

Therapy Chat Episode 246

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[00:00:00] **Laura Reagan:** [00:00:00] Therapy chat podcast, episode 246.

[00:00:04] **Announcer:** [00:00:04] This is the Therapy Chat podcast with Laura Reagan LCSW-C. The information shared in this podcast is not a substitute for seeking help from a licensed mental health professional. And now, here's your host, Laura Reagan LCSW-C.

[00:00:34] **Laura Reagan:** [00:00:34] Today's episode is sponsored by Therapy Notes. Between writing notes, filing insurance claims and scheduling with clients, it can be hard to stay organized. That's why I recommend Therapy Notes. They're easy to use platform lets you manage your practice securely and efficiently. Visit therapynotes.com to get two free months of therapy notes today, just use the promo code "TherapyChat," when you sign up for a free trial at therapynotes.com.

[00:01:01] [00:01:00] Hi, welcome back to Therapy Chat. I'm your host, Laura Reagan and today is the last of the replay episodes that I've been doing recently. I normally do this during the summer, but, um, since summer was different this year to say the least, I did it in the Fall, August and September.

[00:01:25] This week's replay episode is a very interesting conversation with Dr. Gretchen Schmelzer, the author of the book *Journey through Trauma: a trail guide to the five-phase cycle of healing repeated trauma*. This episode is a great one to listen to if you would like to understand more about the process of trauma therapy and how healing goes. Her book is wonderful. I recommend it to people all the time. So I hope you will enjoy listening to my conversation with Dr. Gretchen Schmelzer [00:02:00] and as always, please go to iTunes and leave a rating and review, if you enjoy listening to the podcast, that is a way that will let Apple know that it matters to you.

[00:02:13] And if it matters to you, then they may think that it will matter to more people, and they will show it to more people with their algorithm and their iTunes platform. So, I appreciate you listening. I should appreciate your support in every form, and I'd always invite you to leave me a message on SpeakPipe.

[00:02:33] You can find that SpeakPipe app on my therapychatpodcast.com website, and you can click on the SpeakPipe button and leave me a message in your voice. I love hearing from you. Thanks so much!

[00:02:49] Hi, welcome back to Therapy Chat! Today, I am so honored to be speaking with Gretchen Schmelzer, who is the author of *Journey Through Trauma: [00:03:00] a guide to the five-phase cycle of healing, repeated trauma*, Gretchen, thank you so much for being on Therapy Chat today.

[00:03:06] **Gretchen Schmelzer:** [00:03:06] Thanks so much for having me. I'm excited to talk about the book and, and to be helpful in any way I can.

[00:03:13] **Laura Reagan:** [00:03:13] So I'm so glad that you're here and let's just start off with you telling our audience a little bit about yourself and your work.

[00:03:22] **Gretchen Schmelzer:** [00:03:22] Okay. I trained as a therapist, I'm a psychologist by training. I trained as a therapist for about the first 15 years of my career. I worked in a lot of different settings outside the city of Boston and I, oh, I really want my career goal was to be the Chief Psychologist on a Child Psych Unit. So, I wanted to work in every possible domain around kids. So, I worked on inpatient units, I worked in mental health clinics, I worked in schools, I worked in residential, sort of all the way around the kid world.

[00:03:55] And then I did my post-doc at, at [00:04:00] UMass Medical Center in the, uh, behavioral medicine clinic, because I really wanted to study mindfulness more deeply, and the center for mindfulness was part of that post-doc. And when I was finishing my post-doc, a friend of mine who had started a consulting company, they got a contract with the United Nations Development Program to do work in four different countries, helping the countries strengthen their response to HIV and AIDS. And one of the countries was Cambodia. And um, that had just recently, actually at that time come through the Khmer Rouge and they contacted me to look at how do you teach emotional intelligence? Because this was a leadership intervention around a public health issue.

[00:04:47] How do you teach emotional intelligence to people with a trauma history? And so I went down and helped them think about that. And when I finished my post-doc, they offered me a job to do the work [00:05:00] with them in Cambodia and to, to shift over in some ways to this leadership role. So I spent 4 years and 11 trips working in Cambodia, at the country level of helping them strengthen their response to AIDS, but also kind of trying to come closer to understanding the trauma, and how that affected their ability to lead their organizations, to be more effective.

[00:05:25] And, as I was doing that work, I started to see the parallels between the kids and families that I had worked with, who had come through trauma, and now the country level working through trauma, and at the same time I was working on my own trauma history-so these three things combined to start me thinking about what are the patterns I'm seeing that could help people understand where they were in the journey of healing?

[00:05:53] So that's really the sort of the arc of what, what took me to my book, and also the many [00:06:00] different ways I use the learnings that I've gotten.

[00:06:04] **Laura Reagan:** [00:06:04] Wow. Yeah. So that's really, I mean, just even hearing about that, that's so powerful thinking about trying to teach people emotional intelligence, who've just literally just like escaped this horrific extended period of trauma.

[00:06:24] **Gretchen Schmelzer:** [00:06:24] The biggest thing is, I mean, I think it's true for all trauma. But you don't go right at it. You know, I think, I think we're a very action-oriented culture, right? So people want to lose weight. You just go on this diet and we have this idea that you can just fix things with a protocol. And,

[00:06:42] **Laura Reagan:** [00:06:42] Oh, I love you for saying that. Thank you for saying that. I love what you're saying. Keep going, keep going.

[00:06:47] **Gretchen Schmelzer:** [00:06:47] So in Cambodia, I will say that it wasn't a trauma intervention. I mean, we were teaching emotional intelligence, but it was the latest, in some ways, the latest, loveliest form of [00:07:00] helping people understand self-awareness, helping them understand the impact of stress, helping them understand how to think about how other people feel right now in a country that had just come through war.

[00:07:12] They were an, a specific kind of war in the sense that the social, it was really the social fabric that got destroyed. I mean, people got very hurt, and many died, but there were, they were sort of taught to, to tell on each other to mistrust each other. Exactly. And so, you know, we had them working in small groups and just the act of having to practice some trust in each other and to work together on different tasks, had them doing what they hadn't experienced in a long time. Right? So that, that was healing, very healing. Even if we never said the word trauma out loud, there's a lot of healing that can happen without saying the word trauma out loud.

[00:07:59] And, you know, [00:08:00] and I think as we will talk more about the book, that's why I have these different phases because in the preparation phase, you can do a lot of work without having to go right at the, at the hardest part or the most hurt part.

[00:08:13] **Laura Reagan:** [00:08:13] Yeah. Yeah. I, the reason I reacted so much to you saying that is because while it's exciting and it's very hopeful to see how much trauma has become a buzzword and how everyone wants to, well, not everyone, but, many therapists are eager to learn more about working with trauma because it's the hot new thing. And I want everyone to learn about working with trauma because it affects so many people who seek mental health services. And so many people who don't seek mental health services.

[00:08:49] But I, I do often hear, people saying so, so the person has trauma. So then, you know, what's the [00:09:00] intervention? What do I do? Like what's the protocol on that? It's like, no, no, no, no, no. The other problem with protocol you know, there, there are certain for, for bunch of things like severe anxiety, or OCD, there's there are places where the protocols are fabulous and they work great.

[00:09:17] But the problem with, with trauma is that for people, especially with repeated trauma, it takes a very long time to heal, and the protocols are all short-term.

[00:09:27] Exactly.

[00:09:28] **Gretchen Schmelzer:** [00:09:28] Primarily because they're studied in graduate school and graduate is the root of graduate school. So, people want to do their studies and get out.

[00:09:37] Right? And they don't want to spend seven years or six years or whatever studying it. Um, so we don't really know, or understand what it takes to heal over the long-term in terms of research, because that's not what's studied typically.

[00:09:55] **Laura Reagan:** [00:09:55] Right. And you know, what I've found in my experience is that [00:10:00] the deepest work, the hardest work, the longest work in trauma therapy, is building up enough of a trusting therapeutic relationship for the client to be able to really

look inward at things that are, they haven't looked at before and feel safe enough in the therapeutic relationship to be able to explore that. Even not about telling what happened, but just what trust is and, you know, things like that...

[00:10:34] **Gretchen Schmelzer:** [00:10:34] What it means to be seen or what it means to say something that's true or, I mean any of those small, any of those small acts of trust or vulnerability. Exactly. You said it perfectly.

[00:10:46] **Laura Reagan:** [00:10:46] Yeah. So those aren't just, you know, protocols. Those are, that has to build with time, and it's just, different for everyone, how much time it takes. Exactly. So how did you get [00:11:00] from working in Cambodia to where you are now? What, what happened in between?

[00:11:06] **Gretchen Schmelzer:** [00:11:06] So in addition to the work I was doing in the consulting world, I was doing other kind of larger organizations. So I was seeing what it just took to, to help people change and grow. Right? So just healthy growth. And then I actually took a break from the consulting world and had a private practice for about three or four years.

[00:11:27] So I brought some of those ideas back to a private practice and played with them and began writing the book. It took about eight years of writing to, to map it all out and get it all, in there. And then about two years to get it published, to find an agent and find an editor and that whole process and in part of that process, I started a blog because I was having a hard time finding an agent and my friends were like, start a blog.

[00:11:57] And then I thought, well, nobody reads them. But then I realized [00:12:00] that was the safe part. Nobody reads it. So I could just write anything. So I started in October, I think, of 2015 or 2014, and started writing this blog, and the following June, I wrote a blog piece called the letter your teenager can't write you that went wildly viral.

[00:12:18] Like I didn't even believe in viral, but it 2 million hits by now.

[00:12:22] **Laura Reagan:** [00:12:22] Wow.

[00:12:23] **Gretchen Schmelzer:** [00:12:23] It just keeps circling the globe. And because of that blog post, an editor found it and forwarded it to an agent, and that's how I ended up getting my book published. That one, that one piece, I mean, it was, it was a year of writing, but that one piece did it.

[00:12:39] And, and, and I think the blog was a good place also to practice going back and forth with people. So, you know, seeing the impact of pieces of writing and, um, getting some feedback and seeing what was helpful. Um, so the blog was out, about two years, uh, while I was doing the [00:13:00] final edits of the book. And I found that really helpful.

[00:13:04] **Laura Reagan:** [00:13:04] Yeah, no that's and that's exactly how I found you. I, I saw blog posts that people would share on social media, you know, cause most of the people I follow on social media are somehow related to either therapy, or trauma, or both. And when I read articles about trauma, I want to share them with my people who follow me

on social media, but only if they kind of match up with my understanding of trauma and how I work, so everything I've read of yours was just that way. And and more obviously where I'm saying, wow, like she's really wise. I want to learn from her. And then somehow, I saw that you had a book out, probably I probably I follow your page actually, that's probably how, and I was like, Oh, I'm getting that. So, and then I said, Oh, I'm going to ask her to be on Therapy Chat. Definitely. So, let's talk about the book. I I'm [00:14:00] really curious about the five-phase cycle of healing, repeated trauma. Can you kind of go over what that is?

[00:14:08] **Gretchen Schmelzer:** [00:14:08] Sure. A big motivation for writing this book was that as it, when I was a therapist, what I found was that people would come to therapy with a trauma history and they wanted to feel better and they would come initially and they would start to feel better, but once you started working on the Trauma you feel worse for a while and it, it, it often felt like people would hit that place and quit and not, you know, not just with me, but I'd see it, I saw it all over in the clinics or in the repeat people on inpatient units where they, they would hit this place and they would quit.

[00:14:48] And I. What I wanted was to create a map where people would know where they were, so that they could know what to expect and when to expect it [00:15:00] and, and have some compassion for themselves of saying, of course, it's hard. This is supposed to be hard. Now this is the hard part.

[00:15:08] And I I'm, uh, a backpacker was, especially when I was younger. And, you know, if you have the White Mountain Appalachian Guide, it tells you trail for trail, what you're going to expect that this part is very steep or on this part, you need to bring the water or, and that really is helpful to have that level of explanation for the terrain that you're on. And I felt like as a, somebody who studied psychology as well, I had lots of books that explained it to me as a therapist, but I didn't see that same level of explanation for clients of knowing when it was supposed to get hard. And I thought they could use the information. It's a little like Penn and Teller. I don't think it's going to ruin the experience to know the trick. I think it just gives them information.

[00:15:58] **Laura Reagan:** [00:15:58] Yeah. Thanks. Thanks. Thanks [00:16:00] for saying that too. And it's just making me think what a no-brainer, because in terms of like therapists don't necessarily tell clients what to expect or when it's getting hard, the therapist knows that it's supposed to get hard, but they may not necessarily convey to the client. It's okay. This means that we're doing the work. It's this isn't this, isn't an, a sign that something's going wrong. This is actually a sign that things are going just how they should go.

[00:16:34] **Gretchen Schmelzer:** [00:16:34] Right. Actually, you know, when things are starting to come apart a little bit at a certain point, actually it's a really great sign.

[00:16:41] Like, as you were saying earlier, it means I trust you or, and you trust me, right. That we can let, you can let down your guard enough to start sharing that story. Um, which, what might make you feel worse. So I think it is it's and I think some of the, you know, I have some [00:17:00] compassion for the therapist side because the books that are written for therapists are written in such a way that they're not easily translatable right over to clients. I found even in doing the writing of the book, that I would read the literature that was written

for professionals, and I would write a first draft and they would take almost two or three drafts to get it from the professional to language that really was very respectful that I would tell my best friend or a sibling. Right? So it's, it's not an easy transfer of language. The, so I think, um, we haven't made it easy for therapists either to help people understand. And I, part of the goal of my book is to create a common language between therapists and clients so they can both use the same language and then same book to discuss where they are, and they don't have to translate.

[00:17:56] **Laura Reagan:** [00:17:56] Yeah. And I'll just add, and I'm definitely going to give you [00:18:00] time to talk about what the five phase cycle is, but I'll just add that when I try to explain to clients about, you know, give psycho-education and things like that, it's I understand it, and still it's hard to sometimes explain it, but. When I explain it from more of a, like, bottom up way where then, um, you know, it's harder to put it into words because you're, you're talking about something that is harder to verbalize, but when you're, when you're just using like the lingo, that's super cognitive, you know, it goes right over, like, it goes over my head. I can't remember it. I can't retain it. I can't recite it back. So I talk about it from what I know. Like from years of working with people, but it's still, it's still hard to verbalize it. So I'm grateful that you've created this.

[00:18:55] **Gretchen Schmelzer:** [00:18:55] So the five phases are, and I, you [00:19:00] know, credit where credit's due, so the five pieces are built on the people who did work before me. So Judith Herman who had three phases and a number of other people, what I found with the three phases. So, um, safety, um, remembrance and mourning and reconnection, was that they didn't fit my experience as a client enough to explain it to other people. So, the first phase of safety, which is I think an important goal for both client and therapist, the problem I found with that was that it didn't match.

[00:19:31] When people have a history of trauma, they often don't even know what the experience of safety feels like, felt like calling that first phase safety. Nobody. People could work for years and still not feel it. Right? And while I think that is still part of the goal of, of the beginning of therapy or treatment of trauma, I called the first phase preparation because you don't have to have a specific feeling [00:20:00] state. You can be preparing whether you're anxious or whether you're calm, or you can be doing the work in that phase. And I liken that to a Himalayan climb that you, there are internal resources, and external resources that have to be strengthened and bolstered before you can take on your history of trauma.

[00:20:21] And some of that is building the therapeutic relationships. Some of that is making sure that you have you're in a safe place, that you have a place to live, and you have food and you have a way to, to maintain your life in some way, you should have some sort of meaningful activity, whether that's paid or unpaid, so that you feel connected to the present in a meaningful way.

[00:20:43] And that's your anchor rope so that when you head into the past, you don't get sucked in only there. You don't see your life as only the hurt part. So the preparation phase. Sets you up and sets you up with a safe connection to a helper, [00:21:00] to head into the trauma.

[00:21:02] The second phase. So if once the first phase preparation goes along, once you feel safe enough, often the second phase, which is unintegration starts. So, it's a planful coming apart. It's not disintegration. It's not, you don't just fall apart, but you start taking apart some of the defenses or protections that you had up to survive your trauma and your story starts coming out sometimes. But because of the way traumatic memory works, your story doesn't typically come out in a giant coherent narrative that comes out in, in different fragments.

[00:21:40] You have images, you have emotions, you have experiences. You may have interactions in the present that remind you of the past. And as they start coming out, you can move to the next, the third stage, which is identification. You start putting names and words to those experiences [00:22:00] so that they start having more sentences around them.

[00:22:03] You can start to create, begin to create your story. And when all of the pieces come together in one place, that's the fourth stage, which is integration. And then, you know, if you have an emotion of an experience and a story of an experience and an image of an experience and a felt a lived experience of that experience, and they all come together, you then have a scenario that then can become the past.

[00:22:29] It's a, it's a coherent narrative. And in that moment, the past becomes the past and in integration, there's really two pieces: one is mourning, which is I, that really happened to me. I can see the past for what it is. And the second part is a new beginning where, you start because you it's now in the past, there's this open space of possibility of what might be in the future and a future becomes possible because you're not living in your trauma [00:23:00] entirely.

[00:23:01] And the last phase is consolidation where you get to settle with some of the new learning that you're doing, some of the experience of, of trying different things than you did that are different than the ones you use to survive. And it's my experience that both the preparation phase and the consolidation phase are sort of the ones left out of treatment.

[00:23:25] We want to rush, you know, people want to get to it, and they don't let the learning settle long enough. They want to move on to the next thing or they want to be out of there. Those two phases. I think in terms of being a therapist, are the ones that require our discipline the most of saying, no, actually we need to stay here or let's have another conversation about what worked about what we just did.

[00:23:49] So we truly understand what supports we can build on and keep in place so that we can keep that healing going.

[00:23:58] **Laura Reagan:** [00:23:58] Let's just pause for a [00:24:00] moment so I can give you a little bit more information about why I love Therapy Notes. I switched to Therapy Notes a few years ago. I'd say it's about three years now, I believe, and I have never regretted it. I was very happy with the EHR I used before, but Therapy Notes is more intuitive. I love the interface. The customer service is fantastic, and I love how I can get my notes done quickly because I can customize the template that I use for my notes. And there

are opportunities to put check marks rather than having to write out the intervention used. So I have cut my time, spent writing notes way down, which is wonderful because I like to focus on seeing clients. I know documentation is an important part of our work, but it can also be [00:25:00] time-consuming and that is why I love using Therapy Notes. If you are considering switching EHR or you're looking for one to use in your practice, give Therapy Notes, a try. You can get two free months by using the code "TherapyChat." Now let's get back to our interview.

[00:25:23] Yes. Sometimes as therapists, we just are like performing with techniques week after week. Oh, this week let's do this. And it's like, wait, where's the, in-between where, you know, it just settles in and, and you explore that.

[00:25:39] **Gretchen Schmelzer:** [00:25:39] Right.

[00:25:40] **Laura Reagan:** [00:25:40] And obviously in the beginning, the preparation. Do you conceptualize mindfulness as being a part of the healing process for trauma?

[00:25:52] **Gretchen Schmelzer:** [00:25:52] Yes, I do. I it's actually in the book, I use it in a number of places. So, I use it [00:26:00] in the preparation phase. It's really about bringing back online some self-awareness. So, you know, maybe we need to go back to looking at trauma and repeated trauma. So there's, I make a real distinction between a one single-incident trauma and repeated- trauma because in a single-incident trauma, you know, there's sort of a mammalian response to that, that we have increased, um, adrenaline and increased sort of fight or flight response. And. That triggers a whole set of other behaviors and startle response, and lack of sleep and can't eat and a whole bunch of things that put, just puts us in sort of crisis-mode. But if you know, and I sort of liken it to, if, if you're in a car- accident, most people experience that. But if you were in a car accident every day for seven years, your body can't muster, that kind of [00:27:00] response.

[00:27:00] So it begins to create a set of protections, so it doesn't have to gear up for constant trauma. And some of those protections are about, are often about shutting down and becoming much more numb so that you're not taking in the outside world and you're not experiencing the anxiety or adrenaline inside your own body, it allows your brain to kind of keep functioning, even though you're, it's really in crisis mode, it just kind of snips all the wires like for a fire alarm, you know, it's not blaring anymore.

[00:27:36] And you know, so in repeated trauma, there's really three forms of trauma. There's the, what did happen? The stuff you remember. So that's the first form of trauma. The second form of trauma and repeated trauma are the protections that you create so that you don't have to experience all the trauma.

[00:27:55] That's what I was just talking about the numbing and sort of not feeling [00:28:00] yourself, not often, not trusting the outside world, having to do everything yourself. And then the third form of trauma, which is the one that almost never gets talked about is what didn't happen. So while all the trauma was happening, you weren't developing other skills.

[00:28:19] So if you think about a country at war. And it's the country at war. They're not building roads, they're not building schools, they're not developing new businesses. You know, they're only in defense mode and it's true for people as well. So when, when kids are coming through trauma, in childhood, they're often not learning the skills of how to make friends.

[00:28:42] They're not learning how to live thoughtfully, do a task, or in terms of doing their homework. They're not asking, learning how to ask for help. They're not learning how to self-soothe. So there's a whole set of skills that they miss out on. They learn how to survive well, but they [00:29:00] don't learn how to thrive.

[00:29:01] They don't learn the skills that would help them in a healthier state.

[00:29:06] **Laura Reagan:** [00:29:06] They miss opportunities to move through the developmental tasks of growth. Right?

[00:29:13] **Gretchen Schmelzer:** [00:29:13] And this happens, it's not just people who experienced childhood trauma, you know, men and women who go off to war at 18 or 20 and are there for four years, don't get to do the tasks. Some of the tasks of young adulthood. So, and you know, and I've worked with people, physicians, who, you know, go through the medical training world, and that is a form of trauma in and of itself where they, you know, they get no sleep there. They don't get to be outside their world. They're in front of people who are dying and they don't get to do some of the tasks of adulthood that young adulthood there either.

[00:29:51] And so there's a, you know, this, what didn't happen is the hopeful part of, of healing where it's, I think [00:30:00] we get really stuck on the, what did happen. Um, and you can see it even in sort of the, the self-help world where all the books are the stories about other people's trauma. Right. And, uh, and not about the stories about healing or how to heal from it.

[00:30:17] **Laura Reagan:** [00:30:17] Yeah. Yeah. Very true. So it was what happened and what didn't happen as the third one. And what's the second one?

[00:30:26] **Gretchen Schmelzer:** [00:30:26] The protections you use for them play sort of what aided survival or the protections you used to, um, survive the trauma. So if I, if. It's kind of hunkering down and never asking for help work, then that's something I'm, I don't know how to do yet.

[00:30:45] And that's really common for trauma survivors, which makes therapy or any treatment hard because, you know, from the therapist side or the group therapist side, they're like, I'm this loving, wonderful person. Why don't you trust me [00:31:00] from the client side? They're like, are you kidding me? Like, I don't trust anybody or why would I need help, or I have no idea on God's green earth would help even feels like or means like, I don't even understand the concept.

[00:31:15] **Laura Reagan:** [00:31:15] Yeah. And I think so often we don't realize how defended we are. So we go in and we're like, no, I trust you. And you know, to the therapist

and. And we don't really, I mean, you know, and I mean, you may trust them not to like physically harm you, but when it comes to opening up your deepest pain or even, you know, anything that you feel that you can't really tolerate looking at, we're not even aware how, how guarded we are. I've certainly experienced that myself.

[00:31:52] **Gretchen Schmelzer:** [00:31:52] Yeah, I have to. And I think that, I think that's a, it's a really important point to remember, remember that these it's such small increments, [00:32:00] you know back to your question of the mindfulness piece. So, you know, in the preparation phase, I, I actually even sometimes go a step before mindfulness. I used to call it just the quiet place. Like helping people just sit quietly for 10 minutes, like sit there with a mug of tea and just be able to sit quietly and then move from there to a more mindfulness place of, can you feel your feet? Can you feel your hands? You know, can you feel your breathing sort of reconnecting their heads and their bodies and then begin to start naming, like, can you say what emotion is going on inside you? So you kind of re wiring the self-awareness muscles very slowly and doing that as slowly as it needs to happen. I think the, the piece about mindfulness is just that with trauma survivors, they need to go [00:33:00] much more incrementally often than the kind of standard, you know, throw on the Headspace app and go for it um, model of mindfulness.

[00:33:10] **Laura Reagan:** [00:33:10] Yeah. And what we as therapists need to remember is that oftentimes our own discomfort with that stillness and our own discomfort with not doing something or even with the person's pain that we're witnessing can cause us to want to rush through. And that's not, that's not really what helps.

[00:33:32] **Gretchen Schmelzer:** [00:33:32] No, I, I, I think, I feel like I've spent a lot of time as somebody who's done supervision, both of therapists and executive coaches, really trying to help people understand that these tiny increments are huge wins. Like I wish that there was like a gallery of people who could do the wave or something and a therapist is just able to sit there quietly and let somebody, do the small act that they [00:34:00] can do that day, whether that's naming an emotion, whether that sharing something small, whether that sharing something they're proud of and being able to see that as huge. And I think I, I actually think most therapists do, but they're the world. I want to say the world outside of us doesn't support it. And the, the behavioral plan worksheets, don't, it's hard to make that sound like you did something, right. So I think there's a whole pressured world outside of therapists that don't hold them as they try to hold people who are really trying to learn something hard.

[00:34:34] **Laura Reagan:** [00:34:34] Yes. I agree. It's partly the whole paradigm of the, I guess, the treatment model or the mental health system in the largest scale.

[00:34:46] **Gretchen Schmelzer:** [00:34:46] Yeah. It tagged along with the medical world, right. It, you know, th that had pros and cons and one of the, one of the cons is I think it has, um, it's hard to proceduralize some of the work we [00:35:00] do in, especially in healing trauma.

[00:35:03] **Laura Reagan:** [00:35:03] So Gretchen how do you see this book being able to help people who've experienced trauma.

[00:35:09] **Gretchen Schmelzer:** [00:35:09] I've got, I have been getting some, some lovely emails and letters from people who are really saying it's helping them stay engaged in the work, it's doing what I had hoped, which is it's helping people understand where they are to tolerate the, the difficult parts of it or the pain of it. And there, they're bringing it into their therapists and they're being able to say, this is where I think I am. What do you think? So I think that's, that's part of it. I've gotten letters from therapists who said, who didn't have trauma histories and said, it's really helpful for me to understand what people have lived through and what they're going through with me. And so I think for therapists, the books helpful in understanding the experience of [00:36:00] a trauma survivor, if that's not your experience as a therapist and it isn't for all therapists.

[00:36:05] **Laura Reagan:** [00:36:05] True. And you, you and I were talking before we started recording about kind of the idea of a common language.

[00:36:14] **Gretchen Schmelzer:** [00:36:14] Yeah. So I, I really feel like it's important to have some common language about what the what we're working in. So a client can say, I feel like I'm falling apart, is this unintegration?

[00:36:28] And the therapist can say, I don't know, maybe let's look at it. Right. But. At least now we're looking at the same possibilities rather than trying to have to use the language of either pathology, right. I'm falling apart or, um, you know, I'm having a nervous breakdown or the language of psychotherapy that might feel more foreign to the client.

[00:36:51] So I, I feel like the common language allows them. To get at the more nuanced part of whatever that the client's [00:37:00] experiences but be on the same page.

[00:37:03] **Laura Reagan:** [00:37:03] That brings me to something that I see woven through through your book when they're, when they're using a common language, they're in relationship that this, that the, the client is not going through this alone, we're working together to figure this out.

[00:37:19] And one thing that you say in your book, quite a bit as well. It says right on the back "Healing is possible. It requires courage and it cannot be done alone."

[00:37:30] **Gretchen Schmelzer:** [00:37:30] Uh, so I, that is a caveat of my book, which, you know, people can agree or disagree with, but I, I focus on repeated-trauma and most repeated traumas are relational-traumas. They're perpetrated by people. And I believe that relational trauma trauma has to be healed in relationship. I don't really have a dog in the fight about what kind of relationship entirely. I mean, I think therapy I'm personally biased. I liked therapy. I think it works. I think in some ways people heal best [00:38:00] in the configuration in which they were hurt.

[00:38:02] So I, you know, I really got to see in Cambodia that the group level work, really helped people who had been hurt at the group level. I think that it can happen. You know, I know people who've had people who supported them within their communities of faith. I don't, I think there's a lot of different ways to find people who are helpers, but I.

[00:38:24] I don't think you can heal from repeated- trauma without a relationship and a helping relationship. So I don't think it's up to your spouse or your kid to heal you either. I think those people can support you and they can help you believe in relationship. But I don't think that they can hold the work that is required for healing trauma.

[00:38:44] Yes. And

[00:38:45] **Laura Reagan:** [00:38:45] I agree with you. It's, it's the healing. And I've heard this before, basically that the, the trauma occurred within relationships. So the healing has to happen within relationship. It doesn't have to be with a therapist, but [00:39:00] you know, relationship is how the healing happens because we are humans were meant to be in connection with one another.

[00:39:09] **Gretchen Schmelzer:** [00:39:09] Right, I mean, we are designed to grow in relationship, right? We're our attachment systems. Our whole brain limbic system has, is designed to learn in relationship. And I actually also really believe that healing from trauma is really about re connecting the growth and learning system. I think growth and development shuts down when trauma starts.

[00:39:34] And reigniting that reconfiguring that is what healing is. So it's very, I think that the healing from trauma is very connected to how we learn and grow anyway.

[00:39:49] **Laura Reagan:** [00:39:49] That makes sense to me too. So Gretchen, where can people find your work and your book in particular?

[00:39:57] **Gretchen Schmelzer:** [00:39:57] My books available online in you know, [00:40:00] most online stores and a lot of your bookstores. And there are many libraries. One of my best friend's sons was looking up all the libraries. You can find it in and emailing me the, the numbers of books in each library. And my, I have a blog that is www.gretchenschmelzer.com and there's, there are a lot of articles and it's free and I don't have any advertising on there.

[00:40:26] I want people who want to heal to go to a place where they're not like clicking around all the time. So there's a, if you just go even go into the search bar and put trauma in you'll, you can pull up a number of small articles there. And I think I also wanted to say that, you know, the book is geared towards the individual level of system, so therapists working with clients, but that I'm doing a lot of work right now at the community level.

[00:40:54] So bringing the same ideas of the five-phase model and the three kinds of repeated [00:41:00] trauma to communities who are battling with opiates, or battling with child maltreatment, or battling with homelessness, and helping kind of organizations and communities understand the, these issues with trauma, that they all have trauma as a root cause.

[00:41:17] And so you can think about doing this as a therapist, um, with your clients, but if you work in larger organizations, you can also start thinking about how does this apply at the group level? Because the book really was written from multiple perspectives.

[00:41:33] **Laura Reagan:** [00:41:33] That's wonderful. And I am just so grateful that you're out in the world doing this work on all these different levels. It's so, so important and needed. And especially someone who really has such a strong background knowledge base in this work. It's really wonderful what you're doing.

[00:41:52] **Gretchen Schmelzer:** [00:41:52] I really appreciate the chance to share it. So, I'm really grateful to you.

[00:41:57] **Laura Reagan:** [00:41:57] Thank you so much for being on Therapy [00:42:00] Chat today. And I, I will definitely put a link to your website on the description of the podcast so people can click on it from listening so that way they can make sure your name is spelled right and everything.

[00:42:17] So Gretchen, thanks so much for being my guest today. Thank you.

[00:42:21] **Gretchen Schmelzer:** [00:42:21] Bye!

[00:42:24] **Laura Reagan:** [00:42:24] Today's episode is sponsored by Therapy Notes. There are many ways to keep your practice organized, but Therapy Notes is the best. They're easy to use secure platform, lets you not only do your billing, scheduling and progress notes, but also create a client portal to share documents and request signatures. Plus they offer amazing unlimited phone support. So when you have a question, you can get help fast. To get started with the practice management software trusted by over 60,000 professionals, go to therapynotes.com and start a free trial today. If you enter promo code TherapyChat, they will give you two [00:43:00] months to try it out.

[00:43:01] **Announcer:** [00:43:01] Thank you for listening to Therapy Chat with your host, Laura Reagan LCSW-C. For more information, please visit therapychatpodcast.com.