

## Therapy Chat Episode 303



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[00:00:00] **Laura Reagan:** Therapy Chat Podcast Episode 303.

[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.

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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.

[00:02:14] 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, and may

be wondering, do I have trauma? 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 could 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 or another website. This is my hope in creating Trauma Chat.

[00:03:13] 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] 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.

[00:04:15] 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 is so valuable. The participants in my trauma therapist 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 someone who's 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 by August 1st, if all goes well. And hopefully there may be even a soft launch before that, 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. 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, and today, as I'm still in the process of getting caught up on so many things, I'm bringing you a replay episode. This one is two interviews put together from a few years ago. When I spoke with Amy Sugeno LCSW. And Amy talked about attachment and adoption, I thought it was a very interesting conversation.

[00:06:58] And you may be [00:07:00] interested to know that coming up next week, episode 304 is about brainspotting with Perinatal mental health and birth trauma with Janet Glass, who's a specialty trainer and consultant with brainspotting. And in a future episode, I plan on speaking with Brooke Randolph, who's another brainspotting therapist and she specializes in adoption.

[00:07:28] So, you know, we've got these two episodes today with Amy Sugeno and then more information about this will be coming and about, perinatal mental health and birth trauma are related to attachment trauma as well so it all kind of fits together with last week's episode about children's behavior, plus the previous episode with Dr. Janet Courtney talking about traumatized children and infants. So kind of working on a theme here, hope you enjoy listening to my interview with Amy [00:08:00] Sugeno and as always, I appreciate you listening to Therapy Chat, take care.

[00:08:09] Hi, welcome back to Therapy Chat today. I'm super excited to have with me a very interesting guest, Amy Sugeno, LCSW. Amy, thank you so much for being on Therapy Chat today.

[00:08:21] **Amy Sugeno:** Oh, thank you very much.

[00:08:23] **Laura Reagan:** You're welcome. I'm so glad to have you and have you back. You're one of the people who I interviewed months ago and unfortunately lost the audio for so one who was very gracious to allow me to rerecord our interview. And I'm hoping it's going to be even better this time.

[00:08:44] **Amy Sugeno:** Yes, yes. Looking forward to it.

[00:08:47] **Laura Reagan:** So, Amy, let's just start right off if you can tell our listeners a little bit about yourself and your practice.

[00:08:54] **Amy Sugeno:** Yeah. I am a therapist down in Texas, Central [00:09:00] Texas near, not too far from Austin. And, uh, I have a small private practice where I work with mostly attachment trauma. And so I work with adults and also teenagers, mostly who have been adopted or maybe like adoptive parents, foster parents. Um, and sometimes also parents who are raising their birth child who's been through trauma. So my background, my training is in for the past 10 years or so has been working with all kinds of different traumas.

[00:09:33] But now I felt a little bit more of a narrow focus into adoption attachment trauma. I'm adopted and my son's adopted. So it's also, I think that's part of why I have such

passion for working in this area now. And then I also, one of the unique things that I do at least in my area is called ecotherapy.

[00:09:54] So I do a lot of the traditional or conventional talk therapies, but then I also try to do a lot of [00:10:00] nature- based therapy when that is appropriate for a particular client.

[00:10:04] **Laura Reagan:** Awesome. That's so interesting. And can you talk a little bit about, let's say someone is listening, who's thinking, Hmm. I'm adopted, but I don't know what she would mean by attachment trauma. Can you explain a little bit about that?

[00:10:22] **Amy Sugeno:** Yes. So attachment trauma is, kind of what it sounds like in the sense that when in those formative years, particularly zero to three, zero to five, but really, I think also just kind of your whole childhood, when there's a lot of development happening and a lot of bonding that's happening with your caregiver, your parent, or whoever's raising you, when there's trauma around, being able to bond or attach and so for adoption, of course, that means, that you were removed from your birth [00:11:00] mother or, or were given up or, or whatever the circumstances might be. And so losing your birth mother, even if, it was a, even if it was something that wasn't necessarily traumatic, as far as what it might look like, like she gave you up maybe willingly because, uh, whatever different reasons, um, that can cause a lot of trauma for the developing baby or toddler.

[00:11:28] And I kind of think about it as you were in this, you were in your birth mom's womb for nine months. And so that was your whole world. And this was even, even being given up as a baby, if that, if that attachment bond was severed for some reason as a baby and you were adopted, even at that young age, Everything that you knew- your whole world, is now has now changed.

[00:11:56] It's now gone. And so it can cause, [00:12:00] the baby to be, I'm not really sure what's going on. You know, th the smells are different, the sounds are different. Um, so even placed into a loving home, a safe home, it can be a really, I feel like there's probably a really confusing experience. And I say, I feel like, because we can't know exactly what it's like for like a newborn baby or a young baby.

[00:12:23] But there is then, and not necessarily for every adopted person, but for a number of people, that can then lead to a lot of difficulties later on, as far as how to trust people, how to even form relationships with people in a healthy sort of way. Maybe you have lots and lots of friends, but it's hard to have like deeper friendships, all different kinds of things can come up later on that have to do with basically a very deep fear of abandonment, that is not a [00:13:00] logical thing often, it's not like the person's logically thinking, oh my gosh, my friends might not want to be friends with me anymore. It's a really deep sort of a subconscious kind of thing that happens with people.

[00:13:14] **Laura Reagan:** Thank you for explaining that. And I think it's really, adoption is such an interesting experience in our culture that there are many children who are born and then they moved to an adoptive family.

[00:13:34] But at any point it could be from, you know, in the first days after birth and any point along their childhood development path. But culturally, we have this message of if you were adopted, then now you're in a better situation. So there's nothing, there's nothing wrong. And there's, you know, everything's happy now.

[00:13:57] It's like happily ever after, but for the person who was [00:14:00] adopted, if they experienced that attachment trauma that you just spoke about, they may not feel like, they may feel well something's not okay for me. I don't know what it is because I'm in this loving family. I've always been wanted. You know, I never even knew my birth mother, so it's not that, but it could be related to that, that attachment trauma that they can't really place. They can't put their finger on it.

[00:14:26] **Amy Sugeno:** Yes. And I kind of, the best way that I can think about it in my mind, the way I often describe it to people. It's kind of like trying to hold on to fog and you've got this fog around you.

[00:14:38] You can see it. It's real. You can, you can maybe feel it if it's really thick fog, but you can't actually just grab a hold of fog. And so what I mean by that is that it's, it is, it can often be like a pervasive kind of, maybe it's a pervasive sort of confusion or maybe it's a pervasive [00:15:00] feeling of like, oh, I just don't really fit in.

[00:15:03] It may not even be in the person's conscious mind or it may be. But I don't really fit anywhere. Like I don't, maybe I don't really look like my parents, my adoptive parents, or maybe I do, but, maybe my temperament is different. So it kind of brings in the idea of how important mirroring is where especially when you're very little and as you're growing up and your brain is developing how helpful it is to be able to see yourself in your parents, maybe that's something as simple as your hair color, or maybe it's a, you can sing really well like your mom or you can, you're really athletic, like, you know, uh, your aunt or something like that. When you, you can see where you come from, if you're not an adoptive person, uh, but for adopted people, one of the hard things, and sometimes this doesn't even really [00:16:00] start to come up as anything until you're an adult.

[00:16:03] I mean, it's, it's very personal for everybody. Some people right away have a lot of difficulty around their adoption and some people, it may not be until they're 30 or 40 years old, that things start to come up into their awareness. But I think there's something about not knowing where you come from, not knowing, excuse me, not knowing who you come from, unless it's an open adoption.

[00:16:28] Of course, then you might have some, some more of those answers, but not knowing so for some people it can be not knowing, where your land is. For some people that's not that important, but it could be. You know for me being born, I mean, yeah, being born somewhere that was different from where my birth family grew up on my mom's side, ended up being a really big deal for me, but that mirroring thing becomes, really I think a big [00:17:00] deal sometimes for people to just kind of know who you are and where you come from.

[00:17:05] And so I think that the complexity also comes in, especially when you're still a kid and especially if you have very loving parents and it can be very difficult to have to maybe talk about or ask questions of your parents, your adoptive parents, because you've maybe don't want to hurt their feelings, or you're not really sure how they're going to feel about you asking if they know anything about your birth mom or your birth dad, or the circumstances around your, why you were adopted.

[00:17:39] And so it's easy for people to just kind of push it away, push it aside, sometimes even push it completely out of awareness so that you feel like it doesn't even affect me. It doesn't affect me in the least my adoption, you know, I really doesn't affect me. And for some people that may be true for some people it's more of like, they pushed it [00:18:00] aside and really don't want to, or can't yet look at that very deeply.

[00:18:07] **Laura Reagan:** Yeah. And the things that we push aside, you know, and don't think about because we can't handle thinking about them are so outside of our awareness most of the time that we don't know we're doing it at all, it's very unconscious.

[00:18:23] **Amy Sugeno:** Yes, exactly. I think it speaks to and you know, I've met people and I'm sure that many of your listeners have to you know, maybe come across somebody who's adopted, maybe they're already an adult and they talk about their adoption like, no, I don't wanna think about it. I don't want to talk about it. I want nothing to do with it. I have no desire to meet my birth mom or my birth dad. And so on the surface, you know, the words that they're saying, make it sound like maybe they're not really that effected it's not really a big part of their lives, but the intensity of [00:19:00] how they're speaking like, no, I don't want anything to do with it. I could care less, kind of gives you a hint to that maybe it is a place that has a lot of if they were to look into it more deeply, maybe it would have just a lot of overwhelming pain or confusion.

[00:19:16] And, you know, in that way that trauma works, it's not, it's not logical at all. It's not like, well, you know, I don't have any pain around it because I know that my birth mom, she just, she had to give me up, you know, because of different circumstances, it wasn't because she didn't love me. It wasn't anything about me that I did wrong.

[00:19:37] And you can have all the logic in your mind that you want, but that way, that trauma doesn't really connect with logic. It's more so it becomes this deep place of abandonment. Even if you know, you weren't abandoned, you know, per se or you weren't abandoned because of something horrible about yourself.

[00:19:57] It's still for some people that can still have that [00:20:00] feeling. There was something so horrible about me or so deficient about me that they just just had to give me up. And so that, that kind of speaks into the trauma piece, but that's really deep and difficult and painful stuff to, to look at. And so it's understandable that people want or need to keep that pushed aside and maybe let it come out in little bits and pieces or maybe it doesn't come out at all.

[00:20:27] So that's why it's the trauma piece of it twice it's characterized by having, characterized by being called trauma attachment trauma.

[00:20:39] **Laura Reagan:** Yes. And you know, one of the things that we both know as people who work with trauma is that if our trauma is outside of our awareness, it creeps in.

[00:20:51] Sometimes it comes out in different ways for children, a lot of times. Isn't it true that children who have [00:21:00] experienced some kind of trauma, will show it through acting out in various ways, either externalizing or internalizing that trauma. And that can be really hard for the parent.

[00:21:13] **Amy Sugeno:** Yes, absolutely. And a lot of times, and I'm not a children's therapist. I work, I do work with teenagers, but I'm not like a little kid, a younger kid, a therapist, but in working with parents and of course I have my own, a child who's adopted too. I have a sense of some of this. And so with kids, exactly it's often more their behaviors that come out.

[00:21:37] So they're not typically going to be able, developmentally, not going to be able to tell you here's how I feel. Maybe as an older teenager, they could possibly, but they're not going to be able to use words like an adults could and say, here's my trauma. And here's why I'm acting this way. And that kind of, so you're right.

[00:21:56] They're going to have more externalizing behavior, [00:22:00] which for adopted kids who have been adopted or foster care, sometimes that can be really aggressive, even violent, sometimes extremely violent behaviors, or it can be more like aggressive words what maybe not physical violence, but, so it can often come out in those kinds of ways, or kind of the opposite end of the spectrum, where it's like a super withdrawing, so that the child becomes, it's almost to me, it feels like almost like a violence to yourself.

[00:22:37] So it might be actually like self harm or suicidal thoughts, but it could also just be more, oh I just hate myself. I'm a horrible person. Like these thoughts that are very internally damaging. And so kids, when that abandonment button is pushed and it can be in a nanosecond, it can, and it can be something [00:23:00] that's seems so simple on the outside. Maybe you ask your child to please pick up their shoes off the floor or something very normal. And all of a sudden, something about that has just pushed that abandonment button, that attachment trauma button in a nanosecond, they're just, they're yelling. Maybe they're throwing things or they're, I hate you and they're running to their room.

[00:23:22] And if they might begin to self harm and it can be really startling for parents. Like what in the world just happened? All I asked was a simple thing, you know? And so these are not uncommon behaviors for kids who have gone through attachment trauma or trauma in general. So for parents, then what that means is that you are now by virtue of trying to parent them and trying to help them and you're doing your best in a very difficult parenting situations. You are now being exposed regularly exposed to their trauma. Either they're telling you some things that they remember happening, [00:24:00] like trauma, their trauma

stories that have happened, or by virtue of those behaviors, especially if you're a very sensitive person as a parent, if you're just picking up all of that.

[00:24:09] And so you can then as a parent become, you can actually develop PTSD, compassion fatigue, secondary trauma from parenting, a child who is, trying to heal from their trauma or who is expressing their trauma. And so then parents can start to wonder about their own mental health. Sometimes they'll start to notice, like, I don't feel like myself anymore, I'm more irritable. I'm withdrawing all the time. I don't like my kid or I'm exhausted and not just tired, it's like to the bone exhausted all the time. I just, I don't feel like myself anymore. I used to be a happy person, or I used to love to do this, play [00:25:00] guitar or some kind of hobby.

[00:25:02] And now I don't, all I want to do is just lay on the couch or watch TV or something. So I think this is a really important piece for parents because it's not something that's talked about a whole lot secondary trauma in adoptive and foster parents. Also parents who are raising a birth child who has had trauma.

[00:25:22] It becomes just that much more critical that you are also finding a way to take care of yourself, which is a really hard thing to do when you are in the trenches, in the war zone, is what it can feel like in trying to parent your child. It may be like all of your friends or many of your friends and your social support around you don't understand what you're going through.

[00:25:46] Maybe they are having a more normal kind of, regular sort of parenting situation, their child hasn't gone through trauma. So they don't really understand what you're going through or why your child is [00:26:00] behaving like they're behaving when your friend comes over or you get together at the playground or whatever it might be.

[00:26:07] And so then you start then that leads into a lot of isolation, a lot of shame. So, that's something I really like to work with parents on in my practice is really bringing that up, that secondary trauma, like, let's talk about this. This is a real thing. It's a really important. It can be devastating, not only for your mental health, but your physical health.

[00:26:32] It can make it very hard to parent. And all of this stuff is it's stuff that just happens. And it's so in counseling, we can work on that and try to help manage that in a better way so that the person is not suffering quite so much from their secondary trauma.

[00:26:51] **Laura Reagan:** Yeah. That's a great point about secondary trauma. And I've been thinking too, a couple of things about [00:27:00] this, but one is that for a parent who has adopted a child, they may have had a struggle with infertility before making the decision to adopt. They may have had perhaps multiple miscarriages or other pregnancy losses before adopting. And so those can all be traumatic too.

[00:27:28] So you take that mix of traumatic experiences. And then in this story we tell ourselves it's like, okay, everything's okay now. We've adopted a wonderful child. Our family



now feels complete and everything's supposed to be sunshine and rainbows from here. And, then the child who experienced either the attachment trauma or some other type of trauma in their early childhood is acting out and the [00:28:00] parent begins to have those effects of secondary traumatic stress I imagine it can just make people feel like they are really like going crazy.

[00:28:08] **Amy Sugeno:** I think you've touched on such a great point. There's a few things about that. So yes for people who are adopting for a lot of people, maybe not everybody, but for a number of people, it's exactly like what you were describing.

[00:28:25] Maybe they've had struggles with infertility. And so they've had a lot of infertility treatments that they've had to undergo or miscarriages. So that you be, you begin your life as a parent, say that the adoption goes through and now you're at home starting your new life with your adopted child.

[00:28:45] It's not uncommon to start your parenting journey, your life as a parent from a really exhausted place, first of all, and also from a place where you are possibly still carrying a tremendous [00:29:00] amount of grief. And perhaps you have worked on some of that grief if you've gone to therapy or some grief support groups, maybe you'd begun to work on some of that, but probably there's still a lot of it. That's still there. And so that's the first part is that you're not starting your parenting, life as a parent from like a refreshed place or a place that is you know completely happy. And, and so that's, that's a really hard thing because while you're having to help your new child adjust to their new home and to their new family, you're still dealing with so much grief and that's too much really, I mean, it strikes me, it's just too much for one person.

[00:29:46] So hopefully then if you haven't, if a parent hasn't found support yet that they might be able to seek out some support, for that for continued support. The other part of that is that I [00:30:00] was thinking about a parent's own attachment style, cause we all of course have our own childhoods.

[00:30:07] Obviously we were all children once and we had our parents or whoever raised us. And so we all grew up with our own attachment styles, our own attachment tendencies and if that was not a really secure attachment and you can Google, if you're wondering what different attachment styles you can Google that, but there's a few different attachment styles.

[00:30:29] I think it's probably a lot more complicated than just a few styles, but if you did not grow up with a secure attachment that was safe and loving and, where you didn't really have to worry about the attachment with your appearance, particularly your mom. Uh, and I think, I think probably a lot of people did not grow up with that kind of secure attachment styles.

[00:30:52] So if you've had attachment difficulties in your own childhood, or especially if you had your own [00:31:00] traumas abuse or neglect or the death of a parent or other kinds of traumas. And if those have been left unresolved, or if you haven't had done any work

around those, so that they're just kind of still sitting there, that's going to all get very likely all turned up.

[00:31:18] And I think that's very normal for parenting anyway, and then parenting a child who has their traumas and so they're giving you all their trauma by their behaviors and different things. And now your trauma is getting all turned up from like 30 years ago or something, uh, in your attachment style is getting, maybe it was a kind of an insecure attachment or elements of insecure attachment that is going to just all get turned up or at least the potential for that.

[00:31:46] And so I think the work for parents, part of the work is also, if they can connect with a therapist, who can also help them with that part of it, their own past trauma, maybe talking some about their [00:32:00] own attachment because attachment with an adopted child is a really, it's a really hard thing and I don't mean every single adopted child, but for a lot of adoptive parents, this is a huge source of discussion.

[00:32:15] In how do we, how do I bond with this child? How do I help this child bond with me? Because I'm a stranger, at least in the beginning, I'm a complete stranger to them, to my child. And my child's a complete stranger to me. And so the attachment and the bonding can be really, really difficult. And sometimes that happens with birth, birth children as well.

[00:32:40] I don't mean to say that giving birth to a child means you're automatically going to have like perfect secure attachment. Because that sometimes is a difficult thing, too. But for adoptive parents, I think it's probably almost par for, uh, the experience is just that that's going to happen [00:33:00] for probably a lot of adoptive parents is the attachment is just going to be hard and attachment is a two-way street.

[00:33:06] So it's not just, how can I help my child attach to me my adopted child, how can I make sure that I'm getting I'm attaching and bonding with my child, which is really hard if that child is, if most of your experience with them in those early days, especially is that they're crying all the time. They're pushing you away.

[00:33:27] If they're an older child, maybe they're throwing things at you or they're pushing and pushing and pushing you away.

[00:33:34] **Laura Reagan:** Hiding, running from you. Yeah.

[00:33:37] **Amy Sugeno:** That can be a really, it can be very hard to even want to attach to that child. And of course you want to, but how in the world do you do that? So, so it can, um, so then there's so much shame.

[00:33:49] That's like I want to attach to this child, but maybe there's this hidden feeling of like, man, I'm so tired and I'm tired of all of his behaviors or her behaviors. Maybe there's a part of [00:34:00] you that is starting to feel like I wish I hadn't done this or, you know, adopted or I don't like him, or I don't like her.

[00:34:06] And then of course you feel terrible, terrible guilt, that feeling those ways. Um, so being able to find a therapist who can really help you to express these things without feeling shamed, without feeling like I'm just the most horrible parent on the face of the earth, this is a child who's been through so much.

[00:34:24] How can I be feeling these ways, a therapist that can sit with you through all of that and just listen, and then try to help you make sense of sort of normalized some of it and help you make sense of that, and then help you to find ways to begin to work through some of that to a little bit of a calmer place or a better place.

[00:34:44] And that might take, you know, some time, depending on what's happening at home with your parents, with your child, and also, you know, with your relationship. If there's all these different behaviors going on, it's really hard on a marriage. It's really hard on siblings. [00:35:00] So it's, it's a, it's really, it's hard on your other relationships where you might normally find support your friendships or at church or whatever it might be because those often people may, may begin to drift away, uh, people you might normally find support from. So it, it gets, it can, it can be a really, really difficult place. That's why I kind of called it a, you know, you're in the trenches, um, when things are going really, really bad for a long time.

[00:35:27] **Laura Reagan:** Yeah. This has been so interesting to think about because thinking about being an adoptive or foster parent or parenting a child who has trauma as a secondary traumatic stress experience. It totally makes sense. And yet I think it's so great that we're having this conversation, because what I'm hoping is that if there's anyone listening to this, who's like, that's how I feel, but I didn't know what to call it.

[00:35:58] And I just, because I [00:36:00] didn't know what it was, I just dismissed it. And I felt like it wasn't real, you know, for those people who are listening to be able to say, oh, there are therapists who can help with this. And that. If I know how to explain what I'm feeling, maybe I can find the therapist who will be able to help me feel better with this because, you know, I love my child and I want to feel connected and at the same time, parenting is so hard on a good day that it can be really discouraging when you think you're the only one who's suffering this way. So I'm so glad that you brought these points to light.

[00:36:38] **Amy Sugeno:** Absolutely. It's something, you know, again, I'm very passionate about because I have lived it myself. And so it's something that, it's something I feel that's really, I mean, trauma is something that I've loved working with for a long time and still love to work with. And I think this is a piece of, piece of trauma, that's not that well [00:37:00] understood attachment trauma, um, is maybe it's certainly, there are some really great neuroscientists and therapists who are doing research and, and working with people around this, but it's not a real common sort of thing to be able to, get accurate information on.

[00:37:17] And I think, you know, what you were saying about earlier about adoption being sometimes kind of misunderstood, that I think that that's also a piece of it is that people, you know, even therapists, you know, they might think to themselves, well, um, you know, you're looking at, you're working with this parent and they're telling you all of these things

and you're thinking well, but now your child is safe or, aren't you an angel, you know, or just aren't you just, uh, such a savior for like saving this child from, whatever circumstances that brought them to be adopted or, I remember [00:38:00] talking to an adoptive parent who said, well, my child's past therapist said, well, I don't really think adoption has much to do with your child's anxiety and depression, maybe a little bit. And it turned out to just be a huge piece for this child that was completely overlooked by a well-meaning therapist.

[00:38:19] I don't mean to be critical. I'm just more trying to say that I think it's a really misunderstood piece and it's easy, especially when a child has been adopted at birth, where it's like, oh, well they never have had any abuse or any, so they, they just moved right from the adoption agency or the orphanage straight into you know, adoptive home and loving, safe parents.

[00:38:43] And sometimes, that is the case. Sometimes things go smoothly and truly a person may never have much difficulty with their adoption, but sometimes not. And sometimes it can creep up at the times when you just don't [00:39:00] expect it. So that all of a sudden your child, they're just having all these behaviors and, up until then, they've been such an easy child to raise or maybe it doesn't happen until the adulthood that they start to have a lot of things come up and often around, uh, important, um, like life transitions.

[00:39:22] So things like, uh, um, puberty for instance, or graduating from high school or becoming a parent yourself, getting married, these important life changes or important life stages are times when sometimes that will really get to be churned up. Because they're these vulnerable times when you're kind of looking back, you know, in your own life and you're thinking, well, I don't, I don't know.

[00:39:48] Now I'm pregnant with my first child and I don't know anything about my genetics. I don't know what to think about my own history. Um, if you're an adopted person, so maybe that starts to really bring up a lot of very confusing [00:40:00] thoughts.

[00:40:01] **Laura Reagan:** I think too so much of it, it's not always just so unconscious, but it can be out of our awareness, the emotions and the, even the body sensations can be separate from the thoughts, because your thoughts, you can say, oh, it has nothing to do with that.

[00:40:16] Or, you know, it's, we can talk ourselves out of it in the stories we tell ourselves. But the emotional response we have, especially with trauma, it's primitive response. It's not, there's no real connection with your logic. So, um, you know, may not even be necessarily saying to yourself, well, I don't know my genetics, but just something biological seems to be happening in your life. I'm not okay.

[00:40:41] **Amy Sugeno:** Yes, exactly and sometimes it can really, it can be very hard to connect, like what's happening with you now. Say that for some reason, you're starting to just really feel a lot of anger, becoming very angry or having a lot of grief [00:41:00] or something and you can't really figure out why that's that trying to hold on to fog.

[00:41:04] Uh, and it can be really hard for people to connect that all the way back to like being, given up for adoption at two days old or something like that. And so sometimes the reactions can feel very infantile which can be a very confusing feeling for somebody who's an adult or a teenager. So in other words, the feelings that you're having and the thoughts also can be very, can feel very disconnected from anything else that seems to be going on in your life.

[00:41:37] And so, so then it's really confusing. Maybe thinking, well, why, you know, maybe you're pregnant with your first child and you're thinking well, yeah, it's normal for a pregnant woman to, have a lot of emotions, like more than you would if you, before you were pregnant or something, but maybe it's like, you're having extreme emotions that are [00:42:00] like a lot of grief or a lot of anger.

[00:42:02] And you're just like, what is happening to me? And so, so it can kind of sneak up in these ways where it just doesn't seem to make any sense whatsoever. And so that grief piece, especially, uh, I think is a really, really big one. And that's the one I think that people often really want to lock away because it's so heavy and it's so intense and it's so confusing.

[00:42:25] How can you grieve having lost a, say a birth mother who you never even met, maybe you were given up for adoption, like right away, or how can you grieve maybe if you become aware that you have a biological sibling and maybe now you have a trauma, you're just such grief because you never got to know that sibling.

[00:42:51] And it's like, what? I didn't, I don't even know this person. How can I grieve not having a relationship with them? So it's, it's a very, I don't know if [00:43:00] disenfranchised is the right word for the grief, but it's a, it's a very strange kind of grief that I don't even have a name. I don't even know if there's quite a name for it, or maybe there is a particular kind of grief.

[00:43:12] Um, it's very illogical. It's I think that's what can be hard for people is that it just doesn't seem to make any logical sense. And that can really start to in our, in our society that's a very analytical reasoning sort of society. It's a little hard to, uh, try to make sense about what's happening.

[00:43:32] **Laura Reagan:** Yeah, well this has been so interesting. So, um, I hope that people who are listening, if any of these feelings seem like anything that you could be experiencing or someone, you know, might be, um, just knowing that there's some, there's a reason that could make sense why you would be feeling this way and maybe, you know, exploring that with a therapist would be useful.

[00:43:58] I think that's [00:44:00] really fabulous. And, um, it's been very thought provoking for me. And, um, so I want to give you a few minutes to, to talk about how in your practice you work with all of the different types of clients you work with, who are affected by attachment trauma and adoption and how ecotherapy comes into play with this.

[00:44:24] **Amy Sugeno:** Yeah. So, that's something that is a real, that I'm really passionate about is ecotherapy. And like I said, I do a lot of the real conventional types of talk therapies, and some Sandtray and different things, but over the years of working with a lot of different kinds of trauma, mainly interpersonal type trauma, abuse, and neglect, and I think, I think most trauma therapists will say this too, and they might have different ways of coming different ways of approaching this.

[00:44:54] So some therapists will, the non-verbal piece of working with trauma I think is [00:45:00] really important because trauma doesn't, we know doesn't really live in the part of the brain that has to do with logic and verbal ability. That's why trauma defies logic is the way that it can feel for people.

[00:45:13] So we have to have some non-verbal ways have access to where there are traumatic memories and where the trauma is. So for me, some therapists will use art, somatic, creative therapies, music, different animal assisted therapy, these kinds of things.

[00:45:31] One of the things that I do that I have found really effective is using nature-based therapies. And so that partly comes from, in my past life, before I was a therapist, I was a wildlife biologist. So it's kind of a natural fit for me, tapping into the healing aspects of nature and the restorative aspects. And so there's a ton of research behind this, and also we don't necessarily need research to know, that going out into [00:46:00] nature, maybe sitting by a pond or a Creek or, some kind of beautiful area, is restorative.

[00:46:09] Like you just feel a little bit better, maybe a little bit calmer. And so some of what some of my work is simply, validating and encouraging people to spend more time in nature. And that can just be as simple as sitting on your front porch, if you can go on a hike or go to a park where there's a pond or something like that. So simply allowing nature to do the work that it does, which is relax the nervous system, it helps a little bit with depression and anxiety helps to relieve some of those symptoms, these kinds of things that nature just does passively. But then the deeper work of ecotherapy as a therapeutic evidence-based therapeutic approach is that then you can start to help clients develop a relationship with the [00:47:00] natural world.

[00:47:01] So that nature becomes kind of a teacher. Well, nature becomes actually for me, as a co-therapist is how I view it. And so nature becomes a teacher and a guide and a mirror. And it's hard to explain in words because it's very experiential, but for instance, I might be, sitting next to a Creek or something with a client and maybe we're talking about a particular, maybe she, or he says, I really love this rock that we're sitting on.

[00:47:34] And so I might say something like, well, what, what seems to come up for you when you are thinking about this rock or as you're touching this rock and they might start to talk about the strength of the rock or the steadiness of the rock, or maybe they're talking about water and how water feels very cleansing or something like this.

[00:47:56] So we can begin to then take it into a deeper place of, [00:48:00] maybe, uh, that might be the rock as a reflection of their own inner strength as one example. Or it might be

that when you are not feeling very strong as a parent or as a person, which happens to all of us, maybe this is a place where you can come and simply sit with this rock, let nature do what it does passively to help.

[00:48:24] And also just kind of be with this rock and see if you can just, uh, begin to feel a little more strength, you know, and that can also be maybe a particular animal. Some people talk about, you know, I'm, I'm more connected to trees because they're flexible or they bend with the wind, or I love their roots.

[00:48:43] And so that becomes like a mirror of who they are inside. And then we can talk about, you know, like this tree, maybe you have really deep roots, so that maybe one of your strengths as a parent is that you are really steady strong person, [00:49:00] but it's not strong in the same way that like a grizzly bear is strong or something.

[00:49:04] It's more of a deep, inner well of strength. Or maybe you're very flexible as a parent. Maybe that's a strength of yours so that when you're having a difficult parenting moment, you can visualize this tree that we're sitting here next to you, that you seem to really enjoy and you, maybe in your mind, you see it moving with the wind, something like this.

[00:49:26] Again, it's hard to explain in words, but experiencing it, it can be really deeply moving and deeply affecting for people. And it's, what I love about it is it's very gentle. Trauma is a very powerful thing, and I love that connecting with nature is a very gentle sort of thing. We're often sitting side by side or we're walking side by side, which is a gentle thing in and of itself because it's not two people staring at each other in a therapist's office.

[00:49:56] We don't have to look at each other [00:50:00] in that same way. And that can be really helpful for some people when their trauma or their secondary trauma is so intense that even just being in a therapist office is too much. So I find it to be a much more gentle kind of therapy and I also find it to be a lot very containing. And so you can bring it- you think about veterans who, maybe you've heard about these like rafting trips and different trips where they they're rafting down water, that's like churning and really powerful water. And there's canyons, canyon walls along the side. These are really strong elements of nature.

[00:50:41] And part of what I think is going on is that that has the ability to contain the immensely strong feelings that come with PTSD and the body sensations and the nightmares and the thoughts and the hypervigilance so sometimes these really strong elements of nature, [00:51:00] or the spaciousness of nature can contain that.

[00:51:03] Whereas in a therapist office, it's, you're in a little box, like my office, I try to make it really welcoming, but it's still a box inside. And sometimes it's just too much for people. Their feelings and their experience of PTSD is just too big and too overwhelming that even try to talk about it. It's just too much. And now they're re-traumatized, but being out in nature, there's something about it where nature can just kind of contain or absorb

that a little bit better in it's in a lot of it's non-verbal. And so I'm also trusting that nature is just allowing things to happen. Maybe it's as simple as calming the nervous system.

[00:51:46] But I can see it happening and I can feel the difference working with people outside versus in my office. And sometimes working in my office is the appropriate place to be. So I don't, I'm not, I don't necessarily go outside all the [00:52:00] time with people. So anyway, that's kind of in a nutshell, sort of how that works.

[00:52:07] **Laura Reagan:** That was really interesting description and I know kind of getting to the end of our time. So I wish we could talk more about ecotherapy maybe if you want to come back for a third interview, we can get into that more. Yeah. I mean, I would love that.

[00:52:25] **Amy Sugeno:** Yeah.

[00:52:26] **Laura Reagan:** So, Amy, how can people find out more about what you're doing? I know you do a lot of workshops presentations in addition to your clinical work. Um, how can people keep up with what you have going on?

[00:52:41] **Amy Sugeno:** Yeah. So of course, anybody who's in Texas, which is where I am, I'm in Marble Falls for anybody who might be listening who's into, I'm starting to, I'm going to wait till the it's very hot down here right now.

[00:52:54] So I'm gonna wait till the weather cools off, maybe this fall or spring, and I'm going to start [00:53:00] to do, what I'd like to do is a lot more, workshops and maybe retreats, but also just walk a guided nature, connected as connectedness walks. And some of those will be free. You know, some of the bigger ones like retreats or something, of course we'll have a fee associated, but anybody who lives in, in Texas, especially in the Austin central Texas area, they could go to my website and just sign up to get my blog.

[00:53:32] Although I will say that I've gotten a little bit lax about doing blog posts that's been awhile, but that would get you onto my mailing list. Or somebody could just email me directly through my contact page. And I, and just say, can you please put me on your ecotherapy mailing list or something and I'd be happy to do that.

[00:53:53] **Laura Reagan:** And what is your website?

[00:53:55] **Amy Sugeno:** Oh, yes, that, that would be helpful. It's [00:54:00] [www.amysugenocounseling.com](http://www.amysugenocounseling.com). So that's A M Y S U G E N O counseling.com. And most most of my website is right now is more about my counseling practice. The walks and the retreats, I haven't, I'm just now starting to really work on those.

[00:54:22] So I may actually come up with a whole different website at some point that will just talk about all the ecotherapy stuff. So my website right now does not have a huge presence as far as eco what I'm offering with ecotherapy. But it will at some point, cause it's where I'm moving my practice more in that direction.



[00:54:39] **Laura Reagan:** Great. So even if people are listening to this, you know, a couple of years after 2016, they can probably go to that website and get to the ecotherapy information, whether it's on a different website or they're connected or whatever.

[00:54:55] **Amy Sugeno:** Exactly. And then actually one, one thing, if there's [00:55:00] anybody listening who is from the Wisconsin, Minnesota area, um, in October, it's the 21st and the 22nd of October, there's a, it's the Wisconsin foster and parent a foster and adoptive parent association conference fall conference.

[00:55:16] And I'm actually going to be speaking up there, I'm going to be doing an eco therapy workshop a one day. And then, the next day I think I'm going to be doing, like, I think maybe the keynote I'm going to do another talk. I don't know if it's a keynote or don't remember, but I'll be speaking again. And that's going to be more on secondary trauma in foster and adoptive parents, I'm going to be doing two things with that. So anybody who wants to, um, go to that conference, that would be a way to, I think it's pretty affordable. Um, so that would be another opportunity. That's a little unusual. I'd haven't, uh, don't really do a lot of talks outside of Texas.

[00:55:56] So that's kind of, I'm really excited about, I've never been up to that area before.  
[00:56:00]

[00:56:00] **Laura Reagan:** That's very cool. So that's October, 2016 and hopefully people will, who are listening to this after that time will still be able to go on your website and see the other things you're doing coming up and you get your newsletter and all that good stuff.

[00:56:17] Well, Amy, it's been delightful to talk to you again. And, um, I hope that we'll continue this conversation in the future, but for now, thank you so much for being on Therapy Chat. Thank you. It was my pleasure. I really enjoyed it.

[00:56:33] 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 like Sunset lake CBD's products. 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.

[00:56:58] And I also like the CBD [00:57:00] 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."

[00:57:26] Today I am really excited to bring back someone who many of you have heard from recently on Therapy Chat. My guest today for the second time is the wonderful Amy

Sugeno LCSW who is a clinical eco-therapist in Marble Falls, Texas. Amy, thanks so much for coming back onto Therapy Chat.

[00:57:48] **Amy Sugeno:** Oh, thank you. It's my pleasure.

[00:57:50] **Laura Reagan:** Yeah. Last time we were talking about attachment and we got so involved in talking about that we really didn't get to go in depth into [00:58:00] ecotherapy, which I was originally planning on talking to you about, and I wanted to bring you back on so that our audience, I know we talked about it a little bit on that other episode, but I would like our audience to be able to hear more about what ecotherapy is and how you use it and what the research is on this method and why it's beneficial and who it helps and what it's like and all that good stuff.

[00:58:25] **Amy Sugeno:** Yep. That sounds great. I'm ready.

[00:58:28] **Laura Reagan:** Awesome. So let's just start off if you will, by, can you just explain for people who are listening, What is Ecotherapy?

[00:58:37] **Amy Sugeno:** Yeah, well so ecotherapy is often referred, or talked about as an emerging field with ancient roots. And that was, something that one of the pioneers in this field, Craig Chalquist he talks about it in that way.

[00:58:54] And it's basically any nature-based intervention or nature based therapy. So [00:59:00] that could be, animal- assisted therapy, equine therapy or canine, or with any, any sort of, uh, therapy animal, horticultural therapy, adventure therapy, and also wilderness therapy, which can be thought of in different ways.

[00:59:15] Wilderness therapy is probably the way I work the most, which is in more wilderness, like settings, maybe like a state park or something like that. Where we basically take the work that we might do indoors in my office, but we're doing it outside. So nature becomes like my co-therapist in a way.

[00:59:34] So it's more of a depth, psychology type of approach in that way. So anytime you're bringing nature into the healing process or the therapeutic process, that's that falls under the umbrella of ecotherapy.

[00:59:48] **Laura Reagan:** Okay. So nature is your co-therapist.

[00:59:51] **Amy Sugeno:** Yeah. And there's so eco-therapy because it is such an emerging field, there's still a lot that's being worked out and a lot of [01:00:00] clinicians and also non-clinicians, other types of healing professions are using ecotherapy in a lot of different ways. So it's hard to really describe all the different ways. Some people stay on the topic of more like eco wellness. And so they bring nature in to help physical health or emotional health. So that might be like to lower blood pressure to reduce stress, that sort of thing. So it's more

about quality of life and wellness. There's a lot of work around, I'm not sure exactly what to call it, but I think of it as sort of deep soul work.

[01:00:38] So that might be things like vision quests, this is in the realm of earth based healing there's so the Animus Institute and there's, there's some others that are doing some really deep transformative type of work that might fall kind of into the purview of ecotherapy.

[01:00:55] And then there's clinical eco therapists who are usually licensed clinical mental health [01:01:00] professionals who are bringing that kind of training and background, and then blending that into bringing nature in, to also help with that healing process. So that might be something like, say a licensed social worker who wants to work with either an individual or say a group of women who have experienced childhood sexual abuse, and then maybe you have the therapy happening outdoors. So you're bringing in that part of things. And maybe you're also looking at how the abuse has affected maybe attachment or being able to trust in relationships or something like that. So you're bringing in a really deeply clinical approach in with what nature can also offer.

[01:01:47] **Laura Reagan:** It's very interesting. And so that is what you're doing. You're a clinical eco therapist or licensed social worker, licensed clinical social worker and, and you're using [01:02:00] nature. So I guess, how do you, what does the research say about this? How, how do we know? What do we know about its effectiveness?

[01:02:09] **Amy Sugeno:** Yeah. So again, as an emerging field of, there's a lot of research behind how nature being in nature or nature, or even viewing pictures of nature affects the brain. There's been a lot of studies doing MRI brain imaging work whenever people look at a picture of a nature. Now there's these like a mobile imaging devices. So you can actually go out into nature and researchers can measure nature exposure more like in real time when you're actually outdoors, but as an emerging field, there's a lot of research around that. And there's more and more research around the actual ecotherapy, especially more in the clinical ecotherapy realm.

[01:02:58] A lot of the research [01:03:00] centers around depression and anxiety, stress relief, which is intuitive for anybody who enjoys nature or spends time in nature. It's, that's one of the first things you notice that you get out of that is you just get a sense of relaxation and letting the stress kind of fade away.

[01:03:18] There's a number of good studies on depression and how it can help to reduce rumination, which can be a difficult thing when somebody is struggling with depression, that can be a symptom that happens where you go over something in your mind over and over and over again. So it can decrease rumination.

[01:03:36] And also there's one really interesting study. And I want to say it was done in England, but I may be wrong about that, where they did cognitive therapy and it was a one group was the control group. So they got cognitive behavioral therapy, regular in the inside hospital setting like they would normally receive it.

[01:03:54] Then the other group that got the exact same type of therapy, but in a forested setting. And [01:04:00] what this particular research study found which was just a really good research design- and what this study found was that the people who were in the forested setting, that they had, that their depression went into remission and it stayed in remission for, I think they did like a six week or some kind of follow-up and it stayed in remission in some cases, even better than what anti-depressants were able to accomplish as far as remission.

[01:04:28] So there's some really great studies out there and more and more really robust studies are coming out that are looking at things like, well, how, how much nature exposure is helpful for say stress relief or something? So that's good stuff that's coming out.

[01:04:45] **Laura Reagan:** Yeah.

[01:04:45] **Amy Sugeno:** So there's a variety of health benefits and there's all these great, like as far as more specific to therapy. There's things like of course, stress release, stress relief, and also being able to be more [01:05:00] resilient when you are experiencing stress, a decrease in anxiety and depression symptoms, especially for mild to moderate.

[01:05:07] Also things like, reduction in ADHD symptoms, with just being outside, promotes empathy, decreases impulsivity. One of the ones I think about a lot since I work a lot with trauma is the effect on the nervous system. So it helps to there's some studies around that being in nature, it helps to calm the nervous system and also helps to regulate our daily cortisol pattern and cortisol of course, it's a very complicated reactions to stress and, but one of the key hormones is cortisol. And so when we're under chronic stress, that gets dysregulated. And so being in nature can help to regulate our daily cortisol levels. So lots and lots of really great, great studies out there to support this work that we're doing.

[01:05:56] **Laura Reagan:** Yeah. And that's so important too, about the [01:06:00] cortisol, because we now know that with things like childhood abuse, you can have elevated levels of cortisol over your lifespan and it can lead to all kinds of physical problems, physical illness.

[01:06:17] **Amy Sugeno:** Yeah, absolutely. And there's some really, I just was looking this up the other day. There's some really interesting research that's come out on what's called, earthing or grounding. And of course, a lot of therapists, that's a pretty, especially working with trauma. That's a really common tool, this idea of grounding. In other words, helping to calm the nervous system, maybe even literally touching something around you, like your chair or something if you're starting to have some feelings of panic or fear or a little bit of retraumatization or something like that. And so there's some really interesting research around being in direct connection to the earth. So for most of us that would be like going barefoot.

[01:06:59] So [01:07:00] you go to the beach and of course it's kind of real common to take your shoes off and to walk on the sand, but it could also be, especially if you live in areas where the grass is really green and soft, you might enjoy taking your shoes and socks off and feeling the grass under your feet.

[01:07:17] And so there's some really interesting research where the earth has an electrical field and that, electrical field, if we're in direct contact with it with our skin that, that, comes up through our skin and actually does all this. And this is actually researched from the medical community where it begins to reregulate our nervous system, also the endocrine system. So it seems like one of the directions that's going in is for people with chronic health problems, maybe such as asthma or anxiety, different kinds of things- diabetes, heart, coronary, heart disease sorts of things [01:08:00] that there may be, there may be some help in being connected more directly to the earth, you know, walking with your feet or something like that.

[01:08:09] So the research is a little bit new, but, it's really fascinating. And especially because it comes from the medical community where they do tend to do really rigorous studies, I've been kind of keeping an eye on that because it has a lot of really great implications.

[01:08:23] **Laura Reagan:** Absolutely. Have you heard? And if you haven't then don't worry about it. But have you heard about forest bathing?

[01:08:31] **Amy Sugeno:** Yeah. Yeah. So that started, originally originated in Japan, I want to say in the early 1980s, so they were really on the very forefront of this idea, that as far as in a more modern way, what I mean is that for thousands of years, people have been turning to nature for restoration and stress relief and these kinds of things, but in a more modern kind of like tapping into nature for [01:09:00] very specific things like health benefits or in a more structured sort of way.

[01:09:05] Yeah, the Japanese in the early 1980s began to not only advocate so that my understanding is that the Japanese government actually was advocating for their citizens to please on your lunch break or after work or whatever, we're going to set aside, there's these lands, these forests that we want you to go to and simply spend time out in nature.

[01:09:26] So it's different from like a guided hike where you're like maybe identifying birds or plants or something. It was more just go and be with nature, go sit next to a tree or go walk around and just be. So kind of a mindfulness sort of approach to being in nature. And the great thing about that too is they have a ton of studies, so they began to study this, I guess, right from the start, they were doing lots of really good studies on how this was affecting people when they would go out into the forest.

[01:09:59] Now, [01:10:00] interestingly way before that, talking about like sanitariums where doctors, would recommend when people had different lung illnesses, this was a hundred or so many years ago. They was, they go out into the forest or they would send people to sanitariums for health reasons.

[01:10:18] And it was thought that there was something, something helpful in the forest air was how I've seen it termed. And it turns out that there's really something to that as some of the Japanese research has found that there are chemicals that trees send off called phytoncides that are originally to protect the tree from harmful things that can happen. I

don't know that much about trees, but different sorts of things that can happen to trees that cause damage or cause a tree to get sick. So it protects the tree, these phytoncides, they are admitted out into the air, out into the [01:11:00] soil, into the water, but when they're admitted into the air, there's some interesting studies around that this actually can provide some help to us as well.

[01:11:11] There's a few studies that talk about phytoncides being helpful for possible preventative effects for cancer that these phytoncides help natural killer cells, which are really important to our body's own way of trying to fight cancer. So these are kind of early studies.

[01:11:33] Yeah, the forest bathing got us off into a really good, probably even with some of the beginning of this field.

[01:11:40] Yeah. Well,

[01:11:41] **Laura Reagan:** thank you for explaining it because I had never heard that term until I heard it a couple of weeks ago on the day before I was going on a hike in the woods. And I really thought about it while I was walking.

[01:11:53] And you know, it was a guided hike though, but still, I was like, just thinking how the [01:12:00] air is different and it feels different in the woods for us when you're surrounded by trees.

[01:12:06] **Amy Sugeno:** Exactly.

[01:12:06] **Laura Reagan:** You know, I often say that I can't feel bad when I'm hiking. Like I, I can't, I can be all in turmoil and then I go hiking and I'm not, I feel good.

[01:12:19] And it's like, what was ever bothering me? I don't remember.

[01:12:23] **Amy Sugeno:** Yeah, absolutely. And so as an eco-therapist, there's so many different levels. If I was, if you were my client, or if I was working with somebody, it could be that we go hiking or we go for a walk. I sometimes do a little bit of work more on a volunteer level, but as a mental health professional work with women who have been affected by breast cancer, a breast cancer diagnosis and sometimes because of their treatment or because of the diagnosis, they are not able to, at that time go on a long hike.

[01:12:54] And so there's also ways of doing ecotherapy even indoors, [01:13:00] or it might be that, you know, a homework assignment or something might be like sitting on your front porch or opening your window in your house if you're not able to really go outside, you know, for whatever different reasons. So eco therapists can work on a lot of different levels.

[01:13:16] It doesn't have to be, I mean, being able to go on a hike is a great thing and a really rich source of therapeutic processes and, and, and all, uh, so that's a great thing, but it

doesn't have to be that we go on a three-mile hike. It can be also just sitting by a Creek or sitting at a park or something along those or doing indoor sorts of things as well.

[01:13:39] **Laura Reagan:** Well, yeah, that's helpful to know because you know, one of the things as a business owner that comes to my mind when you talk about ecotherapy is how do you structure that into a day's worth of therapy sessions is you just see one person per day and that doesn't seem possible. So [01:14:00] can you talk about like, what that really looks like in your practice and how some of the different ways you can do it?

[01:14:08] **Amy Sugeno:** Yeah, so there's a lot of different ways, so of course, depends a lot on your clients, what they might be comfortable with or able to do or what you're able to do. But so there's a lot of different ways to approach that one can be that. And this is probably what I do the most is to simply meet my clients, out at a Trailhead at a park or something. And, backing up from that, this is usually, we might take at least a few sessions to maybe discuss this. And so it's not, it's not a therapy, especially as you are doing more of a deeper kind of clinical ecotherapy work with somebody you don't want right out of the gate, just say, Hey, let's meet at such and such park then we're going to go, just take our therapy sessions outdoors because you want to do some assessment, but if your [01:15:00] client has had some trauma outdoors, whether that's, it could be a sexual assault, but it could also be they were stung by a bee or something.

[01:15:09] And that was really frightening for them or a veteran who has spent a lot of time outdoors in combat. Certainly you would want to assess for that a forest it's setting for a Vietnam veteran might not be real comfortable, or it might be, but again, the assessment process is what's going to help you with that.

[01:15:28] But once you determine, say with your individual client, that yes, we, it's going to be good to, for your treatment to do an eco therapy session outdoors. And the client is wanting to do that. They're ready for that. I'll usually meet them somewhere like at park headquarters and then we'd drive to the Trailhead in our separate cars, or we just meet at the Trailhead and then we go for a walk or we walk a little bit, and then we sit maybe on a bench or a there's one place I go where there's a lake. So there's, we can sit by the lake and [01:16:00] we simply do the counseling session outdoors, except now I'm bringing in nature as a co-therapist. So clinically there's a lot, it's sort of looks the same, but there's a lot of different stuff that can come up to when you have nature as a co therapist, your affect as the therapist changes, of course you're dressed differently.

[01:16:20] Perhaps you're wearing jeans or hiking pants or something. So that's one way that I commonly will work with people, but sometimes I work with groups, and I tend to work more on a, I guess you'd say like a superficial level. So it could be like a mindfulness in nature group session. So we're not going to go deep down into deep therapeutic, you know, issues, but I want to help people to connect with nature in a mindful way so that they can then do that at home, or they can begin a mindfulness practice and they can have nature as a part of that if they want to.

[01:16:58] So that's kind of a different [01:17:00] way that I work and then indoors, if we need to stay like in my office, I have a bunch of, nature sorts of things like, sticks and cattails and rocks and sand and different things. So sometimes we're just working with the nature items that are there in my office.

[01:17:19] And that really just depends on the client. Some clients aren't interested in that at all. And some are like, well, what is this? And I have a bucket of sand that came from the beach that I dug up in that for people who have a lot of anxiety they sometimes like to have that sand on their lap just to kind of play with really like, as they're talking.

[01:17:37] And that can be something that helps to calm a little bit of their anxiety. And then finally homework, especially if a client already really maybe enjoys nature has spent time in nature and really likes, wants to do this. You can give a homework assignment such as maybe, maybe your client identifies a particular Creek that's easy for them to get to. [01:18:00] And they might like to spend some time next to that Creek. And so you can talk about what the homework would look like. Maybe it's mindfulness, or maybe it's just simply sitting by the Creek one day a week or, or however much. And they can kind of like check in with how they're doing before, like when they first get out of the car. And then when they're done with sitting next to the Creek, they can kind of check back and see if it's helped. Check in with their body and see if that has helped say their anxiety for instance. And so those are all kinds of different ways that I tend to work. There's a whole really rich field of horticulture therapy that I don't do a lot with just cause it's not as much my area, but for people who do really enjoy plants or gardening, this can be a fantastic, really great rich area I think that you could do indoors, you could of course do outdoors. And then also animal assisted therapy, which I used to do. My dog is retired now, but of course, animal assisted [01:19:00] therapy is a really big, big field as well. Since I've worked more in wilderness settings, I actually kind of tend to bring in, if we are, if a lizard runs by or a deer or something like that, then if it seems, if it seems important, then that's something that we can kind of talk about. Like, oh, I noticed that we're, you know, there's a deer that has come up here and what is that like for you? And sometimes nothing comes up with that, but sometimes really interesting and surprising things will come up just by the visiting of a particular animal, a bird that flies by or something like that.

[01:19:33] **Laura Reagan:** Yeah. So would you call that animal- assisted therapy or ecotherapy, that the wild animal is part of it.

[01:19:42] **Amy Sugeno:** Yeah. I don't know that, I hadn't really thought about if it would be called animal assisted therapy, because that feels like a whole different world.

[01:19:50] That's more with domesticated animals.

[01:19:53] **Laura Reagan:** I guess it's more directive with the animal too.

[01:19:57] **Amy Sugeno:** Yeah. Yeah. But [01:20:00] certainly, if you have a wild animal come up, one of the real common ones, at least where I am is like butterflies or birds that come by. And sometimes that's really meaningful for a client in particular.



[01:20:13] Like I've had a few clients talk about dragonflies if we're next to a Creek and a dragon fly comes up and lands on a, like a little stick or something like that. And for some clients, that's a really meaningful thing. And they'll talk about why that's so meaningful for them. And maybe it has to do with, I'll just kind of make this up.

[01:20:33] Oh my, when my mother died, you know, I saw a dragon fly and she loves dragonflies and I really felt like that that was her way of communicating with me. So something to that effect. So that gives you some real richness into, rich material to work with. For other people a dragon fly going by doesn't evoke that same sort of thing that maybe a lizard does.

[01:20:57] Or maybe if you're lucky enough to have, [01:21:00] say like a Fox run by or a Hawk or an owl come and land like in the tree, pretty close to you. Like that can certainly, if nothing else just be really exciting. And so that can lead into discussions about maybe how helpful it is just to be pulled into that mindfulness of that animal.

[01:21:20] That really wonderful owl that just landed right there just pulls you right into mindfulness. And that can be a launching point for how nature can really help in a mindfulness practice, if that's something that your client might be interested in or for some clinicians. And if the client seems to really benefit and enjoy this, you can really go down a path of sort of like, and this gets more into that deeper soul work of kind of like animal medicine.

[01:21:48] And some clients are not going to be, want this at all and some really get into this. And it's really helpful for them talking about, you know, I feel like that my spirit animal or my power animal has always [01:22:00] been a Hawk. And so then you can talk about, well, what does that mean to you? What is a Hawk?

[01:22:05] Is it, you know, is a Hawk really powerful? It's got great eyes, and so is that, you know, as far as like visioning or clarity I mean, you, so you can get into a lot of really rich metaphors with animal medicine, as well as metaphors with the landscape. For instance, I sometimes will go out to big bend.

[01:22:26] I haven't taken clients out there, but for my own self I'll go out to big bend national park. And one time I was hiking and there was the rock formations for such that there was like a little narrow gap in between two rocks that looked out onto this really vast desert. So it was like this narrow view onto a big wide open expanse that was further out.

[01:22:49] And I remember thinking if I was with a client, we could talk about that particular metaphor, of that narrow view opening into a [01:23:00] wider view and see what kind of comes up with that around maybe feeling, restricted in how you feel right now or where maybe that could be being able to see what you want out of your life, in the distance or something like that depends on what comes up for the client.

[01:23:18] But I work a lot with metaphors in that particular way, whether it's an animal that comes up or flies by or something, or whether it's a particular tree or the landscape itself, I like to ask people sometimes, 'what's catching your attention right now?' There's all these things around us, trees and rocks and the sky, and maybe flowers what's catching your attention?

[01:23:43] And they'll always come up with something, they'll kind of look around and they'll make somebody might say, well, that, that tallest tree over there, that standing all by itself, you know, that, I just think that's really great. Like I just can't help, but, [01:24:00] really be pulled in, you know, that really draws my attention.

[01:24:03] So then I'm thinking of a tree, a tall tree all by itself. Is that attachment related? Something about being all by yourself? Maybe, maybe not. Is there something about being the tallest tree? Is there something about wanting to be more known or more visible, taller than you feel right now? So you kind of get the idea of where something like that could go.

[01:24:27] **Laura Reagan:** Yeah that's so beautiful the way you talked about it and I don't know about this because you are the one who knows about ecotherapy and I don't, so tell me if I'm wrong, but it feels like you're bringing in more intuition and inner wisdom into the therapy therapeutic process through, I guess, that grounding in nature.

[01:24:51] **Amy Sugeno:** Yeah. Yeah. It is an extremely intuitive. Let me kind of back up the way that I work tends to be very intuitive [01:25:00] like that. I rely a lot on my intuition and some of that is experience from having taken a lot of people out as well. But if you also were just mainly staying on the level of say eco wellness, it doesn't have to necessarily be such an intuitive process if you're client is struggling with depression and say mild depression or moderate depression. And they feel like, and you feel like it would be helpful for them to spend some time outside. Maybe they have a garden that they have not been working in. And so maybe that's part of their homework, but that's not a real, highly intuitive sort of thing.

[01:25:35] I mean, it's a little bit intuitive just by the way of that nature can be helpful, but it doesn't, it's not like the deep sort of intuitive sorts of processes. Now I will say that I don't often meet clients for ecotherapy, like I was talking about that deeper, intuitive process until we've been doing a lot of work inside.

[01:25:55] So they already have some idea of a pretty good idea of what they're [01:26:00] struggling with I might already have some different sort of working theories about, say their attachments or different things that I have, we haven't quite gotten to in therapy, but I really have a feeling that getting outside, I'm going to get a clearer picture of these things I've kind of been wondering about them. And so that's another part of it is doing that deeper work- it's really helpful if you already have a good working relationship with your client.

[01:26:28] **Laura Reagan:** Yeah. Yeah. So it's not like, at one point I've heard you say is that it's not one size fits all approach and it's, it can be used in different levels of depth, but

when you've been working with someone very deeply clinically in your office, using ecotherapy out in nature can be a way to deepen that process even further.

[01:26:55] **Amy Sugeno:** Absolutely. Absolutely. Because you can see [01:27:00] your client in a much different sort of way sometimes. And I imagine some of that's because they see you differently. Again, maybe you're wearing different clothes, your affect is a little bit different, or maybe like you're wearing, you know, sunglasses or something.

[01:27:14] So you look different. And so maybe that just kind of also brings out something different, but something about being outdoors, you just, it, maybe it's maybe a good way to think about it is if you is a way that you are with your own child or hanging out with a friend at a coffee shop or something, if you go on a hike together, it's just going to feel a little bit different.

[01:27:34] You're going to maybe talk about different things or something like that, it's kinda maybe a way to sort of think about it where you just see each other through a different lens. And that brings up different sorts of richness and affect and I've gotten a lot of information about my clients as far as kind of assessment sorts of things, and being able to see more of what feels like could be kind of the core of who they are, [01:28:00] like maybe defenses come down just a little bit when we're outdoors. And that doesn't mean outdoors is always, always go outside with every single client. Cause sometimes that's not what seems like it's going to be necessary for their treatment or appropriate for their treatment. So I don't mean to say that every single client needs to, we need to go outdoors.

[01:28:18] It really it's just like any approach you want to use, what you feel is clinically appropriate for their treatment.

[01:28:24] **Laura Reagan:** Yeah. I love this though. And I'm thinking too, that there's a vulnerability to the fact that you're both outside, you may be hiking and you're out of breath. You're not just the person who's got it all figured out.

[01:28:36] You don't have control of the whole environment. So you don't know what's going to happen as a therapist. It's a vulnerable situation for both people and, but on an equal footing, instead of kind of the way it is in a therapy office. My therapy room, I strive to make it a safe space, but it's my space and, you know, there's a power [01:29:00] differential to that.

[01:29:00] And that's just part of the process. It's just like, when you go to your doctor's office, they're the doctor, you're the patient, you have power, but you are on their terms, and it kind of feels like that. So I think being out together in a space where you both bring strength to the experience and you both have a level of trust and not being sure what's going to happen, but you know, going with it.

[01:29:28] **Amy Sugeno:** Oh yeah. That's that brings up such a great, a couple of several great points. One is what you were talking about, that power differential that you know we

can make our offices just as comfortable and warm as we want too, but as you say, there's still our office. It's still kind of like our turf, I guess. But nature being outdoors is nobody's, it's shared equally.

[01:29:49] It's not mine anymore than it is my clients. And also a lot of the work, just if you're hiking or sitting down or [01:30:00] something tends to be a little bit more side by side. So you're not like facing each other, like you might more in a office setting. And for some people that can be really helpful to be a little bit more like hiking side-by-side or if it's a really narrow trail, it might be one in front of the other. And so that can be sort of interesting, like, which does your client prefer to be led or to lead? Like that can be kind of interesting stuff. Your client can also decide how far away they want to be from you if you're outdoors, whereas in the office, typically at least adults and teens, you have like the client's chair, or maybe a couple of chairs or something to choose from.

[01:30:37] And then your chair, it's like a set distance, but if you're hiking or something, you're, I've had clients sometimes stand, pretty far away from me. And I thought, well, I didn't realize that this is, this would be so uncomfortable for them. I wonder what it must be like in my office where they can't regulate their own amount of space.

[01:30:59] So that [01:31:00] gives me this great information and sometimes I can monitor through different outdoor sessions, like do they end up getting closer and closer and space to where it's more of a normal amount of space? Like I would stand next to a friend or do they remain really far away from me? So that it becomes the process also becomes a lot more, it's first of all, a lot more sensory. So it's a very alive kind of process. You have animals that come by like a butterfly or something. You may not know if it's going to rain. There's a lot that- it's always kind of shifting and moving you just, like you said, you never know what's really going to happen.

[01:31:37] You can probably predict, for the most part what's going to happen, but you never know what might come up. I've had sessions where a little snake has come across the path or something like that. And, that brought up a lot of great stuff and we had lots of good discussions. That's happened a few times. And of course that's something that just can't be [01:32:00] replicated obviously in the office, hopefully, no snake is coming through the office, but vulnerability I think is also a really great point. And just like any sort of way that a therapist might use themselves as a tool. So that might be somatic information or that might be self disclosure, anything like that vulnerability can be used. And so for some clients, they don't want to feel like that their therapist is very vulnerable at all perhaps. They really need to feel your solidity or your steadiness or something. For another client, I found this, especially with teenage clients, they really, they like it when we're walking up a hill and I'm breathing hard and they sort of think it's funny. And so that's a great little kind of, you know, relationship builder.

[01:32:53] I, I use it to my advantage in the sense of like, yeah, I'm really out of breath here. I'm going to have to take a break [01:33:00] and, they'll sort of get a giggle out of it and I'm using it for. Well, it's a true thing if I'm out of breath, but I'm also using it as a place of, of building a little bit of connection.

[01:33:10] Like, Hey, I'm a human too, I'm not, I'm not into my own style. I'm not interested in like having all this power over you and telling you what to do, my teenage client or my adult client I'm really interested in forming a therapeutic relationship with you so that, you know, we can figure out what's going to be helpful to you. So it becomes more collaborative. That's just my own style.

[01:33:33] **Laura Reagan:** Yeah. Mine is like that too, because I think it's, it can be, it can be disarming because, and, and in a genuine way, not in a way to try to have power over the other person, but to admit, I don't really have any control over you. I don't have control over, how you feel, what you do, and I don't want too. I do have some skills that I can use to help you. And we're in this [01:34:00] together kind of thing instead of, that, I mean, the part of the power differential is just unavoidable, but as much as I can do to try to show that I'm not interested in having more power. I just want to be able to help. And I feel like it's a privilege to do that, but sharing some of yourself is a really nice way I think for clients who are comfortable with it too, to let them know where you stand.

[01:34:26] **Amy Sugeno:** Absolutely. And that this idea of we're in this together in terms of maybe yeah, we're in this thing that we call life as humans together again, if that's what would be helpful for the client to have that kind of feeling about the relationship- that what a great mirror nature can be because you're hiking along, you are experiencing that particular session moment by moment- together. In the sense that I don't know if a butterfly is going to fly by, or if we might come across a snake [01:35:00] or whatever that might happen, there's some amount that I've, I feel like I can kind of predict what's going to happen, but there's a lot that I don't really know what's going to happen once we're outdoors.

[01:35:10] I'm not going to take obviously a client to a place where I feel like there's going to be a lot of things that aren't safe. I don't mean that, but, but in that way of kind of like discovering things as we go along, which would be, I think a little bit harder to happen in an office, perhaps.

[01:35:28] **Laura Reagan:** Yeah. well, Amy, this has been another fascinating discussion and I'm so grateful to you for talking to our listeners today about ecotherapy. For people who want to know more about what you're doing, where will they find you?

[01:35:45] **Amy Sugeno:** So I have a website and I'm in the process of creating another website that's just for my ecotherapy work, but that's, it's going to take me a while to get all that together, but eventually I'll have a new website. But so [01:36:00] for now, people are welcome to go to my website or, contact me by phone or email. I'd be happy to give some, especially clinicians, I have a little handout that's with some resources, articles and books and different things. If somebody would like to know more about that. And then I wanted to also mention that there I'm going to be starting to do some trainings and of course, those will be here in my area, Marble Falls, Austin, Texas area, but there is a kind of an advanced level training level, two training that I teach with another eco therapist, we co teach it. She teaches most of it and then I help teach certain parts of it and that'll be coming up next

summer. It's a five day, like really immersive experiential gain, lots of tools and practice and just all kinds of things, as well as self care and personal growth.

[01:36:56] And that's going to be in Virginia next summer in [01:37:00] 2017 at the end of July. And that's, we did it last year for the first time and it was really successful. It filled up and it was, we just, it was great and all these great collaborations have come out of that. So somebody who's really interested in and this can be for clinicians or for other types of healers, professional healers it's open to anybody who wants to bring nature based therapies and healing modalities into their work. So if somebody is interested in that, for sure, just have them give me a call or email or something. I'd be definitely love to talk to them because the early bird rate is ending here pretty soon.

[01:37:38] So anyways, so that's another little thing that's exciting cause there's not anything really else that I know of that's like this kind of training and that's why we do it.

[01:37:47] **Laura Reagan:** Yeah, it sounds wonderful. And this will be in the summer of 2017. So people who are listening will have some time to sign up before missing out, hopefully [01:38:00] even within the early bird timeframe too.

[01:38:02] **Amy Sugeno:** Yes and there is a, the other person who's teaching, she's doing more, she takes care of the administrative types, signing up and that kind of stuff. And she's offering is offering a diversity scholarship as well as some work study options, too, so to help reduce some of the costs for, but it's kind of a first come first serve of course, sort of, sort of thing.

[01:38:24] **Laura Reagan:** Wonderful. So can people get that from your website too?

[01:38:27] **Amy Sugeno:** I don't think it's posted on my website, although that's a good idea to post that link. We're just kind of getting, going with beginning to advertise for that, but for sure people can contact us, can email or call and I can direct them right away to the link.

[01:38:42] And then I will, here in the next few weeks, I'll try to remember to get that actually posted up on the website as well.

[01:38:48] **Laura Reagan:** Wonderful. Amy, thank you so much. It's been a joy to have you back on Therapy Chat and I look forward to connecting.

[01:38:55] **Amy Sugeno:** Oh, thank you. Laura had a great time talking with you. [01:39:00]

[01:39:02] **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. Sunset lake CBD is a farmer owned, small business that shifts crafts CBD products directly from their farm outside of Burlington, Vermont to your door. Sunset lake CBD has something for everyone.

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