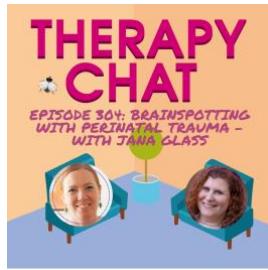


## Therapy Chat Episode 304



Disclaimer: This is a verbatim transcript which may contain spelling errors.

[00:00:00] **Laura Reagan:** Therapy Chat Podcast Episode 304.

[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.

[00:00:34] **Laura Reagan:** Thank you to Sunset Lake CBD for sponsoring this episode. Use promo code "CHAT" for 20% off your entire order at [sunsetlakecbd.com](http://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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[00:01:13] Remember, use promo code "CHAT" to get 20% off your entire order at [sunsetlakecbd.com](http://sunsetlakecbd.com).

[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 maybe 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, that name, what you've been through so that you can then connect with [00:03:00] whatever type of resource support, whether it's therapy or a podcast that you'd like to listen to, to learn more about it or an article, another website. This is my hope in creating Trauma Chat. And the second part of that is the new Trauma Therapist Network community that I'm creating. It's unbelievable to say this because I've been laboring behind the scenes to bring this to you for a long time, starting in around 2018 is when I first had the idea.

[00:03:32] And then the process of getting from there to here has been slow and with many twists and turns, but I'm creating a community for people who have experienced trauma to find help. For trauma therapists, to find other trauma therapists to network with and refer to, and gather and collaborate and share ideas and hopefully come together in person, [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. 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 trying to find more information about trauma, or if you are a trauma therapist yourself.

[00:04:55] To learn more please go to [traumatherapistnetwork.com](http://traumatherapistnetwork.com). The [00:05:00] website is not live yet as of June 28th when I'm recording this, but it will be live by August 1st, if all goes well.

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

[00:05:33] And I hope that this resource that I've really created from the heart will bring healing to more people. I really want people who have experienced trauma to be able to find the right kind of support. And that's why I created the Trauma Therapist Network. I hope you will join me there. Like I said, you can get more information by going to [www.traumatherapistnetwork.com](http://www.traumatherapistnetwork.com) where you [00:06:00] can sign up to be notified as soon as the official website goes live which will be in August of 2021. If you're hearing this after August 2021, go there and hopefully you will find the site and you'll see everything that it

has to offer. I cannot wait. This is such a labor of love, something that I've really poured my heart into. And I'm just so excited for you to see it.

[00:06:23] Thank you so much for your support.

[00:06:28] Hi, welcome back to Therapy Chat. I'm your host, Laura Reagan. And today I am sharing with you a conversation that I had with Jana Glass, who is a licensed professional counselor, certified in addictions, perinatal mental health, Brainspotting, and tele-mental health. Jana founded her private practice, Supportive Solutions, LLC, to support people healing from trauma, recovering from substance abuse and improving perinatal mental health, including support with fertility challenges, miscarriage, stillbirths, [00:07:00] difficult births, and pre and postpartum mood and anxiety disorders. Janet is passionate about serving the perinatal mental health community due to her own challenges based on her journey to parenthood. She found personal healing through brainspotting and is energized when educating, helping professionals and birth givers about this transformative approach. Jenna is a brainspotting specialty trainer who conducts the two-day connecting the rainbow brain spotting to heal perinatal trauma training.

[00:07:26] She provides group and individual consultation to clinicians while helping them navigate the path to brainspotting certification and Jana also moderates, a Facebook group for professionals called Brainspotting and Perinatal Mental Health to support and guide clinicians working with this vital population.

[00:07:41] I loved talking with Jana. She was very enjoyable to speak with about perinatal mental health. And you may remember the interview with Dr. Kat Kayani talking about perinatal mental health and trauma, PTSD, and birth trauma. So [00:08:00] this kind of fits together with that. And I hope you will enjoy it! As always, thank you for listening to Therapy Chat.

[00:08:10] My guest today is Jana Glass, LPC. Jana is a specialty trainer and brainspotting and a certified consultant. And I'm so excited to be talking with you today. Thank you for being here.

[00:08:22] **Jana Glass:** Thank you so much for the opportunity.

[00:08:24] **Laura Reagan:** Yeah. I'm really grateful that you had the time and were willing to come on and as you've heard, I'm a huge fan of brainspotting. So I can't wait to dive into talking about your way of working with brain spotting. So let's just start off though, by you telling the audience just a little bit about who you are and what you do.

[00:08:43] **Jana Glass:** Thank you. So I am a licensed counselor and I have a private practice in Atlanta, Georgia. And my specialty focuses are on trauma, addiction, and perinatal mental health. And so I really focus on [00:09:00] helping people identify challenges that they've been experiencing. And often all three of those areas come together and helping them identify where they want to become unstuck in there lives because a lot of the times people

have experienced trauma, whether they recognize that or not walking in the office door or the zoom room and help them identify that and make a plan to be able to help them integrate the trauma experience so that it no longer feels close to them, but it feels more like it's gone back, in the timeline of their lives, that it feels like it's gone back to the day it happened and that they're able to move forward as opposed to feeling like it's ever present.

[00:09:45] **Laura Reagan:** Wow that's such a great description of that feeling stuck, and when our trauma gets activated, it feels now feels like then but we don't know that we're in then, you know what I mean?

[00:09:59] It's like, [00:10:00] sometimes we can know like, oh, I'm having a flashback or I'm triggered. And other times it's like, we're just operating as if it's then unconsciously, because our trauma is activated and it's been activated for weeks, months, or whatever, and we don't realize it. So, I love that, that way of explaining that, you know, like that it can go back to the time when it actually happened and not be where you're operating from in your now.

[00:10:23] **Jana Glass:** And it can feel further away because how I kind of describe it with clients is that it's like remnants of the event get caught in our brain.

[00:10:31] And as we experience events in present day, it gets caught in those remnants and triggers some of our old stuff that we may not even realize is still present, but that's how come you find yourself reacting more strongly to a situation than you typically would. And I think when, when you're talking about the perinatal period, it's such an emotional time.

[00:10:55] And there is so much loaded into expectations [00:11:00] and hopes and dreams and plans that when any individual story doesn't go the way they had hoped, then it can be really upsetting, overwhelming, and sometimes traumatic. It just depends on the person.

[00:11:13] **Laura Reagan:** Yeah, so perinatal work is one of the areas that you focus in and that within that specialty area, you mentioned to me before we started recording that you, you focus on the traumatic aspects of people's perinatal experiences. So, can you talk a little bit about what that means and how you, how you work with that?

[00:11:36] **Jana Glass:** For sure. And so, you know, there's different aspects on our journey towards parenthood. And so, there's trauma that we bring in even pre-pregnancy that may have happened in our childhoods or our adolescents or our early adulthood that has an impact on how we experience pregnancy, a birth, as [00:12:00] well as parenting. And then for some people it's just difficulties they may experience along the way of that journey, whether that is trouble with the conception period, maintaining a pregnancy could be difficult during the actual birthing process. Or even postpartum, like once the baby's here, whether there are traumatic challenges that can happen from that period forward.

[00:12:25] But what I find in my work with people is that although the perinatal period is traditionally defined as when someone gives birth through the first year, that when someone experiences trauma that because that trauma stays with them and they haven't

received treatment, that can extend well beyond that one year period, until the people get the resolution to the trauma event that they really needed to integrate the experience. So some of my clients will come, even a decade or more later after their birth experience, but there was something [00:13:00] that was so system overwhelming for them and so traumatic that it still feels like it just happened. And so I work with them using brainspotting to really help resolve and reduce and eliminate the symptoms that they're having, as well as integrate that trauma so that it's not getting caught in their everyday events today. We talked about, I liken trauma to having some remnants in the brain. And so when we get near any of those remnants in our present day life, those get hooked in and we have strong responses stronger than we would have anticipated we would have had. And those are really good indicators that you may be managing trauma.

[00:13:41] And you may benefit from seeing a Brainspotting therapist to be able to have that just become part of your life. The story never changes after Brainspotting, it's how you feel about it that does. It feels more integrated. You don't feel as emotional when you go to speak about [00:14:00] it. And it's not something that pops up when you don't expect it any longer. You can choose to think about the event. And like I said, the events itself doesn't change, but you just feel calmer and more grounded when you revisit.

[00:14:15] **Laura Reagan:** It's amazing. It's so powerful. As a trauma therapist I've seen how difficult it can be for people to go there and building up the resourcing to be able to stay within their own window of tolerance when the situation comes to mind.

[00:14:34] And I've experienced that myself, if you know, something comes up that I don't like thinking about, I want to push it away. That's an indication, first of all, the something's coming in mind that I don't want to think about and I tell myself, I'm just not going to think about that, that's actually, an example of what trauma can do.

[00:14:52] You said how you can think about it and it doesn't, you said when the reaction feels like bigger than it should, that's a clue [00:15:00] that you're unconsciously managing trauma and the way that your brain is doing to protect you.

[00:15:05] **Jana Glass:** Right. When you just imagine as things are happening around you, and if you thought about what your reaction would be, but that you have a stronger reaction, whether that's an emotional one or a verbal one, or even an internal experience. It's just a really good indicator that more might be going on. And it's worth exploring with a highly trained professional. When we look at the perinatal period, you know, there is just so much external boundaries that are put around parenthood and how you should think and how you should feel and what your experience should be.

[00:15:42] People give advice like love every minute of it, that it passes by so fast and all those things may be actually true if you are struggling and you are having a hard time, that advice feels really invalidating and can also [00:16:00] make people feel worse about themselves, because I'm supposed to love every minute, but I'm not loving this journey.

[00:16:06] And so it turns into what's wrong with me. Everyone else loves it. It kind of ups that isolation, which we know isolation feeds into trauma as well. And so, so many different disappointments can happen as you try to become a parent and it can range from, you know, really large-scale things like a loss, you know, today is that we're recording is actually October 15th and it's pregnancy and infant loss awareness day.

[00:16:37] The month of October is recognized as that day, as that whole month to look at the today's that actual day. So I feel lucky to be talking about this, but for so many people who experienced miscarriage or multiple miscarriage or a stillbirth, um, which is defined as after 20 weeks, people have a hard [00:17:00] time discussing those types of losses again, with the person they all want to move on.

[00:17:05] And so giving time and space to be able to recognize, both celebrate the babies that we have here, that we can hug and be with present day, but also having time to recognize the babies that were in our hearts and in our lives and who absolutely mattered as well, even if we didn't get to spend time with them in person.

[00:17:28] And so many people need that validation and people around them can look at that and see, but you got your kids, like you wanted X number of kids and you got them, but that does not undo the loss or the experience of loss that person had. And so that can be traumatic and Brainspotting is an excellent, excellent way to help people make peace with that loss and be able to give that space to help fully grieve so that they are able to enjoy the family that they [00:18:00] have presently and not feel like they're being disloyal to any children who they may have lost along the way.

[00:18:08] **Laura Reagan:** Oh yeah. That's so beautiful. And what a coincidence that we ended up recording on pregnancy and infant loss awareness day, because if it's almost a metaphorical, how in our culture, like you were alluding to, and we've had other guests on, who've talked about this too, that everybody it's sad when a pregnancy is lost or there's a stillbirth or an infant death, and people just don't know how to talk about it. We have so much stigma around death in our culture. And then we have so much, I think stigma around like grief, you know? And I think you were saying that too...

[00:18:43] **Jana Glass:** We move on like yeah, that happened, but like that was a year ago. So, you know, now we keep moving forward. But for that individual a year just may be starting to be able to really get in touch with how they really feel. And one resource I want to [00:19:00] mention, that I think is invaluable is Postpartum Support International and its executive director, Wendy Davis has been amazing at facilitating so many different types of resources for individuals across the whole globe to be able to access. So I just want to highlight a few of those really quickly. Starting next year, I think March 20, 22, they are going to have a 24-hour hotline for people who are experiencing perinatal challenges to be able to call and get resources and support.

[00:19:37] So that's in the future. Currently, what they have is the directory of people who are trained in postpartum issues that you can access. At [www.postpartum.net](http://www.postpartum.net). Additionally,

there is a hotline available designated for psychiatrists only to be able to call and consult with another [00:20:00] psychiatrist on the hotline on medication.

[00:20:03] To give during pregnancy and pre pregnancy to ensure safety because a lot of people do see psychiatrists and there's an outdated belief that you need to stop all of your medications during a pregnancy. And that's not accurate. What does need to happen is an a thorough evaluation of that individual circumstance medical needs and a cost benefit analysis has to be done.

[00:20:29] And so for people who like their psychiatrists but want to make sure that they're doing everything as healthfully as they can through a pregnancy, they can have their psychiatrists call at no charge to the psychiatrist and get that expert evidence-based information, which I think is huge. So people don't have to swap providers.

[00:20:52] Additionally, they offer ongoing support groups at no charge for a variety of things from military families to pregnancy and infant [00:21:00] loss, to single parents, to fathers, et cetera. So if you go to that website, you'll get all that information. But I just think they are an invaluable resource internationally. And I wanted to make sure they got some airtime as well.

[00:21:14] **Laura Reagan:** So yeah, I think that's so invaluable because you know, sometimes physicians and medical providers can air on the side of caution and they may not be aware of the mental health risks, you know, for someone, I mean, it's very common for someone who has been taking mental health medications to become pregnant and then have to make that difficult decision.

[00:21:36] Should I keep taking my medication? Do I need to switch to a different one? And it's a very personal decision and it's a very important one because you know, like you said, healthy pregnancy is the goal.

[00:21:50] **Jana Glass:** It is, and so if someone will be more healthy, calm, grounded, make better decisions and they feel [00:22:00] more like their own mental health is balanced, that's what a baby needs is someone who's in that state of mind.

[00:22:08] And again, I'm sure we could do a case study, of a time where it'd be better to stop a medication, but we could also come up with lots of case studies where it was better for the person to continue. And that, that made all the difference in terms of their availability to connect, to feel like they're successful in their parenting role. And that's really what we're ultimately trying to do, especially, that's why I'm so involved in helping to reduce and eliminate trauma is that a lot of people have a difficult journey to parenthood. And I feel like it's even worse when they don't have the opportunity to be able to enjoy the role after working so hard to get there.

[00:22:50] You know, whether that be through a fertility journey, whether that be, difficulties in maintaining a pregnancy. And for some people that will [00:23:00] have a very

easy conception, very easy pregnancy, and something happens during the actual birthing process that they weren't able to anticipate. Whether that was the way the baby was born or the medical condition that a baby or the mom was born as well in, or the birth giver, things like NICU stays, which is the Neo-natal Intensive Care Unit.

[00:23:25] Those can be system overwhelming, and it can feel very disempowering to somebody to want to be with their baby and their baby needed 24 hour care. And that the people who suddenly become the expert on your child are these professionals, because they can take better care of your child than you would be able to at home.

[00:23:47] And so I think that's a very humbling experience for individuals, and I think that the outside world sees that the factual piece, which is the baby's in the best care that it could have, [00:24:00] which is absolutely true, but that does not change the internal experience of the parents, of needing to get permission to see their kids during COVID, needing to find out what's going on from someone else about their child, seeking permission to do some of the daily care things in the NICU from another person can really be an overall traumatic event, even if the child's in the right place and getting the best care.

[00:24:34] **Laura Reagan:** Hey everybody. I wanted to take a quick minute to tell you about my experience with Sunset Lake CBD. I first tried CBD when my integrative doctor recommended it for chronic neck pain and tension that tends to wake me up at night. I really 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. And I also like the [00:25:00] CBD gummies, they taste good and they work well. So if you're looking for a craft CBD product that comes directly from a farm outside of Burlington, Vermont, that's a producer for Ben and Jerry's ice cream, you're going to want to check out Sunset Lake CBD. And remember, Therapy Chat listeners get 20% off using the promo code, "CHAT." So go to sunsetlakecbd.com and use the promo code, "CHAT."

[00:25:26] That's something that's so confusing because you, your logical mind says, well, they're taking care of the baby there. They're helping the baby. So why am I in so much distress about this? And I think that's one of the beautiful things about how brainspotting fits in, because then you can talk about that.

[00:25:44] **Jana Glass:** Yeah. And so, yes, there's the factual understanding that we have about a situation. And so we think about that residing in the prefrontal cortex, right? Like if you touch your forehead, that's where all that logic and rationale exists. [00:26:00] And there's a lot of therapies, especially like cognitive behavioral therapy that really tap into that part of the brain to try to help people come to a different conclusion or a different way of seeing things.

[00:26:15] And so to take this NICU as an experience, we rationally know the baby's in the right place. In great care, but emotionally, which is lower in the brain more in our limbic system, midbrain where we are regulated or not regulated, we feel like this is so unfair. We feel like this wasn't supposed to happen.

[00:26:34] We feel like our baby should have been able to come home with us after the standard three to five days. All the loss of control, you being the expert on your own child, being able to have the freedom and autonomy to be able to bond in your own house.

[00:26:54] All of the things that I think anybody would anticipate would occur, you know, [00:27:00] there's a rupture there. And so you may get the opportunity later, but it wasn't the way you intended. And so you're feeling and emotional brain feels like this is the worst thing that's ever happened, even though rationally, you know, this was the best course of action.

[00:27:18] And so what Brainspotting does is that helps bring harmony between the rational brain and the emotional brain by being able to process that experience through so that it doesn't, you'll never look back and say, wow, that was an amazing NICU experience. But as you remember, it, it will not feel as painful.

[00:27:40] It will not feel as emotionally activated and you may be able to make meaning out of that experience that you had and even shift it towards, yeah, it really wasn't fair. And I wish it hadn't happened and I can feel grateful that my child got great care and came home, and that, that feels [00:28:00] integrated and it doesn't feel like they are working against each other or, or fighting against one another.

[00:28:07] It feels more like you can hold both and both can be true. And that's a huge relief for people.

[00:28:13] **Laura Reagan:** Yes. And I think that's one of the things that you know, there's this sort of like disbelief that the deep emotional experience is real because the logical mind says, no, the baby's okay. You know, they, they took care of the baby in the NICU and you know, now the baby is five and doing fine and there's nothing wrong.

[00:28:33] But then, there's this, like, let's say for example, like feeling of fearfulness that something's going to happen to the baby or the five-year-old that you can't understand where it's coming from. So then you're just blaming yourself and all these, you know, beliefs about yourself or your child, because of it's really about the trauma of that first rupture.

[00:28:53] **Jana Glass:** Completely and then I think we're hard on ourselves later if we are more aware or more protective of our [00:29:00] five-year-old, right? Because we're like the NICU had nothing to do with this look, they're healthy, they're running around right. He's running around. He's great. It could have nothing to do with that, when it has everything to do with that.

[00:29:12] And so I think, all the different therapies that exist, in the therapy world, each have a space in place that they make sense. And I can tell you CBT is wonderful for lots of things, but it really isn't able to touch the trauma or be able to help process that trauma through, to completion on a brain level, like Brainspotting can.

[00:29:36] And so you want to use the right tool for the right challenge. And so that's why I so strongly advocate for people to be able to get these brain and body-based therapies such as Brainspotting, so that they're able to really feel like they're no longer traumatized and can really benefit from some of the cognitive therapy approaches. Whichever one is most [00:30:00] helpful for them.

[00:30:01] **Laura Reagan:** Yeah so it sort of can be both. They can work together.

[00:30:05] **Jana Glass:** They can. And people come in to see me because they just want to feel better. And so that's why I love having Brainspotting in my toolbox, because it is able to help people achieve that a lot quicker than traditional talk therapy. We don't rush the process, but they are really usually hitting a point where they feel like this is my last hope and you know, I'm, I'm willing to try anything because I can't keep feeling the way I feel now. And so it's such an honor to be able to be present with them, to attune, to them and to help them harness their own, their brain's own natural ability to heal and be able to help them have relief from whatever trauma symptoms they've been experiencing.

[00:30:53] **Laura Reagan:** Yeah. I have to say from my own experience receiving Brainspotting, it's just amazing [00:31:00] how it organically shifts the way you see the situation that you're thinking about. For me, I noticed like beliefs about myself that I didn't know, I had about a certain experience.

[00:31:13] And then they shifted just, you know, in one Brainspotting session to have like, you know, to go from like, this is something that if I think about it, it might kill me to recognizing a belief about myself that came from that experience. And then, the beliefs like shifting, changing all in one, like hour long. It's amazing. So, gosh, I think it's beautiful because you know, when people are struggling with perinatal trauma, it's just like all types of trauma I believe, it makes you think that something's wrong with you, instead of realizing that it's, 'I feel this way because of what I went through.'

[00:31:51] **Jana Glass:** Completely. And that the way I might be reacting might be completely expected based on my [00:32:00] experiences. So my experiences were extraordinary, but the way I'm acting now makes sense based on what I have gone through. And so allowing people to not hold themselves to this unreachable standard in parenthood and be able to have, and find more room for self-compassion and self-understanding, and being able to find their pattern as a parent that really works for them in their child.

[00:32:30] Even if that looks different than what other people would want to happen.

[00:32:34] **Laura Reagan:** Yeah. It's like, it helps with developing more trust within yourself and certainty that, you know, not that you're not open to other ideas, but you don't have to ask everyone else when you have your own centered grounded wisdom to bring.

[00:32:50] **Jana Glass:** And to trust you're the expert on you and you're the expert on your child because nobody will spend more time with your child than you will, and you'll make

[00:33:00] calm, grounded decisions from that space instead of from fear or overwhelm or the other things that we face when we've experienced trauma.

[00:33:12] **Laura Reagan:** Yeah.

[00:33:13] Jana, can I ask you to just take a minute to talk about the separations that can, other types of separations that can create trauma responses that might be unexpected for people. Like some of the things we were talking about before we started recording when we were talking about like, for example, gestational carriers.

[00:33:36] **Jana Glass:** So, yeah, so I mean, I think for a lot of people, we have an idea of what our road to parenthood is going to be like and so that becomes part of our hopes and dreams. But it also becomes the fabric of our identity. It's tied more, not just in how we see ourselves, but it's really deeper than that. And so if you [00:34:00] expect that you will conceive easily and then you have a fertility challenge that needs assisted reproduction, even though you may end up with your end goal reached, they're still a loss of how it happened. And so even if you knew going in that you would have trouble maintaining a pregnancy so that you used a gestational carrier, even though rationally, you know, you got your outcome. There still can be a loss associated with not being able to have the experience of pregnancy or birthing of a child for that birth giver. And so the people around can celebrate and feel like, yay, we got to the end, but it's also not acknowledging, that person may have gotten their outcome, but the way it happened is truly still a loss and not for everyone, of course, you know, but when you don't have it happened the way you expected, even if that [00:35:00] is in the form of needing a C-section instead of a traditional delivery or birth you, that can be really upsetting for an individual, especially if they put a lot of time, energy, and effort into visualizing how their birth process would be.

[00:35:16] And so it's being able to identify that with folks being able to help them feel seen and feel heard, and also allowing them the space to manage that grief. Because you can hold both. You can be really happy that you reached the finish line that you set and the goals that you set, but you can also grieve how it had to happen. And that can be really hard for people who aren't in it like you and your partner might be, or you yourself might be to understand that.

[00:35:47] And so I think that also goes for any losses. I think that goes for any piece of the journey, for some people it's having a child of one sex and wanting the other sex, that [00:36:00] that can be really, really upsetting for someone. If they got invested in having a girl or a boy or vice versa, you know, it can really people say, well, didn't you just want a healthy child.

[00:36:13] So they of course answer. Yeah, that's what I wanted. And that may be true. And they're missing the experience of raising a child that they had hoped to have. And I think that almost encapsulates parenting- that's part of the journey, learning how to parent the child you have, not parenting the child you thought you were going to have.

[00:36:36] And that can apply to anything from interests, to abilities, to temperament, we all envision how things will be. And sometimes those areas match and sometimes they don't and different people experience different disappointment around that. And so for some people that can be hitting a traumatic [00:37:00] level, and that can be difficult with parenting, especially if your child has a challenge that you don't relate to, that you didn't experience.

[00:37:08] So if you are completely outgoing, it's really hard to have a shy child, because you don't understand the whole way they see the world. And so that's all part of it with all the other challenges that people bring into the perinatal period that I help folks work through. And what I find is that a lot of the parents who have struggled along the way are even harder on themselves as parents, because they felt like they were so deliberate and so intentional in their family expansion that when things don't go well, they're extra hard on themselves because they feel like, ah, you know, I really wanted this so much. I took all these steps and now I'm messing it up by not parenting the best way I could. And so, again, self-compassion. [00:38:00] And finding that through Brainspotting and giving the space for mistakes for those ruptures, but focusing on the repair, whether that is for ourselves, whether that's with children, and giving ourselves some grace around the journey that is parenthood from start to finish.

[00:38:19] **Laura Reagan:** That's so beautiful. And you know, I know it's time for us to wrap up but I'm just thinking, we're so hard on ourselves, we're just so hard on ourselves about everything, you know, everything has to be so perfect. And we're always like beating ourselves up about all the things that we didn't meet, our own expectations or what we think cultural expectations are for us, for ourselves.

[00:38:43] But I really have enjoyed this conversation. I think it's just really, I hope that people who are listening hear some of those ways where, you know we just are beating ourselves up about things that we really have no control over and how that can really tie in to our own [00:39:00] histories of trauma, you know, and that's what it ups and brings up for us.

[00:39:04] So thank you so much for coming back to Therapy Chat today, or coming on to Therapy Chat.

[00:39:09] **Jana Glass:** Thank you so much for having me. This was really wonderful. I appreciate you.

[00:39:13] **Laura Reagan:** I appreciate you. So Jana, where can people find more of the amazing things that you're doing?

[00:39:19] **Jana Glass:** Absolutely. So my website is my business name, Supportive Solutions and I'm in Georgia. So it's [supportivesolutions.ga.com](http://supportivesolutions.ga.com) and there, you can find information about my counseling practice, about consultation and consultation groups, as well as the specialty training that I offer on Healing Perinatal Trauma with Brainspotting. And I have that coming up at the end of October, but there'll be some offerings as well in 2022, you can

also join my mailing list there and get information. And if you just want more information as a whole about Brainspotting and perinatal, mental health and [00:40:00] trauma, you can, if you're a professional, you can join our Facebook group, which is Brainspotting and Perinatal Mental Health. There are three questions to join, and if you're a professional, you can join us and learn with us.

[00:40:12] **Laura Reagan:** Awesome. That's what an amazing resource. I know that Facebook groups like that can be wonderful for therapists. So thank you so much for all the resources you shared, which I will put in the show notes and links to your website and PSI. Jana, thank you again so much for coming onto Therapy Chat today.

[00:40:29] **Jana Glass:** Thank you.

[00:40:34] **Laura Reagan:** Thank you to Sunset Lake CBD for sponsoring this week's episode, use promo code "CHAT," for 20% off your entire order at [sunsetlakecbd.com](http://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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[00:41:24] And for more information and resources on trauma and healing from trauma, go [www.traumatherapistnetwork.com](http://www.traumatherapistnetwork.com). Trauma Therapist Network is a community for therapists and a place for anyone to go to learn more about trauma and find resources and connect. [www.traumatherapistnetwork.com](http://www.traumatherapistnetwork.com)

[00:41:47] **Announcer:** Thank you for listening to Therapy Chat with your host, Laura Reagan LCSW-C. For more information, please visit [therapychatpodcast.com](http://therapychatpodcast.com) [00:42:00]