

241. Emotion Coaching Skills for Families with Mindy Solomon (EFFT Part 2 of 2)

Mindy Solomon: [00:00:00] So first you've gone through the validation. You've really shown that you understand it at her level.

And then the emotional support is kind of attending to the sense of whatever it is that they're kind of bringing up like. I think that we'll be able to figure this out together. Like I really believe that we're going to be able to come up with a solution. That's going to feel okay for everybody.

Debbie Sorensen: That was Dr. Mindy Solomon on psychologists off the clock.

Yael Schonbrun: We are three clinical psychologists here to bring you cutting edge and science-based ideas from psychology to help you flourish in your relationships, work, and health.

Debbie Sorensen: I'm Dr. Debbie Sorensen, practicing in mile high, Denver, Colorado, and coauthor of ACT Daily Journal.

Yael Schonbrun: I'm Dr. Yael Schonbrun, a Boston based clinical psychologist, assistant professor at Brown University, and author of the upcoming book Work, Parent, Thrive.

Jill Stoddard: And from sunny San Diego, I'm Dr. Jill Stoddard author of be mighty and the big book of act metaphors.

Debbie Sorensen: We [00:01:00] hope you take what you learn here to build a rich and meaningful life.

Jill Stoddard: you for listening to Psychologists Off the Clock.

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Debbie Sorensen: We are back with part two of our series [00:02:00] on, using strategies from emotion focused, family therapy or EFFT. In our first episode in this series, we interviewed Dr. Adele LaFrance, and this is part two, where we have Dr. Mindy Solomon. Who's also a psychologist who uses this approach and she talks about some clinical and really practical application of this model.

Yael Schonbrun: . I really liked that she talked to. The limitations of, of therapists, because if you just have one person or even two people in your office, those are the only people that you're actually working with. But if you're having an impact on how those people are, To other people that are close in their lives.

So if you have a parent in your office and you're teaching them skills of how to relate differently to their kids, it really extends. It gives you a lot more leverage to have an impact, a larger impact on the family. And so one of the ways that she talks about EFT is having an impact is by. Different skills of how people can relate within the family system.

And so you're [00:03:00] having, even though you're only maybe working with the parent, you actually end up being able to kind of shake up the homeostasis of the family. And that's a really important element of how family therapy can really have a long-term and very significant impact. And I think that what can be important, you know, whether you're a therapist or just somebody who exists in a complicated family system, By changing how you engage in that system, you can really change the dynamic of that system.

And so Mindy actually leaves people with a lot of concrete ideas about how to approach things that haven't worked in the past in different and more empowered ways. And that is consistent with some of the philosophy of this.

Debbie Sorensen: Well, one of the ways that this has materialized in my own life is with how my husband and I, who are co-parents of our two kids, but how we talk about our differences in styles as a parent, in E FFT and Mandy talks about [00:04:00] this in the episode, they have these metaphors of different animals, styles as parents and how sometimes we have these differences, but we're reacting to each other in a way that drives us apart even more.

So we react to each other and get even more extreme in our parenting. So my husband and I have actually adopted this language a little bit in our parenting. talk about it and this has given us a language to name it.

And when we name it, we can almost joke about it a little bit. And what we want to do is find. Both a way to balance each other out, but also a more flexible response and meet in the middle. And it's so helpful just to have strategies like that, things that you can do and say that will help you understand what's happening and know how to, how to respond effectively.

It's diffused a lot of situations where we would typically be butting heads against each other.

Yael Schonbrun: Yeah. So again, I mean, this treatment has a scientific backing, but what it'll leave you with a lot [00:05:00] of great skills of how to approach complicated situations in close relationships.

Debbie Sorensen: My guest today, Dr. Mindy Solomon is a psychologist in Denver, Colorado with over 20 years of professional clinical experience with children, adolescents and families. She's the founder of mile high mental health. Mindy served as the clinical director for Children's Hospital Colorado's internationally recognized eating disorders program for 12 years. She's published her work in peer reviewed journals and presented at national and international conferences. She specializes in the scientific study and treatment of pediatric eating disorders and related conditions. Such as anxiety, depression, and OCD. She's a dedicated teacher and mentor who has supervised the work of dozens of psychologists, master's level clinicians, medical students, and psychiatry residents, and fellows. She's a clinical associate professor with a faculty appointment through the university of Colorado school of medicine. Mindy is a certified advanced. [00:06:00] Therapist and emotion focused family therapy. And as a certified eating disorder specialist with advanced training in

and experience with family-based treatments, for eating disorders, she offers trainings and workshops in EFFT for families and caregivers.

Welcome Mindy. It's great to have you.

Mindy Solomon: Thank you. Thanks for having me.

Debbie Sorensen: Well, it's our pleasure. I'm really looking forward to the conversation. Um, in the previous episode that I just recently released, I interviewed your colleague, Dr. Adele LaFrance about emotion focused family therapy. And today we're going to continue that conversation by talking a little bit more about the clinical applications of eff EFT for families, especially families, where someone is struggling with some sort of mental health condition or challenge, you know, emotional challenge of some kind. And so just for listeners who are tuning in, if you would like it, I'd recommend going back and listening to that episode with Adele, because we're going to be building a little [00:07:00] bit, she laid the groundwork and we're going to be building a little bit on, you know, what she taught.

So check that out. Um, so many I am I right in assuming that you first started using EFT in your work with eating disorders at children's hospital, when you were, um, working in that sense?

Mindy Solomon: Yes. Um, so I kind of came across EFT, serendipitously. Um, I had been working at children's for a while and, um, we did a lot of work with families, so that was kind of. The primary thing was bringing families in and doing as much work as we possibly could with families, really trying to look at them as their they're the resource.

They're the main resource that we kind of have. And we were using kind of a, an adapted family-based treatment model. Family-based treatment is kind of the gold standard evidence-based treatment for eating disorders for adolescents, but it's an outpatient model. And so we had to do a lot of adaptation to bring it into a higher level of care model.

And what I was finding was that. [00:08:00] For the families that it worked well for, it worked really, really well for, they would kind of go through our program. They would go through our, our phases and kind of do the things that we predicted that they were going to do and kind of the struggles that they were going to have at particular times.

And then there would just be families where no matter what we did, no matter what they did, they would just seem to hit these roadblocks. And we just didn't have. A great way to get underneath them. And these would often be families that we'd see for readmissions, but also sometimes families that were just there for the first time.

And it didn't really, it wasn't really tracking with kind of what we were seeing with our regular, with our regular model. And so I was really looking for, what else can we do? How else can we kind of get underneath these issues? How else can we kind of look at some of these things. Maybe loosen up some of the barriers that we were finding.

And it just so happened that Adele was, um, looking to be moving to the Denver community. And she was reaching out to, to, um, people that were working in eating disorder treatments. And, um, we, we connected. This was the [00:09:00] first time I'd ever used zoom in my life. Pandemic, obviously this was

Debbie Sorensen: While you were ahead of

Mindy Solomon: or 17. I know I got this email invitation that said come to my zoom meeting. I had no idea what it meant. Honestly, I thought is this one we're going to show up in my office. Like, what is this zoom meeting? I clicked on the link and met her for the first time. And, um, we just, and I had read some of her papers that she had sent me and I, I, it was sparks kind of went off. Like I fell in love with a model.

I was like, this, this is what we've been looking for. This is the answer. This is, this is how we get underneath and kind of loosen up some of the steps that we can kind of get back on track to doing some of the more behavioral interventions that we beat, that we were trying to do with, with our eating disorder treatment.

And, um, you know, I met her and we talked in that first meeting and it was just everything about how she had come to. Come to create the model and what EFT kind of stood for, just really resonated with what we were looking for in the program. Um, so we started kind of using it. We started started teaching parents, some of these skills.

We started [00:10:00] using some of the, some of the techniques. We did a training for our staff to, um, to kind of get this new lens on how to look at things and how to look at some of them, some of the, some of the families and the

different contexts that we were struggling the most with. Um, so that's, that's kinda how it, how it all started.

Debbie Sorensen: Well, this is great. And there's a couple, so it's lucky that that happened that way. Fortunate timing. I'm curious about two things about what you said, um, that maybe you could just unpack a little bit the first. Y so specifically with eating disorders, but I also think more broadly, you know, especially with young people.

Why is it so important to engage families and caregivers? And then also, what was it, what was like the, the piece that EFT, could you just tell us a little bit more about the piece that EFT brought in that you most, that seemed most helpful in your.

Mindy Solomon: Yeah those there, those are great questions. Um, so starting with the first one, why, why families and [00:11:00] caregivers, and I'm sure that Adele talked about kind of the neuro-biological connection and the, and the power of that attachment between, between caregivers and kids and how. H how, how indelible that is and how powerful that can be.

Um, that's one and two is kind of logistics. You know, like parents and caregivers are with their kids far more hours than we, as clinicians are. And so the capacity for caregivers to be able to have influence over their kids, just for sheer sense of how much time they spend together and how well they know. Then add the neuro-biological power that kind of comes with that relationship. And it's, it's kind of becomes like a kind of an eye-opener no-brainer of course we want to involve parents and caregivers in their child's care. One of the worst feelings in the world for a parent is to not know how to help their child, um, and being able to put tools in the hands of parents to say, no, like, I want to really empower you.

Like. [00:12:00] You, you do have this, it's in your gut, it's in your DNA, it's in you, it's in your, it's in your bones on how to connect with this person. Right. And that's really what we want to, um, we want to unlock the power of that and the power of that potential to be able to do that. Um, and interestingly, it's kind of a sidebar, you know, one of the, one of the tenants of family-based treatment for eating disorders completely separate from EFT is empowering parents.

That was one of those things that we could say, because it was one of the, this is one of the things that we do is we really want to empower you as parents to do this, but we didn't know how, and that kind of leads into your second question of

what it was that, that kind of sprung out to me as like, oh, this is why EFT is going to work for this, because it really goes into the, how do you.

Empower parents. Why do parents feel disempowered? How does it become like that? How does it get to the point where parents are feeling so helpless and hopeless and not knowing how to help their kids, that we need to empower them. Right. And so it was kind of, it was that, that really, that really sparked the, not only does this support kind of what we're [00:13:00] already trying to do, but it really breaks down in a really supportive, nonjudgmental, loving, compassionate way.

What. What happens to kind of, to relationships that makes it so that parents are feeling so lost as it relates to help being able to help their child. And like I said, it's one of the, I think one of the worst, one of the worst feelings that you can have as a parent is watching your child suffer and not knowing how to reach them.

So being able to have some useful tools and to be able to compassionately and gently help parents realize that this is what's happened and that they can get this back. Um, I mean, it was kind of magical in a way to be honest with you. At first, I thought it was a little too good to believe. I kept saying like, am I, am I drinking some Kool-Aid because this is really magical, powerful stuff.

And really being able to, to get parents who are feeling really. Really lost and really hopeless and really helpless and really estranged from the emotional landscape of their child to really feel empowered and engaged and hopeful. Um, being able to watch that transition and then just watch how that affects [00:14:00] kids.

You know, the kids always talking about like, you know, I just want you to be my mom. I just want my mom. I don't want a therapist. I don't want somebody clinical telling me what to do or how to do it. Like I want my parents, I want my mom. I want my. Um, so being able to kind of watch that process happen was, was very, um, it's, it's kind of what, what, what really locked it in is, is this is, this is, uh, this is a set of skills and strategies and techniques and a philosophy that I really want to embrace and really want to learn as best as I can to help people with.

Debbie Sorensen: Yeah. Well, I just, I think as a parent myself, and I mean, you're a parent too Mindy. I mean, I think that you can just relate to that feeling of how you want nothing more than to help and to do whatever it takes to

support. You know, your kid or other family member. I mean, it could even be, we're talking about kids here, but it could be anybody, but just sometimes how, um, it just feels so sad when you want to help, but you don't know what to do or say, not that there's like a right, like only one thing, but we're going to go through some examples of the skills.

[00:15:00] And I think it gives you this empowered feeling of like, I can do something and I have a sense of what might be helpful. Right.

Mindy Solomon: Exactly. And especially when you're talking about talking about a child, who's having some mental health or behavioral health struggles, where a lot of what you get as parents is this is what you need to get your child to do. So in the case of an eating disorder, right? Anorexia, for example, my child's not eating or not eating in the right amounts.

And the intervention is you need to get them to eat more. It's a behavioral intervention. That's something that you need to get your kids to do so that, you know, in one hand it's like, okay, here's a role for me. Here's something that I can do some way that I can be involved. But when there's an emotional barrier that kind of comes in between you and your child, being able to do that.

And you don't, you don't know what to do, then you become really disempowered and really, um, that's, that's where kind of that spiral of, of helplessness and hopelessness really comes in as a [00:16:00] parent is you're being told, this is what I need to do, or, you know, this is what I need to do, but. You're not able to access your child.

You're not able to kind of get, get there. Um, and then when the emotional suffering comes along with that, Right because obviously if, if whatever behavior they're doing or not doing, Um, that's there because of some emotional suffering that they don't have any other way to process. So when you, when you bump up against.

Emotional struggle and you don't have a way in, it really creates a sense of disempowerment. It really creates a sense of, of disconnection. And that's, that's really, it's really debilitating. I think for a lot of families.

Debbie Sorensen: Yeah, there's that saying that all human behavior makes sense in context. And if you think about what's going on here, it's not just about do this. Don't do that. It's like, I think EFFT digs a bit more into like the

underlying emotions and what's going on and the, yeah, the kind of overwhelming feelings that are driving some of those behaviors.

Mindy Solomon: That's right. That's exactly [00:17:00] right. Really, really taking that lens of, of all behavior makes sense. Right? Like everybody's, um, everybody's doing the best they can with what they, what they've got. You know, that's a big mantra in EFT and that's one of the ones that I hold really close to my heart and think about all the time is.

Everybody is doing the best that they can with what they have. And it makes sense in context. And when you can approach things from that, non-judgemental, um, non-directed way in a sense, it really helps kind of open up your ability to connect with people and really help you get underneath whatever struggles are happening and loosen up the barriers that are, that are there to being able to do the things that, that we need to do to be, to be our healthiest.

Debbie Sorensen: Yeah. Yeah. So tell us a little bit about the work that you do now, because I think so you were working as the clinical director in this eating disorders program, and now you're, you know, you're in private practice at mile high mental health. And I think that you still do similar [00:18:00] work, but maybe like, what are the, some of the kinds of struggles you see and the kinds of families that you work with?

Mindy Solomon: Yeah. So, I mean, one of the main impetus for me to, to go off on my own was that I wanted to do more work with families. Um, even though we were doing a ton of work with families at children's, obviously our, our, our, our patients, our clients were still primarily the kids and running the program. And I really wanted to be able to.

More individually with families, go a little bit deeper with them, be able to get a, um, kind of a deeper dive with some of the things that were going on. So now in my practice, I, I do see, um, I see a smattering of, of, of individuals and families, but really what I'm focusing on is just families in general and relationships in general, and really trying to help make, uh, relational skills accessible using the EFT.

Model, um, to, to guide a lot of the, the interventions and different things that I'm doing. So now, you know, I'll see families that have, [00:19:00] you know, maybe a child or adolescent with any sort of behavioral or mental health

condition. Um, sometimes I see families that have grown children, you know, adult children.

And I see, you know, maybe they're a strange, or maybe they have a difficult relationship and they want to improve that. So I'll work with?

with families in that situation. kind of runs, runs the gamut, but just really focusing on the relational components and the emotion focus techniques.

Debbie Sorensen: Yeah. And you do those workshops for parents and caregivers as well, which I did one and it was fantastic, super helpful. Um, and something I think is interesting about this is, um, you know, your work is so centered on bringing families together and supporting families and caregivers. Um, what about when the person who's struggling?

Right. So maybe say at someone with an eating disorder or some other, you know, emotional or behavioral struggle that they're in, but they won't engage.

Mindy Solomon: That's a great question. And that's one of the things [00:20:00] that this model is really super useful for, and really helped open up the flood gates of what you can do with therapy and a really honed my sense that all therapy is family therapy, no matter who's in the room with you. So even when you're just working with one individual, you are working with their, their current family system, their family of origin system, and even, you know, Multi-generational kind of family stuff.

That's influencing the presentation of what you see, even in an individual. So really kind of looking at it through the lens of. Attachments and, and family connections and the bucket of support that you live in, whether it's your current bucket, your previous bucket, kind of, whatever other stuff you've inherited, um, that that's what you're working with.

And so this model really lends itself really nicely to being able to treat whoever shows up in the room from that family kind of context. Our goal is always to increase. Increase and encourage the S the strength of the bond in, in the people [00:21:00] that you're most connected to in your world. Um, so, you know, for example, oftentimes we'd have a situation where there was, you know, maybe a teenager with an eating disorder, you know, maybe teenager, who's not interested in family therapy, which is most teenagers.

Um, and, you know, I can work with the parents, basically. It can kind of have them come in and. Tell me what they're struggling with. Kind of tell me what some of the things are that they're, that they're having a hard time with getting their kids to do or connecting with their kids or understanding what their kids are going through.

And I can work through, um, the emotion focused skills with them. I can help them understand what might be happening with their kids, how to talk to their kids, and then they can go practice those interventions at home and then come back and report to me, this is how it went. And sometimes that's the way that I end up engaging the kids over time is saying to them like, okay, First session I'll say to them, um, I'm going to do three sessions with your parents.

This is what I'm going to be working on with them. And then, um, [00:22:00] in the fourth session, I want you to come back and tell me how they did, right? Like, I want you to tell me how they did with, with working on these interventions. That I'm, that I'm showing them. I want you to tell me how they did, how it feels, what you like, what you didn't like.

Um, and that's a way of really being able to engage.

kids and family therapy that really don't have much interest in being there. They're used to showing up and having all of the focus be on what they're doing wrong and what they need to do differently. So really being able to flip the script for them and say, Nope, this is an intervention that, that I'm going to do with your parents.

I tell them exactly what it is. I'm going to tell them exactly, you know, what they might feel, you know, like it might feel really awkward. You might feel really uncomfortable. You might really hate this and that's okay. I'm going to tell your parents to keep doing it anyway so that they're, they're engaged with the, with the intervention as well, without, without knowing it really.

So,

Debbie Sorensen: It's so empowering to them. They get to actually be involved, but it takes the heat off them. They get to like, you know, give their parents feedback and actually have a role of like, it's so transparent, but it's also. It gives them a different, it gives them a little more power,

Mindy Solomon: [00:23:00] Yeah, absolutely. Absolutely. And it really, it really does zoom out of, of the, of the problem and look at it as a context. There's some emotional stuff that's kind of going on that we all need some support on how to get through, right? Not, you need some support in this emotional stuff because you're the one struggling, but also just the emotion in the family in general is really, it's hard, you know, it's hard to deal with.

It's hard to know what to do with. And so I'm going to try and help your parents have a better, um, response to that when it happens for you. And sometimes I'll get them to tell me, like, what do you know, what do you think your parents would do if, if you told them that and you know, sometimes. You know, I wouldn't tell them this because I've been afraid that they would be really upset or would make them really sad or it would really scare them.

And so then that gives me kind of an indication of, okay, that's the work that they need to do with the parents, so that eventually this child feels comfortable being able to say whatever that is to their parents, without having that response that they're afraid their parents are going to have. So I would be very transparent about that and say to the parents, like. Have your reaction with me here. I'm going to [00:24:00] tell you this. I get permission from the kids first, right? And I say, is it okay if I tell your parents this, when you're not here in a session and you know, this is what I would say, and this is how I would say it. And if I get permission from them, I'll say to the parents, okay, your child wants you to, wants you to know this, or would like to tell you this.

They're afraid of your reaction habit with me. And so they get mad. They get sad. This is distress dysregulated. And then I have that emotion in the room and I can help them process through that emotion so that by the time they have that conversation with their child, it's, it's worked through and they're able to have the response that their child needs to, whatever it is that they wanted to talk to.

Debbie Sorensen: Yeah. Yeah. Okay. So that's really, that's interesting. I kind of, it's an, it's a role where you can help them. Threw it on multiple levels. And I, I mean, where EFT is helpful in my practice. So I don't work with families at all. The thought of it terrifies me. I have my hats off to you, but I work with tons of adults who are [00:25:00] parents and who struggle with these kinds of things.

And I think what you were saying earlier about how the family is who's ever there. So, of my clients are, I don't know, what do I do in my kid yells, blah, blah, blah, blah, blah. of course, you know, I, as a clinician, want to be able to help

them navigate that, knowing that that will help, not just my client, who's having their own emotional reaction, but also their kid and the whole family.

So it's like, it's a win, win, win, win, win.

Mindy Solomon: Yep. So one of the great things for exactly that, um, that EFT has is the FFT is really big on writing scripts and being transparent with interventions, which I love, because I think it's incredibly powerful. Um, and like we were saying before, when you're in the heat of a moment and you have something that, you know, that you can do that you've practiced that you've kind of, that you can hold onto.

It's kind of like, um, It's like a grounding thing. And it was like holding the grab bar of a subway or the train or something, when it's going over, something really bumpy. And you're like, oh, I'm on a bumpy road. And you have that grab bar. And you're like, I know what [00:26:00] to do to keep myself stable. Um, so you can write scripts with parents for these difficult moments so that they, that their systems can practice what it will feel like to be in that moment.

So that it's not, it doesn't, it doesn't rock their system, like a, like a jolt on A train, you know? So like, okay. I know what to do in this scenario. Um, so it doesn't, it doesn't elevate the parent's nervous system to that point of kind of freaking out or getting really distressed or dysregulated when their child is really distressed and dysregulated.

So oftentimes what we'll do with parents is if they're struggling with something like you're bringing up, like, I don't know what to do when my child does this, or, you know, my, my child gets this way and I, you know, I lose it or I don't know what to do. We'll actually help them write a, uh, a script for, for, uh, emotion coaching, their child.

Um, so emotion coaching is one of the skills that we teach in pfft. And it's a two step process to step skill. I don't know if Adele talked much about this in particular.

Debbie Sorensen: A little bit, but [00:27:00] actually I think it would be really helpful to hear your take on that and to hear, oh, maybe this would be maybe a good time for us to do an example of one.

Mindy Solomon: Great. Yeah. So why don't you give me a, why don't you give me a classic parent child scenario that, that either comes up for you as a parent

or that you hear in your practice that you, that you think it would be helpful to have kind of a, a script for it. And I can, I can coach you in writing one.

just the same way would coach any other parent who's in my office.

Debbie Sorensen: Okay, so this is great. So I'm the parent and you're the, you're going to be you. And we're going to, you're going to, we're going to show people a demo of what this is like, so, okay. So the, I think a situation that, know, happens a lot that I feel like I do not handle super well is so I have two kids and when they fight with each other and they stay usually it's because something's not fair.

Like one of them gets to do something or take someone's toy without asking, or like they get, you know, one more cookie or whatever the case may be. Um, and they just [00:28:00] like start yelling at each other, fighting saying terrible things, that kind of thing. And I think sometimes. My responses are not so great to that.

Either. Stop it right now.

Mindy Solomon: And you fall into your old patterns of how you want to deal with that.

Debbie Sorensen: Mindy. I will tell you recently they were fighting over a balloon, which is kind of ridiculous because they're nine and seven and it's like, really they're fighting over a balloon. I threatened to pop it if they didn't stop fighting. I mean, ridiculous. I was just so like knock it off, you know, which I, it wasn't the worst thing in the world, but it was certainly not my finest moment.

Mindy Solomon: Right. Sometimes things are effective. And then in retrospect, you're like, oh,

Debbie Sorensen: I don't think it was effective. It caused it escalated the situation.

Mindy Solomon: Hmm, well, balloons are good metaphors, but so, so that's great. And I think that's probably really, really common. Right? So what I'm going to suggest that we do for, for simplicity of our demo is to [00:29:00] have you focus on one of your two children, right? Maybe the one that, that has more, um, emotional distress in, in these, you know, the one that, that, that needs a little bit more emotional support to kind of get through some of these instances.

In real life, right? Often you're, you're playing emotion coaching. Blockable when you have more than one kid, cause you're gonna emotion coach this one over here, and then you're going to have to switch over to this one over here and do these things for both of them. Right. But I think for, for sake of our, of our talk,

Debbie Sorensen: Okay.

Mindy Solomon: let's maybe have you focus on one of your children in a fighting scenario where maybe, you know, it's not fair, is it really is a really great one to kind of use as an example.

Cause I think. I'm going to say a hundred, but maybe 99 out of a hundred parents deal with it. It's not fair if they have, if they have more than one, one child at home. Um,

Debbie Sorensen: Okay.

Mindy Solomon: So basically what we would do in this scenario is look at well from her perspective, right? Why is it not [00:30:00] fair? Like let's, let's kind of, let's kind of brainstorm together, um, from, from her perspective, why it wouldn't be fair that her sister gets to hold the balloon for 10 seconds longer than she does or why her sister gets still hold the balloon and she doesn't or whatever the unfairness.

Yeah.

Debbie Sorensen: from her perspective, it was not fair because it was her ballooned. She was the one who found it and. Who, you know, blew it up and tied it. And it was hers and it was not fair because her sister took it without asking.

Mindy Solomon: Yeah.

So that, that makes a lot of sense. Why should be pretty, pretty angry about that situation? So emotion coaching has two steps. The first step is validating validating from. Her perspective. Right? So this first step is really showing her that you understand the emotional space that she isn't.

And it makes sense from her perspective. Right? So oftentimes I use this example of like, if [00:31:00] somebody is, you know, looking over there in the

corner and they're saying like, there's a fire over there, right. Or there's a bear coming at me and you know, there's no bear and it's the most ridiculous thing ever.

But you kind of turn and you look and you see the shadows or the outlines of whatever it is that they're looking at. And you're like, okay, I kind of see how that would be a bear to her. Right. Like I kind of see where that's coming from. So validating is basically saying, I'm going to twist myself to kind of look at things through your perspective as best that I can to understand what you're seeing in your world and how it kind of fits for you.

Right. So, You do that step by coming up with three because right. Three reasons why, whatever it is that they're saying makes some sense from their perspective, from their worldview. So I understand why you would think that this is totally unfair because you found the balloon, right? Like this was your balloon to start with.

And why else might it be really unfair that whatever's happening, that she has.

Debbie Sorensen: I think because she's really excited about it and it, [00:32:00] it doesn't feel very good when she, when someone else takes it away.

Mindy Solomon: Yeah. So you were really excited about this balloon that you found, and it feels really unfair that you're going to have to share it with somebody else that you don't get to have it all for yourself. Right. And then in the case of siblings, you can usually kind of go for the, for the slam dunk, which is, um, always feel like you have to share with your little sister, or it always seems like your big sister gets to have this thing that you don't get to have.

Right. Like kind of the, the, the real core of what's driving that emotional heat, right? Like we know they're not really fighting about the balloon. Like you said, it's kind of ridiculous, but what they are fighting about is this deeper kind of the sense of unfairness, this anger of like, I want to set my boundary and set my parameter and have my voice.

And here's all the reasons. That I understand why that would be happening with this example of the balloon. Right. Like I found it, that's kind of, the balloon example is really excited to be able to play with it. And I always have to share my [00:33:00] stuff with her,

Debbie Sorensen: Yeah. There's like an anger about that feeling that she's always getting a little more. She always takes my left. Yeah.

Mindy Solomon: yeah. Yeah. You, you always have, you know, you, you always make me have to be the one to go to her level. All the little sister stuff, right? Like it always has to be me. She never has to share with me when it's something that's really important to her. Right. Those are all the kinds of things that might be that might be kind of happening for an older sibling, having to share with a younger sibling or something that's not fair.

So that first step is you really kind of coming up with, from her perspective, why it makes sense that she'd be really holding her ground on this. And it's really not fair and getting really emotionally escalated.

Debbie Sorensen: Okay. So on the script we have like that valid and kind of the reasons

Mindy Solomon: out the three because it's, so I would be writing out all this stuff. So it's not fair, you know, I understand why it's not fair because you found this and this was yours. And because this was really special and you were really excited to have it all for yourself and you always feel like you have to be the one to just [00:34:00] share with your little sister and be the one to have to be the, you know, take the higher ground or, you know, set the example or whatever words might, might be right for your.

Debbie Sorensen: yeah.

Mindy Solomon: Yeah.

So then what we would do after we've written those three, three things down is, um, we'd, we'd, we'd practice them with each other. Right. So first I will read, I would read them back to you and have you kind of assessed, like Yeah. Do those words fit? Does that kind of hit what I know about my child kind of the way that I, that I know her to be, how would that sound to her?

And then if we need to make any adjustments to the wording or change things up a little bit, we can do that. And then you get to practice saying it to me a few times. So that's. able to train your system to kind of go to this grab bar right. Of the more you practice it. And the more you say, the more natural you kind of feel, the more likely you are to be able to grab it when you're kind of in that, in that bumpy kind of road. So that's step one, step two of emotion. Coaching is

providing support, right? So emotional support and practical support. [00:35:00] Always emotional support, which is kind of what I think of as like offering an emotional olive branch. Right. So first you've gone through the validation. You've really shown that you understand it at her level.

And then the emotional support is kind of attending to the sense of whatever it is that they're kind of bringing up like. I think that we'll be able to figure this out together. Like I really believe that we're going to be able to come up with a solution. That's going to feel okay for everybody. Right.

So it's providing some sort of bridge to say, I'm in it with you. Like we got this. Right. So emotional support statements might be, I believe in you. Like, I really think that this is something that you're going to be able to do, or I believe in us, you know, we can do this, we can figure this out together, or I'm here for.

Right. So I'm, I'm in this with you. So anything that kind of provides the emotional containment for you're going to be able to get through whatever this emotion is that you're feeling in this example, that it's not fair. We were kind of dealing with some, some anger and kind of some, you know, some boundary kind of stuff.

So [00:36:00] that's where you kind of drive the emotional support from is we're going to be able to figure this out. We're going to be able to figure out the right limits that are going to make this. Right. And then the next step is practical support, which is doing something right, which is actually following through with doing something.

That supports kind of the process of moving through this. So it might be with an older child that you figure out with her kind of what seems more fair, what seems more reasonable as a way of managing this balloon? Um, for the younger kids or with a kid who's still pretty dysregulated, it might be you setting some limits of, you know, what you're right.

Like it really, it really isn't fair and you should get to have more time with it. And so here's what we're going to do. Like you're going to get to have the balloon for. Four days a week and she's going to get to have the balloon for three days a week. Um, right. So you kind of offer some sort of practical support sometimes it's, you know, setting a limit or having them get up and do something, but at some action, so you go validation and then support and [00:37:00] that's, that's the two steps of emotional coaching.

Debbie Sorensen: Yeah. Great. Could that kind of support involve like some, maybe teaching them some good words to say, like how to communicate better or like, oh, maybe you could tell your sister or could it be something like on that level where you're okay.

Mindy Solomon: Absolutely.

Debbie Sorensen: You're helping them

Mindy Solomon: You're helping them problem solve, navigate communicate, and oftentimes problem solving or kind of this practical support is where a lot of parents go first because it's the most logical part of the whole thing. Right. So when somebody is having an issue over something, parents are usually really clear on what needs to happen to make the situation. Okay.

And. I shouldn't say there, we, right. I'm included. We are often very surprised when our very logical practical solution doesn't land very well with our kids. Right? Like it makes perfect sense to us, but they're not having it. So what this process does is it kind of attends to the emotional barrier that is in between.

You and your child at that moment, right? Like you're very wise practical [00:38:00] support. You know, sometimes your child really normally has very good problem solving ability or is normally really good person to share. But something about this situation brought up this emotional swell. And so you need to know how to tend to the emotional swell, to kind of lower it a little bit, so that there's more flexibility in the other person to be able to act on some of those practical logical solutions that we like to.

Debbie Sorensen: Yeah. Well, thank you for running through that example. And I like how it's. So, um, you know, just as the parent in this scenario doing this demo, I think that how it felt to me is just like, It also felt empowering in the sense of like, okay, I have some thoughts about how to do that. And actually we used a very specific example, but I could imagine probably that balloon thing won't happen again, at least not exactly that way, but that I could almost apply it in my head to like, well, who knows what the next argument between them?

Mindy Solomon: Right. I guarantee there's going to be another situation where something's not going to be fair, right. Or there's going to [00:39:00] be

Debbie Sorensen: Probably later on this afternoon. Right?

Mindy Solomon: absolutely. You know, they got, they got, they got a bigger half of the muffin or the cookie or whatever the thing is. So there's always, there's always some.

Um, and Yeah having, having the tools kind of at hand to say, like when there's an emotional swell at being able to do this process of validation and emotion, coaching them through it to get to the other side feels empowering to us as parents. It helps us regulate our own nervous systems. That's the other thing that happens, right, is when our kids are in a world where we don't really know how to relate to them or reach them or their behaviors or actions are, triggering. in us and some emotional response in us, that's oftentimes where we get into those centers where we just, I'm just going to pop the friggin balloon there. Right? Like

Debbie Sorensen: Yeah.

Mindy Solomon: that's an indication, right. That, that works. We're activated now we're in it.

Debbie Sorensen: Totally. I may, I will admit I was a little dysregulated when I made that comment. Well, that's [00:40:00] a perfect segue actually, because I wanted to ask you about, you know, any EFFT there's this idea of blocks, right? Like caregivers get riled up, they get their own emotional dysregulation. And I was wondering if you could just, talk a little bit about those emotions driving parents' behavior and maybe some of the, some examples of the kinds of things that you might see that parents kind of, I don't know. Do that's less helpful

Mindy Solomon: one of the ways that we like to talk to parents and caregivers about emotions and kind of their, their, their responses and kind of what goes on with them is, um, it's really great animal model metaphor that. That EFT uses. Um, it's from the work of Janet Treasure who has a desk she's from, um, great Britain.

And she does a lot of work with working with family members of people with eating disorders. And that's where it came out of her, her research. But essentially. We look at things and kind of these two categories. One is parents, emotional response style. So kind of our [00:41:00] own looking at our own

way that we tend to respond emotionally to emotional situations and animals that we use to talk about that are there's the parent that has the jellyfish.

Response to emotion. So when there's emotion present in the other, their emotions kind of go like a jellyfish. They just kind of go all over the place. There's no boundaries in there. They're, they're activated like they're emotional too. So when there's an emotion out there, there's an emotion in here.

That's the jellyfish kind of response. And on the other end of the, of the spectrum on the way other end of the, of the pendulum of that, there's the ostrich response, which is when there's an emotion out there. I am somewhere else. Emotion is happening. I got my head in the sand. I am somewhere else. I am not looking at that emotion.

So those are, those are the two kinds of extreme ways that, that, that parents could get. People can kind of get in response to really heightened emotional states. And what we want to try and help parents create [00:42:00] is the St. Bernard emotional response style. The St. Bernard emotional response style. Adele tells us. Um, because I guess there's a commercial in Canada that uses this metaphor of a Saint Bernard. Who's going through the blizzard, you know, through any, any conditions, you know, wind and snow and whatever, like going through the blizzard to bring. Little thing of whiskey to the person suffering up in the, up in the isolated hut, in the middle of the blizzard, right?

It's the thing, a NyQuil or something. Um, and that's kind of the metaphor and that's the emotional response style that we want to help get towards, which is consistent, reliable, warm. They're kind of through whatever emotional storm there is going on, you're available and you're, um, attainable and you're there with kind of the special sauce that's kind of needed.

Right? So that's how we talk about that. And that's kind of the, the emotional response that we want to try and, and work towards. And then the [00:43:00] other thing that we think about is our own caregiving styles. So our own response caregiving. And the animal models that we use to talk about caregiving responses is we have a kangaroo parents, which is what you might imagine, you know, kind of the protective and more of you think of like the kind of more nurturing and keeping somebody in your little pouch protected from everything that's bad in the world.

And on the other end of that spectrum, we have the rhinoceros parenting style or caregiving styles. of urging people along, like, just do it, like let's just get it

done. Let's make it happen. When you know, we got it. We got to get this done. And that caregiving response style that we encourage parents towards the middle ground is a dolphin response style dolphin.

Our flexible swimmers with they're young, so they can swim out in front and lead the charge. If that's what's needed, they can fall behind and kind of watch from behind and kind of nudge along if that's needed. And they can also swim up around the side and keep their, keep their little ones [00:44:00] protected, you know, and kind of on the path if they need to.

So the dolphin response style is kind of this flexible being able to kind of meet the needs of the child wherever they kind of are. We talked about that as kind of the foundation of this applies to everybody. There are no parents that come out as they are always St. Dolphins. We think a lot of times some of our parenting falls into that St. Bernard dolphin, but when times are troubled, when there's a lot of stress, when there's a lot of distress, when there's a lot of dysregulation, We go to our natural response style automatically it's hardwired in. And so in order to do something different, it requires skills and practice and retraining your brain and knowing what your default is and knowing where you tend to go. And then being able to kind of work towards how do I get more? How do you know in this situation and the situation that tends to trigger me or dysregulate me, or get me [00:45:00] into my jellyfish or get me into my care, kangaroo care, giving response. What do I personally need to do to turn one step towards that middle ground?

Like what is something that I can do to regulate myself to act more like. What I want in, in, in kind of the middle. Um, and interestingly enough, I'll just kind of say a word on co-parents right? And then there's two parents are more involved. Um, we tend to polarize each other's response styles. So oftentimes in a couple you might see that one parent is more of a jellyfish and the other one is more of an ostrich.

You also might see that one parent is more of a kangaroo and the other one is more of a rhinoceros and we inadvertently polarize each other. What happens is when parent A goes into kangaroo mode and parent B sees that they're like, oh, I need to be more rhinoceros to kind of counterbalance that kangaroo.

And then the kangaroos like, oh, he's going rhinoceros. I need to be more kangaroo. It's counterbalance that rhinoceros and where you might've started kind of more on, in the middle, [00:46:00] right. With just a little edge towards

your style. Once you see each other kind of interacting, you tend to get farther and farther to the extreme.

And we end up in advertently kind of polarizing and reinforcing each other's response styles.

Debbie Sorensen: I mean that hits very close to home. Actually. I was about to say that, that I think sometimes, you know, my co-parent my spouse, my husband, and I will like more and more opposite as things escalate where I'm more kangaroo and he's more rhinoceros, which I would imagine is often the case with heterosexual couples.

And it's like, but then I think he thinks I'm kangarooing too much, which makes him rhinoceros more. Yeah.

Mindy Solomon: Yup. Absolutely. And so we like to talk about.

Debbie Sorensen: of. Yeah.

Mindy Solomon: because it's nonjudgmental and it's non-threatening, and it's just how we are as people. It's nothing about who we are personally. It's just kind of getting to know our own response styles and where we tend to go in times of stress so that we can look at it objectively and be able to say like, Right.

Like, I'm feeling a little, I'm noticing that I'm feeling a little protective. I'm noticing that I'm feeling really emotionally overwhelmed [00:47:00] myself and like, what can I do as the parent in that moment to kind of regulate myself to do what I need to do so that I can come back to the situation, respond in a more St.

Bernard dolphin kind of, kind of way. And that's really the essence of what caregiver blocks are, is kind of recognizing. What your tendencies are, what your Achilles' heels are, so to speak. What kinds of things send you into that space? Um, and the more you're aware of that kind of stuff, then you can work on it.

And in therapy, I often talk to parents. It's like, it's like going to physical therapy after an injury, you know, like you have to write. Get the skills of, this is exactly what you want your muscle to do, to be able to increase the strength, right. And

the physical therapist will be there and guide you and kind of keep you in this track of Nope.

Do it this way. Nope. Say it this way, you know, what's going on now, like really working on getting your nervous system kind of accustomed to being able to respond differently so that when you're in that scenario, you're not having to think so hard about what you're doing. You're just [00:48:00] kind of. aware like, oh, I'm starting to feel that jellyfish feeling like.

I need to go kind of do something to, to, to calm myself down or to kind of get myself into a different space, to be able to respond in the way that I want to. And just as like tag on that, I'll say that having the emotion coaching skill at the ready helps with your own self-regulation.

Debbie Sorensen: Totally right? Yes. It helps you regulate yourself. Helps the whole situation. I also really liked that this gives people a language they can use to talk about these kinds of patterns that is so non-par felt it is not like you're a, too much of this year or that year. It's like, we can just talk about the dynamic in a neutral way and kind of playful almost, you know?

Yeah. What would you say to someone who is. Hearing this and thinks it all sounds good, but it's like intimidated by it. Maybe because it's very far from what they're doing. Like the script sounds good, but like that [00:49:00] just they're worried maybe that they'll get it a little bit wrong or that they're there.

It's like a, feels like a big leap for them.

Mindy Solomon: Yes. I'm so glad you asked that question, Debbie. Um, and there's kind of two parts. So two things that I'll touch on in response one is that. A little goes a long way, right? So we're not looking for him. This is what I tell parents. And I work with all the time is that we're not looking for a complete 180 from where you are right now.

We're looking for one degree of change. One thing different than the norm. One move away from baseline. One of the examples that Adele used in one of my early trainings I've held onto is like, if you're mummified, you know, if you're like, if you're, if you're looking at somebody that's totally mummified in a really rigid stock, like they're just in that position and nothing is happening.

And then all of a sudden, a little finger wiggles that finger wiggle is super exciting, right? Because it is such a change from baseline, which has completely

stuck in mummified. That's what I really want to encourage parents who might be [00:50:00] listening, thinking like no way, right? Like this sounds so far from how it really is that just thinking about.

Even thinking about it after the fact can be a helpful thing. Right. So we've been going back and saying, saying to your child, you know, that situation that happened when I, when I said this, like I was thinking about it afterwards, and I wonder what would have happened if I had done this instead. Right. If I had said this instead, or, you know, I think maybe what you really needed me to say was that I understood where you were coming from, because this, because this, because this, and you know that I'm here for you and that I can listen.

So next time you, the practical support is next time I'm going to try and do that when it's actually happening. So. There's so much space to try this out, to try any part of it. Sometimes Debbie, I even tell parents, even if they can't say the words for the emotion coaching to their child, just saying it in your head, just taking the moment to pause and think if I were going to validate my child in this moment, what kinds of things would I come up with for my because?

We even trying to think of the, because is in real-time can slow you down enough [00:51:00] to, to feel that connection. Um, and. People really do feel the heart and the spirit of wanting to do this. Right. So if you've been somebody who's been really stuck in the way that you've been interacting with your child and you do anything that kind of takes you into the mode of like, oh, I really want to try and understand what's going on with you a little bit better.

I really want to try and be in this emotional place with you. Even if you bungle everything, even if you only use one, because even if you, you know, do whatever the spirit and the heart that kind of comes with, I really want to get you. This is really important to me. You're really important to me that that speaks volumes and can really change a really stuck dynamic and create more flexibility in a system to be able to try some of these things and do some things a little bit differently.

Debbie Sorensen: Yeah, that alone can be a big shift.

Mindy Solomon: Absolutely.

Debbie Sorensen: What about the, so one of the things that's in EFFT is the therapeutic apology, which I think is kind of along the lines of what we were just [00:52:00] talking about. And that can be really powerful, right?

Mindy Solomon: Yeah, so therapeutic apology can be tremendously valuable. Um, I kind of look at it as, like I would say, it's kind of like, uh, on a, on a powerful super highway when there's been a spill, you know, like a big Mack truck spilled some of their load. And so it, it, it kind of alters the flow of traffic on the highway.

So when something has happened in your relationship, that kind of, you know, it's not going to break the connection, even if it feels that way, but parents and kids are hardwired in. So that super highway is, is it's there. Um, but sometimes things happen, you know, we make, we make mistakes and we do things that in retrospect, we're thinking like that was maybe not the best thing to do, or maybe that was, you know, caused some, some unintended harm.

Um, you can go back and basically attend to that, to that spill and basically say, And, and it's a very deep validation of the child's experience, right? So in the therapeutic apology, um, it's a little bit [00:53:00] more of a Kind of more thought out, more intensive intervention that I'd work on with, with parents to kind of come up with, with what to say, how the, how the therapy therapeutic apology goes.

But the intention is really what you're saying is to kind of go in and say, you know, that thing that happened, um, and then really, really empathizing with what the experience must've been like for the child. And that really does a lot to kind of remove some of the blockage, um, on the, on the super highway

Debbie Sorensen: Yeah,

Mindy Solomon: and the mini version of that is, is kind of the do-over right. Which is what I kind of modeled. Right. Which is, you know, I was thinking about that situation that happened earlier and what I should have done, what I think I should have done instead was validate you, or, you know, should have said, like, I understand why you're feeling this way, because this, because this, because this, and I'm, I'm here for you, but we can work this out and then maybe we could have problem solve together.

So even kind of doing. And in vivo do over kind of thing can go a long way to, to clearing up and kind of helping somebody feel [00:54:00] understood and emotionally more regulated.

Debbie Sorensen: Well, I'm going to give myself a point because I did apologize for the balloon popping threat. Although again, it's not that big of a deal, but I later I was like, I'm sorry. You know? Cause it made things worse and I wound it so good for me. Right.

Mindy Solomon: Good for you. Absolutely. Yeah.

Debbie Sorensen: it was not my finest.

Mindy Solomon: And that's the beauty of all of this emotion focused work is that there really is no perfection. I think you started off by saying that there's no, there's no right, right way to do it. Um, and, there's so much room for being able to. To have everything be part of the process.

So, you know, it's, Adele always says this. I think it's like the quote on the website or it used to be, it's not what happens. It's what happens next. So you're never, there's never a period in EFFT. It's never the end of the sentence, you know, it's always what happens next. So if you realize that you did something in a way that you wish you hadn't go back, do a redo, do a therapeutic apology. Try [00:55:00] the emotion coaching next time. So it's, it's always thinking about, it's not what happens. It's what happens next.

Debbie Sorensen: Yeah, I love that. And I think that's that just, again, speaks to this ongoing sense of family care and caregivers being supportive, even, you know, down the road as people are older and

Mindy Solomon: Yeah,

Debbie Sorensen: Yeah. So one final question. Cause we're about toward the end of the time we had said it. I feel like we could talk for another hour here, but

Mindy Solomon: I know. Right.

Debbie Sorensen: to quickly ask you, I think, as a clinician, this is really an interesting.

Approach, I think, as a clinician and being able to integrate it into work I'm already doing. And could you just say a couple words about clinician blocks and like some of the ways in which it kind of maps on the work maps on for ourselves as clinicians as well?

Mindy Solomon: Absolutely because, you know, blocks are human, right? We call them caregiver blocks, clinician blocks. But, but those are just the labels of the role. Like the blocks themselves are just part of being human. We all have our own [00:56:00] stuff that kind of, um, rattles our nervous system. And so for clinicians doing this work and being trained in this work, a lot of it is doing your own personal, like looking into what, what are some of the things that kind of rattle, rattle you as a clinician that kind of take you out of your more therapeutic stance?

Um, You know, make, get, get you a little bit off kilter. Um, so for, for clinicians, it's really being, being willing to kind of take a look at that too. And, and, and think about our own patterns of, of responses or how we respond to, you know, to, to parents that are, that we're working with or families that we're working with for individuals that we're working with kind of wh which, which, and they're in the same buckets, you know, and some emotional response and kind of how we respond to people.

So do we tend to be, um, You know, do we tend to kind of be in our own emotional space? Do we tend when, when, when our clients are, are displaying a lot of emotion, do we tend to go a little bit more stoic? You know, Distance ourselves a little bit from that emotion. And how can we as clinicians be in the St.

Bernard kind of [00:57:00] containing the space, letting it be okay, whatever's kind of happening. So how do we do that for ourselves? Um, and similarly with, you know, especially with, with being in a helping profession, you know, we're in a similar, similar kinds of, um, similar asks of, you know, when, when somebody is really looking for our support, did we tend to be really protective and think like, oh, wow, Maybe I'm not giving my client enough credit for what they're able to do, kind of without being in my pouch without kind of me telling them, you know, what to do really, really looking at our own biases of how much we really believe in the power of instinct and. , the way I look at it is what we're really doing is we're helping people remove the barriers to their own wisdom, to their own truth, to their own internal ability, to heal and to kind of know what to do. So we're helping them reconnect with their intuition. So even by giving them these skills and EFFT can be very directive and telling

people what to do, but it's not like we are giving them the, this is what you're supposed to do.

It's directive in the sense of, this is a way to kind of clear your own blocks so that you can pay attention to your own intuition [00:58:00] and hear it loud and clear. So that's kind of how I look at it and what our role is, and being able to do that for yourself means being able to look at where your own blocks are, that are preventing you from being able to, um, to have that clarity when you're, when you're working with people.

Debbie Sorensen: Well, that's great. Very inspiring note to end on here. I really appreciate it, Mindy. Um,

Mindy Solomon: Yeah. This was really fun.

Debbie Sorensen: Yeah, it was so fun. So good to hear. Good to talk to you and good to hear more about this. Can you tell folks who are listening, where they can find out more online about your work and maybe any resources that you want to point anyone?

Mindy Solomon: Sure. So my website, um, which has all my stuff and all of my work is just mile high, mental health.com. So WWF. At mile mile-high mental health, all spelled out, all spelled out with no spaces.com and there's also links on there to all of the EFT, um, resources. There's a couple of different websites where you can read more about the model and, um, the, the [00:59:00] interventions.

And you can look to my website for any caregiver groups that might be coming up. In the new year, um, or any, any other, um, EFT or related activities that, that we might be offering, as in addition to all of the ones that are offered throughout the, throughout the country, um, that you can do virtual or in-person.

Debbie Sorensen: Great. Well, I highly recommend taking a workshop. Um, if, for listeners who are interested in this, if you have a chance, cause I did yours and it was terrific. So

Mindy Solomon: Thank you. It was a lot of fun.

Debbie Sorensen: on the lookout for those. And thank you again, Mindy. Really nice talking to you today.

Mindy Solomon: Thanks so much, Debbie.

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