

## Therapy Chat Episode 152



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[00:00:00] **Laura Reagan:** Therapy Chat Podcast Episode 152.

[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:** Hi, welcome back to Therapy Chat. Here we are in mid-September and it's finally time for a new episode of Therapy Chat. I'm back from my hiatus. I've attended two podcasts conferences in the time since I last had a new episode for you and had many other wonderful adventures, but I'm glad to be back [00:01:00] and to bring you today's episode. I'm super excited about my guest for today, Susan Pease Banitt, LCSW is a social worker and psychotherapist who specializes in the treatment of severe trauma and PTSD. She's worked in the field of mental health for more than four decades in diverse settings and teaches classes on healing from trauma in Portland, Oregon.

[00:01:26] She is also a Kripalu- Trained yoga teacher, she's trained in Celtic shamanism, and she's a Karuna Reiki master. A very interesting person who is extremely knowledgeable about trauma and helping clients who have experienced trauma. She wrote the book, The Trauma Toolkit: Healing PTSD from the Inside Out, which is a book that is for people who have experienced trauma and it's [00:02:00] so full of wisdom. Her new book, which is wonderful, is called Wisdom, Attachment, and Love in Trauma Therapy: Beyond Evidence-based Practice. And it's all about why it's so important to be relational when we work with people who've experienced trauma, particularly childhood trauma, but all traumas. So let's not waste any more time.

[00:02:27] Why don't you just sit back and enjoy my interview with Susan Pease Banitt.

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[00:02:50] Thank you for your support. Hi, welcome back to Therapy Chat. Today is the first episode [00:03:00] back from my little break. And I'm so glad to be bringing you new content. And this first conversation is an amazing one I know, I'm talking today with Susan Pease Banitt LCSW, Susan, thank you so much for coming on to Therapy Chat today.

[00:03:21] **Susan Pease Banitt:** Thank you for having me.

[00:03:22] **Laura Reagan:** It's such a pleasure and I'll let our listeners know that I have been wanting to interview you for a long time. Susan is the author of one amazing book that I love and have loved for a while, and a new book. Her first book is *The Trauma Toolkit: Healing PTSD from the Inside Out*. And her new book is called *Wisdom Attachment and Love in Trauma Therapy: Beyond Evidence-based Practice*. So I have been wanting to interview her about her first book and now thanks to one of our wonderful listeners who [00:04:00] begged me to get her to come on, we made the connection and now Susan's here today. So Susan, will you just start off by telling our audience a little bit about yourself and your work for anyone who might not be familiar?

[00:04:13] **Susan Pease Banitt:** Okay. Sure. I would love to. I have been in this field a very long time. I've been in the field of human services for over 40 years. I started young. I've been a social worker for about 25 years. And my practice has evolved to a place where I specialize in trauma and dissociative disorders, along with a few other things.

[00:04:36] I was a medical social worker, so I do a lot of supervision of medical social workers. I worked in the field of autism for about 12 years. So I had that as a kind of side specialty too. And I feel like autism and trauma are also very related to each other. And I do a lot of supervision. And work with clients also with very [00:05:00] extreme abuse backgrounds.

[00:05:02] **Laura Reagan:** That's wonderful. And your practice is where?

[00:05:06] **Susan Pease Banitt:** My practice is in Portland, Oregon. Portlandia!

[00:05:12] **Laura Reagan:** Awesome.

[00:05:13] **Susan Pease Banitt:** What's great about that is that I have a holistic bent to my practice. So I am a Reiki master, I am a yoga teacher, Kapala- trained yoga teacher. I had to work with a shaman for a period of time because I had a lot of sensitivities I needed to sort out.

[00:05:31] And then I'm very traditionally trained in the Harvard medical area. So I've got this nice, you know, basket of things that I can use for my practice.

[00:05:44] **Laura Reagan:** I love it. And that's why I've been so drawn to your work because I started out as in a sexual assault crisis center before I went to grad school. And so like you, I have a longer history in the field than my actual [00:06:00] experience as a licensed social worker but I've been practicing as a social worker since 2010. And when I was in school in 07'-09', I did three years so 07' through 2010 actually it was very, very much focused in grad school on evidence-based practice. And I really came out of there thinking. If it ain't evidence-based practice, you know, it ain't therapy.

[00:06:29] But, you know I had that part of myself that was really focused on that, but it felt like there was really something missing and the more I've integrated more holistic practices into the very research-based work- the more complete myself and my work with my clients feel so your books just resonate for me immensely.

[00:06:56] **Susan Pease Banitt:** Well, I'm glad it's important because you know, it was [00:07:00] one of the things I mentioned in this new book is that different cultures have really different standards for what is evidence-based. And I recently taught at the Oregon College of Oriental Medicine for a semester, their behavioral medicine class and what I came to realize is that in Chinese medicine, they don't consider a technique evidence-based unless it's 200 years old in practice.

[00:07:23] **Laura Reagan:** Exactly.

[00:07:24] **Susan Pease Banitt:** So, right. So that's a very different standard than what we do in the west for research.

[00:07:29] **Laura Reagan:** Absolutely. And so, and when you're working with particularly people who've experienced severe abuse and they have, well, any kind of abuse and they have trauma and dissociation, there's really no one size fits all approach that will, especially like a very top down approach is not going to be as beneficial, because there's too much going on [00:08:00] from the bottom up that isn't being addressed when you don't have the other types of complimentary practices that go along so well with our work. Whether it's Reiki, yoga therapy, but I'm interested in the shamanic work that you've done because that definitely comes through in the Trauma Toolkit.

[00:08:22] **Susan Pease Banitt:** Yes. In fact, it was my work in supervision and in my own healing with this shaman that led me to write the Trauma Toolkit because I also went through I'm about a four to five year period of fairly florid PTSD that this man helped me through. But he was, he had been a therapist himself for 25 years.

[00:08:46] He'd done a lot of Gestalt and Ericksonian work and then kind of fledged out into a full fledged Shaman. And at the time I met him, he was just practicing as a shaman and was recognized by a couple of tribes in [00:09:00] the Northwest area as being valid and he could bring me out of traumatic states so quickly.

[00:09:07] I didn't even know it was possible. And of course at that point I had already been working in the field for several years. So I really wanted to pass along this wisdom to other people. There's not even enough yoga teachers probably to go around for all the trauma. So I wanted a book where people could access their own healing quickly and effectively in a way that they felt comfortable with.

[00:09:31] **Laura Reagan:** Yes. There's one thing in that book that stands out so much to me. I mean the whole book, The Trauma Toolkit is an incredibly rich resource of practices that

are more indigenously based and, and kind of written from a perspective of yoga philosophy, am I characterizing that well?

[00:09:53] **Susan Pease Banitt:** Yes because yoga and I conceptualize this in the new book for therapists as [00:10:00] well, is that I think it's useful to look at the human being as a multidimensional being and in the yoga system, they have these five layers of the human being that they talk about, which is the physical body, the energy body, two different levels of mind- so there's a lower what we might call the cognitive mind and then a higher intuitive or in the west, it was known as the angelic mind. And then there's the bliss body, which we could talk about flow. And what I realized was that the reason why people weren't healing from PTSD very well is that modern psychiatry really was only addressing one or two of those five layers. So that usually the cognitive mind was being engaged and maybe there was some psychiatry addressing the physical body. But that was pretty much it in the treatment space. And then people we're going off themselves and trying to work with nutrition and yoga and acupuncture and other modalities, but the therapy [00:11:00] community, wasn't really focused on those things.

[00:11:02] So when I teach my class, I show this Russian doll, you know, the Dusting Dawn and, and I visualized trauma as a sword that kind of pierces through all those layers. And they all have to be healed. Because I get so many clients who've been in other therapies with a therapist has said something to them, like, you know, you'll have to, literally, these are quotes. You'll have to learn to walk with trauma as a friend beside you. And my client was like, trauma's not my friend and I don't want to spend the rest of my life with it. But we haven't been taught as clinicians, how to- we've been taught how to manage trauma, I think fairly well, but we haven't really been taught how to help people heal fully.

[00:11:47] And so there's all these new studies that are coming out like the ACEs study and the studies on the hypothalamic pituitary adrenal axis that are showing us more the multidimensional [00:12:00] nature of how trauma takes up residence in the body. And then if people are energy-based or able to see or sense energies, then people are getting things like Reiki on board or acupuncture, energy modalities that help heal and seal up the energy body.

[00:12:15] And a lot of therapists are moving towards those things. And whenever I present, I often have people come up to me, almost afraid of being overheard, wanting to talk to me about how they are interested in those things or using them or how their program won't let them talk about it. And so I really want to give people, I want to frame this as an issue of cultural competence, that many, many indigenous cultures, including my own, which is Celtic and Irish have had these modalities from time out of mind.

[00:12:47] And it's very, it's a very universal human experience to work with healing the energy body. It's actually only Northern Europeans who really kind of issued that, which I think is [00:13:00] honestly a direct result of the Inquisition and 300 years of suppression of those kinds of teachings and technologies.

[00:13:09] **Laura Reagan:** Whoa, I love what you just said. Wow. Cause I just thought about like, what came immediately to mind it's not even the inquisition, but like Salem witch trials. I just thought about like, you know, just made me think of like a cultural genocide.

[00:13:26] **Susan Pease Banitt:** Yeah. It was a cultural genocide. It went on for 300 years. That's 10 generations. That's enormous. It's it's kinda mind boggling when you think about it, because I've worked with practitioners from India and China who have these healing lineages that go back, maybe 20 generations in their family. And so there's all this wisdom and knowledge that's accumulated and Mao Zedong tried to get rid of traditional Chinese healing for a few years and then he realized that he was selling his culture short and he reneged on those [00:14:00] rules and let people start practicing again. So that was just a few years, but you contrast that with 300 years, that's really quite a big sea change for a culture.

[00:14:11] **Laura Reagan:** Yeah. Ooh, you're a good social worker. You really got me thinking now about that. Wow that's thank you for sharing that perspective I'm going to think about that a lot. And one of the things that popped out of your book, that the first book that I carry with me every day in my work is I remember reading in that book- if there's one thing that if it was the only tool you could have to work with people who've experienced trauma and who are severely dissociative, it would be Sage and that, you know, because it, because it's so grounding. And I mean, that's like, I don't know for me, that was very powerful [00:15:00] because that's not what most therapists who are working with people who have complex trauma are necessarily considering a number one tool in their toolkit.

[00:15:08] And of course you need knowledge and training and experience, not just Sage, but, um, it's something where when clients come into my office and they're saying, for example, I know that I'm dissociating and I feel stuck and I can't get out of it. Or like, um, you know, they'll say. I think it's depersonalization / derealization. Like they have the awareness of what's happening, but they can't change it. And using that book as a toolkit has given me, you know, 10 things that readily come to mind that I can try with the client, if they're willing to try and see, you know, which one will it be [00:16:00] tapping, will it be smudging, will it be standing movement, you know, like so many things that you can try.

[00:16:09] And understanding how and why they work to help people just returned to more present moment awareness when they feel stuck.

[00:16:18] **Susan Pease Banitt:** Right. Which are all these tools of what we call clearing and grounding. So when people are in these dissociative states, they're really, you know, what a clairvoyant or shamanic practitioner would observe as that not fully inhabiting their body, kind of out of their body they might say which doesn't make sense to people unless they understand the context of that. It's not like they're literally out of their body, but their consciousness is out of their body. So they often can't feel what's going on in their body and that creates a lot of anxiety.

[00:16:53] I had one clairvoyant put it this way: anxiety fills up the space between the floor and wherever you're between the [00:17:00] bottom of your feet and wherever your spirit is

residing or something that I like to say to people is that, you know, we have our core self and spirit, and then we have our ego self. The distance between our core self and spirit and our ego, fills up with anxiety and depression is how I think of it.

[00:17:21] So the more people are grounded and connected in themselves and their bodies and really anchored in- the less anxiety they're going to have, the less dissociation they're going to have. They might have other things break out like memories or, you know, really strong emotional states which is why people aren't in there to begin with.

[00:17:41] Um, but as those clear people find themselves really settling down and I would only, I mean, I think smudge has been one of a huge tool for me because it also rose out of my own sensitivity. I'm very, very sensitive to energy and I'm very sensitive to traumatic energy, which [00:18:00] some indigenous populations in South America call heavy energy.

[00:18:05] And I experienced it as heaviness. It's very palpable to me. So smudge really cuts that for me. So it almost became a, a self-defense and a self care tool also to be smudging my office, or if I had a real heavy trauma loaded person coming in, um, with their permission, of course, we would burn some Sage and I even have a client who's a survivor of ritual abuse. But my number one, I'd have to say my number one thing/ tool, which I think you assume, is the relationship, is my relationship with my client.

[00:18:41] **Laura Reagan:** Yes all the smudging in the world can't help if you aren't working on that.

[00:18:49] **Susan Pease Banitt:** Right. And you have to get the buy-in, some people, um, cause they work in the Pacific Northwest and there's so many smudgers here, you know, in Portlandia smudging is [00:19:00] no big thing. Everybody does it.

[00:19:04] **Laura Reagan:** Around the east coast over here were very cognitively minded.

[00:19:10] **Susan Pease Banitt:** It's a little bit different, but it was interesting when I dug into that. That actually many cultures use smudge, including many Northern European cultures. So Irish had their own method. The Norwegians use sweet Woodruff for smudging, their indigenous people did.

[00:19:26] So it's a very, uh, universal tool. And I like it because it's very quick. And as you say, clearing and grounding kind of gets people in sometimes the shaman I worked with would say just smell it, don't burn it, just break it up in your hand and smell it. And it's like an instant ground. And the name Sage itself is salvia, which means that, which saves.

[00:19:48] So obviously the ancients knew something about the healing capacity of these plants too.

[00:19:53] **Laura Reagan:** Yes. The wisdom has always been there and we've, you know, in the west have kind of turned [00:20:00] away from it. And, you know, as we're turning back, some of us are turning back toward it. I think it feels more, it makes sense.

[00:20:08] **Susan Pease Banitt:** Yes. And to work in this field of heavy energy of trauma, we have to practice a lot of self care in our offices, or we're going to burn out relatively quickly, or just not want to take on these kinds of cases, which is fine. Everybody's free to choose who they want to work with, but if you're particularly called to illness and heavy trauma, as I am, then you're going to probably need a few more tools than the average bear.

[00:20:34] **Laura Reagan:** Absolutely. And I, I will add, I'm not sure if you agree with me about this, but you know, I hear people say sometimes, 'Yeah that's why I don't work with people who have trauma. I'm not really comfortable doing that work.' And it's like yes you do work with people who have trauma, you just don't know they have trauma.

[00:20:52] **Susan Pease Banitt:** Right. I would agree with that.

[00:20:56] **Laura Reagan:** I don't really feel like we can opt out of [00:21:00] practicing in a way that recognizes that trauma is so prevalent.

[00:21:05] **Susan Pease Banitt:** Yes it's so prevalent and at the same time, you know, I think those, those therapists are sometimes good for people who aren't yet ready to move into their traumas for healing.

[00:21:16] And they're kind of, they just need sort of more supportive, stabilizing work in their life if they can do it. And then of course people with heavy trauma can't really even do that. And there's often this chicken and egg problem, which I had run into earlier in my career where everything I would try to do to stabilize a client would backfire because life itself is the trigger basically.

[00:21:38] And then that's when it's really helpful to have these alternative tools. Because I had clients who come in and can't talk to me. I used to have to refer those people out. Now I just put them on the Reiki table and work with them that way. And literally after one to three sessions, they're ready to do some talking. It's amazing how quickly that works for them.

[00:21:56] **Laura Reagan:** That is amazing. I still, Reiki [00:22:00] for me is still like an uncharted territory. I just, I want to understand more about it, but it's something that I haven't put time into really exploring, learning about.

[00:22:12] **Susan Pease Banitt:** Well, there's so much out there to do. And then some people are drawn to EMDR. Some people are drawn to other modalities that help make that safety and trust happen more quickly. I just happened to be drawn to Reiki. I actually kept having some, because again, I have a lot of sort of psychic shamonic clients who come to



me. And I had a few in a row that came to me and were like, why aren't you using your hands?

[00:22:35] And I was like, um, therapists, don't touch people. And their like too bad, like figure it out because you have a lot of healing ability. So after that happened enough times I started looking around and then I found this book written by a social worker at Mass General Hospital in Boston, which, and she was using Reiki all over the hospital and she wrote a very good book about it.

[00:22:58] And I'm sorry, I can't remember the [00:23:00] name off the top of my head. And there were a couple other books I found like that with psychotherapists using Reiki. And of course there's the option with Reiki to not touch, which is what's great about it. There's Reiki healing meditations that you can do. I do those a lot.

[00:23:14] Especially with new clients or there's just distance Reiki. There's, there's things that can be done that way. But I found them with my very, very sensitive clients to be, um, extremely effective because they can really feel it.

[00:23:29] **Laura Reagan:** Well, that is fascinating about Reiki. And I'm going to try to find out what that book is that you're talking about cause I'd love to learn more about how, you know, there's always that thing for me as a clinical social worker concern about doing anything that would put me at odds with what I'm allowed to do, you know, according to my license. So if I understand how it fits and can feel comfortable with it, I sure will be getting trained in Reiki.

[00:23:59] And I [00:24:00] mean, it feels like a beautiful, beautiful type of energy work. I just don't know enough about it.

[00:24:05] **Susan Pease Banitt:** Right. Reiki.org has a section for research. They're doing a lot of research with trying to collect as much evidence-based information as possible. So that can also help people who are drawn to it or considering it.

[00:24:22] Um, but even if you don't use it in your practice, it's amazing for self care. It's really, really calming.

[00:24:27] **Laura Reagan:** Thank you. And that's beautiful that you have mentioned self care a couple of times, because I could not agree with you more, how important it is for us as therapists to be constantly and intentionally practicing self-care throughout the day, throughout our week, you know, our personal lives to keep us going so that we can be, stay in the game and be able to help people for a long time instead of burning out shortly, like you mentioned before.

[00:24:58] **Susan Pease Banitt:** Absolutely. [00:25:00] And just in case, it's not clear to the listeners, the trauma toolkit is a book that was written for laypeople. It's written for everybody. There's a lot of healers that read it, but it's not necessarily written for healers.



Whereas my new book, *Wisdom, Attachment and Love in Trauma Therapy: Beyond Evidence-based Practice* is specifically written for therapists. Rutledge is the publisher. And they're distributing it, um, possibly as a textbook to people.

[00:25:27] Wonderful. And there's an entire chapter, chapter nine, which is the self care for the trauma therapist. And the whole chapter goes into a lot of detail, especially also around safety in the workplace. Like how to call for help, if you don't have a safety button, I was just supervising somebody who works with, people coming out of prison.

[00:25:54] And I asked her, what their safety plan was and her answer was well, there's a [00:26:00] probation officer down the hall. I'm like, I'm not sure that that's a safe enough plan for you.

[00:26:07] **Laura Reagan:** Doesn't sound like a safety plan. Sounds like a person who's down the hall.

[00:26:12] My safety plan is if I scream really loud, hopefully well somebody will come around and save me.

[00:26:16] **Susan Pease Banitt:** So, it's better to have a more concrete safety plan. And I really encourage those of us who work in the field of trauma and violence to have those plans because I've had students who became in a great deal of fear. I've known therapists who were attacked, for example, just, you know, if you have an apple phone pressing the side of your phone, six times in a row rapidly, we'll call 9 1 1 automatic.

[00:26:43] So it's a very simple and covert way to do it. You kind of go into those practical things. There's a side of my being that's very pragmatic, even though people might call me, "woo woo" which isn't a name that I love to hear because I think it's not a very culturally competent term, but I have these other gifts.

[00:26:59] I have these [00:27:00] other shamanic gifts but I also have this really practical streak in me, and I want people to be grounded and safe and protected in their space so that they it's just another layer of stress that we add if we're a little uneasy, every time we come into work or we have a certain client that makes us uneasy, it kind of, it stresses our body that much more.

[00:27:19] So lots of, lots of different reasons. And I that's why I put it in the self-care chapter, but I also put a lot of things in the self-care chapter that I talked about in trauma toolkit in a condensed form.

[00:27:32] **Laura Reagan:** Oh, wonderful. Well that's no, and I love the self care focus. So again, so intentionally in your book, it's, it's beautiful. And I really wanted to say that to me, I haven't completely finished the book I must confess, but what it feels like to me, I could be missing something, but as I'm reading it, it seems to me, it, it kind of combines for therapists, [00:28:00] an explanation of attachment, brain development, how the brain

responds to attachment disruption and how the brain responds to trauma shock, you know, quote unquote shock trauma versus attachment trauma, and how all of that looks in the way clients present with us. And then, and so like, it helps with the background, the conceptualization and what we can do. And I mean, to me, it's like, this is what putting back kind of information together in one place is really powerful and then how to be relational as a therapist and why you, you need to be, or why that, that is where the healing happens in work with clients, especially clients who have attachment issues or trauma.

[00:28:52] **Susan Pease Banitt:** Yes. I think sometimes when Clinton ran for office and they said, It's The Economy Stupid was like plastered on their [00:29:00] campaign wall. I feel like that's kind of what every therapist should have plastered in their mind is it's the relationship stupid! Like it's the relationship. It's not evidence-based techniques are fine, but they behave differently in the hands of different therapists.

[00:29:16] Right. And so the example I give in my book is like, if you've got one therapist, who's got like an anger management issue and has road rage. And on the way to work was like caught up in that stuff, as opposed to like, um, like, uh, this [inaudible] meditation practitioner's got a very calm mind and they both come into work in their various states of mind, and they're going to administer the same instrument, but it's going to feel different to the client based on who it's coming from. Because clients aren't just reading our words, they're reading our being, they're reading our demeanor with them. And the more traumatized I find, the more traumatized the client has been, [00:30:00] the more relationally traumatized a client has been the more savvy they are about how we present to them.

[00:30:06] They are extremely good observers and they are excruciatingly sensitive people and they will feel it in our energy field if something's wrong, or upsetting us, or if we have judgements towards them.

[00:30:19] **Laura Reagan:** Exactly. Exactly.

[00:30:20] **Susan Pease Banitt:** So all of the studies that have been done over the last several decades, just consistently show over and over and over again, that it doesn't matter as much what the technique or the theory base is, what matters is the relationship between the client and the treater. And there's just been, there's tons of meta analysis about this. And yet I have, um, young social workers that I'm supervising that come to me about a third of my practice is supervision. Um, that really haven't been taught this. They don't really know how to handle [00:31:00] themselves because the old tools that I and others especially on the east coast were trained with like process recordings and things like this just aren't even introduced. Um, and it's really interesting. I went to give a talk on yoga modalities for psychotherapy at a local yoga studio, but the most burning question people had, of the night was a woman who said, you know, I've done all these evidence-based therapies with this client. We worked together for about a year. They got better. They came back six months later, and now I have no idea what to do with them. And I was like, that was like a light bulb moment for me.

[00:31:38] It was like, wow, is that where we are? So this woman just really, and everybody in the room was like nodding their heads. And even though they were there for the supposedly alternative treatment of yoga in therapy. What they really wanted to know was how do I create a healing relationship in milieu with my client, which for a lot of us who are trained back [00:32:00] in the day is such a basic and fundamental question, but it's not really being taught in the same way anymore.

[00:32:06] So part of the purpose of this book was to bring that wisdom back and to bring back that conversation among therapists and educators about not to forget that we need to teach people relational skills and especially in an area and era rather where a lot of millennials have been raised in daycare. I think there's a lot of relational trauma among millennials.

[00:32:30] And I just read an article this morning about how a lot of younger people are being raised more by their peers than their parents, and how detrimental that is emotionally. So there's this almost not knowing how to work with people, relationally, because people are weak in that area themselves. Like I have two, I have twins who are 21 and just last night I was talking to one of my daughters and she said, oh yeah, she said, a lot of her [00:33:00] friends have phobias about speaking on the telephone.

[00:33:03] They're not, they're fine with texting. But they are really afraid to talk to people on the phone, which is really kind of devastating to hear. And also interesting. So I think that that argues that maybe we need to go back to that education piece even more strongly in our schools and training programs.

[00:33:24] **Laura Reagan:** Yeah. I think we've become more and more focused on product and outcomes and, you know, achievement that is measurable in whatever it is and less relationally focused over time. I don't know. I mean, I guess there was less awareness of attachment in the past. I guess in the beginning of the 20th century, there was less awareness of like what children's needs are and child development and children were treated as little adults, but something's [00:34:00] different, I think there were more.

[00:34:02] Family groups that were together, even if there was less awareness of like attachment needs, there was more just automatic meeting of those needs through having many people close.

[00:34:17] **Susan Pease Banitt:** Yes. Yeah. I used to be friends with a daycare. I mean, not a daycare, but a preschool teacher. And she had been in the business a long time and she told me that about 10 years into her work, children stopped drawing belly buttons on figures of people. On mass, there was an entire generation that just stopped drawing belly buttons, which I thought as a therapist was so significant because the belly button is the attachment to the mother place, right? Literal umbilicus of attachment to the mother. And I thought something's happening. Something's happening in our culture.

[00:34:55] That's creating that disconnection, which is a little alarming. [00:35:00] And, you know, the Earl, I have this sort of section of the book where I talk about therapy's greatest

hits and you go back to all the old therapists and they all talk about therapy as a container and repeater of the mother infant relationship.

[00:35:14] So you've got the holding and my, uh, environment of Winnicott and you got unconditional positive regard from Rogers, got like one clinician after another is talking about this, but somehow it hasn't translated over into our culture. And now therapists are starting to forget about that or not think about that as much because when you become focused on immediate results, that's a, that's a long evolving relationship and you can't really get there in 12 weeks.

[00:35:44] A lot of people aren't ready to tell their therapist anything much before six to nine months.

[00:35:52] **Laura Reagan:** Thank you for saying that.

[00:35:54] **Susan Pease Banitt:** Yeah, right. I mean, you're not going to walk in. You might not even know your deepest [00:36:00] trauma I mean, just think about a friendship. Like how long do you have to be friends with somebody before you're going to tell them some of the really awful ugly stuff that happened to you.

[00:36:11] Right. Probably a while. And your friend, you'd be seeing many more hours a week maybe than a therapist. So these things just are time-based like, they really are time-based- you can't, you can't cut the time and get to the same result.

[00:36:26] **Laura Reagan:** I agree with you so much!

[00:36:29] **Susan Pease Banitt:** You can do some small pieces of work, but I have so many what I call CBT refugees in my practice.

[00:36:39] So many like, cause people go try that first. It's also appealing for people to do CBT because they don't have to go back and deal with their traumas. So they want to try to fix things without doing that, but it doesn't work for very long. It might work for three, six or nine months, which is the length of time that most of these studies cover, which is why it's [00:37:00] supposed to be the most effective modality.

[00:37:03] Right. Well, it is for three, six or nine months, right? Which means that you either need to go re up at three, six or nine months and go back into therapy, or we need to do studies that look at what kind of, what are more long release therapies, right then these sort of short PRN therapy.

[00:37:21] **Laura Reagan:** I hear many people who've had past therapy and come to me after previous therapy and say I know I shouldn't do this, or I know I'm not supposed to think, or I should just tell myself and it's like, right- you know what you, quote unquote, should say to yourself or tell yourself not to think that, but if it were that simple, you would do that.

[00:37:47] **Susan Pease Banitt:** Well, and not only that, but that's not neurologically sophisticated treatment because now we know that there are many, many, many, more pathways from the limbic emotional brain out to the [00:38:00] cortex, the thinking part- then there are from the thinking part into the limbic brain. There are very few pathways from the cortical thinking areas into the limbic area. So when push comes to shove, what's going to win out- our emotions or our thoughts? It's going to be our emotions. Because we're mammals and emotions rule.

[00:38:21] **Laura Reagan:** Exactly. So just to, would you mind just break that down a little more? How, when you said the pathways out of the cortex and the limbic system, just give a little more explanation about that for people who might be like, wait, what does that mean?

[00:38:39] **Susan Pease Banitt:** So the limbic brain developed after the reptilian brain and the addition that mammals brought to the scene were basically emotions and the ability to feel emotions, to feel each other's emotions. So we have these mirror neurons and we can reflect each other's emotions and feel them and have empathy.

[00:38:58] Right. You know, [00:39:00] layered on top of that, so dogs have that, cats have that, horses really have that- mammals are very emotional creatures and they need to feel safe and cared about to grow and flourish. Whereas a turtle just lays her eggs in a hole, walks off and never see's her children again. That's very different kind of being. So when humans developed, we developed this capacity to think, anticipate, plan, make stories, narratives, all those kinds of things that has allowed our species to survive and thrive on the planet and manipulate our environment. But we also have this kind of more fundamental and permanent part of our nature, which is our emotional nature and our empathy and our connection to each other, and our need for relational connection. Like primates are highly, highly, social beings. We evolved to need and crave connection. And when we don't have that, all the intellectual stimulation [00:40:00] in the world, isn't going to help us. That's why people, most people can't read a book and heal themselves. We actually have to sit in the presence of another more healed limbic brain, as they say in this wonderful book, A General Theory of Love, written by these three psychiatrists from San Francisco. The only thing that heals us is sitting in the presence of another more healed limbic brain. Right? So that again comes back to the relationship and the connection. And what the Buddhists, or Hindus may call a transmission of the teacher, which is- if I'm holding a very peaceful, loving, caring space for somebody, they can't help but start to resonate to that at a certain period of time. As long as I don't lose my cool. If I stay the strongest mind in the room and I hold that space, people are going to just start healing no matter what I do.

[00:40:51] **Laura Reagan:** Wow. I love that too how it doesn't have to be that the therapist has every piece of [00:41:00] healing done that they needed to get done to make them whole and complete so that they can be this all powerful... just a more healed limbic system.

[00:41:10] **Susan Pease Banitt:** Sometimes I feel like in the past I don't know if you know that Wallace and Gromit animation where the dog is laying down the tracks in front of the train as it's hurdling down that he's laying, like, that's what we're doing as therapists, we're

laying down on the tracks because our patients are hurdling along behind us and that's okay. I think that makes for very stimulating growth in the therapist and, you know, when we, when we get into those places where we feel overwhelmed and de-skilled, then we know that we need to work on something in ourselves, either our technique, or it might be just some aspect of our own personality.

[00:41:48] And then it's good to seek out supervision therapy and, you know, personal I'm big on personal growth workshops. You know, tons of therapists go to the Kripalu center in Lenox, Massachusetts, and Omega [00:42:00] Institute in New York. And out here, it's Esalen and Brighton Bush and different places like that. I think I kind of may put a plugin in my book for really wish those things counted towards continuing education because if we're only learning techniques, that's just one half of our brain, you know, to really have a master wisdom therapist, we need to have really robust left and right hemisphere skills that we bring to the table for our clients, especially with severe trauma. Because it's so challenging to work with.

[00:42:33] **Laura Reagan:** Yes. I agree with you too about the personal growth workshops and, you know, I do that myself, you know, I, I try to do as many trainings that are experiential as possible, but I also do things that are purely just for personal growth that are as separate for my own therapy.

[00:42:49] I also have, you know- I'm trying acupuncture and you know, exercising and yoga and yeah. trying to do as much as [00:43:00] possible because I feel like that's what it takes to be able to stay with how hard this work can be, but I mean, it's such a, it's such a sacred privilege to be able to do this work with people.

[00:43:15] **Susan Pease Banitt:** It is a sacred privilege. Absolutely. It is also, when we get it right I think it is one of the most deeply satisfying things that I can do in the world.

[00:43:27] **Laura Reagan:** Yeah. Well, that's a beautiful place for us to end, but I would love to talk to you for hours and hours more, but where can people find your book, your work and everything that you have going on?

[00:43:39] **Susan Pease Banitt:** Okay. Well, I am the only Susan Pease Banitt it on the internet, so I am not hard to find.

[00:43:45] **Laura Reagan:** Nice.

[00:43:46] **Susan Pease Banitt:** My website is suepb.com like peanut butter. It's also suepeasebanitt.com but that's harder to spell so suepb.com will get you to my website. I do offer classes based on The Trauma Toolkit. [00:44:00] I'm working on ways to get those online to a larger number of people, so stay tuned for that. I'm also going to be developing a CE course based on my new book through NASW. So look for that sometime in the fall you can sign up.

[00:44:17] **Laura Reagan:** Im signing up for that.

[00:44:19] **Susan Pease Banitt:** Yeah. That'd be fun. You can, um, sign up for my newsletter, get those announcements when things are happening. And I speak, I do interviews. I'm out and about. So, and I'm very responsive to contact. If people want to email me, or have a chat. So I'm really, my mission is about, I don't want to take my successes to the grave, I really want to share what I've learned and continue to learn with as many therapists as want to learn from that.

[00:44:48] **Laura Reagan:** Oh, I'm so grateful for the work you're doing and that you were willing to come onto Therapy Chat today. And I hope that maybe we can continue this [00:45:00] conversation in the future, but I think, you know, you are getting the message out there in so many different ways and it's, it's so important.

[00:45:08] **Susan Pease Banitt:** Thank you, Laura. I will come back anytime you want to have me.

[00:45:10] **Laura Reagan:** Oh, thank you.

[00:45:14] Thank you so much for listening to my interview with Susan Pease Banitt. I felt so lucky that she agreed to be my guest on Therapy Chat, and I am loving that book Wisdom, Attachment, and Love in Trauma Therapy. She pretty much wrote a book that affirms for me that the way I practice is clinically appropriate and really necessary. And that's very validating because I know what I see and the way that my clients recover from their traumatic experiences, but it's nice to have that affirmed and explained why it's so important, both [00:46:00] for my own understanding and that of fellow therapists and for clients who are working with a therapist to heal from traumatic experiences.

[00:46:11] As always, I'm grateful to you for listening to therapy chat, please consider making a donation to our Patron at [patron.com/therapy chat](https://patron.com/therapychat). And if you like Therapy Chat, you can download the free app through iTunes. If you use an iPhone or subscribe on whatever service you listen to podcasts on. Thank you so much for your support.

[00:46:42] **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).