CASAT Podcast Network

Welcome to season two of CASAT Conversations.

I am your host, Heather Haslem.

This season we will explore the timely and complex topic of resilience for healthcare providers.

Within each conversation, you will hear from experts, clinicians and providers who will explore and share the latest research, best practices and applications for how to be resilient.

Please enjoy today's conversation.

Today we are excited to welcome Joshua Wenner.

Joshua is an entrepreneur, veteran filmmaker and emotional resilience expert.

He has spent the last 20 years growing companies maximizing human potential and is the founder of Emotional Resilience Training (ERT).

His curriculum and frameworks are being used to help first responders, veterans and professionals who deal with grief loss and trauma to reintegrate back into life.

He is also the co founder of K4 men and Valor Resiliency.

Welcome Joshua.

We are so happy to have you here today.

Hey thanks so much Heather.

I'm really, really grateful and excited to be here as well.

So as we get started, please tell us a little bit about your background and how you got into this work of resiliency.

Yeah, happy to, you know, I grew up in what I would call more warrior culture where athletics, I was in the military and a lot of my training was about disassociating from emotion to get the job done right.

So very similar to healthcare workers or anybody in this space who put the armor on to go handle their job, You disassociate from emotion and you go get the job done and so I also grew up hunting and fishing very similar type of culture and um I think I had a lot of death in high school.

I navigated it really well was the guy that was always the calm, cool collect guy to say, hey, let's handle the situation and make it happen.

And um I always looked at myself as resilient because my definition used to be a resilience is how quick can you get back up and get on the field after going through something.

And it wasn't until 2007.

My brother came to see me for Christmas and I got a little knock at the door and he came to visit and he told me that he had been using drugs and shooting needles and he needed to come live with me at the time.

I was down in Manhattan beach and he said if I don't come live with you, uh if I go back to reno I'm gonna die of an addiction of a drug overdose.

And I just started a company, I'd maxed out credit cards, had computers all over my living room and um I looked at him kind of with the old resilience mindset and said, I can't do it, you know, you got to get your stuff together and get it done.

Um and unfortunately three days later he went back to reno and died of a drug overdose and um as a more resilient person who I thought was resilient back then.

I, I felt it when I initially found out and then shoved it down, went back and and handled things.

I, I lead the service, took care of my family and then I came back and just put that all in a nice little box and went to building my company and Built the company up was getting successful and then 2008 hit and it was an online business and that business came crashing down and came home one day to find my business partner and my girlfriend had decided to run off and take the business.

So in one moment I lost my business, my money, my business partner and my girlfriend and I was sitting there in a really dark place and in that moment I had the recognition of like, oh I chose this over my brother and that was really what led me into more resilient work at the time, I was still that peak performance type mindset.

So I went to work with Tony Robbins is a speaker and trainer and was like, let me learn the best tools, strategies out there to overcome this.

I was still in like the fix it mindset, like there's a tool, there's a solution, let me find it and let me implement it very much an action type of mindset and spent a couple years in that and um I thought I'd healed everything.

Hey, I fixed everything, I've healed everything.

I was using hypnosis.

I was using a lot of NLP and just managing my state, my physical body changing meanings.

Anything that felt heavy.

I would just change the meaning and a lot of mind tools to shift my physiology for peak performance, to get the job done back to that same old school mindset of, you know, get the job done at all costs and really not really aware of myself, my feelings, my emotions, but my emotions and feelings were something that needed to be fixed to get the job done, which I think is very much a warrior mindset.

Uh, I'll also say a definition that we use of a warrior is somebody who sacrifices in order to serve something greater.

So they're willing to sacrifice for something greater.

So healthcare workers are serving a greater mission and sacrificing to serve something greater and have a very similar mindset in the industry.

And uh, I find our mission and our purpose keeps knocking at the door and I kept getting a lot of insights to start to help people that were grieving and dealing with death and grief and loss and trauma.

And I started to help people on grief forms and I thought I had all the tools, I got the tools, you know, here's how you can fix it.

And I quickly learned I did not know what I was doing.

And so I started to research grief and trauma and realized there was a lot of conflicting opinions about how to deal with it.

There's one side and these are all researchers in the field, scientists, researchers and one side that's very much like people are naturally resilient and need nothing and they've used scientific data to prove it.

And then there's another side of like you need antidepressants after two weeks.

So very confusing conversation and so a friend of mine had happened to stop by and I ended up hiring a film crew and saying, well let me go interview all these people that are researching grief and trauma and understand this because I obviously don't know what I'm doing.

And along the way I did 32 interviews of all the top people I could find around grief, trauma and loss.

And along the way I met this man named Kendra, amazing man, he's a doctor and a long time ago he was in the field about when Tony Robbins was coming up, he was in that kind of coach but also a doctor therapist and unfortunately he tragically lost his daughter And um it just destroyed his life and and he spent the rest of his life helping families like 9-11 Boston bombings, Sandy Hook like national tragedies, he would fly out and help the families heal.

So he was very much embedded in the culture and what I'll also say is what I noticed when I was interviewing is there is very much the head researchers looking for data and looking for information and then there was very much little bit more embodied people I'd say working with people daily and so I was getting lot of perspective understanding the theoretical conversations and you know what relates to the DSM more of that conversation and scientific research and I was also getting a lot of people dealing with people grieving and that gave me a lot of perspective and one thing Ken said that just opened me up as he was talking about the duality of life and he was talking about we come here in this life and a lot of us, especially those in the personal development and warrior culture ah are focused on being whole right?

There's this whole like we're not broken, we're whole.

And he introduced this concept of were broken and whole.

And and just to pause there for a moment, the conversation wasn't that were broken individuals but that when we love deeply when we really love deeply and we experience heartbreak, a death, a loss, a deep trauma, a deep wound, we're heartbroken, were deeply heartbroken.

And sometimes those heartbreaks are so deep they don't necessarily go away.

It's in learning to love both love the whole and the Brokenness if you will.

That actually allows us to come back together again in the loving acceptance of the pain of the trauma of the loss of the grief is actually what brings us back into wholeness and he was such a loving man and he was also so certain because it was embodied wisdom that I could not look at it.

So this overachiever that wanted to find a solution and fix everything.

And here I was researching all this to help other people.

What that did is it turned it on me of like, oh what have, what have I tried to fix that?

I can't fix what is in my life that I've suppressed, that I thought I fixed but still there and I haven't loved, I haven't accepted, I haven't embraced but I've just shoved it down and tried to fix it.

And so that led me into a two year journey of like all the things that I had suppressed were coming up from past breakups to a lot of trauma around my brother, to childhood things that I didn't know were still there and at the time I didn't have any tools, I didn't have any mentors, I was really just kind of fumbling around through this so I would be on the outside world, good.

But then I would come home and feel a lot of heaviness and I was using numbing techniques, alcohol, food and really just kind of suppressing that because it was heavy.

But I was feeling it and this went on for about two years and one day I woke up and I was like, I actually feel more peace is as ah outside the box is it would sound by doing the opposite of what I had been doing instead of suppressing, avoiding running numbing, looking for a fix, turning inward and loving, embracing accepting, feeling, what was there, even though I did it messy and I did it for a long time on my own.

Um I actually started to feel more peace and that was like, wow, there's a whole another world here.

I felt like I had been taking a hammer to everything and you know, you can take a hammer to a nail and if you pound a nail in, you can actually bend it sideways and up and down.

But if you take a hammer to a screw, you break the screw.

And I realized I had been using a hammer for everything and I needed to open up and learn what would be like to use a screwdriver.

And sometimes there's another tool in the toolbox for a warrior to use.

And so I created a set of framework and tools and started taking men into the mountains and basically created a process where men could go into their deepest wounds, pain trauma in a really safe container and allow themselves to feel what was actually there.

And then I used a lot of somatic release practices and I know you guys have had some other therapists and other people around somatic.

So it was a mixture of talk therapy combined with somatic work and we were able to get to these really beautiful places of releasing deep trauma, deep pain, deep sadness, deep anger that was shoved down and release that from the nervous system and then rebuild back up who we actually are now, what our troops are beneath all those layers.

And it was highly effective and I've always had a veteran spot because I'm a veteran and then a first responder came as a good friend and had a really powerful shift in an entrepreneur kitted another sponsorship.

And so about the last five years I've been doing veterans and first responders and I've had doctors, I've had nurses.

I've had a whole host of different men come through these but I started to identify that first responders and those that have dealt with trauma had a dramatically different shift in it because they just take on a lot more trauma as an example.

Police officers typically see What the average person would do.

Like three major trauma events.

Police officer may see 180 to give an example and I'd say it's probably very similar for firefighter EMT.

And those that are in health care in general, they're seeing trauma on a regular basis and since we're here, I just want to go one more, one more piece ah in the field of trauma.

I think also what's interesting is I always looked at it, I think a lot of people look at trauma is like a big T trauma like meaning a big traumatic event.

And the definition of trauma is the body's perception of something that either physically or emotionally could affect our well being.

So it's it's the body's reaction to a potential real or potential physical or emotional something that affects our well being.

So think about how many things as health care workers, if there's a health care worker listening or somebody in the field, how many things on a weekly basis, daily basis could your body interpret as a threat real or a potential threat to your physical or emotional well being?

And those are all these little little t trauma experiences and some of them may be big T trauma experiences that build up over time.

Um so what I learned is if somebody's been stacking a lot more of those and then they remove those pieces they get a lot more freedom, they get a lot more levity, they get a lot more peace and they can reintegrate back into their life.

And there's also a common thing that happens with veterans first responders and healthcare workers where they experienced the triple D.

Means they end up serving so much in the field but in their own personal lives, a lot of them end up drunk, disabled ah drunk disabled and um divorced.

So so so uh And I'm almost finished with this piece.

So that led me to partnering with my business partner Philip Folsom and he spent also 20 years in the field of trauma grief and leadership and we formed a four which is a men's group to do this work for men.

And we also formed Balor and value is targeted on first responders, veterans healthcare workers, those that deal with trauma on a daily basis.

And we combined a set of tools and frameworks so that I think that's really my, my sweet spot is helping people understand in a high level of what's happening in the brain, what's happening in the nervous system when you take on trauma.

And then there's a lot of research tools, frameworks, actual practices that you can do do regulate yourself, get back into a grounded place and then there's also a lot of communication that needs to happen with yourself, being able to feel, communicate with your spouse with your Children, with your family and re embed like reintegrate back home to your family, so that's what I do now I still do retreats, I do a lot of men's work helping men learn these tools and frameworks, I do my own emotional resilience one on one with couples and people navigating really messy situations and then I do a lot with veterans first responders and those in the health care community of learning, just high level training so you can go what's happening, let me build a set of awareness and then let me learn some healthy practices to take off the armor because most healthcare workers put on armor to go to work every day, but there isn't training too, take off the armor to come back home again to reintegrate back home and there's not really a communication that happens when they get home.

So what ends up happening is somebody has a heavy day, they take on trauma and even in the healthcare space, this is different, I found than in first response, usually first responders least fire have what they call schism or a peer to peer support many times where after a heavy trauma day, they'll get together and check everybody still not a lot of training on what to look for, what to do when you get home, but at least do a check in.

I find in healthcare, most people just go to the bar when it's a heavy day and that's really the, and it's all like locally like, hey, let's go to the bar and have a drink after the shift, but there's not really talk about it, there's humorous, which is in all these industries to deal with it, but there's no really unpacking, there's no really what to look for.

So everybody is basically doing it on their own, they're keeping their same armor on and then they're coming home trying to protect their families from what they took on and then their adaptations to that trauma response is what leads to addictions, depression, hurting their spouse, hurting their family, isolating, attacking all the things that happens in their family household and then those things are what they blame themselves for and that's why we're seeing an increase in suicide and a lot of these other problems because you feel like man, I messed up, I'm broken.

What do I do?

There's no way out and warriors don't ask for help.

Just painting a picture of.

I think the problem that we're in now and I'm grateful that you're doing all the work that you're doing Heather.

I think it's amazing and just bringing more conversation because there's so many tools available and it's about normalizing the conversation and realizing these are normal things that you deal with when you get exposed to trauma.

And there are very grounded tools that you need to do.

So excited to be here share all the tools and information I have that.

Hopefully anybody listening by the end of this, you're going to know what's going on with your body.

You're going to have very grounded tools that you can do today to start to get back into life and also communicate with your spouse, your family and really reintegrate.

I mean there's so much to unpack there.

Um, thank you for sharing your story and your experience because I think it's really important to understand um, your intention behind being embodied an embodied worker healer.

I don't know what you call yourself exactly trainer uh coach, etcetera, but to be embodied and to walk the walk and you really exhibit that rather than just saying, here's the research, this is what you should do.

Um really saying here are the practices that have supported me here, the practices that I see work with other people.

And um, I'm here to walk with you, which is very different.

Um in some ways I yeah, on that, I think that's important is in warrior culture, we dismiss people if they if they aren't doing what we're doing.

So if if somebody is not and I need this to stay alive, like these are part of my protocol to function as a human.

If not, I wither off into they're part of my rituals to be to integrate back into life.

So very much on the path and doing all the things I'm going to share?

I'm doing so that I can live a life?

No, thank you Heather.

Well, I love this protocols to function as a human because being human is complicated and messy and when we think about health care workers and what they face on a daily basis, there are added layers of complexity as you look at the systems that are working in um, you know, insurance reimbursement covid, you name it, there's just like stacking layer and layer and layer of different stressors and we need ways to be able to unpack that and ways to take off the armor with that.

I'm curious.

Can you explain for us what someone like armor?

What does that mean?

What does that look like?

How do I know if I have armor, et cetera?

Yeah.

Great, great question.

I like to paint this picture.

Imagine, remember the nights back in the day that we're dressed from head to toe and like heavy armor and like face shields even so in order to do your job as a health care worker, is it fair to say that in your training you get put under stress and pressure on a consistent basis?

And what's happening is they're putting you under stress, which puts you into that fight or flight fight or flight fight, flight freeze and appease response.

And when you move into that response you get triggered and you revert back to your lowest level of training or your highest level of training.

And so and that response in the healthcare system and all the systems they put you under high levels of stress.

So that in those high levels of stress when you get offline, you're going to revert to protocol.

So the consistent training is disassociate from emotion and follow protocol.

Because if you did your job every day, you're dealing with emotion, you're dealing with depending on what you're doing in health care, people are highly emotional, they're highly reactive, they're angry, you may be seeing death ah um disease, trauma on a daily basis.

And if you were actually feeling that you wouldn't be able to do your job successfully.

So the only way you could do your job is let me disassociate.

Let me put that in a nice little box and let me show up a little bit numb to what I'm experiencing and then let me follow protocol so I can see you know, there may be an er doctor that as a patient on the table and they got a line of patients outside.

They don't have time or or an er nurse or in childcare or pediatrics.

Right.

So, so many fields of healthcare workers have like, I don't have time to really process my emotions because I got a number of patients waiting for me.

So I need to quickly mobilize, get to the next patient and when you do it over and over and over again, you get desensitized.

So the armor is how they do really good training.

That's why Med school nursing school.

A lot of the school is developed in order to put you under high stress diagnose and treat the patient quickly.

Still be personable.

But the personable is not really like you're connected during your emotion and your feeling and you're connected.

You're more How do I be pleasant connected to the patient but not really take on that feeling.

So you're disassociating for emotion.

Following protocol.

Following protocol.

That is armor.

That is the armor that you put on to do your job and without it, I'd say you couldn't do your job successfully if you felt what was happening with every patient, you you may have responses, you may have reactions.

You may need to take a time out when patients are dying in the hallway.

So in order to do your job successfully, the training developed on what we develop as humans.

Healthcare workers is the armor that you put on to do your job.

Now, if you do not, let me ask you a question, How many hours of training have most people in the healthcare field received?

two disassociate from emotion and follow protocol.

I mean, I have no idea but thousands of hours, probably more than thousands, right?

Thousands and thousands of hours every day on the job, they're going back and repeating that again.

But let me ask you a question if you need to then after you finish your job, feel your own emotions, Do you need to be connected to your feeling?

And what about a feeling you're, what about connecting with your spouse or your kids?

You need to actually feel so how many hours of training has anybody in healthcare received to actually reintegrate back to take off the armor where it's safe to feel again and actually start to feel what's going on with me, What's going on with my spouse?

What's going on with my kids typically zero.

So a lifetime of training to put the armor on and zero training to take the armor off and that's really the biggest example of where the challenges are, is imagined back to that metaphor.

You've got all this armor on, imagine walking up to your house, opening the door to your house with a bunch of armor on, what can you feel of the handle.

Like it's a little cranky, you open up the door, imagine walking in and trying to give your spouse or your Children a hug.

How much can you actually feel if you've got all this armor on or imagine walking out to look at a sunset and you got a little tiny slit and adviser like how much of the sunset could you actually enjoy?

So what ends up happening is when your armored up for anybody listening life kind of loses a little bit of its meaning.

It's not, you don't tend to value the sensations, the moments, the feelings, the sunsets and a lot of times what ends up happening is we move to more warrior mindset which is ah the warrior mindset is always on like decisive action.

They're usually quick to make decisions, quick to get things done and you're doing something you're not being you're doing so you're cleaning the house, you're staying extra, working late, you're taking on extra jobs.

You're using numbing mechanisms because that that allows you not to feel whether it's drugs or alcohol or sex addiction or workaholism or playing video games or whatever else it is.

There's, there's or fixing projects forever.

Right?

So that we end up doing all these things that we just don't realize we don't have the armor on and then we don't know how to communicate our feelings and we don't know how to communicate with our spouse.

So that's what creates the triple D.

Which is divorced drunk disabled is because we're trying to protect family and then the way we protect is in our coping mechanisms which are isolation or we attack or we're just still in that warrior mindset and we haven't learned how to feel.

So um learning to take the armor off is creating an actual ritual or practice.

And I like to use the metaphor, imagine if your job was like, you know those hazmat suits where you're dealing with like like poisonous chemicals and you're sitting there with poisonous chemicals.

Imagine if you just walked home after dealing with poisonous chemicals, you're actually bringing that into the house, including everything everywhere you go.

But what actually happens is there's a clear transition where you go into that room where they spray you down, they remove all the toxic chemicals and then they actually, you take off your suit and then you come out and we need to have a very similar process.

So when you leave your job, your career where you have the armor on, there needs to be a clear reintegration practice or ritual that you do where you intentionally take off the armor and that looks like you may become home and we're going to talk about a number of resiliency protocols and there's three primary pieces of resiliency.

One is a reintegration protocol needs to be in place, clear place to put the armor on to go to work, clear place to take the armor off to come home.

There needs to be purification practices which are think about like when you need to change the oil in your car, when you put it in, initially it's nice and golden and then after it's in the car for a while it becomes like a black thick substance.

If you don't change the oil, your car eventually breaks down or the engine seizes.

And then there's regulation practices and the regulation practices are when your body is in a heavy fight or flight on a regular basis and that fight flight, freeze or appease.

You need to learn how to flip the switch off to put you in a relaxed place and that relaxed place.

And there's a number of science based regulation practices that actually calm your nervous system down, allow you to get back into your body into your heart into feeling.

It also allows you to put you into a part of your brain which is compassion, empathy and executive functioning.

And the combination of those three rolled into a reintegration practice is what allows you to take the armor off and it may look something like noticing you had a tough day and the last piece is communication.

So how do you actually communicate with your family, whether it's a good day or whether it's a bad day and there needs to be a different protocol in place based on a good day based on a bad day.

So on a good day you need to have a protocol regardless.

But on a bad day if there's an easy way for the family to know oh bad day you don't have to say what you did.

But if everybody knows it was a bad day you have a new practice that the whole family unit can use which now everybody's working together as a team and as a unit and knows what's going on and that's really what what solves a lot of these problems.

So 33 things reintegration purification regulation and then a good communication protocol with family to know what to do in those different circumstance.

So let's start with reintegration, what does reintegration look like?

Yeah.

So reintegration is a clear ritual or reintegration practice just like the Hazmat suit where you're coming home and it's just something intentionally.

You do you do it every day, there is not a myth.

So for example I use four levels of trauma that I teach that are how you have a conversation whether it was a 123 or four and without going too deep into those.

Think of a one is a basic day with high stress, think of a two is an even higher stress response.

I typically use the metaphor of like a sprained ankle?

Think of how long a sprained ankle takes to heal Like a physical sprained ankle.

It may take you 4-8 weeks.

4-10 weeks.

You may be casted, you maybe slow angry, frustrated.

But if you do the proper care, you can come back.

But what would be a level to stress response?

Everybody going through?

COVID right now is probably in a level two regardless.

So you're already at a heightened level two meaning you're slow, you're tired, you're frustrated, you're angry And this has been going on for two years.

So the level two is already an increased stress protocol.

Think of a level three would be like a broken leg or a broken bone like a shattered leg that could take you 4 - six months of being casted.

It could take another 4-6 months of rehabilitation after you get the cast off.

So 6 to 12 months, you're slow, tired, frustrated, angry, lethargic.

And but you have a reason.

Typically with physical injuries because you look down and see a cast, right?

You may need a little time off here and there.

Right?

When you if you get into cash, you may not be able to work all the time.

But we take those things because we see the physical injuries emotionally.

What does that look like for somebody, right?

If somebody goes through and it could be a traumatizing event that happens on the job, it could be a death.

It could be a child fatality, Children could be really painful.

A lot of the times or it could be a personal divorce or some major life event.

Or somebody sick in your family or somebody in your family or one of your close clients gets COVID that could throw you off even more or dies.

Right?

So think of that level three And then a level four would be I I I see kind of a level four as an example of like the loss of a limb and the difference of a level four is there's no fix And the levels 1, 2 and three You get back to normal, but in the level four there's acceptance.

There is no getting your leg back, there's a loss of a limb, you have to accept and you may need to change what you're doing, right?

You may need to change what you're doing and it's acceptable to change.

So you can still live a really fulfilling life but in order to do it, you're going to have to accept, you may have pain, you may have frustration, that's going to be a part of your life for the rest of your life.

So and I know I covered this quick, I usually spend a lot more time but I just want to give a brief framework, imagine if you came home and you had a code with the family, one or two is in the front door, three or four is in the back door.

This is an example or three or four is in the garage.

Now you can talk through what in the family unit, these things look like on a high level, what does it look like for everybody?

What does it look like for the kids when they're one through four?

What does look like for your spouse when they're one through four, what does it look like for you?

So you not develop a system in the household to say, where's everybody at today?

Let's do a quick check in and when, when we're at different levels, we're going to need to use different purification and regulation practices to reintegrate back.

So a good reintegration protocol is having a protocol in place with your family and you Um that tells everybody where you're at on that scale of 1-4 when you walk in the household and it's having the practices tied to that that you're going to have to do and say I am someone who lives by themselves.

What do you recommend that for their reintegration practice?

Yes, So it's the same thing, you just, what I would say is you need community, you need, you need a community to check in with you, the lone wolf dies.

So if you are lone wolfing it, you are in a tough place.

So you need to find community, you need to find people to align with and I'll just let you in a little secret, everybody's struggling through this too.

So you're not the only one and you're not the only one in the pain that you're in.

A lot of high achievers, which the majority of people in healthcare, high achievers tend to think I gotta keep it together for everybody, so I can't let everybody know I'm off because then I'd be a failure and the reality is everybody's in trauma response, everybody is in pain.

So it's developing a safe community and we'll get to some of these practices that you can do the purification and regulation, it applies to anybody, whether you're single, whether you're with family, but a big part of that is also having community, I'd say for somebody that doesn't have family, but when we get into the regulation purification in a minute, you just have to have those practices in place and find what that looks like for you.

And I could see there being a benefit also in having language like this with colleagues so that you can check in with colleagues and help when someone's at a three or four and say, hey, I'm in a four today, um I need some assistance and so to have that ability to um communicate that with colleagues could be extraordinarily important to yeah, there's some really cutting edge things we're doing and I'll just share a brief milk that I want to get to the other pieces, but um where we're building it, like, so certain fire departments have it, police are a little bit, I'd say health care is probably the farthest behind of having a clear protocol, but ideally in a best case scenario, there's a quick huddle up after tough days And that's what they would do.

Somebody would sit around and say where is everybody at scale of 1-4 and depending on what happened during the day is what they would say is, hey, this could have been a level three or four depending on what you guys saw Be on the lookout for these trauma signs when you get home because it takes 24-48 hours for the adrenaline to wear off.

So you may feel fine in the moment, you may have cracked a couple jokes and think you're fine but you're still in an adrenaline rush And it's not the 24-40 outer layer when you're home that all of a sudden you're nervous system actually realizes what's happening.

So the ideal way to look at it is um be on the lookout for these trauma sites and trauma signs are I like to frame things like this, imagine you have a truck our vehicle and imagine like most people in healthcare really good at cleaning things like everything is clean all the time.

So even on the trucks, let's use somebody like an E.M.T.

Or you know, E.M.S.

For example that's in healthcare around that they're really good at cleaning the trucks but what if they didn't know what the gauges are of the truck and how to read the gauges and they're driving the trucks around all the time and because they don't know how to read the gauges, the trucks are breaking down or blowing up or becoming runaway trucks and that's really what we have now in the whole system from first responders, Healthcare military even is we're in a reactive state, there's nothing preventative in place.

Currently, it's slowly progressing some places and even what you're doing, Heather is really amazing.

So there are some things coming up of preventative practices that you can do ahead of time.

But in general, the industry in general is very reactive and a lot of times, even disciplines based on the trauma responses.

So current system needs to change ideally we do a quick check in and then there's actually wearables now where you can track your HR V, which is your heart rate variability and there's there's really cool technology that can become available because typically warriors don't ask for help the challenges, Somebody's out of four.

They don't say anything.

And so ideally what you'd have is you'd have somebody on the team appeared to peer support, somebody that checks in with everybody says be on the lookout for these signs, communicate to your family, move into your protocols and then you'd actually have a dashboard that shows where everybody's HIV is and when people are offline, you have practices to get back on and you could reach out and say, hey noticed you've been in red lining For the last three days, use these resiliency practices.

So that would be a, a best case scenario would actually be leaning in to take care of our people.

That's the ideal scenario.

But until then, yeah, definitely reaching out or noticing when your tanks are low.

I was just going to say, I love this idea of communicating as a family unit about these practices because if we can teach our Children this and start communicating about our own health, well being emotional state from these young ages, but a better, better health will have long, long term, which we need.

Well, here's the, here's the kicker.

What we don't realize is are the ways we're coping or adapting.

We're actually teaching our kids to adapt the same way.

So the same challenges we have.

There's a lot of statistics about PTSD and suicide in fire, Police, health care profession.

There's not a lot about families, but the families are taking on the same P T S.D.

And the same challenges were taking on and they're starting to exhibit the same mental health challenges.

So the irony is when we develop these practices and bring them in the family.

We actually help our children learn how to regulate their nervous systems and purify and communicate.

There's the event you were at in May when we did the same training, one of the members walked up and said, oh we actually know how they brought their son and their son was like, now they say where you're at and he's like, oh I'm a two or a three and they've actually integrated that right away and they never could communicate before and now they actually have communication two ways.

You know what to do.

So it can really be a game changer if you can have that communication.

Absolutely.

I love that for families and our kids and ah as a way to create a healthier society, I mean I think COVID has, people were lonely and isolated and there was quite a bit of depression and chronic disease prior to COVID and then we compound COVID on top and it's shining a light on some of these huge challenges we have in our healthcare system and in our world.

And so I love the work that you're doing um, because we need to be looking at this right now and thinking about how, how can we support each other, How can I support myself.

Yeah, it's really critical and, and the metaphor back to the truck is so the, the engine is like how your nervous system works and how your brain works in response to trauma.

I won't go deep into it today just because we don't have the same bandwidth, but the trauma signs of the gauges.

So I think this is really important.

The trauma signs to look for our addictions, depression, ah if you get carb or sugar cravings, if you get depleted, be feeling exhausted if you have high risk behavior which a lot of people in healthcare exhibit.

Um and again, think of any other addictions like alcohol drugs, work addiction, working overtime, working extra shifts, sex addiction.

Like there's so many things that get exhibited and and these are all trauma signs that that you have trauma, that there's, your body's giving you an indicator that the tanks are low And the metaphor I used earlier of a broken bone.

If you don't set the broken bone, what happened?

We maladaptive, you continue to re break.

So what we've all done without training is we've learned to maladaptive.

So you're tyrant behavior, you're weakling behavior, your status, behavior, your mascots behavior, your addictions, your depression.

These are all adaptions to trauma that you learned from childhood that you've just learned to regulate your nervous system.

And so recognizing those instead of beating yourself up, which is what we typically do.

Um, we now can see those as action signals that we're in a regulated states.

So um, are unregulated state.

So as an example, imagine if you looked at your truck and saw the engine lights low, what do you do if you see the gas?

Just give me the gas is low, Is it kind of a pain to go to the gas station.

It's like it's going to cost us time, it's going to cost us money.

We don't feel like doing it.

But do you do it?

Yeah, because it's more pain if you run out of gas like on the freeway, think of what you're going to happen.

So we do it, we've got to get gas and I go do it and it's the same way.

So when you see these trauma signs, it's an indicator that you're on redline and you're out of gas.

And if you don't do the resiliency practices, something's gonna blow, you're going to run out of gas and the running of gasses, the adaptations that get deeper.

And, and typically shame heightens when we go deeper down that rabbit hole.

So it starts with one thing.

If we don't do the regulation and purification, it gets deeper.

So, and then we have more shame stacked and that's where we end up in these suicidal ideations is when we got too far.

We don't know how to come back.

So if you can just recognize it soon and go action signal.

I'll give you 11 quick story.

Um years ago when I was teaching this, um, I had a cat that got really sick and I spent three weeks, it was my first set of animals.

So I spent three weeks like I was driving like 45 minutes a day to take him after hospital after hospital at the hospital, he had FIP and I was just relentless at trying to fix it.

And then one day I went and got a bottle of wine, a pizza and a tub of ice cream demolished them and then I was like, I was starting to beat myself up, which I would have repeated that habit in the past, like done it again and again.

Um and then I was like wait action signal, like I'm in a trauma response and it allowed me to go, let me use my regulation protocol.

And when I actually did the regulation I could feel and then I was like, he's going to die and I got really sad and got on the ground and it was so new to me because I usually can't feel and I started, I started crying, I started to feel that and it all shifted so if we use the practices and then I was like, oh he's going to die, let me just be with him.

And I got like the crazy man and I took him to the beach and I took them into nature and I was like how do I, how do I enjoy this time with them and be present with him and feel my grief, feel my sadness, feel my pain but really be here and it allowed me to be present with him and you know, that's that's some of the things I couldn't do with my brother like that, some of the stuff I couldn't do before I was such a trauma response.

I just didn't know how to feel, I didn't know how to access my emotions, my body and be present because I was so used to being to warrior ring up.

But what I thought was resilient.

So emotional resilience is how quickly we can feel what we're actually feeling and be authentically present, right?

Not necessarily get back up and make things happen, but actually like how quickly can you identify what's happening and get regulated and present in your nervous system to be like, authentically present in the moment, which may mean communicate your authentic feelings, have your actual responses and really be here.

Now, that's what that's what it gives you, gives you presents.

And so I would just say, and with that presence it gives us choice, right?

So we can make more intentional choices versus being in that reactive habit pattern of just like doing those old things that maybe we learn from our parents or we learn from different places, these coping mechanisms that really are not supporting us with that pause and the awareness, we then have choice.

Yes.

So, so anybody that's listening, if you notice trauma signs, if you look at the gauges and notice the trauma signs, they noticed the tanks low.

I have a process called CPR and you already started to hint that Heather and why would you use CPR?

When would you use CPR with the with the patient, maybe they're they've stopped breathing would be one.

So so when we need to resuscitate them.

And so typically we use CPR when somebody's offline and we got to bring him back.

So the same thing is when we're when we recognize we're in a trauma response or we're in a activated state.

That's what I like to call it the first.

That's when we use CPR.

So the C.

And C.P.R.

Stands for conscious awareness.

Your inactivated state.

Because awareness as you mentioned a minute ago gives us choice as soon as we can have awareness we can now choose without awareness.

We're reactionary.

Sophie and when the reactionary were offline meaning we're falling back to childhood adaptations which are all those trauma signs we mentioned before and we may catch it by the trauma response that were there.

Right so be gentle on yourself if you do second step is p pause.

Just take a tactical pause, stop what you're doing the metaphor of the truck.

You notice the engines where the gas is low stop and find a gas station.

You stop for a minute, look at the gas station and then the R.

Is regulated.

And so um the regulation is if the tanks are low you gotta fill up the gas you got to put gas in the tank.

And so moving into regulation and purification practices regulation.

These are all accessing the vagus nerve is the science behind it.

And when we access the vagus nerve.

Think of most healthcare professionals know what we do to read when somebody is in a um sympathetic state which is what I'm calling an activated state because they're looking for shock and they're looking for certain symptoms.

What they don't study a lot is the parasympathetic they do in med school or they do in nursing school or they do when they initially learn.

But parasympathetic is what turns your whole system back to normal.

And it really simply said with getting too much in the science.

So essentially if you can act as your vagus nerve, the vagus nerve is the longest nerve in the human body.

And that's what actually gets you back into a regulated states.

So five practices and there's a lot lot here you can do.

But the five ones that are the most common that I recommend That are all science based one is breath.

And specifically for six breathing has been the most research by HRV.

Scientists.

Um and real quick.

The reason I say HR V is when we move into an activated state or a sympathetic state.

What happens is people still ate your heart rate increases like you get short shallow breathing and it shuts down all nonessential functions of the body.

So what's happening is your body is saying fight flight, freeze and peace.

Part of your brain called the amygdala saying I'm in danger, right react to the danger getaway like fight, fight my way out of this breeze.

What I'm doing flight or a piece that solve the situation which is a trauma response.

So that's also what's happening when we go to addictions or numbing or any of that other stuff is we're just in a trauma response.

So if we can recognize it and flip the switch, what we're doing is we're turning on our parasympathetic which flips everything back to normal and it puts you in your prefrontal cortex, which is the part of your brain that has compassion empathy and executive functioning.

If you're an inactivated state, you're in the back of your brain which is the fight, flight freeze or peas and it's just black or white you're looking for yes or no, there's no great in all relationships, all solutions, all compassion, all empathy is in the grave.

If you can't access your heart you can't feel somebody else, you can't feel yourself, you can't access anything else.

So if you can flip the switch, you can now come online and feel you you can come online and feel your spouse, you can come online and feel what's actually happening and solve it because you have executive functioning.

So The breathwork, what you're doing is you're breathing in for a count of four And you're breathing out for a count of six.

Now you have to do this for six minutes or 36 breasts in order for that to turn on.

And so the reason I studied HRV.

Scientists is HRV.

Is your heart rate variability.

We're looking at at heart rate.

So again, if you're in an activated state you have a fast heartbeat.

If your heart rate slows down, that's why HRV.

Is the number one way to look at your nervous system.

And if you're in a fight or flight state or a relaxed state, right?

So um 46 breathing for 4 to 6 minutes, you can also do variations of that.

Like breathe in for four, hold for five, breathe out for seven.

There's a lot of variations.

But the key with the breath work is you have to be breathing out longer than you breathe in to actually turn on your vagus nerve.

So first ways breath work breathing out longer than your breathing.

In.

The second way to do.

It is through cold water immersion.

So that's why cold showers are so popular.

You can do cold plunges, cold showers Or if you don't have access to that, even just splashing cold water 2-2-3 quarters of the face.

Your face has the vagus nerve endings in your face and it can actually start to turn on your vagus nerve to start to regulate you.

And additionally, if you think about a cold shower, like if you take a hot shower and you flip it too cold, what do you do your like you're also breathing.

And so that's also what the combination of the cold and the combination of the breath does it really quick.

So I'm a big fan of cold showers or cold punches the third way to do it is through touch and that's why um you have animals, cats, dogs, that's why question therapy works, that's why service dogs work for veterans like touch is a massive way to do it, even getting massage or getting a spouse experiencing touch.

So um that touch the touch and the breath or the two fastest ways to do it.

So if you even can combine those, that's like the ultimate way to regulate um if you're a couple and you guys can practice this, this is like the ideal daily reintegration to come home experience touch.

And it could even just be like you just have to be holding hands, it doesn't have to be you know cuddling up or really close, but you can feel free to do that.

But even just establishing a daily ritual where you come home, maybe you go outside, you walk the dog for a minute and you touch the dog or you touch each other and you practice breath, work a little cold immersion and you see how you're starting to stack these right, so touches the next way.

The third way, the fourth way is anything vocal.

So you can hum, you can sing, you can do primal screaming that's Wyoming is really helpful when people are roaming their humming um primal screaming.

If you haven't done it, you have a bad day, you get in the car and you just scream at the top of your lungs.

Gonna demonstrate it.

I'm not going to demonstrate that one.

But it is a it is such a relief if you can just get in and primal scream when you've had a bad day, it can reset yourself because you're again you're letting it out but you're also accessing vagus nerve so or sing a song, put on some music and sing at the top of your lungs all the way home.

And you're starting to see how how can you start to integrate some of these into a reintegration ritual.

You're already starting to see how these can tie in and then the next one is exercise.

So exercise can look like anything from going on a walk at its basic sense.

Can you go on a walk at your break or a little walk before you come home.

Um You can also do a lot of people do Brazilian Jiu Jitsu, weightlifting, yoga is really good.

Like there's so many things you can do, the best ones are ways that integrate your left and right hemisphere.

So things like yoga or things that are moving different parts of your body are are the best for that.

Um And those are the five primary ways, there's a lot of other ones, but those are the five primary ways to regulate and um and then purification is a little bit different.

So and then I'll tie it all together.

So think of purification is like changing the oil in your truck or in your car.

So when you first put it in, I mentioned earlier it's a little golden and then after you sit awhile it gets black.

So you need to purify something, you need to let go of the black and you need to bring in the gold.

So the best purification practices and there's a lot more you may discover if anybody's listening.

But meditation, big, big advocate of meditation, what you're doing is you're just letting yourself be, you're not doing your in a being place and that's a great way to transmute or purify.

2nd 1 is nature.

I get into nature.

That's why even going for a walk and start to look at things and and acknowledge be present with nature.

But going out camping for the weekend, hiking, anything to get into nature helps to purify you.

Um and release things out of your body, jumping in the ocean, jumping in the lake.

All that is great purification.

And then the last one is anything creatively inspired.

So it could be dance, music instruments, writing, creative writing, but you're transmuting the heavy energy that you have and you're turning it into something else.

So you're taking a heavy day and you're dancing it out, you're taking a heavy day and your writing and your, your poetry or you're taking a heavy day in your journaling or you're creating some, some music and this is what a lot of um, clients that I work with.

This is what they do with their families.

They have protocols in place.

So that sort of tie it all together.

Those are the three primary ones.

So purification is meditation getting into nature or some sort of transmutation, whether it be music, art, dance, writing, something that purifies that energy cleanses that energy.

So tying it all together now that you know what those are, How do you build that into different reintegration rituals?

So let's say, let's say you have a one to daily ritual is every day that you come home.

Maybe you come home on the way home, you sing a song in the car, right?

If it was a tough day, it was a three or four, maybe do some primal screening or you allowed yourself to let something else release.

Um, if it's a 12, maybe you walk in the front door, you go right upstairs and you take a shower first might be helpful and you cleanse yourself and you do a little cold shower at the end maybe then you take a moment to walk outside and walk the dog because their families are a little different.

Sometimes you could actually reintegrate with the spouse and the kids right away or sometimes you may need to do it on your own right away and get that little bit of space.

So you need to figure out what works for you.

I've seen it different, some people love to integrate with family.

Some people need a little bit of their own space, but think about what that could look like to take a moment, take off the armor, cold shower, regulate the nervous system.

Maybe walk the dog if you have a dog or spend time with the cat or if you have family, connect with the family or you see how this can be done if you're single, you know, I'm single, but I have two cats.

So that's one of the things that I do.

I do a daily ritual in the morning where I meditate a journal.

I go over my gratitude practices.

Um, I do breathwork to regulate my nervous system.

I spend time with my cats like a good couple of minutes connecting petting the cats and that's my morning ritual.

Then I go do a workout, right?

And then I end with a cold shower, You can integrate it into your day before your day after your day And then a three or 4 is where you would want to heighten that or you would want to add to them.

So think about it.

You might want to stack two or three of those back to back.

You made it a little bit more time doing what you're doing and you also may need to assess If it's like a four x 3 or four.

do I need a break?

And I know this sounds crazy to healthcare workers because everybody's about mission at all costs, but sometimes you need a break and this give yourself permission to have a break before you start to destroy the things in your life, including you.

And so this is just, I'm just an advocate for healthcare workers, like anybody in the profession, everybody is so selfless that work themselves into the ground and they're destroyed and they're still serving.

And sometimes you need a break because if you've been, if you have an ax and you're trying to chop down a tree and you keep chopping eventually the ax becomes dull and when the ax is dull, you're working 10 times as hard and you're not making an effort and you need to sharpen the ax, you need to fill up your tanks, you need to get gas.

So it may need a little break, like take a day, may need a weekend, take a weekend or if you're really traumatized.

I know a lot of people are changing healthcare or going somewhere else or changing your role, moving to a different role, different position.

So there's a lot of things.

So if you're at a four, it's a better decision to change something than to have it get worse and you hurt yourself or hurt others.

That's another option.

And if it's built in, it becomes part of the culture versus not being worked at all costs.

Is that helpful?

Just understanding like how you integrate reintegration, how you integrate purification and then how you, what a lot of people do with the families.

I have had a lot of first responders that would just never say anything.

They'd walk in the door, first responders and healthcare, it's all to me.

I have the same.

So if I say first responder, it's all kind of lumped into anybody who serves, I use warrior culture because there was anybody in warrior culture serving something greater than themselves.

And a lot of times people walk in the door and they go right into the family unit in these chaotic states and not know it and they'll be fighting or running or avoiding or isolating not knowing they just took trauma home from the job.

So literally just being able to go, oh, front door and even check in with the family.

Where are you at?

1 to 4?

Hey, I had a 34 today right to today.

Okay, cool.

Go go do your practices.

I got, I got the kids for a minute or we'll check in with you in a little bit if you got a family or if it's just you personally being able to go, I need a break tonight.

I need a break or what fills up my bucket.

Right?

Maybe I need to call a couple friends a tough day, you know, or somebody else after the job or just extra nurture time or hobbies, find some hobbies that are super fulfilling to you.

And one more thing I want to say is that I've seen it really helpful of using code words.

So before a lot of families would fight because somebody would want to go into nature and then there would be a big thing like, oh, there'd be some conflict about it.

But once they said, if I say I need to go to, let's go in the nature, it means I'm really in a, I'm in a 34 and now the spouse goes, oh, you're in pain, it's not me, it's not us, there's no conflict with us, you're just in pain.

So, and now you're mobilizing as a team and going, ah, you got to go into nature.

I know they're offline and this is how we're going to be spending time together, we're going to be nurturing together.

So you round up the family, you guys get into nature now, you're purifying together and even bringing home the resiliency practices like, um, there was a man that um, a warrior part of warrior culture that was having a lot of problems and then started seeing his daughter was having some of the same problems he was having and was like, oh my gosh, it's the same trauma response she's now experiencing.

So then he started grabbing his guitar and coming home and saying, hey, we, we all have tough days when I have a tough day.

This is what makes me feel a little bit better now he's doing purification playing the guitar with his daughter and then she's starting to see it and now she's starting to play music when she's having tough.

So when you can start to bring that into the household and say, hey, we all have difficult days.

It's normal.

These are normal parts of life when we have pain, when we have frustration when we have lost, we have trauma and everybody, including families, are all going through, you know, trauma responses and it just means the tanks are low, right?

This is how we normalize it to go normal response.

We're all in a normal response.

Guess what?

How do we fill up the tank?

How do we go to the gas station?

It's gonna require work.

So it's not easy when you feel like to be like, pick myself up, go take a cold shower, go do the breathwork go dude.

Like it's hard.

But when you do it, you fill up the tank, you come back online and you're like, I'm present again.

And, and it's a way to do it with the people you love versus isolating and destroying the things that you love josh.

I really love um, the framework that you use within looking at trauma and I know that this has really been a lifelong practice for you as well as Philip and that you guys have developed this together.

But I want to thank you for, I know that you think a lot about Language Ng and how do we, how do we talk about these difficult aspects and what are the practices you've done the research to?

Um, you know, make these evidence based practices come to light so that and making the language makes them more palpable.

So I just want to thank you for your framing and the thought that you've put into Language Ng and all the work that you do to support warriors because there's so many warriors out there and they need your work.

So thank you so much.

Yeah, I'm, I'm honored to do this work and I just believe we need to take care of our, our warriors are warriors have been serving our communities.

It's time we take care of our warriors and there are science based practices that it just needs to be taught and once we teach them, we get our lives back.

And so I've got my life back and I know everybody can get their life back.

So I'm just an advocate for sharing this because I believe those that are serving need it the most like and and it's also the thing, those on the frontline are the Canaries in the coal mine.

So this is going to be happening everywhere else in our culture.

So if we can help our or your culture, um those that are responding to everything that's happening.

We're going to be able to take care of our society together.

Thanks so much for having me on, it's been so fun being here with you and I really appreciate the conversation and you're sharing this so that more people can apply it.

How can people learn more about your work Joshua and how can they find you, yep, they can either find me through my personal sites.

Just Joshua Wenner.

J O S H U A W E N N E R.

That's also my Instagram is just Joshua Michael Wenner.

Um I also have K4 men for any men that are looking for men's work, community to learn these practices and tools for men and have community also about 50% 1st responders.

And then I also have Valor Resiliency and the last piece is Emotional Resilience Training (ERT) which is I have a trauma toolbox and a lot of these frameworks that if you want to play science based music and actually watch people do these breathwork and these different exercises.

I got a whole bunch of exercises on there, awesome.

A wealth, a wealth of knowledge.

And thank you again for sharing your story and sharing your life's work and can't wait to see how it continues to evolve.

Um so thank you again for your time today.

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