

Podcast Series: Holistic Nature of Us

Episode # 62 Meet: Massiel Abramson

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Hi I'm Judith Dreyer,

Thank you for joining me for this pod cast series "The Holistic Nature of Us".

I invite you to journey with me into a better understanding of the concepts behind our holistic nature and how that ties us directly to the natural world around us. My intention is to be your guide for this half hour as we begin seeing our world with fresh eyes, gaining more understanding and learning how can connect the dots in practical ways that we are nature and nature is in us.

I feature a broad range of guests deeply concerned about the environmental issues of our time and more, authors and educators, practitioners and others whose passion for this earth and for all species helps us create sustainable bridges of understanding. These folks are innovators, action oriented, creating solutions in a variety of ways that honor us and the planet's holistic nature. I am honored to share their stories, their projects, and their passion with all of you.

And today I'm delighted to introduce you to Massiel Abramson. She's a licensed marriage and family therapist working with infants, young children and their parents providing attachment and trauma based therapy. She has worked in the clinical mental field for over nine years in different capacities: management, training and direct care. She holds a bachelor's degree in psychology and a master's degree in Human Development with a specialty in Marriage and Family Therapy from the University of Rhode Island.

And today I'd like to welcome Massiel. I invited her here to talk about the world of family therapy, specifically working with children and infants, and hopefully look at the holistic model in terms of what's happening in that

world and how it's affecting them and their treatment and their healing. So welcome Massiel!

MASSIEL: Thank you. Thank you for having me Judith. I'm happy to be here.

JUDITH: Great. So, what I'd like you to do is to tell us a little bit about yourself and how you got into this field.

MASSIEL: Great, so again thank you. I got into the field, I always knew from an early age that I liked, had a special interest in people, special interest in children, especially when it came to how people communicate with each other and even when people have difficulties in communication, whether it's because of emotion, emotional issues or even just language or physical difficulties that interfere with communication. So, I got my degree in psychology and when I was looking to see what to do further in that area of human being, I found marriage and family therapy. And marriage and family therapy is a unique kind of therapy in that it's not just about the individual mental health but it's understanding that no one works in isolation and the whole is greater than its parts. Understanding that, for a person to really find healing you need to bring the family in. You need to bring their relationships in. So that's the field that I went into. It was very much related to the dynamics that interplayed in families and in families when they're going through different life circumstances. A new parent, a divorced family, families going through marital conflicts, empty nest type situations. Over the years I've worked with different populations but I kind of narrowed things down as of late to working with infants and young children. I've learned so much about humans now that I've been working with the youngest people. There's so much to learn about babies and they don't work in isolation, you know? As a baby there's actually a saying in early childhood which is, there's no such thing as a baby. There's only a baby and another person. Babies exist only in relationships because they can't take care of themselves. It was a perfect combination of my work and understanding people's systems, like how people interact with each other, especially when it comes to a baby that relies so much on their caregiver. That's how I ended up here.

JUDITH: That's really interesting because what I'm hearing in your story is that there is a holistic concept involved which means that we're only as strong as our weakest link and we forget that in our family dynamics. We

think we can just go off and take care of everything on our own but who are we outside of the family? Who are we inside the family? And nature works in community. We know we have very complex ecosystems out there that help and support each other, and the same thing is true for us.

One of the focuses I'd like to talk about is children. They're invaluable to us. They're the future generation. What do you see happening in general in your line of work?

MASSIEL: Like I said in working in this field with different ages and different populations what's really different now and what's new is infant mental health and early childhood mental health. You can look at a baby and understand that there's development. There's development in their emotions, in their communication, in their physical needs. It's easier to see probably physical changes that babies go through. I mean at first, they hold their head up. Then they roll over, crawl, walk. You see the evolution of that. Now we're starting to observe more the evolution of their emotional work as well. So, for example, a 2 month old baby can follow people with their eyes and even kind of turn their head and follow somebody across the room. While a six month old baby sees somebody kind of walking across the room and they might show some stranger anxiety, some weariness of who they're look at.

It goes from just the act of observing and making eye contact with someone to actually having a feeling about it and having a response to it. There is so much power in this knowledge about the human growth, not only the physical milestones that babies go through but the emotional milestones. And with that power and knowledge that we give the caregivers, the mothers, you can start to understand that there is a person-hood already in a baby that's days old. That builds a strong attachment because the mother, for example, the caregiver is able to understand that the baby is experiencing something, put themselves in that perspective to help the baby overcome anything that they go through. Because babies actually go through a lot and a lot of times, well what kinds of things could an infant need or a young mother (need)? And what infant mental health focus really promotes a strong attachment, it decreases chance for maternal depression, decreases the chances of the child developing some further mental health disorder when they're a little bit older and it's a little harder to address it and create increase in communication. The communication is so invaluable that being able to create that in your first relationships in the very early days of

your life is critical. So before there was a time where people thought, okay the baby is too little for that, too little for reading, or they can't see too far so it doesn't matter so much what happened to him when he was 2 years old but now we starting to understand babies have strong memories, our bodies have memories. So that's one thing that's a very big shift in the focus and there's a lot of funding going into it. And going hand and hand with that and coming back to this like nature perspective is the push for home visiting. A lot of times when you think of therapy you go to a therapy office. That's not always possible for people. It's actually a luxury in a lot of situations and it's uncomfortable. It's time consuming. It's expensive. For some people it's even embarrassing. It's a difficult thing to do. With these programs now we are able to go right into the homes and see babies and moms in their natural environment in the early days when it's very difficult to go out. So, home visiting is a little bit more...has more what can I say, it's just developing now as a really great mode of providing therapy to our youngest and most vulnerable populations. As you know when a child and their mother are together, one or two missing resources can add up quickly as a problem. So being able to be at home and finding them local resources and seeing the environment creates a much faster treatment success.

JUDITH: That's interesting because it's almost like we've come full circle. I did visiting nursing a number of years ago when we still went out and we saw the new moms. Unfortunately, we'd see teenage moms or young moms that had no support system and you're right, they lived in terrible conditions. These babies were often neglected not because...not for any major reason but the mother just didn't have the support, the knowledge or the where withal to take care of that little one. It sounds like more research is being done or has been done on the fact that they are people. They have a person about them at a very young age, almost from the time that they're born.

What kinds of problems do you see that are more prevalent right now?

MASSIEL: Right now, there's a great deal of just the financial and housing burdens that interferes a lot with a healthy bond with the baby. So oftentimes the mom is not able to work or get funding, get a good maternity leave. Me personally, I'm actually expecting a baby.

JUDITH: Oh congratulations!

MASSIEL: Thank you, thank you. I'm actually almost 6 months pregnant right now and even for me, who I can say I'm doing pretty well in my life and I have a stable environment. When I look at the package for maternity leave it's not what I hope it can be in the future. So that's me. People who just work in a job that they get no benefits it is so difficult. So, a lot of times they end up having to live with friends or in unstable housing, in difficult environments and having to get night jobs which is so difficult to manage. All the energy and all the cheerleading that a baby needs when parents are sleepy. So that's one major, almost like a societal burden that's not even the fault of the baby or the mother. It's just a difficulty. And one other issue that I deal with, just to give people a perspective that mental health problems sometimes come with medical problems. I have a lot of clients that are hard of hearing or deaf. I'm talking about the babies or the parents. So right there, from an early age, there might be a lot of difficulties with tolerating frustration, understanding what the baby needs. Even things like waking and eating issues because you're not understanding necessarily what the baby is trying to communicate whether they're full or not, or if the baby is anxious it might be easier to get some comfort from food than it is from mom who can't even express myself too clearly right now. So again, environmental issues and then also medical issues that come into play with how are you going to deal with this emotionally?

JUDITH: So, it's a multifaceted approach you need to take as a therapist when you evaluate a family with a new baby. If you're called into that situation, what do you do? And as you said, therapy costs can be astronomical so it's interesting that there are programs that help you go into the home. I loved being a visiting nurse because I got to see somebody in their own environment, and I got to see how well they followed their hospital instructions and that was a big eye opener to me. We only hear 1/3 of what the instruction is upon our leaving the hospital and when we go home, we have to figure out the rest. When the nurses come in or yourself or therapist comes in, I'm sure it's a tremendous benefit to the family to have you go over the instructions so that more of them are put into place.

MASSIEL: Right, right. A lot of times, like you're saying, you have received some of the information but you're kind of drowsy, or maybe you're overwhelmed or it's so much that you're taking in, so being able...I know even for me when I left the hospital with my first daughter I did feel alone and a little out of sorts at a time when everybody is looking at you and saying, aren't you just so in love and aren't you so impressed. Well yes but

I'm also really tired and confused and trying to figure out how to nurse my baby and it was a lot. So being able to come into somebody's home and tell them, listen I know that it's not just all roses and wonderful smelly babies right now. There's more to the story. What is going on with your financially? What's going on, how's the house set-up? How's your home set-up? Is there light in here coming in? Are you getting good ventilation? Is the bathroom safe? Things like that and then ask the holistic approach is asking the mom, okay we assess mom's mental health issues as well like what does she have going on? Whether it's current or in the past because, like I was saying earlier, because of the family systems perspective we come in with all these things from the past that affect our parenting. They're informing us for the good and sometimes they're informing us in subconscious ways that we don't really know. So being able to talk about it, shed some light on that is so helpful and looking at the baby's development as well. So, it is very like all inclusive work.

JUDITH: Well it has to be, because in order to have them thrive and be sustainable in their living situation you have to look at all the spokes on the wheel because if one of them is out of sync it's not going to work. I had a business guru on the other day, and he talks about the eight pillars of wellness and if you miss one of them the rest of them aren't going to function that well. I can see where what you do is holistic by nature. It has to be. Otherwise I don't think you would be a very good practitioner, right?

MASSIEL: Right.

JUDITH: That's wonderful. Can you give us any examples or a case story of someone that you felt really benefited by this approach?

MASSIEL: Yes. One example I have is a family that I worked with at home. She was in an urban setting and so there was not a lot of room for her to leave the house, not necessarily a lot of things in her community for her, for the mother to contact. They came in as a result of the pediatrician noticing that the child had some developmental delays when it came to speak and even with some fine motor skills, so almost like how they're using their hands. And the mom also had some learning disabilities from when she was a child. She was able to self-identify as having anxiety and depression. When I went to her home, she lived in a room that was almost like you're renting one room in a house. They were confined to this one space. So given, you know, in our work together what we were able to discover is well

given mom's language and almost like a speech impediment the baby was going to have difficulties to speak. We were able to actually get her set-up with a speech pathologist while also working on speech and language in our play therapy sessions. And play therapy is the treatment model that we use so babies communicate through play and understand things through play, sort things out, you know. They're not necessarily sorting out their life by paying the bills and sweeping the floor and then feeding the dog. They're more like okay I got to take out my toys and maybe I can make a tower and it keeps falling over and then I'm asking the mom for help and then it's time to clean up. Going through that you learn so much and so many skills can be practiced. We made so much progress in working with the baby, getting the services that were, you know sometimes things are beyond my abilities. Like for example speech pathology. So as time went on the baby was improving in her communications. Mom was able to talk a little bit about her anxiety and her management of the situation, but they were still very isolated. So, with this client and with me seeing this pattern with a lot of my moms, mostly moms. It's moms and grandparents that I work with. We ended up discovering that yeah there's isolation and there's lack of time to be able to reflect on your own internal resources. So, what I did, considering her situation and what I saw overall was, I created a collage therapy group for self-reflection. And I created it at the local library and invited her and other moms that were on my case and other people that I work with. They were able to come and once a week create a collage on self reflection with different models for each time they came to the session. So, one time about coping skills and internal kind of working model, another day about relationships and the changes that they've been through as a young mom, another day about the past and heritage and traditions and what they're kind of carrying and another time talking about the future. Through this process it was beautiful to see how mom was able to come to the library, find resources there that she hadn't tapped into that were so close to her and also reflect on motherhood and the changes in that regard. A lot of these women actually ended up joining other groups as well. It created a community and a relationship that they didn't have before that.

JUDITH: It's a great story. Again, you're highlighting how there's many strands to the web and how they're interconnected so that we feel a part of something, that we feel supported. You know we all thrive when we feel supported and our basic needs are met. I really like that as a great holistic approach and the example in your field, it's beautiful.

Massiel could you give our listeners three practical tips that they could use in their everyday life based on your work?

MASSIEL: Absolutely. I'd love to. So, one thing that I really see as very important is to **put development first**. Whenever you're going through something in your life that's difficult, but I always try to remind myself in my own meditative perspective, also when things are going well. So when things are going poorly and when things are going well, put development first. Ask yourself, **where am I in this stage of my life? And where is the person that I'm in relationship with?** In my case I'm talking about babies, right? So where is the baby in this part of their life? Is this typical for this age? What else could be going on that could be affecting the progress of this? Have I been in this type of situation before? Because most of what we're going through is founded in developmental milestones so if I've been feeling upset, I've been having lack of sleep lately. Then it's like oh yes if you consider the job situation that you're having then of course it would lead to that. So how can you take care of those aspects of your life that so that you can be more attentive to your baby when all they want to do is play, or something like that. I always remind people, you know, we don't stop developing when we're 21 and you don't start developing when you're 2. You are developing every single day so always ask yourself where am I in my development? And put that at the forefront when in doubt.

Another advice is something a little bit more practical is to **engage with your babies in vestibular movement and touch activities**. Understand that there is so much to learn just from your senses and from your body that doesn't really require much talking like, how do you feel? How are you feeling today? So, for example for a baby that's only 2 months old, well what kind of game could we play. You could play tummy time. You put the baby on their stomach. They practice holding their head up. You know parent, caregiver, grandma stays close so that the baby doesn't feel alone. (For an) 8 month old it might be being bounced safely or being danced with. A 3 year old, you could do a game of row your boat where you're kind of rowing each other back and forth by holding hands to the rhythm of the music. A lot of times fathers are naturals at the more physical play but there is a lot of evidence that shows that when moms do it babies get very delighted by it too. Jump in there with the physical play.

And lastly, just to remember that **therapy is not self-indulgent**. A lot of times in the population that I work with in urban environments, when people

have a lot of maybe more physical or social stressors it might be like, well I don't have time to be sad about this or I've got to be strong. I've got to pull myself up by my bootstraps. Remember that life events can create for you to have a need for mental help. So, remember it's not about being self-indulgent. When one person in the family gets therapy, gets some type of coping skills it trickles into the rest of the family and into your friend's unit. Go for it. If you've never tried it before now than it takes a few tries before you maybe get the right fit, but everybody deserves a little bit of self care in that way.

JUDITH: Those are beautiful. I think they're very easy to apply. In a holistic model we work on a wheel, so where am I in this stage of life is always a great question to ask no matter where we are. And then we forget even as adults how important our other senses are. We tend to be very intellectual. We tend to watch videos. We tend to listen to the TV but getting up and moving is essential to keeping us healthy. And last but not least, if anybody has a problem where they feel they are isolated or alone therapy is a good place to go. And we have some great therapists like yourself out there who can help us develop better coping skills.

MASSIEL: Yes, yes and they're willing to work with you at where you're coming from. You know if you find the right match the person will kind of not push you to something that you're not comfortable with. I would definitely encourage it at different stages of your like.

JUDITH: Very nice! Well Massiel do you have any contact information you'd like to leave us with today before we sign off?

MASSIEL: Yes, you can find me on Facebook and Twitter at massielwellness. So that's my first name Massiel wellness.

JUDITH: Okay.

MASSIEL: That's where you can find the rest of my contact information and things that I'm doing in the community.

JUDITH: All right, wonderful!

So, what I want to say to everyone is, I want to thank Massiel for joining us at the Holistic Nature of Us. She gave us an interesting story and processes

for working with young children but especially she talked to us today from a holistic perspective and that's something that I really appreciate.

This is Judith Dreyer. I'm the author of "At the Garden's Gate", book and blog. My book is available through my website www.judithdreyer.com as well as several distribution arms such as Amazon, Nook, Goodreads and more. I'd like to remind all of you that a transcript is available for each podcast. And please like and share these podcasts. Let's get the word out and support each other.

And remember, **now** is the time for practical action and profound inner change so we value our world once again.

Enjoy your day.