeting the world. Right?

[00:10:34] Dr Stephen Porges

Yeah. Well, I would reframe it slightly. Whenever we're in any of these states, we bias our perspective of the world. We bias what I call your neuroception. So what that means is that you perceive and react to the world as a function of those physiological states. And now your top down appraisal starts to justify whatever you've done, as opposed to throwing out the justification and being a better observer, be a witness of yourself without saying, I did this because... Because we can just assume that whatever anyone does, their justification has a degree of validity. It just doesn't fit into the context in which they are acting that out. It's like a child that goes into a tantrum. You might get very angry at the child for going into a tantrum, but in the physiological state of the child going into a tantrum, it's a very justifiable reaction.

Alex Howard

Yes. So then opening up a little bit of this topic that we're going to explore. We started before we were recording. I was asking you how things are where you are in Florida. And one of the real challenges at the moment, as I understand it, particularly in parts of the States, is the low uptake of vaccination around the younger population.

Dr Stephen Porges

Yes, I can respond to that. And what we were talking about is from a polyvagal lens or polyvagal perspective, those who are anti vaccination people, many of them truly believe that taking a vaccine or having a vaccination is placing them at risk. So they're giving you a threat reaction. Their body is in a state of threat. Their arguments are aggressive arguments. And when people are in that physiological state, you don't say, "Here are the data." It doesn't quite work that way, because what we're really saying, "You're a stupid idiot for not reading or understanding the data, and I'm going to think even less of you."

The part is, they feel that... They're doubling down because they're already in threat, and they don't want, not want... When you're in threat, you're just a different organism. You're like a reptile. That's the point. We want people who are under threat in the pandemic to be connected and to trust us. That's what we're asking of them. But what we know is if they're under threat, their ability to trust anyone is going to be compromised.

So if we take even this concept of the window of adversity history, what we know, we know that adversity history is... Okay, my own work during the pandemic, we've been doing survey work, looking at self-reported measures of autonomic reactivity, adversity history, mental health symptomatology, and now even the expression of symptoms following COVID, the real stuff. And the interesting issue is that adversity history changes our autonomic reactivity. We get re-tuned by our trauma history, and this maps into how we are, even if we don't have COVID, how we're reacting to the pandemic, in terms of anxiety, depression, and just plain worry.

What's interesting, and this is new data that we haven't published yet, and it's really exciting to me, because I thought perhaps this autonomic reactivity variable would be swamped by the subset when they had COVID, because when you have COVID, the autonomic reactivity is very different, but it seems to amplify the importance of adversity history. So there's a stronger relationship when you

have COVID in terms of mental health symptomatology based upon adversity history, it gets, in a sense, transformed into autonomic reactivity. It gets re-tuned, your trauma history.

[00:14:30]

So now let's go to the people who are aggressive and dealing with the concept of vaccination. They have re-tuned autonomic nervous systems. You can see that they are locked in fight-flight aggressiveness. They're like the statement like, why would we expect reptiles to be social? We don't. If we don't expect reptiles to be social, in a sense, if we call them, they'll come to us and we can pet them and they'll lick us like a puppy dog, it's not going to happen. They may develop the ability not to be in a state of threat, but they're not going to have the ability to be socially engaging in the way that our nervous system interprets a trusting relationship. This is the same situation when people are so threatened by what's going on in the pandemic.

And we can, in a sense, deal with this on another level. And we can look at the history of humanity. In the history of humanity, when someone or some group of people were, let's say, upset or threatened, how did they get rid of those threats? It wasn't through war all the time. It was, they would go to significant others with whom they felt safe and they trusted. And that social interaction, just like the mother's lullaby to a baby, mitigated those threat reactions, and the person calmed down, didn't get into the conflict.

The issue is, the pandemic is an amorphous set of threats. We don't know where it's coming from. We don't know who has the virus or not. And then we have imposed a very practical database, scientifically valid strategy of social distancing, and a public health strategy. What does social distancing do? It takes away the major mediator or calmer that was in the person's world. So I actually wrote an editorial, a thought paper for a psychiatry journal on what I called the paradox to our nervous system. The pandemic is real, but we don't have the option of co-regulation.

And then let's ask these other questions. Most of us have done a high degree of self-quarantine. We pull back our social relationships. We reduce the amount of contact with people outside our immediate home, but we're making an assumption. We're making an assumption that homeschooling and being self-quarantined is safe. And what we used to say, again in the trauma field, is that many homes are not safe. Many children aren't safe in their homes. And now you have children being forced to be homeschooled in home environments that aren't safe. We have relationships of people, who may not even like each other, let alone trust, are confined with each other.

So the normal strategies were that you could tolerate these complicated, less than satisfying relationships if you had external opportunities of co-regulating with friends or co-regulating in the workplace or the school. And that's not occurring for us, for most people.

The interesting part, I really am wondering about the children, because they're going back to school, but it's not the same. And when they were home, I can't imagine being an adolescent without interacting with peers. I just can't imagine it.

Alex Howard

Yeah. Our kids were quite lucky in as much as they're 10, 8 and nearly 5 now, and in a sense, they were part of a family where they had each other, and it wasn't ideal at times they really did not like each other at moments, but there's something about at least at that age, that sort of bosom of family feels okay. When one starts to individuate and want to go out and be with other teenagers, that's much more challenging.

[00:18:46] Dr Stephen Porges

Yeah. Remember that when kids start, when they are adolescents, when they're teenagers, the family is not really where they want to be.

Alex Howard

It's the last place they want to be. I want to broaden this conversation a little bit also, beyond just the anti vaxxer position to conspiracy theory and sort of alternative narratives more generally, because it strikes me that, and of course, one could be overly reductionistic here, but it strikes me that often the case is that there is a mistrust of authority which seems to be going on and a kind of narrative of people that feel alienated from the mainstream. And then these antivax issues become the sort of fire that has fueled that. I'd love to hear your perspective on that.

Dr Stephen Porges

Well, I think you actually have given the answer, because if people aren't safe in relationships, they often will have difficulty with authority. So when we start talking about what is authority, what's the metaphor of authority, it's parental regulation or parental guidance. And if our imaging and our visualization of parental supervision or parental trust and care is a little shaky, what do we use when we're out there in the world? We use some type of authority figure. And if those authority figures are, again, a reflection of the uncertainty of our parents, we now have a loose system that you're going to have... It's not going to be easily contained.

If you take Polyvagal Theory, it's really saying that these threat reactions or defenses are functionally constrained through structures that evolved to enable co-regulation or connection. But that requires, that makes the assumption, that the person has had sufficient "neural exercises" with trusted figures to be able literally to calm down and connect with other people. And if they don't, then you're in deep, really trouble.

But you're bringing something else out. And that has to do with where are people getting information? And historically, people got information from their interactions with others, and they trusted certain people based upon how their body reacted to the other person. They trusted those people, and that's being replaced with Facebook and social media. And our nervous system isn't astute to distinguish these things. So in a sense, we're getting information, and often the information is being broadcast with voices and faces that trigger in our body a degree of trust, and we want to run with that.

And we also have this feeling that we're an exploited species, and we don't want to be exploited. And so the anti vaxxers, this has to do with many political things, have to do with not wanting to be exploited. And also, in the US, and probably in the UK it's the same thing, people have a sense that if they don't want their resources redistributed to others, so they feel that they're entitled to things, and they don't want the government to take their privileges or their resources and distribute it to people who are less worthy. So part of these conspiracy theories and political views have to do with this concept of affiliation and whether or not you have earned the resource.

The species model is that, of course, we're all connected, and being helpful to others is being helpful to us. But that's not a rational argument. That's much more of a, I would say, a neurophysiological self-fulfillment, that when we are good co-regulators, meaning that we interact and calm others, that other person's reaction to us is extraordinarily fulfilling. We basically feel met in psychological space, we feel witnessed, and we flourish with those feelings of acceptance and trust.

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So in a sense, when we try to create a rational model, why would we be helpful to others? Why? Because we feel better when we do that, it's a positive feeling of others, in a sense, reflecting back to us cues of concern or care, love and support. We get mutuality or co-regulation. Our body likes that.

And I'll give you these metaphors. If you have a puppy and the puppy goes on its back and you tickle its belly, how do you feel?

Alex Howard

We have a 6 month old puppy that I do. It feels good.

Dr Stephen Porges

Yeah, it feels good. And if a baby is crying and you sing to the baby and rock and the baby now cuddles, how do you feel?

So we know these cues are powerful cues to our physiology, and they affect what we think are rewards. We've been falsely re-educated over, let's say several hundred years. That false re-education is that the rewards are stuff, that they are monetary or they're objects, or they're let's say, like even in degrees, having a PhD, or in our environment stuff, my environment stuff is publication citations and grant money.

And you start asking, what's that really all about? It needs to be meaningful if it translates into positive actions for humanity. But in the local environment, positive actions, prosocial actions for humanity, don't pay the bills in those models. So we know there's a disconnect between the reward system of society and the reward system within our body.

Alex Howard

Yes. I want to also backtrack to something that we were saying around this piece around trust, because I think a helpful way of thinking about some of this is, there's so much hatred and rage and anger in some of these movements, that I guess what we're really saying is, that often that is the hatred, rage and anger that one has towards parental figures or towards unprocessed traumas in childhood, that now has this new target, in a sense.

Dr Stephen Porges

Yeah. When I stand back, again, let's see, you can't expect reptiles to be social, and you can't expect people who are in that physiological state to be understanding, compassionate, realistic, and even understand the future. So the part is that reptilian behavior is far from planning; it's very here and now. So we can see this in these defensive behaviors. The question is, there are multiple parts, one is the history. I think that's where you wanted to go in terms of the actual child history, the trauma history, the relationship history of people who buy into this reactivity.

I think there's a lot there. I think adversity history creates this vulnerability. So what we've been finding out is that adversity history maps into autonomic reactivity. And what you're talking about in terms of the anger and hatred and mobilization behaviors is autonomic reactivity that is underneath that behavior that you see. It's not a calm, rational behavior, saying, I don't really want the vaccination. I've read the literature. I just don't think it's a good thing for me, but if you want it, that's fine with me and

I'll help support you getting it. That's not the discussion. The discussion is that something's being imposed on humans, is taking away a perceived right.

[00:27:11]

I often think about what the anti vaxxers are really saying is, in a metaphor, they're saying, I want the privilege of driving in the wrong direction on a highway. And think of it that way because they're saying, it's my choice. It's not going to hurt anyone. It's my choice. Well, if I drive the wrong direction on the highway, it's my choice. And just like not getting the vaccine, it's going to hurt a lot of people along the way.

Alex Howard

That's a really interesting metaphor. Part of what I think is often tricky in these things is when there's grains of truth that get turned into complete truths. And the government is not perfect. And there are times where people are misled. Certainly there are times where the pharmaceutical lobby has had too much power and has led things down certain tracks. You have this situation where people are taking little bits of truth and over inflating them. But also one needs to have a healthy cynicism and skepticism in life. These are quite tricky territories to navigate, right?

Dr Stephen Porges

Yeah. Well, the history has been, of course, that you deferred to those who are more knowledgeable. So a child to the parent, a student to the teacher, a professor. That's what the word means to profess, a person who has more experience and more knowledge that can balance various arguments. But when the arguments have been to undermine authority, and so the concept of data has been undermined. The concept of elections is being undermined. So the product of all this is uncertainty, and uncertainty has its own profound effect on our nervous system, and it puts us into a state of threat.

Our nervous system wants predictability. And as long as you keep that nervous system under a state of threat, you have reptilians, you don't have mammals, and you have pressure from all areas keeping people in those physiological states. And when they're in those states, they're very biased on what they will accept and trust.

And now back to where I think you were going. If they carry with them a trauma history, the vulnerability to be reactive and to discount external information is exponential. Actually, the more adverse events, the more reactive, the more it comes out, the more people don't want any part of it.

So in a peculiar way, the actions that we're seeing a large number of people experience, or I should say, expressing, is a reflection of their own personal histories. So they're, in a sense, projecting their intergenerational, transgenerational and even contemporary experiences with trauma, because they are not comfortable in their own skin. They're not patient and they're not co-regulating to even get into a dialogue in which their opinions can be respected.

Alex Howard

I think it makes this whole situation even more tricky, and you spoke to Facebook earlier, it's how Facebook rewards division. So the more conflict there is, A) that pushes things up in the algorithm, but also, in a sense, there's a confirmation bias that happens that people become increasingly surrounded by people that support their opinion. And it's almost like people that have felt alienated or

felt themselves on the fringe of the mainstream suddenly now feel a sense of belonging and a sense of identity and a sense of connection with others that are sharing that viewpoint.

[00:31:20] Dr Stephen Porges

Yeah, I think. Well, this is, of course, the politics of the US now, because people feel that if things don't turn out the way they think it should, it's all been a fraud. If you lose the election, and all these people that you're interacting with are supporting this candidate, and it's immense, you're not hearing any of these alternative views, there's no balanced arguments, then when the person loses, you're convinced that there was a theft going on, a fraud, a fraudulent representation.

There's a lot going on here because our nervous system expects certain things. And what you're really talking about is when we become part of a community that shares our views, we extrapolate from that and think that everyone shares our views, and those that don't are outliers. It's just part of how our nervous system works. We in a sense want to be part of a family. We want to be part of a group. It's again, this journey of socialization, even though if we're stuck in a reptilian body for a while, we still have a quest to be home and safe with those that we trust.

And in the world of trauma, those who have had severe traumatic histories have difficulty connecting with others. But their dreams are to connect with others.

Alex Howard

It's what makes us truly different from reptiles, right?

Dr Stephen Porges

Yeah. They have, it's a top-down visualization of what they would like their lives to be like, even though their bodies are reactive, defensive. So if someone has a severe trauma history, and they want to, in a sense, become intimate with another person, they really want to, but they give a person a hug, and their body just reacts, and they have to get out of there. These are, of course, stories that all of us have heard. And it's what's saying, their vision is that they want to feel safe in the arms of another, but their body says, too dangerous.

Now that dream is also the dream of these conspiracy people. They're in a reactive model. But the dream is to be in a world where everyone thinks the way they think. And that visualization is a dream state of acceptance and reduction of uncertainty. And those of us who sit in the other part of the world cannot even imagine what that reduction of uncertainty would be, because we don't see a plan that would be inclusive of everyone and respectful of others.

Alex Howard

I find this incredibly interesting conversation, and where I find myself going in my mind is, with this understanding of some of these dynamics that are playing out, how does one better engage with somebody who is caught in one of these perspectives? And I think about this from my own personal life, particularly some of the work interviews at last year's Trauma Super Conference, there were some of the leading voices in the anti vaxxer movement, for example, which obviously haven't been invited back for this year's event. And I think about people in my social circle where I find, my heart hurts. I mean, it's really hard to see that division. And how does one better manage that?

[00:34:58] Dr Stephen Porges

Okay. First of all, this has affected lots of people, including within their families. In the US, it wasn't initially the vaccination, it was actually Trump who was creating some of these same types of divisiveness within family units. And this has been unusual because people have always, within families, had different political views. It's just certain things you don't talk about at certain dinners. That was what they're kind of used to.

Alex Howard

It's how Brexit was three or four years ago. My wife and I used to laugh that with our parents, it's like, just don't talk about Brexit because it's ...

Dr Stephen Porges

Right. But in that case, you see, they also would get into a certain reactivity because it was triggering something in their viscera. So how do you do it, is your question. Again, I put two lenses on. One is the lens of the polyvagal theory, and the other one is the lens of experience. And under both conditions, I'm not the one. I'm not the one who could engage.

The Polyvagal Theory says, Well, if you're able to send cues of safety and trust, meaning you don't get upset, you have a melodic voice, facial expressivity. And above all, you're a good witness. So you're able to listen to that other person's perspective without reacting and trying to argue with it. And it's very hard for us, because we're human, and when things violate our expectancy, we feel threatened and we react. So the issue is, yeah, there are ways of enabling people to "calm down," but you need a super person, superhuman person to implement that.

And I've labeled those. This is the other lens. I've labeled those types of people super co-regulators, and we all have met them. And those are people who walk into the room, and we feel disarmed. We just feel comfortable. They smile. It's a style of interacting. And we run across this. And some therapists are super co-regulators, and it doesn't matter what their training is in. They're effective because what they're able to do with their clients is get them out of states of threat and defense. And that's really the journey of therapy, especially in the trauma world, is to enable people to be safe enough to become re-embodied, to come back into their body without being defensive.

So the physics of this are really facial expressivity, intonation of voice. Pretend that the other individual is a crying toddler in a tantrum, and you don't want to yell at the toddler because they'll just get worse. So you know what you need to do. And since there's a responsibility as being an adult and a parent, that often we can implement that. But if a peer goes into that type of tantrum, we're far less effective. We get angry, we get offended, and we often get triggered into the same type of aggressiveness. And that could be spousal abuse, spousal arguments. These things occur because they're triggers to the other.

And people who are so revved up by the conspiracy theories or anti vaxxing or Brexit, their bodies are in a state of defensiveness, and that physiology shifts the capacity to interpret facial expression and intonation of voice. So you're already starting with a handicap to try to calm that person down, because they're not...

So when a person starts going on one of their rants and starts going on and on, and you feel the vitality of this aggressiveness, what happens to your face? It goes blank. It flattens. And what does that do to the other person? They interpret that flat face as aggressive because when they're in that

state, they don't see it as neutral, or waiting for information. They bias it towards aggressiveness, because that's a survival mechanism. So this inability to distinguish between, let's say, fear and anger, which is really what happens, is a problem, because in many mental health disorders, the discrimination of fear and anger is compromised, and it's primarily both, our upper part of the face stops working.

[00:39:26] Alex Howard

It's interesting the power of what you're saying. I'm just thinking about a little anecdote with our eldest daughter, who's 10. And a few weeks ago, we've got three daughters, and we bought three hairbrushes for them, and they were different colors. And two of our girls wanted the same color. So I did the obvious thing that a dad does and put them behind my back and choose which one. And our middle daughter chose one hand and didn't get the one she wanted. So she storms off, slams the door and goes off up to her room and is really angry and cross.

And I'm talking to my wife and I'm saying, it's just ridiculous. She's got to understand, you can't always get what you want in life.

My wife has been talking with a parenting expert, and I said, what would Patina say? Patina would say, you need to really go and empathize with how she feels. You need to really, you don't have to agree with her behavior, but you need to really empathize.

So I'm walking up the stairs to the top of the house, to my daughter's room, and I'm thinking, oh this is ridiculous, but I said I'd try, so I'm going to try. When I got to the top of the house I calmed down a bit, and I walked in, and my daughter was in this split-level room, top floor, in the corner, really angry.

I said, I'm really sorry you didn't get what you wanted. I can see you're really upset. I just really held this place. She looked at me after a few minutes and said, you're being really strange, but she calmed down. And within a few minutes, she'd really calmed. And just a funny end, she ended up decorating the hairbrush she didn't want, and then the other girls wanted that one.

But there was something about my kind of typical response of wanting to hold a boundary and be firm. And this behavior is not acceptable. But going and softening and empathizing, how much... And I'm thinking of what you're saying about navigating that, how powerful that can be.

Dr Stephen Porges

Yeah, I'm a father, and I wish I had more insight when my kids were younger. But the point of all of us as parents is that we bought a bunch of crap. We bought the idea that we're boundary keepers, especially the dads, and the mom can do whatever she wants, but the dad had to hold the boundaries. That's the role. And I think what we messed up on was the developmental sequence of being a good co-regulator with your child, that enabled then the child to be a good self-regulator.

So we pushed the self-regulation in almost immediately before the neural exercises of co-regulation were actually in place. And when they're in place, the body automatically says, I don't need you in the room with me anymore. I can self-regulate. I can take the vision of you being a loving father or a loving mother in space, and I'm fine. And I'll go out and I'll explore the world. And when I feel destabilized, I'll come back. If the visualization of you is not sufficient, I'll come back to be in your lap.

So the part is that we think that it's a learning world, a learning model. Like what your wife said, you need to learn. The answer is yes, you need to learn. But our bodies need to learn, too. And our bodies,

in this case, your daughter had a violation of a type of trust that everything would be good for her, because that's how we treat our children. And now, when we have three children, it can't just be good for her. And there has to be some type of an understanding of negotiation.

[00:42:56] Alex Howard

Yeah. Coming back to this conversation around conspiracy theorists, it can be hard, right? When someone is kind of monologuing at us and telling us we're a sheeple and we're an idiot. Of course, as you said, our tendency is that we're going to leave that place of safe and social. Do you have any suggestions about what helps us to hold that place?

Dr Stephen Porges

Well, let's start off by saying it's really difficult. Let's not minimize the effect. So I use terms like biological rudeness. And so if you're talking to someone, they turn away or they look at their iPhone or they look at their watch. Our physiology rapidly changes, and we feel like we lack value in their world. We're being dismissed, and our physiology goes with it. So we have to understand that. Now understanding that doesn't take away our reactions. But we honor our reactions. And we try now to modify those, dampen those reactions, in the context.

So in places like what you're describing, we, most of us, are going to get really upset when someone is going on that level. And if we can take a few breaths, if we can kind of excuse ourselves for a bit, go for a little walk or have a drink of water or something, or interact with someone that you trust to get the resilience back, we might be able to re-engage understanding the vulnerability. I think the issue is that we're often hit off guard, that we are in an engagement that we expect a rational interaction of mutual trust with the other person. And suddenly we're being bombarded with something that we didn't do it, we're not causal. We had nothing to do with it. And our bodies now shift state, and we're, in a sense, sending cues back to the person who's ranting that we don't agree with them, which we don't. But we're showing a face of contempt or evaluation.

And what I want to get at, this concept of evaluation is extremely important because evaluation to our nervous system is a threat. And schools are all about evaluation. Medicine is all about evaluation. It's all about threat. And we need to change that in medicine and, of course, education. And therapy is at least much more healthy because it's shared journeys. So education and medicine should also be shared journeys of knowledge, information and wellness.

Alex Howard

Wonderful. This has been such a treat to be able to just go down this rabbit hole together. Thank you so much, Dr Porges. For people that want to find out more about you and your work, we mentioned at the start that you are one of the founders of the Polyvagal Institute. Maybe you want to speak a bit about that, and also what else people can find.

Dr Stephen Porges

Yeah. Okay. So I also have a personal webpage, stephenporges.com. But polyvagalinstitute.org is a new not-for-profit that we created about a year and a half ago. It's basically pandemic, who has pandemic legs, or pandemic origin. And the whole idea was to create an institute that provided educational material that basically utilized and exploited in the most positive way to different areas the principles of the Polyvagal Theory, into coaching, into mental health issues, into medicine, into

education, into the judicial system. So people from all around the world have been coming together, and we're developing course materials that will be on demand off the web page.

[00:46:47] Alex Howard

Fantastic. I want to really recommend that people check that out. And also, I also mentioned you've written several books on Polyvagal Theory as well, both for professionals and also for the layperson, so just to encourage people to check those out as well.

Dr Stephen Porges

Yeah. There's a new book coming out at the beginning of October called *Polyvagal Safety*. It's being published by Norton. I think the release date on Amazon is October 5.

Alex Howard

Fantastic. So by the time this airs, that will be available, so to recommend that as well.

Dr Porges, thank you so much for your time today. I really appreciate it.

Dr Stephen Porges

Thank you, Alex, it's good to see you again. Take good care.