



Sound Healing Summit™

Integral Sound Healing - From Polyvagal Theory to Practice

Tony Nec

Phyllis: So welcome, everyone. We are so glad that you're joining us today. I'm very excited to introduce our guest, Tony Nec. Now, Tony is the principal of the Sound Healing Academy, which has sound healing students and professional practitioners in over 70 countries worldwide. Welcome, Tony.

Tony: Thank you, Phyllis. It's great to be here with you and with everybody else. Thank you so much for inviting me onto this series.

Phyllis: Now, you chose the title "Integral Sound Healing - From Polyvagal Theory to Practice." Can you tell us a bit about what that means and a little bit about your practice?

Tony: Okay. It's quite a heavy title in a way. But essentially, what I thought I would do initially is just to say that integral sound healing, which is what we teach and what we practice, is a heartfelt form of a healing process that I would say is grounded in science, is inspired by spirit, and is manifested with creativity. What I wanted to do today in this talk is to talk more about the science aspect of that. But I thought that that's where the polyvagal theory bit comes in. We can talk a little bit about polyvagal theory and how that relates to the autonomic nervous system and how important that is as a controlling kind of mechanism in our body, physiologically, in our emotional and mental states, and all of that, and then also how sound relates to that. I can give some tips and techniques about how we can help to balance our autonomic nervous system using some of these insights. This is kind of more science led, you could say, but just for people who are listening in and viewing in, it's just to remember that there are these other aspects. There is the kind of the spirit realm, you could say, that's important here. There is the creative aspect of sound healing as well. It's just that we're not going to be focusing on those so much today.

Phyllis: Beautiful. Well, I've always been very interested in, and you see so much information now regarding the vagus nerve and the challenges that it can cause

and how to stimulate it and all of that. I'm curious then if you would share some of the basic science of the autonomic nervous system and the polyvagal theory with us.

Tony:

Sure, absolutely. Just for a few minutes. I mean, it's a massive subject. We could spend hours talking about this. I know we can't really dive into it in too much depth. But essentially, there's a classic view of the autonomic nervous system, which has been around in the medical schools and is still taught in the medical schools today, which regards the autonomic nervous system as being, which is correct really. It's not like it's wrong. It's just that maybe the polyvagal theory has come in as something a bit more new in the last 20 years, which is kind of updating it and resetting it a bit. The classic view is that yes, we have this nervous system, and the autonomic nervous system is part of our general nervous system. There are these two main branches. There's the sympathetic branch and the parasympathetic branch. These are nerves that essentially come out from the back of our heads essentially, from the brainstem, and connect up with other nerves in our face and in our head and so on and then go down the spine. That's primarily the sympathetic nervous system. Then the parasympathetic, it comes out from the brainstem out as a vagus nerve, and then it goes down into the body, and that connects with our heart. The spinal sympathetic nerves also connect with the heart, and then they also go down further and then connect up with the other organs in our body like in the digestive system and so on.

What happens is that this autonomic nervous system is really like a controlling mechanism physiologically, which affects our emotions and mental state as well. It's designed to help us to adjust to the stimuli that come in both external and internal. If we see something or hear something, it's going to affect us. It affects our nervous system. There's this ideally this continual switching and regulation of what happens there with these different parts of the autonomic nervous system. It all happens subconsciously. We're not aware of it. It just kind of does it. What we understand is that if somebody goes into a stressful situation or it just arises, then the sympathetic part of the nervous system switches on, and then we enter into what's commonly called the flight or fight mode. Then we get ready to run or we get ready to fight kind of thing, and all the organs and everything are switched on or switched off to enable that to happen. That's fine. We need to have that kind of regulation sometimes. If you're out in the street, you getting attack, you need to be able to do something. That's great. The problem is that when we, and often and this is the case for a lot of people, is that we're living with chronic stress conditions. We're already stressful. There's so much going on. It could be in your private life, your relationship, could be financial concerns. It could be something to do with the pandemic, whatever it might be. It's like there's a stress, and so people are living with chronic stress.

What happens is that that fight or flight mechanism gets kind of switched on and it's not switched off, and so we get into this chronic state. Then that has now been shown to be linked up to so many different health challenges that people face, common health challenges. I think it's the Benson-Henry Institute at the Massachusetts General Hospital have a statement that says that up to 90% of visits to physicians are linked to stress in some way. That's an incredible thing. If we can find ways to deal with that stress in a way that doesn't rely on pharmaceutical intervention, let's say, or surgical intervention, so using natural methods and using sound, then we can help people to deal with this kind of chronic health challenges, physical, mental, emotional, and so on. That's really where we're coming from. What we've done, essentially, is that we've been looking at this now for some time and trying to find a way to actually measure whether the kind of sound interventions that we can do actually have any effect. Are they beneficial? Of course, we haven't got the funding to be able to do a massive kind of trial, randomized control, and all of that kind of stuff that would enable us to get published in peer-reviewed journals and all that kind of thing. We would need to have millions of dollars to do that and we haven't got that.

But what we have been doing in our own quiet way is working with a software app, essentially, that is loaded up onto an iPad, and it's called ANS Analysis. Of course, I just need to open it up and then you can see it. But anyway, I'm not going to demonstrate it just now, but it comes loaded up like that. Essentially, it links up through Bluetooth with a heart monitor that people can strap on under their clothes. Then this enables what's going on in the heart to be monitored. Essentially, what it's looking at is heart rate variability. This is the beat-to-beat variability of the heart. Like I said earlier, because you've got the nerves from the parasympathetic and the sympathetic both kind of interacting with the heart, it enables through algorithms and so on to work out what is happening in both the parasympathetic and the sympathetic. It creates these really neat charts that you can show, you can use for research, but you could show to your clients or your patients or whatever where they are right now. Then it also enables you to say do an intervention with sound techniques, and then look at the effects so you can do before and after kind of comparison. That's the kind of thing that we've been doing. What we're seeing is that, yes, lots of people are coming in with the sympathetic switched on, chronic stress essentially, and then we do the techniques and the interventions with the sound. We've got some charts actually that we could show. The first chart, the first image, actually, that's just coming up is going to show that the red bar is, this is in the typical dysfunctional kind of setup is the red bar is raised and the blue bar, which represents the parasympathetic, is depressed. That's showing you that the sympathetic is switched on.

Now, when we do the sound intervention, what happens is that you get more regulation and the red bar comes down and the blue bar comes up. It all sits nicely

in this nice balanced green zone in the middle. That's what the next chart shows. What we're finding is that certain types of sound interventions are really effective at doing that and it can happen like in half an hour. You can really shift that. Then, of course, you can use the same kind of process so that if a client comes back like a week later or something, you can see where they are. You can give them practices to do at home, and they can kind of work on this on their own. That's like the classic view. Then we got the polyvagal view that comes in on top of that. I don't know. Shall I dive into that now?

Phyllis: I was going to ask too if you could just note, you were talking about sound interventions. I'm curious with all that, maybe before you dive into the next thing, is what type of sound interventions are you speaking of?

Tony: Yeah, right. Well, I mean, in a way, it kind of relates to the polyvagal theory, because the polyvagal theory, just like you said earlier, is linked in highly into what's going on with the vagus nerve. The polyvagal theory developed by Dr. Stephen Porges, PhD in the 1990s is saying something different. It's saying that actually by working with the vagus nerve that we can directly not only switch off this spinal sympathetic kind of thing that's locked on in this kind of chronic state. But also what happens, you see sometimes, is that when people live in this chronic state of stress, something switches over. This could also be triggered by trauma and maybe childhood trauma or other things like that. But people can get switched off. They can get into what he calls freeze state. In that, you've got a depression. You've got lack of social engagement. You've got chronic fatigue could be in there, all of these kinds of things. By working with the vagus nerve, you can not only switch off the chronic stress, spinal sympathetic thing, but you can also switch off this freeze and actually free people up, in a way, to come good and get involved in social interaction and all that.

Again, that's the spice of life, isn't it? The kind of techniques that we can use are in the line of what they call a vagal brake. The vagus nerve is used as a focus and that creates a break either on the spinal switched on or the freeze switched off. The thing that we can do, for example, is just with a tuning fork. This is what we call a weighted tuning fork. It's 128 hertz. The vagus nerve, it comes out from the back of the head, and then it comes down what's called this sternocleidomastoid muscle here, just behind that. What you can do, you can do this for yourself, but, of course, the practitioner can do this really nicely, is that you can kind of trace it down from below your ear. I don't know if you can see that, but there's like this muscle sticking out there. Then you trace it down below the ear, and you find this point on that muscle. That's where you want to put the tuning fork. That's directly now on the vagus nerve, and it's on both sides. Just by tapping that, putting it here, holding it, you are now tonifying the vagus nerve, or I am. You do this just a few times there and then you do it on the other side. It's really simple.

One of these things is not very expensive. You can just do that, and it has an amazing effect. This is what we've been finding. You know how you can get little devices that you connect to the heart that enable you, like if you've got a heart irregularities, it smoothes it all out, and it's like a little thing with a battery and it gets inserted in there. It helps to regulate your heartbeat and things like that. Well, also medically there is a little device like that that gets attached to the vagus nerve. You can have one of these things inserted and act doing this. Essentially, this 128 hertz is what's called a harmonic, a lower harmonic of that device. That's why it's really effective is just that we can use this audible sound, this low frequency vibration essentially to have the same effect as this medical device that is just literally clamped on to the vagus nerve.

Phyllis: I've heard of that actually. Some are more gruesome the way you're mentioning it.

Tony: Yeah. I'm sure it's not as bad as that, really.

Phyllis: That's fascinating. That really is fascinating.

Tony: I mean, there are other things you can do as well, but that's one of them. It's not rocket science, a lot of this. If you've got simple, you know, like here we have, well, you've probably come across this sort of things. It's like a chime. It's just got a lovely combination of notes that's very calming. That's going to help just to calm the whole thing down and do that. You can also bring in Tibetan bowls. I mean, I can see you've got some there behind you. You're obviously into all this. But you could use what's called the perfect fifth as a combination of notes. For example, here we've got two bowls. One is an A, and the other one is a D. You've got a D and A bowl. If you play these together, obviously it's a bit tricky on this right now, but I can create the sound here. Just put it on my knees basically on one. That creates what's called a perfect fifth, which in musical terms is one of the most harmonious combinations of two notes that you can get. That's a very calming influence as well. You can play these for yourself. You can play them for your clients and so on, all of that as well. There's quite a lot you can do. You can also do this humming. Humming is really great for tonifying the vagus nerve because everything to do with your voice production is so close to the vagus nerves there, and all the vibration is just spread out and start to tonify it in that way. Just a simple hmm just for a few minutes. This is all kind of stuff that people can do for themselves. It can make a real difference.

Phyllis: That's wonderful too that you can provide some simple things that people can just do really on their own.

Tony: I really believe that we've all got the capacity, because, ultimately, all healing is self-healing. Whatever the intervention is, it's all designed to get your body back

into shape again. That is done by your body for your body. Whether it's drugs or like pharmaceutical interventions or whatever, it's all designed to get your body working better. Ultimately, it is all about self-healing. With the sound interventions that we do, we really stress that this is something, the more people engage in this directly for themselves, the better it is. We can all do this for ourselves. Sometimes it's difficult to handle it on your own. Sometimes it's really good to go to a qualified practitioner, somebody who is trained really well and understands what's going on. I guess that's what we're doing at the Sound Healing Academy is that we're providing this really world-class, top-quality, professional training in sound healing. It takes quite a long time because people have to do workbooks. They have to do case studies. They have to do practical exams. They have to do a lot over a long period of time to prove that they've got the knowledge and the skills and the expertise and the confidence to be able to do and handle this properly with clients.

See, one of the things about polyvagal theory that Stephen Porges really majors on and also the other people who worked with him now, because there's many people now in psychotherapy and psychiatry and bodywork and social work and all of that who are really onto this and proving its effectiveness. But one of the key things that he says is that he says, safety is the therapy. Safety is the healing. For a lot of people, they're living in fear, and the fear has this negative effect, this unbalancing effect on our autonomic nervous system, and it creates as part of what creates all these chronic health challenges. One of the prime things that we really need is to let go of that fear and to feel more safe. It's quite hard sometimes just to do that on your own. You know that you've got this fear pattern going on, and you kind of know what you should be doing to get rid of it and all of that, but somehow it's quite difficult on your own. Actually going to be with somebody who understands that and can create and hold a really safe kind of space for you and can nurture you in a heartfelt way and to do that is kind of gentle interventions that's appropriate to your condition. That's really helpful sometimes.

Phyllis: Well, let's take a little bit of a deeper dive into the polyvagal theory and how that is relevant to sound healing.

Tony: Sure. Okay, so polyvagal theory, as developed by Dr. Stephen Porges and then also now by some of the clinicians and others who've been working with him now over the past 20 years, is saying that there are really these three levels that are important, sort of the top level, which is the newest form of development in the autonomic nervous system. Because what Stephen Porges did was to take an evolutionary biological approach to the autonomic nervous system. What he's been tracking is the evolution of the autonomic nervous system in mammals over long periods of time. What he's pointed to is that there is now this more recent evolution in our autonomic nervous system that is closely associated with the humans, the human beings like us. We're a bit different in that way from other

forms of mammals. This newest form of evolution of the autonomic nervous system is very much about social engagement. It's about all the cues that are linked in automatically that seem to happen, all the facial kind of nerves that get involved with facial expressions we make, the beautiful smiles that you've got there and all of that. That's really important for us as human beings. This is nonverbal communication. I mean, actually, I haven't got the statistics to hand, but you probably know, everyone knows is that isn't that the case, they say that if you meet someone new, within 30 seconds or something, you get a sense of whether you like them or not. You might not even have said anything to them in that time. It's like, there's all of this stuff going on that is below our awareness, and it's all getting picked up through our autonomic nervous system. This is all about the social engagement part of that that is relatively in terms of evolutionary biology quite new.

This is ultimately linked to the vagus nerve, but it's called the polyvagal theory. Poly means many, and vagal relates to the vagus nerve. What he's saying, actually, is that there's not actually just one vagus nerve circuit. There's actually more than one. He distinguishes primarily two vagus nerve circuits. You've got what he calls the ventral vagal circuit, which is essentially down to your abdominal area. You can't quite see me. I could stand up a little bit. But it's down below your heart. It's the vagus nerve we've been talking about here that innervates and connects in with the heart as an organ. But then you've also got what he calls the dorsal vagal circuit, which is all the organs below the the abdominal area. It's all the digestive ones, for example. These, he's saying, are actually two separate circuits. They're connected in the brain, but they actually come out in different points in the brainstem. They serve different functions.

Now, the dorsal vagal circuit, the one that's below the abdomen, is the one that gets locked on in this freeze state. Where you're shut down, you're not engaging in life and with other people so easily, you're switched off in that sense and it's often as a result of a trauma, which creates the fear. People have got these triggers that kind of put them back in that fear state. They might have been in a state where they've tried to run, or they've tried to fight or whatever, and they've been kind of stressed and all that. But like I said, something switched that off, and they're now in this free state. That's all to do with really what he calls the highly active dorsal vagal circuit. The sympathetic one is the standard one that relates to the heart and so on. That's also the fight or flight thing that can also get stuck on. But what he's saying is that this other ventral vagal circuit, which is the upper one, the one that we were talking about here, is the one that has the capacity to influence what's happening both with the spinal one, the sympathetic one, and this dorsal vagal, one, the lower dorsal circuit. By applying these techniques to create this vagal brake, you can have an effect on these two other aspects of the autonomic nervous system. It's not like the classic sympathetic, parasympathetic kind of thing. It's related to that, but it's an evolution of that. It's got these three

different ways of looking at it. But the vagus, this upper ventral vagus circuit is so significant because when that is then tonified, and that's what we can do with sound like we were just talking about some of these techniques, is that that can enable people to relax if they're really wired up. It can also enable people to unfreeze and to come out into the world again. Both of those have the effect of being able to engage more easily in life and with other people and with the natural flow and ebb of the great mystery of life that we have and that we live in. We can flow more easily with that sense of oneness, ultimately in peace that is our natural state.

Phyllis: Now, if someone is to go to a graduate of your program or to come to you as a client or a patient, then what is the format of a session or to kind of figure out how it is that you are going to help that individual with the challenges that they're experiencing?

Tony: Yeah, sure. Sure. Yeah, that's a really great question. I think we have to say that there are these two primary ways that we can work. One is working one on one with people as a sound healing practitioner and a client. The other one is working in groups. That would be what generally people call sound baths or something like that. In a way, what we do is that we've developed a method, you could say, which is really at the core of what we mean by integral sound healing, is that we have a method that is not a linear step thing. It's a dynamic interacting field. But there are certain key elements within that that we pay attention to. If not in every session, in every sequence of sessions, so if you've got, say, four or six sessions, you want to make sure that all of these elements are covered because by doing that, the thing is going to be effective. There are different aspects to this. Of course, we spend a long time teaching all of this and can't go into too much depth just now. But the first step in this process is all about connection. That relates to that very thing that Stephen Porges was saying is absolutely fundamental is that safety is the healing.

Just feeling safe and connected is the most important thing. What we would teach then as part of that, when somebody comes in the door, so to speak, let's say in a one-on-one session, is that we would say, okay, we need to be aware of their body language as they come in, right? Are they coming in wired? Yeah, let's get on with it. Or are they coming in really like this and their energy is withdrawn and maybe they're not really wanting to look at you? We need to respect that. Actually, having direct eye-to-eye contact and sitting opposite each other and engaging in lots of conversation at the start might not be appropriate at all. It might be that, actually, you just have casual glances at your client. This is what helps to make that person feel safe. It might be that you don't do a lot of talking with them initially. That might come later as they engage more. It's people in the freeze state, right? People who are switched off. These are people with autism, for example, which could be kids or adults or in the autistic spectrum.

Then it's like, okay, so why don't we just play some sounds, just some gentle sounds? See what you like. You can give me a little nod or put your thumb up or something. Let me know what you're liking, what you're not liking. Let's just play around here a little bit and experiment. That would be an approach to get started with some people. It's very much individually based. That's the point I'm trying to make here is that the way we teach people and the way I would operate is not a like a one-size-fits-all thing. We need to be sensitive right from the moment we start engaging with people as to what their state is. Then we then develop a whole series of ways of working that's appropriate to them. You see, the standard way people think about sound healing, if you're going one on one, is that you arrive, you have a chat, you lie down on the therapy couch, and you have this person play all these sounds around you, and you get spaced out, and you have a wonderful time. Then you get up and go, yeah, that's great. Thanks very much. See you next week. There's nothing wrong with that, but it's not necessarily the best thing for everyone. With some people, it's actually better if we learn from the music therapists who are probably even more highly trained than we would teach people, but their kind of main method of working is to actually work with musical instruments and your voice to actually engage with people in an appropriate way and get them in playing the drum, get them doing a little bit of humming, get them tapping a bowl, this kind of thing, and getting them to start to wake up their energy and to come out of this freeze state and just to have a bit of fun.

With people who are living with autism, that's really great. Or people who've had a stroke and they're paralyzed down one side of their body, it's like, actually giving them something that they can do, just to tap and create some sounds and be engaging, it starts to get the cognitive connections going. It starts to get the joy flowing. That's completely different from just turning up and lying down on the couch. It's a dynamic process. That's the point. It's an individual dynamic process. We need to be grounded in science. We need to be inspired by our spirit, essentially. We need to allow our creativity to flow, to manifest the sounds that are appropriate for each person or for each group of people if you're dealing with that.

Phyllis: Beautiful. Tony, do you have any additional tips or techniques that people can use to improve their health and wellness that are within the sound healing realm?

Tony: Okay. It does depend a lot on who you are and what your condition is and what your state is. But I would say that there's an interplay between the sounds that we can create with our voice and also our breathing, our whole breathing mechanism. There's a big interplay there. It's very difficult to do any singing or chanting or toning, vocal toning, without breath. Normally, it's done, you breathe in and then you go ah, and it comes out that way. There's a really strong connection there with the breathing. What I would say is that, along with the sounds, and I think this is really important, is that it's important to have an awareness of your breathing.

Some people's breathing is quite shallow and fast and so on. Just taking in these deep breaths is really important. I just find that two minutes, three minutes, five minutes, however long people have got of just taking in a deep breath and just allowing a sound to come out. You don't have to be a singer. If you can talk, you can do vocal toning. You can do something to help yourself. Most people can talk and so most people can help themselves with their voice in this way. I would say taking the deep breath and then on the outbreath, you just let it sound out. You see, we make natural sounds that are healing all the time. If you cry, then they the sound. That is healing. Isn't a great? I don't know. Recently, a cat died of ours. It's like a member of the family passing over. It's really sad and I was actually with her. Unfortunately, it happened in the last few hours of her life and holding her while she was going through that process. When she actually passed over, I just felt really sad. The tears come. The kind of the uh and all the wailing and everything, it just comes out. It's like natural sounds. It's like the sounds of laughter is the sound of joy. We are making natural sounds all the time. I really would like just encourage people to just become aware anyway of the natural sounds that you make in your daily life, not just talking but all these other things and just listen to them and just be aware that actually, yeah, we can do this. We can actually just allow those sounds to come through at any time just for a couple of minutes while you're in the shower or something. No problem. It's really good to do that.

Phyllis: Oh, beautiful. Very simple things too. I think it's really important to share these things that are just so simple. You really don't need to go out and buy anything. You don't really need to have background knowledge to be able to do these very simple things for yourself.

Tony: Yeah, absolutely, absolutely.

Phyllis: It's self-care.

Tony: It's self-care, isn't it? Of course, there's a lot more. With this whole vagal brake thing, I could just give you one more tip that is very quick and easy, and it can incorporate sound but doesn't need to is you just interlock your fingers like this. You put them behind your head. The idea is that, I mean, I'm going to cut this short because there's quite a lot more you can say about it. But basically, all you do is you're not doing like in yoga or a whole spinal twist. You're just going to move your head first to the right. As you do that, you allow your eyes to go all the way to the right, just comfortable as whatever you feel like just. It's just a comfortable movement with the eyes going there. Of course, you can breathe out and do that and you can breathe in and come to the front. Then you breathe out and you go the other way. As you're breathing out, you could also release a sound. You could go mm. Then you come back to the front again. Now this time you do it again. But this time, you might want to stay there just for like 30 seconds or something. This is where actually, if you do bring in a sound or release a sound that is like a

releasing, comforting, relaxing sound like a sigh, like, oh, then you're really creating this vagal brake, and you do that on the other side as well. It's like it just frees up tension in your neck and your shoulders. I don't know if you even got a sense of that just from what you did. That's a wonderful little exercise that you could do anywhere, really. It creates this vagal brake. Whether you're stressed out and uptight and whether you're in that freeze state and locked down, it's going to help you.

Phyllis: I actually do feel a difference. I made a sound on this side. I do. It feels much more clear on this side.

Tony: Okay. Yes. You do the sound on one side and not on the other. Hey, that's a good experiment. Yeah, that's really good.

Phyllis: This is probably a good time then to just ask if you have anything you'd like to quickly share about upcoming events, programs, workshops that you have going on?

Tony: We've got teachers all over the world. I imagine people who are viewing this series are all over the world, really. We have teachers in the US, in the UK, in Australia, other places. We also have a whole lot of different programs online that people can access at any time. I think what we're going to do actually is we have a special program on sound healing and the autonomic nervous system that goes into all of this in more depth. For people who are really interested, I think we're going to do a special offer on that in August, by the end of August. If you go on to our website, which is academyofsoundhealing.com, and you just look for that under online courses, you'll find it there. There's a special offer. You can get this really cheap there. You can dive into this in even more depth. I think that'd be really helpful for some people who want to explore this in more depth. We've got so much going on all over the world. It's difficult to really pick out anything, but I think that that will be a good thing for people. So we'll make sure that's all set up for everyone.

Phyllis: Beautiful. Well, it has been such a wonderful time. This has always been a dear subject to my heart too, so I am very interested in learning more about it just from hearing you speak. It was such a pleasure having you join us today and share. I want to thank all of our listeners for coming and joining us today as well and being part of this beautiful session. Thank you so much.

Tony: Oh, thank you so much for this. It's been a real pleasure being with you and sharing in this way. It's been a real delight. Thank you so much for inviting me. I'm delighted to have been here. Hopefully, this has been of help and interest to some people.

© 2021 The Shift Network. All rights reserved.