



## Clinical Applications of the Polyvagal Theory: A Reflection

By Deb Dana

If Stephen Porges asked you to co-edit a book with him, what would you say? With my passion for Polyvagal Theory, my love of writing, and my friendship with Steve, my answer was an unhesitating “yes.” The process of bringing this co-edited book to publication has been a shared ventral vagal inspired adventure.

In *Clinical Applications of the Polyvagal Theory*, Steve’s intention was to gather a group of clinicians whose work was informed by Polyvagal Theory. Although the beginning chapters are written by recognized leaders in the field of trauma, this book came out of Steve’s commitment to ask people who were emerging as leaders to write chapters. Steve wanted this edited collection to feature clinicians who were in the trenches creatively bringing Polyvagal Theory into their work every day with complicated clients. As he traveled and gave presentations, Steve would talk with people who were incorporating a foundation of Polyvagal Theory in innovative ways and invite them to be a part of our book project. We began calling our chapter contributors our “Polyvagal family”, and each time Steve

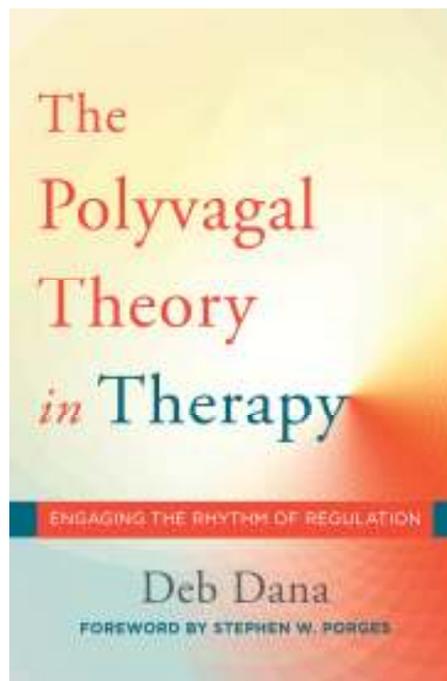
emailed me to introduce a new potential author, he said, “Here’s another member of our family.” I came to know our chapter contributors through emails, phone calls, and Skype conversations. It was a sweet experience of autonomic attunement and the ease of connection that brings, in these beginning Polyvagal partnerships.

This edited collection was a labor of love and a delicate process of helping our contributors incorporate the language of Polyvagal Theory. We asked our contributors to put Polyvagal Theory first and write about their work through that lens. To assist them in that, I took on the role of their Polyvagal Theory translator. Although our authors were already using a foundation of Polyvagal Theory, they were

not necessarily naming their work in that way so we worked to weave the theory more directly into the writing, which meant bringing it more explicitly into their awareness so it would be clear to our readers. As with any family, our Polyvagal family brought many moments to celebrate along with inevitable moments of messiness. Finding the flow of twenty-two voices and topics was a challenge. Getting writers who are passionate about their work to stay within a word limit is almost an impossibility. Deadlines came and went as we inched closer to having a manuscript to submit. There were times when I felt the joy of successfully helping an author shape their chapter and times when I waved the white flag and Steve was there to pick up the pieces and take over the editing with the same wonderful combination of kindness and brilliance that he brings to all of his work. Over the many months of work, Steve and I created a rhythm. We made time to enjoy the experience of reciprocity and a shared ventral vagal state. And when trying to help authors engage in the vulnerable process of shaping their stories became “too great a neural challenge” for my system, I reached out to Steve and found his co-regulating response. This made it possible for me to return to our authors with my own regulated nervous system and create the foundation of safety that is necessary for a shared flow of creativity and a successful editing experience.

At the same time, I was working on this book with Steve, I was writing my own book, *The Polyvagal Theory in Therapy: Engaging the Rhythm of Regulation*. Although I quickly learned that writing my own book was far easier than co-editing the collected edition, wandering back and forth between the two projects turned out to be a regulating resource. When editing other people’s words became too much, I would go back to my own writing and when I couldn’t find my own words, I’d return to another author’s chapter. It was truly a Polyvagal Theory immersion experience.

*Clinical Applications of the Polyvagal Theory* offers reflections on why Polyvagal Theory enables change and how the theory informs models, paradigms, and protocols across an array of disciplines. It presents the work of



clinicians who are helping to build the future of Polyvagal Theory. They have beautifully shared how Polyvagal Theory has been instrumental in their clinical practices not only changing how they work, but also shaping who they are and how they navigate their lives. This anthology was probably percolating in Steve’s thoughts long before he asked me to work on it with him in 2014. At that moment I had no idea what the pathway to publication would entail. Steve forewarned me that it would be both a labor-intensive project and a rewarding one. Now, with the manuscript completed, I can feel the ways these chapters invite clinicians to expand their models of practice. I am excited by the possibilities of a growing community of clinicians who are exploring Polyvagal-informed practice. And I am nourished each time another person joins our Polyvagal family.

**Deb Dana**, LCSW is a clinician and consultant specializing in the treatment of complex trauma. She is the coordinator of the Traumatic Stress Research Consortium in the Kinsey Institute and lectures internationally on ways Polyvagal Theory informs work with trauma survivors. She is the developer of the Rhythm of Regulation clinical training series and author of *The Polyvagal Theory in Therapy: Engaging the Rhythm of Regulation* (Norton, 2018) and co-editor, with Stephen Porges, of *Clinical Applications of the Polyvagal Theory: The Emergence of Polyvagal-Informed Therapies* (Norton, 2018).  
[deborahadanalcsw@gmail.com](mailto:deborahadanalcsw@gmail.com)  
[rhythmofregulation.com](http://rhythmofregulation.com)