

Sue - I'm here today with Ariel Schwartz and uh, this, you know, know, as I've said, right before we got on, I have been following your work for some time, really respect your perspective, and you've really dedicated your career to working with trauma in particular, and that is a tough job. It's certainly a tough job to sustain, especially these days. So can you just give us a quick, background about yourself and how you got interested in this? Yeah,

Arielle - Yeah. So I, I think I came into it for my myself first and I think that's true for so many of us as therapists that we choose a field that resonates for what we need as well. And, initially I studied somatic psychology or body centered psychotherapy, and I chose that route because it, I was the kind of person growing up that somaticized everything held it in my body. I got sick a lot. There was an early divorce in my family. There was the kind of small T or developmental trauma accumulation that I often refer to as the complex PTSD, because there's so many different contributing factors. So that certainly contributed to my early sense of self or lack of sense of self, even my own dissociation. And I didn't have language for all of that, but I knew that for me, that certain practices brought me back home to a felt experience and that those practices were primarily body centered or somatic. So whether it was going to a yoga class or in college, I got introduced to body mind centering, and that those experiences were so formative and, and influential into who am I as a person that I basically in the 1990s looked at, like, where can I get more of this? Where can I study this? And at that time there were three programs. One of which is here in Boulder, Colorado. And it's how I landed here and went to Naropa university. Yeah.

Sue - Yeah. I have friends there. I love, love the place. Yeah. Well, that's interesting. So early on you were aware of your body and the absence of your body at times. Yeah, and that part of what centered you in your interest here. Like that very much, you started out kind of bottom up.

Arielle - Yeah. Yeah, very much. And I didn't necessarily go to school to become a trauma therapist, but when you study somatic psychology, there's a certain way in which it just all makes sense. It all kind of, you know, all roads lead to Rome or at some level, all of the spokes of the wheel kind of come into this hub at the center. And for me, what was left unprocessed, which, you know, it's not like a one time, one and done thing. This was many years of my own internal work, but what, you know, what was left unprocessed from all of those early life experiences, and then, you know, go figure we live a human life and life experiences accumulate all along the way. especially in our complex world. I later had experienced several car accidents in my early twenties. And it was a chiropractor that originally, suggested that I go try EMDR therapy. And my first experience as a client receiving EMDR therapy was absolutely one of those magic sessions. It was so phenomenal. And it connected all of these dots of my own internal processing and it had the somatic element and it had a cognitive element and, and it just resonated so deeply for me that I signed up for the training the next week. I was like, I wanna do that. We definitely we do what works.

Sue - Yes. Like what we can feel that really works. And you've stuck with it. And specifically around trauma like, how do you, how do you hang in there? How do you resource yourself? Like what, what does this work give you?

Arielle - You know, There's a, a phrase that I came across several years ago that resonates so deeply for me. First of all, I hit burnout at several points in my own process as, learning how to do therapy and walk this line and take care of myself and not abandon myself and so forth. And I can share with you a little bit about kind of what, what I think contributed to the burnout. But this phrase that I came across some years ago, that really really touched me was this term vicarious resilience. We get taught so much about vicarious traumatization, and it's very real and compassion, fatigue, and it's very real. But if we also look at the impact of being a therapist focused on helping others overcome adversity and what, and what vicarious resilience refers to is the positive impact on helping professionals that comes along with the meaning that that is in our work and with really seeing those positive shifts take place. And so I really turned my whole practice around actually, even before I came across that phrase. But when, when I bumped up against burnout, a lot of that had to do with my own unprocessed trauma that was coming through the gates as I was working through others and realizing that there were pockets of my own history, that, that were needing more attention. And um, and so, you know, I needed to attend to that. I, I needed to, to give that its full nurturance and therapeutic support within me. And also, I, I think it really was about a mind mindset shift in my work, into what I call now, resilience informed therapy, and that's a strength based approach and it's really attuning to what's already working. What are the existing supports and even what is the strength behind the symptom? What's the meaning behind the symptom, right? What was wise about dissociating or what was wise about whatever coping habit one developed? Right. And so that resilience informed lens really helped you know, kind get out of that

myopic, everything as trauma, into what's the broader field that's holding the person?

Sue - This is so great. I already am feeling good about this because it is, it's so true. And this is part of why I wanted to bring you on is that, um, as you look more and more about trauma and the effect of the, on the brain and the body and the intergenerational aspects and all of those things, it can be very heavy and very hard. And then when we add this context that we're all living in yeah that as therapists, we're catching people. Managing the stress of some of the national divide - we like this idea of trust. It's like, we can't just play on the playground. We have to really keep an eye over here. Mm-hmm and Then what we're seeing is things that scare us and that polarize us, um, and that's not a political statement at all. Right? Like That's just safety, danger. Yeah. So with that context, being able to have a thread of boy, how are we managing? How do we help therapists hold people that? Um, that are experiencing it right now? They're also in it we're right in the middle of it, you know, where COVID is happening. Shutdowns are having all of the things are happening together. So this thread of hope that we'll be talking more about around a post-traumatic growth.

Arielle - I see. I can I have to think to say it versus stress, right. and peri- traumatic growth. Yeah. It really is an actual change of mindset. And I already can feel kind of the hope of it. Yes. And I think you just named something so important, which is that we, as therapists have been trying to process what's been happening in our current world for the last two and a half years, right alongside with our clients. And we might not even be a step ahead sometimes. I mean. I remember the week of the shutdown in 2020 of you know, March 13th or whatever it was that, that week. Right. And you know, literally listening to the news saying, well, this school district just shut down. That one just shut down, this state is responding this way. This is what's happening in this hospital. And hour by hour, right? We were all trying to keep up with the rapidity of what was, what we were coming to realize was happening in our world. I mean, I still get goosebumps thinking about it and to be processing and still sitting with our clients who are receiving the same information that quickly not knowing what was gonna happen in the next day.

Sue - Yeah, that's disrupting their treatment, you know, or changing their treatment in some way, you know? So there's also that, right? Yeah. Yes, Yes, exactly. And then like switching to online and adapting to that and you know, we have just been you know, right alongside, so to me, there's actually been something very touching about this as well, which is that it's really brought us all to the most human place.

Arielle - Right. We are all humans trying to sort this out. And sometimes even our clients, seeing us as humans responding to this right alongside, you know, it's not always that we have all the answers and the expertise. And I think this really exposed that in a very good way, in an important way. Yes. And exposed it for us too around. Yeah. Like I had this thing of, there's not even someone I can consult with. Right. There's not even a mentor that kind of knows how to guide- um, managing some of these uh, things. So yeah, we were thrown right into the deep end along with everybody, for sure. You know, One thing I will say that perhaps was one of the best teachers was actually coming from some of my yoga background in that the yoga practice is so often about like stepping into the unknown and embracing and not knowing what's gonna come next. Whether you call it yoga, whether you call it mindfulness, but that like having any form of practice that allows us to sit with ambiguity um, became the, the ground in the groundlessness. Mm.

Sue - Love that the ground in the groundlessness. Mm-hmm so, So thinking in terms then of the growth and that we're in it, we're still in it, this isn't over. As a matter of fact, a lot of people would say it's getting worse and there there's signs of increasing threat um, politically and you know, for, for many of us. So this idea of- can you just tell us a little bit, what does peri traumatic growth mean? Like What is that term?

Arielle - Yeah, well, I'll start with posttraumatic growth and then we'll work our way into peri traumatic growth. Sounds great. One of my favorite definitions of posttraumatic growth is really about our belief that we can work through hard stuff and come out um, with an increased sense of depth or understanding, or wisdom or strength or whatever that, that gem is on the other side. But it's, it's not that necessarily the hard stuff makes us grow, right. It's what we do with it. How we metabolize it, how we process it, if you wanna use that word, although we're not food processors right. But you know, but like what, you know, what it is that we do with that difficult emotion, what support

we reached toward, or what tools we have to, to not get stuck in it, but to actually kind of move through that tunnel and come out the other side.

Sue - Yeah.

Arielle - Because it's so easy to think in terms of that being an insulting idea or yeah. You know, or a head patting like, " -oh, this isn't as bad for you, you know, there's, there's a silver lining or something like that"- yeah. Yeah, exactly. It's and, and that whole idea of like, you know, bad things happen for a reason. That's not at all what this is about. It's It's we are human and we're going to face difficult events in this human life, and how do we cultivate the tools to help us deal with adversity? And what's really tricky, of course, is if you have had adversity in your childhood, if you've had childhood trauma and developmental trauma, is that as a child, our access to resources can be very limited. And so it's more likely that we have kind of pockets that we drop into or islands that we land on of despair, helplessness, powerlessness, hopelessness, and so, you know, those are probably the biggest barriers to post-traumatic growth.

Sue - Are the pockets themselves, you mean?

Arielle - If you wanna think about it that way, or parts language landing in that part of self and not having access- sometimes the metaphor I use is we've landed on this island of self and we don't have any fairies or bridges or flights off the island that we get stuck in that island of despair. And forget, like don't even know to ask for help.

Sue - Exactly. See competence, you know, don't have that body experience of that relief that can come interpersonally on that island.

Arielle - I'm just thinking off a clinical example for a moment of working with a woman who we had cultivated you know, a list of resources. We even wrote them down. Right? She had them in her purse. And of course when the, you know, when she drops into that self state, the first thing that goes is she forgets to look at the list. Right. It's like, like, you know, and so it's. It's knowing that we have an adult here now self that actually has a, a wider range of choices that were available to us when we were a child.

Sue - Makes me think of internal working models and yea,. Rewiring.

Arielle - Yeah. And have the experience of remembering and it working. The experience of remembering and it working. Yeah. Right. And I think we need to have repeated experience of remembering and it working again and again, to get that rewiring or that neuroplasticity of that new positive self state or thethe bridge built between the island of despair and the main.

Sue - That's great. Yeah. So then post-traumatic growth, what else about that? Like how is it misunderstood? What are some of the surprises for you in it? Yeah.

Arielle - Well, I, I wanna kind of link it back to this idea of peri traumatic growth and we'll, we'll keep kind of unpacking what all of this is, but, you know, if we think about post-traumatic growth, we often think, okay, the event is the car accident or the flood or the fire, right? I mean, we've had, I'm living in Boulder, Colorado, and we've had both of those recently. So, you know, It's very, very fresh, very real so, you know, but so often we think, okay, there's this event and it ended, and now I can focus on metabolizing and processing that hard stuff and come out the other side. But what, what are we looking at when we're living in a world where there's two and a half years of chronic, uh, exposure to experience of threat, right? And um, and not knowing what's gonna happen the next day and whether you know, gun violence and sending your kids off to school, or whether it's climate change and fires and floods in July 4th parade. And yes, you know exactly. Mm-hmm exactly. So peri traumatic growth is basically applying some of the same principles that that, you know, we look at that facilitate post traumatic growth or resilience and applying them in the midst of ongoing exposure to adversity and uh, traumatic stress.

Sue - Okay, that's great. So I wanna go more into that.

Arielle - Yeah. One of the things uh, around like what causes PTSD are the affect and the associations and our, and our response to the overwhelming event. Mm-hmm right. And, um, So what you're saying is if we can resource during it, You know, I guess, are there just off the top of your head, are there particular things before we go into the growth that will set someone up to have more trouble? Cuz I like that like Cause this is happening to us. Mm-hmm and I, you know, One of the things with PTSD is you know, there's often the experience of, you know, what are like anger, uh, disgust, sadness. And you know, you can kind of the four, the core feelings mm-hmm that tend to come up and you can see people having that, where people are moving, people are wanting to burn buildings down, people are wanting to- right. So it's, it's literally happening now. So. Yeah. Yeah. You know, When you look at some of the research on resilience, um, some of the key factors that both either, you know, if they're not there can reduce our resilience to traumatic stress and if they are there, of course, they promote our resilience. But one of the, the most important ones is about isolation. The more isolated or the fewer positive, predictable, consistent social sources of nourishment that we have the greater, the barrier to uh, resilience and growth.

Sue - Right. So what was so challenging and in some ways still is so challenging with our pandemic, of course, is that with quarantine, um, and especially for individuals who were living alone and didn't have uh, family didn't have other people in their immediate environment, the experience of isolation, it such a profound, negative impact on our resilience during this. And how does that cross with some of the attachment literature related to you know, how people respond to stress?

Arielle - Yeah. I mean you even look at some of the kind of uh, shared neuro neurobiology or shared neurophysiology between social isolation and physical pain. right. So we know that it's the same parts of the brain that are lighting up when we feel disconnected from others or experienced social loss and experience physical pain. And I believe that there's some research out there even about the contributing aspect of that to the worsening response to COVID. Mm-hmm right. So that like, it's actually a risk factor of how you respond, how you respond to the virus -based on how much social connection you have. Interesting. I know,

Sue - I know I haven't, I haven't seen that, but it doesn't surprise me cause it's so it's associated with cardiac health and exactly, but, but also just like, is that because sometimes, you know, this idea of so secure attachment has to do with like having, like how is that different than resilience in a way?

Arielle - Yeah. Right. There's so deeply interconnected, aren't they? Right. You know, This idea that somehow I had that felt expense, that that felt experience, I could reach out to another person and have a positive response. And so individuals who had the luxury or the, the privilege of secure attachment probably could handle the isolation of the pandemic with, with greater resilience, because there's this knowing based on my experience in life, that other people are trustworthy and that they'll respond in a positive way if I reach out and ask for connection or support. And if we don't have that, if we didn't get that in early childhood, you know, again, if we look at that, that element of uh, neuroplasticity, what we also recognize is that we can gain the benefits of earned or learned secure attachment throughout our lifespan. So that's where I think therapy often comes in is that we can provide that predictable, consistent, caring, nurturing, nurturing, nurturing relationship for someone, even if they didn't get that in early childhood. Mm-hmm

Sue - The, um, I think about when you're talking about the isolation, um, one of the things I noticed was it was hard to isolate mm-hmm and then we, you know, accommodate to it, and then it was hard to not isolate, right? Yeah. yeah. Oh no, I'm still, I'm still adjusting to the reopening, right? It's a little scary to go back out there. But that's like such a good like, felt experience though, of you know, if you've never had it that like you settle into, and this is kind of, uh, the way we talk about it on the podcast is like a cont, a color to continuum and blue being on the, when you had to zip up and just not even look for the help. So this really gives us a feel for how that ends up working, that it ends up actually being adaptive, but then sets us up- I think what we're saying here is that it sets us up to have a, a much more difficult time in, during the stress, because we're not getting that regulation. Is that right?

Arielle - That's right. We're not getting any co-regulation and I, and I think what, for some individuals, and I'm sure you found this as well, is they were like, oh, I love, I, I love quarantine. Like I, you know, they were just like, this is how I prefer to live. I actually am relieved that I don't have to go out there into the world. And you know, and so it's not necessarily that we wanna like put it all into to one camp. I think for some attachment styles, it actually was uh, a

relief to some degree. But the, I, I think the challenges that very often that self-reliant strategy that one had to develop as a child, um, has a burden somewhere, right? Like to, To not be able to experience co-regulation um, with another person at some point there's this feeling of the only person I can rely upon is myself. Totally. And that's exhausting too. Right.

Sue- Absolutely. And so then the, with, with the idea of the growth, that part of the growth is gonna be something about- I guess, can you say more about what- how does, how does that look um, during the event?

Arielle - Right? Yeah. So if we, if we you know, can recognize that to some degree isolating um, or becoming passive- so if we look at what are, what are the risk factors or the, the barriers to resilience and growth one would be isolation. Another one would be passivity, basically a loss of self-efficacy, no matter what I do, it's not gonna make a difference. So what's the point of trying? And so if, if we look at then what facilitates growth, right? It's this recognition that, okay, I might not be able to change the entire situation, there's a lot that I still don't have control over, but what do I have control over? That? That creates a small, positive shift in my hour or in my day or in my week. Right. And so I, I often think about like creating this list of those resilience practices that we can build in that optimize your, um, your felt experience of yourself and your sense of empowerment each and everyday. Yeah. And I imagine many of us are doing a few of those things, not even being aware of it. By you highlighting it, it's like we're beginning to really collect them and value them in a new way of, of our, yeah. These are our handholds. Right, right. In the post-traumatic growth guidebook, I you know, kind of speak about um, the different types of resilience. So we. Mental resilience, right?

Sue - Like the ability to be flexible cognitively, right?

Arielle - To think about things in, in different manners to not get stuck in one kind of negative, looping uh, experience. We have emotional uh, resilience, which means that there's a, a capacity to be with our emotions to recognize that there's health and vulnerability. Um, That the ability to express what we're feeling actually facilitates congruence and the body mind love congruence, right?

Sue - There's like, like our vagus nerve lights up with congruence and you know, all of that good stuff we have. And congruence meaning? Specifically say a little bit more now? Oh, good.

Arielle - Yeah, no, I always, I appreciate those, those cues, right? Congruence basically meaning that, that I am in tune with what I'm feeling, I'm in sync, so that what is happening on the inside is actually being matched with what I'm expressing on the outside. And incongruence, if we wanna look at the opposite is I'm fine. And everyone's going, you're not fine. right. Like you don't look fine, don't sound fine- right. So, but when we're congruent, when we're saying, I feel really sad right now about what's happening, or I feel scared. Right. Even though it's a difficult emotion there's actually something that goes, ah, wow. I named what's true, and that's integrity. Important's yes. There's an integrity to it. Yeah, yeah. Yeah. Interesting. So the person saying fine mm-hmm but that is actually that is, is not fine. Fine in general is not the best answer just by the way for you listeners. right, right. Like, uh, more words usually, but that There's a cost to that you know, that's kind of the holding on. Yes. And there's a cost you within ourselves, there's a personal cost and there's a social cost, right? I'll, I'll give an example that, um, a friend of mine shared with me, he said that his grandson came up to him and he said, grandpa, why are you so angry? And he said, I'm not angry. And his grandson said, well, tell that to your face. Right. You know, And what's beautiful about this story is- who's like, huh? Maybe I am, let me check in with that. Right. Like he received it, but how often does the child, who's more, right-brained see the emotion on the adult in their life? Point it out or act it out and the adult can't receive the message can't own it or, or go, huh. So it's that in congruence, of course, that then creates this, uh, these experiences of lack of safety interpersonally. Well, so, and Right into the trauma part right. that like, I can't believe my lying eyes you know, like I can't. Right. Just that the experience then is to really have to split the knowing of what's happening with the, um, the external world. You know what I mean? Right. What it takes to get along in the world. Exactly. And, and if that happens repeatedly in childhood, one has to adapt in all sorts of ways either to cut off that knowing, cut off that intuiting part of one's self, or that right brain felt experience in order to

comply or to um, belong socially. Right. Or um, basically one has to adhere to my own truth, but I don't get the benefit of belonging and, and uh, connection. Hmm. So it creates a real uh, dilemma and you know, going back to the kinds of resilience. So there's mental resilience, emotional resilience, there's social resilience.

Sue - Right. And even that, knowing that another person is trustworthy or that there is someone that I can go towards or that I can be a trustworthy other for somebody else.

Arielle - Oh, that's nice. Yeah. So those are the different domains of it. There's two more.

Sue - Okay great, please keep going. So um, there's physical resilience and you know, what we're speaking about there is, um, you know, basically being able to create a robustness of, of uh, our bodies.

Arielle - And I also often tie in what I refer to as nervous system flexibility, which is that when studying um, polyvagal theory in the vagus nerve, we recognize that the vagus nerve or what we call vagal tone or vagal efficiency are the physiological markers of resilience. Mm mm. Oh, that's a nice way to say that  
Yeah, yeah. Yeah. And then the, the fifth one is uh, spiritual resilience.

Sue - So say that again um, since I kind of interrupted. Let's uh, it's okay. More in a list, right? Yeah. Like these different domains.

Arielle - Yeah. So we've got that mental resilience or cognitive flexibility, emotional resilience or emotional intelligence, that ability to, to be with our feelings and to recognize that there's value in, in that congruent, um, expression of what's happening inside. We have social resilience, which you know, and in some ways kind of a, a outcome of those first two and that ability to receive from others and also give to others in a meaningful way. And uh, we have physical resilience and that nervous system component to that, of our autonomic nervous system, being able to handle challenge and recover from challenge. And then spiritual resilience, which I often, you know, kind think about in that category of meaning making. And you know, how do I um, create a meaningful life, a purposeful life? One that feels fulfilling at that kind of deepest spiritual level and whether spirituality is the right word for you or not it's, it's really about um, you know, kind of what's that big picture? What's your. what, What do you wake up in the morning and look forward to? What, What motivates you um, to walk through the world? Mm-hmm You've got some of the existential questions. Yeah. Who am I exactly? So then how do you, how do you work with those domains?

Sue - Like, um, like what then what next do we look for there?

Arielle - I think often what I look at is how are we feeding or nourishing those five categories, um, and creating a very personalized um, can answer to those questions. Of, okay. So if I wanna cultivate more of that spiritual resilience, for example, what do I need to bring into my life? For me, it's cultivating a daily meditation practice for me. It's spending time in nature right. Um, and, and just being able to just get this really big step back from the myopic experience of the day to day stressors and tap into a beautiful sunset or whatever it is. Right. Um, and so, you know, for each, each person, What is it that allows you to tap into spiritual resilience? Whether it's your yoga practice, whether it's going to church, right? What, whatever, Whatever that is um, creating, uh, think a lot of what Victor Frankel speaks about in terms of you know, tapping into our values, whether they're creative values or um, even mindset values, right? Like if, if I, um, You know, If I can kind of create that mindful pause between stimulus and response and how do I actually choose my actions in the world that, that are in alignment with my values?

Sue - Mm-hmm That sounds great. And you know, I hear I'm thinking of the complication with that too right now. Yeah. Around that things can be so overwhelming. Mm-hmm that there, you know, do you, um, The existential questions, do you go in there? Um, The guilt that many people have of looking away and um, turning off the news.

Arielle - Yeah. You know, not being part of things, kind of The intentional, intentional dissociation in a sense. Mm-hmm, I can't, it's too much for me, um, and if it's not too much for me, then I get overwhelmed. Yeah. You know? Yeah. I, you know, To me, when I think about media exposure, whether that's social media or the news, or, or or listening to the radio, however it is that you're taking in, you know, the, um, really the constant information that we're all trying to process for me it's why I have those other practices. Is. Then I know how much can

I expose myself to the adversities that are around me in a way that actually I can still digest? Right. Do I have those practices? Whether that's you know, for me, I'm a therapist, whether that's going to supervision and consultation, whether that's going into my own therapy, whether that's sitting on my meditation cushion.

Sue - Right. Do I have the practices that allow me to digest what is happening in my current world? And I think that's you know, in a way kind of ties in all of those five domains, do I have the practices that allow me to navigate the inevitable challenges that are going to continue to happen. I can't help but think about as you're talking like the, that all like I'm on board. Totally sounds good. You know, and I also, and I like the categories because it helps you think of like, oh, you know, I wasn't even thinking of the physical or the whatever. And it, so, So just if I can say back, so part of the idea is that you're cultivating things. You know that in post-traumatic growth, I think that there's a connection there, but we're pulling them in.

Arielle - So that you're modulating now while it's happening during the stress. Yes. Is that right? You got it. But, but then I also think, I don't, and I don't know how this fits in, but around like class and culture and, uh, you know, some of these things seem like such privileges to be able- even the idea of safety and being. To choose to engage or not to choose to engage. Whereas that's not true for many people. That's right. And part of my next thought was well sitting on a mat and, you know, having these resources, you know, that is available to everyone. But I guess like the support for that or the cultural, um, support for that. Uh, sure, sure. I, you know, I think. Trying to close some of those gaps in terms of access to resource, uh, has been a real passion of mine as well. And I know it's a shared passion. In fact, I was kind of reading about you know, just even kind of how your, your uh, donating some of the, the profits of, of creating this work right? As a way that provides you spiritual meaning, like I really get that. I relate to that deeply. And um, and for me, one of my pandemic projects was to take what was always a kind of localized offering. So I've been teaching therapeutic yoga for trauma locally, in one of local yoga studios to kind of, uh, a smaller, relatively smaller group of students that would come in and do these six week classes with me. And I knew the great benefit of these classes then the pandemic hit, and I wasn't able to teach yoga in person. So I took my classes online, both my general yoga classes and my therapeutic yoga, and I just combined the whole thing and made it available donation. Um, A lot of those uh, classes ended up also being donations to other um, causes during this whole um, time that we've been living through. And the, the meaning that came for me around creating an accessible trauma informed yoga class and a YouTube channel around that and made it free, or donation based. Um, Which has now you know, some of those videos have been watched over 10,000 times. Right. And it's so powerful to know that that resource has been made accessible to anyone who has access to a phone or a computer.

Sue - That is incredible.

Arielle - And that's still up. Oh, yeah. It's not going anywhere. Yeah. Right. And I'll, I'll keep doing, I'm still teaching online because the online community became so strong. So I teach live online and people are literally um, tuning in from around the world and we practice together. And um, so, you know, finding these ways to close those gaps of accessibility and some of what you named also is also perceived accessibility or perceived, um, um, Uh, value within one's community. Like What are you doing going upstairs and getting on your yoga mat, even if it's for 10 minutes when X, Y, Z needs to be done? Or when we don't have time or we don't have money or whatever the, the, the, the barrier is.

Sue - Yeah. I mean, Yoga in particular it, it has that ring of- um, yeah- or if therapy actually just private therapy. Right. To be able to sure. To be able to afford private therapy, to be again, culturally, that that's okay to talk about your business outside of the, your home. Yes. All of those things. And I agree with you, I'm totally resonating with the, um, the delight and the meaning of the, of being able to have the accessibility-I mean, this is the, our whole podcast is about that. Right? Like I know from all over the world, being people, being able to learn the science that you wouldn't be able to have access to otherwise. Yeah. Wouldn't know to. Yes. Um, yeah. So I really love that. And that may be, if, If we hone in on one of the aspects of peritraumatic growth during the pandemic, one thing that happened is that information became profoundly widely available more than ever before. Things that were maybe an upper echelon academic settings went onto summits that were free. Right. And they're still happening. I have never seen so much free trauma informed information um, than these last two and a half years. Oh, that's great. That's great. So again, that's that you're recognizing the. the meaning and the, and the, and you're highlighting that, like, let's focus on that.

Arielle - Yes. Right? Yeah. That's exactly right. What are we putting? The's nervous system. Totally. What are we putting the lens of our awareness on? Right. And if we're only putting the lens of the awareness on all of the loss and the trauma, and it doesn't mean that we don't wanna look at that or attend to that, but if we're only looking and attending to- that, that's all we see.

Sue - So how does mindfulness play into this? You, you, you mentioned it earlier.

Arielle - One of my favorite definitions of mindfulness is having choice about where we put our attention- hmm, cultivating that capacity. Right. And so I think it really ties into exactly this piece of where am I putting my attention? Am I only putting my attention on all of these signs of threat? Or do I have the ability to actually make a conscious, mindful shift to look for signs of connection, signs of safety, if that word resonates or relative safety in the sense of in this moment, there's no current threat? Can I look towards signs of um, empowerment? Like Whatever the resource might be, that I can actually shift the lens of my awareness consciously towards that. Mm-hm.

Sue - And it is so tricky because, like I was just thinking of my personal example is how much I want to you know, do my door knocking and go through the neighborhood. You know what I mean? Like do like be active and. Change yet to do. And I've noticed that I have all these big plans and I keep signing up and some letting something happen. Mm-hmm And my ambivalence is partly like it's heartbreaking, like it hurt to get more engaged, to invest in uh, an election or a whatever it is - -then is it's just, that's a very, very painful, um, experience. So again, I'm just, I know that this is true for so many people around like really trying to balance that, like, uh, what can I do? And, and, you know, for me, My answer to that is I would rather later look back and have a heartbreak and be hurting and in it and swinging. And then I also know from a trauma perspective, that being active and doing something will typically uh, fair better results. You know, Being in the foxhole and just hoping for the mm-hmm Calvary to come get us- that that is a very bad place. Not bad. I don't mean morally bad, but it's it's a very difficult place on our nervous system. Mm-hmm Versus if we're swinging and we're doing something and we're, whatever that is, and maybe that's being able to you know, get a shower mm-hmm and get outside. And get some sunlight in your eyes. Yeah. That that that's, that still counts. Right. Um, that's right. So that's right. Yeah.

Arielle - And you know, and I, I can think even about like all of these marches that have happened, and there were certain marches that happened early in the pandemic and I'm like, I'm with the cause, but I don't feel comfortable going out there. You know, Yet like I'm, I'm, I'm you know, too early for me with black lives matter and all of that, like those early marches and I, or the women's March even. And I was just like, I, I don't feel comfortable being in a crowd of people right now. Right. And so kind of knowing that I'm still standing in solidarity with, and that like there's other ways to be of value. And I think you know, one of the things that came to mind, Sue, when you were just saying about like that ambivalence or how do I give or con contribute in a way that still feels an alignment with, with what I feel I can offer right now? Absolutely is. Yeah. My capacity is kind of Is looking at this image of water flowing downhill. Right? It's. It's actually a very powerful force, even though it's following the path of least resistance, but that water eventually can carve canyons and can create great change. So when we're you know, kind of looking at ourselves and how it is that we wanna take action, what allows us to actually follow something that feels easy, even though it's still some movement it's movement.

Sue - Yeah. Oh, I love that. That's really, that feels really good. um, yeah, That it's not the whole movement isn't on any one particular person.

Arielle - Exactly. We're just part of uh, a stream.

Sue - I really, I really like that. Yeah. Yeah. That's beautiful. Yeah. So, um, I'm gonna really highly rootly recommend readers to I'm hold up your book. Thank you. EMDR therapy and somatic EMDR therapy and somatic psychology interventions to enhance embodiment and trauma treatment. And in case you are watching our new YouTube. There we go, um, highly recommend, really great. It's a couple years old act. isn't it? Yeah, it came out in 2018. Mm-hmm But it's still really, uh, really good. Mm-hmm and then you've done something since then. Can you tell us?

Arielle - I have, I have six books. I have, I have quite a lot out there. I have the complex PTSD workbook and, um, The the more recent books, one is the post-traumatic growth guidebook and that's the, that really is relevant, very relevant to everything we're speaking about here today. And then the most recent book is the therapeutic yoga for trauma. And that is the application of polyvagal theory into uh, yoga for trauma treatment. And uh, it's beautiful book. Uh, Dr. Steve Porges just wrote the forward for it, and I'm really happy it's out.

Sue - Oh, that's really beautiful. All of these will be of course, linked in our show notes. Um, is there, So if someone's new to this, which of those uh, books would be a good starting place?

Arielle - Well, I think it kind of depends on what it is that you're looking for. If you were a therapist and you're wanting to know how to integrate EMDR and somatic psychology, the book you held up is your is, is a fantastic go-to. Um, I also have the complex PTSD treatment manual written for therapists. And then if you are a layperson, listening to this, looking for tools for your own growth and healing, the post-traumatic growth guidebook and the complex PTSD workbook, if you've grown up with developmental trauma, um, that that workbook is for you for anyone right now with our pandemic. I think the post-traumatic growth guidebook is gonna be a, a nice resource. Oh, that's wonderful. And then you also had mentioned some of the, uh, YouTube and some of the training. Can you tell us how to find that? Yeah, so it's all on my website and, and it should be pretty navigatable - if that's a word on the website, that's great. I have a blog, there's lots of lots and lots of information in the blog and, and of course, uh, all the books are on there and the trainings that I teach are on there. And your website is? Oh, it's Dr. Ariel schwartz.com. Pretty easy.

Sue - That is wonderful. Um, Alright. Is there anything else you wanna say to this incredible audience that tunes into this I think life changing education?

Arielle - Yeah. I really like the first thing that comes to my heart is just gratitude for everyone who is walking through this world right now, whether you are in a helping profession or whether you are here navigating your own trauma. I think that it's a courageous act to stay involved and by listening to this podcast, you're actually nourishing your resilience right now. So that's, that's fantastic.

Sue - I think that's a wonderful way to say it. And I think that's true, mm-hmm that is we have other voices coming in and these, these Beau, this beautiful hope that you're offering, um, especially if we don't come from like me from a naturally secure history that in the blank of things and in the isolation we fill or just our old stuff.

Arielle - Yeah. All of the online resources that bring in you know, voices of healing and hope- things like that- we really do need to get it generated from outside of our own minds. It's, It's kind how we started, which is that there is help and it is effective. Yeah. And we just have to reach out for it and let it in and let it work.

Sue - And yeah, that's wonder. That's wonderful. That's beautiful. Yeah. All right, well, thank you. This has been really informative and I know inspiring to so many people, and timely could not have been more timely. It's given me a little shot in the arm, so, thank you for coming. Thank you for having me. Yeah, thank you, listeners. And we will see you around the bend, right?