



Conscious Life presents

How To Practice Self-Care in Healing Trauma

Guest - Dr James Gordon

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[00:00:09] Alex Howard

Welcome everyone to this interview where I'm super excited to be talking with my friend, Dr Jim Gordon. And Jim has, just between the last time I interviewed him and today, had a major heart surgery. And so I'm super curious partly to hear how he's doing, but also to explore how his body of work over the years has supported him through this experience.

To give you a little bit of Jim's background, James Gordon MD, author of *Transforming Trauma: The Path to Hope and Healing*, is a Harvard-educated psychiatrist and the founder and CEO of the nonprofit Center for Mind-Body Medicine in Washington, DC.

James is internationally recognized for using self-awareness, self-care, and group support to heal population-wide psychological trauma. He is a clinical professor at Georgetown Medical School, and was chairman under both Presidents Clinton and GW Bush of the White House Commission on Complementary and Alternative Medicine Policy. So, Jim, firstly, welcome and thank you so much for joining me.

Dr James Gordon

It's always good to be with you, Alex.

Alex Howard

So last time you and I spoke, it was a few weeks before you were going in to have open heart surgery. And, I remember thinking, it's going to be an interesting conversation. The next one that we have.

And firstly, I'd just love to hear a bit about how you're doing. But also, you know, however much we know about trauma, however much we know about our nervous system, something like a major surgery is still a major event. And I'm really curious as to how that was for you and what supported you through that.

[00:02:07] Dr James Gordon

Well, first of all, I'm very glad to be here talking with you. I think one of the things that an event like this does, where it's a sort of a life-threatening situation. I was slowly going over a couple of years going into congestive heart failure, because my mitral and tricuspid valves...

The valves that are between the atrium and the ventricle, the left and right atrium and ventricle, respectively. Those were inefficient, and there was a backflow of blood. And this is probably a result of 15 years of atrial fibrillation, which was giving me no particular trouble, but was giving my heart valves quite a bit of trouble. Just handling those 180, 200 beats a minute that were going on in my atria.

Alex Howard

And you were permanently in AF for all those years?

Dr James Gordon

Yeah. There was no way, for the physicians, the cardiologists, to get me out of atrial fib. They said, "You're stuck with it, you're okay." And I was okay. And this is against the background of really, very seldom going to conventional physicians over the last 70 years, or 60 years anyway.

And really being able to handle so much of it, using all the things that I know about mind-body medicine, Chinese medicine, nutrition, osteopathy, all these other tools and techniques that I had. So I'd been to other practitioners at times, but I was able to handle...

I have never had surgery before since I was a kid who was eight years old. And now it became clear, and I think this sort of sets things up, that I had to have the surgery. It was either get the surgery now or likely be on a downhill course for the next couple of years, be increasingly...

Having increasing difficulty breathing, moving around, feeling more and more weak over time. So it was clear I had to have the surgery. And that was a shock. That in itself is traumatic.

Alex Howard

Yes.

Dr James Gordon

Because here... Even though the surgery, presumably, if successful, would be life-saving, or certainly life-prolonging. It was still a big shock to know that I was going to have to have this major procedure where my chest was going to be opened and I was...

My blood was going to be circulating outside of my body for 4 to 6 hours. So really, a kind of major event. So I had to contend with that. When I was speaking with you before the surgery, I was in that phase of saying, "Okay, I've got to have that. And how do I relax and move my way through that?"

[00:05:14]

Recognizing on the sort of negative side, if you will, the anxiety that came up with having to have the procedure. On the more positive side, an unavoidable... Sartre used to use the word, *indépassable*. Something you can't get past. An event that I had to confront that was reminding me of my own mortality.

An experience that's both traumatic, but potentially at least moderately enlightening. So I began to think about...

Alex Howard

Potentially enlightening. Yeah.

Dr James Gordon

But what was... What's really important to me? Assuming I... And even before the surgery, I began to put more emphasis and more weight on the things in my life that were most important. Including, connection with other people and reconnecting with people whom I hadn't been in touch with for a period of time.

It also gave me, if you will, the opportunity to ask for help from other people. I'm pretty self-sufficient. But it was clear to me that going through this procedure, I really would want people around me.

One of the things that perhaps people who are listening or watching us could take to heart is, it's really important to have other people with you if you have to go into a hospital, or if you're having challenging medical procedures.

I went to the best... What I understood was the best place in the world to have this very traumatic surgery, and went to perhaps the best, or one of the best, surgeons in the world.

But nevertheless, it's a hospital situation. And hospital situations now, and increasingly over the years, are not terribly hospitable. On a technical level, they can be very good. But on a human level, there is a tendency to be guided by algorithms.

This is the cookie cutter that defines what kind of care you're going to need, what kind of medication, what kind of procedures, how often, etc. And they lose sight of the whole person who is experiencing these procedures, taking these medications, etc.. So...

Alex Howard

Which must have been interesting for you because of course that's been a lot of your life's work, is looking at that whole picture.

[00:07:54] Dr James Gordon

Exactly. So what I did is I asked several friends if they would come with me. I was at the Cleveland Clinic. Would you come with me to... I couldn't promise, you know, great sightseeing. But I could promise an opportunity to be there and be helpful to me.

And so I asked people to come, and asked two people at a time to come. So four friends and my nephew. My son was preoccupied with his exams in California at the time. But I asked them and everyone said yes. And it was really... And other people wanted to come. My niece wanted to come, others. My brother wanted to come. So it was okay. I got enough people.

But it's really important. And I think this is again relating to trauma generally. That one of the crucial, healing forces in recovering from trauma and learning from it, is having other people around with whom you can be, as natural as possible. With whom you can feel safe.

People who won't... In this instance, it's not going to freak them out if they see somebody wiping my butt because I'm incapable of doing it. Because I'm so wiped out, so to speak, from the surgery. So that was a very interesting experience in the hospital.

Another interesting experience, again, for... Hopefully being useful to other people is, almost inevitably, everything is not going to go the way it's advertised. So I was supposed to be in and out after five days. Seven max. I had a couple of complications, and I had to struggle a bit with the hospital staff to tell them, "I am not ready to go."

And it's not that I particularly love being in the hospital. I just knew that with the car... I had a lot of fluid retention around my heart and my lungs. I could barely walk. I was extremely short of breath. I was in a great deal of pain. I said, "I'm not ready to go home. I don't care what the algorithm says. It's not time for me to go home."

So I wound up being there for two weeks, and some of the people in the hospital tend to appreciate kindness and attentiveness, and people who really... People who tune in to who...

I appreciated people who tuned into who I was and what I was going through. And particularly, I was impressed by some of the young nursing students and their capacity to do that, and some other people in the hospital as well, who were able just to really be there with me.

And I realized that in addition to my friends and my nephew, how important it was to have those people who actually were paying attention to who I was as a person and to my needs, and who were willing to listen to what I needed them to hear.

So that was the beginning of the process. And it reminded me, hospitals here... I don't know how it is in Great Britain. They've not yet recovered from Covid.

Alex Howard

No. Far from recovered here. Yeah. They're still totally overloaded. Overstretched. Yeah.

[00:11:10] Dr James Gordon

So particularly nursing staff but also others. Physicians and other staff are overwhelmed. They've lost a good deal of staff. That experience itself was so traumatic for them that, for example, one of the... Again, one of the most... I won't name this one.

But one of the most prestigious hospitals in the country came to us and said, "Ever since Covid, nothing has really been right for our nursing staff."

During Covid, family members were not allowed to come into the room when people were dying. So the nurses had to sit with the dying person by themselves, because there weren't enough nurses for there to be more than one. Often for many hours or even days at a time.

That was traumatic because so many nurses left the profession because of Covid, because of all the trauma and the strain of Covid. It broke up the teams that had worked together for many years.

So the whole... And this particular hospital, again, one of the most prestigious in the world, wants us to work with the whole nursing staff. Because they're recognizing, to their credit, the level of trauma that there is. So that's my hospital experience.

Once out of the hospital, it's been a slow recovery. I was told it will take at least 3 to 4, maybe six months for you to be back to anything like normal. And I heard them, but I wasn't sure I believed it. I said, "Well, okay. Maybe that's so for other people. But I'm going to get... I'll be back in shape sooner."

Well, perhaps I am a little bit sooner, but not much. It's been real... And once again, it's learning to depend on other people. Initially, I had to either have a walker after I left the hospital or be holding on to another person, even taking 10, 15 steps.

So it's been a very gradual process of recovering mobility, unsteadiness and also a sense of fragility. Just that I would be more vulnerable walking across a room or walking up a street than I have really ever felt in my life. And this is, again, this is a lesson...

It's not only the physical challenge that the surgery presented and its aftermath. But also the whole event of having had the surgery makes one... Makes me feel more fragile, more vulnerable.

And, as you know, I'm somebody who works in war zones and I'm used to danger of one kind or another. But this... Nobody was shooting guns on the street outside my house, but I could feel that sense of fragility.

And I wasn't supposed to drive a car for the first few months because of the surgery I had. It needed a couple of months for my sternum to heal, the breastbone to heal.

And the surgeon said, you cannot drive because if you're in an accident, the airbag will blow up and will crush your chest. So that's sort of another whoa, of a clarion call to being careful.

[00:14:39]

When I finally started driving a car... Got my permission to do that. It was like I was beginning all over again. It's like I was 18, 20 years old and starting to drive and feeling that, "Oh, what do I... How much of a turn do I need to make here?"

I mean, things that had come naturally to me for 60 years, now I had to think about. So it's been a very gradual process, and I've begun to travel. Initially, I traveled with someone, to go to give some talks at a conference. I've begun to go on short trips by myself, and I'm okay with that.

But it's really like coming back. I don't mean to make it sound too grand. But it is a kind of rebirth in a way, kind of growing up again. And so with that, I'm also valuing people and events, and my life and the ordinary... You know, the ordinary pleasures and challenges of life, I'm becoming more sensitive to, more vulnerable to.

But also there are even greater opportunities for learning than there ever were before. So what I have observed and facilitated with so many people over the years who've been through traumas like mass shootings or wars or...

For them, life-threatening illnesses or their hospitalization. I now became very much the object of my ministrations as well as the subject, of course, to others. So it's been a very powerful experience for me.

Alex Howard

One of the things, Jim, that is just sitting with me as you're talking is that willingness to ask for help. And you, as someone who has really, through your career, been the one helping and supporting others. How was it to be in that?

Because I think for a lot of people that you and I work with, that asking for help is difficult. And so I'm interested in what helped you do that? And what... How could you help... For those watching, how can they take that step?

Dr James Gordon

Well, I think the first thing is to be realistic. Be realistic. And understand that you're going to be likely to be self-conscious about asking for help. But what I discovered once I began asking is how pleased people were to be helpful. I think one of the great deficits that we have in our society, in Western society, is that we don't help other people.

We don't help other people as naturally, as easily and as often as people in traditional societies do. In a traditional society... I've spent time with indigenous people in various places all over the world, and everybody's helping everybody else all the time. You don't do very many things by yourself. You do it with other people and they... And it's just a part of life.

So people, for the most part, like to be useful. They'd like to have... It gives them, or adds to their sense of meaning and purpose. And so that enabled me to feel much freer about asking people for help, because I knew that they felt good about it.

[00:18:25]

Even though there was still a part of my mind, "Oh my God, this is an imposition on this person. Should I be asking?" Once I saw their response and how happy they were to be giving me help, that made it much easier. The other thing is, and this is sort of my nature, I'm always interested in making it a party.

So I would have... For the most part, there were two people with me at a time. So if they weren't with me, they could hang out with each other. They didn't know each other often enough and they got to know each other.

So I see it as both a... That something that people enjoy doing, being helpful. And also something where we can create a mini world in which people are connecting to each other and getting to know each other as well. That it's a kind of recreating that sense of community or creating for the first time, that sense of community.

So I would suggest that people pay... I would suggest to anybody watching us, understand that your friends and your family almost universally are going to want to help, and that they will feel good about it.

So you're giving them... They're giving you something, but you're also giving them something. And also, it can be fun. It can really be, especially if there are several people involved. You can really, everybody can enjoy the experience, both of being helped and of being helpful.

Alex Howard

It's also interesting that you chose two people at a time because, of course, if things hadn't gone to plan, they also would have had the support of each other.

Dr James Gordon

That's true. That's also true.

Alex Howard

Yeah.

Dr James Gordon

Yesterday, a friend of mine and I went to visit a college classmate who has Alzheimer's. It was his roommate, and he was a friend of mine. But not my roommate. And so he was very... My friend who was visiting was very, very deeply affected by seeing his old dear friend so vulnerable, so fragile, so fearful.

So it was very important for him as well as for our friend with Alzheimer's, for me to be there, just to be able to support him. And for him to be able to talk with me afterwards about his feelings about what he'd seen in his friend.

[00:20:58] Alex Howard

I'm also interested to talk about how you managed the anxiety leading up to the surgery, because as you spoke to, it's a life or death situation. And however much one has a spiritual practice or their own practices, that anxiety is still immediate and real. And I'm interested in what helped you navigate that?

Dr James Gordon

Good question. Well, the first thing is I made sure that I was going to the best possible place that I could go to for the surgery. And I was going to go to another place. But then I wanted a second opinion, which I recommend. And the guy in Cleveland saw something which I had seen, but hadn't paid as much attention to as I could have.

Said it was not just one valve that needed to be repaired, it was two valves. The other surgeon said, "You just need one valve repaired. We'll do a simpler kind of surgery," which was appealing because it's less traumatic. They just go in with robotics.

But I got a second opinion. I talked with this guy, and it was clear. He's brilliant. And his analysis of what was going on made sense. And his willingness.

Even though he happened to be one of the world's pioneers in robotic surgery. He said, "No, robotic surgery is not for you. We've got to split open your chest because there are two valves and it's too risky to do that through robotic."

So the first thing is make sure you're getting the best possible treatment, or you're in the best possible situation with the best possible people. That helped to reduce my anxiety.

Plus... And this is something that I've written about and said for 50 years. Getting involved in my own treatment was therapeutic for me. And this is true whether it's a medical issue or whether you're in a war zone or whether you're... There's a family emergency.

The more you can get engaged in it, in whatever you can possibly do for yourself, there is a sense that you're not the victim and that you're not simply passive.

Now, that coupled with using all the tools that I've learned over the years. All the tools of mind-body medicine to relax with the inevitable. To relax with anxiety. To remember to breathe slowly and deeply. To just let go of whatever I needed to let go of.

That was on an ongoing basis. So it's a kind of interesting combination of making sure that I'm actively involved and at the same time letting go of what I can't control. And so that was an ongoing process.

And the other process was reaching out to other people. Very important. Even before, and not just the people who came to the hospital with me. But saying to other people, "This is what's going on, I'm going to have this surgery. I just wanted to let you know."

And then giving people a chance to connect with me and me a chance to feel the connection with them. And through that, a sense of continuity. Continuity with the past and potentially with the

future. And then finally, going into the surgery, just doubling that relaxation. And making sure they gave me enough anesthesia, so that I wasn't going to be waking up during the procedure.

[00:24:53] Alex Howard

Yeah. It's very funny that you mentioned earlier about having not seen a conventional physician for many years, and I'm a bit similar. So I tend to see nutritionists, naturopaths and best I can, manage things in those ways.

I had a tooth infection last year. And I said to my wife... I said, "I've never wanted painkillers more in my life." I was like, "Thank God for Big Pharma. Thank God for pharmaceuticals." They of course have their place.

Dr James Gordon

Ideally you want to make the... Use the best of all worlds and bring them together. And I think that's important. Not to resist. It's important to look for whatever can help and to go outside the bounds of conventional treatment often.

But it's also important when conventional treatment really makes sense, to use it. And I think that's another thing just to say to people. You really need to think through what you're going to do and look at all the possibilities with an open mind.

And if you have trouble... I obviously know a great deal about complementary, alternative, integrative and conventional medicine. But I talked with a colleague of mine who also... Who happened to be an OBGYN, who also knows a lot about conventional and non-conventional approaches. And just to bounce ideas off him. Important.

Alex Howard

Yeah. It's also quite touching to me reflecting on what you're saying, thinking about the different ingredients of a truly integrative framework. So you had a good diagnosis. You had the best person. You worked with your internal state. You invited in community and support.

You thought about your history and the people that have been important in your life. Because if things hadn't gone to plan, it sounds like there was a sense of wanting to have a sense of... Not necessarily completion. But a sense of balance, let's say, in terms of that.

And it feels like this was a real, kind of honoring in a way of all that you've learned over the years to bring that to yourself in a moment of your own crisis.

Dr James Gordon

Yes, I think you're... That's right. Thank you for saying that. Also, I had acupuncture afterwards. Before the surgery, I was doing acupuncture on myself.

[00:27:34] Alex Howard

But afterwards, you weren't so confident.

Dr James Gordon

Afterwards, I said, "Okay, somebody else. I need someone else." And so that was helpful. Also bodywork. Very helpful. Unfortunately, the Cleveland Clinic, although they have an integrative medicine program, it's not operating on the inpatient service. And it should be.

Alex Howard

Right.

Dr James Gordon

I mean, this is again. So part of what I did is I talked with the Head of Integrative Medicine at the clinic... While I was there, I also invoked my role as a consultant.

Alex Howard

Well, it sounds like you picked up a new client while you were there.

Dr James Gordon

Yes. So, but I think it's important for those who are working in hospitals, who are listening to us to try to bring all of these... All the things we're talking about into the care of everybody, whether it's inpatient or outpatient.

And inpatients actually need it more than outpatients. And all too often these kinds of approaches like acupuncture, like massage, like manipulation are not available for inpatients.

Alex Howard

Right. Wow. That's an important piece.

Dr James Gordon

Let alone teaching of meditative techniques.

Yeah. Right. Something that's also in my mind. You feel like... I know you are someone that has attended with real thought and care to your life over the years.

And sometimes someone goes into a major event like this and they come out of it, and they realize all these things that need to be different in their life. Whereas my sense is it would have been less dramatic in that way.

[00:29:22]

But I'm interested in having been through this, have there been recalibrations around priorities? Or has there been... As you reflect on this experience, what have been the blessings? Or what have been the things that you've taken from it?

One of them is... Again, a very good question. One of them is that I am reaching out more and more to other people. Not for help, but... My buddy from when I did my psychiatric residency. My friend from college who I haven't seen since our last college reunion.

Just reaching... Just thinking as people. One of the things, one of the lessons, that I've been learning from starting before the surgery... Which the surgery has reinforced, is to pay attention when signs come to you. When whatever you want to call it, the universe speaks to you.

So when somebody's name or image comes into my mind a couple of times, I'm going to reach out to that person. And so I've been reaching out more and more to old friends and, perhaps even a little more, people who want to come into my life. More contact with family members.

I've become... I'm also taking care... I'm not the only caretaker of my former wife who's quite disabled. And I'm appreciating being able to do that. I think there's more of an appreciation. Aside from appreciation of her and of other people. There's more of an appreciation of every moment of my life now.

Not perfect, but it's... Even now, I got stuck in the snow coming here to my office to talk with you. And, you know, just appreciating the people who are going to help me get out of the snow. So that's important.

The other is prioritizing what I want to do now because this is a Wordsworthian intimation of mortality rather than immortality, in this case. There may be immortality there as well. But right now it's the mortality that I'm more focused on.

So what do I really want to do? What do I want to write? What's really important for me to write? I reached out to somebody whom I admire, who's one of our congressmen. Whom I hadn't talked to in a long time.

And I had seen him on television. And I reached out to him and he was very happy to hear from me. He's somebody I want to support at this time. Particularly at this time in our country when voices of conscience and sanity need all the support they can get.

Alex Howard

I have no idea what you're talking about, Jim.

Dr James Gordon

So I'm paying attention to what are my priorities, what's really important to me humanly. And just realizing the importance of compassion as a lodestar for me. Woven into my and human DNA, and something I want to manifest as best I can in the world, because it feels like the right thing to do.

[00:32:43]

So I'm paying attention to the signs I'm getting. Reaching out to people, trying to be more compassionate to everyone, including myself. Not quite as hard on myself as well.

And also, I have a finite amount of time. So what is the next thing that I want to work on? What is really important for me to get out into the world? This is very important. Years ago, I don't know if you ever knew, or knew of, Gregory Bateson?

Alex Howard

Oh yeah. Sure. One of my early trainings was in NLP. And of course, Gregory Bateson was one of the key people that fed into that model. So, yeah, much so.

Dr James Gordon

So Gregory was a very good friend of mine.

Oh, he was? Wow.

In his last years we met and we got along. There were a bunch of stories about Gregory. But the one thing that I want to tell you now is that I was with him when he had a diagnosis of lung cancer.

And they said, "Mr Bateson..." The surgeons. He was very well... He was on the Board of Regents at the University of California at the time. And a very important intellectual to Jerry Brown, who was then the governor. So everybody was treating him with great respect, which of course, he deserved.

But they said, "We're sorry to tell you, you really only have 6 to 9 months to live."

And he said, "Well, I have to tell you, I have a book I have to write." Typical of Gregory.

And he said, "And I need to stay alive for that." And he was alive for another five years and wrote two books.

Alex Howard

Wow. Amazing, amazing.

Dr James Gordon

One with his daughter, Mary Catherine. And one on his own. But that sense that it's not only what's important to us. It's the fact that if we do what's important to us, it may well contribute in ways that science has yet to understand. To not only our well-being, but our longevity.

[00:35:18] Alex Howard

Yeah. So I'm interested... I know we're running out of time. But I'm interested in when you look to the next chapter of... You mentioned there's things you want to write. I'm interested... And maybe this is setting up our next interview whenever that becomes.

But I'm interested in what is at the forefront of your thinking at the moment? You're thinking, right, I really... Either that you really want to put into the world, or you're really working to chew over in your own thinking to bring it into the world.

Dr James Gordon

Well. I'm chewing that all over right now. A couple of years ago, I had a vision in South America that told me very clearly, "Wait till you're really ready for the next book. No need to hurry. No need to hurry." So I want to write more about what's happening in the Middle East and particularly with our work in Gaza.

Alex Howard

Yes.

Dr James Gordon

And so that's the first piece. That's a piece I'm... And I want to write more about... I've written a fair amount about Trump and who he represents to American people. And I want...

Alex Howard

You sent me a great article on that, that I enjoyed. Yeah.

Dr James Gordon

And I want to write more about that. But I also... It's clear to me I want to go back to Gaza as soon as it's feasible for me to get in. Our team there is doing amazing work with tens of thousands of children and adults who are in 166 shelters in Gaza now. And four of our team have been killed, but they're...

And just two days ago, a rocket destroyed the house right next door to where our team was staying and working. I want to go back to Gaza. I want to work with people there. I want to work in Israel again.

We're talking with people in Syria now that Syria has opened up. We're hoping to develop a program in Syria. We have a couple people we've trained online in Syria. So I want to be part of all that. That's part of... That's still there, that desire. As soon as I'm able to take those long trips, I'm ready to go. And I feel the energy for that.

And what am I going to write? I don't know exactly what it's going to be. I know a couple of short pieces. I'm probably going to write about this whole experience of growing older and dealing with what that's like. But I don't... I have notes, I have notes on that.

[00:37:59]

I have notes on Trump, on the work in Gaza, all kinds of things. I'm just writing stuff down, but I'm not hurrying. I think that's the other thing that I really am trying to do. I'm somebody who likes to move ahead rather quickly. But I'm trying to do things...

On the one hand, all of these things are important to me. But I'm learning to act with, as they would say, with deliberate speed rather than rushing pell-mell into doing things. So my priorities are becoming clearer.

I'm also waiting for... My mind is not quite up to the book project yet. It's really... Something happens with the surgery. I can... Imagination is great. Images are great.

But the task of sitting with all these notes and references and putting it all together. I'm not quite ready for that right now. And I'm honoring that. I'm not trying to push ahead, when I'm not ready for it.

Alex Howard

It very much tickles me, Jim, to stand here thinking that you recover from heart surgery and one of your primary wishes is to go to a war zone. I think it captures the heart of who you are, in a lot of beautiful ways.

For people that would like to find out more about you and your work. I want to very much recommend your book, *Transforming Trauma: The Path to Hope and Healing*. Say a bit about what people will get from the book. But also say a little bit about your other offerings and work.

Dr James Gordon

Sure. Thank you. I founded the Center for Mind-Body Medicine in 1991 and for the last 25 years... And we teach... And you can see what we teach in *Transforming Trauma*. We teach 16 self-care techniques in the book.

There are actually more than that. We teach those to mental health professionals, health professionals. But also to people who want to learn them, to share them with others.

And our work at the Center for Mind-Body Medicine is primarily now to work with population-wide psychological trauma in places I mentioned. In Israel and Gaza. We've been working in both of those places. In Haiti, in southern Africa and Ukraine.

As well as many places in the United States and Ireland. We're starting a program where we're looking very much to work with... I was just speaking with someone in Poland about developing more of our work in Western Europe. So we're interested in training people in our model. That's what we do at the Center for Mind-Body Medicine.

The first part of our training, you learn to use these techniques for yourself. You learn the science behind them. You do the techniques and you have the experience of doing them in a small group.

[00:41:05]

And getting the kind of support that I had in the hospital, in the small group at our Center for Mind-Body Medicine trainings. So if we're doing training online and we have 200 people in the training, we have 20 small groups led by 20 of our 150 faculty.

Second part of the training, we teach you how to share this work with others. And then in an ongoing way, we can provide supervision and mentorship as you take what we've taught you out into the world.

And then the trainees who come through our program are also the people who help to develop our programs in other places. So the two people in Syria. One is in Syria, one is out of Syria right now, but working in Syria.

Those are the people I reached out to once this revolution has happened, and now there's an opening and now there's a possibility. And so we're working with them to develop the programs.

But our goal is to help you take what we have to teach you out into the world, into your work. So if you're a therapist, to integrate what we're teaching you into your work as a therapist, or if you're a physician, or if you're a teacher, or if you're a community organizer, whatever.

Whatever your work is, we can teach you to integrate what we have to teach. The other thing that we've discovered is that you don't have to have a fancy, advanced degree like I do, or like many of the people who come to our training do.

But we can train intelligent people who are committed to working with other people to use our work at the highest level. As I may have mentioned before, we did the first randomized controlled trial of any intervention with war-traumatized children in post-war Kosovo. This was 17, 18 years ago.

80% of the kids who began a 12-week long group learned these self-care techniques in a small group led by someone we trained. 80% of them who qualified for the diagnosis of PTSD, no longer qualified after 12 weeks. And those gains held at three months follow up.

The people leading the group were not people like you and me, Alex. They were rural high school teachers who had no background in psychology but were intelligent. They cared about the kids. They were committed to learning what we had to teach.

They got the supervision they needed, and they did a brilliant job. And so we discovered and we replicated that all over the world, that people... Yes, we train the highest mental health and health professionals with lots of advanced degrees.

And we train people with no advanced degrees. Tribal elders here in the United States. Teenage kids on an Indian reservation, or teenage kids in a school that had a mass shooting.

So that's our work, and people can learn more about it. cmbm.org is the website. We have lots of videos. We teach some of the techniques there. You can watch what we do in Israel, Gaza, Haiti, here in the US, all over the world, Ukraine. See what we do.

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And we're a community and part of what we're learning... And again, this has been reinforced by my own experience of how important that community is. So we have a lot of ongoing teaching and learning for all those people who've come through our training programs.

Alex Howard

Amazing work. Jim, thank you so much. And, thank you for being willing to be so personal in this interview with your own experience. I really appreciate it.

Dr James Gordon

Thank you, Alex.