

-- Speaker 1 00:00:28 Welcome to another episode of Dr. MCs self-care cabaret podcast. I'm Theresa Melito-Conners, a PhD level self-care expert in the greater Boston area with a passion for helping others recognize the importance of caring for themselves. Today's episode. We're going to talk all about trauma. I have been researching trauma and studying trauma for my own wellbeing in learning to overcome and understand my own childhood experiences and lived experiences that I have had. And when we think about trauma, we often hear the term resilience, but resilience can sometimes sound like this mythical unreachable thing that we're not really so sure what it is. And just like with trauma, it's important to remember that someone else doesn't define your trauma, you get to define what is traumatic for you and what you've experienced and the same with resilience. And it's important to think about. And remember when we talk about resilience, that it is a skill that you can build.

Speaker 1 00:01:35 And my favorite way to think about resilience is actually reframing it through the lens of self care because when we practice self care, like the real self care that I talk about, we actually can work on our resilience, but this is generally something that takes profound, personal growth and effort to really get to the core of your being and to heal and to build that skill and to practice really good, authentic self care. So this is one of my favorite topics to present on, and I talk a lot about the intersection of trauma, resilience and self care. So let me highlight this a little bit for you first, we're gonna define trauma. So I've already said that you get to decide what is traumatic. And two people could experience the exact same things or the exact same experience, but have very different outcomes as a result.

Speaker 1 00:02:28 So trauma is generally described as a singular event or a series of event that is deeply distressing or disturbing traumatic events are things that are generally outside the norm of typical human experience. And you can even experience trauma by witnessing a traumatic event. And currently, as we continue to navigate the uncertainty of the ongoing global pandemic, we're all experiencing a collective trauma. And as you may have noticed, you know, people are handling it in different ways. And the ramifications of COVID 19, you know, are unknown. And we won't know for a while, the full impact that this collective trauma is having on us in the world. Really. So when we think about the research, there's a significant link between traumatic experiences and adult health and wellbeing, especially if the trauma was experienced before your 18th birthday. Now that is not to say that everyone who endures trauma is destined to have challenges later in life.

Speaker 1 00:03:32 Again, you are not your trauma, but it is an indicator of greater risk. But the good news is that there are ways to heal. And when we think about, you know, bouncing back or overcoming trauma through our resilience, psychologists define resilience as the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress. And again, this involves profound personal growth, where we examine our behaviors and our thoughts and our actions, but it is thought to believe that anyone can learn to increase their resilience over time through this work. And one of the best ways to do that is through your self care. So some of the core components that are known to help build resilience are as follows connection, wellness, healthy thinking, and meaning. Now, if you've been listening to this podcast for a while, some of that may begin to start sound familiar.

Speaker 1 00:04:30 If you think about connection, well, that gets into our relationship domain of self care. That's how we spend time and make time for people who are good to us, who support us, encourage us believe in us. If we think about the healthy thinking core component of resilience. Well, that starts to get into our self-compassion and our self-awareness and our mindfulness domains of self-care. And if you've been listening to me for a while or participate in any of my workshops, you have heard me talk about the self-care domains quite a bit. And you know, when we think about meaning as a resilience core component, that's the spiritual domain. That's how we feel inspired and how we see our larger purpose in life --

-- e and wellness as another core component. Well, when you practice all 10 self care domains that promotes optimal wellness when practice is part of a foundational routine.

Speaker 1 00:05:24 So when we practice self care, really good self care, we actually in turn build our resilience. I think that's pretty cool. And so for today, our guest, we're going to talk to Dr. Jennifer Herring, Dr. Herring, and I actually attended the PhD educational leadership program at Leslie university. And we met several years ago. And I'm so excited to have her here with us today as an educator ha, who has been doing this work for about 10 years, Dr. Herring recognized the need for trauma informed practices in and outside of schools, she is passionate about sharing her learning and expertise with adult survivors of trauma, as well as parents and caregivers of those who have experienced trauma. And as a result of her research and her experience, she launched herring hope and healing, which provides coaching to survivors of trauma and their caregivers, as well as opportunities for businesses in schools to grow their capacity in supporting the survivors they serve. I'm so thrilled to talk to Dr. Herring today. Thank you so much, Dr. Herring for joining us today on the Dr. MC podcast.

Speaker 2 00:06:47 Thank you so much for having me, I'm excited to be here.

Speaker 1 00:06:50 This is very exciting. I did say in the intro how we met at Leslie university throughout the doctoral program, which is very cool, made some great connections during that.

Speaker 2 00:07:01 Yeah.

Speaker 1 00:07:02 So I typically like to ask my guests right, right off the bat. How do you like to practice self care?

Speaker 2 00:07:10 Ooh. So for me, I, um, this is actually something that I'm still learning and being really intent, uh, being really intentional about. Um, I actually, um, had some health issues, uh, during the pandemic and a lot of that I believe was due to stress and just the nonstop of life. Um, and so like some challenges with blood pressure, with my kidneys, um, you know, it just was very scary. And so I've learned kind of how to, for lack of a better word, kind of dig deep within myself to figure out what are the things that make me feel happy, calm kind of Zen, um, and just fill my space in my environment with those things. Um, and so I learned that I love nature, which I'm a city group <laugh> I grew up in the city, so that's really unexpected. So we, um, in looking to purchase our home, I really wanted to be in, um, be in a town that was kind of quieter, you know, kind of out, out of the city, uh, environment. And then once we found our home, I realized I really like animals, so let's, let's get some animals. So right now we have a couple of pair KES that you might hear in the background.

Speaker 1 00:08:23 I do hear some parrakets in the background.

Speaker 2 00:08:26 <laugh>, they're very talkative. Um, and we are, you know, also, you know, preparing to get a couple of puppies. So I, I don't know, I just, it's been a joy to really rediscover who I am, um, and to really understand what makes me feel calm outside of, you know, my family, my children, my husband, um, just really setting an environment and atmosphere in my home that is very, you know, just very intentional in calming me down. Um, I also love to get minis and Petties, mm,

Speaker 1 00:08:55 Me too.

Speaker 2 00:08:55 I'm also, <laugh>, I'm also, um, a woman of faith. So I'm very involved in my church and that keeps me grounded and centered as well. So

Speaker 1 00:09:04 Beautiful. My goodness. You touched on several domains of self care that are, um, you know, really important first, you know, you talked about having, um, some challenges with some dis-ease in the body, maybe from pushing yourself too much and not managing yourself care. So I applaud you in recognizing that and really digging deep to figure out what's gonna be best for you and what makes you happy? I love that. And you talked about getting outside nature, so powerful and so healing. I'm a city girl too, and it's like, oh my God. Like, it just, it, it's just, it's awesome. And it's just wildly underutilized, even just a couple of minutes can absolutely can be amazing. And

Speaker 2 00:09:47 I think, yeah, sorry. I think also another thing I forgot to mention is, um, natural sunlight. Um, like I, I really took t --

-- hat for granted, especially the space where we were living in prior to moving here, didn't have a lot of natural lighting. And so I really wanted to be intentional about like large windows letting sunlight in every morning, every morning at sunrise. Um, it's usually me and my son that are the first to be up. And so I tried to like open up the blinds and make sure, like, we're all getting that natural lighting. Um, and it just it's really rejuvenating and it does something to, you know, psychologically, it really just kind of helps lift you up, especially if you're not looking forward to the work day ahead. <laugh>

Speaker 1 00:10:27 So facts. That's

Speaker 2 00:10:28 Something that I've learned to value as well.

Speaker 1 00:10:30 Yeah, no, that's really important and great, great self-awareness and of course, like Manny Pettys are nice, but we know that that's not like the real meaning of, of self care, but of course, like you can indulge and treat yourself. Yes. But we really wanna get more into like the things you were talking about, like your environmental domain, like what's important to you in your space. Yeah. And you talked about your faith, that's, you know, the spiritual domain is also very important that can look very different for different folks depending upon, um, you know, what religion they practice or whatever they believe in. But that's a really important piece too, that you kind of have that domain as well. So you got, got it all going on, Dr. Harring. That's awesome. <laugh> I love it. So now I wanna shift gears a little bit, although I do see a very strong connection between self care and trauma and resilience and all of that. Yeah. So I'm wondering though, if you can tell us a little bit about, um, hearing hope and healing.

Speaker 2 00:11:29 Absolutely. So hearing hope and healing is a trauma coaching business that, um, I kind of officially built, uh, during the pandemic, but the work had already been happening kind of informally. So, um, what I do is I, um, coach trauma survivors and the parents and caregivers of child, um, survivors of trauma. Um, and so I kind of take a, an educational or academic, uh, lens, um, to the bring, I bring that lens to the work. Um, I have, I have found that schools in particular, especially post COVID really are still learning what it looks like to be trauma informed in their work. And I think it is, um, it's underestimated how much, um, trauma impacts learning and how, uh, frequently you will see that in any given circumstance in a classroom, in a school district. Um, and so my passion is in really giving, um, service providers, educators, um, and parents and caregivers, the tools and skills necessary to support students who have survived trauma as well as adults who are now recognizing kind of, um, I think in this, in this time in this generation, there's a lot more, you had mentioned, you know, self-awareness, and I think that adults in general, especially young people have become more self aware than I recall, um, you know, maybe 10, 15, 20 years ago.

Speaker 2 00:12:56 And so really kind of, um, creating an opportunity and a space for that self-awareness to kind of be built upon, um, and to give individuals an opportunity, not to experience, um, clinical therapy, because there's a difference between therapy and coaching, right? Sure. But just having someone to partner with them and walk them along their healing and their recovery journey, um, and just like identifying the things in their life that they notice are impacted by their trauma, whether positive or negative and creating goals, um, and action steps to reach those recovery and healing goals. So that's a little bit about what I do.

Speaker 1 00:13:33 I think that's amazing. And so, so needed. I've done a lot of workshops. You know, I have a passion also with helping folks kind of overcome trauma and working with that and helping schools develop trauma sensitive practices within their classrooms and really coming at their teaching from a trauma sensitive or trauma informed lens. And it's absolutely so important. It's good for all students and we're, you know, right now, especially we're seeing it in my, my full-time position that I do as well as, you know, when I give my workshops, my doctor MC workshops, I'm hearing it from folks that, you know, the students are just showing up with, um, much more challenges in the past. And, you know, right now w --

-- e're all experiencing a collective trauma, the COVID 19 pandemic call, whatever you want. It's a collective trauma everybody's nervous system is a little heightened. We're all a little, um, you know, as we continue to, to navigate this. So this is really important work. And so I kudos to you for kind of taking this on and doing it. And I'm wondering, um, you know, you did mention the difference between coaching versus therapy. I'm wondering if you could just talk a little bit more about that for maybe some folks that aren't sure, um, that might be listening and interested in your work and maybe aren't sure of the differences.

Speaker 2 00:14:47 Yeah, absolutely. So when I think about, um, clinical therapy, I think more of a medical model, right? Like, um, one of, so the, I am a, I am connected to an association of trauma recovery coaches, um, and that's where my, some of my training in trauma coaching comes from. And so one of the examples they use is if, um, if an individual goes to the hospital for, you know, um, a sudden trauma or, um, you know, an emergency, right? The, if you think about the clinical therapist as like your medical provider, right. They can tell you what you need. They might prescribe medication, they might give you a treatment plan and they might take care of kind of a crisis situation in that moment for a period of time. Whereas if you think of your coach as like a friend or, um, a partner, right, that person is kind of there with you long term, kind of doing life with you and kind of teasing out those challenges.

Speaker 2 00:15:41 Um, and it's led by the client, right? The re the coaching client, um, and also you have a partner in life that kind of has that trauma expertise and can walk alongside you and point out the things that you may not necessarily realize that are, do that are as a result of your trauma, or just based on your makeup and your intergenerational trauma, um, and challenges you've had in your past or your biological family members have had. So that's kind of a difference. I like to think of the clinical therapist as like the more medical, psychosocial aspect of the work, and then that trauma, recovery coaching. I think of it as like the more lifestyle kind of partnering goal setting aspect of the work.

Speaker 1 00:16:22 Yeah. Beautiful. Again, just really important work. And I love how you just mentioned and just, I get so excited about this topic. I had kind of forgotten about it, but, um, so I'm throwing you another question that wasn't, uh, wasn't originally on there, but you mentioned like intergenerational, um, trauma yeah. Or trauma being kind of passed down. I've also heard it referred to as the, um, transgenerational transmission of trauma. Um, absolutely. We get into like the epigenetics field and stuff like that. And I'm J I am personally fascinated by this, and I think about it all the time in just my own, my own healing. Um, and I even think about, you know, healing. And so I want, I want you to talk a little bit about this too, but I was just thinking, you know, when I, when I sometimes think about the fact that I earned a PhD, that to me, I mean, that's, you know, quite an accomplishment in general. Um, but then when I think about women in my family, that didn't have opportunities. When I think about my mom being a first generation Italian immigrant, when I think about my grandfather who was illiterate and my father who dropped outta high school, like the fact that two generations later, I was able to, uh, earn a PhD, just that to me, is helping to work on healing. That trauma, you wanna talk a little bit about that kind of your take on generational trauma?

Speaker 2 00:17:40 Absolutely. So, you know, there <laugh> intergenerational trauma is such a huge topic to unpack, right. But one of the things that, um, one of the things that I think about is racial trauma and how, you know, I, I, I don't wanna say I love how COVID has kind of like connected us all, but one of the interesting things about COVID is that no matter who you are, no matter where you're coming from, we all do have that in common. Sure. And I think it's also important to highlight certain populations of folks that have experienced trauma and how that is an additional layer on top of the, um, preexisting trauma, for lack of a better term, um, that folks have experienced. Right. So you think about, you know, you mentioned your family and your parents. My family --

-- is, um, is from Haiti, right. So I am first generation Haitian.

Speaker 2 00:18:31 Yeah. Here in the states. Um, all of my first, second and third cousins have all been born and raised here in the states, but all have, um, parents that have come, uh, in from Haiti. Oh, wow. Um, and so thinking about just Haiti and the Haitian people and what not, um, not all of the story of Haiti is negative. Right. But if you think about the things that get covered on the news and the things that people know of Haiti, there are things that, you know, we may not necessarily know, or even in, or even in our DNA. Um, I was talking to a friend recently who is a nurse practitioner and she works, um, in a big hospital in Boston. And she, I was sharing with her, my story of, um, the challenges I was experiencing during the pandemic medically. And she said, you know, there are so many Haitian women that present like yourself, you know, I'm very short, I'm like five foot, zero <laugh>.

Speaker 2 00:19:24 Um, and, you know, but she said, what's interesting is that among Haitian women in particular, especially those that are, um, you know, kind of shorter, um, thinner, they all have like, um, many of the ones that she has seen have had sky high blood pressure, like stroke level, which is what I experienced. And I didn't even realize I was stroking. And they were like, no, we, you, like, you cannot get driven to the hospital. Your husband can just follow the ambulance. We're gonna put you in one, my goodness, having a stroke. And I'm like, I don't feel anything, you know? Um, and so, you know, we had just kind of talked about like, what are those things historically and why are those, why, why is she seeing that trend in particular, among Haitian women? Um, and so it's, it's so, you know, it's so real and, you know, sometimes you think about, um, you think about the diseases that like, you know, specifically target black men, black women, Latinos, you know, Asian Americans, Asians, like, um, you know, there's so much that could be said about intergenerational trauma that I'm specifically interested in the intergenerational trauma among people, groups that have been historically marginalized, because I think there, uh, there are so many layers to the story that can be told, um, in that sense.

Speaker 2 00:20:36 So, um, and even also with the trauma of immigration, uh, you know, how a group of individuals have made it from their country to the us, was it a pleasant, pleasant experience? Was it an exciting experience? Was it traumatic? Um, and then how do do your descendants carry that story of coming to the us and of immigration or relocation and what that, what does that mean for those, um, after you? Um, and so that's actually a big part of my dissertation work from Leslie. Um, I talked about, um, you know, my, my focus is on hearing the stories and the experiences, the lived experiences of women who've experienced sexual trauma mm-hmm <affirmative> and what they recall about their school experiences. Um, but then it kind of, there was kind of a shift in my research too, where I talked about, Hey, look, a lot of the women in my study talked about their biological mother and like the trauma that she carried.

Speaker 2 00:21:31 Right. Um, and, and so, you know, one of the questions in my defense was if you could kind of take a, a, another path based on your current research, what is something that you would continue to, to look into? And I talked about, um, epigenetics and intergenerational trauma, and I would love to, you know, call the women back and maybe do, um, you know, a group interview and talk about, you know, the stories of their mothers and what is their ear, what are their earliest memories? Um, what do they, or don't they know about their mothers, um, even when they were, um, conceived in their mother's rooms. And, um, just, I I'm just really interested in that because I think it makes a big impact. Um, I listen to a podcast almost weekly, um, and this one woman talks about, um, her adoption story and how even when her mom was pregnant with her, her mom was contemplating abortion.

Speaker 2 00:22:24 Right. And so, regardless of what your politics are on that issue, um, I just think it's really interesting and really quite, um, fascinating that she says that she really struggled with like rejection and abandonment issues, because it's almost like somehow she knew that she wasn't wanted by --

-- her biological mother. Um, and so I, I, you know, talking about my faith and, you know, spirituality, I definitely think, I definitely believe that there are things that go beyond the physical world that we can't see, or we can't touch, but we can feel. Yeah. And I think those things are just as real, um, and significant as the things that, that are tangible to us.

Speaker 1 00:23:00 Yeah. Uh, amazing. And I, I think you've hit it when you said fascinating, like the stuff is fascinating to me and, um, you know, just, I, I think that's a great postdoc study for you truthfully <laugh> yeah. So get going. Yeah, me too. <laugh> for folks that don't know Dr. Harring just finished very recently, so we are, we're already signing her up for her postdoc work. Yep. Yep. But, um, well, it's amazing. Um, and really a really important, you know, emerging area of study for sure.

Speaker 2 00:23:31 Yes, absolutely.

Speaker 1 00:24:14 We've talked a little bit about folks, you know, what everyone's experiencing and how things have just been challenging as we continue to navigate the pandemic and scary things on the news. So I'm wondering if you have any advice for anyone who may be struggling right now.

Speaker 2 00:24:37 So I think the first thing that I would say is, um, and this is, this has been hard for me as well. Try not to focus on what's happening in the now and really try to take a step back and think about historically how we've gotten to this point. Um, and it's very hard to remove oneself from what's what's physically happening presently. Yeah. But that's been something that's kind of helped me through this very trying and challenging time is this is bigger than me. This has been happening before me. I am literally a blip in history. Um, and you know, doing, you know, the self care, um, things that, you know, help you kind of stay calm and put things in perspective, whatever that may be. Um, one of the things that I didn't mention was prayer. Like that's something that really keeps me grounded and keeps me my mind from like spitting out of control. Um, watching the news lately has been, it's been very hard to not feel like depressed and defeated. Um, but just recognizing what are those things that help you feel grounded and not, you know, kind of depersonalizing what's happening, taking care of you, your family, and taking care of others. Um, you know, as cheesy as it may sound to kind of spread the love because, you know, that's, we can't let what's happening right now. Allow us to spiral to the point where we no longer know how to take care of ourselves and those around us.

Speaker 1 00:26:04 Yeah. That's a really important takeaway. The depersonalization of it, cuz it's really hard. I mean, I'm not gonna lie. I work in an elementary school. So, you know, the recent news has been, I have found that to be particularly challenging. Um, not that it's ever not been like, but just this one for some reason is hitting really hard. Um, and it's just, yeah, that kind of though, but take I'm a blip, I'm a blip also like in history. Yeah. And, but having that, um, you know, really being able to take that step back in that depersonalization and you, and you mentioned prayer, I think that that's important. Um, just the way you described it, it sounds like it's a bit of a mindfulness technique for you. Would you say that's accurate?

Speaker 2 00:26:48 Yeah, I would say that it's um, you know, I, so speaking of the spiritual, I think sometimes it can, for some reason it's hard to talk about the spiritual, when it comes to my faith. Right. Like I think that, like we talk about mindfulness, we talk about self care and it's almost like, and this is just my lived experience. I feel like there is such like boldness and like confidence when folks talk about it. But then when, like me as a person of faith and I know like a lot of my friends and family of faith feel like they can't really talk about their faith, so I'm just gonna say it. And I, I hope that's, you know, fine, but you know, yeah. It's, it's, you know, meditating, not for meditation's sake, but really meditating on one's relationship with God. Right. And like what, you know, how your relationship with Jesus has improved or enhanced life around you.

Speaker 2 00:27:42 And I think that for me, um, it's all about love and spreading love. And I think, I know it sounds super cliché, but, um, I've had like strangers pe --

-- ople that I don't know, like come up to me and it's like, that's kind of like, it kind of like unites you, um, in a way. And it kind of gives like a calm and like a perspective of like, we're gonna be, we're gonna be okay. Like God's got us type of thing. And I think that, you know, that's the only thing that I know for me that keeps me anchored because I think without that, it's just easy to kind of slide into like a, like, uh, like a panic almost like, what are we gonna do? Yeah. But it's, it's, it's nice to know. Like, like I said, if people that you don't even know, like when you, you, you say someone says something and it's like, it resonates with you.

Speaker 2 00:28:28 It's like, okay. It's like just a reminder of like, you're a blip, but you're not alone. Right. You know? Um, and I think that's so important. And I think sometimes, um, as, as, as tough as it can be when we experience tragedy together, um, sometimes it, it kind of pushes us closer to our faith. And I think some, sometimes it's necessary if I can say that. Um, and I, I was listening to an, a report on what's been going on lately. And one of the comments that, um, this individual was saying was like, you know, sometimes when we try so hard to push faith and religion and God, and, you know, morals out of the picture, it becomes like, what have we done to where people just literally just are all lot unto themselves, you know? And I was like, I know this is an unpopular opinion, but I think you're kind, I gotta, like, you know, it's, it's just, it's challenging and it's tough, but I, I, I pray my hope is that this kind of brings us closer to a more positive direction. Right. As a society, as a community. Um, because right now, like, no, you know, black, white, no matter who you are, people are like legitimately scared to go to school. Teachers have legit quit on the spot. Yep. And it's like, what is happening? You know? Um, and I, I was walking by a colleague the other day and I asked her how she was doing. And she looked at me kind of shocked. So she's white. And she's like, why are you asking me how I'm doing? I'm like, Nope, you're human. Like I get,

Speaker 1 00:29:56 Oh, goodness. It's not, you're impacted too. <laugh>.

Speaker 2 00:30:00 Yeah. And it just like, kind of like, felt like, oh my gosh, she was like, it's almost like she was feeling like relieved that she was asked how she was doing, because it's almost like because of the racial aspects of what's happening, we've had a hyper focus on how it's happening, how it's, um, impacting people racially. And we're forgetting that everyone is impacted, right. Like teachers of all races are quitting. The school system teachers and students of all races are afraid to go to school. So I think that's also really important to, to recognize as well.

Speaker 1 00:30:29 Yeah, for sure. We're gonna switch a little bit, switch gears and talk about resilience. And we've talked a lot about trauma and, but we also know that trauma doesn't define us and we know that the skill of resilience is something that can be cultivated and, and built upon over time. So I'm wondering, like, what's your definition of resilience and your thoughts on resilience?

Speaker 2 00:30:56 Oh, resilience. I think, I don't know. I think that <laugh>.

Speaker 1 00:31:04 You know, every,

Speaker 2 00:31:06 You open up a kid of words. I think people talk about resilience with this, um, assumption that people just kind of bounce back. The reason why I pause is because I had some struggles, like towards the end of my doctoral studies, because I got, um, you know, when you send in the manuscript, you think you're done and you get it kicked back and you're like, I'm not done yet. So one of the things that I could,

Speaker 1 00:31:31 I do remember that trauma <laugh>

Speaker 2 00:31:33 That trauma, right? One of the things that I got stuck on before I could actually like, like, okay, you're gonna finish. You got, this was this feedback around like, well, you didn't talk about resilience. You and I'm like, but that's not. I think that's also the, the concept of resilience I think is kind of bias, right? Like if you think about, um, one of the, so currently my role in my district is I work in the central office and I help create a more culturally aware and historically accurate curriculum across contents.

Speaker 1 00:32:09 Wow,

Speaker 2 00:32:09 --

-- Cool. So there's a lot of trauma work in that and a lot of unpacking with educators and students around like, okay, why, why this curriculum, right. And like, why are we choosing to tell these stories from this lens and never did deviating from it set up like decades and decades later. And so one of the things that came to mind is this is just for me, in my personal lived experience, I feel that the concept of resilience is kind of bias because what, what that says is they it's giving this assumption of like, yep, you're gonna get through it and you're gonna be successful and you're gonna move forward. And yes, that definitely happened. But I think for me, resilience on a black girl, for example, might seem like survival, right. And like overcoming, but really what's happening is we're learning to live with the trauma in our bodies and we're learning how to mask it and like push through it and keep going just in spite of right.

Speaker 2 00:33:14 Okay. So I don't know for, I don't know for me, I know that everyone is resilient in a sense, right. Like kids are resilient. They, you know, but I think like the older we get, especially as women or women of color in, in dealing with trauma, I don't know that I have a clear answer as to what resilience looks like, because I, I don't think that we are necessarily as a people in a place where we can like truly and genuinely be resilient. Yeah. I think we are surviving. I think we are owning our trauma. I think we are learning about our history and pushing forth in spite of, and hoping that it is life is better for our children and our grandchildren. Yeah. But I, that's something that I'm still working on in my own mind and in my own practice is like, what does resilience look like? And, um, is resilience, what, what the survivor has defined it to be, or is resilience, what the observer or the researcher has defined it as

Speaker 1 00:34:12 Yeah. Very important perspective. For sure. Yeah. And I feel like resilience is one of those terms that gets thrown around a lot. And nobody's really sure exactly what it means, but you hear that like, oh, you can build resilience. Oh, okay. And like, I've, I've done research on like, you know, resilience building practices and, and things like that. And I certainly, you know, we haven't talked about this yet, but we'll, we'll go there right now. You know, when we think about how we measure trauma, um, yeah. With the, like the ACEs score, your adverse childhood experiences, which for our listeners, if you don't know, is, um, uh, you know, as to surveys how we measure it's 10 questions, um, of things that may have happened to you before your 18th birthday, and you get an ACE score as a result of that. So then we think about our resilience score and, you know, in the interest of full disclosure, I have a very high a score, but I AI, which is not great.

Speaker 1 00:35:06 That means I've had several traumatic events before my 18th birthday, but my resilience score is also really high when we look at, like, there is a resilience survey that wasn't necessarily designed to be like the answer to the ACEs, but that's how it's been used. And, you know, when I think about that, it kind of makes sense that I have been able to kind of overcome or bounce back from whatever, but that wasn't easy. <laugh> that wasn't, that wasn't like an automatic or given that, that, that happened. And so I think we have to, you know, know, remember and remind that like there's profound personal growth and turmoil and, and healing and, and really deep work that has to go into kind of, I guess, getting that resilience, um, built up it, isn't just like, oh, cool. Now I've just bounced back. It sounds <laugh> absolutely sounds so easy.

Speaker 2 00:35:57 Right, right.

Speaker 1 00:35:59 Yeah. So that's, that's great. I'm curious, um, like how we should probably should have asked you this earlier, but how did you actually get interested in this, in this work in general?

Speaker 2 00:36:09 So if

Speaker 1 00:36:10 You're willing to share <laugh>

Speaker 2 00:36:11 Of course, of course. So I am a tra a, um, sexual trauma survivor, um, as a child. Um, and so long story short, when I head to schools, to my mom, what was happening, um, we had immediately moved out of our house and we ended up living, um, in a domestic violence shelter, that shelter I actually worked out at, worked at straight out of colleg --

-- e, and I did some work around like trauma, human trafficking, um, and, and all of that. So then when I began my studies at Leslie, I became very, um, um, passionate about education. And so I started teaching in the midst of kind of that transition. I was working, um, in a, with a program that served girls who had been, um, trafficked. And I was a life coach for those girls. And, um, we, our job was to kind of be like a traveling case manager. So, uh, I was outta school, um, um, collaborating with a guidance counselor about one of my clients unfortu there had, there was a video that surfaced about, um, with the, my, this client in particular with her and multiple boys in her class. Oh, the guidance counselor said, well, she'll be fine. You don't have to worry about her. If you watch the video and you look at our facial expressions, she's actually enjoying it. What,

Speaker 1 00:37:37 Oh my God.

Speaker 2 00:37:37 Yeah. And so I was like, I gotta get into education. This is not good <laugh>. And

Speaker 1 00:37:42 So, oh my goodness.

Speaker 2 00:37:44 Yeah. And so, you know, like I said, I be, I went into teaching, um, I went through my graduate studies at Lesley, um, and then kind of like, um, my personal story around like the trauma and like my challenges with like, academics. It was difficult because I don't think people, I think people assumed I was a straight a student all throughout school. I wasn't, I really struggled. Um, but I was compliant. I was well-behaved. My mom was like super strict Asian woman. Like you just like, if your grades were struggling, as long as you don't misbehave in school and like, nobody has an issue with you in school. Like you're, you're fine. Right. <laugh> and so, like, I think a lot of it was, you know, my combined experience between my work and the shelters and the youth programs, my personal experience and my academic experience, and really kind of merging the need for trauma coaching and like cohesive educational supports and services.

Speaker 2 00:38:36 Um, and you know, kind of like retelling accuracy of history sure. In our curriculum and helping, because that's one of the challenges that I noticed is that, um, students who've experienced trauma, it's exacerbated in school when you're learning a curriculum that, where you don't see yourself reflected mm-hmm <affirmative>. And so it's not about centering necessarily all black and brown voices. Right. But it's like, if we're going to tell this story, let's tell it from multiple perspectives and let's be historically accurate as to what actually happened. Yeah. Um, and so that is the perspective that I bring and that's where my passion comes from. I never wanted to feel like I had to let go of my work in education for the sake of trauma and be like a clinician, but I also did not want to fore that, that aspect of the trauma work for just academics. So that's my, my work now is kind of bringing those two worlds together, um, empowering educators, um, empowering survivors, um, and, and really kind of working alongside folks, um, in, in that work.

Speaker 1 00:39:48 Yeah. No really important. And thank you for sharing, um, for sharing that, cuz I think it, um, you know, I think these are the things that make us who we are and how we, you know, when we're kind of destined to wanna help other people and, and be kind of programmed to be those, um, those guiding lights that we can, um, absolutely. Like I love sharing and like I'll be painfully open to people until like tell it this things I don't even wanna know me too. Just, just cuz of like, well there's no sense, like I'm not gonna not share my story when it could help someone else. Absolutely. Because why would I withhold that information if I could help someone? And I know that, you know, that took, that took a long time to get there and be willing to talk about certainly, but now, um, you know, it's powerful and it, it also, I mean, I don't know if you feel like this, but it, it continues to help me heal as well.

Speaker 2 00:40:40 So definitely

Speaker 1 00:40:41 It's kind of cathartic in a way, um, you know, when we are open and willing to be vulnerable. So, um, thank you for the work that you're doing. So thank you, you know, last, but certainly not least I wanna know where folks can find you. So if you wanna give us yes. All your info and how we can connect with you.

Speaker 2 00:41:00 Absolute --

-- ly. So you can find me at Herring hope and healing, all one word herring, hope and healing@gmail.com, it's herring like the fish hope and healing@gmail.com. Um, my website is H H H hub.com. So hearing hope and healing three HS plus a fourth H ub.com. Awesome. Um, and that's the website, so

Speaker 1 00:41:24 Great. And we'll make sure that, um, all that's in the episode notes and links and whatnot. So folks know how to connect with you, cuz this is important. Um, important work we'll maybe throw some other resources in there as well for folks to be able to connect with you. Um, and yeah, thank you so much Dr. Harring for being with us today on podcast.

Speaker 1 00:41:53 That was so great. There was so much really good information shared during our conversation. And when we talk about trauma and resilience, there's just so much to unpack and multiple perspectives to consider. And remember, as I always say, trauma does not define you nor can someone else tell you what is or is not traumatic. I will say Dr. Harring really got me thinking about the idea of resilience. I'm going to dig a little bit deeper into the research of resilience and really who gets to define that as Dr. Harring said the victim or the observer, I guess resilience is a bit of a double edged sword. Like we want to be resilient, but we were only defined as resilient when we have been faced with incredible hardships or traumatic experiences. Resilience is born out of discomfort and challenge. It's like saying whatever doesn't kill you makes you stronger, but wouldn't it be nice if we did not have to have those experiences and be tested in that way in the first place, is resilience just a slippery slope towards toxic positivity?

Speaker 1 00:43:00 Hmm, definitely something to think more about the work Dr. Harring is doing is very, very important and it was so great to chat with her today. Thanks for listening to this episode. New episodes drop biweekly on Wednesdays. Remember to subscribe and rate this podcast on your preferred player. The ratings help us grow and share the message of selfcare. If you have comments, suggestions, or questions, reach out directly by emailing podcast at Dr. MC selfcare.com. That's Dr. MC selfcare.com and come join the cast party at Dr. MCs self care cabaret on Facebook and Instagram at Dr. MC selfcare or my website, Dr. MC selfcare.com. Be sure to like subscribe and love me across all my social media platforms for the most up to date information on self care. See you next time. Stay well and do good.

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