

*Laura Lipsky:* Right now, it is the number of your peers and young people I'm working with who, again, are able to articulate, I understand my life is very, very blessed right now and I have so much privilege. And also, between this pandemic and between structural supremacy surfacing, that I don't know how I am going to get through the next few days or few weeks.

*Lily Cornell Silver:* I am Lily Cornell Silver, and welcome to the first episode of my mental health focused interview series, Mind Wide Open. My intention for this series is to destigmatize mental health and to normalize having open discussions about mental health. My first guest is author of titles such as *Trauma Stewardship*, *The Age of Overwhelm*, and she is a founder and director of the Trauma Stewardship Institute, Laura Lipsky. In addition to being my best friend's mom, Laura has been such a guiding light in my life, and she is such an outstanding example of compassion, integrity, openness, honesty, and I am just so grateful to be able to have her here to share her invaluable insight with you guys. So, thank you so much for tuning in, and enjoy the interview.

Hi, Laura.

*Laura Lipsky:* Hi, Lily. How are you?

*Lily Cornell Silver:* I'm great. This is the first episode of Mind Wide Open. It's so exciting. Thank you for being here. I've been bugging you about it for months at this point. But you are the perfect first guest for this. And it was completely intentional having you here. I think you are the perfect person to set that tone of openness and authenticity and compassion that I want to bring to this series. So, thank you for being here.

*Laura Lipsky:* Thank you for having me. I'm so happy to get to do this with you.

*Lily Cornell Silver:* As you know, I launched a series in honor of my dad, who openly struggled with mental health throughout his life. But it also felt especially important to launch it now in the wake of the pandemic and the resurgence of the Black Lives Matter movement. But mental health is something that more and more people are openly struggling with or realizing that they have an issue with and are seeking resources and don't know where to start. So this just feels super-important, and I'm so glad that you can be here to start it with me.

So you are trauma expert extraordinaire. In my mind you know everything about everything, always.

*Laura Lipsky:* You are generous. You are very generous.

*Lily Cornell Silver:* There is so much stigma surrounding mental health. And that's something that obviously you're very aware of, stigma surrounding trauma. And that seems like such a paradox to me, because mental health is something that literally everybody struggles with. And if on the off chance someone doesn't struggle with it, someone they know struggles with it, someone they love struggles with it and will likely experience it at some point in their lifetime.

So I was wondering just to start out if you could speak to that a little bit, what you think the stigma surrounding talking about mental health comes from.

*Laura Lipsky:* I continue to see how much struggle there is around vulnerability. And I think for many people the stigma around mental health connects to that vulnerability.

*Lily Cornell Silver:* That makes total sense. I think vulnerability is something that is seen as a weakness so much of the time in our society. You write about this a little bit in your phenomenal book, *The Age of Overwhelm*, which is a life preserver for me. I've told you that. I cling to that. You bring this up often, your own struggles staying afloat working in the trauma field. Everyone carries their own trauma. You have your own trauma. And constantly being exposed to some incredibly traumatic events from other people is super-intense. So I would also love to hear you talk about your own experiences with trauma and how you've gone about taking care of yourself amidst that.

*Laura Lipsky:* I appreciate that. I mean, for me, the way I came in to do trauma work was really my own self-preservation. And I wasn't conscious of it at the time, but – so there's a cause of trauma mastery, which you're familiar with, anyone who is joining us would be familiar with even if we don't know that term specifically. But trauma mastery refers to this idea that one of the hardest things about primary trauma is the "out-of-control-ness" of primary trauma. So what humans have done forever is we continue to recreate situations as

similar to the traumatic incident as possible because we tell ourselves this time we're going to have a different outcome.

So you can think about that in three different realms. One is activities, the second is relationships, and then the next is work, or how we spend our time. So, for example, in activities, somebody might try to summit a mountain, for example. And if an accident happens during the ascent, then trauma mastery would be you would return to that mountain a year later on the anniversary of the accident and you're going to try to summit again. Because this time you tell yourself nothing bad will happen.

Then there's relationships, which I think we all can have a lot of humility around. So it's that experience in our lives where we're like, why do I keep dating that person with the exact same characteristics, or what's up with my four annoying friends. So that experience of somehow this relationship, I'm going to sort it out, I'm going to work it out.

And then it's how we spend our time and work that we're doing.

For me, it wasn't a conscious decision to go into trauma work because of what I was trying to reconcile from my own life back in the day, but it definitely was a primary reason. And I went into trauma work during a time when we just – I mean, you know, it's 2020 now. We're still not talking very much about vicarious trauma, the cumulative toll. But back in the day, we were really not talking about it. So that was 33 years ago.

*Lily Cornell Silver:* One of the main things that I want to focus on in this interview series and something that I addressed in my mission statement is the intersectionality within mental health and the pressing need to decolonize the field. And we spoke a little bit about intergenerational trauma, race-related traumatic stress. And something that you write about in *Age of Overwhelm* is epigenetics. And I know that that's, like, a crazy, huge field, it's not necessarily something that can be easily summed up. But I would love to talk a little bit about that with you.

*Laura Lipsky:* So with epigenetics, it's an emerging field. And what epigeneticists will tell you is that there is a way that environmental factors can affect our health and wellbeing not just now, but can impact DNA for generations to come.

*Lily Cornell Silver:* Sure.

*Lily Cornell Silver:* You know, if you have a grandmother who had been lynched and no one in the family ever spoke about that, of course we know the profound effects that can have for generations to come even if it's something that hasn't gotten talked about over and over and over again, right? You can know history, but it's different when you understand how it can be passed down in your DNA, in the fibers of your being, right? And how that then manifests present day.

*Lily Cornell Silver:* Yeah. The conversation that I have with my therapist at least once a month, at the very least, is negotiating the difference between grief and trauma and then anxiety and depression and other chemical imbalances. Because constantly I come in and I say my depression is so bad, I'm literally losing my mind. Like, I've come in with a list of things that I've self-diagnosed myself with. Like, I'm bipolar, I have all these things. And my therapist every time goes, Lily, what if I told you that you're not going crazy, you don't need to go into a psych ward. You are a normal, grieving person. You are someone who has experienced trauma. And these things are so completely normal, and it would be strange if you weren't feeling these things. I'd love to hear you speak to that a little bit. I mean, just the fundamental differences. One is a chemical imbalance and one is a situational issue, and also how they should be handled differently.

*Laura Lipsky:* Right. Yeah. So with what you're sharing, part of what is so challenging – again, people come to this with all different experiences of where you're born and where you've grown up and socialization. And that has so much to do with how you sift through all of that. Because so much of how we do it as adults has to do with how we were raised and the messages we got back in the day about being able to, you know, as we say in early childhood education, have our "big feelings", right?

*Lily Cornell Silver:* My therapist says that to me, again, like every time I see her. So it's not just early childhood. *[Laughter]*

*Laura Lipsky:* Let's be comfortable having our big feelings. And, you know, we don't want to overgeneralize. Also, again, in the United States, there's a lot of rigid socialization about what is appropriate for those who identify are being raised as male to feel and exhibit and

those who identify being raised as female to exhibit. So that's one of the things that can really interrupt our ability to metabolize and really fluidly metabolize what we've been through and what we're currently being exposed to.

The other piece with what you're sharing is that we're not known as a nation for having a lot of fluency in grieving and mourning and that culture, having a lot of strength in that culture where, you know, you're given three to six days and then it's like, turn your frown upside down. Okay? The lasagnas are gone, the banana bread is gone. You know, there are so many props for, like, "Are you okay? You're good? You're good? You're good?"

*Lily Cornell Silver:* Get back to being productive.

*Laura Lipsky:* Absolutely. And the United States has such a premium, as you're saying, on productivity and being in motion and doing as opposed to being. And it's very, very hard to grieve and mourn and walk through the fire that we need to in the aftermath of a loss and simultaneously stay in motion.

*Lily Cornell Silver:* Yeah. That speaks so directly to my experience. And being someone that's already predisposed to things like anxiety and depressive symptoms, it can really feel like I need to change my medication, or something's severely wrong, my chemicals are completely imbalanced. But I think, like you were saying, there's a total underestimation of how long it does take to process traumatic losses and to process grief. The expectation that after a period of a few months you're done and you've moved on.

And it goes both ways. There were times in the month or two months after my dad passed away that I went to a concert or I had friends over. And it's like, you need to need to process that way. You need to be around people. And you're smiling and you're laughing. You can't be in that dark place 24 hours a day. And people are kind of side-eying you, like, "What's wrong with you? You're not upset." You know? And then on the flip side, eight, nine months later, I'm in school, breaking down, not able to go to class and not able to focus. And again, people are side-eying you, like, "It's been nine months. What's wrong with you?" You know?

*Laura Lipsky:* Absolutely. I think our ability to extend grace to others, our ability to kind of have a lot of humility with each other and understand

how we navigate grief and loss, it's a very personal experience. And so you'll see people who, like you said, maybe they'll be highly social, or maybe their sense of humor will be really solid for the first three months, and then another wave comes. And it continues to come in waves. And it's not like it makes – you know, you're standing in front of the ketchup section of the grocery store, and away it hits you. But that would be one thing if we were in a society that really allowed for that. And it's really, really tough in our society when it doesn't – and, again, that combination of being in motion and doing as opposed to being.

*Lily Cornell Silver:* A huge part of my own experience with trauma was experiencing three suicides with people that were incredibly important to me in the span of slightly over a year, one of which being my dad. Under the umbrella of mental health, as we were talking about, grief being incredibly stigmatized, I think in my experience, suicide and suicidal ideation is one of the most heavily stigmatized elements of mental health. And I'll be open; suicidal ideation is something that I have absolutely struggled with. And suicidal ideation just being thinking about suicide or contemplating it. And in my experience, it's been more – having lost so many people in a row to suicide, that feeling of what if that is the only way out, what if that's the only way to feel better? And just kind of a desire to, like, I really don't want to feel this way anymore. What do I do? You know? And especially losing a parent to suicide. You are trying to hard to rationalize what could have led somebody to be in that place where this feels like the only option. Nobody knows how to react so much of the time. There's this weird stigma that weighs so heavily on it.

Do you think that if there were more open and honest conversations about people feeling that way, would that be less of an issue? Would suicide rates be lower?

*Laura Lipsky:* I really appreciate that question and what you're sharing. And the idea that some people move through life and that they never thought about it, even if it's not an active plan, but like, "I just want to take a nap and not wake up for a while." Right? That is the – it's so surprising to me. And honestly, the stigma around it – sometimes I forget, because I'll be sharing about it and then you'll see people kind of get their eyes moving. And you're just like, "Oh, this isn't something you've grappled with. I understand."

*Lily Cornell Silver:* Yeah. Or even if they have, there's no language around talking about it or they feel like, "Oh, that's something I could never share with anybody." You know? In my experience, I lost one of my best friends in high school to suicide. And then almost exactly a year later, lost my dad to suicide. A few months later, lost a dear friend, Chester, to suicide. Again, in those situations, so many people just have no idea what to say. And a lot of the time people just didn't address me, which was a strange feeling. You know? Because I think there's so much fear around triggering other people or bringing things up that you don't necessarily want to be brought up. So they think, oh, it's best not to say anything. And so much of the time that can feel even more isolating.

In my experience, how much I would have appreciated people even just asking. You know? Is there anything I can – and your daughter, Mikaela, is a shining star example. You know? Someone who is so cognizant. She remembers every anniversary. She reaches out. And she also is just like, hey, I'm here if you want to talk about this. If you don't want to talk about this, if you want to go somewhere and be distracted, or if you need to vent about it. I think just being open and asking people what they need.

*Laura Lipsky:* I think what can be hard for folks to really understand in general, and certainty if they haven't survived a significant loss that they would define as a significant loss is that the loss – there's never a time it's not with us. Right?

*Lily Cornell Silver:* Yeah.

*Laura Lipsky:* And I think assuming well about folks that I know, for many people what they might say is, well, I don't want to remind you of that. You know?

*Lily Cornell Silver:* Yeah, exactly. Yeah.

*Laura Lipsky:* And can you think of a microsecond of any day when you do not have some level of awareness of your dad not being here?

*Lily Cornell Silver:* Yeah, no. Absolutely not. Yeah.

*Laura Lipsky:* And so when folks opt for I don't want to overstep and I don't want to possibly even be clumsy with it, or like you're saying, messy with it or remind you of it, part of what happens then is it furthers

our isolation, right? Because then we walk around with this experience of nobody is asking about him, nobody says his name, nobody is talking about him in a way that he was real on any level. And of course you're in an excruciating position of there's the public and there's the private piece of it. Right?

*Lily Cornell Silver:* Sure. Sure.

*Laura Lipsky:* And so the way of you navigating this where there might be this whole public realm to it and yet privately that you can spend huge amounts of time with folks where they don't talk about him and they don't ask you about him.

*Lily Cornell Silver:* It's a weird paradox, yeah.

*Laura Lipsky:* Very, very, very loving people who might not for whatever reason reach out on Father's Day or reach out on his *yahrzeit*. And understanding that for the person who is grieving – which it's a lifetime of grieving – we are really, really, really challenged right now in terms of how to support folks so that they know they have options other than taking their own lives. And that is throughout the ages of all ages that we're navigating this. And certainly, as you know, with adolescents and young adults.

And isolation is one of the most damaging things there is, right? So we know that isolation is so damaging with trauma, and it's so damaging with issues of oppression. And to your point, the more we collude with this isolation by not talking openly about this, I think it allows layer after layer after layer more that people then have to navigate when they're feeling desperate, when they're feeling at a loss.

What we know in the aftermath of disasters and catastrophes and other extreme circumstances like we're in right now, one of the things that humans tend to do is we'll compare. We'll start to compare. We don't want to put suffering on a hierarchy, right? It's not this competition of pain. And so we don't want to compare everything to the most extreme. So that kind of minimizing and that comparison that can happen I think can be tough because it's on a continuum of folks' struggle right now. It's interesting. So for some folks who I think have had a history of struggling with any sort of mental health considerations, there's a way that many of us can be thriving right now in a sense of, like, "Oh, who knew my OCD was



going to come in so handy? Because I've consistently washed my hands. Also been very neurotic about wiping things down." So we laugh about this all the time in our family, those of us who struggle with OCD and those of us who don't. And those of us who are struggling with OCD are like, crushing it. Just like varsity level. I'm built for a pandemic. I mean, extreme amount of having to track everything, that's not great.

But when you have a fluency with feeling depressed, when you have a fluency with anxiety, when you have a fluency with OCD or any number of other things, then when these big waves come, there is a familiarity with it. Right? And then if there's somebody who has never struggled with any OCD or hypervigilance, then this can be a really tricky time.

And the other thing that I'm seeing in all the ages I'm working with, which is young folks through really older folks, is where for five minutes you'll be feeling okay, and then the next five minutes you'll be feeling really, really depleted. And then the next five minutes, you're actually kind of fine. And then the next five minutes, you're super – and that kind of variability in mood I think, again, for folks who haven't had that experience of, like, woo-hoo, and my moods are going to be like weather patterns.

*Lily Cornell Silver:* Yes.

*Laura Lipsky:* Then that also can be really, really unnerving.

*Lily Cornell Silver:* Anything that is giving you hope right now? I would love for that to be the last sound bite. Leave us with something that is inspiring you, that's giving you hope, helping you move through your days.

*Laura Lipsky:* Honestly, being in relationship with you gives me so much hope, that your ability – not solely to survive, though that as well – but watching how you move through things and watching how you show up at each juncture of your life is – there's no words for it. It's deeply, deeply moving for me to continue to witness. So remember how loved and adored you are, please.

*Lily Cornell Silver:* Thank you, Laura. Thank you so much. And that means the absolute world coming from you, especially. And you have been such a huge resource for me, not just in this insane time, but – I mean, I've

known you since I was, what, 15, 16. And your beautiful daughters, who I love with all my heart, you guys have all been such a huge resource to me, and someone who genuinely is the most understanding and compassionate person ever. And I can't – people who don't know us have no idea how many times I've – I mean, I did this to you last week. I'm like, Laura, something's happening and you need to address it.

*Laura Lipsky:* Here's the latest sitch.

*Lily Cornell Silver:* And for how much you have on your plate, I think you are such a beautiful example of being so compassionate and helping people through and helping people to be aware of their own trauma while also taking care of yourself. Thank you so much for being here. I know we could talk for hours and hours and hours.

*Laura Lipsky:* It's been an absolute joy for me.

*Lily Cornell Silver:* I can't wait for the world to hear the invaluable advice from you that I get on speed dial on a daily basis. Thank you, Laura. I love you.

*Laura Lipsky:* So much love. So much love. Talk to you soon.

*[End of Audio]*