



## Ep 11: Using the Mind-Body Connection to Manage Pain

**Dr. Kimberly Bell:** [00:00:00] Hi, and welcome to a special edition of The Hidden Language of Children Podcast. I'm your host, Dr. Kimberly Bell, clinical Director at the Hanna Perkins Center for Child Development in Shaker Heights, Ohio, where we help families and children conquer the hurdles of growing up.

Usually we talk about early childhood development and how to understand young children's behavior as communication about their feelings and needs.

We already know that an overstimulated preschooler might show it by talking loudly or running around the classroom. An older child who hasn't done their homework might complain of a headache before going to school. Feelings drive behavior. But even for an adult who suffers from a physical condition, their emotional state can have a lot to do with their level of chronic pain or discomfort.

So today we are taking the usual conversation a step further by talking about the body mind connection. Our guest today is Dr. Dan Ratner, a psychologist who specializes in treating chronic pain. [00:01:00] He is the host of the **Crushing Doubt** podcast, author of a new book by the same name, is a former sufferer of chronic pain, and also our consulting producer and active board member of the Hanna Perkins Center and a former student.

Welcome, Dan.

**Dan Ratner:** Wow, that's quite an introduction.

**Dr. Kimberly Bell:** All right, so why don't we start at the very beginning. How did you come to do this work?

**Dan Ratner:** I was already a therapist. You and I are both therapists and I was, you know, thinking, well, this is my career as a therapist. I did not see this detour happening. But then one day I bent over to tie my shoelaces and I felt a little twinge in my back and I thought, uh, it's probably nothing. I've had things like that before.



But then I also thought. What if this isn't nothing? What are the what? What happens to those people who have back issues? And then it just all started spiraling and I got very afraid, very fast. The symptoms got worse very quickly. And within a few days, I was like having back spasms multiple [00:02:00] times a day.

And I felt like I was becoming in a really dangerous, bad spot, but I also thought to myself, OK, well if something is wrong, doctors can help. And essentially what happened, I'll make the long story short, I, it just kept going and going. And then when I went to doctors, I wasn't getting answers.

And I, I even asked a doctor, I was like, am I gonna have back pain for the rest of my life? And this is crazy that she said this, but she said, probably. Listen, I was 28 years old. It was getting scarier and scarier. It was dominating my life more and more. I stopped playing basketball. I had to sit in certain kind of chairs. I worried about beds, I worried about certain movements.

My whole life was just changed and this went on for eight years. I had no breaks from it whatsoever. I mean, I, I could take Advil and that could dull the pain for a little bit of of time. But my life was totally changed and I did not have any answers. And, you know, I would try all kinds of things. I went to a chiropractor at one point. Not getting answers was actually part of what [00:03:00] was so hard about this. The pain was horrible beyond anything that I can imagine. Anything that I've had before or since, but also the not knowing and the sense that I just wasn't gonna get better.

These are crushing elements of. That's why I called my, my podcast and book Crushing Doubt. It has a double meaning. You have that sense of, of being crushed by the symptoms. But then, you know, on the other side, if you actually crush the doubt and you bring that down, you get your mind under control.

And then the mind gets the body under control when it is a true mind body issue, which I have found the vast majority of symptoms are. So what ended up happening is this chiropractor recommended a book to me by Dr. John Sarno, and I was very skeptical, but I said, well, what do I have to lose? And I opened it up and it was just very scientific, very logical from a medical doctor.

And it started to get me the right information right away. One of one of the things being that seemingly structural issues [00:04:00] that we think are gonna cause back pain or other pains or other symptoms, things like herniated discs. It turns out



that these things, even though they show up on images, they don't correlate with the symptoms.

Like we can find herniated discs in people who are totally asymptomatic, just no symptoms whatsoever. We can find people who are writhing around in pain with perfectly clear MRIs, and because there's no connection between those two, we can start to call into question what else is happening? And now I can, if you would like him, I'll dive into, well, what is happening?

And then we can talk about how it connects with our audience.

**Dr. Kimberly Bell:** Yeah, yeah. Sure. Absolutely. Go for it.

**Dan Ratner:** If you think about it, everything that happens in your whole facial structure is a mind body experience. It's mirroring what's going on inside. We smile when we're happy, we frown when we're sad. And actually, that's why you can tell a fake smile. I. Because the smile is there, but we can read what's going on because the [00:05:00] mind is generating whatever's happening in the body.

This also happens with crying. You get sad, your tear ducts actually change. This happens with blushing. If you get embarrassed, your blood flow changes. What we don't seem to know is that this happens throughout the body in every system of the body. And here's my rule of thumb, if the body can do it, the mind can use it.

I'm not saying that every physical thing that happens is from the mind.

**Dr. Kimberly Bell:** Yeah. OK.

**Dan Ratner:** Or in the head.

**Dr. Kimberly Bell:** Yes. Let's stop right there. OK. Because I feel like that's one of those sentences that we underline, right? Mm-hmm. So say it again.

**Dan Ratner:** OK. Um, if the body can do it, the mind can use it.

**Dr. Kimberly Bell:** For our audience, the way that we would talk about that in children is that the body is the first expression of feelings and thoughts, and so if you don't know what to say or you don't know how you feel, oftentimes you see it



in behavior, but we can also see it in the fact that kids sometimes can't [00:06:00] learn or they struggle to hold their pencil a certain way or they draw too heavy.

All of these things that the body does, can be pulled into the service of our feelings and our emotions. And that's a thing that happens naturally before we develop language, right? Before we develop the capacity to express our emotions, our feelings, and our thoughts in a verbal way. And so the remnants of that, in terms of what you're saying, Dan, is that that stays with us our whole life.

**Dan Ratner:** Absolutely. You know, if, if our words can't express it, then the body has to do it for us.

I, I think of the body as our first language. This is called the Hidden Language of Children, and like in many ways, the first language that, that we speak is the language of the body. At Hanna Perkins, they, I'm sure they see it in the, the classrooms all the time.

Things like something goes on, there's an interaction between two kids and [00:07:00] suddenly one of them has a stomach ache. This is when we learn to interpret the symptoms, not as thinking like, oh, I wonder if they ate something. We gotta go straight to the emotions because that's usually what's going on.

**Dr. Kimberly Bell:** Yeah, I mean, we work with parents all the time on helping their children manage this and move things from the body into the mind and into the words. Do you find in your work with adults that there is a, like a greater, I don't want to say resistance, a greater difficulty telling themselves these things that would be so easy maybe for them to understand in a child, but struggling to sort of say these things to themselves.

**Dan Ratner:** Oh, for sure. I'll, I'll even give you my reasoning as to why that is. Adults are very connected to the idea that they shouldn't feel certain ways that they should be past that at this point.

Whereas kids are actually more open to it. If you talk to a kid about these things that they're often like, oh yeah, that makes sense. It's more like we, we unlearn what we knew [00:08:00] because we get taught in the adult world, "Well, that, no, that's not that's because you didn't get enough sleep. That's because you are lifting things too much." You know, we start to think in these very un-psychological ways. And as adults we become even more entrenched and, and, um, invested in



not seeing it. Because these symptoms happen about things we don't want to see. You know, I think in kids it's a little more one-to-one correlation where they're not afraid to just let it be what it is.

**Dr. Kimberly Bell:** Yeah.

**Dan Ratner:** But adults are afraid to let it be what it is and let people see that. And it's interesting. I feel like adults are in a, a worse position. I don't mean that un-empathetically towards children, but more just thinking grownups learn again and again: don't show this. Don't be like this. Don't feel this. I should be past that. There's all these shoulds and that's all just going to feed more and more symptoms and it's going to perpetuate the [00:09:00] symptoms as well, because we don't have a way to unravel it.

**Dr. Kimberly Bell:** So Dan, can we stop and let me ask you to give me an example of how you have added this piece to your work.

**Dan Ratner:** So this really relates to the system that I have and I'll explain it very in very brief detail. So for one thing, when people have a symptom, like the moment that they have a symptom, it's telling us something. And if I was missing those cues, I was missing information. Then we would end up talking about something else.

But if I go straight to the symptom, I'm getting information right now, and this is so in line with what Hanna Perkins does. You, you want to, you want to intervene at that moment because there's something happening right then. And we're moment to moment beings, so it just keeps on flowing and flowing and a lot of stuff gets missed or it piles up.

But if you can catch what's happening with the symptom right then. A lot of times you can get information and you can know what to do because of it. So that's a huge part of it. Another part of it is that I recognize that when people are having what I call [00:10:00] doubt, where certain thinking is preventing them from feeling certain about who they are or what they need or what's happening, these are problematic things for people that they often just kind of skip past or try to will themselves past. But if we pause and recognize these moments and understand these moments, we get all kinds of information that unlock all kinds of things.



**Dr. Kimberly Bell:** I feel like we've kind of already talked about some of the connections between mind body symptoms and how they relate to, like the understandings we here have at Hanna Perkins. But what do you think you learned through your experiences at Hanna Perkins that then fed into the work you're doing now?

**Dan Ratner:** I mean, it, it, it was huge in, in multiple ways.

When I went to Hanna Perkins, you know, it had a reputation at, at that time for like kids who had problems or families that were having problems.

And some part of me felt like, well, I'm lesser than other kids in a very small way. But when I [00:11:00] went to elementary school, I actually felt like it was completely opposite. I was like. They're not getting this, but what's happening here? So I had a huge leg up even then. But then, when I went into the therapy world it's like I had been to graduate school, but it started in kindergarten.

You know, it's really interesting because what happens at Hanna Perkins is it can be so deep and so connected to the reality of, of the human being, that when you get to other phases, and it just happened over and over. I did Teach For America. I felt the same way. I was like, I understand certain things that other people do not understand.

Like with the kids in Teach for America. When I was teaching, I understood that it wasn't my job to control them. It was my job to help them figure out how they wanted to control themselves, which is like, that's classic Hanna Perkins talk. So it flowed into everything that I did. I mean, it, it's so incredibly valuable.

And then as a therapist, as I was exploring things, I recognized the respect that I was shown as a kid to [00:12:00] understand myself and to kind of be the one in charge of interpreting who I was, that's huge for therapy.

There's so many therapists who will tell the patient who they are. I know not to do that because I'm not the one who knows. They're the one who knows.

**Dr. Kimberly Bell:** You know, it's one of the things that I always say is that if you're, if we're only focusing on trying to stop a behavior, then you're playing a game of Whack-a-Mole.





You know that old arcade thing where you got a mallet and you hit the little like mole that pops up out of all these different holes and you can never win, right? 'cause it's always jumping up someplace else. So when I'm talking to, to parents about their kids, that's how I explain it. If we don't get to the underneath, if we don't get to the why of the behavior, then these little behaviors are gonna pop up like popcorn because there's something underneath that continues to need to be expressed.

So when we talk about pain, are we talking about pain as a behavior? Which we see as a form of [00:13:00] communication.

**Dan Ratner:** Yeah, I mean, I think it is a good way, it, it's certainly a good way of thinking about it to think about it as, as a communication.

In fact, in my system, there's these three different parts, and one is like an emotional communication. Something where your body's saying, "Hey, something's happening here, that you're not realizing." It's communicating something and we've gotta get that message or the symptom continues. It also can be a communication of the things that we need, like deep down in ourselves. I call that power.

It's like aligning with the self. So these are the, the emotional communications that are happening. And then there's also the thinking apparatus that responds to these communications. And if the thinking gets if it gets sidetracked it can just cover over everything. So if you're thinking, oh my God, this pain happened because I wasn't lifting from my legs.

You know, all of these different things we say. Now, not only are we not receiving the communication? We've got a double layer covering it over. Now we're thinking about something that's taking us [00:14:00] completely off track. And so that's why it's so important to think about it as a language. And I actually think about the body as just a gigantic brain.

It's like all, all just a brain because it's always expressing things.

**Dr. Kimberly Bell:** I'm pausing because that is a beautiful sentence. That's what the body is, is to service the needs and the wants of the brain.



**Dan Ratner:** It absolutely is. And if you think about how dominant the brain is over everything, it just makes sense. I mean, the brain is the thing that's making your heart beat, it's making you breathe. It's controlling everything all the time.

**Dr. Kimberly Bell:** So I want to pause because you, you've given us a very high level.

And just so our listeners know, I went through training with Dan, so I'm trained in, in, in Dan's methods and have incorporated them in the work that I do with some children who have experienced pain themselves and it has been a fascinating kind of process.

So he and I are coming at this conversation [00:15:00] with a certain level of knowing what each other knows. And so I don't want to I don't want to skip anything I think it's worth for the people listening to, let's just take a moment to be very clear.

Give us a definition of the emotion column. The doubt column.

**Dan Ratner:** OK, so these, these columns are those three parts that I was talking about. The emotions column is for the onsets and upticks in symptoms. That's where you can recognize the language as it relates to when the symptom just starts, or when a symptom that's already there suddenly shoots through the roof, or even when a symptom goes down, it shows us the connection between emotional life and symptoms.

The doubt column is the column that's about the thinking and the seemingly chronic symptoms. And the reason I say seemingly chronic is that these symptoms aren't chronic. They look chronic because they don't go away. I mean, I had a eight years of back pain. That's pretty chronic, right? Yep. But it's actually seemingly chronic.

What it really is is the same thinking moment over and over and over. Really one of the ways that I was thinking about [00:16:00] back pain was it's never gonna go away. It's never gonna go away. It's never gonna go away. And I thought that for eight years and I had no reason to think otherwise. But if we, if we create new ways of thinking and new understandings, that opens space for a whole different reception of the communication. So we're taking off the layer that's covering over everything.





In the power column this is the area where we learn about our relationship with ourselves. So it's not just about awareness of emotions, it's also about what are we gonna do with all these emotions?

How are we going to treat ourselves? So we not only are receiving the communication of individual moments in the emotions column and receiving the information about what we're thinking that's holding everything in place in the doubt column, but we're also figuring out how have we been relating to ourselves all along?

And to me that that's where the columns get to what I call high speed therapy. It's like you find out things really, really fast. Mm-hmm. And I found it was a way that I developed a self empathy that I didn't even realize I didn't have. [00:17:00] It was like I finally really looked at my own story and thought, wow, that was actually pretty hard.

And, um, I, I do want to add one thing also. This isn't just about pain. It's about all the symptoms in the body. Head to toe. You know, you can have blurry vision, you can get bloody noses, you can get, uh, skin rashes, you can get anxiety, depression, obsessive thoughts. These are all different manifestations of a mind body experience.

And being able to speak these languages and to know these columns and when to do what — is it an onset or an uptick, is it a kind of stuck-point — that's when you know, to address the thinking.

**Dr. Kimberly Bell:** So I think in the work that I've done, like with children, it's so easy for them to fall into to to doubt the way that you and I would talk about it — and let me be more specific: When you have a child who has had any kind of a difficulty learning disability, attention deficit disorder, like any of those things, how [00:18:00] quickly the mind says, "Well I am broken. There's nothing I can do about this. I need this medication, or because I need this medication then this means something about me and what I have control over," and that can become a very big knot to untangle very early. 6, 7, 8, 9. You can see that this knot of self-definition has formed around this idea of I'm not the boss of my body, right?

I'm not the boss of my brain, so I'm not the boss of my body. And then untangling that and recognizing that you can be the boss of your body. You can be the stopper. When you feel impulsive, you can be the one who takes care of your body. You



can be the one that understands what your needs are. Just knowing that you can be the boss of things is really powerful with [00:19:00] children.

**Dan Ratner:** Yeah. And if you think about it, it's gonna change everything that happens in the mind and the body to be in that space. Yep. I mean, think how different it is to be a kid walking through life thinking, I don't know if I'm OK, and I I can't control anything.

Think what that does to your nervous system, yeah. It's like you're in a war zone. But if you're feeling like, no, you know, I'm capable. I've got power. I, I know some of what to do. I don't always need to be looking to the outside. Mm-hmm. That, you know, you see people who are like, they walk into a room and they're confident.

In a way, that's what's happening right there. They feel like they have power. They feel like they know what to do. They feel competent and they're flowing. And I think often we, we, we don't give kids nearly enough credit. That they not only could already be that way, but even more so that they have a lot of wisdom that hasn't gotten buried by all this adult junk yet.

**Dr. Kimberly Bell:** How do you talk to people that are skeptical?

**Dan Ratner:** Um, great question. So, I mean, the first thing that I ask them is, OK, can you [00:20:00] just pause and be open to it? We're just gonna have a discussion and it has to make sense scientifically and logically.

I really lean on that. I'm like, I learned a lot of this from a medical doctor. This relates to science and logic. It's backed up in all of the journals, but you're gonna need to give me some time to talk it through. You can't run screaming from the room like, this guy's crazy. You have, we have to actually have this conversation, but as soon as people are open to it, then I start explaining to them things like basic mind-body experience.

And they're like, they're nodding. They're like, yeah, well, OK. That is true. And then I talk about things like uh, the MRI and imaging and, and what about these studies that show that all these people who don't have symptoms don't align with this. So I just open them up to the idea, is it possible?



Mm-hmm. Can you entertain this idea is possible. What tends to happen then is if they stay curious at all, the observations start to take care of themselves. They start to see it in their own life. Um, I have a good friend who [00:21:00] was having migraines and he never even knew to give himself the opportunity to think about what was going on when this happened.

So that's a huge moment for people. If they're just open enough to it, they get to start to look at it. And again, it's gotta be related to science and logic. It's gotta make sense. I don't expect anybody to just believe it.

I tell them to ask their questions and that tends to open up space for people to look at these things, but then they start looking at it for themselves. So this friend of mine who was having the migraines, he, he started noticing the pattern. And then how about this for being convincing? The migraines started to go away. Results are very convincing. You gotta be open to it first. And what I offer is I say, OK, if you're gonna be open to this, I'm gonna give you good information that makes sense in a real conversation.

I'm not just gonna be selling you something or trying to get you to believe in something that doesn't work for you.

**Dr. Kimberly Bell:** I want you to tell the story about your list of [00:22:00] questions because I think that people don't feel empowered to get their questions answered, and getting your questions answered is a big part of the way you work on doubt. So tell that story please.

**Dan Ratner:** OK. I think I have the right story in mind, but what what ended up happening is, um, when I discovered Dr. Sarno and I started getting any of my questions answered, I was like, oh my God, it's making more sense than anything that has ever been brought to me before. And I just, but I was like, OK. So he said, you have to accept the diagnosis to get better. And what he meant is accept that it is a mind body experience.

But what I came to understand is you also have to accept that it's, it's not harmful. It's not gonna, even though it can be excruciating and horrible, it's not going to harm you. And then maybe most importantly of all, aside from the fact that it is mind body in the first place and not something physical or structural that you are stuck with, is the idea that you can reverse the symptoms.



So what happened then, Kim, is I was like, well, [00:23:00] I got a lot of questions. You know, like Sarno said at the, in the book that I was reading, that this was caused by oxygen deprivation to the muscles. And I was like, OK, but why does that explain everything and why does that happen? There was all this, why, why, why?

So I met with a guy. His name's Eric Sherman and Eric he trained as a, he's a psychologist, but he trained under Dr. Sarno. I went to to Eric Sherman, and, um, he said that he, he couldn't see me because I was in a different therapy. It was like a kind of old school therapy vibe thing. And I was like, oh my God, but I need your help.

So I said to him, can I just ask you some questions? What people don't realize is they have hundreds of questions inside them, probably thousands, and all of these unanswered questions lead to the same thinking over and over and over. So when you ask a question, you get an answer you feel is really great and settles it, you're in a much more confident place about how you can get better and why you can get better.

So that [00:24:00] one session, in one session, I probably asked about 200 questions. That's the story. OK. And wanted to make sure I got this, the right story, but I, I seriously, I asked him like 200 questions and it was just like this great Q&A. His answers were great. Like they, they never felt short.

There were times where I was like, OK, there's a follow-up question I'm going to need to ask. And I did keep asking questions even after that meeting, but I felt so much better after one session of getting questions answered in a way that actually made sense. So I have a line that I say to people, which is, "You make sense. Your symptoms make sense. It never doesn't make sense. You just have to ask the questions and you gotta push for answers that meet your full need to get that settled."

**Dr. Kimberly Bell:** The reason I love that story is because, you know, one of the, the key understandings of children that we have at Hanna Perkins is when we say behavior is communication, like a child running around aggressively, [00:25:00] for example.

We look at that and we say that's a form of communication. Often what we mean by that is there is an unanswered question here. That the child needs information



that they don't have about something. I have seen for years and years and years working with children in this way that when you can say to them, "I feel like you're having questions," and it's often Dan, the sentence comes out, "I feel like you're having questions about your body. Like, you're running around, you're doing something, you're using your body to ask your question."

And so the power of asking the questions has always been a piece of your work that has resonated deeply with the way that I work with kids and sort of this idea of the ability to get a child to a place where they grow up as a person who is not afraid to ask the questions and not afraid to be curious for the answers, right?

That's a huge part of [00:26:00] what I think kids take away from the therapy work here at Hanna Perkins.

When you get into this and, and you say, OK, this, this symptom that I'm having is mind body. I think sometimes we can swing the pendulum and then you get the flu and you're like, is this the flu or is this mind body, you know, you start to have that moment. How do you help people through that moment, uh, to find balance?

**Dan Ratner:** Uh, it's a great question for multiple reasons, but you know, one of them is, I'm not saying nothing's medical; you never need a doctor. No. Actually I, what I've done is I've changed my relationship to, to medicine. I rely on them for certain things. If it's life or death or it could be threatening, go straight to the doctor.

And by the way, you're gonna have some symptoms, some mind body symptoms that freak you out and you're gonna think this is life or death. I should go to a doctor. Well, better safe than sorry. That's fine. If you're having a panic attack that you thought was a heart attack, [00:27:00] better to go to the doctor just to make sure.

So the way that I think about it is that we have to listen to the signs that our body is giving our brains as well as the, the signs that our brains are giving our bodies. But we do have to tease it out, and everybody's gotta develop their own system of figuring this out.

I use the doctors as a, as a safety backstop. Yep. But at the same time, when I go into a doctor, I tell people, put on your doubt armor, because they're going to go



into a doctor and they're gonna hear all kinds of things that actually are gonna be describing mind body experience as some kind of medical problem.

Yes. Oh my God. You have a B12 deficiency when really you're actually unhappy at your job, or something like that. Right. You know? Right, yeah. Yeah. So finding the balance, to me, it connects to the questions idea. You want to keep asking your questions until it really makes sense. So ask that question. Is this physical, purely physical? Is it mind body? Does it, did it come on at a [00:28:00] time that, you know, like did I start having symptoms like right when I turned 50 or my parents moved out of their house? These all happened to me recently and I did have a shoulder symptom because of it, which is now better.

But you know, it's asking the questions that get you the clarity. So when you say, how do you help people find that clarity? Again, it's all questions. I once was talking to a woman and she, she asked me like, how, how does it work? And I told her, you gotta ask your questions and get them answered. And she was dumbfounded by this.

She was like, so basically what you do is answer questions? And I was like, yeah, yeah. But if you think about it, that's how we learn anything. So you have to stay curious to the questions. In fact it's not only about asking questions and getting the answers, sometimes it's about getting the question asked that you didn't even realize you had.

So, engaging in these conversations is how we get the clarity. I don't, I won't always have the specific answers of how you're gonna get the clarity you need, but what I can do is open up space for us and for you just as an individual [00:29:00] to ask the questions you need until you can be like, OK, now I get it.

**Dr. Kimberly Bell:** And I think just the recognition that at first when you start to do this work, teasing that out can be difficult.

**Dan Ratner:** Oh, for sure. Yeah.

**Dr. Kimberly Bell:** And that needs to sort of just be an OK part of the working through process.

**Dan Ratner:** A hundred percent. It becomes an important part of the work to almost assume that things are mind body, unless it feels like it could be dangerous.





**Dr. Kimberly Bell:** Yeah. OK. Anything else before we, before I start asking you about the book, I have a very specific question that I want to talk to you about your new book coming out. But is there anything else you wanted to hit on?

**Dan Ratner:** Well, there was just one other thing that I, I was thinking at one point during one of your questions that I wanted to say, which is the adults we become are still the kids we are. Just don't forget that. Mm-hmm. Because so much of what your body's gonna be expressing is, who we actually are is always the kid, always, and I just think that's important to highlight. So I just wanted to make sure I said that.

**Dr. Kimberly Bell:** Yeah. Beautiful. I'm gonna let that stand on its own. I'm not gonna jump on it. Uh, I do want to say this one [00:30:00] other thing though. This is, this podcast is called The Hidden Language of Children, and one of the reasons it's called The Hidden Language of Children is because we help children and parents find a common language to speak about experiences.

And I have found the same with your work that when when an adult applies your work and then the child learns the language that the parent and the child have a very different communication pattern because they can use this sort of shared, shared language of understanding the body and the mind, whether it's through doubt or emotions or power.

And it, it bridges some communication gaps. And I think in a very similar way that the Hanna Perkins language around feelings and the inner life helps parents talk to their kids in a particular way. And so I just want to point out that correlation because I have found that to be a really interesting part of the work that I've done with your, your system and kind of [00:31:00] where it meshes with what I do through Hanna Perkins as well.

Uh, and I haven't had a chance to tell you that that's new information I'm sharing with you, Dan.

**Dan Ratner:** It is. And I, and I. It's cool, right? Yeah. I'm, I'm really thankful and, and gratified to hear that because, ultimately when it comes down to it, I think what Hanna Perkins does or what I'm doing in my work, one of the main common threads is can we get on the same page?



Yeah. Can we start speaking the same language instead of feeling so separate from each other, you know? Yeah. So that's so gratifying, Kim. Thank you for sharing that.

**Dr. Kimberly Bell:** Yeah. All right, so obviously one of the ways that this work is done is through one-on-one work with somebody like me or somebody like you.

Uh, I know that through your organization Crushing Doubt, you offer group work for some people, but now you have a book. And let's talk about how you want people to use this book.

**Dan Ratner:** There's many ways that I want people to use this book. In fact, if you think about it, the first question is, who is the audience you know of this book?[00:32:00]

Because that will answer how do I want people to use it? I want the symptom sufferers to be able to use it to get out of their suffering and to learn all of the information that's within that. But I also want the people who have sufferers in their lives to look at this in a way so that they're speaking the same language.

It's just what you just said. So it's not just the symptoms suffer going on a journey by themselves and then coming out the other side and knowing things that the rest of the society doesn't know. And then thirdly, I want this to be a call for major societal change.

There's a medical doctor named, uh, Lissa Rankin. She wrote a book called Mind Over Medicine, and in her book, one of the things that she talked about is the fact that they've done studies that show that the difference between people who have even just one good friend versus not is a much bigger health risk than smoking. Yeah. We gotta think about that because I have this idea in, in my book called [00:33:00] "Happiness is Health."

And it's not just happiness really. It's more just like fulfillment, self alignment, all that stuff. We're not always happy. But if we don't think about the fact that our mental life and our emotional life is our physical life then we're doing all kinds of things that are very toxic sometimes.

You know, like when you get in a fight with somebody and then you don't repair, they're sitting in toxicity. Yep. So what I want people to use this for is to I really



want it to change everything. I mean, I want, I want, I want medicine to train their doctors to know this. I want psychologists to understand how they can intervene more effectively and do even better work through knowing this.

I want parents to understand the impact that they have on their kids physically. I want friends to understand that how we treat each other really matters. I have, I have an idea in the book called Core Mind Body Values. It's like, if it would harm you physically, how I'm gonna behave, then we can't do that.

[00:34:00] So there's a joint responsibility in, in this book, but ultimately I want the whole world to understand what this is all about.

**Dr. Kimberly Bell:** All right. You know what? Manageable goals, Dan, let's,

**Dan Ratner:** well, yeah, I aim, I do aim high. Hey, Hanna Perkins taught me I could do great things, so I That's right. I was like, OK, I'm gonna take that seriously.

**Dr. Kimberly Bell:** That's right. Yeah. In action. All right. That unfortunately is our time for today. Let's let people know how they can find out more information about your book, your podcast, your practice.

**Dan Ratner:** OK. So, I mean, the best way is to go to my website, [www.crushingdoubt.com](http://www.crushingdoubt.com). And, um, that's where you can explore all of these things.

I have teaching seminars that teach all about this. I've got the book. The groups are a way that you can come interact with me directly.

And all of these resources are available on the website. The best way to get it.

**Dr. Kimberly Bell:** Awesome. All right. Well, I know, um, I've gotten my copy and I'm enjoying reading through it and, [00:35:00] um.... I think it, it, I think it also helps people form their questions. That's the other thing I think about the, the book is, in reading it, you can, you can start to form your questions. And then kind of be empowered to go and look for some answers.

OK, we do not have questions today 'cause this was our special conversation with Dan Ratner Day. But we want to remind our listeners that, uh, we do love to



answer questions. So if you have a question about your child or being a parent, you can send us an email at [HiddenLanguageofChildren@gmail.com](mailto:HiddenLanguageofChildren@gmail.com).

Thank you, Dan. Thank our listeners. We are so grateful to everybody for being a part of this. We hope you enjoyed this conversation. I know I did and found it to be helpful. The Hidden Language of Children Podcast is a production of the nonprofit Hanna Perkins Center for Child Development in beautiful Shaker Heights, Ohio.

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