

## Therapy Chat Episode 297



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[00:00:00] **Laura Reagan:** Therapy Chat Podcast Episode 297.

[00:00:04] **Announcer:** 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:** Thank you to Sunset Lake CBD for sponsoring this week's episode. Use promo code: "CHAT," for 20% off your entire order at [sunsetlakecbd.com](https://www.sunsetlakecbd.com). Sunset Lake CBD is a farmer owned, small business that shifts craft CBD products directly from their farm outside of Burlington, Vermont to your door. Sunset lake CBD has something for everyone.

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[00:01:23] Hey everyone. It's me. Laura Reagan just wanted to make sure that you know about what I've got going on this summer. I don't think I've really talked about it much here, which is silly, but in case you didn't hear, I did start a second podcast called Trauma Chat, which is really for anyone who wants to understand what trauma is and how it shows up in our lives.

[00:01:49] As you've heard me say, if you've listened to this show, I've mentioned a million times that people tend to think that trauma is something that happens [00:02:00] to someone else, something horrific and unthinkable unspeakable. And that is true. Trauma is that, but it's also experiences that are very commonly shared among many of us, most of us. On Trauma Chat I break down what trauma is in hopefully understandable language that's not stigmatizing. I know I couldn't have possibly captured every thought there is about trauma and every aspect of trauma and how it shows up, but I hope that trauma chat will be helpful to people who really don't understand what trauma is.

[00:02:37] And maybe wondering, do I have trauma, you know, or wanting to better understand what someone they care about is going through. And most importantly, how to get help if you have experienced trauma, what to look for, how to describe your experiences or how to find the words that, that name, what you've been through so that you can then connect with [00:03:00] whatever type of resource support, whether it's therapy or a podcast that you'd like to listen to, to learn more about it, or an article, another website.

[00:03:10] This is my hope in creating Trauma Chat. And the second part of that is the new Trauma Therapist Network Community that I'm creating. It's unbelievable to say this because I've been laboring behind the scenes to bring this to you for a long time. Starting in around 2018 is when I first had the idea.

[00:03:32] And then the process of getting from there to here has been slow and with many twists and turns, but I'm creating a community for people who have experienced trauma to find help. For trauma therapists, to find other trauma therapists to network with and refer to and gather and collaborate and share ideas and hopefully come together in person in, [00:04:00] in gatherings that I don't know if there'll be able to happen in 2021, but maybe by 2022, we can have in-person gatherings of trauma therapists to provide support to one another and combat the isolation of trauma work. Even if you work in a large agency or group practice, trauma work is so isolating. It's just part of the nature of it and connecting with other people who get it it's so valuable. The participants in my trauma therapists consult groups share how useful they find them to be because we're in our offices doing our work, and then we go home, and it can be really hard to receive the same kind of support that you give to your clients.

[00:04:43] So I hope that Trauma Therapist Network will be a useful resource for you, whether you are trying to find more information about trauma, or if you are a trauma therapist yourself to learn more, please go to [traumatherapistnetwork.com](http://traumatherapistnetwork.com). The [00:05:00] website is not live yet as of June 28th when I'm recording this, but it will be live by August 1st, if all goes well.

[00:05:09] And hopefully there may be even a soft launch before. A beta version. So please go to [traumatherapistnetwork.com](http://traumatherapistnetwork.com) where you can find a free download and sign up to be notified as soon as it officially goes live, whether you are a therapist or just someone who wants to learn more about trauma, there's a download there for you, different ones for each group.

[00:05:33] And I hope that this resource that I've really created from the heart will bring healing to more people. I really want people who have experienced trauma to be able to find the right kind of support. And that's why I created the Trauma Therapist Network. I hope you will join me there like I said, you can get more information by going to [www.traumatherapistnetwork.com](http://www.traumatherapistnetwork.com) where you [00:06:00] can sign up to be notified as soon as the official website goes live, which will be in August of 2021. If you're hearing this after August 2021, go there and hopefully you will find the site and you'll see everything that it has to offer. I cannot wait. This is such a labor of love, something that I've really poured my heart into.

[00:06:21] And I'm just so excited for you to see it. Thank you so much for your support.

[00:06:30] Hi, welcome back to Therapy Chat. I'm your host, Laura Reagan, LCSW-C. And today I am so honored and excited to be interviewing Dr. Arielle Schwartz, who is a highly accomplished, like all of my guests, author and teacher and therapist who specializes in complex trauma and dissociation. We had a beautiful conversation.

[00:06:55] I loved talking with Arielle. I hope you will enjoy listening [00:07:00] to this episode too. Let's just dive right in.

[00:07:07] My guest today is Dr. Ariel Schwartz. Dr. Schwartz. Thank you so much for being my guest on Therapy Chat today.

[00:07:14] **Dr. Arielle Schwartz:** Thank you so much for having me lovely to meet you.

[00:07:16] **Laura Reagan:** You too. I'm very, very happy that we're talking and I'm excited because we're going to be talking about bringing the body into trauma therapy safely, keyword safely, but let's just start off by if you would. Could you tell the audience a little bit more about who you are and what you do.

[00:07:34] **Dr. Arielle Schwartz:** I'm happy to. So I am a clinical psychologist in Boulder, Colorado, and I have lived here for about 25 years or so originally I moved out here because I wanted to study Somatic Psychology. And, uh, Naropa University is housed here.

[00:07:54] And it's one of the few programs that in the 1990s was offering [00:08:00] master's degrees in somatic psychology. So I had this opportunity really early on, and if you're a listener and you're not sure what somatic psychology is it's body psychotherapy. It's bringing the body into therapy. And in the 1990s, there wasn't a whole lot of awareness about this.

[00:08:17] It was really new and, and unclear and, and kind of burgeoning in the field. And now it is really kind of center in trauma informed therapy. It really holds a very esteemed role in recognizing that we can't talk our way out of a trauma response or a traumatic event, because as Bessel van der Kolk has written, the body keeps the score.

[00:08:43] So early on in the 1990s Bessel would come and be part of our training, right. And Peter Levine and Pat Ogden, and a lot of the, the kind of founders of this field, we're all collectively, you know, in, in this, uh, [00:09:00] I think, you know, it's a think tank, but it was like an embodied think tank of how we engage the body for the purpose of healing trauma.

[00:09:08] And when I graduated from that program, I had some of my own experiences. I had several car accidents that also actually were sitting on top of, uh, traumatic events that I experienced in my own childhood. And when the car accidents happened, it was almost as if a kind of a lid had come off of things that I had pretty well contained.

[00:09:32] And so someone had recommended that I go try EMDR therapy and it was so beneficial for me because it allowed me to kind of access not only the recent traumatic event, but it really provided me very direct access to the unresolved traumas of my own childhood. So, I was sold on EMDR after my own personal experience with it and ended up [00:10:00] training in that in 2001.

[00:10:02] And I have now become an EMDR consultant, and I have been teaching others in the EMDR and Somatic Therapy modality for the last 13 years or so.

[00:10:13] **Laura Reagan:** Wonderful. And you even have a book specifically about that, right?

[00:10:17] **Dr. Arielle Schwartz:** I do. I, um, I have the EMDR Therapy and Somatic Psychology book. And then, you know, because again, my interest in trauma is not just single incident traumas, but it's very much this understanding that often if you're a human on the planet, nowadays you're experiencing challenges and often those challenges begin in childhood. And so the accumulation of what might be many different events that then are all stacking up and are all building up inside of the individual and informing our sense of identity or sense of efficacy in the world or whether we feel helpless or powerless.

[00:10:58] Right. All of that really, [00:11:00] um, took my lens toward complex trauma as a focal point. And I have books on that as well, of course. The, and maybe one other thing that I'll share about my uh, kind of professional background is that around the same time that I began to study somatic psychology, I also completed a certification as a yoga teacher.

[00:11:20] So I have a very deep kind of parallel track in my work of providing therapeutic yoga for trauma and have taught that for many, many years.

[00:11:30] **Laura Reagan:** Beautiful. Yes. And I'm so interested in the way you practice and, um, you know, I know that you're a yoga teacher and all of those methods woven together, you know, The Somatic Psychology Perspective, and EMDR, and Yoga.

[00:11:46] And it seems like you actually let's talk about that since we're here. Um, what, who, what type of, what would be kind of a typical presentation of someone who you would be working with and, [00:12:00] and what ways do you use in working with them?

[00:12:02] **Dr. Arielle Schwartz:** Yeah. So again, because I'm largely known for working with complex trauma and more specifically trauma that has its etiology or origins in childhood, that a lot of who, of whom I work with, and a lot of who gets referred to me are individuals who have that background.

[00:12:22] And so I specialize not only in complex trauma, but also in dissociation. And of course, dissociation often gets kind of, we have a fear response, or we think of those extreme models of someone who, you know, is really fractured. But in reality, while I do

work with individuals who have DID and who have, you know, very, very kind of structural based dissociation, but I also really see that dissociation lives on a continuum.

[00:12:52] And that, uh, again, if you're a human on the planet, we all have Dissociation or dissociative strategies or coping in [00:13:00] one way or another. It could be as simple as zoning out while you're binge-watching shows on Netflix or scrolling your social media or emotionally eating or, um, addictive substances. Right. At your, you know, your glass of wine every night or several glasses, whatever it might be that kind of helps you cope with the world or with your internal states of what you don't want to feel.

[00:13:25] But when someone has a history of trauma from childhood, we often see that those coping mechanisms, where it's dissociation and checking out and zoning out and fogging out, not feeling, they're stronger. They're, they're more at play. And the repercussions of those strategies tend to also show up, like there's all of this that I don't want to feel an often I use this beach ball metaphor. It's like, I'm trying to hold all of the emotions and all of the memories and all of the [00:14:00] sensations at bay. I don't want to feel any of that. I don't want to acknowledge that it's even real. And it's like trying to push a beach ball under water. And we can do that temporarily. And it's no big deal, right?

[00:14:12] It's compartmentalization, it's containment. But when we're trying to push that down constantly and chronically, at some point it's exhausting for our psyche. It's exhausting for our system. It's, you know, if you go back to the beach ball underwater, at some point, your arms are going to get tired.

[00:14:29] **Laura Reagan:** When it keeps bobbing up.

[00:14:31] **Dr. Arielle Schwartz:** That's right. You get distracted. And then it slips through your hands. And when it slips through your hands all at once, what happens, but it creates this big splash, right? And then you have to put your life back together and you have to push it back down. And so what we want to do with, with really wise trauma therapy, is attend to what's being held.

[00:14:53] And sometimes people are like, well, I've got five beach balls under the water, right? Like I only have two hands I'm really working hard here. So [00:15:00] what we want to do is really allow this to come to the surface in a slow modulated way so that once the beach ball finally reaches the surface, no big splashes happening.

[00:15:11] Right.

[00:15:12] **Laura Reagan:** That's a beautiful analogy, really.

[00:15:15] **Dr. Arielle Schwartz:** Yeah. Yeah. And, and what, what then happens is that once we're not working so hard to keep all of that out of conscious awareness, we feel more real. We feel more connected to ourselves. I can actually feel the, the feelings in my chest and

my belly and my throat. I can feel connected to those different thoughts or memories that I might have. And I also have more access to my aliveness and my joy.

[00:15:41] **Laura Reagan:** Key. Because it's not just about what you don't want to feel, but it's what you lose access to because of the protective dissociation that is keeping you from knowing or remembering or feeling or fully grasping what happened because it's more painful than you can [00:16:00] tolerate. That's the whole thing.

[00:16:01] **Dr. Arielle Schwartz:** That's right. And that's especially true when it begins in childhood, because as a child, you really need that sense of my parents are my primary caretakers are predictable and they're safe and they're good people.

[00:16:19] We need that so badly as, and when they're not good people, when they are the same people that are harming us, it creates such a intolerable feeling, right? That very often the reality of what's actually our sensory experience is telling us of what's happening can't be tolerated and that gets pushed down.

[00:16:42] And then what we rely on is the fantasy. The fantasy of the good mommy or the fantasy of the good daddy that really underneath that scary look on their face or the alcohol on their breath, or the harsh words that they're saying, or the inappropriate touch that they're doing, underneath all of that [00:17:00] they're a good mommy, their a good daddy.

[00:17:02] And I'll rely on that fantasy as a way to actually push away the sensory reality of what happened or what's happening. Right.

[00:17:10] **Laura Reagan:** Yeah. For survival.

[00:17:11] **Dr. Arielle Schwartz:** Yes. And we take that strategy with us into adulthood.

[00:17:15] **Laura Reagan:** Yeah. So I think, you know, you're already touching on something about that beach ball that it has to be buried for you to be able to, you know, under the water for you to be able to stay alive because you have to be able to believe that your parents are safe and you can trust them. And that they're going to take care of you because you do depend on them for survival, you know, less when you're a teen, but you know, the younger you are, you literally cannot fend for yourself and that's right.

[00:17:45] **Dr. Arielle Schwartz:** Yeah. And, and I think that quality of, um, of having to keep that at bay and then, you know, to live in the, as if were to live in the fantasy and then, you know, to [00:18:00] basically try and protect other aspects of your world from being contaminated by what might be happening at home or what, what you can't talk about.

[00:18:08] Right. And so then you perpetuate the part of self that basically is living as if none of those bad things are happening and then it gets further pushed back. But I think one of my main intentions as a trauma informed provider, as well as educator, is that I want to

really de- pathologize dissociation. I want to recognize it as, as you just named a survival protective response.

[00:18:34] And that no matter where you are on that dissociative continuum, you're not broken. You're not damaged. You're a human surviving this complex world.

[00:18:44] **Laura Reagan:** Thank you. And yes, I agree with you about the de- pathologizing of, of dissociation, but as you kind of mentioned in the beginning, you didn't say this directly, but culturally we get in pop culture or in films and media, [00:19:00] we get portrayals of what dissociation is.

[00:19:03] It's, you know, civil or it's, you know, something where it's, it's an extreme portrayal that is scary. And it's, you know, it's kind of intended to be scary in that case. But, and dissociation can, can be scary because it can feel very out of control. And you know, when you don't know what you did, if it's to that extreme where you lose time and things, it's, you know, there can be situations where you're inadvertently in an unsafe situation and because you're not fully present, you're not safe.

[00:19:34] But it's not you who's the danger to other people. It's other people who intend harm, who could be the danger to you.

[00:19:41] **Dr. Arielle Schwartz:** Exactly. And that's where the misattribution of responsibility comes in is that the, that the interpretation is I must be the bad one. I must be the bad child again. I'll make them the good parent or the good the good coach, the good minister, [00:20:00] whoever it is, that's supposed to be that good adult. Right. I'll make them the good one, but I must be the bad one. All of those yucky feelings that I'm feeling inside that that's confirmation that I'm the bad one. Right. And so I think those that what you're describing is that the fear then gets it kind of almost like popularized or maximized on in the media and in how it gets spoken about, but the, the, you know, when we just meet face-to-face with any one individual, it's really all about kind of having compassion and helping build compassion and build a depth of understanding for your own unique experience and your own unique life and it's not scary at all. It's actually just very tender, very vulnerable.

[00:20:49] **Laura Reagan:** Very vulnerable. Yes, exactly. And you know, I think that one of the things that's really missing in our cultural conversation, you [00:21:00] know, I do feel like trauma is kind of a buzz word right now, which I'm grateful that more and more people are learning about trauma.

[00:21:08] But I do think that, um, there's an oversimplification a lot of times in the way it's spoken about and dissociation is pretty much left out most of the time, you know? So, but it it's part of a trauma response. It's a, it's part of, uh, the protective way that our brain handles these situations. So that we can live through them.

[00:21:29] And then, you know, and I, but it's so confusing because it, for the person it's like, what is that real? Did that really happen? You know?

[00:21:36] **Dr. Arielle Schwartz:** Yeah. I think that's such a key piece, right? If it's, it's a little bit like if the tree falls in the forest and no one hears it, did it really did it really happen. And when trauma occurs and nobody validates it, nobody witnesses it, nobody says that really happened to you and that was bad and that was wrong. It's that same quality of did that even happen? And do I even exist? Is what [00:22:00] I'm feeling inside valid? Right. And I really feel that that's a big part of what we do therapeutically is to go back and revisit these unwitnessed events and provide this kind of shared, shared experience where now the individual can go back, not in this flash back or in the middle of the night, but with a compassionate companion who then can, can kind of hear the story and go, well, that was a crime that should never have never have happened. And nobody protected you. And nobody helped you unpack what happened afterwards. And now we get to do that. And so we're validating the reality of that experience.

[00:22:41] **Laura Reagan:** Yeah. That compassionate witnessing, which is what needed to happen the first time around. Yeah. I mean, I know that, you know, in instances where people are abusing children, whether it's a parent, a coach or whoever it is some adult that is abuse and it's [00:23:00] a crime, but there are other types of traumatic events that can happen in childhood that nobody intended to harm anybody.

[00:23:07] But it's still happened, like a parent dies or, you know, a sibling gets cancer or something like that. And things,

[00:23:14] **Dr. Arielle Schwartz:** No one validates things like a hurricane comes through your community and, and it's flooded, right? I mean, just, just last week. Right? So it's, it's very real. And it's, it's something to keep in mind that there's the event that happens, but then there's everything surrounding the event that either comes in and helps a child process their life experience, the death of a parent, uh, uh, you know, a natural disaster, whatever it might be, or nobody helps the child process through. No body helps them makes sense of it, um, or work through their emotions that came up around that.

[00:23:49] **Laura Reagan:** Yes, exactly. And that's where the, you know, cause I have actually met a couple people who went through something really traumatic, but, and I say a couple because you know, [00:24:00] those aren't necessarily the people who are seeking therapy for this, but um, they went through something really traumatic, but the response that happened afterwards was great and they got through it. They got help and they, you know, not just in a one moment, but ongoing when they needed support, they were believed they were supported and you don't see those people developing post-traumatic stress disorder.

[00:24:23] **Dr. Arielle Schwartz:** Exactly. And so you're speaking to one of my other passions, which is around resilience and even post traumatic growth. And when I have really just done a deep dive on what fosters resilience, what are the factors that help children emerge out of childhood traumatic events with resilience? The key factors that there was at least a single adult who took an interest in the inner world and and experience of that child who listened,



who helped them. I always think of Mr. Rogers, right? Like just that, that person who was [00:25:00] willing to show up and see that a child is a person and they have their own thoughts and their fears and their worries and their hopes and their dreams, and that when a child has that person, that their likelihood of coming out of those adverse events with greater resilience, and that's physical resilience, less health problems, emotional, psychological, mental. All of those layers is strengthened by just that one person. It's remarkable.

[00:25:35] **Laura Reagan:** Hey everybody. I wanted to take a quick minute to tell you about my experience with Sunset Lake CBD. I first tried CBD when my integrative doctor recommended it for chronic neck pain and tension that tends to wake me up at night. I really liked Sunset lake CBD's product. The full spectrum, CBD tincture is mild tasting compared to others I've tried and I find it works quickly. It doesn't feel sedating, but it does have a pleasant calming effect. [00:26:00] And I also like the CBD gummies, they taste good and they work well. So if you're looking for a craft CBD product that comes directly from a farm outside of Burlington, Vermont, that's a producer for Ben and Jerry's ice cream, you're going to want to check out Sunset Lake CBD. And remember, Therapy Chat listeners get 20% off using the promo code, "CHAT." So go to [sunsetlakecbd.com](https://www.sunsetlakecbd.com) and use the promo code, "CHAT."

[00:26:28] Thank you for saying that, that's actually one of the things that I didn't say to someone we were talking before, but that I learned about that when I was in undergrad in sociology and I was like, it only takes one person. I could be that person for maybe one person. And that would be like a reason to, you know, feel like you contributed something to the world.

[00:26:48] **Dr. Arielle Schwartz:** Exactly.

[00:26:50] **Laura Reagan:** And also what I needed, you know, what we all needed when we were little.

[00:26:55] **Dr. Arielle Schwartz:** That compassionate witness. And in again, like, even if it doesn't happen [00:27:00] in childhood, if you know, I've worked with people and I'm sure you have too, who say, I never had that person. Yeah. Right. And, but because we have this ability to time travel, right.

[00:27:10] To go back in our minds and in our, in our memory and because the body emerges still in the here and now with whatever's left unprocessed from the there and then, and so we have that ability to go back and loop our consciousness around those pockets of time and, and experience that were left on unrealized and unwitnessed.

[00:27:37] And we go back to those. And now we are that adult as if we're sitting with the child.

[00:27:44] **Laura Reagan:** That's right. I mean, it's right there in our bodies. Like just like it was then. And that's, you know, I guess that brings us into why it's so important to bring the body into trauma therapy. Can you talk about that a little bit more in depth?

[00:27:58] **Dr. Arielle Schwartz:** Yeah. and I'll [00:28:00] tie into it another modality that I feel like is so incredibly valuable for, um, for treating trauma, which is Parts Work Therapies. I, you know, that, that statement I just made of, you know, we can basically time-travel and we're sitting with the felt experience in the here and now in the body, but it's as if we're touching into that, which never got realized or processed by the five-year-old or the seven-year-old.

[00:28:25] And so when we can really identify what is the part of the client that's still holding that. And ironically, when we're working with parts work, whether that's Ego State Therapy or Internal Family Systems or Structural Dissociation model, but regardless the body is our access. Right. I have a long-term client that I've worked with, who often likes to say my body is my inner child.

[00:28:52] Right. And there's this way

[00:28:54] **Laura Reagan:** That resonates a lot.

[00:28:55] **Dr. Arielle Schwartz:** Right, right. That like the feeling in the belly that the, you know, the [00:29:00] jittery-ness, the heartbeat, all of those experiences, the catch in the throat, those are access points to what didn't get to be expressed. So, you know, there's, there's the bringing the body into psychotherapy is so valuable, but we need to do it wisely.

[00:29:16] **Laura Reagan:** Exactly.

[00:29:18] **Dr. Arielle Schwartz:** And what that really means is that we don't want to do too much too fast. We need to be in alignment with the pacing for the individual, what we call their window of tolerance or capacity to be with sensation. And if we go too much too fast or are pushing the client in a direction that they're just not ready or wanting to go, we can really create harm.

[00:29:45] **Laura Reagan:** Yeah. And that's, you know, I think again, going to trauma, being kind of a buzzword right now, there are a lot of, uh, I think it's a great thing that there are a lot of body oriented trauma [00:30:00] healing methods, and modalities that are kind of like out there, you know, I mean, I've had clients who received from a massage therapist or an acupuncturist, like list of exercises to do, to discharge the trauma.

[00:30:14] And sometimes. That can bring up unexpected reactions, I think so.

[00:30:21] **Dr. Arielle Schwartz:** Sure. It's, it's a, too much too fast response. And I, and I see it as well, whether it is, you know, what used to be called things like Primal Scream Therapy, but like, whether it's, you know, you know, kind of banging on pillows or letting something

out in a very cathartic way, But if we don't have that capacity to contain or to have an internalized compassionate witness for whatever's coming forward, we can feel retraumatized by the emergence of all of those emotions or memories that are held there. So, you know, a wise approach to Somatic work is what we refer to as pendulation or [00:31:00] titration, which is that you go toward whatever the discomfort is or whatever the traumatic memory is. And you loop your consciousness around the somatic experience related to that. And then you come back to resource, or you actually start with resource like you and by resource, that can be awareness of safety and your here and now circumstances that you're looking around your space or that you're holding onto something that's an anchor for I know that I'm safe now, right?

[00:31:28] Or. You know, safety might be a sensation or a feeling in your body that doesn't feel triggering, or your resource might be a time that you remember feeling really safe and loved with a person that was a really loving, compassionate presence in your life. So you can use your imagination, your senses, you know, grounding into your legs and feet.

[00:31:51] Your breath might be a resource that we have a lot of different ways that we can find basically, states of connection, states of calm, states of [00:32:00] ease. And then we can turn forwards, whatever the distress is. But, you know if we dive into the distress, it's like jumping into the deep end before you've learned how to swim and you don't have your swimmyies on, right?

[00:32:12] Like, we want to find our way to learn how to, to get into the water of whatever that traumatic material would be without feeling like we're going to drown there.

[00:32:24] **Laura Reagan:** Yes. And I think again, that's where, like personally, I feel that every therapist who's working with people, every therapist should have basic training in trauma and also learning how to identify

[00:32:39] I guess you could, the easy way to say it would be how to identify where the person is within their window of tolerance. But it's, I feel like it's really being able to recognize the signs when someone is out of their window of tolerance, especially dissociation, because it can look so the same as you know, right.

[00:32:58] **Dr. Arielle Schwartz:** I think that's exactly what I was going to [00:33:00] say is that what can be so tricky is when you have someone that is a highly functional, you know, individual, because they had to develop that high functioning to cope with their trauma and childhood and they come into your office and they got it all put together.

[00:33:15] Right. And, you know, and in a way it can feel so threatening to get under that under the surface of that. But on the other hand, the, you know, that high functioning self can feel cut off, disconnected, um, or suddenly go into this rage when your kid triggers you or your spouse triggers you. Right.

[00:33:34] So there can be this split between that like I've got it all put together, actually what you're calling, I've got it all put together is a functional freeze.

[00:33:43] **Laura Reagan:** Oh, can you say a little more about that?

[00:33:46] **Dr. Arielle Schwartz:** Yeah, I think it's, it's a, another way of coping. It's, uh, it's one way that, that we can, you know, override difficult child events.

[00:33:56] Right? If you, I mean, even simple things, we were talking again about [00:34:00] like more extreme experiences of, of, uh, abuse or, you know, uh, uh, the loss of a parent or a big event, but actually it can be a lot of accumulation of very subtle events or the missing pieces, right. Growing up in a family where you've been neglected, where no one really validated your feelings where you had to perform well in order to be approved of in your family.

[00:34:25] If you, you know, your good grades, it was, you know, that you had everything put away that you ate all the food on your plate, right. All of these things. And so then when there's distress and if the, if you're in a family that has a very collective low tolerance for emotional distress, then the way to belong in that family is to contain the distress.

[00:34:47] And then once again, I'm going to act as if I'm fine, but I've pushed everything down like that beach ball.

[00:34:54] **Laura Reagan:** Yeah.

[00:34:54] **Dr. Arielle Schwartz:** So there's this high functioning I'll do fine in school, I'll have my manners, I'll [00:35:00] say yes, please. I'll say no, thank you. Right. But underneath, I hate when you do that or why don't you ever listen to me or I cry myself to bed at night.

[00:35:09] I have anxiety and panic attacks, but nobody knows.

[00:35:13] **Laura Reagan:** Or constantly thinking about killing yourself and you know, wondering why am I not happy when I have achieved so much? And I have everything I thought I ever wanted. And, but I'm still not happy. What's wrong with me? Why can't I be happy? Why can't I appreciate my life, enjoy this?

[00:35:31] **Dr. Arielle Schwartz:** I should, I shouldn't feel this way and I must be an ungrateful child, and those are the kinds of phrases that we hear again and again.

[00:35:39] **Laura Reagan:** Yeah. Well, I love, you know, I've actually not heard that functional freeze before, but it makes total sense. Um, because it's like, as long as you don't go there, you're fine, but you're not fine because you don't feel fine inside. But as far as anyone can tell, you're fine.

[00:35:56] **Dr. Arielle Schwartz:** Right. And so going back to where we started on this piece, when, when you're a [00:36:00] therapist and the client is coming in and they're telling you about all the things that are going okay, right, And we're missing the fact that actually that's their coping mechanism and underneath that is all of the unexpressed distress.

[00:36:16] But because I imagine that everyone expects me to have it all together. I'll take that part of me right into therapy. So, what we really want to do is help move toward that more authentic self. Once again, both for the sake of turning towards where the, the real hurt feelings got cut off, but also where your, you know, real capacity for joy and meaning and connection, and love resides.

[00:36:43] **Laura Reagan:** Yes and you know, that is very beautiful, what you just said. And I keep you keep reminding me about, you know, that, that idea that it's not just the pain that we don't want to touch, that we're somewhat detached from, with complex trauma and [00:37:00] dissociation, but it's the joy and the feeling of being connected and the feeling of, wow, it's good to be alive and, you know, connection with people we love and all that richness inside.

[00:37:12] **Dr. Arielle Schwartz:** Yeah. One of the other kind of influences in my work is what we refer to as Strength- based psychotherapy. Right. And it doesn't mean that we want to ignore the distress. Obviously, that's been the primary focus of what we're speaking about, but that we can also turn towards what are the existing resources? How did you survive all those years? You know, where have, where do you feel empowered? Where do you have a voice? What are, what brings you joy, right? Who takes care of you, um, who did take care of you and your life, if we can find those people?

[00:37:47] **Laura Reagan:** Yeah. And that really does a lot to sort of make it feel safer to explore the more painful places to when you can remember oh yeah, I have strengths. And I have, I'm not, you know, because it's like, like [00:38:00] a child, you know, that sense of mastery. We want to feel in control. We want to feel like we know what's going to happen. Feel a sense of competence. And some of the things that trauma really interferes with, I feel.

[00:38:11] **Dr. Arielle Schwartz:** That's right.

[00:38:12] **Laura Reagan:** Well, I am so glad that you are doing what you're doing and writing about it and teaching and training and doing your direct work with clients.

[00:38:21] Can you tell us a little bit about, for clinicians and for people who aren't therapists, but are wanting to explore trauma healing. What are you offering what's out there that you've got going on that people can find?

[00:38:36] **Dr. Arielle Schwartz:** Yeah. Thank you for asking. I, you know, I, I think one of the things that has been a very kind of spiritually driven and kind of heartfelt desire is to create as much accessible resources, as many accessible resources out there as possible.

[00:38:53] For the lay person for anyone, for anyone who's experienced trauma, especially [00:39:00] because we are aware that we are facing a mental health crisis as we, you know, I think it's been around for a long time, but it's exacerbated by the pandemic and by, you know, so much of what has been emerging in these recent years. So the, you know, the resources that I have out there, one is my website and my blog, and that's at [dr.arielleschwartz.com](http://dr.arielleschwartz.com). And then I'm also an, uh, on Facebook, um, under Dr. Arielle Schwartz and LinkedIn and Twitter and Instagram, I think is Arielle Schwartz or something like that. So you can find me on all the socials, but. I, one of my pandemic projects was to create a YouTube channel. And at this point I have about 80 videos on there that are free and they are either yoga classes, or a small mini yoga- based Somatic practices that you can do to nourish your nervous system.

[00:39:56] I have a lot of emphasis on the Vagus nerve and on, [00:40:00] and of how we can really engage body and mind together. And then there's some, you know, short trauma talks that are on there as well. And then in terms of programs, I have my books out there. So I have books for again, the client or, you know, anyone so those are the Complex PTSD Workbook, I have the Practical Guide to Complex PTSD. I have the Post-traumatic Growth Guide Book. I have a six hour audio program called Trauma Recovery, A Mind Body Approach to Becoming Whole. And that is with sounds true.

[00:40:36] And for the clinician who is seeking to become more trauma informed, there are all of those books that you can use with your clients, but also there is the EMDR Therapy and Somatic Psychology Book and the Complex PTSD Treatment Manual.

[00:40:52] That's a lot, lastly, um, I'll just share with you that, um, I have plenty of trainings for clinicians through [00:41:00] PESI and, um, a really exciting, uh, learning opportunity for clinicians wanting to become more aware of how to work somatically. And this is through the Embody lab and we have a very soon to emerge a Somatic Trauma Therapy Certificate Program that is for practitioners to learn how to integrate somatic therapies into your work.

[00:41:24] And then starting in January through Sounds True, we are going to launch a nine month program that is for the individual seeking to heal from trauma, recognizing that accessing trauma therapists can be challenging, we are going to take you through a nine month journey of what we believe are the best modalities out there experientially for your own healing. So those are some of the upcoming offerings.

[00:41:52] So wonderful. And, you know, I knew about almost all of those resources except for the YouTube channel, [00:42:00] which I'm definitely telling myself, I'm going to check that out, maybe watch some of those tomorrow. Can't do it today. But, um, I'm very appreciative that you are making things available and accessible to as many people as possible, because as you said, and especially with the pandemic and the racial injustice that's been happening and the climate crisis, you know, natural disasters everywhere, partly because of, you know, the situation with the climate. People are having a hard time even getting in with even a therapist who isn't trauma informed right now. So as much as possible, and I'm going to, I'll ask you if I can share some of these things on my new website

too, because I want it's in the same way. I want people to be able to get help, even if they can't connect with a therapist for whatever reason.

[00:42:51] So thank you for everything you're doing. And thank you so much for coming on to Therapy Chat Today, it's been really a joy to speak with you.

[00:42:59] [00:43:00] Thank you. Really a pleasure to be with you.

[00:43:05] **Laura Reagan:** Thank you to Sunset Lake CBD for sponsoring this week's episode, use promo code, "CHAT," for 20% off your entire order at [sunsetlakecbd.com](https://sunsetlakecbd.com). Sunset Lake CBD is a farmer owned, small business that shifts craft CBD products directly from their farm outside of Burlington, Vermont to your door. Sunset lake CBD has something for everyone.

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[00:43:55] And for more information and resources on trauma [00:44:00] and healing from trauma, go to [www.traumatherapistnetwork.com](https://www.traumatherapistnetwork.com). Trauma Therapist Network is a community for therapists and a place for anyone to go to learn more about trauma and find resources and connect. [www.traumatherapistnetwork.com](https://www.traumatherapistnetwork.com)

[00:44:19] **Announcer:** Thank you for listening to Therapy Chat with your host, Laura Reagan LCSW-C. For more information, please visit [therapychatpodcast.com](https://therapychatpodcast.com)