

Therapy Chat Episode 315

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[00:00:00] **Laura Reagan:** Therapy chat podcast, episode 315.

[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.

[00:00:18] **Announcer:** And now here's your host, Laura Reagan LCSW-C.

[00:00:34] **Laura Reagan:** Therapists, interested in making it easier for your clients to use their out of network benefits for therapy? Visit the [super bill.com](http://superbill.com)

to learn more about superbill, a service that can help your clients get reimbursed without having to jump through hoops, getting started is simple. Clients go to the super bill.com to complete a quick HIPAA compliance signup process, and you send their super bills directly to us.

[00:00:55] **Laura Reagan:** So we can file claims with their insurance companies. No more spending hours on the phone. Wrangling with insurance companies for reimbursement, super bill eliminates that hassle. And clients pay only a low monthly fee for the service. Stay tuned for details on superbills therapist, referral program, and a special discount for your clients to get a free month of service@thesuperbill.com.

[00:01:19] **Laura Reagan:** Today's episode is sponsored by traumatherapistnetwork.com. Trauma is real. Healing is possible. Help is available. Find information, resources, and locate a therapist in your area at traumatherapistnetwork.com.

[00:01:36] **Laura Reagan:** Hi, welcome back to therapy chat. I'm your host, Laura Reagan. And today I'm sharing an interview with Dr. Nicole Christian Braithwaite, who is a psychiatrist, child, and adult psychiatrist in Massachusetts and provides education consultation and coaching on mental health, trauma, and the impact of race and culture on.

[00:01:57] **Laura Reagan:** Dr. Christian Braithwaite. And I got together for this interview to talk about why children are struggling even more than usual. In this time we recorded this episode in the fall of 2021. So we were talking about what was going on in that time for children, which after that is when the Omicron variant really hit hard in the U S but just this period of history itself as well. And she shared how racial trauma and other traumatic experiences of marginalization, violence, oppression, and discrimination are affecting children on top of the stress of living during a pandemic. And the individual and family stressors that were already present for people before COVID-19. She talks about the deficit of treatment options available in the U S with our overtaxed mental health systems, especially for children, specific things parents and teachers can do to support children who are impacted by trauma, including racial trauma, and about how her company array behavioral health.

[00:02:59] **Laura Reagan:** Tele-psychiatry is filling in some of the gaps and treatment availability and access. So this was a really interesting and inspiring conversation to me. I hope you'll enjoy listening to it as well. If some of what we're saying about COVID sounds out of date it's because as you know, It's now January 20 22 and much has changed in the past couple of months with COVID.

[00:03:22] **Laura Reagan:** So Nicole Christian Braithwaite MD is a double board certified adult & child and adolescent psychiatrist. Dr. Christian Braithwaite received her medical degree from the university of Pittsburgh school of medicine and completed her adult psychiatry, residency in child and adolescence psychiatry fellowship at Massachusetts general hospital McLean hospital, Harvard medical school affiliate.

[00:03:45] **Laura Reagan:** She's the founder and CEO of well mind psychiatry and consulting company, which provides psychiatric and therapeutic treatment as well as education consultation and coaching on mental health and trauma, wellness, and self care, implicit bias and understanding mental illness in children of color. Dr. Christian Braithwaite has written numerous articles for scientific or medical publications, and frequently speaks about the impact of trauma, race, and culture on mental health.

[00:04:13] **Laura Reagan:** She also serves as the board of directors for the postpartum depression fund of Massachusetts and families for depression. And she's the disparities lead for the COVID-19 action coalition of Massachusetts. So she's a very busy person and I'm quite honored that she was able to take the time to speak with me on therapy chat, as fancy as her background is, she's very easy to talk to and relatable when you speak with her. So I'm sure that you will enjoy this conversation. So let's dive right into it just before we do. I wanted to give you a quick reminder. If you're a trauma therapist, you still have time, but not much. Because this is airing on January 28th. You have three more days to sign up for trauma therapist networks, trauma therapist, directory membership, and get the founding member price of \$33 a month.

[00:05:05] **Laura Reagan:** It's going up on February 1st to \$97 a month. And starting in March the membership will have additional value. You'll hear more about that in the middle of today's episode. So I don't need to tell you about it all right now, but I just wanted to remind you, if you were thinking about doing it, go ahead and sign up while you can for only \$33 a month.

[00:05:25] **Laura Reagan:** That's your price for the lifetime of your membership? If you sign up before February 1st, 2022. Thanks so much for listening and let's dive into my conversation with Dr. Nicole Christian Braithwaite.

[00:05:40] **Laura Reagan:** My guest today is Dr. Nicole Christian. Dr. Nicole, thank you so much for being my guests on therapy chat today.

[00:05:46] **Dr. Nicole Christian-Braithwaite:** Thank you so much for having me.

[00:05:48] **Laura Reagan:** Yeah. I'm really happy that we've met because I'm excited about what you are offering. And the subject that we wanted to talk about today is children's mental health, which is very needed right now, but before we even get into it, can we just start off by you telling our audience a little bit about who you are and what you do?

[00:06:08] **Dr. Nicole Christian-Braithwaite:** Sure my, so again, my name is Dr. Nicole Christian or Dr. Nichole Christian Brathwaite. If you use the full long name, um, I am a child adolescent and adult psychiatrist, and I am the senior vice president and medical director for array behavioral care. We are, um, one of the largest and oldest tele-psychiatry companies in the country.

[00:06:28] **Laura Reagan:** Awesome.

[00:06:28] **Laura Reagan:** And just for people who might not really be familiar, can you tell them what tele-psychiatry is?

[00:06:35] **Dr. Nicole Christian-Braithwaite:** Sure. So at Array, we had, one of our mottoes is providing care from hospital to home. So essentially any type of behavioral health care or support that you need and you can receive it virtually. So if you go into an emergency room and you or your child are having a behavioral health crisis, And you're in a part of the country where many of us are that don't have access to a psychiatrist or a child psychiatrist.

[00:07:01] **Dr. Nicole Christian-Braithwaite:** Essentially what could happen is that the hospital would reach out to us. And one of our psychiatrists would evaluate or assess you or your child in the emergency room setting via video. So you would be sitting in the emergency room. I would be here in my office and we would have a discussion. I would administer pre screening questionnaires, virtually the same thing if you went into an outpatient setting you would be in the office. I would be here and we also offer services directly at home. So if you're sitting in your living room or in your car and you wanted to speak with a therapist or a psychiatrist, we could do that virtually. So it's all live audio visual in the moment.

[00:07:36] **Dr. Nicole Christian-Braithwaite:** So it's essentially the same service and care you would get if you walked into my office and we were sitting a few feet apart, that's the exact same support and treatment we offer. But from

the convenience of potentially, your home or your local primary care doctor's office.

[00:07:49] **Laura Reagan:** Very cool. Yeah. I didn't even know that that was available.

[00:07:53] **Laura Reagan:** So even though I thought I knew what you meant by tele-psychiatry, I just learned more there. So thank you. So we were talking before about how right now in this time of history, children are really struggling in so many ways. Can you talk about, you know, what is happening with children's mental health at this moment?

[00:08:13] **Dr. Nicole Christian-Braithwaite:** Absolutely, there, there are, there are so many really concerning things happening and recently the American Academy of Pediatrics actually issued a statement, declaring children's mental health, a national emergency, and for multiple reasons, one, the rates of mental health concerns are increasing. So certainly that the rates of kids, endorsing depression, anxiety, and then even more concerning substance use disorders or suicide or increasing the rates of kids needing supports and services are increasing. And the number of child mental health providers are not increasing at the same rate that the needs are increasing. And there's always been a deficit. There are many, many children and throughout the country that literally have zero access to a child therapist or child psychiatrist.

[00:08:59] **Dr. Nicole Christian-Braithwaite:** And then lastly, when kids are able to get to the emergency room and are seeking a higher level of care, like an inpatient admission. We don't have the beds, we don't have the staff or the resources to provide that crisis intervention that they need.

[00:09:11] **Laura Reagan:** Very true. And you know, we've all heard about hospital bed shortages because of COVID and this is, uh, you know, I think it's somewhat COVID does play into this for many people who are struggling, but this is about mental health, psychiatric beds not being available. I mean, I know in my community and I'm in the DC Baltimore area, so it's not like really underserved area, but there's, it's hard to get treatment. It's hard to get beds. It's hard to get psychiatric care, um, without a very long, very long waiting lists and therapy.

[00:09:48] **Laura Reagan:** So if it's bad here, I know it's really, really bad in places where there's not enough providers for the need.

[00:09:55] **Dr. Nicole Christian-Braithwaite:** Yeah, absolutely. I mean, there, there are some studies showing that one in five counties in America have no access to a child psychiatrist, particularly a child psychiatrist that is accessible and that takes your insurance or that has an appointment within the next six months.

[00:10:11] **Laura Reagan:** Yeah. And I always struggle with trying to find trauma informed child psychiatrists as well. I mean, that's even more specific and more difficult to find. So can you talk about some of the reasons that kids are particularly struggling more? Now?

[00:10:27] **Dr. Nicole Christian-Braithwaite:** Sure, I mean so we certainly can't ignore the impact of COVID 19, but that's had such a drastic and devastating impact on many communities, particularly communities of color. Um, there there've been some studies showing that 150,000 children have lost grandparents, and most of those children are black and Latino kids. Many children are witnessing the devastating impact of, of job loss or having watching family members suffer from long COVID. And so those are just the small health-related COVID disruptions, but then we're thinking about disruptions in school. And even when they returned to school every other month or week, they have to leave school because of a potential exposure and kids thrive on structure and predictability and consistency.

[00:11:13] **Dr. Nicole Christian-Braithwaite:** And we've literally had none of those three over the last two and a half or three years. And so kids are, are really feeling that uncertainty and that anxiety. Of the unknown of what's coming. Am I safe? Are my parents safe? And you know, again, witnessing their parents struggling, it's we, our kids are sponges.

[00:11:32] **Dr. Nicole Christian-Braithwaite:** And so they're, they're watching how we respond. They're they're seeing the stress and strain that the COVID the pandemic is having on their family members. And their parents. And so that's certainly impacting them. But then also, even this time of the year is always challenging. Create pre COVID. We've always seen increases in kids presenting to emergency rooms or requesting services during the late fall and winter months, because.

[00:11:55] **Dr. Nicole Christian-Braithwaite:** The days are shorter schools becoming more intense. The expectations are greater. You're you're, there's less sunlight. There's less opportunity to actually get outside and move around. And kids are really starting to feel more overwhelmed, more stressed. And with still

a lot of the ongoing restrictions, they don't have access to many of the coping skills or outlets that they would normally have.

[00:12:19] **Laura Reagan:** That's true with sports being limited and just all kinds of after-school programs and things that, you know, children and families may have relied on for social sport childcare and, you know, movement and homework help, and all of those things.

[00:12:35] **Laura Reagan:** Yeah. Yeah. So can you talk about the impact of racial trauma on kids at this time? It's like layered over COVID.

[00:12:45] **Dr. Nicole Christian-Braithwaite:** Absolutely. And that that's a really challenging but important conversation when we're talking about trauma. I think people often, when they think about trauma, they're, they're assuming physical, emotional, or sexual abuse, they're not looking outside of those kinds of what we consider to be like the big T traumas. There are so many other negative incidents that occur on a daily basis that could have really significant detrimental effects. There was a study a number of years ago called the adverse childhood experiences study or the ACEs study.

[00:13:17] **Dr. Nicole Christian-Braithwaite:** And essentially what that revealed was that negative experiences or toxic stressors that happen prior to the age of 18 can have longstanding negative, emotional. And physical impact on a person's health. So being exposed to domestic violence or community violence or mental illness of a parent, all of those things increase the risk of diabetes, heart disease, depression, suicidality, but what we've actually realized is that one, you don't have to wait until adulthood to see the negative impact of, of early childhood toxic stressors, but also day-to-day events.

[00:13:51] **Dr. Nicole Christian-Braithwaite:** Like being bullied or experiencing discrimination or feel like you're, you're being targeted by police or by peers, or even witnessing racial violence on TV or on social media. All of those things are actually considered adverse childhood experiences and they add up and increase the risk of mental health and mental illness in kids.

[00:14:12] **Dr. Nicole Christian-Braithwaite:** There are studies showing that a child with seven ACEs or seven of those adverse childhood experiences. It increases the risk of that child committing suicide by 51 fold. And so kids of color are at much greater risk of experiencing adverse childhood experiences. So they're more likely to live in communities where they do feel like they're being profiled or discriminated against they're they're more likely to witness their parents experiencing racism or discrimination, certainly in the last year or

two, since George Floyd and we are seeing over and over again, these acts of, excuse me, racial violence acts. And they're being replayed consistently on this 24 hour news cycle. We're seeing these, these really unedited graphic videos and all of these things are ACEs.

[00:14:58] **Dr. Nicole Christian-Braithwaite:** All of these things contribute to increased risks. And so kids of color are losing family members because of COVID at a greater risk parents and family members are losing jobs. They don't have economic or housing stability. They're also witnessing racial violence. And then all of these things add up and lead to greater risks of depression, anxiety, substance use. PTSD.

[00:15:17] **Laura Reagan:** Yes. Yes. I think about how with, when we talk about the number of ACEs someone has, and you said seven or more increases the risk of death by suicide and one ACE checkmark does not equal one event. It could be something that was repeated throughout childhood and something like racism, discrimination, discrimination, based on your culture, ethnicity, your outward appearance is something that's completely inescapable. So of course that's a huge trauma because nature of trauma is powerlessness in the, you know, in that situation. So, yeah, I mean, I, I just wanted to like sorta amplify or emphasize what you didn't directly say that seeing repeated horrifying images and of someone's death or the abuse violence, when you see the image, that's a trauma, but when you can relate to why this person is being killed or abused, experiencing violence, based on an attribute that you share is very powerful. And for kids, you know, in adults have a hard time talking about racism and for kids, those complex, you know, situations are really overwhelming even more.

[00:16:33] **Dr. Nicole Christian-Braithwaite:** Absolutely. And there, and there's evidence to support that. So there there've been studies. Looking at Latino adolescents and African-American adolescents after they've watched these videos of always killings of African-Americans or racial violence. And when they're screened after the fact, many of them meet criteria for generalized anxiety disorder or post-traumatic stress disorder.

[00:16:57] **Dr. Nicole Christian-Braithwaite:** And there've been studies even saying that upwards of 20% of people that have watched these videos. Later meet criteria for a mood or anxiety disorder, simply because of exposure to this traumatic event. And, you know, even, you know, people when they're, what we don't realize is when you're watching these videos, your, your mind, your brain doesn't know the difference between you being safe in your home versus you being there and at risk.

[00:17:19] **Dr. Nicole Christian-Braithwaite:** So our bodies go into that fight flight or freeze. We respond as if we are there in the moment that we are at risk. And so seeing these videos come up weekly or monthly, you are consistently enacting or increasing your stress response. And so you're going into fight flight or freeze as if you are in danger.

[00:17:39] **Dr. Nicole Christian-Braithwaite:** And our bodies were never meant to be in a consistent and heightened state of stress. And these persistent states of stress obviously lead to mental and physical illness. And T for it to start at 7, 8, 9 years old, and then to continue to be exposed to these things throughout your life. That's incredibly damaging.

[00:17:57] **Laura Reagan:** Yeah. Thank you for how you explain that. And I actually did not know that they've done those studies that you just talked about, but I'm really glad because in the trauma therapy world, I've always learned that, you know, trauma exposure that you didn't witness directly, you weren't there. Like you saw it on TV.

[00:18:15] **Laura Reagan:** They used to say. You can't be traumatized by seeing planes hitting twin towers on nine 11 on TV. But if you were there, you can, and that doesn't jive with how many people have experienced or what people report about the way they feel about those images and videos, especially, you know, like it's not just the video.

[00:18:36] **Laura Reagan:** Of what happened, what the police officers did to George Floyd. But using that one as an example, like, it's like a, it's like you are witnessing it. It's like you are there because you're seeing what the witness sees. So I don't see how you can separate that. And how does your brain go? Well, this isn't, this is because it is real.

[00:18:54] **Laura Reagan:** This wasn't, this isn't a TV show. It's actually something that's happening to someone. So I guess that's the distinction maybe I should be making is like, are they talking about TV show or TV news image of an actual real thing?

[00:19:09] **Dr. Nicole Christian-Braithwaite:** And we know trauma's cumulative. And so racial trauma is a cumulative experience.

[00:19:13] **Dr. Nicole Christian-Braithwaite:** So every personal or even vicarious encounter with racism contributes to a more insidious. And, and chronic stress. I, I always think about, so my, my oldest son is seven and I really make every effort to limit what they see on TV. However, my mother lives with

us and she is the 24 hour news watcher. Like there's some news channel on 24 7.

[00:19:37] **Dr. Nicole Christian-Braithwaite:** And when Ahmaud Arbery was killed and he was out walking and she happened to have the TV on. And the video like these videos often are just replayed over and over again. And my seven-year-old happened to be in the room when this video was being played. And unfortunately he saw it and very much internalized it and shortly, maybe a day or two after.

[00:19:57] **Dr. Nicole Christian-Braithwaite:** And I didn't initially realize that he had been exposed and had seen it. And my husband and I were about to go out for a walk. Broke down into tears and he begged us not to leave because he was so afraid that something would happen to us, that somebody would hurt us because what he saw was a black man walking down the street.

[00:20:14] **Dr. Nicole Christian-Braithwaite:** And because he was black and walking down the street, he was killed. And so immediately, of course, he associates that, that same risk with my husband and I, so he didn't want us to go for a walk. Because in his mind that that meant we would be killed. So how could that not be traumatizing for a seven year old?

[00:20:29] **Dr. Nicole Christian-Braithwaite:** Then I have to sit and try to convince him that we're safe. But even in the back of my mind, I had to think are how safe are we really? Because I'm trying to support him and convince him and calm him down. But I certainly have my own anxiety and I made every effort to avoid seeing that, that video. And so how, how could that experience not be traumatizing?

[00:20:49] **Dr. Nicole Christian-Braithwaite:** How does a child or any individual not internalize that when you, when you're watching what looks like an innocent person being murdered simply because they just happened to be in a community that, that deemed that individual not to belong to that community.

[00:21:03] **Laura Reagan:** Yeah. It's like, you're saying logically, you could tell your son, you know, that's not what we should expect anytime someone's walking down the street, but I could see that it would be like, well, he's got a good point. I mean, actually, why, why am I telling him he's wrong? His reaction actually makes sense. Yeah.

[00:21:21] **Dr. Nicole Christian-Braithwaite:** But that's a very, it's a very valid, very valid fear and I, and anxiety. And. So I received in general, I've

certainly received an exponentially increased number of referrals over the last two years, but I'm also receiving a lot of both individual and school referrals from, from adults asking how are we supposed to support our students?

[00:21:42] **Dr. Nicole Christian-Braithwaite:** Given all of the trauma that they're being exposed to, but in particular our more vulnerable students. So our students of color, our LGBTQ students, how do we support them? Because we recognize that they're more vulnerable and they're at much greater risk of experiencing trauma. And these, I literally received these calls, you know, a year ago, almost weekly, certainly now monthly where we're individuals, parents, teachers, principals are asking me to come and educate them.

[00:22:07] **Dr. Nicole Christian-Braithwaite:** Show them how to support because they're at least, you know, the very little good has come out of this racial reckoning or, or COVID. But the one thing that's come out of it is that we are having these conversations in a way that we were not having them before. And the term racial trauma is at least becoming more mainstream.

[00:22:23] **Dr. Nicole Christian-Braithwaite:** Certainly. I never learned it in psychiatry training. I, I doubt it's even being taught now, but at the very least there's, there's some understanding or recognition that this is in fact traumatic.

[00:22:37] **Laura Reagan:** Hey therapists. This is Laura Reagan. If you listen to this show regularly, you're hearing a lot about trauma and attachment, and you probably know these two underlying concerns are what drive most people to seek therapy, regardless of how the symptoms present. The good news is trauma's becoming a buzzword.

[00:22:54] **Laura Reagan:** And that's great because more people are discovering. There's a reason they feel the way they do and now they can name what they need help with, but they need to find therapists who can help them. And that's where you come in. Join trauma, therapist, networks, therapist directory now at the founding member price of \$33 a month.

[00:23:10] **Laura Reagan:** And you'll receive a beautiful listing that can function as a webpage. If you don't want to set up your own site or even if you have your own and you can include. Links to videos of yourself, blog posts and you're part of a community right now. We have quarterly calls for all members. Our first one happened in October and it was lovely.

[00:23:30] **Laura Reagan:** Everyone said they really enjoyed it, but I'm adding more content that will begin to be available March 1st, 2022. And if you sign up

for February 1st, you'll be locked in at the founding member price of \$33 a month. February 1st, the price is going to go up to \$97 a month to reflect added value of these new offerings.

[00:23:52] **Laura Reagan:** And everybody who signs up as a founding member for \$33 a month, will get all that content beginning March 1st, as long as you keep your membership, I'm really excited about what's to come. We're going to have weekly live calls, four per month, and one will be a Q and a one will be focused on self care.

[00:24:11] **Laura Reagan:** One will be case consultation. And one will be training on a certain topic. Hurry on over to trauma therapist, network.com to sign up and become a founding member of this beautiful community of wonderful, passionate, and skilled trauma therapists. We need you, people who have trauma are out there looking for you, and they don't know how to discern that you specialize in trauma. So come on over to the trauma therapist network and get listed. Join our community and this movement, trauma therapists, network.com.

[00:24:49] **Laura Reagan:** Well, that point that you just made. I mean, for one I'm like, wow, how great that all these people are contacting you with that awareness, that more vulnerable groups, kids who belong to groups that are marginalized in our society are even more at risk than kids who aren't in those groups. So. It's amazing that they realize that and come to you for help.

[00:25:12] **Laura Reagan:** But that was kind of what I was thinking about asking you next is, you know, how can people, and, and I think parents like you, who are you, can't say no one can say that, oh, there's nothing to worry about. That won't happen. But when you're struggling with the, your own reaction to. And they're very traumatized by what they saw.

[00:25:33] **Laura Reagan:** Rightfully you know, like what do you recommend for people in that situation?

[00:25:38] **Dr. Nicole Christian-Braithwaite:** And that's a great question. And there is similar to all things in mental health and all things parenting. There's never an easy answer. There's, there's never a one size fits all, but one of the first things I tell the kids that I work with in the parents, is Guarding your heart, guarding your mind, guarding your spirit, being very deliberate about the things that you let in.

[00:25:59] **Dr. Nicole Christian-Braithwaite:** Again, I, I make, try to make every effort to not have the news on around my kids. I also, I don't have settings on my social media that automatically plays videos because I know how I respond. I recognize how hurtful and harmful that is and how and how stressful it is for me to see these videos. I also limit my engagement with social media. There are some days where I'm like, you know what? I can't, I can't do the trolls today. I can't, you know, I, I know that it's going to hurt, so I, I have to step away. And so I, I am very deliberate. I'm deliberate about what I read to my kids, the books that I read, the representation and the books that the joy that we're reading about.

[00:26:36] **Dr. Nicole Christian-Braithwaite:** I am intentional in programs that they watch. I'm intentional in the programs that I watch. My husband is so annoyed with me because now it's like Christmas season. So it's like Christmas romcoms, 24/7, but I know that's what makes me happy. And I, you know, we live in a very stressful world and so I am intentional about scheduling and doing things and putting things in my life that I know bring me joy because there are so many other things I cannot control that try to steal my joy. So that's number one, being very deliberate and intentional about what you allow and don't allow into your home and then limiting that exposure, you know, limiting even our adolescents, limiting their exposure to social media.

[00:27:15] **Dr. Nicole Christian-Braithwaite:** We have no idea how much bullying and negative information is being geared towards our kids. And so one it's important that you're aware. So looking at what your kids are looking at, but two also what they don't need to spend 10 hours a day on social media. There's very little good. That's going to come out of it.

[00:27:31] **Dr. Nicole Christian-Braithwaite:** Uh, that there's very little good in terms of even like, self-image like I just watching TikTok and I'm like, some of these, this is just so unrealistic, but this is what our kids are aspiring to. This is what our kids are seeing, and this is what they're believing is the standard. And then the second thing is, is it's important to, to use the correct terminology, to put words to what our kids are feeling.

[00:27:53] **Dr. Nicole Christian-Braithwaite:** And so if we're not asking if we're not delving and then as for clinicians, if you're not screening for racial trauma, how would we ever address it? How would, how would we ever actually support our, our patients or friends or family, if we're not even acknowledging it or affirming that this experience absolutely could be traumatic or was traumatic where I would imagine that that was an incredibly painful

experience, or even labeling it as that, that I felt like that that experience was a racist experience for you.

[00:28:21] **Dr. Nicole Christian-Braithwaite:** And I wonder how you feel about that and even asking our kids, assuming that they had been exposed to these things. Because again, if they have a phone more likely than not, they have. So we have to sit down and have a conversation with them and not start with telling them what we think, but asking them what their understanding is, because we could be surprised our kids may understand it.

[00:28:41] **Dr. Nicole Christian-Braithwaite:** They may get it completely. And, and that's it. And we're just opening the conversation or they may have a very skewed perspective about what's happening in the world or they're understanding one. That means parents. We have to educate ourselves. From reliable sources, but then asking kids, you know, for, you know, for example, George Floyd, a lot of parents were asking like, how do I approach this?

[00:29:00] **Dr. Nicole Christian-Braithwaite:** So again, talking to your kid, if it's not over dinner, maybe it's taking a walk. Maybe it's over a board game. You know, if your kid is not a direct eye contact type of person, maybe you're playing UNO and having a conversation because they, they need to be somewhat distracted or they need to have something to fidget with.

[00:29:15] **Dr. Nicole Christian-Braithwaite:** Hey, have you, have you seen that, that the video that a lot of people are talking about about George Floyd, again, more likely than not they have, what are your thoughts about that? What, what did you feel? What did you think when you saw it? Encouraging kids to use that emotional vocabulary and if they don't have it providing that to them.

[00:29:30] **Dr. Nicole Christian-Braithwaite:** So if they're describing their feelings. Wow. Okay. So using a, a term called reflective listening. Wow. Okay. So it tells it. You did see the video and when you saw it, your heart started racing and you started to feel really angry. And, you know, I wonder if that, if that scared you, or if, if that, if that made you worry about your safety or my safety and how that made you feel, and so opening the floor, giving them that permission to express themselves, there's no wrong or right.

[00:29:57] **Dr. Nicole Christian-Braithwaite:** Just giving them that opportunity. And then if there are, they are afraid or there, well, every time I walk out the door, I'm at risk of dying or I can't go to school because of all these horrible things, then being able to essentially level set and say, you know what?

I, I completely hear you and I can understand why that's scary, but these are the things we can control.

[00:30:14] **Dr. Nicole Christian-Braithwaite:** These are the things we are putting in place to try to keep ourselves safe and to increase the quality. And these are the things you can do to improve the future, to improve your lives and giving them those tools to exert control. Right? Because success begets success. And you give kids the opportunity to feel strong and successful, then that increases their confidence.

[00:30:34] **Dr. Nicole Christian-Braithwaite:** And that decreases that anxiety, but it starts with the conversation it starts with naming it, labeling it and opening up the floor.

[00:30:41] **Laura Reagan:** Beautiful. And you know, honestly, you made me think about so many things when you were talking there. I thought about how the discomfort that any mother in your situation, in that moment that you shared about your son would have, when you wanted to go for a walk, you were going to go for a walk.

[00:30:58] **Laura Reagan:** That was something you were looking forward to. And suddenly he's having. Big reaction. You have no idea why, cause you don't know that he's seen the video and then it would be easy to just be like, why is he so upset? Just it's fine. You know, we'll be back, we'll be right back, you know, and just go and I mean, that would be understandable, but then he's left with all this panic and no, nobody helping him with it.

[00:31:22] **Laura Reagan:** So, but it's like also just the fact that, that question that he's asking you, there's, there's no easy way to be like, I can make this all better for you, you know? It's easy to not want to go there. You know, and especially for parents who, you know, most parents really don't know what a trauma reaction looks like in a kid.

[00:31:41] **Laura Reagan:** Most teachers don't know. So, you know, what they see is behavior that doesn't make sense and they want it to stop. You know, it makes them really uncomfortable.

[00:31:51] **Dr. Nicole Christian-Braithwaite:** Absolutely. And that's why there, and I, I really appreciate that you have take a trauma informed perspective because I, I, I think every workplace, every educational environment, everyone should be trained and understand what it means to be trauma sensitive.

[00:32:05] **Dr. Nicole Christian-Braithwaite:** One of my. Fan girl over a child psychiatrist. His name is Dr. Bruce Perry and I, and I'm a nerd. So like he he's super cool to me, but he has a wonderful book called the boy who was raised as a dog. And in that book, he talks about understanding trauma. And obviously many of his examples were very, very extreme, but one of the things that he says that when I, when I'm teaching other people and including parents.

[00:32:29] **Dr. Nicole Christian-Braithwaite:** About what it means to be trauma sensitive. You're changing the way you're looking at the behavior. The behavior is, you know, it's not just to act out. Usually the behavior is a form of communication. And then the other, the other perspective change that you're taking is you're not asking what's wrong with you?

[00:32:46] **Dr. Nicole Christian-Braithwaite:** Why are you behaving like this? I can't stand this kid. Or why, why are you doing this? Like, why are you trying to upset me versus what happened to you? And in the situation with my son, that was the same thing. So. Oh, my gosh. It's like, stop, stop overreacting. Why are you doing this? The question is what's behind this.

[00:33:02] **Dr. Nicole Christian-Braithwaite:** So there's clearly a level of pain or anxiety behind that reaction. Why what's happened that led to this reaction. And if we were to change that. So if in school, a kids having a tantrum and instead of penalizing the behavior or labeling the kid as deviant or oppositional, you're able to implement certain techniques that can um, help a really dysregulated child reregulate and usually those are more sensory and less calmed down because obviously you don't calm down work. All parents would be like superstars. You know, if I could just say a word and my kid would listen, I would have no problems, but once a kid is beyond, like, once they are dysregulated talking, doesn't work, you can't just talk them down.

[00:33:40] **Dr. Nicole Christian-Braithwaite:** So usually it needs to be one, a sensory intervention, but then also instead of blaming them for that behavior, asking and looking and saying, okay, this was a really tough situation. What could have led to this? What, what was the pain that was behind this? What were you trying to tell me that you couldn't use your words for that completely changes the way we approach our children and it completely changes the way teachers, clinicians approach the children that they're working with because it's no longer from a deficit based perspective, but we're thinking of it more one from a strength based perspective, because every kid can do something well, but also we're, we're taking, we're taking a more unbiased, holistic view and saying, there's something else behind this. Let me investigate.

[00:34:19] **Laura Reagan:** Exactly. It's like giving them the benefit of the doubt that just because I don't understand this behavior doesn't mean that they're doing it to me or they're trying to be a problem, but they just want to be, they want to feel normal.

[00:34:33] **Laura Reagan:** Everybody wants to feel normal and do their life.

[00:34:36] **Dr. Nicole Christian-Braithwaite:** Right. Exactly, exactly. I mean, there's so, so many very good training programs out there for parents, for teachers, for clinicians around becoming trauma informed. Certainly, you know, Bruce Perry, another psychiatrist, Dr. Avalon, he has this phrase, kids do well if they can.

[00:34:51] **Dr. Nicole Christian-Braithwaite:** And so he and I, I can't remember the name of his organization, but if you, if you look up Stuart Ablon he has a number of training programs that are also trauma sensitive and trauma based. And then his last name spelled. Ablon. It's called, it's called think, think kids. And it's based in, um, in Boston at mass general, where, and I live in Boston, which is probably why I'm more familiar, but then it's, you know, also recognizing, you know, again, not limiting our definition of trauma and understanding what may be traumatic for us.

[00:35:20] **Dr. Nicole Christian-Braithwaite:** May not be what's traumatic for that child and really ensuring that we're not minimizing a child's experience. I think as adults, we so often, oh, it's not that big of a deal, or you're making such a big deal out of this. And it's so small, but we can't define what's pain for someone else. And we are, we can't say that that doesn't hurt you simply because it didn't hurt me.

[00:35:41] **Dr. Nicole Christian-Braithwaite:** And so just being, being very cautious to affirm rather than minimize. Or just dismiss altogether. And then of course, I, I always err, on the side of therapy. There's you can never go wrong referring a child for therapy. If you feel like they're struggling in one realm or another.

[00:35:58] **Laura Reagan:** I feel that way too. I mean, I know I'm like biased as a therapist, but it's not like.

[00:36:04] **Laura Reagan:** Get through survive to be 18, and then you'll be okay. You know, and that's sort of how we seem to like, look at children's emotional lives as if it's just like, oh, you just don't like, you just don't know what to do with yourself. You'll be fine. You know, it's when, how many of us

adults are walking around still in so much deep pain from the things that happened when we were children.

[00:36:26] **Laura Reagan:** And yet we look at children. Like what? They're fine.

[00:36:30] **Dr. Nicole Christian-Braithwaite:** Exactly. And so many of us are emotional growth was stunted when we experienced trauma like that. That's when we stopped developing. And I know plenty of 50 year olds that don't have the coping skills of a 13 year old or have the coping skills of a six-year-old because they, they were never taught.

[00:36:43] **Dr. Nicole Christian-Braithwaite:** They were never given the language to express themselves in a healthy way. And that's, you know, during COVID, there's been a 200% increase in online alcohol purchases and there's been a significant increase in concerns around domestic violence and substance use. That's because there are many, many adults out there who have no idea how to manage stress.

[00:37:01] **Dr. Nicole Christian-Braithwaite:** They have no coping, no healthy coping skills that they can fall back on.

[00:37:04] **Laura Reagan:** Yeah. Our culture is way of just saying like, pretend it's not happening and it'll go away is showing that it's got some cracks in it. You know, veneer doesn't work and everybody. Running around like, you know, chaotically being angry and terrified.

[00:37:23] **Laura Reagan:** So yeah. Oh my gosh. I am really excited that you are out there doing what you're doing. And, um, I don't think when you talked about array, you didn't tell everyone that you're working to have it be nationwide, right?

[00:37:39] **Dr. Nicole Christian-Braithwaite:** So array behavioral care is a tele-psychiatry company, but it's a behavioral health and psychiatric practice first, and it's a psychiatric practice that utilizes technology versus a technology company that dabbles in behavioral health.

[00:37:53] **Dr. Nicole Christian-Braithwaite:** So our chief medical officer Jim Burrell started brick and mortar or in-person psychiatric practice in New Jersey, but realized that need was so much greater. Then just the kids that he was serving in New Jersey. So he implemented this telehealth or virtual practice. And we, again, we have an arm of our practice called on demand, where we

work with hospitals and do consult work and work in the medical units in the emergency rooms.

[00:38:18] **Dr. Nicole Christian-Braithwaite:** And we have an arm of our practice called scheduled care. Where we partner with clinics throughout the country who don't have access to psychiatrists. So I have a clinic in Peoria, Illinois, and there are no psychiatrists that take Medicaid. There are no psychiatrists in that area that take insurance. And so I partnered with the local family practice clinic and I see their kids, the patients, and the families that they treat now because I've, I've incorporated myself into that clinic via tele-psychiatry.

[00:38:45] **Dr. Nicole Christian-Braithwaite:** I'm able to support that same population. And then we have a third arm that's called at home where you can go online to array BC, be as in behavioral C as in care.com and sign up to access a therapist or a psychiatry. From the comfort of your home. So I just had a session with someone they were at work. And then I had a session earlier with a kid.

[00:39:08] **Dr. Nicole Christian-Braithwaite:** They were at school, they went into the nurse's office. I, they didn't have to miss school. They didn't have to leave. Mom's zoomed in, from work, the kid zoomed in from the nurse's office at school. And we were able to have that appointment without mom having to leave work and take PTO without the kid having to miss a half a day of school.

[00:39:23] **Dr. Nicole Christian-Braithwaite:** And so I am able to provide. The same level of care, the same standard of care, but with much more convenience and accessibility, I am here in Massachusetts and I, I serve people in Illinois, Virginia, Washington, I'm getting licensed in Pennsylvania. And so we're hoping that we plan to by mid 20, 22, to be able to offer services throughout the country.

[00:39:45] **Dr. Nicole Christian-Braithwaite:** And we certainly take a variety of insurances depending on which state that you're in. And if you, if you go to our website arraybc.com, you can enter your state. Enter your health insurance information and even read the profiles of our therapists and our psychiatrists. And pick one that you feel like would match your needs.

[00:40:03] **Dr. Nicole Christian-Braithwaite:** You can also call us at +1 800-442-8938. And we have care navigators who are available. I believe from eight or 9:00 AM until 11:00 PM. 7 days a week.. And so if you prefer to speak to a

live person versus going online, you know, if technology is a little bit intimidating to you, no problem. We have individuals who can support you.

[00:40:23] **Dr. Nicole Christian-Braithwaite:** And a lot of people are able to get an appointment in a couple of days or weeks versus most places having months long wait, um, because when, when you're struggling, the last thing you want to do is have to wait six months before you can talk to someone or get help.

[00:40:35] **Laura Reagan:** This is really great that you offer this.

[00:40:37] **Laura Reagan:** So just to be 100% sure I understand: people can self-refer?

[00:40:42] **Dr. Nicole Christian-Braithwaite:** Absolutely.

[00:40:43] **Laura Reagan:** Okay.

[00:40:43] **Dr. Nicole Christian-Braithwaite:** Yep.

[00:40:44] **Laura Reagan:** And it just depends on if your, your services available in their state or not, and then whether or not their insurance is accepted.

[00:40:50] **Dr. Nicole Christian-Braithwaite:** Yep, exactly, exactly. And so that's why I would say go online or call us and we can let you know.

[00:40:55] **Laura Reagan:** Great.

[00:40:56] **Laura Reagan:** Well, Dr. Nicole, it's been really awesome talking with you today. I am so glad. We connected and just thank you for taking the time to be with me today on therapy chat.

[00:41:08] **Dr. Nicole Christian-Braithwaite:** And thank you for having me and thank you for, for the work that you're doing and getting the word out. This is so valuable

[00:41:13] **Laura Reagan:** Thanks.

[00:41:16] **Laura Reagan:** Therapists. If your practice doesn't accept insurance, go to the super bill.com to get started with superbill, a service that can help your

clients get reimbursed. Superbill is free for therapists and your clients can use the code therapy chat to get a free month of the service at the superbill doctor.

[00:41:32] **Laura Reagan:** Also, you can earn \$100 for every therapist you refer after your clients complete the one-time HIPAA compliant onboarding process. You can just send us their super bills. Super bill will then file claims for your clients and track them all the way to reimbursement by helping your clients get reimbursed.

[00:41:47] **Laura Reagan:** Without the stress of dealing with insurance companies, superbill can increase your new client acquisition rate by over 25%. The next time a potential client asks. If you accept insurance, let them know you partner with superbill to help your clients receive reimbursement effortless. Visit the superbill.com to get started.

[00:42:07] **Laura Reagan:** Today's episode was sponsored by trauma therapists network. Find information, resources, and connect with a trauma therapist near you. At trauma therapists, network.com. Traumas real healing is possible. Help is available. Trauma therapist, trauma therapists, network.com.

[00:42:21] **Announcer:** Thank you for listening to therapy chat with your host, Laura Reagan LCSW-C.

[00:42:28] **Announcer:** For more information, please visit therapy chat podcast.com.