Episode 592: Dr. Rachel Yehuda on How Trauma and Healing Cross Generations
Child: Welcome to my Mommy’s podcast.

This episode is brought to you by Timeline Nutrition. We’ve all heard of probiotics and probably also prebiotics but have you heard of postbiotics? There are several major reasons these are important and thanks to emerging research, I’ve been experimenting with them. We know that maintaining muscle mass as we get older is critically important to longevity and enduring good health. In fact, it is one of the biggest predictors of longevity and one of the reasons I lift weights regularly and keep an eye on metrics like grip strength. Postbiotics are the active nutrients your body makes during digestion, and they are an emerging driver of this for a couple of reasons. One major reason is that certain postbiotics support mitophagy or the flushing out of old damaged mitochondria, which is really critical in the aging equation. The best compound I’ve found to support this is called Urolithin A and I was super intrigued when I found it. It's derived from pomegranate but it's very hard, practically impossible, to eat or drink enough pomegranate to get the scientifically proven therapeutic dose.

Urolithin A is one of the first postbiotics shown to have major health benefits and has become available to all of us. It upgrades your body's cellular power grid - giving your body the energy it needs to optimize. And clinical studies have shown that 500mg of Urolithin A alone significantly increases muscle strength and endurance with no other change in lifestyle. This is where a product called Mitopure from Timeline Nutrition comes in. They’ve created 3 ways to get your daily 500mg dose of Urolithin A in their product called Mitopure. They've got a delicious vanilla protein powder that combines muscle building protein with the cellular energy of Mitopure. They have a berry powder that easily mixes into smoothies or just about any drink. And finally soft gels for travel or you can use them everyday if you prefer. Personally, I love the starter pack that lets you try all three forms and see which one you like the most. Mitopure is the first product to offer a precise dose of Urolithin A to upgrade mitochondria function, increase cellular energy and improve muscle strength and endurance. Right now, Timeline is offering 10% off your first order of Mitopure. Go to timelinenutrition.com/WELLNESSMAMA and use code WELLNESSMAMA to get 10% off your order.

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Katie: Hello and welcome to "The Wellness Mama Podcast.” I'm Katie from wellnessmama.com. And this episode I think is extremely profound, especially for moms. I'm here with Dr. Rachel Yehuda, who's a PhD and an endowed professor of psychiatry and neuroscience of trauma. She's also the director of mental health at the James A. Peters Veterans Affairs Medical Centre, and a recognized leader in the field of traumatic stress studies, PTSD, and intergenerational trauma, which we talk a lot about today. Her research on cortisol and epigenetic mechanisms has revolutionized our understanding of neurobiology and treatment of PTSD.
In 2019, she was elected to the National Academy of Medicine for her seminal contributions to understanding the psychological and biological impact of traumatic stress. And in 2020, she established and now directs the Center for Psychedelic Psychotherapy and Trauma Research. I was so excited to talk to her because I think this is a topic that we are starting to understand a lot more than we have in the past, and she is on the front lines of understanding it.

We talk a lot about what intergenerational trauma is and how it impacts our families. What epigenetics is and what this means, and how it impacts our biology. How more than just genes are transmitted from our parents and relatives. And the way that we're seeing, in studies, the physical way that trauma passes down. What studies are showing in this? How trauma actually causes changes in genes that pass on to future generations. What she learned from studying children of Holocaust survivors and the epigenetic changes that they saw. How the science of epigenetics helps us understand enduring effects of trauma and why trauma is, in some ways, the ultimate learning experience, and how to see the positive parts as well.

We talk about how the body keeps the score and what the body is trying to tell us when we have body symptoms. Ways to actually start and undo and heal the trauma, even generational trauma. How often helping others who are going through similar pain can be very healing. Things we can do with our kids to help foster inner strength and healing. She talks, actually, a lot about this from a research perspective and from a mom and now, grandmother perspective.

And some of her really simple tips, I think are absolutely life-changing. In small changes, we can change how we speak to and model for our kids, especially when they're going through something difficult. And we also briefly touch on her work with psychedelics and trauma therapy, and what she sees as the future here. She is, like I said, one of the leaders of research in this area, that I think is increasingly important. And I think moms, especially, we have a very unique ability to create change in this area since we are very much hands-on with the next generation, and can help undo and repattern some of these things in ourselves and also give our kids the tools to do the same. So, without any further wait, I am so excited to introduce you to Dr. Rachel Yehuda. Dr. Yehuda, welcome, and thanks so much for being here.

Rachel: Oh, thank you very much for having me on your podcast.

Katie: Well, I'm very excited to learn from you today. I've followed your work online for a while, and I think a lot of the work you're doing is so critically important in today's world, and I think especially to moms. Because you've done a lot of work in the intergenerational trauma space, and I think moms have a very unique hands-on ability to kind of start to unwind some of those things. So to start broad, maybe for people who aren't as familiar with that term that I just used, can you walk us through a couple of those terms specifically intergenerational trauma and epigenetics because I think maybe people have heard these words in passing, but I think a good baseline understanding is important for this conversation.

Rachel: Oh, sure. So intergenerational trauma is a general term. It's a big term that is mostly used to capture this idea that the kinds of things that might happen in one generation to your parents, let's say, might have effects that linger to the second generation. Some people take a much more broad view of this and say, "Well, even things that happen to one's grandparents, or even down the line further than that will have impact." And so the whole idea here is that it's not just the genes that we have from our parents that are transmitted to us and that we have to live with because that's the way that genetics works, but it's also the experiences that happen that may play a very profound role in who we are.
And I think the concept resonates with people because the histories of our families are very important, not just the genes that we have that determine our traits and our characteristics, but the things that happen in our biographies, in our parents' biographies, and in our ancestral lines matter to us, and they make us who we are today. Now, you asked about epigenetics. So I used the word genetics already, and genetics refers to the genes that we are given. We get a set of 23 chromosomes from our mothers and 23 from our fathers, and that usually makes up our unique fingerprint.

But in addition to our genes, there are chemicals that sit in the DNA complex that are in our cells that can regulate how the genes are expressed. So epigenetics explains why all of our genes don't fire at once, right? So genes that are activated depends on what cells they're in, what kind of cells they're in, what stage in development we're in, but also these genes can be modulated based on experiences. And so epigenetics includes the study of how experience can regulate genes, and the reason that this is so important to people is that the things we do and the environments that we live in and the things that happen to us really matter in terms of affecting how our bodies function.

Katie: Yeah, this was so fascinating when I started to understand it, because like you said, I think we have a baseline understanding of getting our genes from our parents, but it blew my mind that we actually are getting potentially, like, inherited memories and traumas from our parents. And it seems like there actually is a physical component to this as well, right? This has actually, like, been decently well studied now, and we have, from what I've seen, at least mouse models that really kind of showed this process happening, and how that actually has a physical effect. Can you elaborate a little bit more on those? Because I think that part was hard for me to grasp at first, of how actually these things are creating a genetic pathway that's changing through these generations.

Rachel: Well, I'm really glad that you talked about mouse models because most of the work that we have seen that really impacts on this discussion has come from studies in rodents where you can easily manipulate things. When you study things in people, it's very hard. People are very complicated and a lot of things happen to them, and it's often very hard to parse out whether somebody is feeling something because of something that happened to them, or something that happened to their parents, or something like that, or those kinds of things.

You talked about inherited memories. Now, we don't actually know whether memories are inherited, but I'll tell you an interesting thing about something that happens in a mouse model, and that is that you can train a mouse to be afraid of a cherry blossom. And how do you do that? Well, you compare a cherry blossom with an electric shock, and before too long, the mouse will be afraid of the odor of the cherry blossom even if it's not presented with the electric shock. And that's fear conditioning, and it's something we've known about for a long time.

Now, what's very interesting about a mouse that has been conditioned to fear a cherry blossom is that there are a series of epigenetic changes that occur in response to this that can be observed in the mouse brain and in the mouse sperm. Now, if that mouse is mated with a female, the male mouse's offspring will also inexplicably be afraid of cherry blossoms even though that offspring hasn't been shocked, and will exhibit many similar changes, epigenetic changes in the brain and sperm. And even in the third generation, there are some epigenetic changes that are still lingering. So that's a very powerful demonstration. That's something that happened in generation one, had effects that were so important that they were present in generation two.
Katie: That's so, so fascinating to me, and it makes sense, mouse studies would be easier and also take less time than a multi-generational human study, which would be pretty comprehensive and difficult to follow for that long. And you have done work in humans as well though from what I've read in studying children of Holocaust survivors and also of women who were pregnant at 9/11 if I'm remembering that right. Did you see some of these same things playing out in humans?

Rachel: Yes. And I'm really glad that you're making that distinction between the mouse studies and the human studies because our lab wasn't involved in the mouse studies. This is the excellent work that has taken place at Emory University by Dias and Ressler, and it's really amazing work. We made observations in adult children of Holocaust survivors. We were able to show some epigenetic changes in adult offspring that seemed to be associated with whether their parent had PTSD or the age at which their mothers were exposed to the Holocaust.

Now, again, as I said earlier, it's very hard to attribute causality to these kinds of findings because by the time you're looking at an offspring who's in their 40s or 50s, a lot of things have happened in their own lives. And so taking one cross-sectional point in time really doesn't provide an entire overview of what has happened in their lives. But what really struck us when we studied the adult children of Holocaust survivors was how many of them attributed the things that they did, and the ways that they felt, and their basic mental health symptoms to the fact that their parents had survived the Holocaust.

And they were able to provide a very interesting and balanced perspective on this. It wasn't that they felt they had inherited everything in a completely negative way, but that they definitely felt that the Holocaust had left an imprint also on them. And to me, that was such an interesting statement. And at the time that I was studying adult children of Holocaust survivors, which was in the late '90s, people were not looking at epigenetics in neuroscience or psychiatry. So there wasn't really a language for what was happening. There wasn't really a way to understand how even stress effects that happened in the first generation can be long-lasting because until pretty recently in science, the prevailing paradigm for explaining the effects of stress was fight or flight.

And the idea has always been that you can have a stress response while you're responding to stress, but as soon as the stressor goes away, as soon as you can make a response or change your environment, your body should begin a natural healing process. But, of course, the concept of PTSD is one that suggests not so fast. The war could be over, the assault could be over, but you can still be feeling effects of things that happened a long time ago. And the science of epigenetics is really what helped us understand enduring effects. And I think that that's why people have gotten so interested in it because deep down, we all know that while time does heal many wounds and while the effect of an acute trauma don't persist, there are effects that actually do stay with us. And so there's got to be something beyond the fight or flight response that helps us understand why events transform us. And now there's even this idea that they're not just going to transform us, they may reach and have impact into the next generation.

Katie: So fascinating. And it seems to touch on that idea, you know, the often debated nature versus nurture, seems like more and more the answer to that question is both/and, that it's not an either/or, and that trying to separate those is largely probably impossible. But I like that you said also that the interpretations of these children, it wasn't all bad, which makes me wonder also, can positive traits be passed on? In other words, instead of just trauma, can things like resilience or the kind of evolution to survive these things, can that also be passed on intergenerationally?
Rachel: I think that's the most important message of this whole work, that what you do matters, whether it's in the framework of an abuse or in the framework of something positive. If environmental influences can impact us, then what we have to do is make sure that there are positive environmental impacts on our children so that they can develop in a positive way. And that's really very important. And responding to adversity is something that we all try to teach our children.

The challenge for us as parents is that we don't actually want to expose our children to adversity in order to teach them the lessons from it. Fortunately, we don't usually have to expose them to adversity. The universe presents enough challenges as it is. And our job is really not to get very upset when the universe does present its challenges, but to help model for our children how to behave when it does. And so one of the important lessons that I learned from this intergenerational work is that it is very possible that parents who survived the Holocaust were somehow trying to teach their children about what can go wrong and what survival skills might be needed in the case of those emergencies.

Of course, we hope that our children will never be exposed to adversities like the Holocaust. But let's say we were exposed, how can we kind of omit that from what we teach our children in a funny way? And even if these biologic changes and the psychologic changes are not happening wittingly, right? Maybe they're happening subconsciously, they're still the way that we have of transmitting important knowledge and information because to not transmit it might be a very glaring omission.

Katie: Yeah. It's so important, I think, and I definitely do want to go deep on the what we can do about it and the how to heal, especially for moms. Because like I said, I think moms hold a unique power to kind of interrupt that intergenerational trauma that can be passed on. But before we do, I also want to talk a little bit about the idea of kind of the body storing trauma. Because I know reading for me, the body keeps the score and understanding what now seems so intuitive but at that point didn't seem obvious to me that there is very much a physical link. Like, when we have trauma, very often, it can show up in the body.

Like, I pretty much largely ignored that possibility for a long time, and then learning to understand that was a big step for me in healing. I know that you've talked a little bit about this as well, but can you kind of just explain it in a general sense, and any specifics you find helpful of how trauma can actually exhibit in the body because you talked about how it can pass on through genes? So it seems like there is very much a physical element here as well, and I am hearing from more and more women who are having experiences of this.

Rachel: Yeah. Thank you for that question. I mean, when you think about what trauma is, right, it's the ultimate learning experience, right? You're presented with something that is so horrific, and maybe it's something you never anticipated, you have to mount a response to it in order to survive. And you also in a funny way have to not forget about it because what if it happens again? What would be the cues that remind you that it's coming? And that's what hyper-vigilance is at its core. It's the body remembering or getting that feeling again from a traumatic reminder that they may not be safe.

You know, if you don't know that your body might be giving you a reminder in an attempt to warn you or an attempt to help you, then this may be a very inconvenient symptom for your body to have because you don't understand why you are physiologically aroused. So, yes, the purpose of a trauma is to change you in an enduring way by giving you a memory, by giving you a memory of what happened so that next time, you might be able to respond in a different way. The problem with traumatic memories is that sometimes they can be really overwhelming, and sometimes we're not in environments that are conducive to remembering things and acting in our best interest in the most positive way.
Sometimes we get triggers that make us feel very unsettled. And rather than say, "Oh, okay, this is my body trying to remind me of a way to save myself," we can say, "Oh, no, this is going to happen again, and I'm going to be stuck in a very difficult place." So, again, understanding that your body does hold memories is a very important first start. The next step is when you're feeling something in your body, to try to feel it and to identify it, and not ignore it and not fight it. Why am I feeling anxious? Why am I feeling upset? What just happened? What just happened to me? What does it remind me of? Am I in danger? Is my body trying to tell me something? And not ignore those signs, because that is when I think people start to really get very overwhelmed by the traumatic reminders and the symptoms that the body is trying to express.

Katie: That seems like such a helpful reframe too, being able to move into the mindset of that perhaps it's a lesson, and rather than maybe what seems intuitive, just resistance to the negativity of the experience. Looking at it as something trying to teach us. I know that was helpful for me when I was working through what I now know was PTSD, of rather than fighting or kind of shunting the emotion or trying to ignore it, I would give it space to exist without judging it, and then actually thank it for keeping me safe. Acknowledge that it was something that was helping me, but also tell it kind of metaphorically like, "I don't need you to do that anymore. Thank you for keeping me safe, but I don't need you to do that anymore."

Rachel: I mean, it's easier said than done. There's no question about it, and for many people, it takes a lot of therapy to be able to get there. And it's very difficult to confront distressing experiences from the past. A lot of times, we feel that it's easier to try to put them away, to try to not deal with them, try not think about it. But what happens is because your body does carry the memory, if you don't think about it or you try very actively to pretend it didn't happen, then you're even more far removed from your body's physical sensations. And that can cause a whole set of other problems where you become very disconnected, where your mind becomes very disconnected from your body.

And so really, you know, the reframing of post-traumatic symptoms as your body requiring something of you or asking something of you, or asking for a response from you, I mean, I think it can be helpful, but it can also be work too because people don't like to be reminded of past pain. Especially since a lot of the messages we get in society are live in the moment, which, you know, it's a wonderful message, living in the moment. What I think living in the moment is optimally for is, like, not being at the next moment, right? Concentrate on the moment you're having now without thinking of your to-do list and short-changing the current moment.

But sometimes it's very difficult to not be in the past also, or to not bring the past into the current moment. So it's a very interesting thing. You have to be future-oriented a little bit in order to survive a traumatic experience in that you have to believe that there's a future possible for you that will provide you a relief from the past. So it's a very interesting challenge for trauma survivors because if you stay too present-focused, you know, you'll deny the past, and that probably won't help you with the future. You want to be future-oriented, but you don't want to short-change the present. So all of these things are things I think that we all struggle with, especially moms who have a lot that they have to do, and they often don't take the time to really be in the present moment because of all the anxiety of whether the future moments will get done as they need to get done.

Katie: So true. And I'm glad you brought up the difficulty of often doing that work because in full transparency, I don't want to make it seem like that was in any way an overnight or easy process for me. I think I was expert-level avoidant of all of those things for a couple decades, and actually starting to unpack them with some of the more difficult work I've ever done in my life, for sure, very worthwhile, but by no means easy. But I think that does bring us to the question of sort of, how do we heal? How do we begin to unpack these things?
Especially, aware of how we talked about this being passed on in multiple different ways to our children. Is it possible to kind of undo that damage or to rewrite it in a more positive way for future generations?

Rachel: Yes. I'm full of hope that we can undo a lot of the damage or use the damage in order to kind of recruit new learning strategies and new opportunities for ourselves. I wouldn't be doing what I do if I didn't think that that was not only possible, but just necessary for people to be able to do. Now, how you do that, you know, there are a lot of different opinions on that. Increasingly, one of the things I'm kind of less interested in is suppressing symptoms, whether it'd be through medication or through suppressing thoughts about how you're feeling. And I'm more interested in seeing people really sit with their traumatic experiences and kind of make some sense or meaning out of them, and try to acknowledge and respect that those things happened and that they were very important, and that they had an impact.

A very profound step that I've seen so many people take is to be able to use past diversity in order to help other people or in order to find meaning and purpose in their lives. Again, by no means easy, but very satisfying and very rewarding for people to find a meaning in their suffering. And people who can do that usually end up in a really good place and end up often helping other people. You know, I think for moms… You told me this is a podcast mostly for moms. You know, a lot of people, as their children grow up and leave the house, or they look at their children as adults starting their own families can have such a great deal of satisfaction in knowing that they were able to just improve their lives or give them the tools that they need. Often, this kind of work comes from sharing life lessons of their own struggles, hopefully not in a traumatizing way, but being able to kind of impart the lessons of struggling, and solving problems. And then watching as your child internalizes these ideas that you've shared with them. One of my greatest joys these days is watching my daughter be a new mother, you know, for about a year and a half now, my first grandchild. And just sitting back and saying, "Wow, how did she know how to do that? How does she know how to allow her child to kind of work things out and to struggle and to develop?"

And it's something that I missed when I was raising my own children. I missed all the implicit knowledge that you provide. When you say to a child who is having a bad day or who's having a bad experience in school, "I know you'll be able to work it out," as opposed to getting very caught up in the anxiety that your child is feeling. So I think that these are things that even on a very small level, it's not a small level at all, but sometimes we feel we're not making very big dents in the universe. But just the idea of being able to calmly impart wisdom to the next generation so that they can have the skills that they need to cope with lives, it's a very big deal and a very important thing to be able to do.

Katie: Yeah. That idea of looking back and realizing maybe when they're older, that the little things were actually the big things all along. That's such a beautiful idea.

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And on that note, I'd love to hear anything from the research side or from your own experience as a mom that you feel like are especially helpful. Like, that tip you gave, I love that, of, "I know you can get through this," giving them that kind of more resilience mindset. And I think a lot as a mom about imparting a growth mindset in them and also realizing probably the best thing I can do is model this, and that working on my own healing will have positive effects on them. And to your point, sharing transparently, not in a scary way, but sharing transparently what I've been through also gives them an example of being able to overcome that. But are there any other kind of practical steps that we can in our languaging or in our modeling use with our kids at various ages to help them start to develop those foundational skills that at least for me, I had to learn as an adult?

Rachel: Yeah. That's a really good question, and I've really been reflecting on it. Especially, you can't help but reflect on it at this stage of life when you see the next generation coming afterwards. But one thing I kind of realized very explicitly after 9/11 when everybody was asking me how to deal with 9/11 as a parent, and it was very dependent on the age your child was, how are you going to explain this? And I realized that a very big part of how well your child is going to do at any age has to do with how you are doing with adversity, how you are modeling it. If you channel that you can handle something, your child will be able to do it. But the other really important and concrete thing I learned was that we should encourage negative emotions rather than suppress them.

One concrete thing was that I once saw a mom on a playground and her child had just, you know, fallen off of the swings. Child really hurt himself, and he was crying. Must have been about two or three years old. And the
mom picks up the child and she says, "Tommy, stop crying, please stop crying. Stop crying, stop crying." And I looked at that and I understood why the mother wanted the child to stop crying, but it struck me that the mother didn't want the child to stop crying. The mother wanted the child to stop having pain. But if the child is having pain because the child just fell off of the swings, the right response is, "Okay, let it out. I know it hurts. You got a big owie. I know that it really, really hurts. Come on. Let it out, let it out. It'll be better in a few minutes."

And then in a few minutes, check back, "Is it better now?" Because, of course, it is going to be better in a few minutes. And so allowing the child's negative response, and then checking in with the child so that the child becomes aware that the state has changed, you've just done a tremendous amount to help the child emotionally regulate. So the child really feels like, "Okay. It's okay to have a negative state following a terrible experience. This is going to pass." And then even telling the child, "Or maybe let's go get ice cream. Do you think that will make it better?" So that gives the child some tools or some way of understanding that after you have an adverse experience, you can have a compensatory experience to help make things better. But in that way, you're giving a child the idea, not that bad things will never happen, that's not a good life lesson for children.

Not that you have to suppress your emotional response, also not a good life lesson for a child, but that you can let it out, and that the state will change, that things will pass. Eventually, things will be okay. And this very little example is actually a profound example because so many times, we want to regulate the way our children feel. We say don't get angry. Well, what if there's a reason to be angry? It's I think much better parenting to inquire about the source of the anger. Like, "Why are you so angry?" Like, "What's going on?" And really helping the child just with the concept that states change. That you can be angry one moment and then not angry at the next moment. And then from that place of non-anger, you might be able to have a different reaction.

So, for example, if your child gets very angry at you, a child is more likely to be able to apologize and reflect than perhaps not showing the best response to you, than from the place where they're angry or they have to suppress their emotions. I think a lot of times we ask children to suppress too much because we can handle what they're bringing to us. And, yeah, eventually, the child will do as instructed, but maybe at great personal cost. And I think that that is what also happened from an intergenerational perspective with children of Holocaust survivors, that they came to learn that their emotional reactions are perhaps too intense for their parents to deal with. And so they kind of learned to bottle them up, or they began to learn that their role was kind of to make things better for their parents as opposed to having their parents teach them how to make things better for themselves, and so they carried with them a lot of these non-specific feelings.

So, you know, it's okay to lose your cool. We all do. It's okay to be overwhelmed. A lot of us are overwhelmed a lot, but being able to model for your child how to kind of navigate those very intense emotional states, even imperfectly, however imperfectly, but then go back and self-correct can be really important. You know, if you do lose your temper, a hug is probably a really good way to fix it, or just an acknowledgment of, "I really shouldn't have done that. I was wrong to lose my temper at you." can go a very, very long way, because if you don't do that, the child will internalize a feeling of their badness, a feeling that they deserve suffering, that they deserve people's wrath, and they'll grow up to be a very different adult than when you expect in the self-worth. Also, you know, people lose their cool. That's probably a very great thing to be able to impart that people do lose their cools, and then if there's a way to go back and fix that, that makes sense.

Katie: Yeah. And, yeah, that feels like a very profound and important lesson to teach our kids and to model for our kids. And something I learned in my own journey as well, I think I did internalize some of those things early
in childhood of like, "Oh, my emotions are too overwhelming," or, "Anger is not okay or crying is bad." And without even really realizing that I internalized those things. And actually in therapy as an adult, one of my therapists had me basically throw a temper tantrum, which I thought was ridiculous at first, but she was like, "You've been bottling up emotions for over 20 years." And even when she first tried to get me to yell, it was just like, "Ah." Like, there was no yell that came out. And it was actually, I think, very helpful somatic thing for me to get back in touch with my body, but it was a really good lesson for me and with my kids.

I don't even try to like shut down temper tantrums. We talk a lot, especially when they're not in that state about the difference between our feelings and our emotions, which are very valid. And let's talk about them, and there's a place for those emotions and the actions that you take based on those emotions are still your choice, even if you're angry. And so I try to give them the tools to separate out. It's fine to feel angry, it's fine to even get upset. It's not fine to hurt someone else when I get upset or to hit my sister, but it's fine to feel that. Because I remembered that feeling of that being shut down for me as a kid.

And I think that is such a helpful tool that you just explained, and it really like tied into all of the psychological long-term effects of that. And I love that you also tied it into intergenerational stuff, and how maybe even small stuff like that that we can do every day help sort of unpattern some of those maybe learned responses that weren't theirs to begin with.

Rachel: Yeah. I mean, we don't spend, I think, too much time analyzing how our responses come from our families of origin, or from reactions to our families of origin. And really, there can be two very different kinds of narratives. One is that you recreate what you had at home. And even if you've told yourself, "I'll never be that way," you know, you wake up one morning and you realize, "I'm my mother," right? But the other pattern is that you actually very successfully just get rid of everything. And I'm not sure that that's the best strategy too because in every kind of upbringing, there are the lessons that you have, or that you might, you know, want to preserve or understand or analyze.

And, yes, some of us grow up in very dysfunctional homes, and it's important to then understand that that is a dysfunctional home and to leave it or to not carry it forward. But you have to do a little bit of work in kind of evaluating that or reaching someplace of compassion for the people that just didn't have it together enough to give you what you needed. That's a very difficult thing to do, but if you don't do it, you carry around a lot of resentment that doesn't serve you. So sometimes the people that parent us really are too distracted or broken to give us what we need.

If we can sit with that for a minute, then maybe we won't have to carry that forward to our own children. Maybe we can say, "You know what? I'm going to stop that cycle. I feel a little broken, but I'm going to try to find a place where I don't break you because I am broken." And if we can do that, then that's helpful. Or just the idea of listening as opposed to trying to correct. A lot of parents feel their job is to shape their child, which means stamping out things that they don't like, they don't want to see. "We don't do that in this house, or we don't talk like that in this house."

You know, that's one type of parenting that I understand. And another type of parenting is, "Where did that come from?" Right? Like, "I would never have expected hearing something like that from you. You didn't get that from me. Where did you get that from?" And really, I guess maintaining a certain level of curiosity about it. But knowing that the door is never going to be slammed shut on you as a child, that there's always going to be a way for you to have communication even if what you have to say is difficult. You know, you are modeling your child's adulthood by the way you respond, that's how they're going to respond to their future boss who's unreasonable, or who gives them a hard time, or maybe their future spouse or significant other, or their future
child. So when you get mad at your child, the best thing to do is think about your future grandchild, and whether you want that to impact them. Somehow thinking about your future grandchildren may change the way that you react to your child.

Katie: That's a great exercise. I haven't thought to do that, but I will definitely give that a try. And another question I'm curious your take on, although I feel it could probably be an entire episode all and of itself is there's not a lot of research happening on the role of psychedelics in trauma therapy and seemingly some pretty astounding results in some of these clinical trials that are happening. I'm curious what you're seeing from your end, and if that's something that you in general think can be a really good tool.

Rachel: Yeah. So we opened up a psychedelic research center last year, and we're very, very interested in the potential for psychedelic-assisted psychotherapy for healing. Lots of things, lots of mental health issues, traumas, complex traumas, intergenerational traumas, addiction, depression, anxiety, but we're just getting started. And these are not tools that are broadly available yet. We do have plans to do a clinical trial using MDMA-assisted psychotherapy for intergenerational trauma. And the joke I like to make about that is that intergenerational trauma only applies to people who, you know, have parents.

So it could be a very widespread thing who might be able to benefit from doing psychedelic-assisted psychotherapy. But we're just getting started. It's definitely something to watch in the future. I would not recommend that people experiment with mushrooms on their own, especially if they have mental health symptoms without the aid of a therapist or a therapeutic container because psychedelics can bring up a lot of stuff. And if you've decided to do this on your own, you might not really be able to deal with all of the things that come about. But I think we're entering a very near future when psychedelic tools will be available just as therapy is available to just about anybody who wants it. So I'm very, very excited about that.

Katie: And I know you have also written and talked online about a lot of the different areas we've talked about today, and so there's much more people can learn from you. I will make sure I put those links in the show notes for people who want to continue to follow your work like I do. And a couple last wrap-up questions, and I want to get to the end quickly to respect your time. I know how busy you are. But the first thing, if there is a book or number of books that have really profoundly impacted you personally, and if so, what they are and why.

Rachel: Oh, gosh, there's so many books that have impacted me personally. I actually wrote a list of the 10 books that have been most impactful. I did that for a website and I can put that on your show notes if you would like. The problem with me is that when I read things, they... Everything I read impacts me for that week very, very strongly, and then it becomes very hard to disentangle. I also am somebody that I will just admit reads an awful lot of fiction. So it's hard to explain why I'm so impacted by fiction. And I know that as a young mother, it was just a way for me to escape into somebody else's life in a very powerful way, and it didn't even matter the nature of the fiction. The book that I just finished reading is "Beauty Queen of Jerusalem," which I just loved so much. I just literally finished reading it yesterday.

But I think the idea of going into someone's head can be very powerful because, especially if you monitor your own reaction to what you're reading, you can learn a lot about yourself. And so I think reading when you're trying to raise children is wonderful. You can just get in bed and do it for a little while, and it can really take you away in ways that you can't necessarily go away as a mother who's very tied down. So reading is just such an amazing gift, and I will make my list available too if you like.
Katie: That would be wonderful. I'll put that link for you guys listening in the show notes, wellnessmama.fm, as well. And lastly, any parting advice for all the moms listening today that could be related to something we've talked about or entirely unrelated?

Rachel: No. I don't know if I have advice for people. I think the only really important thing to say is that what you do matters. And so never think that your action or inaction doesn't matter because you don't see the effects of it immediately. That staying the course and really understanding that we impact our families by just our existence, the way we are in little things and big things is going to have deep repercussions. And when we understand that what we do matters, then our children understand that what they do matters. And so we can really make a very beautiful world together if we all really internalized how powerful we are to make good changes and also to contribute to bad changes, and really take responsibility for that.

Katie: I think that's a perfect place to wrap up for today. Thank you so much for your time and especially for all of the work you're doing. It's obviously a very difficult area of research. I'm sure you've encountered many really difficult things in your work, and I know many, many, many people benefit from the work that you do. So thank you so much, and thank you for being here today.

Rachel: Thank you for having me.

Katie: And thanks as always to all of you for listening and sharing your most valuable assets, your time, your energy, and your attention with us today. We're both so grateful that you did, and I hope that you will join me again on the next episode of "The Wellness Mama Podcast."

If you're enjoying these interviews, would you please take two minutes to leave a rating or review on iTunes for me? Doing this helps more people to find the podcast, which means even more moms and families could benefit from the information. I really appreciate your time, and thanks as always for listening.