If there was ever a time to welcome fresh ideas into addiction treatment, it is now. The pandemic has brought with it a growing epidemic of people struggling with anxiety and depression who are turning to addictive substances and behaviors for relief. These individuals are showing us that the current brain disease model of addiction is failing. Nowhere is safe, and no one is safe, until we are all safe enough.

This is where Polyvagal Theory has much to offer. Safety is the backbone of the theory, and the precondition for health, growth, and restoration. Safety is the foundation of life. In safety, we develop the capacity to regulate our moods. From this perspective, addictions develop in the absence of, and as a result of the search for, enough safety. Whether in the struggle to calm down or seek aliveness, addictions help us in the short term, only to profoundly hurt us in the long term.

Too many of us live in dissociated states, having forgotten we live in bodies. Top-down, cognitive-centric culture views addiction as a malfunction of our computer-like brains – the result of a deeply imbued mind/body split that denigrates embodied awareness – and views bodies as inanimate objects devoid of value, except for carrying the brain around.

We may have forgotten our bodies, yet our bodies have not forgotten us. Gendlin, father of the term felt sense, taught that when we pause to listen to the body from the inside, this listening connects us to the trust we have lost – trust in our embodied intelligence. Gendlin’s interoceptive process of felt sensing returns us to the experience of our bodies as living organisms in continuous interaction with our environment. When we listen deeply, felt sensing reveals an implicit intuitive knowing – as Gendlin would say, “the right next step to carry forward.”
In the face of threat without escape, addiction makes sense. But in the context of enough safety, addiction seems bizarre – even masochistic. Addiction helps us endure painful and frightening experience through the powerful process of neuroception, Porges’ word for the unconscious way our autonomic nervous system evaluates and seeks to adjust our physiological state to ensure survival. When we tap into the continuous interaction of body and environment, we appreciate how context tells the story.

Each of the authors in this section offers an embodied and non-pathologizing way forward in understanding and treating addiction. In my paper with Steven Porges, we explore the adaptive nature of addiction through the lens of Polyvagal Theory and Gendlin’s concept of felt sense.

Nancy Falls delves into the healing power of embodied presence as an essential part of the therapeutic journey. Dawn Flynn takes us into the world of Chinese medicine and the energetic function of the heart with regard to women and addiction. Steven Hoskinson and Bach Ho shift from the pathologizing paradigm to a positive reinforcement framework for treating addiction, which is based on Organic Intelligence®.

Opening this special section, we have included Dr. Gabor Maté’s presentation at the Forum on Integrating Trauma and Addiction Treatment hosted by USABP and IBPJ in February. Maté’s trailblazing work reveals his passionate and steadfast commitment to challenging the current brain disease model of addiction. He demands that we address the root causes, the systems of oppression that continue to traumatize our culture. Maté joins us in our mission to bring embodied awareness into the healing journey of addiction.

We hope you will find this special section on addiction intriguing, and look forward to hearing your thoughts and experiences on the developing process of embodying addiction treatment.