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## Mental Health, Human Flourishing, and Religion | Dr. Curt Thompson

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## The Veritas Forum

Dr. Curt Thompson, a board certified Psychiatrist and Neurologist, discusses the power of the narrative we tell ourselves and how it affects us throughout our lives. A lecture and conversation covering mental health, human flourishing, and religion. • Please like, share, subscribe to, and review this podcast. Thank you!

## **Transcript**

Welcome to the Veritas Forum. This is the Veritas Forum Podcast, a place where ideas and beliefs converge. What I'm really going to be watching is which one has the resources in their worldview to be tolerant, respectful, and humble toward the people they disagree with.

How do we know whether the lives that we're living are meaningful? If energy, light, gravity, and consciousness are a mystery, don't be surprised if you're going to get an element of this involved. Today we are from Dr. Kurt Thompson, a board-certified psychiatrist and neurologist, as he dives into the psychology of defining and understanding our own life narrative, in a talk titled "mental health, human flourishing, and religion." From the stage at the University of Minnesota. So, thank you for coming.

It's great to be with you. And, uh, balmy Minneapolis. I figure I would start by just giving you a little bit of personal information, just so that you kind of have a sense of, like, full disclosure, like who you're dealing with tonight.

So, I grew up in Ohio. I'm a Buckeye fan. [laughter] Start things off on the right foot.

[laughter] I have been married for 32 years. We have a daughter who's 28 and a son who's 25. And I make a living as a psychiatrist working in Washington, D.C., where I will never be out of a job.

[laughter] That's not really funny, it's right? [laughter] It's the truth. And so, we're here

tonight to talk about a number of different intersecting questions. And we want this to be an opportunity for a conversation.

I hope that that's where we land eventually. And so, let me begin with just some reflections about what my understanding is of what I do. And after we finish that, we'll go to Q&A time and have a chance for you all to enter into that conversation.

The first thing I'd like to say is that anytime, it wouldn't matter who would be up here speaking. Anytime you'd hear somebody talking about any of these subjects, one of the first things that we would have to acknowledge and recognize is that nobody comes to you to present—the things that I'm going to present to you without coming from a particular, what we would call, plausibility structure. You sociologists in the room, you would—this notion that we all grow up understanding tacitly, right? Kind of non-consciously, the fancy schmancy, psychiatric term, non-contourly, tacitly.

We live in a story that we are navigating where we know it or not. And it's in the context of that story that we come to develop an understanding not just of what we know but how we know things. And one of the first things that's important to know is that nobody ever comes to know things in a vacuum, right? We've learned this in the last 100 years and post-modernity has taught us that like everybody has an influence that's informing what it is that they're talking about at any given talk.

And so it would be important to know that anytime you were listening to anybody talk here, that they're going to be talking to you from a particular perspective. And that perspective may or may not actually be grounded in what's actually true. But it's important, I think, for everybody to at least know that I'm acknowledging to you what that perspective is.

So I'm going to let you know my plausibility structure is one that believes in a particular story. And one of the questions that we ask patients all the time, and when it gets to the question of mental health, one of the most important questions for people to answer is this. In what story do you believe you're living? Now here's the thing, everybody is living, believing we live in some story, it's just that most of us aren't paying any attention to that.

Most of us are living on autopilot, not asking questions of death that if we were to would reveal some things about us that we didn't know we didn't know. And so the first question is in what story do we believe we're living? Here's the story that I think we're living in. I would say that I have come to believe, given the community in which I was raised and grew up in how my life has been for.

I can come to believe that we live in a world that was formed by a God who is wildly crazy in love with this community. That's what I think. And that has implications.

It's not just about like how we got here, like it's not just about the mechanics of how we were made and how long it took for the earth to get here. And I only took the rest to get here, how we got here, but just that we are here. And then the question is what do we do with that? And in the context of my story, we would also say the story that I think that we live in, this Christian story, that we live in a world that feels pretty broken.

So at Guadalupe we would say like, gosh, I don't know, like I don't know if there's anybody here who would say that they don't jerk for a world of goodness and beauty. No matter what our story is, I don't know, I don't make people wake up and say, gosh, I hope by the end of the day my life sucks more than it does now. I don't know, but if those people have been coming to see me, right, they'll be like, oh, that's just weird.

[laughter] [laughter] And so those of us who are believers also believe that in a particular time in history, a particular person emerged on the earth. His name is Jesus. And we do believe in an event, his death, his resurrection that changed everything.

It was a pivotal point in history. No matter how long this earth is around, that's a pivotal point in history. And we also believe that in the resurrection of Jesus, that God isn't the business of renewing everything.

And that we who are willing to consider that God is this crazy in love with us, begin to see everything and everyone as people and things to be loved. Until the new heaven and new earth shows up. Now that's like Christian theology in like three minutes.

And I'm just saying like that's where I believe. And so as I now talk about what I do and what I think about human flourishing, what I think about mental health and all these kinds of things, just so you know, that's coming out of that context. Someone else would talk about these things and come out of different contexts, but they'd have to let you know where that context is.

So in my work, we would say that if it's true, regardless of what story you believe you're living, regardless of that, if it's true that you come to see me as psychiatrists who like in our practice, we treat all kinds of conditions. We treat depression, we treat anxiety, we treat bipolar disorder, we treat schizophrenia, we treat marital problems, we treat people who like cheer for the University of Michigan, we treat all kinds of things. Some are more serious than other things.

But when people are coming to us, they're not just coming to name their problems, they're also coming hoping to God that life can be better than where it is. And so we want to ask the question not just what is wrong with your situation. We don't just want to answer the question what's the problem.

We would like to be able to somehow answer the question, what does your life look like if it's flourishing? Now in medical school and in residency, here's an interesting thing. In all

my time, eight years, in all of that time, I did not, was not provided a single course in not a lecture in mental health. You're like, dude, your like board certified.

Yeah, they let people like me in. So here's the thing, like if we've done these random polls with people, you know, mental health, and this isn't just for medical for stuff, but this is for people who are LCSWs and PhDs and so forth. Because the question of what is mental health is often not asked, and that's because we're really good at pathologizing things.

We understand a great deal of things through the lens of pathology, but it's hard for us to answer the question, what is mental health? The field of interpersonal neurobiology actually seeks to answer that question. And it goes something like this. First of all, interpersonal neurobiology is a field that emerged about 15 years ago under the leadership of a guy.

They have a Deans Eagle, a psychiatrist on the west coast. And it is a field that really seeks to look at the intersection between, putting it just quite straight world between what's going on from a neurophysiological perspective and relationships. How do the brain and relationships intersect with each other? And how might we describe and understand what it means like when the brain and relationships are flourishing maximum? And so if we were to look at all the different groups of people who study and who have a stake in, the notion of the mind, right? If you don't have a course in the mind, it'd be like, "I want to see a orthopedic surgeon." And they've never actually worked with the skeleton.

That would be strange. That would be concerning. So if you haven't had a course in the mind, we'd like to know that, "Gosh, that's what I do.

We'd like to know that I actually have some idea about what the mind is that we're working with." And so the interpersonal neurobiology would describe the mind like this. We would say that the mind is an embodied and relational process that emerges from within and between brains, whose task it is to regulate the flow of energy and information. You got that? Yeah.

Lying it. [laughter] The mind is an embodied and relational process that emerges from within and between brains whose task it is to regulate the flow of energy and information. Now, we could spend an hour just unpacking that, but what I want to say is that we'll say just briefly, like, "So the mind is not just my brain." Because how do you know that you're anxious? You know that you're anxious when your heart rate goes up and your palms just way because your body has to tell you things.

But we also know that your mind isn't just your body because we know that when you're born, newborns come into the world with about 30% of their neural activity intact and ready to go. About 70 to 80% of their neural activity, if it's going to reach maturity,

requires the interaction with another human relationship in order for that to happen. This leads to, of course, the work around research and attachment, for those of you who might be familiar with that, and how attachment shapes the way your neural networks are going to come together and fire.

Relationships are shaping your brain activity or shaping your relationships all day, every day, even when you're asleep. And so the mind then becomes this relational embodied exchange of what does flourishing look like. And we'd say flourishing looks like this.

If you look at any system, any system at all, not just living systems, but non-living systems, that are flexible, adaptive, coherent, energized, and stable, which are five pretty good words that we've described systems that we think are working pretty well. Those systems demonstrate at least two qualities. The first quality is that each of the some parts of these systems are what we would call well differentiated.

If you have an orchestra you want to see a symphony. The symphony has, we'll say, four different parts, right? You've got your woodwind, your strings, your brass, your percussion. And we'd like to know that each of these different systems are well differentiated.

Like each of these know their parts really well, right? But we would also like to know that not only are they differentiated, but they are linked effectively to each other. They're linked effectively to each other. And what that means is that they're going to know that sometimes the percussion gets to play, sometimes the strings get to play.

They're going to have to pay attention to each other, and they need a conductor for that. And we would say that in our brains we have all these different parts of the symphony. And we need a prefrontal cortex in order for those parts to come together for them to be both well differentiated and well linked.

And those systems that flourish, those systems that are integrated are systems that are effectively differentiated and linked. But here's the thing with human beings. I'd like to believe that I can do all these things by myself.

I'd like to believe that I can go from birth to age 56 where I am now. And I can accomplish all the things that I can do to accomplish by myself. In fact, we live in a culture that would lead you to believe that that in fact is what you've been doing.

And it's not true because your brain can't do it by itself. And so we would say that in order for my prefrontal cortex really to develop effectively, it needs the presence of other people's cortexes as well. They're also trying to do the very same work.

And so mental health, in fact, is not the absence of pathology. It's the presence of effectively differentiated and linked systems. And for human brains, human minds, it means that I am only going to be as effectively integrated by myself as I am integrated

with you.

I need interaction with you in order for my mind to effectively become what I want it to be. So when we ask the question, what does it mean when people are depressed and people are anxious and all these kinds of things, we would then take a look at, well, to what degree are they not very well differentiated? To what degree are they not very well linked? Not just within the activity of their own mind, but between themselves and other people. What does this have to do with Christian faith? Well, the first thing I would say is this.

If you look early in the biblical text, we see that God says, let us make mankind in our image. This notion that we were not ever made or designed to live as strict individuals. We were made to live in community.

And what do you know, the neurobiology would suggest that that's how we have to actually function or disrupt the floor. But we read "Oswar" where it's like, it's actually not good for man to be alone. There's nothing like isolation to make it more likely for you to show up in my office.

Now I'm happy to take your money because psychiatrists are happy to take anybody's money. But that's not really what I want for your life. Furthermore, we would say that if, as Tolstoy said, we were created for joy, life at its best is not going to be just about me doing whatever I can to not be anxious, to not be depressed.

But what I can to live in the context of a deeply connected community that enables me not to flourish, but enables us to flourish so that each of us as individuals are able to do that. And we would say, those of us who follow Jesus, we would say that that really is the mission of what it means for us to begin with beings, to live in the image of God who could not be more delighted that we're here. And I'm going to stop the fact.

That gives us a little flavor about what we, what I mean when we talk about mental flourishing, emotional flourishing. And I think we can head into Q&A and we can answer more questions. Alright, so in my behalf I'm Elizabeth Hadion and thank you all for being here.

And thank you, Kurt, for giving that new perspective. Going to medical school, I never thought about mental health. And the reason I never took psychiatrist because I couldn't deal with mental disorders.

But just understanding what mental health really means and the way you're trying to define that is really helpful. So, could you repeat that sentence where you said, what exactly is mental health and how there's an integration of the loads of the grain and the flow of energy? Could you just repeat that for us? So we talk about this notion that this word integration is a word that reflects the coming together of lots of disparate parts,

like our symphony, medical, that works. And so let's say that you grew up in a house where, so I'm guessing in a room this size, somebody has grown up in this kind of a house, where you grew up in a house where, I don't know, in Ohio, when kids are sent home from the hospital, there's one parenting tool that we send home.

And it goes a little bit like this. If you don't stop your crying, I'm going to give you something to cry about. So this is a phrase that I would hear in my house.

So imagine growing up in a house where the whole notion of emotional expression is not something that you get the opportunity to do very much. So there's a challenge because just because you don't allow yourself to pay attention to your emotional state doesn't mean that your brain isn't experiencing it. But that means that you can end up finding, and we're going to find all kinds of ways to cope with the whole range of emotional state that I experienced growing up.

But if I'm not paying attention to it, it means I don't name it. And if I don't name it, it means there's a part of my brain that I literally have cut off from the other parts of my brain. Why am I at the same time having to manage that emotional energy? So it's kind of like, if you give, I'd already say, "Look, could you pick up this five gallon bucket of water? It wouldn't be hard for you to do that." I said, "Good, because we're going on a five mile hike, and now I see that you can lift this.

I just want you to bring it along for us." And you'd be like 100 yards into it and you're pouring the water on me because you're just not having this. But this is what happens, for instance, if a particular part of my mind's activity, the emotional domain of activity is not given proper attention. At some point, my brain is going to run out of gas because I've been working really, really hard living in this family where we're doing everything we can to make sure that we don't piss people off.

We don't make people anxious. Not that anybody here would ever rope in a family like that. So we're not doing any of these kinds of things.

The whole time, I'm working really hard to contain this, even though I'm not even a whip bless you. I even though I'm not even a whip, it's about paying attention. I'm not even aware that I'm doing this.

So imagine how much energy you burn regulating all of that that is now not available to you to study at med school. That's a lot of energy that is not available to you because you've grown up in a place where for you, the string section doesn't get to play. It doesn't get any attention.

We're playing with other parts, right? You grew up, you think the right thing, you've been hating the right way, it's over and so we don't talk about emotion. Or the opposite. You grew up in a family where emotion is everywhere and it's chaotic.

Again, not that anyone here would have these experiences. And now you find yourself being aware that emotion of any kind is touching the third rail because it's hard to know what to do with this. And what do you know, your ego are like a marrying age, so then you marry somebody, right? And they're like, they're emotional.

And you're like, what have I done? I'm in love with a crazy person, right? So all that is to say is that there are a range of different ways in which we can end up ignoring. Important functional aspects of the mind's activity, what we sense, what we image, what we feel, what we think, what we do behaviorally. We can either ignore those or those things are just given free range of behavior however they will in such a way that my mind is not given the opportunity to integrate.

Okay, that makes sense. You throw in the notion of trauma and you have yet one more variable that muddles the water a great deal. I wrote a second book, the second book on shame.

And we would say, for instance, that shame as a fairly common human experience, I don't know when you would think that it begins. How young do you think you are when your shame starts? How young? Two, right. 15 months of age.

Right, which means you're experiencing it long before you ever have language. You're experiencing it as a felt neurophysiologic event. And it's, in fact, literally is to disintegrate the function of the mind.

Now, these are just things with just those kind of common everyday things that happen in homes. You add to this the severity of traumatic events, sexual abuse, harshness, neglect. And what we find is that we are giving our mind this responsibility to somehow have to manage all of this affect in ways that it is not able to do, not just because it hasn't been trained to know how to do it, but because in its isolation it doesn't have your mind to help me do it.

And so it's kind of like this double indemnity, if you will, that puts my mind at risk, not just because of the thing that happened to me, but because of the process I'm having to cut off from other people in a way that would help me. I'm due to that. That's longwinded.

Sorry. [ Inaudible ] Okay. Thank you for that long answer.

[ Laughter ] No, shake the right thanks. [ Laughter ] I'm so glad that you're asking these questions. [ Laughter ] It just brings me to the point that, wow, we are going, I thought the heart beats and, you know, the lungs breathe and, like, lots of organs do different things, but really the mind.

But to hear you talk about how important it is for the mind to be raised in an environment that has the opportunity to vent, to be influenced, to express itself. And

unfortunately, we meet people in states of distress when they're going through anxiety or they're going through depression. And I think to speak to our audience here from the University of Minnesota, 2018 was a tough year.

There was a lot of anxiety and a lot of depression that was diagnosed amongst the U of M students. And we know of two instances of suicide as well that happened. So knowing that we're in this journey of life and how do we as a community, as a student body, be sensitive to what might be going on with one of our colleagues or co-students.

And I would like you to give your thoughts at a horizontal level in the sense of student to student and also perhaps faculty to student. How can we recognize, how can we be present? Then if I can add a second question, more and more online classes are involved, not only at the U but all across the country and across the world. But on the days where we used to sit in a classroom, we used to laugh, talk, get into trouble.

But that created a sense of community and an opportunity for being known as well. Like I know we can go back to our classmates and there's a group of us who are still in touch and we kind of met each other so well. But with this online forum, that opportunity gets lost.

So I think technology is taking us forward. Would you have thoughts as to how we could use technology to our advantage and overcome this handicap? So how many questions are there here? You know, all right, right. So let me ask this.

How many here on any kind of regular basis would say you like nudge close to feeling overwhelmed? Good, really small percentage. So here's one thing just to say. Like if we can't give people what we don't have.

So we live in a world that's increasingly, again, tacitly. And as I said, we all, like we create stories that we believe that we're living in, whether we're paying attention to it or not. And one of the main themes of the story that we would say that our culture creates is how significant and important it is for us to be productive.

For us to be able to get good grades. There don't even have to be straight A's, but like we prepped both straight A's, right. But like we want to get good grades.

We want to perform well. And there's certainly nobility in performing well, in doing the kinds of things. And because we work here to learn that we want to become not just proficient, we really can really, really get effective at what we do.

But as we, as a believer, one of the things I say is that, and I don't know how many people even evil, but like I believe evil is the second smartest force on the planet. And I like to say evil does its best work in the middle of good work being done. It waits for you to start to do something good and then it will join the parade.

How many of us like start to do something good? How many would say that going to med school is a good thing to do? Well, very good. You're all here. That's so sorry.

So, I would say, "Okay, going to med school, I thought it was going to be a good thing to do, but then I got here and now I'm not so sure." So, it's a good thing to do. And then the minute that you get here, like you're anxious. Because like we're going to get overwhelmed, we're not going to do it.

Right, so you're doing a good thing and then we start to get anxious about the thing we're doing. Like we're not doing well. And then I've got to manage all that anxiety.

Because I need to perform well. Like as we say, you know, in Northern Virginia, you know, families in Northern Virginia, we don't worry about our kids are going to go to college or get in college. We worry that our kids aren't going to go to Yale.

And we like to say, like, they're not going to Yale because like, how many people like apply that don't get in there and call. But all these kinds of things, all that has to say is that we do feel this sense of urgency to perform and here's the thing. If I'm feeling overwhelmed with my own life, it's very, very difficult for me to pay attention to yours.

So we collectively grow in our anxiety. Anxiety tends to grow geometrically. If you're anxious and you're around somebody else's anxious, your anxiety does not just double.

It gets far bigger than that. And so if I'm less anxious than you and I happen to notice that you're having more trouble than I am, then I might notice that. But then what do I do about that? The whole notion of how hard we're working to be perfect is as old as what we would say is the third chapter of Genesis.

It's as old as St. Paul. This whole notion that I'm going to work really hard to demonstrate and prove that I'm acceptable, but I've done what I need to do to be acceptable to you and everybody else. And what's difficult about that is that, like that's just saying, that's not happening.

You're not going to get to a place where you're perfect. Part of life is about living being okay with not being okay. But here's the thing, I can't do that if I'm not known deeply by other people who can remind me that this is true because very quickly, if I'm isolated in my own brain and I get that first C in my exam, then I'm worried that I've got to figure out how to do this.

Now we say, yes, we'll go to study. We'll get help with these things. Surely.

But I have to get this stuff done. And if I don't get this done, like we feel the pressure, you know that, right? This is your brain trying to send you a message that it doesn't just need more information, it needs more connection. Flourishing is not about being smarter.

I travel, like I've had the privilege to travel all over the world doing trainings with folks. And I tell people, like, look, at the end of a day, two days a week, you're not going to be that much smarter. Because my job is not to make you smarter.

My job is to inspire you to go home to do the work. But the work that we're talking about here is while we were doing a hard work of acquiring information, are we equally committed to doing it? To doing a hard work of formation. As a human being, I will tell you, whether you believe, no matter what narrative you believe we're living in, the world, or your narrative is forming you.

It is forming how you sense image, feel, think, and behave. And it's forming you to be either moving toward people or moving toward, away from people. And to the degree that we are being formed in a more integrated way, we are more likely to be resilient in such a way that when we are with people, that we do notice, who are not doing well, we don't just say, hey, I think you should see somebody.

But we are going to be able to take the time to be present with them. We're going to flourish mostly because we're being committed to being in relationships by whom we are going to be so deeply known. So for the last 25 years, every Tuesday morning, I meet with these two other guys for prayer and confession.

And I would say, like, there's nothing about my life that they don't know. Like, nothing. How many of us here in the room, if I were to poll, if you could give me the names of three people, who I'd fire to ask them, collectively, they could tell me everything there is to know about you.

And I don't just mean your vital statistics. I mean, they would know what your biggest fears are. They would know your deepest worries.

They would know your deepest longing. Like, there was nothing about you that they don't know. What would it be like to be in a space in life where no matter how effective or ineffective I happen to be, I have people in my life who know me and they don't, they won't leave the room, except for one of us, right here.

[laughter] You know what I'm saying? [laughter] You'd be like, oh my God, like the psychiatrist, like, who wants to be this guy? Like, this guy's patient. Like, he's like, ruthless with people. [laughter] Only wants to leave when we're talking.

[laughter] So, this notion of our, of the intentionality of like, here's the thing, if we are not as intentional about being connected deeply with people as we are about knowing our physiology, about knowing our biochemistry, life's going to turn out to be very different for us. So, as far as technology is concerned, I'll say this. One thing I think we tell people is that technology is always doing two things simultaneously.

From the invention of the wheel, technology is always first making life more convenient,

and two, making it more likely for us to be less connected. And human beings, by large, tend to opt for making life really much more convenient and opting to use the technology, not by intention, but just by behavior, in such a way that we become less and less connected. And so, with that, less, with that decreased connection, our brains are aware that they have to shoulder the load of emotional distress that we're collecting every day, all by themselves.

And that is going to make it more difficult for us as any individual to be integrated in that way. I'm not a Luddite. I'm not -- it's not that the technology is a bad thing, but it is to say this, if we're not responsible with it, it will take us farther apart from each other, whether we want it to or not.

And I will tell you this, like, is the other thing. Like, when you get on your -- whatever your screen is that you're looking at, like, there are reasons why we would say you need to turn your screen off two hours before you plan to go to bed at night. As if, right? But it's important to do this.

But when you're looking at your screen, you notice that, right, that people have designed what you're looking at to intentionally distract you. We are less -- look, "Worn piece." You're thinking, like, where's he going? This "Worn piece" would never be published today. Because there weren't enough people who would sit and read a 1,200-page novel.

They would read it because we had such a hard time concentrating. Okay, I'll stop. Well, that was very good.

Thank you. Take me time and again, see people. We call them "sub-private." And you know you see them.

They could be your colleagues. They could be your friends. And not everybody is really comfortable being in a space where there is two or three other people who know them that intimately.

And I think for those who have feet, they'd say, "Well, I'd rather sit before God and let God know me as deeply as that than share that information with another human being." So, and everybody has different temperaments, has different comfort levels. How would you speak to those who may not be comfortable being in such an intimate space with another person? That's a great question. So, there were two things I reflect on.

One is just the creation and cosmology. And the second would be the research on attachment. One of the things we learned about if you look at the macro system of cosmology, and we'll just look at our solar system, right? And here's a certain rhythm that happens.

We go around the sun once a year. At least that's what they tell me. I don't know.

I just know there's this big ball that shows up in the east. Who knows what that really is that's going on. But they're around the earth, they're around the sun.

And the earth spins on its axis every 24 hours. There's a rhythm to this. And then what do you know? You look at the earth and there are seasonal rhythms.

You look at oceans in land and there are tidal rhythms. And then there are even micro rhythms, right? There are waves that hit the beach. And then you get to like migration patterns.

There are rhythms. We come and we go, we come and we go. And then you get to human beings, right? And there's so much about everything at who we are that is rhythmic.

Isn't that? I just find this to be like, it's just fascinating to me. We have a pulmonary system that is rhythmic. We inhale and we exhale.

We have a cardiac system, right? It's because we have systemically, we have diastolic. We still have that, right? It's been a while. We have these, you know, you have a blink rate in your eye.

It's rhythm. It's rhythm. Human beings, in terms of our relationality, we then also live rhythmically from the moment your mother starts to give birth to you, right? Labor pains come and they start to push and they wait.

And they push and they wait. There's a rhythm. You have.

And finally, like something happens and this baby comes into the world. And like we say, every baby comes into the world looking for someone looking for her. Looking for someone looking for him.

And it never stops. You're going to be dying at age 89 and still looking for someone looking for you. But if you look down at a tax rate, so we have this kind of like cosmological right down to our very biology, this rhythm thing that's going on like all over the place.

And then when it comes to attachment, like after birth, it just like keeps going because there are these images. They want to come there with you, with you, with you. And then at some point, they start to move away.

Right? Anybody here have children? Right? And did you leave them at home tonight? I can't believe they turned on my leg. Thanks be to God, right? Leave them where they are. But they are with you and then they leave.

And they go like find the begonias, right? And then they find the next thing. And then they find the brunette in geometry glass, right? They say all these great... It's true. You

probably were the brunette that he found in geometry.

Like, surely, this thing. Right? This is this rhythmic thing. And so I know this is like, you're going to like, will you please get to the answer? [laughter] This is the thing.

Human beings flourish. So as part of... I'm just sorry, again, using this symphony metaphor. Right? It'd be kind of a bummer.

If you were listening to Beethoven's seventh symphony, and all you heard was the same thing at the same decibel level the whole time. But you don't. It comes in at boats.

It comes in at boats. Human beings were made for solitude. And by solitude, I don't mean isolation.

I mean, we were made to be able to be with ourselves, just like that toddler going off to be with herself. But then he goes back. Because he's got this secure base that enables him to run off and then do the next thing.

And then he goes off a little farther, off a little farther, and then he's going off to college. Then he's going off and having his own life. But never, without coming back to a secure base in some way, shape or form.

Now, we have different cardiac rhythms, right? Some people here are going to sit here sitting at a normal, like, resting heart rate of like 70. Others are sitting at like, like, 58, 3. Others are like, 83. I mean, like, this resting heart rate, right? It's different.

But like, there's no question that you all have cisculine diastole. There's no question that we need solitude in order for us to then move back rhythmically into community. In order for us to move back then into solitude, right? We need time where we can study by ourselves.

And then we need to see time where we can come back together with the group to like, say, like have common conversation about like, what it is for study. But that metaphor is true for any endeavor that we're due. And we would say that flourishing is not something that we understand, like, well, I'm just not, I'm someone, people first.

Well then, like, you should like move to some island in the middle of the Pacific, you just feel that you stay there, right? And that's, like, does that not have people who are, like, it's not that I am or I'm not. It really is about like, well, what is going to be my case? What is going to be the degree to which I'm with people or not with people? But I will tell you that at the end of the day, the question is going to be if you were really maximally able to both be in this rhythm of solitude in community, in which you're deeply known in community so that you can then go do your work as an individual, is your life going to be better than it is now with you not being a people person? And we would say that for those folks who have challenges being with people, revealing who they are, we'd say

that probably didn't begin six weeks ago. We would probably say if we were to give you the adult attachment interview, and we get a sense of what your attachment pattern looks like, we'd see probably pretty quickly that in no small way what it was like growing up in your house, where you learned very quickly that intimacy and the presence of being seen and known by somebody else actually starts to feel uncomfortable because in those relationships being seen was dangerous.

Because you grew up in a house where what you were feeling either was disregarded or it was made fun of, or it was taken advantage of, temperament plays a large role in any of all this, but I think the general idea, you get it. That brings us to the next question is religious practices. [laughter] Religious practices, traditions make meaningful contributions to mental health.

And in your specific practice, do you recommend any specific religious/spirituality practices? And are you aware of any practices that might negatively impact your goal? So again, a great question. I mean, I think it's probably fair to say that each one of us, if we were to pull the audience, and you said religious practice, everybody has an image that comes to mind about what we mean by that. And for some of us, we hear the word religious still in the blank.

Like the first word religious, you start to have hives. There's an allergic reaction to this discussion because for us, I mean, we perhaps have had some experience either directly in our own religious community, or by curiously we hear all these stories because we're well informed from Facebook. That, you know, religion is a dangerous thing.

Not that I've had any experience with it myself, of course, but because I'm informed, which of course is a problem. It's fair to say that no matter what religious tradition you might find yourself in or you might know people in, like the first general rule of thumb is that of humility. Leslie Newgan, who's a well-known British theologian and missionary, I found his work to be so helpful.

He said this. He said, "Look, nobody knows what the truth actually is. Nobody knows, like, knows like for certain.

We're not going to find out until the end of the world. That's what we're going to find out. And for those of us who follow Jesus, like, we trust that we have a sense, that we have a read-on.

Do I know for certain? No. So, first of all, we'd say like, it's not just religious practice of any kind. We're talking about any kind of religious practice we would hopefully want to know.

It's taking place in the context of humility, first of all. We do know, though, that it's really fashionable in the West in the U.S. in particular for people to say, "I'm spiritual, but I'm

not religious." So, we've heard that, right? I don't mean to make fun of it, but it's a fashionable phrase. And I think some of what we would like to say is, "I'm spiritual, I'm serious about spiritual things, but the whole religion thing gives me the creeps." That's kind of like a clinical phrase.

It gives me the creeps. I get it. I get it.

But here's the interesting thing. There's data that looks at, and studies that look at religious practice and people who talk about spiritual reality, like, the more deeply committed you become the spiritual explorations of practice. The more religiously connected you tend to be.

And why is that? Because at some point, my spirituality, my spiritual life, if I'm not going to deal with people, then I can just be spiritual and not religious. But what religion does is that it forces me to actually have to put my spirituality on the line with other people. It forces me to have to answer the question, "How is my spirituality going to actually invite me to be in a community with people whom I'm actually may not like them all?" It's like being in your family, right? But I'm going to stay with these people.

I'm going to love these people. And this is what happens. If you decide that you're going to be with a group of people, I don't mean that people that are mistreating or that abusing.

I don't mean that. I mean, like, the best families in the world are screwed up. We tell it like there are two people in the world, people who are screwed up and know it, and people who are screwed up and don't know it.

Those two ask people in the world. And so if we're going to love people, it's likely that we're going to be in community with them. And people who are in community tend to do religious practices together.

And so first is humility. The second thing is to recognize, like, my brain most effectively does religious practice with other people. That's another thing.

So, for instance, we run groups in our practice and we have a meditation exercise. And for many, there might be some of you here in the room that practice meditation. It may not be religiously connected at all, but you practice meditation.

And that is an effective way for you to do a whole range of things that are good for you, physiologically and interpersonal intelligence and so on. But if you were to make a practice, a meeting with two of your friends, every morning before you go to class and say, like, we're just going to spend ten minutes. That's all.

Ten minutes doing this deep breathing exercise in the room together with everybody. It geometrically changes the exercise for everybody. Because my brain is aware that I'm

not doing it by myself.

So we talk about things like meditation practices. We talk about things like being in communities where you can tell the whole truth. Now, in the Christian tradition, we'd say this is about confession.

But I like to remind people that in the Christian tradition, confession to tell the truth is not just about telling the truth about like how I'm such a screw up, like all about my sin. My sin is really about acknowledging the part of me that regularly turns away from relationship when I'm afraid of it. That's what sin is really about.

I turn away from relationship to other things to cope with my distress when I'm in the middle of being afraid of turning toward relationship. There are dozens of ways in which I do that. So I'm going to tell the truth like this is what I do, but also telling the truth, also confessing me, I'm going to tell you what I want in life.

I'm going to tell you what I want. I don't mean that selfishly. I'm going to tell you, like, I really want you to like me.

Can you imagine? I'll give you this assignment before the week. Imagine, find one person that you would really like them to like you. I don't mean like like you like you.

You could do that too. You can't even Valentine's Day by the hour. My wife, she's in Hawaii.

You can't believe that. You tell her, I'm going to give her your... give her your curse. So... What's she doing there in that beautiful place where I'm up here where it's 30 below zero? This sense of, if I give you the assignment to say, I want you to find someone, I want you to tell them what you want.

What is your longing? And of course we're afraid to make a longing because what happens if I grew up in a family where you named your longing and you just didn't get it with no explanation? Or you asked, you named your longing and you were told it was something wrong for you for even wanting it. How many of us are ever given the opportunity to name what we want? So here's things I know that we're probably just going over where we're not supposed to be going. We're good.

Okay. So here's an example. An eight-year-old, ten-year-old boy comes with his dad and says, "I would like a new baseball glove because, you know, spring season is coming.

And in Minnesota that'll be like in July, right? So we're... I'd like a new baseball glove. Now the dad has one of a number of different responses. He could say, "Okay, because, you know, I'm now part of the lawnmower... You know about the lawnmower parents? You've heard about helicopter parents, right? Like, do you have them? Or are they your parents? Right? They're a helicopter parent.

I always have a lawnmower parent. So our parents are now... It's the new kind of like... ma'am, it's a new phrase. These are parents who are out in front of their kids making sure that the lawn is prepared.

Like, there's nothing that disturbs them. All the teachers at high school to make sure they meet their kids and make sure they get their classroom. This is a real story.

These kinds of things are happening. So... I don't remember where I was. [indistinct chatter] Okay, we talk about memory a lot.

It's a problem. If you say like, "I'm just gonna give you what you want." That's one option. Man, I'll be the most helpful option.

Another option could be, you know, you just gotta do blood last year. You don't need any blood. Period.

Notice that we don't have enough money for that. Like, it's logical. It's reasonable.

But like, it's... Right. Here's the thing. If you were to say, "I'm sorry that I can't get that for you." Because here's the reason why.

Because you just got... But I really want to know, "Why do you want a new blood?" Well, because my friends are getting it. Okay, yeah. And why are your friends going like, "Why do you think a new blood?" What's your tell me about what's a new blood good mean for you? And you see, if you've been talking to your kids since your kid was about three or four, you're gonna have a conversation with your kid who's ten years old and you're gonna discover with him and he's gonna discover that you know that he wants a new baseball glove because he wants to be really, really good at the game.

He wants to know that that glove will help that be possible, that there will be no ball that gets through the interview. And you come to find out pretty quickly that what he wants is not just a piece of leather for his hand. He wants to be really, really good at something.

And his little heart is wanting desperately, even though it doesn't know yet. His heart wants you to recognize that and say, "I know how badly you might be good at this game. And I'm gonna do everything I can to make sure we're not gonna get your glove.

What else can we do to make sure that you're gonna be good at this game?" Because what this kid needs more than a new glove, he's asking for a new glove, he's asking to make sure that even if Dad says, "No, Dad sees his heart." This kid is asking to be seen in ways that are way beyond the physicality of what he's asking his dad to buy for him. Does that make sense? This is what it means to be in a community where you can name what you want. And even if you can't have it for good reasonable reasons, you're in a community that can acknowledge that that you want it is totally legit.

Because if I'm able to name those things, it means I'm actually able to name lots of things that I want. And even if I don't get them all, I practice naming what I want. And before long, I'm naming all kinds of other things that I want that I may actually get to have, including my new research grant.

I'm not kidding. If you grew up in a house where you learn like if you ask for things that you want and you're not gonna get them, you learn pretty quickly and you learn like I could never get the research grant. Because this is how my brain gets wired.

So we're talking about practices, for instance, in which you say like I want you to be in a community where you're naming regularly what it is that you long for. There are gratitude practices for instance. Now gratitude practices don't necessarily emerge explicitly out of religious communities.

They don't have to, because as it turns out, even though that's where they actually emerged originally, now the science tends to show, gosh, what happens when you practice gratitude? So anybody here buy groceries or you just like order from Amazon? Okay, so here's an exercise. Right, okay, here we go. If you buy groceries at the same store, yeah, okay.

So if you buy them at the same store and you know some of the people that you're like that you get familiar with your people that work at this store, here's your assignment. The next time you buy groceries, if it's not too far away from you, like if it's not like a four day walk to get there, two or three days later, I want you to go back to the store and I want you to find a person that helped check out your groceries. And you walk up to them and you say like I just want to let you know, I really great for the work that you did for me two days ago.

And here's what's going to happen first, they're going to look for the button that they put you in like two days later. Like the manager's going to come, right? And this is what makes it so cool, because the manager's going to come and you're going to turn on the manager and you're going to say like, do you know what kind of employee you have here? I'm so grateful for the work that they did. Here's the thing, we would think this is totally weird because we never do it.

We don't practice gratitude at this level. Do you know what it's like to be remembered when you just live a life in which you assume you're being forgotten on a routine basis? You and it's like for your brain to wake up to the notice that somebody remembered that you bagged their groceries two days ago and now they're back at your safe way or wherever it is it's here. And they're telling you thank you for what you did.

We have this exercise when we work with couples in which we, it's a similar gratitude exercise. And of course these are couples who typically they're seeing us like they're not happy with each other. It's why they're coming to see me.

And we say so here's your assignment is for the next seven days before you come back again next week, the next seven days. I want you to find one thing that fits, that is measurable, that you can express your gratitude for with your spouse. How much did name, how much did you, and you can't just like be coming in the front door from work and say, hey honey, hey thanks for coming in the meal.

No, that doesn't get it. I want you to sit, I want you to take two minutes and I want you to look in the eye. I was like here's what you did and this is what I'm really grateful for.

Okay, now when you first give couples this assignment, they're really not very happy with me because they know that it's forced, it feels mechanical, it feels like there's nothing really real about this. We're having to do this because Kurt's asking us to do it. They come back seven days later and here's what they reported consistently.

By about day four or five, they will report that they are already waiting and anticipating for when their spouse is going to say to them what it is that their spouse is grateful for. Because we start to experience what it feels like to have someone look us in the eye and express that gratitude. What they thought was going to be so mechanical becomes transformational because somebody with intention, with the amount of time that it takes to take in the gratitude is having their brain changed and their life renewed along the way.

By the way, we like to say like it takes the experience of shame neurophysiologically takes the experience of shame to be encountered less than three seconds. Right, so we're between two and three seconds. If something happens for your neurophysiologic system to take on the full weight of what it is, no matter how small or big, the moment humiliation is, it could be a very small thing, right? How many of you are at a party and you're talking and you offer something with two or three other people standing and they just kind of like blow by it.

They ignore you. You know how good that feels. Right? It takes less than three seconds for you to feel that.

It takes somewhere between 30 to 90 seconds for you to receive and hold compliment. So here's what we do. Here's another exercise that we give people to this.

This really just practices are not. Right? Here's one of the things that we do though. We say look, when someone pays you a compliment and this is like I have to do this, but someone pays you a compliment, I want you to pause them.

So say hey, thank you so much for dropping me off. And you're like okay, can we just wait for a second? And I just want to let you know, I just want to take that in and they're like oh you've been to this Thompson thing, have you? I said no, I want to just simply

take in that you have paid me a compliment or that you have thanked me. Because what you're taking in is not this abstract thing we call a compliment.

You are taking in their eye contact. You're taking in their tone of voice. You are allowing yourself literally to remember to encode the moment.

And the brain is really good at efficiently watching for danger. So no wonder like we're good at sensing shame because it's so nauseating. We notice it, we turn away from it quickly.

But to hear love directed at me and to take it in takes a much greater time for it. So when we give people these practices, they find that the felt sensations, images, feelings and thoughts that are related to this act of gratitude or expression of compliment becomes an embodied reality for that. When these are things that are done on purpose in community, they are geometrically reinforced.

I'll stop with that. Okay, thank you Craig for those answers. I think I'm getting the cue here that it's time to move to Q&A.

I have a request. This mic will come along. Those of you who want to raise the question, please be brief, civil and ask a question in the form of a question.

[laughter] I don't think I really need a microphone. My question is how does your paradigm apply to three-month specific groups? It strikes me that you're talking about a very biased sample of individuals you work with. And I'm wondering if you work with other specific kinds of groups and how you apply the paradigm to treatment of those groups.

Yeah, and my groups should mean what I might be waiting for. Say sex offenders. One of the things that we'd like to talk about a fair bit is that neurons will change.

They can change about a millimeter per month. It can grow a millimeter per month in most sight. So when you're working with people who have fairly fixed neurobiological experience, whether sex offenders, whether it's something really difficult, let's say psychopaths.

Well, right, so there are some folks who I mean most psychopaths I would say would probably not find themselves in my office. So in some respects we would say, like all physicians, right, you can take a, you can bring a person into your office and you can say, I think you need to have your gallbladder removed. And they can say, like, I'm not doing it.

Like you can't make it happen. Any clinician, psychiatry or other ones is always working on this line of I have things that I can offer and the patient is going to have to be able to be involved in that in somewhat shape or form. Now the thing is this, like I can have a patient who is willing and who wants to have their gallbladder taken out, but like they're scared to death to get on the oar on the table.

Hard to do that. And so we're going to do everything we possibly can to create optimum conditions for them to make those kinds of changes. But sometimes you're working with all kinds of underpinnings, neurobiological, genetics, so forth and so on, that make it pretty difficult for that to happen.

I mean when we work with patients, those kids are brainy, for instance. You're like working with folks that, I mean, you know, I don't know how many of you have been familiar with or know people's kids. But it is right.

So one of the challenges is that people with this particular experience of life, you know, don't necessarily think they have a problem. I don't mean that crossable, but it's hard for them. They don't understand the nature of their experience in the same way that everybody else around them does.

If you were to talk to a person who has a schizophrenia and then talk to their family, who are the people that are most worried? It's typically not the patient. And so what we say is like we will work with the people who are able and ready to work with them. So a lot of times, a lot of the work that we end up doing is going to be with those folks who are more indirectly related to that, who are able to take that off.

I don't know if that's helpful or not. It just strikes me that it's a model that doesn't apply to certain sets of people. The concept does, but in terms of actual treatment efficacy, it would seem to me to be a tough draw.

Yeah, I mean, I'd love to have more conversation about it because I think that I think in some respects, the whole notion of integration, I haven't really encountered anything for which it's not a helpful way for us to understand what's actually happening in the situation. I'm sorry. It's your functionality issue.

You're trying to blend these two competing issues of faith, essentially, psychology and some measure of personal integration. Well, yeah, I mean, I think too, for me, that's the thing. It gets back to this whole notion of anthropology.

I mean, for me, I don't tend to think in terms of, like, I have faith on one side and I have science on another side. I got all that. That's not kind of how that operates in my own kind of way of processing it.

Thank you so much for the talk. It was really interesting to listen to. There are a lot of people that I know whose goal is to be mentally healthy, and they don't define what that term is.

And they don't do religion as a necessary step to do it. I assume when you treat patients

that are not religious, you don't bring religion in to try to get mentally healthy. That seems to kind of underscore the point that religion isn't necessary for mental health.

Would you argue otherwise? So, is everyone here to the question? Yeah. So, so here's the thing. I, as I would say, like, I don't, I think I don't think, first of all, I have to define our terms, right? Like, what do you mean by religion? What do you mean by that? What does anyone mean by that? And I think everybody, as we said, like everybody has a plausibility structure that they're working with.

Everybody does. And I'm, you know, my mission is to work with people within the context of the plausibility structure that they have. But for some folks, that plausibility structure includes things like, I mean, like, how many patients have I had who come in and said, look, I'm depressed.

I read the literature. I want this antidepressant at this dose. And I don't want to talk about my family.

[ Laughter ] Okay. That's a particular plausibility structure that applies in such a way that it's necessarily going to exclude certain elements of their mind's function. That they necessarily, like we would say, necessarily would be good for them to include as part of the conversation if they really want to flourish.

Does that mean the person has to go to a certain religious place of worship in order for them to be emotionally healthy? No. It doesn't mean that. I think the question, though, in the end becomes one of, again, getting back to the question.

Well, what do you actually want? Like, what do you want? And, you know, I think that there are probably, you know, people of Christian faith, for instance, don't have, don't like have a corner on the market of people who come together and know each other deeply and well. So, if we're going to all right, so it's not, that's not a prerequisite for that. But I would say that, ultimately, most people that I know at some point are, are grappling, not so much with the question of religion, of course, we have to define that, but are grappling with questions of ultimate value, right? Everybody is kind of like, as we like to say, in our story, in the Christian story, we have a word, we call it eschatology.

Some of us might be familiar with that word. We talk, and it's this notion of like, what do we think is going to happen at the end of the world? And I've got good friends who believe in the cosmology that like, nothing happens at the end of the world. Like, the big freeze is going to happen.

Everything's going to go dark. All the energy is going to flatten out. There will be nothing left of anything, right, to measure.

And so they're going to have to like, learn to live in that particular story. And they're going to have to like decide, like, how are they going to live in that story? And my job is

like, not to try to like, you know, in any way, shape or form like, bully them into thinking about it that they're living in a different story. But I am going to ask them questions about like, are they deeply known in their community? I'm going to ask them all these things about what's happening in the integration process of their life.

So regardless of how we find ourselves, regardless of how we find our lives formally being shaped by whatever particular things that we do religiously, we are always kind of like living into the story that we think that we're in the middle of. And my question would be for all patients is like, well, you know, tell me about what you really, really long for. And tell me about what your griefs are, because that's kind of who we are as human beings.

Like we are people of longing or people of grief. And into that synaptic clap, we would say relationships become the thing that really help shape that most powerfully. And I would want to know from them, are they experiencing the kind of relational integration that they really long for? And we don't have to talk about church, we don't have to talk about Jesus, we don't have to talk about any of that kind of stuff in order for them to talk about that.

The thing for me is that so many of them, like they're more than happy not to talk about religion, but they haven't even begun to talk about the relational boys that are in their life. That makes sense. So I don't think that I'm not a prescriber of religion for religion's sake.

But I'm really trusting is that if people are really doing the work of exploring relational integration from an interpersonal neurobiological perspective, that eventually they're going to move to a place of largely. And that may not necessarily include a religious practice. Hi.

Hi. So I just want to start up by saying that I really appreciate it for you saying a lot of the residents with me. My question is, you talked a little bit about building a narrative that supports resiliency.

And I'm wondering what elements of a narrative would you say that are important to have that? And how do I go about integrating those into my life? That's a great question. I mean, they're all really, really important questions. So one of the things we talk about narratives in general is that human beings, as far as we know, are the only animals that we know unless you read Gary Larson.

You remember Gary Larson? Gary Larson, like everybody's telling stories. Like, you know, dogs, cats, chickens, everybody's telling stories. But as far as we know, because they're not talking to us, human beings are the only people who tell stories.

We narrate things. And we begin to do this pretty quickly after we start to acquire

language. But there are some things that are important and helpful to know about storytelling, about storytelling.

And one would be this. The first thing is that your story, your story, was being told by someone else long before you ever arrived. When somebody found out that they were pregnant with you, they started to tell stories about you.

So I'm the fourth of four sons, but my parents, in 1962, my parents found out that my mother was pregnant with me. She was 44 years old. And in 1962, to be pregnant at 44, I had brothers who were 18, 16, and 11 years old.

And my parents' friends were saying, "Louis, Betty, what were you doing?" If you know what you were doing, you know what I mean, right? But in 1962, if you're 44 and you're pregnant, you're anxious. And you have a lot of people around you in your community who are also anxious on your behalf. And that means that my story begins in such a way that I'm actually not necessarily initially wanted in the world.

I'm actually a source of anxiety. And you might be like, "Well, Kurt, you didn't know." I'm really smart. No, you didn't know, like, here's the thing.

Like, we know that, like, when moms are anxious, there's dress-core modes affected neurodevelopment of their face. So the story begins with one being anxious. Right? That's an example of what I mean.

So we come from lots of different places where our story was being told by someone else before work. And then you are born. And they continue to tell you your story, right? And they tell it in all kinds of ways that is not necessarily to your liking.

Like, they put you in clothes and you would never be caught dead in now, right? Like, who here would wear a onesie? Right? Okay. I'm looking back to see that. I mean, not like literally seeing it.

They, you know, so, and they call you things. They name you things. They take you to play dates with people that you hate.

But they, you know, you're going to do these. And your story is filled by somebody else. And that also moves to the next thing about storytelling, which is that our sense of who we are, the narrative that we tell is always a collaborative affair.

We never tell our story by ourselves. I'm always telling my story with somebody in the back of my head, collaborating with me. They might not even be a lot, right? But they've been some influence for me.

So one of the questions would be, who are the people that are in our lives who are helping us tell those stories that we really want to tell? So that's another element. Here's

another element. Most of our stories, the most powerful parts of our stories that are told, are not told using words.

Because 60 to 90% of all human communication is non-verbal, right? We sense, we image, we feel. My brain far more easily remembers things that I sense and that image that I feel than what I think. Right? Which is why, you know, you can watch a YouTube video, somebody drawing on a whiteboard while they're like playfully telling the stories about, you know, real function.

And you'll remember it. When just reading it out of the physiologic text, physiologic, it will be hard to remember. So much of our stories are shaped by what we sense, what we image and what we feel, but it's a lot of what we don't pay any attention to.

How well are we paying attention to what we're paying attention to? And to what degree, of what we're paying attention to, has to do with what we sense, image and feel that is blowing right by us but still shaping who we are. Another thing is that we tell stories in order for them to be heard. I don't just have a story because like that just happened to be what I do.

Like I want someone else to hear me. I want to be seen. I want to be heard.

I want like four year olds come in with their drawing, right? That looks like a four year old drawing. And they want to show you. They're telling you their story and they want you to notice this.

They want their story to be seen, heard, thought. Who are the people who are helping you tell your story by listening to you well? And that becomes yet another element of storytelling, which is that the listener is as important in the storytelling process as is the speaker. We see this in our group work all the time where someone starts to tell their story and they're really like, they're telling some traumatic event and like, it's like they're watching paint drop, right? They're telling it and the people in the group are like little plummox because they don't know why this person is telling it so blithely.

And then someone else is like across the room like coming out of their shoes because they're angry on this person's behalf. And the person is like, "Why are you so upset? I'm upset because of what your dad did to you." They're like, "Gosh, I never would have known that, but the listener now helps the speaker tell the story more robustly, tells more of the story." Right? So I have a guy that I call, he's called Mr. Effective, and I've been seeing him for a couple of years. And when he first came in, he was like, "Everything about what he does is work.

Everything is like, he just turns a gold." But he came to see me and he's been for it. He came to see me because he's really, really anxious. I'm asleep the whole nine yards, just anxiety.

And you're like, if you look at his life, he would say, "There's nothing about my life that would cause you to be a real anxious. So I've got this marriage thing going on." And my kids, so that's a little bit of, but I shouldn't be this anxious. So I asked the question, "So tell me a little bit about your life.

In these psychiatric evaluations, we ask people, what was it like growing up in your home?" And he said, "Well, I grew up in a really loving home. It was where his work. I grew up in a really loving home." And then the next question that follows, and most of you just like you're going to be like, "Well, who is in charge of disciplining your house?" It's a pretty common question that gets asked in most cocktail parties.

Right? I'm sure. If the conversation is like flattening out, just ask him that question. He's like, "Who is in charge of disciplining your house?" It's helpful.

It's helpful to have in your back pocket. And so here's what he says. He says, "I guess it turns out, I guess my mom was in charge of disciplining.

Oh, why was that?" Well, because it turns out his father was pretty physically abusive to his older brother. This guy would witness all the time. He just grew.

Right? And he couldn't afford, like, mom had to do the discipline because if dad got involved, things got really, really nasty in his house. Now, I asked his question. I saw like, "How is it?" I said, "What was it like growing up in your home?" And he said, "I grew up in a really loving home.

How is it that you spend most of your life telling that story?" Because this is what our minds do. Like, we tell the narrative that we need to tell and we're for us to cope with our life. And that becomes the narrative that is true, whether it is or it isn't, until my brain has had enough of this kind of pretense.

And now, even though most things in my life are looking well, like, I am as anxious as the day as long as I'm starting the difficult where I can no longer function. And what do I do? I came in and I say, "My problem is that I'm anxious because I'm not aware that my problem is that I miss tell my story." My problem is that I had been walking around having to carry this five gallon bucket of water with me for 45 years of a memory of a home that was brutal. And I don't know where else to put this.

And so my brain is trying to find a way out for me. And for those folks who would just think that they're anxious and just think that the solution for this is psychopharmacology, who would say, "Pharmacology may be really helpful and useful, but as long as you continue to tell your story that way, my drugs will not be able to compete with your life." So it's important then for us to recognize that I really want to tell a story in order for others to hear it in such a way that integration becomes where I end up. If that makes sense.

That's long ended. Any more questions?

[silence] Hi. So I witnessed a lot of mental illness and the effects of mental illness.

And just due to discussion on the importance of relationships with regards to a piece of mental health. I'm just curious why you think it might be so difficult for people to talk about mental illness compared to other physical illnesses. I just feel like it can make people rather uncomfortable, not just the person who's experiencing it, but everyone.

How would that help them? What might make people uncomfortable? Just the discussion about it. Oh no, just talking about the truth about what you're experiencing. Yes.

Okay. So here's a question for you. Why do you think it's difficult? I don't know that's what I'm asking.

[laughter] So here's the thing. I believe you when you say, "I don't know." But if we were sitting alone instead of in front of like 200 other people. [laughter] I would say to you, I think you do know.

Now, let me be very clear. I'm not saying, "I think you know when you're not telling me." I don't mean that. I mean, I think the answer is within you.

Because I think it wouldn't take long for us to just pause and be curious about, "Well, wait a minute. What's difficult about talking about this?" And then we start to imagine what I sense. And what I image, if I were to pretend that we're in a situation in which the topic might possibly come up, what would you start to sense? What would you not to say? What would you be afraid you would say? And if you were to say something, what do you afraid people would think? And you followed them.

And what I'm saying is that like, that right there is an example of what happens when we don't have much opportunity to practice telling the truth about what we want. What would I like? I probably would like to say I would want nothing more than to be able to talk about these things that either trouble me or I'm curious about and not be worried that the conversation is going to go sideways. And not worried that somebody is going to make me look stupid.

Or I'm going to sound stupid. That's what I would, does that make sense? Yeah. Definitely.

So that's the thing. We have all kinds of questions about these things that we can get to the answers to if we're willing to pause, take a step back, and start to actually start the conversation much sooner, much in a much more granular way to name what we want and what I'm afraid is going to happen if my name bar want. Does that make sense? Yeah.

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| to this podcast. And from all of us here at the Veritas Forum, thank you.  |                 |

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