

Ep #244: Polyvagal Theory: The Secret To Understanding Yourself



Full Episode Transcript

With Your Host

Victoria Albina, NP, MPH

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This is *Feminist Wellness*, and I'm your host, Nurse Practitioner, Functional Medicine expert, and life coach, Victoria Albina. I'll show you how to get unstuck, drop the anxiety, perfectionism, and codependency so you can live from your beautiful heart. Welcome, my love. Let's get started.

Hello, hello, my love. I hope this finds you doing so well. This week, we are going to do a review of some very important science, and that is a review of Polyvagal 101. It is one of my absolute favorite things in this entire world to geek out on. I love nerding out on so many things, and to say this is one of my top favorite-ist is a bold assertion, and I'm making it.

Because while Polyvagal Theory is of course, just theory, which is all science ever is to be real, that's the whole point of it, right? It's today's accepted theory, and disproving of the null hypothesis, of course. Of course, that's what science is.

There are some problems with it around the dorsal break, and we can get really complicated and make holes in absolutely anything, or we could do what I've been doing, which is to say, Polyvagal Theory is such a helpful way to understand our nervous system.

One of the main tenants, one of the biggest and most important reasons that I do the work I do here on the *Feminist Wellness* podcast, in Anchored, my six-month program to overcome codependency, and in the Somatic Studio, my three-month program to get in touch with our nervous system, our bodies, somatically come back to living in our bodies, is this.

There is a lot of stigma and shame and guilt and blame in the milieu around the conversation of both somatic disconnection, "There's just something wrong with me. I'm not connected with my body," and definitely around

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emotional outsourcing. Which is the umbrella term I created for codependent, perfectionist, and people-pleasing habits.

That stigma, shame, blame, guilt, keeps us deeply trapped in these same patterns, in these same habits, in these same issues that feel really bad. And so, my work is to help dispel that stigma, shame, and blame by bringing the science.

So, I did not live in emotional outsourcing because I was broken or bad or diseased or sick. No, no, no. My nervous system learned brilliant and amazing survival skills as a baby and a child and a middle school and teenager. And so, I learned to relate to life in the way that made the absolute most sense in my family of origin, where I went to school, the communities I lived, in the cultures I lived in...

Shout out to the great state of Rhode Island. Lovely little Rhodie. I'm going to give a shout out to my native Argentina, too. Come on, you have to, right? The land of maté and asado.

I learned how to survive. How to keep myself mentally, physically, and emotionally safe, which unfortunately was through the process of functional freeze, which we'll be talking about here soon. Shutting down and not being present in my body, and being what some might call wicked codependent. None of that was a problem. I mean, it sucked, right?

But I don't need to say that's a problem, I was bad, I was terrible. None of that. It does not serve me. It doesn't serve my friends, or my exes or my family or my current love. It serves no one to castigate past me.

Next week, I will reshare the episode about how regret is self-abandonment. That was a really good one. When I figured that out I was

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very proud of me, I must say. I think it's a really good one. It goes hand in hand with this conversation. So, buckle up, that's coming. Make sure you follow and subscribe so you don't miss it.

When we are unkind to past us we are doing ourselves great harm. And so, when we can really look to the science and say, "Of course, I did. Of course, I behaved this way," that makes, duh kind of sense. I find it profoundly liberating.

The kinder we are to ourselves, the more kindness we give to the person checking us out at the grocery store, to the delivery driver, to our kids' teacher, to the kids we aren't raising or hanging out with, to strangers and friends and lovers alike. Because when we heal ourselves, we help heal the world.

The gentler, the more loving, the more understanding, the more compassionate, the more curious we can be towards ourselves, the more we can ripple that outward. And what else are we here for my loves, except to cultivate more joy, more love, more open hearted living. The essential human task is to live into our authenticity with an open heart.

So, my love, what else are we out here doing? All right, I'm going to pause there because I'm on a roll, I'm getting jazzed up. I could talk about this for hours, but I shan't, because I made you a promise, which is Polyvagal 101. I hope you enjoy it.

Hello, hello, my love. I hope this finds you doing so well. The sun is shining, the peonies are blooming, things feel pretty lovely up here on occupied Munsee-Lenape territory, the Hudson Valley of New York. I love the summer.

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I have been working with Polyvagal Theory and the nervous system for many, many years. It's been, really, a cornerstone part of my medical practice in Functional Medicine and in my coaching as a somatic life coach.

I realized the other day, I was looking through the old episode files, and I was like, I have talked a lot about polyvagal throughout these episodes over the last three years, but I've never done a full-on Polyvagal 101, and it's about time.

So, my nerds, here is possibly the biggest nerd alert I will ever give you, which is to put on the safety goggles and make sure you're wearing closed-toed shoes in the lab. I hear you. You hear me. It's important because we're about to do a deep dive into Polyvagal Theory, while, obviously, not getting lost in the weeds of heart rate variability and all those details.

Let's go over what it is, why we care, how it impacts our lives, and how it can be an important vessel for getting to know ourselves better and to living happier lives, with less codependency, perfectionism, and people pleasing. Because all of those habits impact our nervous system and are impacted by our nervous system. So, the more you know, right?

Okay, we're going to start with some deep science. Polyvagal Theory, as we think about it now, is the work of Dr. Steven Porges, PhD. It was proposed in 1994.

He studied heart rate variability in neonates, in the neonatal ICU. How much did babies' heart rates vary when they were with what we might call, attachment figures? When they were getting love and care and being attuned to? What was happening with their heart rate when they were not being attuned to? So, that's not as applicable.

Deb Dana is the Goddess; she's a social worker. Three cheers to social workers. I love you. You're amazing. She puts it into English. So, if you want to learn more, come to my workshops and check out Deb Dana's

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books, they are phenomenal. For the hardcore nerds, read Porges, why not? But it's not so much in English, it's definitely in nerd.

Okay, Polyvagal Theory: Poly means many. Vagus, or vagal, means to wander, in Latin. And so, it's the wandering nerve. It goes from the old cranium, from the brain, down through the middle of the animal that is you, and it innervates or gives nerve function to everything it finds along its path.

Some of those things include thyroid function, swallowing, digestive function, diaphragmatic action, heart rate, heart rate variability, breathing. Digestion, I've already said, but I'm going to say it again because it's a big part of us. Reproductive function, endocrine function, immune function. The vagus nerve has a hand in all of the things; it's super important.

So, polyvagal. There are many parts to the vagus nerve. Well, two main parts. Within that, there's branches. And, if you're listening and you're like, "I'm a wicked polyvagal nerve," I'm not going to get into mixed states or blended states today. It's beyond the scope of this 101. But I know you know that those exist. We're going to stick to the big three here.

What we're talking about here is the autonomic or automatic nervous system. It's automatic, meaning it does the things you need it to do so you can survive without you asking it to. So, you need to actively move your hand to pick up a glass.

Meanwhile, thank goodness, the autonomic nervous system is making your heartbeat go, making your breathing go. But let's be real; if I had to actively manage my breathing or digestion or heart rate, I'd be dead in approximately one heartbeat because I would see a squirrel and get distracted. So, I'm glad I am not in charge of that.

The autonomic nervous system then, has two branches; sympathetic activation, which is fight-or-flight, and parasympathetic. Parasympathetic has two branches below it, which are ventral vagus and dorsal vagus. The

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analogy I like to use is a car, because most people have met a car or a vehicle that goes with gas.

Sympathetic is foot all the way on the gas. It's fight-or-flight. It's freak-out. It's, "A lion is coming to eat my face and that of everyone I've ever met and loved in this entire village, forever and ever. We're all dead and we're all doomed." Foot all the way on the gas, punch the lion in the nose, or race to get the heck out of there.

Parasympathetic, which is ventral vagus, is safe and social. You've heard me refer to this a thousand times. It's balanced, or regulated. Your foot's on the gas a little bit; a little on the brake and the gas; the brake for folks who drive stick. Three cheers for people who know how to drive a stick shift. I'm so glad I learned how to do that. It's a very pleasant experience.

Ventral vagus is like driving stick shift, right? You're changing gears. You've got a little gas, a little break; you're safe. When you're in ventral you feel social, you feel connected, you feel available to the world.

The third state, which is the second part of parasympathetic, is dorsal. Dorsal is foot all the way off the gas, and foot all the way on the brake. Again, for those who are polyvagal nerds, we're not talking about ventral brake here, we're using a metaphor.

So, when you're in dorsal you are shut down, you are frozen, you are checked out. The brake is on, the parking brake is on; you're just not available.

I'm going to get into detail about what these three mean, but when we talk about nervous system regulation, it's about balancing the gas and the brake. This matters because it allows us to have some active capacity to manage our nervous system, to be in charge of our nervous system, even knowing within the context of it being automatic.

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Our natural state as pack animals is ventral vagal. That's our steady state. Deb Dana refers to it as home, safe, social. We're good, we're hanging out, we're with people we love and trust, or with animals, plants, resources. We feel good.

We all start there, even when there is a moment of threat. This is the system that controls the body and our reaction or response to threats.

There is this superpower within us called "neuroception." Neuroception is our understanding of what is safe and what is not. It's a threat detector. I like to think of it as a lifeguard on a rocky shore watching all the swimmers out swimming in the water, and deciding, "That one looks safe. That was one's questionable. That one's drowning."

From ventral vagus, that lifeguard is neurocepting the beach, watching all the swimmers. If someone looks like they're in danger it will get activated, and will go into sympathetic, mobilization energy. The lifeguard will stand up in their chair, they may jump down, they may blow their whistle, grab their little red buoy thingy they all wear, and they'll prepare to run out into the water if that's what's necessary.

I know, reach-throw-don't go. Yes, I was a high school lifeguard and a swim teacher. What's up JCC of Rhode Island? That's where I learned to swim and became a swim teacher. But anyway, I digress as usual.

So, sympathetic is fight-flight. It's get-up-and-go. It's a natural, normal part of life to have some sympathetic activation. It's the thing that helps you get out of bed in the morning, put on pants, get going.

In an extreme of danger, when we neurocept danger, it's what makes us go into high levels of anxiety, of worry, even panic. Panic attacks, feeling racy, jittery, like your hands are clammy, moving really fast. That racy feeling, that is sympathetic.

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Let's take a breath, inhale-exhale. That long, slow out brings you into parasympathetic. We like that.

If that doesn't work, if all the reach-throw-don't go, if all the lifeguard racing out there doesn't work? Well, here's where my metaphor falls apart, damn it.

The final state is dorsal. Dorsal is a collapsed state, or a freeze state, which is saying, "My fighting, my flighting, it doesn't work anymore. It's not what's going to save me, so I'm going to play dead. I'm going to pretend I'm not even here so that the predator," whatever has been neurocepted as the predator or the threat, "will leave me alone."

The example that's often used in the nervous system world is a gazelle. So, she's running across the Serengeti, or whatever savanna, and a lion catches her ankle and she will fall to the ground. But when she first saw the lion, she neurocepted the lion, she fight-or-flight. She's a gazelle, she's not going to fight a lion. So, she flighted. She started busting a move out of there, running as fast as she could.

Should the lion, lioness... because it's the lionesses that hunt... catch her by the ankle, she'll collapse to the ground and play dead. In that state the heart rate slows, breathing slows, our pain receptors are downregulated so we don't feel as much emotional pain or physical pain, and we look dead to a predator.

The lioness will then feel triumphant in all her lioness glory, and will go get her cubs for this delicious meal of gazelle. Once she's sure, once she neurocepts the lack of danger and the lioness has left the building, she will stand up, shake her whole body, and take off running.

When she's playing dead, she's playing dorsal dead, dorsal freeze response. And then, she brings in some sympathetic activation, some mobilization energy, which is run by adrenaline, norepinephrine, and eventually cortisol. It's a late-stage molecule... Stay with me... And with that

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mobilization energy, she's able to have enough get-up-and-go, to get-up-and-go.

What does this look like in humans, you may be asking? Because most of my listeners are not gazelles. I haven't done a formal study, but the predominance are humans. So, what does this look like in us? Well, like I was saying, sympathetic can look anxious, it can look activated, it can look like your mind is racing, everything's fast.

When you're in sympathetic your foot's on the brake, you don't feel social, you don't want to connect, and ideation is limited. You can't come up with solutions, and you can't really even properly think about the problem.

And, if you do, you're just ruminating and spinning and spiraling in it. You don't really want to see people. I mean, you might because you're lonely, but like, "Oh, peopling? I'm in dorsal; it's just all too much."

The reason why we're talking about this is because of, my goodness, so many reasons. First, we need to understand what's going on in our nervous systems if we are to change how this shows up in our lives.

Let's say you're in a relationship with someone and you're trying to have a conversation with them, and they keep looking out the window, or looking at their phone, or they're otherwise feeling distracted.

Your nervous system might respond to that with activation energy, if that is similar to a painful experience from childhood. If that feels like, "My parents didn't listen to me. I was negated in my emotions. I didn't feel attuned to when I was sharing something important."

You may go whoosh. In just two seconds your body may go from ventral; feeling connected, safe and social; up into sympathetic activation. You may respond to your partner looking out the window, or flipping through a magazine, or looking at their phone, like it's an actual threat to your safety.

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What's important to recognize there, is that your nervous system is never wrong. It's doing exactly what it knows is the best thing for you, but it's responding to a different "you," a different moment.

When we talk about getting dysregulated, it's leaving ventral vagus and going to an activation state, sympathetic or dorsal, without our active ability to manage that.

So, we can create motivation. We can create get-up-and-go. We can say, "Alright, I'm going to do it." We can muster some mobilization energy, some sympathetic energy. We can say, "Okay, that was a great yoga practice. Now, I'm going to go into Savasana," and we can bring on that dorsal energy for ourselves just a bit. To be in ventral, but in stillness.

When we are dysregulated, it's when our nervous system takes over. We are no longer managing foot on the gas, foot on the brake. Our nervous system is in control. And so, when I say it never makes a mistake, what I mean is this: Your nervous system is responding to another you, in another time, in another place.

What I like to say is, when we're dysregulated we forget who, what, where, when, why we are. We're shunted right back to when we were two, and had that surgery and it was traumatic. When we were four, and those kids were making fun of us.

When we were six, and our parent wasn't attuned. When we were eight, and were asked to do all of these chores and weren't allowed to play. When we were fourteen, and had our first heartbreak and believed it was all about us.

When we were... our whole lives, and watched our family spinning codependent, perfectionist, and people-pleasing habits, and perhaps felt like the real us wasn't okay there, wasn't safe there, wasn't important there.

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If silence felt scary in our homes, because either there was always yelling and silence was like, “Oh, no, something terrible is going to happen.” Or, if we talked a lot and had a lot to say, and were met not with love and care and attunement, but silence, then silence now, as an adult, can feel scary. Flip that to, loud voices can feel scary.

What any of these things can do is they can create this moment in which our nervous system is not responding to the current circumstance, the current situation, but the past one. And so, it's activating us into sympathetic. Crashing us out into dorsal freeze, based on what it's linking back to 5, 10, 15, 20, 50 years ago. Your nervous system isn't wrong, it's just reacting to a past circumstance.

When we can understand our nervous system, when we can create a map of our own nervous system, we can say, “I am reacting not to my partner looking at their phone while I'm trying to talk to them. I am reacting not to this moment of silence in this conversation that feels so uncomfortable. I'm reacting to what happened so many years ago. I'm going into sympathetic, which means I need these certain tools to bring me back, to help me regulate, to take my foot off the gas.”

Or, “I'm shutting down here. I don't have access to my words. We were just having this conversation and it started to feel like conflict, and then the clean fight club rules weren't followed, and I just shut down. I don't have any of my words. I can't access them,” which is what happens in dorsal, right? We're shut down to self and the world. We are shut down, but not present.

If I can recognize that, I can see that, I can map, what are the times and places, the situations, the circumstances, that lead me to go to there? Then, I can find my way back. I can find my way home to ventral vagus. I can come back into my own body, into presence.

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Because, when we're in sympathetic or dorsal we are not present. We are in a fear response. We're in a threat response. Something's very terrible to our nervous system, to the lifeguard that's constantly guarding the shores of our life through the power of neuroception; by looking at the world, listening to the world, feeling the energetics, feeling empathically into the world.

So, in order to find balance, in order to be able to be most present with ourselves and those we love, in order to do the things we talk about here; to live an intentional life, to live an authentic life where we stand strong in ourselves, and we say, "I'm amazing. I've got my own back." For me, necessary in there, is the capacity, the ability, to return home to ventral vagus. To regulate our own nervous system.

I'll talk about co-regulation in just a second. I do want to also bring in the other important reason why we want to learn to regulate our nervous system. It's because of the physiologic ramifications.

So, for those of you new to the show, I'm trained as a Family Nurse Practitioner. I studied functional medicine and herbalism. I studied, worked and lived, and practiced, in those worlds for a very long time. So many of the chronic ailments that we see across medicine are secondary to dysregulation. Dysregulation plays an important role in them.

When our nervous system's chronically, constantly experiences sympathetic, it can create a home-away-from-home there. I don't want to say it gets stuck in sympathetic, but kind of. That becomes our new steady state. Our body gets acclimated to, accustomed to, all that adrenaline, all that norepinephrine. It comes to feel like that cortisol-ized state is our baseline.

From there, we get all the things that happen when an animal's moving too fast. Insomnia, because you can't shut your brain down to sleep. Anxiety, diarrhea, too fast digestion, which often means you're not absorbing

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nutrients, which can then lead to other mood destabilization. A racing mind, high blood pressure, issues with the immune system and the endocrine system.

Then, when the body is stuck in the off state, when dorsal is your home-away-from-home and that becomes your steady state, being checked out, well, depression is a normal response, right? That makes sense.

As well as, constipation, mind fog, brain fog, low blood pressure; potentially dangerously low blood pressure. What's commonly referred to as "adrenal fatigue," which I discussed in one of the super-early episodes like 100 years ago. Your body starts to see that as your new normal.

So, I'm imagining your next question is, "Wait, why?" Well, think about it. You're on the Serengeti, you're on the savanna, you're being chased by a lion. Do you want your body to stop to digest a cheeseburger? Do you want your body to make thyroid hormone, to turn T3 into T4, and to activate it and circulate it around your body? Do you want your liver to do Phase 2 detox, which is the thing that gets rid of excess estrogen and leads to healthy periods?

I don't want my body to do any of that, thank you very much. I want it to shunt blood to the periphery; to my fists, to my feet. I want my heart to race so that I can run, so I can take those kinds of quick, shallow breaths that get a lot of oxygen in and out, in and out, so I can bust a move and get out of there before I'm a lion's elevenses. I don't want to be elevenses, come on guys. I'm amazing enough to be dinner, or dessert.

But my you get my point, right? I don't want to digest or have a healthy period if I'm being chased. If there's the level of anxiety that's created by the fight-or-flight system, and by the thing that activates the fight-or-flight system, that tells the lifeguard that person, who is maybe just splashing in the water, they're actually drowning, "Activate. Go rescue them. Get them out of there."

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If we want to nerd even a little harder, which I know you do, let's talk about the impairment of digestion that happens when we are not spending most of our time coming home to ventral vagal. Hear that clearly, coming home to ventral vagus. Not always in it, but returning home to it. Regulating back, and then getting dysregulated by life, getting triggered, getting activated, but coming home, and coming home, and coming home.

So, when that's not our normal, when that's not our steady state or baseline, a lot of things go awry. But the one I wanted to point out is the small intestine. You eat food, it drops into your stomach, it's coated in stomach acid; it's a bolus of food; and then it goes into the small intestine.

There, in the migrating motor complex, which is an electromagnetic mechanism, it moves the food through the small intestine. Now, if you are not in ventral vagus that system will not activate, and so that food will effectively sit there. You'll have very slow digestion and it'll rot. I know, it's so gross.

But it happened to me, I had small intestine bacterial overgrowth. Bacteria can grow on that food and all of a sudden, you have this proliferation of bacteria in the small intestine. Which then, when that food eventually makes its way into the large intestine, your body doesn't want to do peristalsis; the muscular movement of food through the large intestine.

It's like, again, "Are you kidding me?" We're being chased by a lion, or we're hiding at the back of the cave, which is the other way I think of dorsal; I think of your back, it's against the door of the cave. Ah, that's a good mnemonic. You're in dorsal. You're collapsed. "We're not digesting. Don't be a silly goose, we're not absorbing or adsorbing. We're not doing metabolism and catabolism. Get out of here."

And so, when we think about the literature on depression and anxiety, there is so much pointing to deficiencies in different nutrients, minerals, and

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vitamins, and how that's correlated with mood impairment, with depression, with anxiety, with insomnia.

When we back it up, we can see how much it's directly correlated with the state of our nervous system. I mean, and also the patriarchy and white settler colonialism, and a multitude of systems of oppression, but also the nervous system. Also growing up in codependency, perfectionism and people pleasing, and also the nervous system, right? It's not an either/or, it's a both/and.

That was a whole lot of nerd. I think it's great to take a moment and to breathe with me if you feel so moved. I'm going to take a breath in, and I'm going to focus on that long slow out because that's what helps to bring us into regulation and into ventral vagus. So, breath in, and long, slow out. I like to make a noise or hum on the out, it helps to stimulate the vagus nerve and bring us on home. In and out.

The work that I do in my coaching, the work we do in Anchored, is to help us to map our nervous system so that we know what our nervous system is up to. I bring in somatics because we can't change how we're responding in life if we don't know how our nervous system is reacting.

We need to know what embodied regulation feels like. What it feels like, what the felt, physical sensation is of being in the ventral vagal complex, so that we know what sensation to come home to. Right?

Likewise, we need to know what it feels like to be in the sympathetic nervous system. To have that fight-or-flight so we can come home from it to ventral vagus.

Too, we need to know what the dorsal vagal complex feels like in our bodies so we can come home. So we can find our way home. So that we can explain to ourselves and a partner, "It's not that I'm broken. It's not that I need to be fixed. There's no problem with me. I just have this pattern in

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my nervous system in which certain things activate my neuroception to scream out, 'Danger! She's drowning. They are being chased.'

And so too, "I have these patterns in my nervous system that say this thing is a life threat that's worthy of playing dead;" the feigned death response that is dorsal. Which is the evolutionarily oldest part of our nervous system and is the most extreme. It's the most extreme to go into that deep shutdown. The body doesn't like to do it, but it will if needed.

So, when you can recognize it's not you, it's your nervous system, from there, oh, you can just drop so much guilt, so much blame, so much shame, and can realize that these are patterns that you can interact with to change, to shift, these are patterns that you can regulate. That you can impact. That you can have ownership of.

And so, I bring nervous system work. It's a deep, huge part of the coaching that I do. The thought work protocol, as I use it, we look at the circumstance and then we look at our nervous system reaction. And then, we look at our thoughts.

I used to talk about it as circumstance, thought, feeling, action, result. And now, I've been active, I've been working with the nervous system in my coaching for 100 years, 101 actually, but I haven't really put it into the thought work protocol as its own line until this last year. I put it in above the T-line, above thinking, because a circumstance happens, life happens.

Like we talked about, your body thinks you're in some other time or place. You're someone or somewhere else. You're some older version of you. Well, I'm not going to complicate us with epigenetics, but intergenerational trauma can play a role here too, and we get activated.

Then, we have a nervous system reaction that happens automatically, in a split little second, and that nervous system reaction is what then allows us to have a thought about that circumstance.

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So, let me break this down for you. In the nervous system world, we say 'story follows state.' So, the state of your nervous system dictates the narrative that you have access to.

Let's say you're at the top of a roller coaster and you're like, "This is fine. I feel safe and social here. I'm in ventral vagus. I feel pretty neutral about roller coasters, or even a little excited. I've got a little bit of sympathetic in my ventral vagus," that's those mixed states we were talking about, "I'm jazzed, let's do it. Let's do the roller coaster."

From there you have all those thoughts. If you are at the top of a roller coaster and your nervous system is in sympathetic, it's neurocepting danger. Let's say you can't get the buckle around you to fully click and the guy's like, "Alright, we're ready to go. In 3-2-1," and you're like, "I'm not buckled!" You have this huge sympathetic activation.

The only thoughts that are going to be available to you are, "Oh my god, I'm about to die. This is the worst. How do I get off this thing? Someone make it stop. Oh, my God, oh, my God. Oh, my God. Oh, my God!" Right? Those are the thoughts that are available.

So too, if you're at the top of the roller coaster and you're there but you don't want to be. You people pleased, that's why you're up there, and you've been at... What's the place where those things are? I almost said arcade. You're at the amusement park.

You've been there all day, you don't want to be, but you're doing it to try to keep someone else happy; from your codependent thinking. You're just like, "I don't want to be here. I'm checked out. I'm not present. I feel frozen. I feel stuck. I feel trapped. I hate this." Those thoughts are available from dorsal. Those are the thoughts that your brain is going to hand you.

I like to think of it like an old-school card catalog back in the library; who remembers that? I am of that era. And so, you'd go into the library and you want to look at a book called All About Aardvarks. You'd look in the A's,

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and you'd go A-L-L, and you'd find your book. Then, you've got a card that's got the story of that book, right?

Our nervous system, our minds, and our bodies interact. Your brain holds this card catalog of all these different thoughts, and your nervous system tells it which one to pick out and to hand to you. So, there's different cards from ventral, sympathetic and dorsal, right? That makes a lot of sense.

I bring this into thought work, as an active part of the thought work protocol, because if we're leaving the nervous system out, we're leaving out a huge part of our lived experience as humans. When we can recognize nervous system first, we can recognize the automatic thoughts that come from that nervous system state, and we can do the things that help us to get home into ventral vagus.

From there, we can create our intentional protocol. We can, from there, choose the next thought that we want to think on purpose, the feeling we want to have, the action we want to take, and the result we want to create.

But only once we've regulated our nervous system. Because without nervous system regulation, in my experience, and I've coached hundreds of clients through this version, this model using the nervous system so actively, that without the nervous system there, it just doesn't work. It doesn't stick.

The nervous system, the body, will always reject the new thought until the nervous system is in ventral vagus. Then you connect in with that new thought. That is another reason why this is so important.

So, we can understand ourselves. So, we can work with thought work in a way that is nervous system, and thus, trauma-informed or trauma-conscious. So, we can bring compassion, care, and love to the people in our world; to our partners, our parents, our kids, our friends, folks in our community.

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And, can understand that someone may be saying what they're saying, how they're saying it, from a nervous system reaction. That helps us to bring in curiosity, care, compassion, and love, which lets us be a more kind and emotionally generous member of all of our communities. Right? That's a beautiful thing.

I'll also say, for parents out there, I watch my sister responding to her kids. My sister, Genie Albina, is also a life coach; it runs in the family. She's a parenting coach. I watch her having this consciousness of her kids' nervous systems.

She'll say to me, "Oh, he's going a little dorsal, I'm going to get in there for a second." Or, "He's getting sympathetic, but I think he knows how to handle this one. I'm going to give him a little space. I'm going to stand on the side and lovingly support him. I'll be there to co-regulate with him if he needs it."

Now, that's a beautiful gift to give our children. So, for parents, teachers, folks with nibblings, anyone interacting with kids, it's such a gift.

That brings me to our final topic for today, which is co-regulation. Regulation, as we discussed, is a little foot on the gas and a little foot on the brake, and being able to regulate how much of each is happening. We can regulate ourselves.

And, we can co-regulate with others. Which means that when what's going on in our nervous system is more than we can manage or regulate on our own, we can turn to safe, trusted, empathic people in our lives to witness us, to support us, to give us a touch if that feels good. I love to co-regulate with a hug.

We can turn to people in our lives and say, "I would like some support right now." My partner is so sweet. They came home the other day, they said they were coming over for dinner, and they were like, "Hey, I just had this

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really intense work thing, can we co-regulate for a minute?” It was so beautiful. It was such a beautiful moment.

So, we can co regulate with other humans. And if there aren't other humans around, then we can co-regulate with pets, with plants, with Pachamama, with Mother Nature. We can co-regulate with any of the resources that I talked about in Episode 135 “Attachment and Nervous System Resourcing.”

A resource can be an idea, a notion, or an energetic, and it's yours to connect with and to use to support you and your nervous system, so you can come home into ventral vagal anytime you want or need. I have so much more to say about this. I really can talk all about all this nerdity of the nervous system for hours and hours.

But this episode is getting long, and I want to give you and your nervous system a break so you can really take this all in, and really get solid in it. I'd also like to give you homework. Which is to begin to bring your awareness to those moments throughout your day, throughout your week, throughout your month, where you go into dorsal. Or where something happens and you are able to stay in ventral vagus.

I just want to invite you to be your own empathic witness. To be your own kind and loving witness to your nervous system. If thoughts come up and you want to write them down, go for it. If you know the thought work protocol and you want to use it, go for it.

But what I really want to invite you to do is just to bear witness to your nervous system. What are the felt sensations of each state? What happens in your body in each state? What happens in your mind? What is it like in each state?

Just take note, mark it as the felt experience in your body, and if words come, mark those too. Write those down. But it really starts with getting

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present to your own felt experience. You can learn to regulate from there, and I will keep sharing so many tools and tips for regulation.

The first one is this, if you go to VictoriaAlbina.com, right at the top of the page there's a teal bar. If you click it, where it says "Free Meditations," it'll take you to the page where you put in your name and your email, and you can download a suite of free meditations that includes an orienting exercise.

Orienting is one of my favorite nervous system resourcing mechanisms. It's a beautiful practice. You can download it for free. You can't beat that price, so why not go get it at VictoriaAlbina.com.

Alright, my loves. Thank you for listening. Thank you for nerding out with me. I love this stuff. I love humans and our human behavior, and how and why we do the things we do. It's endlessly fascinating. It's a good thing I do the job I do. I'd be sad as an accountant. No dis to accountants, I love mine. I just mean, this is the thing that lights me up. I love coaching the very mostest.

If you are loving all this nerdy talk and want to dive deeper, that's what we do in Anchored. We map our nervous system. We make this nervous system work a profound part of our thought work. We get somatic from day one, and we start to map our own felt experience in our bodies. We come into this profound understanding of the interplay between mind, body, nervous system, inner children, protector parts, we do it all.

We do it for six months in a loving, kind, generous, amazingly supportive community where you can get coached by me every single weekday for six months. How amazing is that? You can't beat it.

So, if you're ready to take that dive into learning about your nervous system, and getting coached in a somatic way, a body-based way. If you're done with living from the neck up and want to live a truly embodied life, you're going to want to check out Anchored.

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Alright my beauties, let's do what we do. A gentle hand on your heart, should you feel so moved. Remember, you are safe. You are held. You are loved. Be well, and I'll talk to you soon.

Thank you for listening to this episode of *Feminist Wellness*. If you want to learn more all about somatics, what the heck that word means, and why it matters for your life, head on over to VictoriaAlbina.com/somaticswebinar for a free webinar all about it. Have a beautiful day my darling, and I'll see you next week. Ciao.