

WELCOME!

The innovative, partnered first-of-its kind Veteran Family Wellness Center (VFWC) provides wellness-based resilience services, resources and support for Veterans and their families including parents, couples, and kids.

**YOUR MIC
AND VIDEO WILL BE
MUTED**

VFWC UCLA/VA
Veteran Family Wellness Center



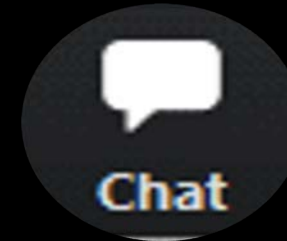
UCLA/VA VETERAN FAMILY WELLBEING CENTER

- Partnership between UCLA and VA
- Deliver resilience and wellness services for Veteran Families, Couples, Parents, Individuals
- Teach skills for more successful, fulfilling relationships
 - Communication and listening
 - Understanding and managing emotions
 - Solving problems together without blame
- Services are free, confidential and offered regardless of discharge status
- Remote and in person services

YOUR WEBINAR TOOLS



Chat Window



For Questions



- Video and slides will be available on our website
- One CE unit will be available

UCLA/VA VETERAN FAMILY WELLBEING CENTER SPEAKER SERIES

Integrating Trauma-Responsive Mindfulness Practices into Veteran Mental Health Care

Dr. Mary Mulvihill



INTEGRATING TRAUMA-RESPONSIVE MINDFULNESS PRACTICES INTO MENTAL HEALTH CARE

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WHAT IS MINDFULNESS ?

- Paying attention to the present moment *without judgement*
- Present: what is actually happening now

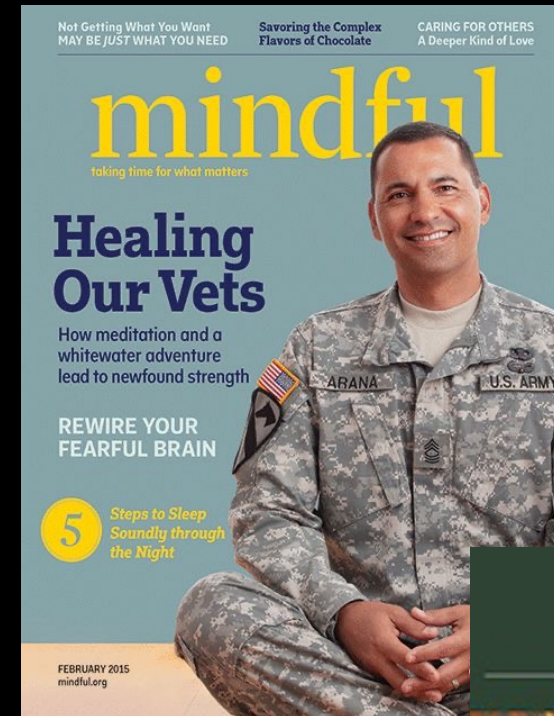
Vs. what should have happened

Vs. what might happen next week

- *Without judgment*

With compassion

With kindness & curiosity



WHERE DOES MINDFULNESS COME FROM ?

- **Ancient Buddhist philosophy & religion**

Work of Prince Siddhartha Gotama, aka The Buddha & his followers

3000+ years of study & observation.

Anyone can use practices

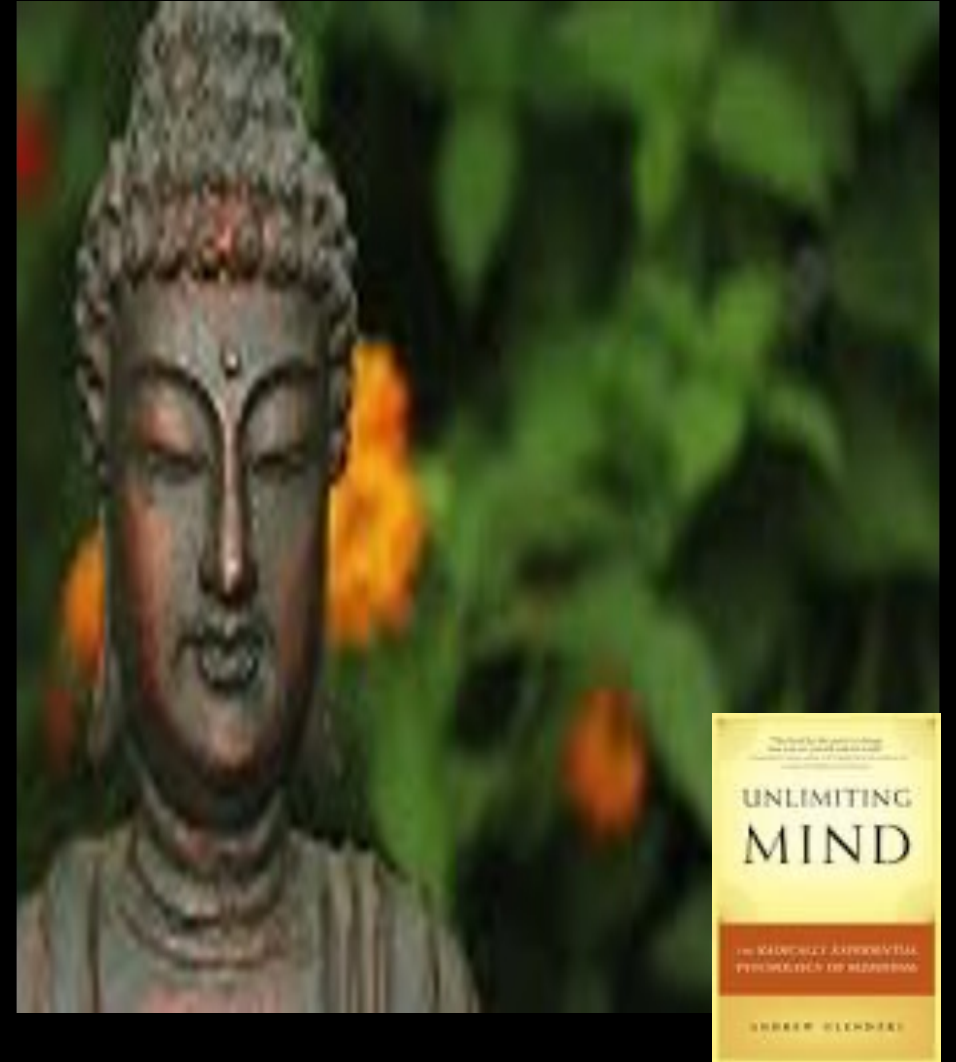
- **Aim Optimal Responsiveness:**

to train up the ability to **respond wisely to the situation at hand**, in ways which are **not harmful to self or others**

- **Personal Practice is essential** to use MB practices well

Basic concept in Buddhism: **See for yourself!**

“Verified faith”



THREE COMPONENTS OF MINDFULNESS:

1) Intention:

To be fully present, embodied

2) Attention:

Control of attention:

To have a laser or a wide-open focus

To focus on what is wholesome

Learn to surf thoughts/feelings

3) Attitude:

Open, curious with

Friendliness of the heart, compassion.....



THE MINDFULNESS MOVEMENT IN MENTAL HEALTH CARE

- Massive amount of **clinical research** supporting benefit
 - Caveat: Some studies small, with methodological shortcomings
- **Brain studies** show functional & structural changes
 - Caveat: Not clear what this means yet
- Led us to new therapeutic approaches proving useful: Available at over 3000 medical centers
- *Mindfulness-Based Stress Reduction (MBSR)*
- *Mindfulness-Based Compassion Training*



THREE BASIC HUMAN NEEDS & RESPONSES

- **Safety**

Avoidance of danger

Reptilian brain

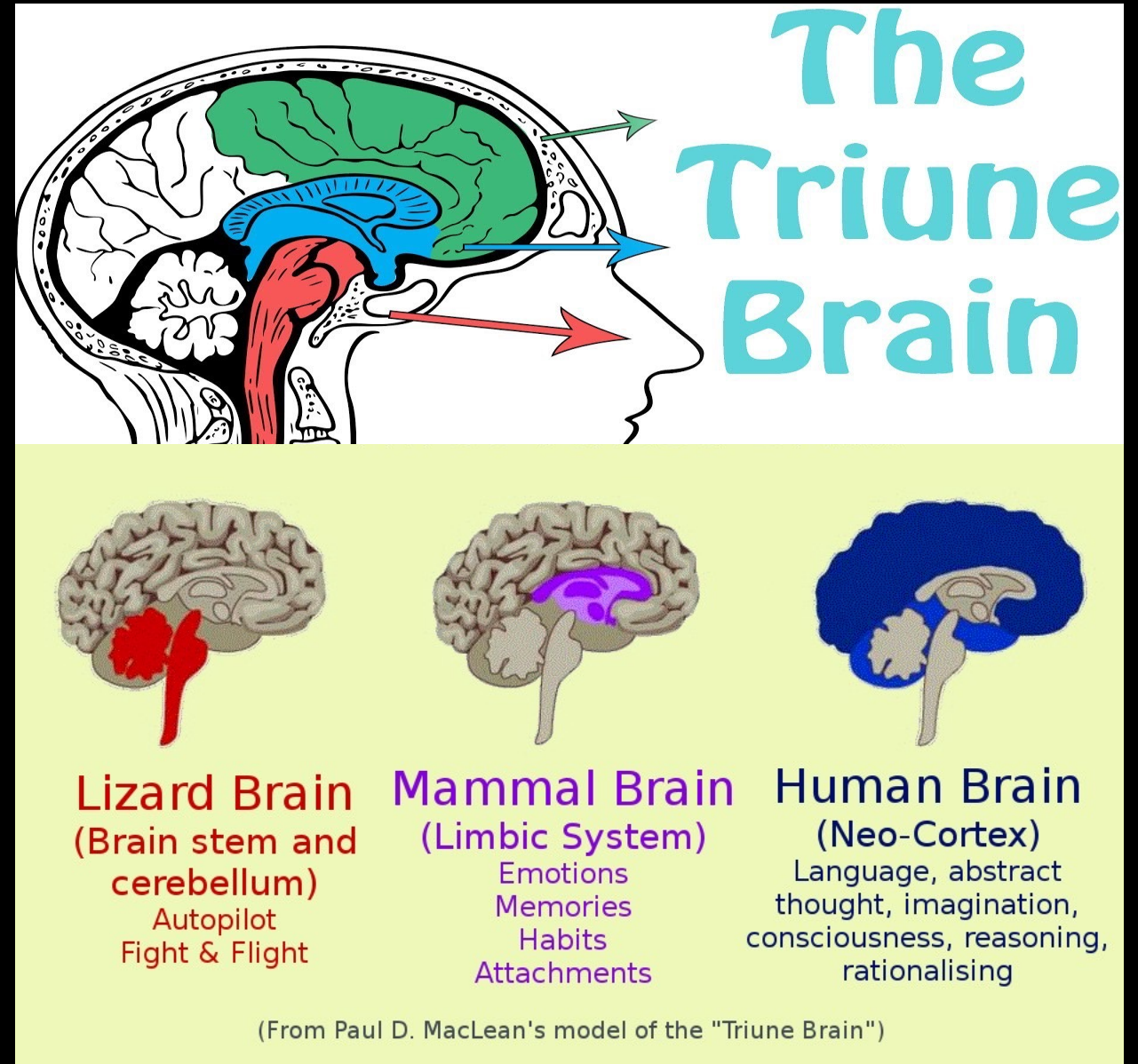
- **Reward**

Approach positive opportunities

- **Attachment**

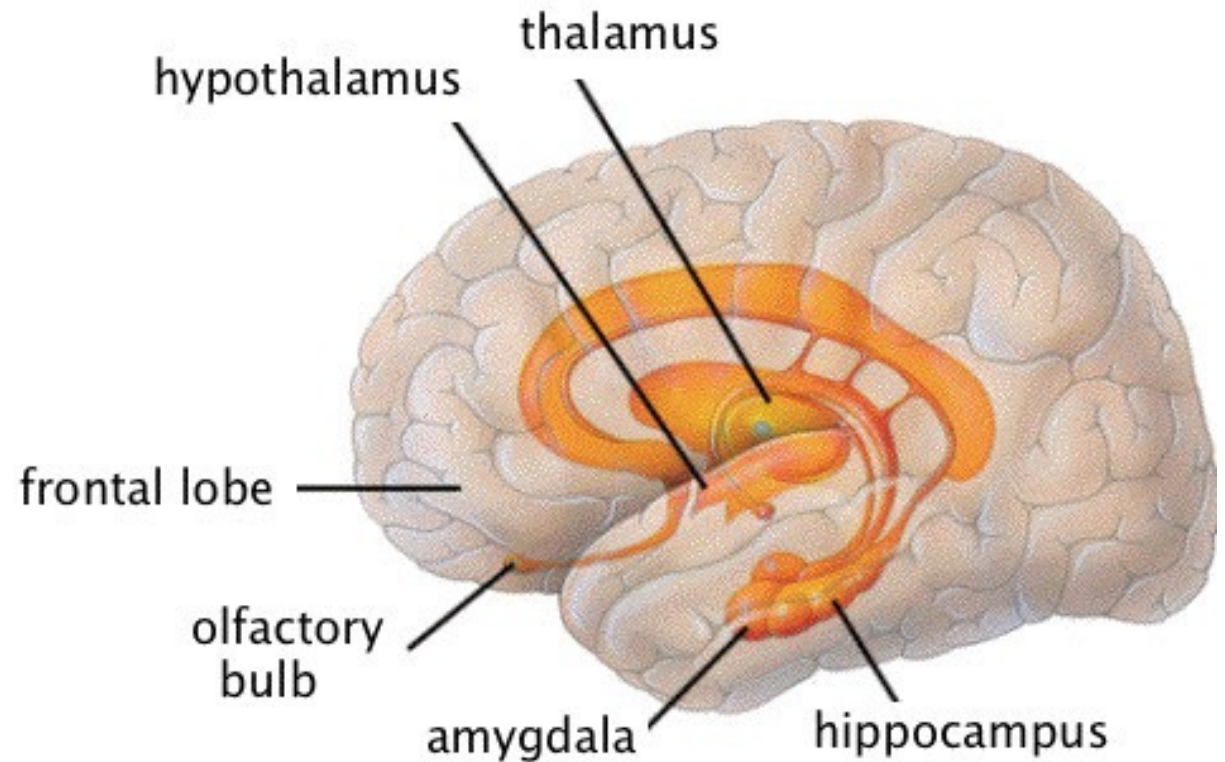
Need love and belonging

- *Sub-cortical mammalian brain*



LIMBIC SYSTEM

- **Emotions**
 - Anger, fear, pleasure
- **Basic drives**
 - Sex, attachment, bonding
 - Aggression (septum:rage control)
- **Learning & Memory:** instant
- **Linked :** ANS/endocrine system
- **PTSD:** intense emotion, loops of intrusive images, behavior, memories, ANS/sleep off
- Note: *olfactory bulb located near hippocampus*



TROUBLESOME TRAUMA-RELATED SYMPTOMS

High Reactivity:

Sympathetic NS Activation

- Sensitivity to trauma related triggers
- Intrusive thoughts & memories
- Intense emotions
- Instinctual behavioral reactions & routines
- High anger

Depression: Parasympathetic Collapse

- Loss of attachment
- Alienation



TROUBLESOME TRAUMA-RELATED SYMPTOMS

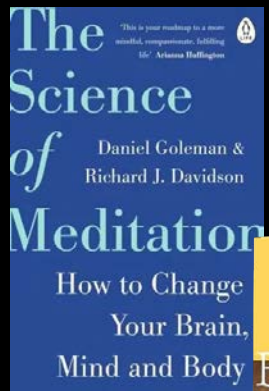
Handling High Reactivity:

Sympathetic NS Activation

- Well intentioned **coping strategies** which may become a problem
 - Addiction, self harm, fighting.....
 - Avoidance**, including numbness & alienation
 - Dissociation** as a protective measure
 - Withdrawal socially**
 - Neglect** of support network, recreational and self care resources



- Good Science & Meditation article
- <https://medium.com/yogi-fit/when-science-meets-meditation-250b1136d148>



MINDFULNESS BRAIN BENEFITS RELEVANT TO TRAUMA SURVIVORS

- Smaller, less dense **amygdala** less reactive
- Calms **thalamus**, activates calming GABA neurons
- More efficient **hippocampus** for memory processing
- Larger **inula**
- More compassion and less “selfing”
- Left **prefrontal cortex** more active raises mood, better problem solving



PRE-CONDITIONS FOR TRAUMA WORK: ESTABLISH SAFETY & RESOURCES

- Establish safety
Environment, Control of attention, Witnessing mode,
Distress Tolerance, Emotional Regulation
- Build external support
Shelter, food security, no violence
Healthy sleep, exercise, hobbies
Relational support network
- Build internal support
Positive emotions: self compassion, optimism, gratitude,
joy, which are habits
Establish a good therapeutic alliance – trust, good will
- Resilience → Processing w Creativity



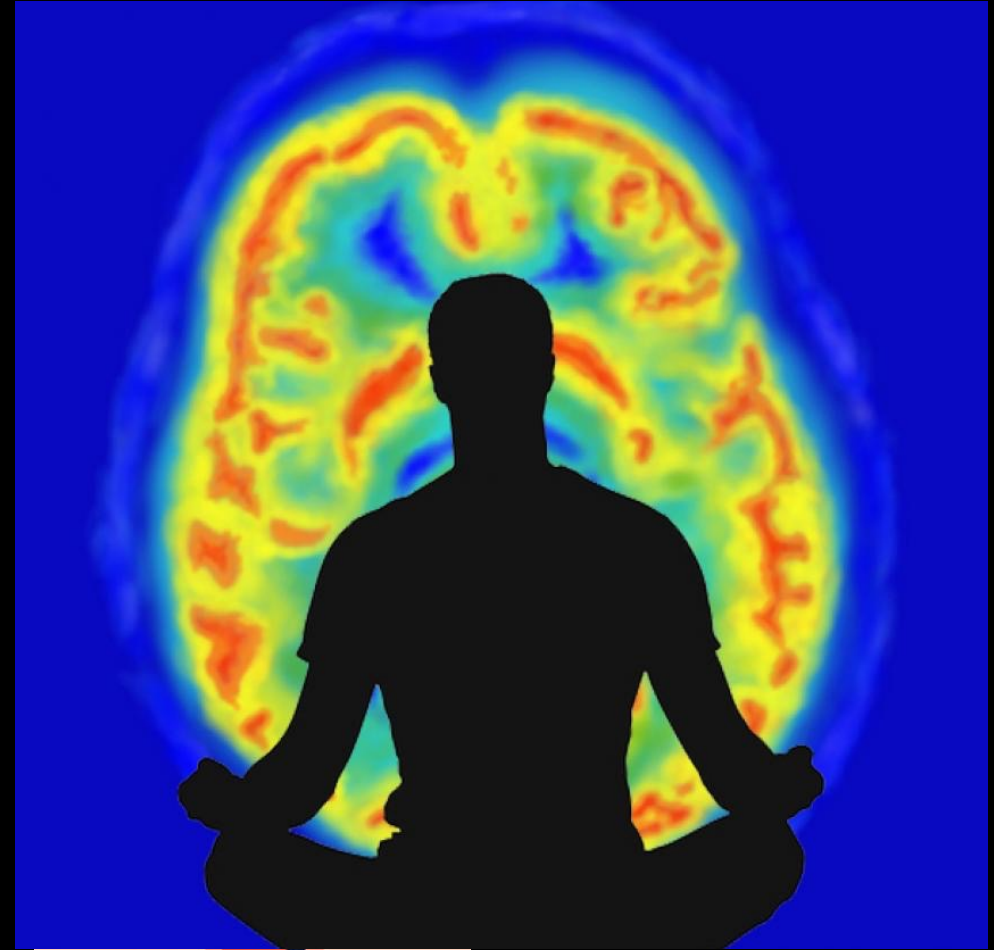
MINDFULNESS TRAINING: CLINICAL BENEFITS FOR TRAUMA SURVIVORS

- **Control attention which is hijacked**
 - Develop flashlight or laser focus, ability to direct attn
- **Re introduce body awareness & help regulate**
 - Flood vs numb/avoid
 - How to achieve calm
- **Promote emotional regulation & calm caring**
 - Wise mind: don't add reactivity & suffering
 - Witnessing: dual awareness (vs experiencing)
 - Compassion



A TRAUMA SURVIVOR IS NOT JUST STUCK IN THE PAST,
THEY ARE NOT ALIVE IN THE PRESENT. BESSEL VAN DER KOLK

- Mindfulness is all about
present moment awareness
- This brings back access to feelings
- Enlivens a person, brings back vitality
- Possible to notice the world,
relationships, the self and the body
again



THE MINDFULNESS MOVEMENT IN MENTAL HEALTH CARE

- Led us to new therapeutic approaches proving useful:
- *Mindfulness-Based Stress Reduction (MBSR)*
- *Mindfulness-Based Compassion Training*
- MB Cognitive Behavioral Therapy
Tailored for depression, anxiety, OCD , ED
- **Dialectical Behavior Therapy (DBT)**
- Acceptance Commitment Therapy (ACT)
- MB Relapse Prevention & Refuge Recovery for Addiction
- Eco-Psychology and Eco-Psychotherapy



MINDFULNESS HELPS AS THE FIRST STEP

- Be here now
- Adjust focus to balance energy
 - Let go into a soft, wide focus OR
 - Laser into a sensory detail AND
 - Nurture yourself with compassion
- Don't just do something – sit there ! Breathe.....
 - Critical for Emotional Regulation
 - Critical for Distress Tolerance
- Both work and interpersonal effectiveness require a well-regulated, functional, balanced person



A high-angle photograph of a person rappelling down a dark, craggy rock face. To the left of the person is a powerful waterfall with white, frothy water cascading over dark rocks. The person is wearing a blue t-shirt, dark shorts, and a climbing harness, and is looking up towards the top of the rock. A rope is visible extending from the top of the frame down to the person. The overall scene is dramatic and emphasizes the proximity to a natural disaster.

One Step Removed From Disaster
with it, but not “of it”

Witnessing mode

DBT - Dialectical Behavior Therapy



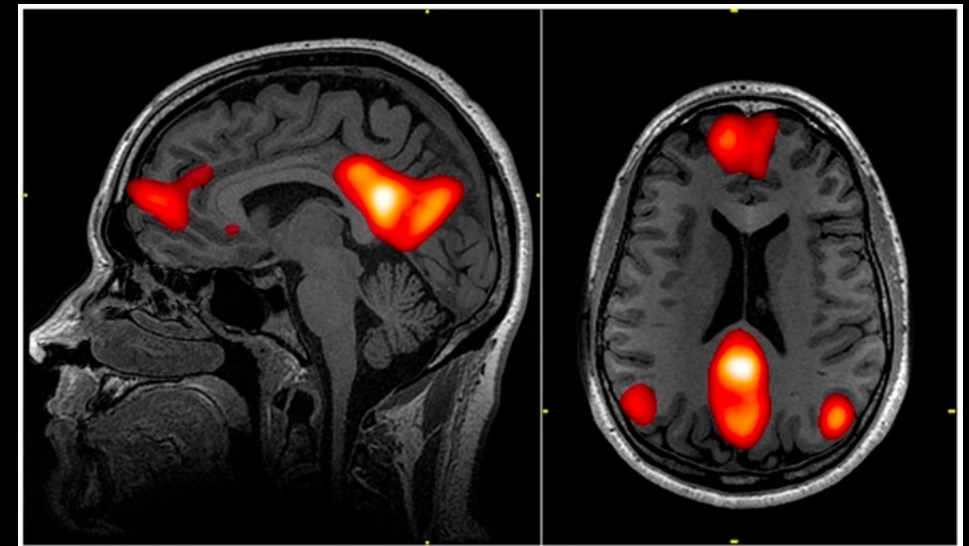
Healing doesn't
eliminate all the
hard moments.
It changes how
you handle
them.

Theresa Bryant-Davis



BRAIN'S **DEFAULT MODE NETWORK**

- Default Mode:
- When passive, not concentrating, where the mind goes.....
- Seat of rumination, “lost in thought”
Humans prone to overthinking
- Neurons always pulse, thinking is generated
Can't stop thinking !



DEFAULT MODE NETWORK: THE WANDERING MIND

- Introspective processing
- Self-referential thoughts
- **Judgements**
- **Remembering the past**
- Planning the future
- Worry about the future (anxiety)
- **Rumination (Lowers mood)**
- <https://www.psychologytoday.com/us/basics/default-mode-network>

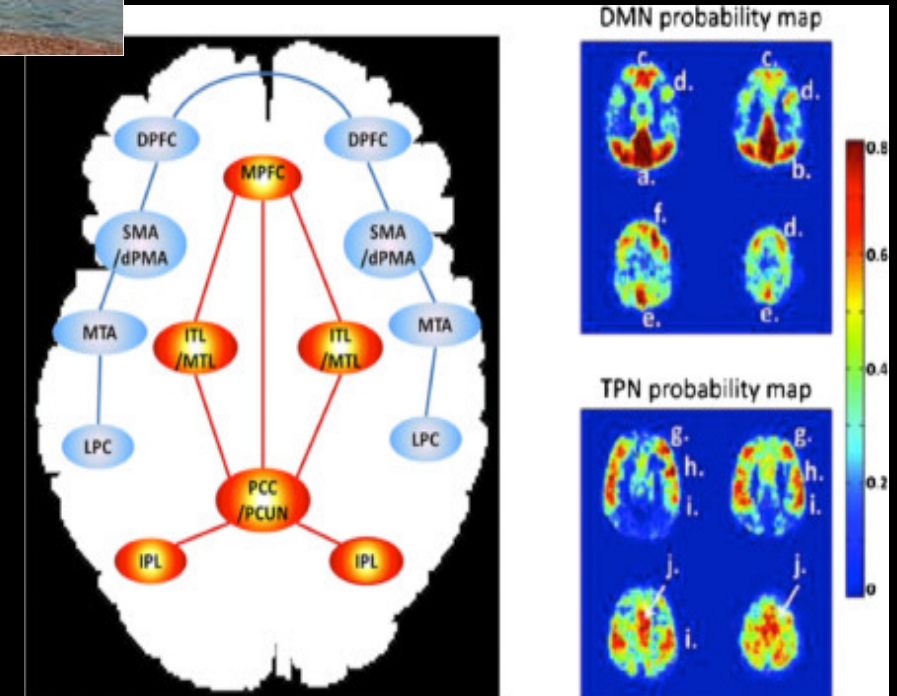


TASK POSITIVE BRAIN NETWORK OFFSETS DMN

- Attention/Concentration
- External engagement
- Fosters positive mood



- **Brain Areas:**
- Dorsolateral Pre-Frontal Cortex
- Dorsal Anterior Cingulate Cortex
- Intraparietal Sulcus 0 cortical areas
- (IPS), and the middle temporal area (MT)



MINDFULNESS-BASED PRACTICES VS MEDITATION

Varieties of Mindfulness Approaches

- Formal Sitting Meditation
- Mindfulness in Daily Life
 - Nature & Sensory stimulation
 - Movement & Physical Activity
 - Mindful Artistic Practices
 - Animal Assisted Therapy
 - Sacred Rituals: Vision Quest, Council
- Moving Meditations: Tai Chi, Qi Gong, Yoga, Martial Arts, Walking, Swimming



EXAMPLES OF MINDFULNESS IN DAILY LIFE

- Mindful Cooking
- Mindful Eating
- Stretching, Walking
- Mindful Art:



Coloring book, read a poem

- Infuse MF into other daily religious rituals
5 Daily Salah, Centered prayer, Catholic rosary
- Get outside in Nature: sensory, soundscape
- *For trauma clients, periodic breaks into mindful embodied presence are helpful to combat the dissociation habit over the day*



MINI-MINDFULNESS MOMENTS: SMALL IS GOOD SIMPLE IS GOOD

- Deep breathing
- Healing touch gestures
- Movement, stretching, yoga
- Take an Awe or Camera Witness Walk
- The Sacred Pause – just stop for 5 min



**Almost everything will
work again if you
unplug it for a few
minutes.**

Including you.

– writer Anne Lamott



EFFICIENT: MINI-MINDFULNESS TAKES LITTLE TIME

- 10 seconds: *Good Morning (your name), I Love You* compassion practice, Shauna Shapiro Ph.D.
- 5 min Deep breathing
- 5 min Sensory grounding
- 10 min Body Scan*
- 5 min Metta Loving Kindness Meditation
- 10 min Walking Meditation
- 10 min Qi Gong movements
- 5 min Tracing Outlines (i.e. of a tree or room)
- 5-8 min Guided Meditation (focused type)



MINDFULNESS IN DAILY LIFE:

WHY IT WORKS

- **Responding wisely & compassionately in reality**

- vs reacting in anger, hurt, etc.
- **Non-harming** applied to daily life

- Focus on **beneficial action**

- Ignoring of unhelpful thoughts as noise

- **Awareness of feelings/sensations**

- **Witnessing mode**

- **Outcome:**

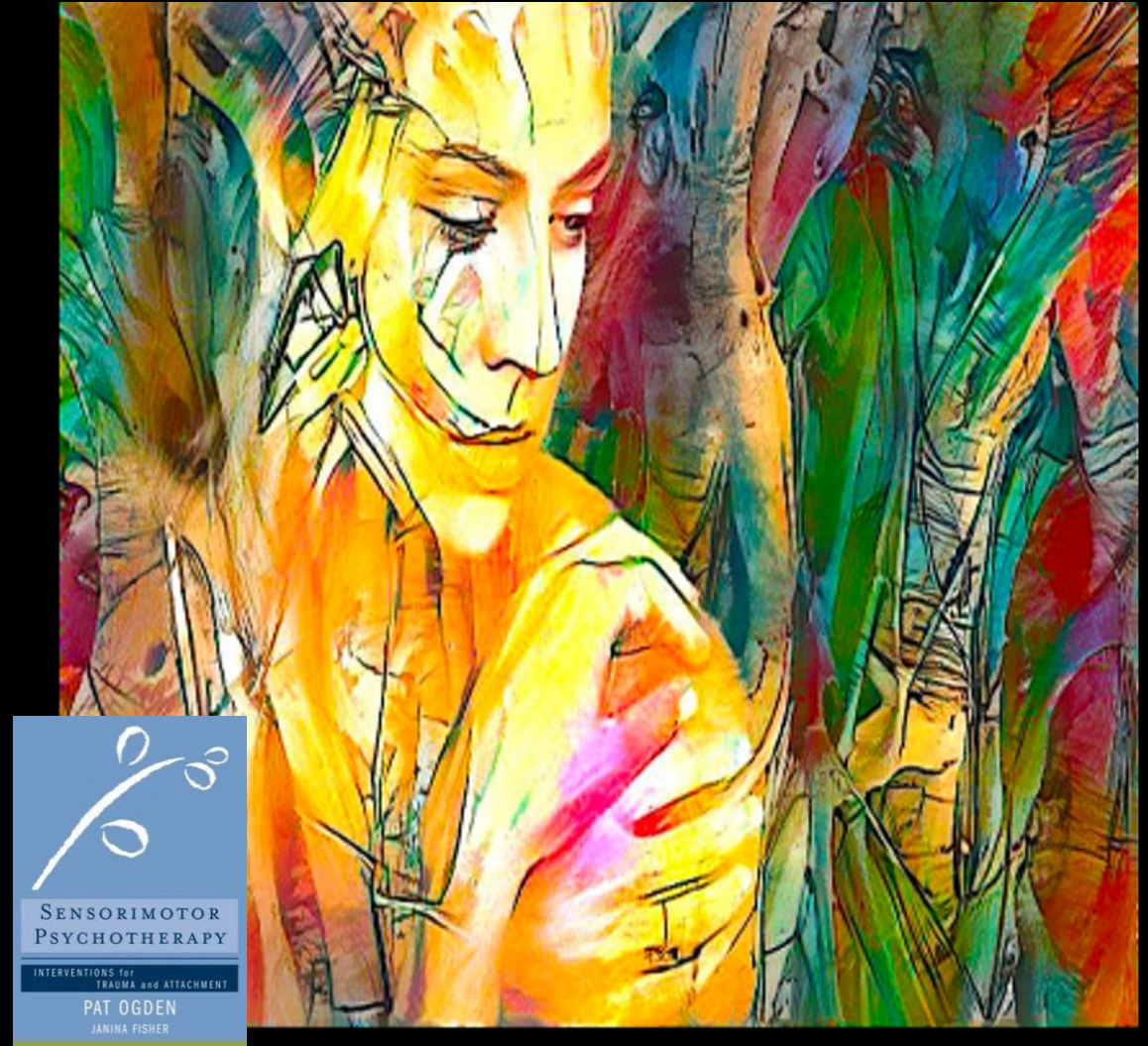
- Better able to manage and regulate emotions
- Break the cycle of suffering (samsara)

*Life repeats itself
mindlessly. Unless you
become mindful,
it will go on repeating
like a wheel.*

OSH O

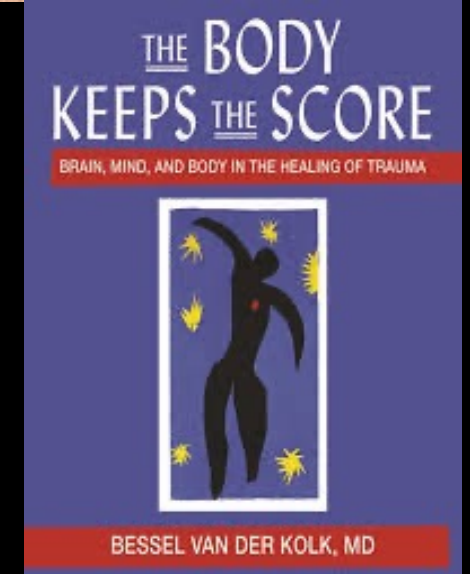
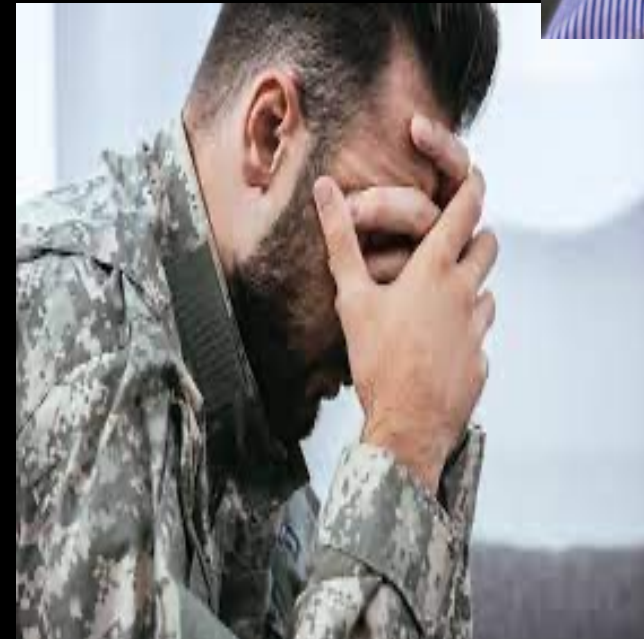
RISKS OF MINDFULNESS PRACTICES WITH TRAUMATIZED INDIVIDUALS

- If in pain, may become more aware of pain
- May become more sensitive, aware of painful things going on outside/inside self
- Harder to be numb & dissociate (protective)
- May become flooded with intrusive thoughts/images, overwhelmed with intense emotions/shame
- MF Process may contain a trigger: Silence, darkness, body movements, postures, certain words, “Relax”



FROM BESSEL VAN DER KOLK

- Trauma flashbacks are not a memory, it's a reaction (pattern) –
- a habit circuit in the brain
- triggered by environment, images, sensations, gestures



FORMAL SITTING MEDITATION IN TRAUMA: A DOUBLE-EDGED SWORD ?

- When p. with trauma becomes more aware, they may become more aware of their pain and trauma
- **Prep is needed**
 - Education, coping skills, mini safety plan
 - How to calm down, stop flashbacks, cope and get help
- **Scuba training analogy**
 - You may get tangled in seaweed and start to run out of oxygen
 - If you thrash about you will burn up more oxygen, make it worse
 - Need to practice staying calm, careful seaweed removal. Disentangle





The Challenge of Dissociation in working with Trauma

- A person must be present to change
- Re traumatization can occur if you are not here to protect yourself
- Signs of dissociation
 - Observe carefully
- Leave people in choice
 - It's ok to dissociate - this is protective.
 - Don't force participation
 - Encourage person to do what feels good
 - Ask with sensitivity, not perjorative
- What can we do to support being in the present (not dissociated) ?

TRAPPED IN RECURRING LOOPS

When the **default mode** is activated by stress or by habit

The brain ruminates
One thought leads to another
Proliferates. Mood plummets low, panic.....

Takes a person **AWAY** from reality
Safety, satisfaction (fake), & connection

MB-CBT can help: notice thought stream,
flood it with compassion, slow it down
Not pay attention to it, not follow its orders
Get back to the body/sensory reality: ground



A high-angle photograph of a person rappelling down a dark, craggy rock face. To the left of the person is a powerful waterfall with white, frothy water cascading over dark rocks. The person is wearing a blue t-shirt, dark shorts, and a climbing harness, and is looking up towards the top of the rock. A rope is visible extending from the top of the frame down to the person. The overall scene is dramatic and emphasizes the proximity to a natural disaster.

One Step Removed From Disaster
with it, but not “of it”

Witnessing mode

SKILLFUL MEANS: CONSIDER THE MEDITATION ENVIRONMENT

- Where is the person in the room ?
- *Pre-step: Orienting to the room*
- *Safety of the room*
Exit, no scents, gender neutral bathroom, privacy
- Body position comfortable & grounded
Eyes do not have to be closed
Can turn them down to floor (or not)
- *Permission, direction to be kind*
Can shift position or move
Can stop at any time
Take care of yourself !



IS IT OK TO BE EMBODIED? HOW ?

CONSIDER SOMATICS OF MEDITATION

- Moving vs static ?

Restless clients may need to move

Can be done inside: rock or walk

Qi Gong movements can be easily learned

Tai Chi most helpful as it slows, punctuates, flows

Many clients like Yoga, walking or stretching



IS IT OK TO BE EMBODIED? HOW ?

CONSIDER SOMATICS OF MEDITATION

Sensory Anchor: Establish stable anchor of attn

- Focus on breathing ?

Alternatives: sound, texture, visual object

- Focus on the body ?

Which body parts would be ok ? Start with safe body parts

Can combine with progressive muscle relaxation

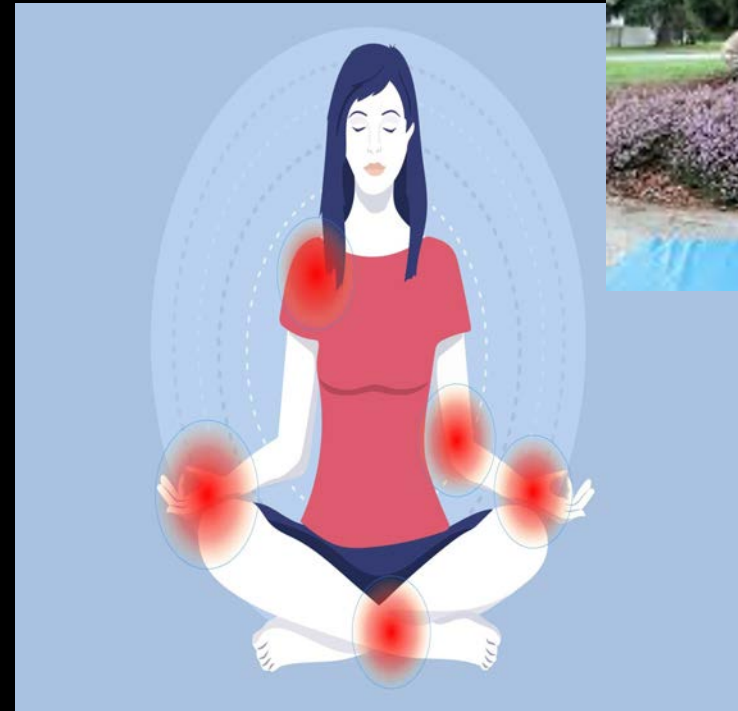
May be able to do a body scan : give a caveat to feel free to forego or leave any troublesome ones

- Teach client Activation Gauges:

Personal body cues:

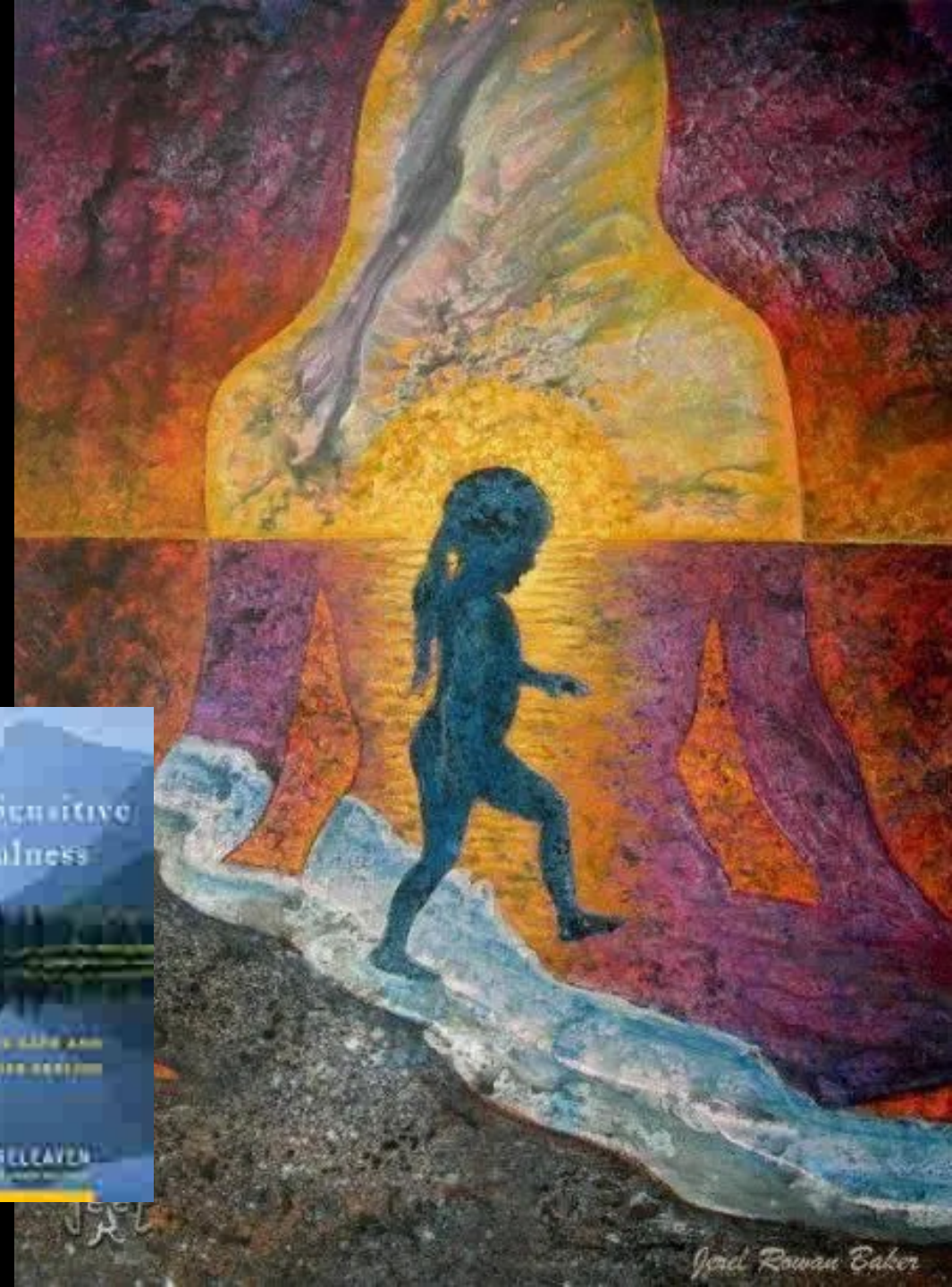
When my chest is tight, I slow down or stop

When my heart pounds, I go outside and take a walk



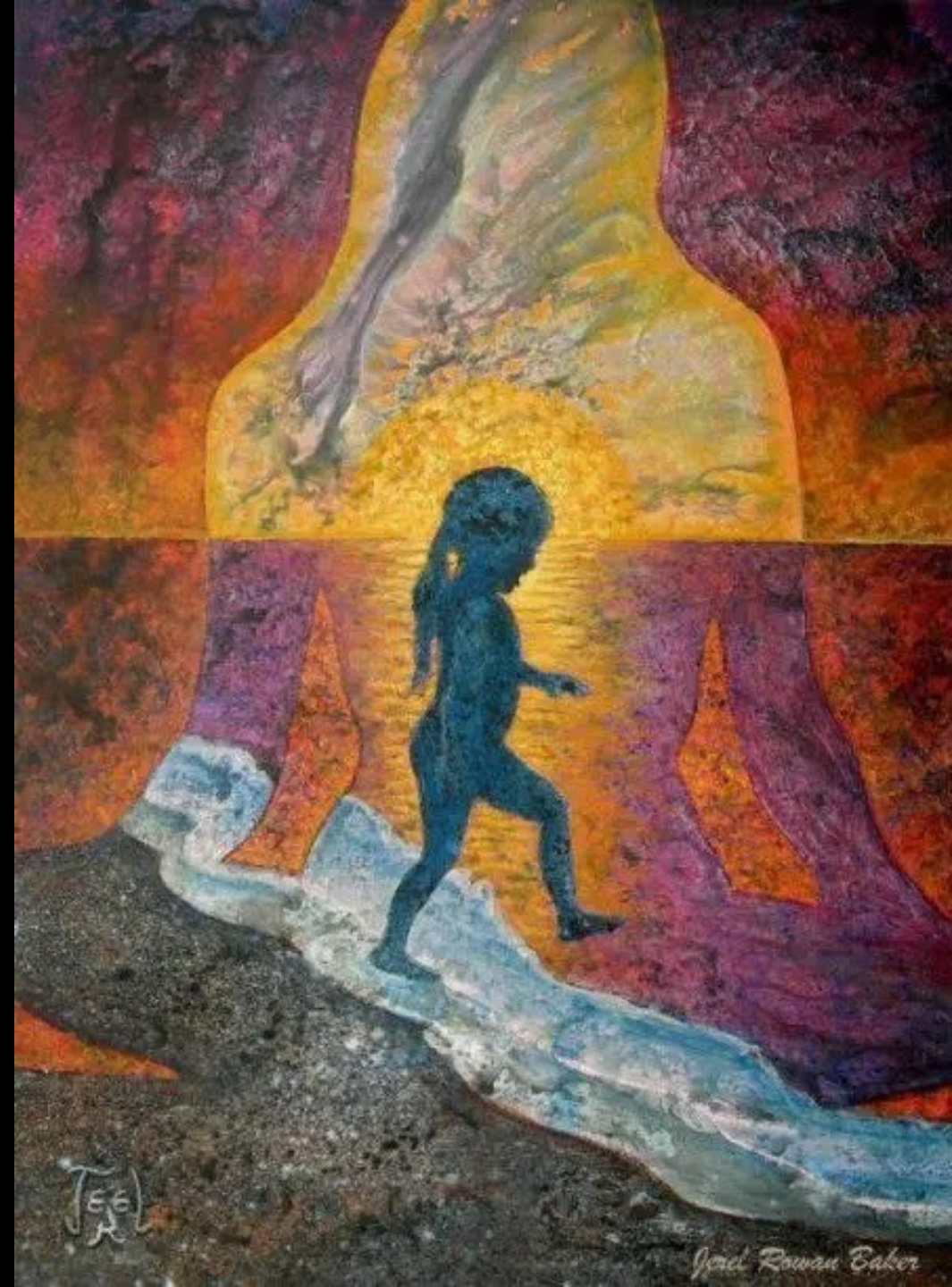
STAY WITHIN THE WINDOW OF TOLERANCE

- **Optimal arousal zone**
 - **Social engagement** vs
 - **Reactive Mode**
 - **Fight/flight hyperarousal**
 - Increased sensation/pain/tension
 - Emotional reactivity
 - Hypervigilance
 - Intrusive imagery
 - Disorganized cognitive processing
 - **Freeze hypo-arousal**
 - Low sensation or numbing
 - Emotional numbing
 - Disabled cognitive processing
 - Reduced physical movement
- Watch for **dysregulated arousal signs**



STAY WITHIN THE WINDOW OF TOLERANCE

- **Focus on stabilization and safety**
 - Never start trauma or MF work without first resourcing and training client
 - Always check on safety – as it fluctuates
- **Recognize when to apply the brakes**
 - Open eyes, take a break, move around, slow deep breathing, soothing self touch, resource object
 - Take it slow, underdo
- **Use the breath & other signs**
 - Take care re hyperventilation
 - Don't use when breath is awry (stressful), use sound
- **Use Arousal Scales**
 - 0-10, can get visual scales online
- **Ask: What are you experiencing now ?**
- *Watch your own window of tolerance a therapist*



CONSIDER MEDITATION SUPPORTS

SENSORY CONNECTS TO REALITY

- Therapist Monitors:
- Give safety parameters throughout
- Directive suggestions, then check
 - What are you experiencing?*
 - Who is there, what is happening?*
- Keep an eye on reactions, ASK



AVOID FEAR/IMMOBILITY RESPONSE

- Use Focus in/Widen Out Strategies As Needed
 - Focus in on Active Access of Sensory Comforts
 - Bare feet on floor, soft blanket
 - Kinetic sand, buckwheat pillow to knead
 - Positive images or objects
 - Widen out to Social Supports:
 - Open eyes to therapist, others in group
 - Pets & therapy animals
 - Educate room mates, friends
 - More bearable with someone else there



CONSIDER GUIDED MEDITATION FOCUS OPTIONS & AIDS

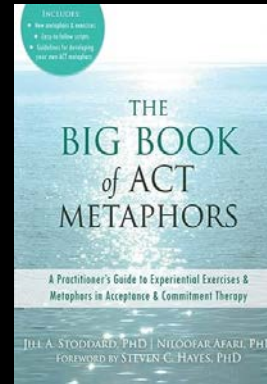
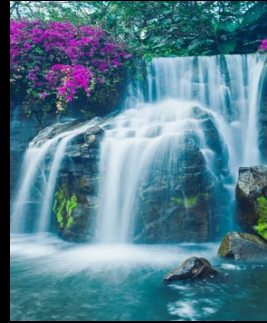
- Once you establish stable anchors of attention:
- Guided vs “Self Directed” Approach ?
- Open Awareness vs Concentration ?
- *Hybrid: establish a refuge in imagination, then open up when protected*
- “Poetic” use of words/images/metaphors

Limit silences

Can use bells or other soundscapes

Use of poetry to limit, focus words

Use of affirmations or mantras



CONSIDER MEDITATION SUPPORTS

SENSORY CONNECTS TO REALITY

- *Suggest Aids as needed:*

Sound: Metta phrases, mantra, soothing soundscape

Touch: Soothing touch gestures by client

Use of concrete , palpable resources

Kinesthetic: texture, spirit figure

Visual:

candle flame, tree or other object

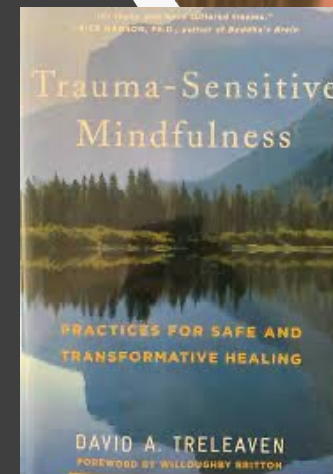
Soothing or spirit images

Soul Collage card created prior



IF TROUBLE ARISES, COME BACK TO BASICS

- **Protocol: Re Orient**
 - Stop, find a balancing activity
 - Can include distraction, animal
- **Attend to the sensory environment**
 - *Open eyes, touch a surface*
 - Use of directed outer scanning
 - Tracing tree branches/ office walls
- **Focus on resiliency**
 - Move to strengths, note them
 - Have supports/aids ready at hand
- *Flashback Halting Protocol if needed
 - P → Post traumatic growth



KNOW FLASHBACK HALTING PROTOCOL

- Right now I am feeling ...
 - And I am sensing in my body....
 - Because I am remembering (name, but no details)....
 - At the same time, I am looking around where I am now (name it)....
 - And I can see (concrete details)....
- So
- I know xxxx is not happening now/anymore





“Within you, there is a stillness and a sanctuary to which you can retreat at any time and be yourself.”

– *Hermann Hesse*



GENERIC MEDITATION TEMPLATE

RICK HANSON P.H.D.

- *Be here now*: Slow down & ground to reality, present moment
 - Let Be: allow awareness of what is
 - Let Go: negative elements
 - Let In: positive elements
 - compassion, kindness, friendliness of the heart (metta), gratitude, comfort, joy.....

- *Move on → Post-Traumatic Growth*

Wisely, responsively

Ethically

Compassionately

Buddhist Principle of Non-Harming

“Trauma begets trauma: hurt people hurt others.”

Bessel Van Der Kolk



— TRAUMA SENSITIVE SAFEGUARDS WHEN WORKING IN COMMUNITY SETTINGS: PRUDENT STEPS

Educate yourself about trauma

Screen for trauma when you do groups or classes

May also ask re suicidality, therapy experience & resources

Meet/develop alliance before course

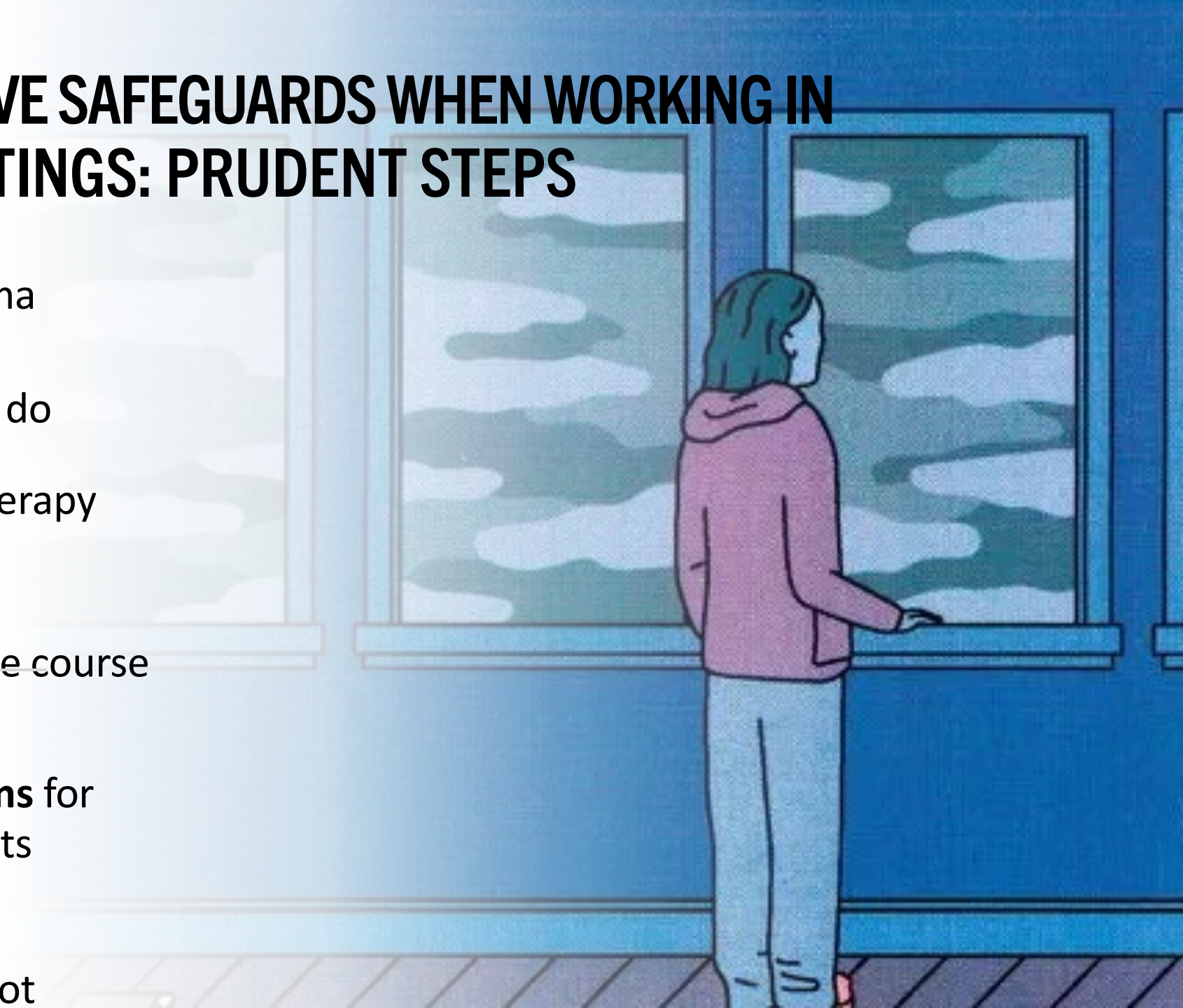
Have safety plans in place

Establish healthy group norms for trauma sensitive environments


Confidentiality

Dignity, respect

Choice in sharing or not



21 Day
#Compassion #Meditation
Challenge



A mind committed to **compassion** is like an overflowing reservoir -- a constant source of energy, determination and kindness.

~ The Dalai Lama

INTERNAL CHALLENGES FOR TRAUMA CLIENTS

- Hurt /no trust from boundary crossing
- Negative self image, self doubts
- Harsh inner critic, self judgment
- Shame, blame, guilt
- Victim (vs survivor) mindset
- Pain paradox: If you avoid pain, it often gets worse (MBSR)



MINDFUL COMPASSION PRACTICES FOR SHAME

- Natural antidote to shame is **compassion**
- Shame gets tangled in the **brain's default mode network** — becomes a habit (of thinking)
Limits willingness to try new things
Can be a **self-fulfilling prophecy**
Can lead to **self sabotage**
- **Shame:** *Useful if it lasts for < 5 min and leads to a change in behavior !*

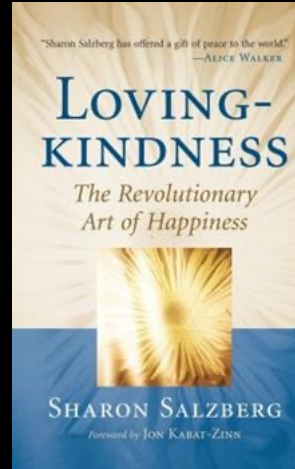
Frank Pittman M.D., Atlanta, Georgia



WHEN THE GOING GETS TOUGH, THE TOUGH GET COMPASSIONATE

Compassion Meditation Practices

- Lovingkindness (Metta) Meditation
- Compassion (Karuna) Meditation



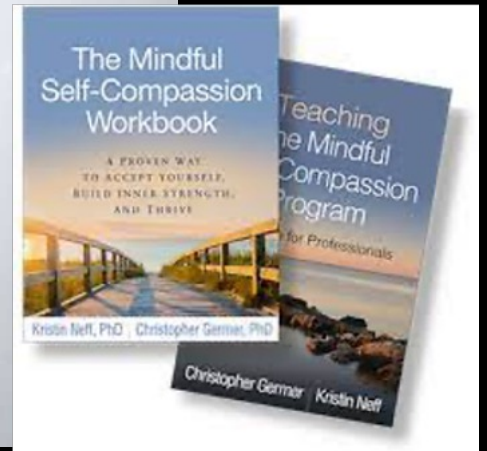
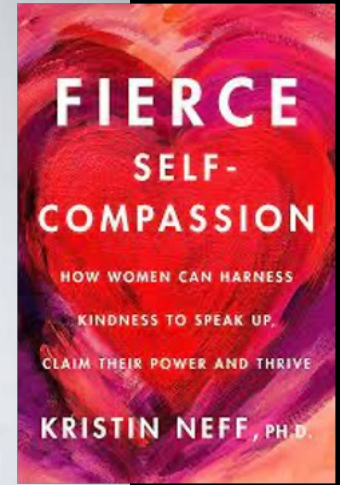
Self-Compassion in Daily Life Practices

- Treat yourself as you would a beloved friend/pet
- Write a letter to yourself about what you need
- Good morning - I love you ! Mini-meditation
- Practicing self-care based on unique needs present



“TO HEAL IS TO TOUCH
WITH LOVE
THAT WHICH WE
PREVIOUSLY TOUCHED
WITH FEAR.”

—STEPHEN LEVINE



A wide-angle photograph of a coastal dune landscape. A wooden boardwalk, made of light-colored planks, starts in the foreground and curves gently to the right, leading the viewer's eye into the distance. The dunes are covered in a mix of green grass and patches of brown, sandy soil. In the background, a line of dark evergreen trees marks the horizon under a heavy, grey, overcast sky. The overall mood is quiet and contemplative.

BE PATIENT
SKILLFUL MEANS BUILD *OVER TIME*

A meditating human figure, rendered in a translucent blue color, is centered in the image. The figure is in a lotus position with hands in a prayer mudra. A bright yellow light emanates from the crown of the head, and a green light is visible at the heart center. The background is a dark, textured field with a large, glowing Sri Yantra (a complex geometric pattern of nine interlocking circles) in the background. The circles are colored in a gradient from red on the outside to yellow in the center. The text "FURTHER RESOURCES" is centered over the figure's chest area, with a short horizontal line below it.

FURTHER RESOURCES

ARE MF PRACTICES BENEFICIAL FOR THERAPISTS ?

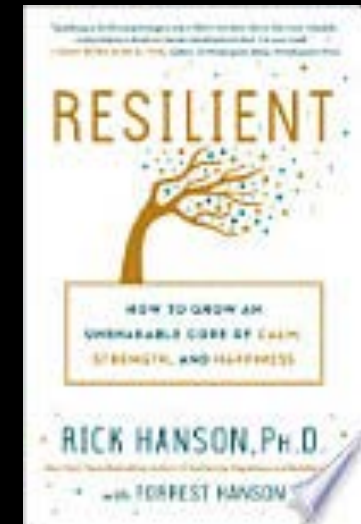
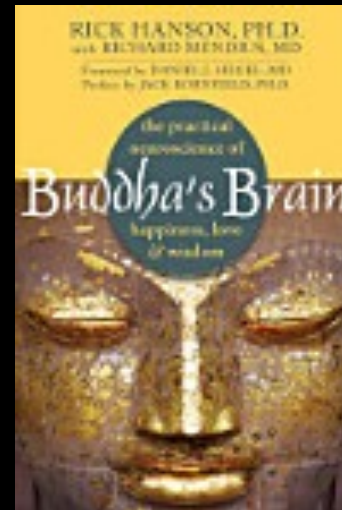
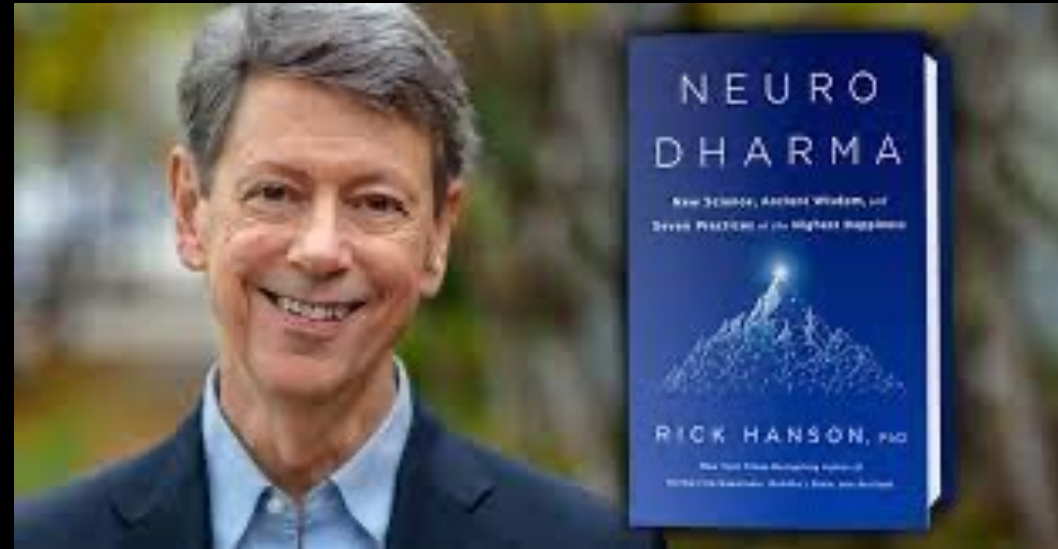
- Burnout is a kind of trauma
 - Overload
 - Neglect
 - Lack of resources or control
- Vicarious trauma protection needed for therapists
 - Compassion vs empathy
 - Need to let go of what we experience
- Improve presence & effectiveness of treatment
 - Importance of the therapist's being as the instrument of treatment*

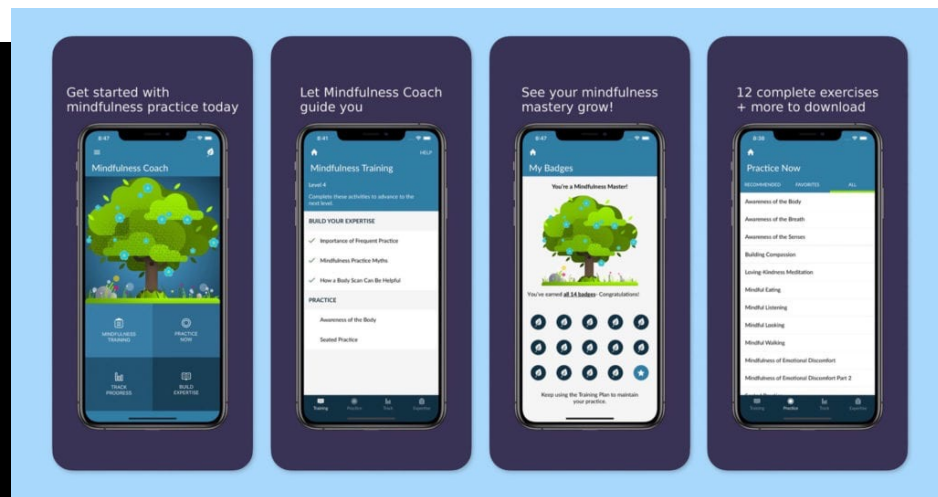


REPLENISH WITH “HEAL” MEDITATION

RICK HANSON PH.D.

- *PREP*
- *Take time to ground*
- *Establish a safe space*
- *Open positive “boxes” if you need to*
- **HEAL**
 - Have a good experience
 - Enrich that experience
 - Absorb experience into NS, whole being
- Let it sink in
- *Optional*: link to negative experience to offset that pain. Not recommended for trauma clients at the start but works for some people later
- *Gratitude*





Wellness



PTSD Coach
Health & Fitness



Moving Forward
Health & Fitness



Stay Quit Coach
Health & Fitness



USEFUL VA MOBILE MENTAL HEALTH APPS

- Mindfulness Coach

https://www.ptsd.va.gov/appvid/mobile/mindfulcoach_app.asp



- Move ! Coach

<https://mobile.va.gov/app/move-coach>



- CBT-I Coach

<https://mobile.va.gov/app/cbt-i-coach>



- AIMS for Anger Management

<https://mobile.va.gov/app/aims-anger-management>



USEFUL VA MOBILE TRAUMA APPS

- PTSD Coach

<https://mobile.va.gov/app/ptsd-coach>



- PTSD Family Coach

<https://mobile.va.gov/app/ptsd-family-coach>



- Beyond MST

<https://mobile.va.gov/app/beyond-mst>





- MARC Home Page

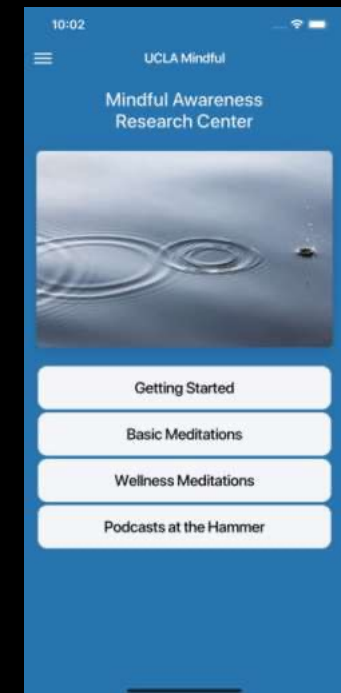
<https://www.uclahealth.org/programs/marc>

- Free Guided Meditations online

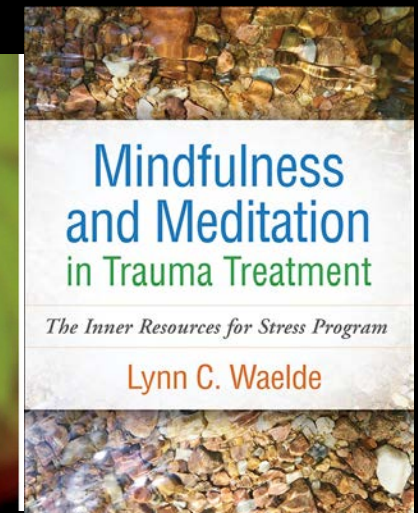
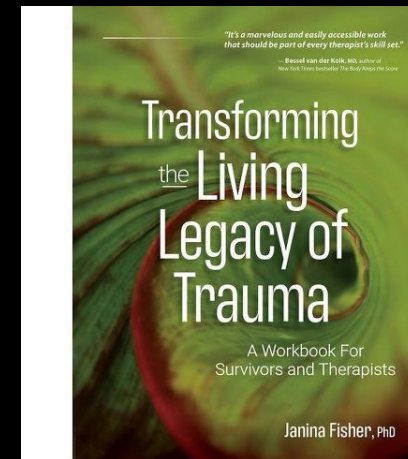
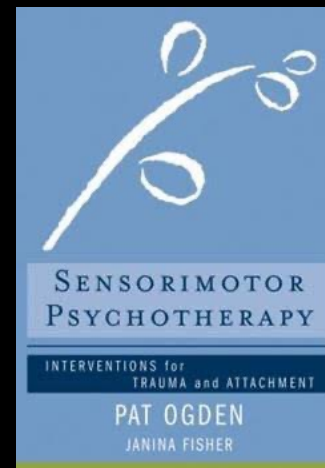
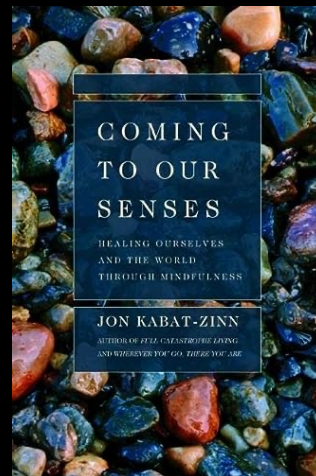
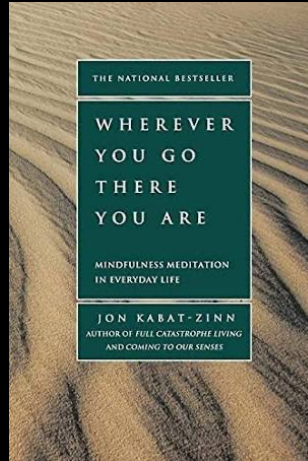
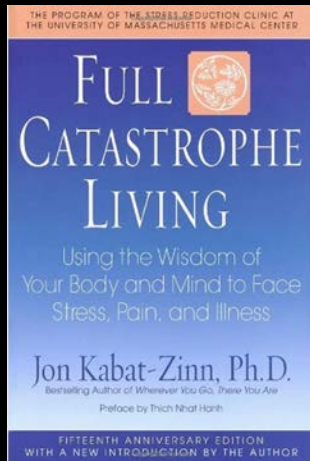
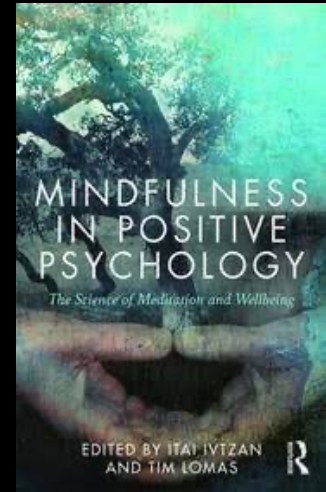
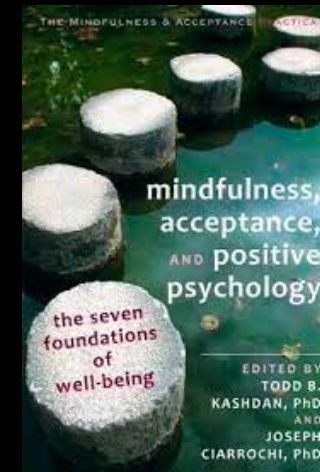
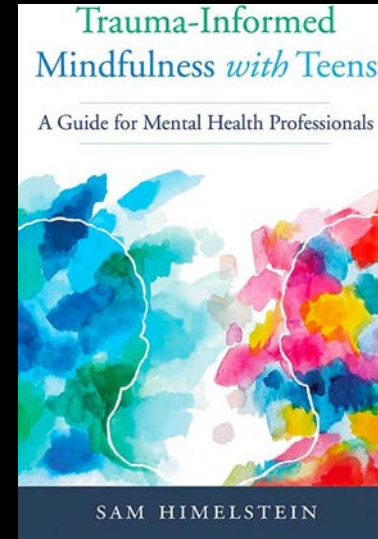
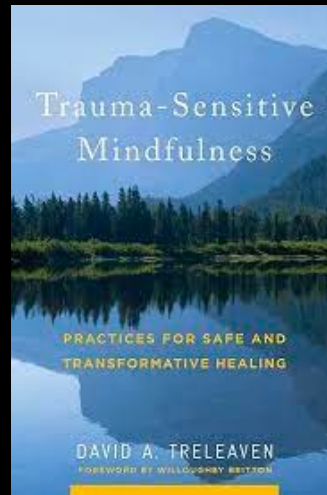
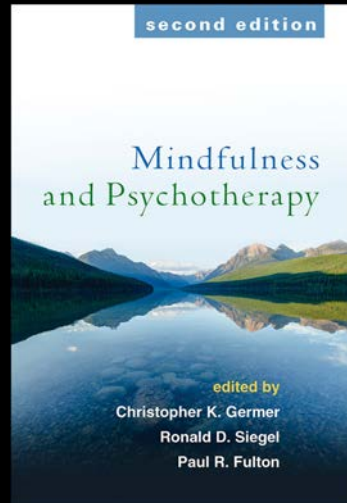
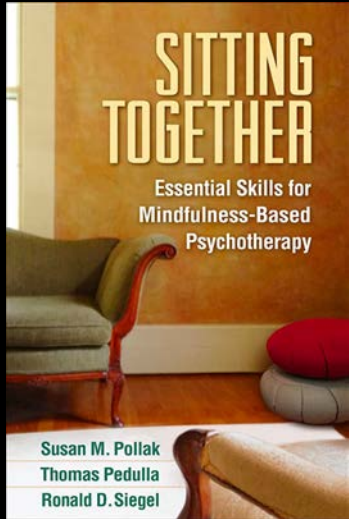
<https://www.uclahealth.org/programs/marc/free-guided-meditations>

- Free Drop In Meditations

<https://www.uclahealth.org/programs/marc/free-drop-ins>



FURTHER RESOURCES FOR THERAPISTS



LINKS TO RICK HANSEN PH.D. & HEAL PROTOCOL

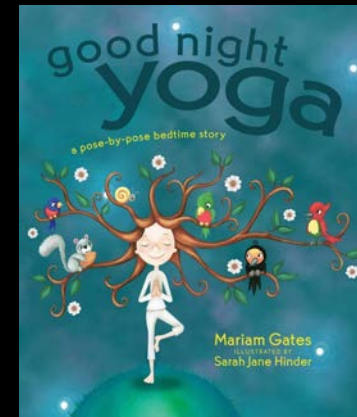
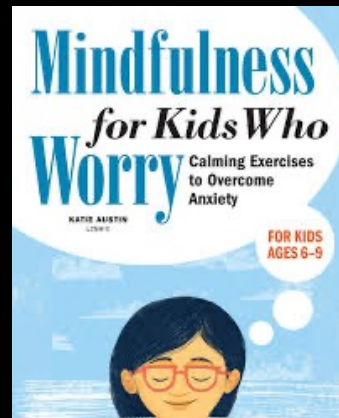
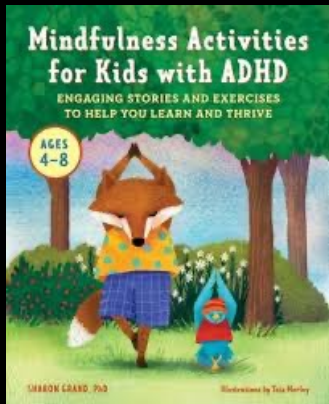
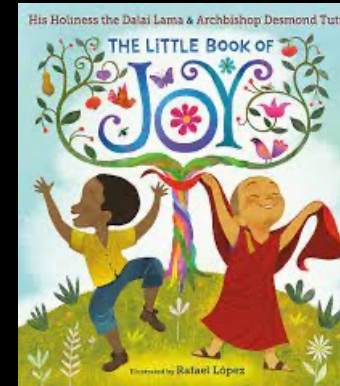
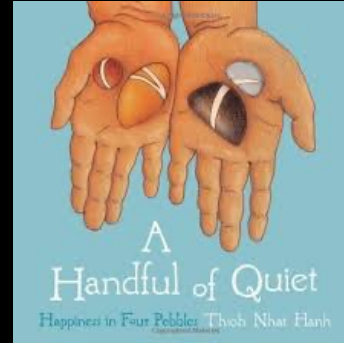
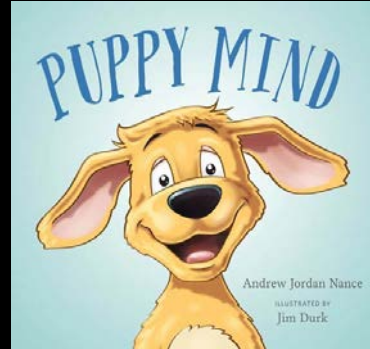
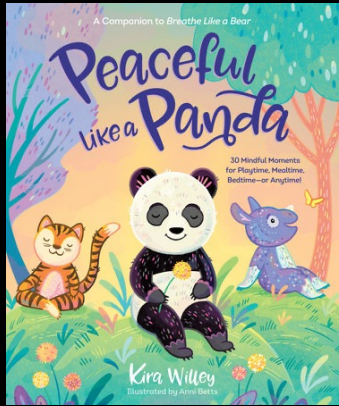
- Website: Practical Science of Lasting. Happiness
- <https://www.rickhanson.net>
- HEAL instructions
- <https://mindfulnessexercises.com/downloads/heal-steps-to-happiness/>
- <https://www.youtube.com/watch?v=tCOZ1TG1Vj0>





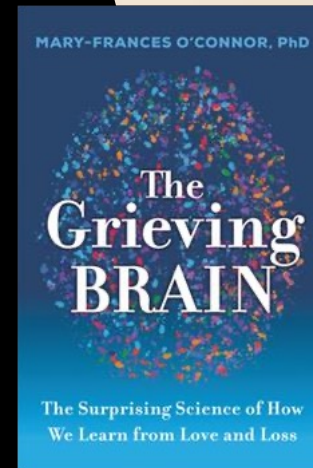
**DON'T FORGET
THE FAMILY**

MANY MF RESOURCES FOR CHILDREN



ROLE OF COMPASSION IN TENDING TO GRIEF & LOSS

- Universal challenge recognized in ancient times
10,000 joys/sorrows of human experience
Inextricably tied with trauma
- Hugely important, especially post pandemic, but.....
Under emphasized issue
Rarely any training or even attention by professionals
Not part of “moving on” from Covid
- Requires patience, holding a space for the grief
With compassion through waves arising
- Difficult Forms of Grief:
Disenfranchised grief
Complicated bereavement
Grief overload



A photograph of a forest floor covered in a dense carpet of small blue flowers, likely bluebells. Tall, slender trees with light-colored bark stand in the background, their trunks creating a vertical rhythm. Sunlight filters through the canopy, casting soft, dappled light on the ground and the flowers. The overall atmosphere is serene and natural.

THANK YOU
FOR YOUR ATTENTION
& INTEREST

WE APPRECIATE YOUR FEEDBACK

Please complete this survey:



Access survey using QR Code
or link below:

[https://dpbh.questionpro.com/
Mindful](https://dpbh.questionpro.com/Mindful)

- For CE credit, go to:

[https://dpbh.questionpro.com/ce-survey-
integrating-trauma-responsive-mindfulness-
120623](https://dpbh.questionpro.com/ce-survey-integrating-trauma-responsive-mindfulness-120623)

Thank you!

Contact us at info@vfwc.ucla.edu