When asked how he felt initially learning of his award, Dr. Porges said it was a two-phase response. First, he said, he felt flattered, and then, second, came a state of humility—he didn’t quite understand how he fit in with the other pioneers in somatic therapies. “I’m not a therapist,” he said, “though I’ve been told I have the heart of a clinician and I’m proud to have that.”

“What the readers need to understand is that unlike awardees in the past—people who were instrumental in body psychotherapy, developing and branding an identity and professional connectedness to therapies that carry their name—I’m an academic, and I come from a different perspective, a different history than individuals whose works originated in somatic psychology. I’m motivated by curiosity to figure out how and why something works, to understand how the mind/brain/brain/body relationship works in terms of health.”

Porges felt that the real question should be: Why am I receiving this award?
When one reflects on Porges’ work, not only the Polyvagal Theory itself but also the immense impact his research has had on the fields of somatic psychology and body psychotherapy, as well on medical, social and educational fields, it’s easy to understand why he is receiving this award. As one colleague remarked, Dr. Porges “pioneered” the Listening Project Protocol, now known as the Safe and Sound Protocol (see pg. 86), “in his laboratory to test his hypothesis that specific interventions that stimulate the muscles of the middle ear could improve spontaneous social behavior” (Porges & Dana, 2018, pg. 36).

Always the innovator, Porges has received patents for devices he designed to enhance his research projects, past and forthcoming, and he has created protocols for and promoted understanding about medical and mental challenges that have positively impacted people’s lives.

In terms of somatic psychology and body psychotherapy, his research and findings have had a profound impact by offering plausible neurophysiological explanations for experiences described by people who experienced trauma thus offering validity to both theory, client experience, and how somatic therapies work. Further, because he has written and presented extensively (250 peer reviewed journal articles) across multiple disciplines including: anesthesiology, critical care medicine, ergonomics, exercise physiology, gerontology, neurology, obstetrics, pediatrics, psychiatry, space medicine, substance abuse and psychology, his work created a portal allowing somatic therapies to enter the mainstream health care model.

“Polyvagal Theory can be thought of as the science of feeling safe enough to fall in love with life and take the risks of living” (Porges and Dana, 2018, pg. 188).

The Polyvagal Theory “emerged” from his “research and insights on October 8, 1994” (Porges, 2017, ix). It started with a personal curiosity that evolved into a “lifelong journey to understand how our physiology was related to our mental and behavioral states” (pg. 98). How it all came about is a fascinating story. Porges received a letter from a neonatologist regarding a paradox—the notion of vagal activity being protective didn’t fit with the concept that the vagus could kill you. Porges framed a question to create the foundation for his research: “How could the vagus be both protective when it was expressed as respiratory sinus arrhythmia and life-threatening when it was expressed as bradycardia and apnea?” (Porges, 2017, pg. 60). Investigating the neuroanatomy of the vagus and identifying the vagal mechanisms underlying this paradox evolved into the Polyvagal Theory.

He initially proposed his theory as a structure to generate testable hypotheses and to stimulate research. He never considered clinical applications in terms of mental health. Yet his work was embraced early on by other well-known ‘pioneers’ in the somatic field including Peter Levine (founder of Somatic Experiencing), Pat Ogden (founder of Sensorimotor Psychotherapy) and Bessel van der Kolk (author of The Body Keeps the Score). Curious about clinical applications, Porges attended meetings on attachment and trauma organized by Pat Ogden, gave keynote addresses on trauma via an invitation to Boston from Bessel van der Kolk, talked with psychotherapists—starting with Peter Levine some 40 years ago.

“They invited me into the world of traumatology; it was a welcoming, warm entrance into somatic therapies,” he said. “Without their interest and foresight, Polyvagal Theory may have languished in my laboratory and not readily transitioned into traumatology.”

Since its introduction, Polyvagal Theory has provided insight into “the mechanisms mediating symptoms that were being observed in psychiatric and physical disorders” and has “stimulated research and treatments that emphasize the importance of our physiological state and regulation of the autonomic nervous system in the expression of several psychiatric disorders and provides a theoretical perspective to study and treat stress and trauma” (Porges & Dana, 2018, pg. xi).

Continued on page 28
A colleague noted that, "During the last twenty years or so, Stephen Porges (1995, 2007, 2009a, 2009b, 2011, 2013) has been offering a continually deeper and more embodied awareness of how our tripartite nervous systems carry us along in this world, always responding adaptively in the moment. My sense is that this work has transformed him so much that now, when he speaks, we don’t just hear his ideas but actually experience what he means by safety and social engagement (Badenoch, 2017, pp. 9-10).

When sharing Badenoch’s experience, Porges explained that Polyvagal Theory has become a manifestation of how his body interpreted his theoretical model—"it’s all about connection, co-regulation," he said. “Theory and person become one, which benefits who we are.”

He explained that theory and knowledge can translate into different strategies for how we try to live our lives. Life, Porges said, is a series of transforming experiences. When we’re young, we want to put our first foot print down, but as we get older we look more at relationships, at connections with other people to optimize the human experience.

Who we are. Getting to know oneself appears to be one of Dr. Porges’ motivating themes in life. What else motivates him, his creativity, his curiosity?

“I seek information to understand how things are put together,” he said. “I am iconoclastic. I don’t accept existing models, they are not satisfying to my mind, my body. I question and create plausible explanations and feel better.”

If we don’t understand our evolutionary history, however, if we don’t understand how neurobiology/neurophysiology interplay in our lives, we can be hijacked by our physiological state. One example he offered involved educational and work place structures. Porges explained that we are rewarded for suppressing our innate need to play, to engage in reciprocal social interactions rather than experience them. As human beings, our bodies crave play, we crave dynamic reciprocity with a partner—mutuality and reciprocity, interaction and connection. Instead we are taught to suppress our bodily needs to optimize our mental capacities, which puts our body in a defensive mode—it’s put down, restrained whether we use drugs, exercise, anxiety. If we had a better understanding of our innate bodily needs, we might structure our time differently and spend less digital time and more face-to-face time. If you understand and allow bi directionality in how our lives are linked to others, it can improve your quality of life,” he said.

“We all have to sit back and feel with some gratitude who we are. Humility and gratitude. Sure, my path was difficult but not insurmountable, not that painful. It was a good time for me to come of age as a scientist. Science was expanding so there was room for creativity, which empowered me to cross disciplines. I’ve been published in many journals accepted in many disciplines, that is very nice. And it is bi-directional—it’s about what you know and what you can learn and understand. It’s a feedback loop that is part of life I’ve really enjoyed.”

“Twenty years ago, my son was just entering college, he was sitting in my office and I was very enthusiastic about what I was doing at the time. He asked me, ’Dad how long did it take before you could do what you were interested in?’ I said, ’30 years.’ He’s now a neuroscientist.”
“What I’m trying to say is that it takes a long time to be able to express creative ideas in the world we live in. We have to forge a portal that enables you to do, to be creative,” he said. “I spent decades feeding the beast. I understood the parameters of success in academia. Creativity can never be expired if you are always nurturing it. That’s why it is so important when I receive feedback from others. It makes my day when something I’ve done transcends the laboratory and my work impacts other people.”

“My fulfillment comes when other people integrate my ideas into what they are doing,” he said. “A goal for a person like me is to be embodied in other people’s work. I don’t have a goal to have a school of Polyvagal Theory or Polyvagal Therapy. To have my ideas used by others is a dream come true. Being selected for this award illustrates that my ideas have permeated somatic therapies and illustrates that I am a welcomed participant and not a peripheral observer in the domain of body psychotherapy.”

Some years back, when Dr. Porges was talking with the director of the National Institutes of Health, he boldly told the director that “We know too much to allow medicine to be practice the way it is.” Porges elaborated that “We know too much about the body to allow treatment to continue as is - without an appreciation of bodily states and how shifts in neurophysiological states influence the effectiveness of medical treatments. Current knowledge of the body needs to be infused into both clinical practice and how we live our lives.”

“I guess that statement defines me as a pioneer,” he said. Continued on page 30
Moving forward

Porges has been involved in developing newer technologies to extract physiological markers from the human voice. “Voice intonation conveys, signals safety and predation,” he explained. “Low frequency, like the roar of a lion, is a predatory sound. Our bodies attune to different voices. Neuro-regulation from voice, a melodic voice, is regulated from the vagus nerve. We are developing a noninvasive measure. We recently received a patent for the new technology to measure heart beat using a webcam device, which will serve as a research measure of physiology. A major project has started at the Kinsey Institute for Research in Sex, Gender, and Reproduction where my wife, Sue Carter is the director. He is the Founding Director of the Traumatic Stress Research Consortium."

The intention is to create an internet portal to study trauma therapists and their clients to learn what works. Therapists often have trauma history themselves. The goal is to sign up 1,000 therapists and 10,000 clients for the three-phase study: (1) survey research; (2) monitor voice; (3) monitor physiology.

"We can change our whole understanding of trauma history as a psychological and biobehavioral experience. Our whole system carries trauma in terms of the regulation of our autonomic nervous system and it is reflected in voice."

He added, "In the tradition of Alfred Kinsey, who observed the diversity human sexual behavior and changed the world, we have a large population of people how have survived trauma and abuse, especially during childhood and they have not been witnessed and described. Social behavior, health, human sexuality. Neuro-regulation and autonomic nervous system. They are all linked.

When asked why this study, now, he replied, "No one’s doing it.” One reason for the lack of research, he explained, is that “all the people I know in the trauma world are functionally grounded in their school, in their tradition. Being a scientist and not a clinician has positioned me in the clinical world as a partner and not a competitor. I am welcomed by most clinicians, across several disciplines. I am welcomed because I support their work and make a sincere attempt to understand the neurophysiological mechanisms that enable their treatment models to be effective.”

It is important to note that Porges is welcomed by many because one of his main motivating energies has always been to support other people’s work. The “Listening Project is as close to a branding that I want to get,” he said, referencing what is now called the Safe and Sound Protocol (see review on page 86). Because of his innate nature to research, share, and support, he is part of a vast network of colleagues throughout many disciplines. Through his efforts and findings, Porges has forged a collaborative foundation supporting the potential for growth and change, for expansion and expression.

**Listening to Others: A Bi-directional Response**

While giving presentations, workshops etc. Porges kept receiving requests for more clinical examples. Not being a therapist, he recognized his own limitations and reached out to colleagues to share their clinical work.

**Clinical Applications of The Polyvagal Theory: The Emergence of Polyvagal-Informed Therapies**, available this June, is co-edited by Porges and Deb Dana. The anthology offers 22 chapters with 25 contributors discussing how the polyvagal theory informed them and how they integrated it within their own diverse strategies be it trauma work, veterinary work, nursing, and educational strategies for physician-client interactions. (See page 32 for a detailed review.)

**Conclusion**

There is no doubt in my mind why Steve is receiving the Pioneer of Body Psychotherapy Award. He has continued to study, research, interact. He is informed and in turn he can discuss body psychotherapeutic theories from a polyvagal perspective with others adhering to more traditional psychotherapy models as well as those practicing across various disciplines (i.e., medical and educational).

Furthermore, he is and has been part of the foundational team of body psychotherapists, somatic psychologists, scientists, researchers, and writers who have created the path for others to follow with knowledge and science to guide and validate their way.

**Dr. Stephen Porges’** research intersects psychology, neuroscience, and evolutionary biology. Through his development of the Polyvagal Theory, Porges is discovering how the autonomic nervous system is involved in regulating the reactions and behaviors of individuals affected by a wide-range of traumatic experiences, including sexual assault and partner violence, bullying, and the trauma associated with diagnoses and treatment of the reproductive system. Currently, Porges is developing the Kinsey Institute Sexual Trauma Research Consortium to address the life-changing affects and treatments around trauma. He is creating a team of collaborative researchers and clinicians at the Kinsey Institute, Indiana University, and other partner institutions to document both the effects of trauma on people’s ability to form intimate relationships and the development of novel treatments to reverse its effects.

**References**
