

Asking for Help

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That was us on psychologists off the clock.

Yael Schonbrun: We are three clinical psychologists here to bring you cutting edge and science-based ideas from psychology to help you flourish in your relationships, work, and health.

Debbie Sorensen: I'm Dr. Debbie Sorensen, practicing in mile high, Denver, Colorado, and coauthor of ACT Daily [00:01:00] Journal.

Yael Schonbrun: I'm Dr. Yael Schonbrun, a Boston based clinical psychologist, assistant professor at Brown University, and author of the upcoming book Work, Parent, Thrive.

Jill Stoddard: And from sunny San Diego, I'm Dr. Jill Stoddard author of be mighty and the big book of act metaphors.

Debbie Sorensen: We hope you take what you learn here to build a rich and meaningful life.

Jill Stoddard: you for listening to Psychologists Off the Clock.

Yael Schonbrun: Psychologists off the clock is proud to be partnered with Praxis Continuing Education Praxis is the premier provider of evidence-based training for mental health professionals.

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Debbie Sorensen: I get questions a lot from clinicians who are looking for act training or other types of trainings, and Praxis my go-to place that I send people no matter what level they are, because they have really good beginner trainings for people who have no experience.

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Yael Schonbrun: You can go to our website and get a coupon for the live trainings, by going to our offers page at off the clock, psych.com/sponsors. And we'll hope to see you.

Jill Stoddard: We're here today with a co-host episode for you on asking for help and both Yael and Debbie have recently come out with articles

Yael co-wrote an article with a former guest of ours, Brad Stohlberg that came out in the Washington post on May 5th called therapist or coach understanding the difference and how to pick one. . And Debbie came out with an [00:03:00] article in psyche called how to ask for help. That was released online. In April. And we decided to have an episode based around this idea of asking for help. And I thought I would start by asking Debbie and Yael, you know, how interesting that they have both written articles that were different, but similar that happened to come out around the same time.

So I thought we could start with maybe you guys sharing, what is it about this topic? Like, what is it that drew you to this topic and had you writing articles about.

Yael Schonbrun: Well, help, help seeking is obviously such a dominant thread in, in the modern conversation. Cause I think so many people have struggled throughout the pandemic and

help can be hard to find in. So many of us are in need of help. One of the things that drew me, particularly to talking about the difference between a therapist and a coach and how to find a good helper is that it's hard to sort of see through the thicket to figure out like what kind of help would actually [00:04:00] serve you. And the other thing that I am always really excited to share with the public . Is that both in in the fields of therapy and coaching, there's help, that has evidence behind it and then there's help without evidence behind it.

And so that's something that through the podcast, through conversations that I have with peers and through my writing, I'm always excited to get more out into the public that just like medicine goes through FDA test. and coaching go through testing and randomized controlled trials and are some coaches that have proven their value in helping people to get to a better place.

And some that have no evidence or even have evidence in the opposite direction than what we want. So , it's like one of my missions to try to help people connect to help. That's actually helping.

Jill Stoddard: I love that yell and that, to me, that's so values driven, you know, me knowing you so well. I know how important research and science are to you. And that's a huge mission of our podcast to share science backed ideas from psychology. So this sounds like it was [00:05:00] a really values driven mission for you. What about you, Debbie?

Debbie Sorensen: Well, my article that I wrote is much more broad. It's not so much necessarily about professional help from, you know, a therapist or a coach or something like that, which is part of it. But it's also, you know, asking someone to. Feed your dog or give you a ride somewhere, something like that. So it included kind of a wider range of help.

It's a longer article and it had a wider range of help seeking kinds of things you might be looking for. And I mean, to be fully honest, I was approached to write the article by psyche with the topic they do, these guides, and it was, do you want to write an article on how to ask for help? And I'm not quite sure how they found my name, but I think it really ties together. I mean, it is something I really struggle with and always have I have that. Oh, I have to do everything myself, belief in my head sometimes where it can be [00:06:00] problematic for me, but also I think it's related to the work I do on burnout. I work with a lot of clients on communication skills and assertive communication and advocating for themselves. And also some of the work I'm doing with Megan. McCalvi on block. Right. It's like, we need to be in these relationships with people where there's give and take and we're connected and you know, we're not meant to be

an island here. And so I was, when I was invited to do it, even though I didn't really have a whole lot of time to do it, I thought this is a really good topic.

And then of course, I started looking out for it in my life. And when you look out for something like this, it's everywhere. You know, I had conversations with my mom about it. I noticed my seven-year-old daughter didn't ask for help for something really minor actually started with that story, because it's such a simple example of how from a young age, sometimes we don't ask for help even when we could. So it

has both the personal and also just the, you know, someone [00:07:00] asked me to and I said, yes,

Jill Stoddard: I loved that story about your daughter. Cause it really was like, whoa, you said she's seven, right? It was your seven-year-old daughter. Yeah, that even at seven, she said the words, I didn't want it. So it was, if you read the article, it's a story about Debbie's daughter asking Debbie to open her water bottle for her.

And she had gone all day through the school day, not drinking water because she didn't want to ask someone to help her open the bottle. And that she said she didn't want her teacher to think she was weak. And even the fact that she used that word at seven was like, really, it really hit me. You know, that at such a young age where, so, you know, evolutionarily, we are meant to.

Work in community and tribes, right? And yet I'll you talk about this in your book about aloe parenting and that we really are supposed to be sharing the load. And somehow, culturally, we've become these really independent creatures where it's seen as weakness to ask for help. And that's really [00:08:00] not the way that we're meant to be functioning.

And the fact that it starts at such a young age, It really kind of hit me, Debbie, the beginning, the beginning of your article about your daughter in that way.

Debbie Sorensen: Well, I'm glad to hear that cause that I think that it was such a good example. And what's funny about that story is that she meant actually she didn't want her to cheat or to know she was too physically weak to

twist the top of her water bottle. But I think that theme of weakness is part of what happens. With asking for help. And I, I read a lot of research that's out there about this. And, you know, as a clinician, I talk to clients about this sometimes. Cause a lot of my clients struggle with this too. It's like they don't

even think of it or they could benefit from help, but there's something getting in the way it starts to feel. Very scary thing. Like I could never ask someone to read my paper for me and give me feedback, or I could never ask them to help me do this or that And like, I have to handle it all myself. Um, but I think one of the things that absolutely gets in the way are these beliefs, [00:09:00] Right?

Like if I ask for help, what are people gonna think of me? Are people going to be mad at me? Are they gonna think I'm weak? Like physically, possibly Like the water bottle lid, but also are they going to think of. Like I'm emotionally

Jill Stoddard: capable. Yeah.

Debbie Sorensen: Yes.

Jill Stoddard: Yeah, yeah.

Yael Schonbrun: It reminds me of this study that I read about, um, learning how to breastfeed and that in our culture, we have. Ideology that like moms should just know it should just be natural. But actually if you look in Western tribes that, do more of this collective child-rearing, there's a really heavy emphasis on older women teaching new mothers, how to do nursing. And so we somehow. Adopted this idea that we're supposed to just naturally know some things. And so therefore we shouldn't ask and that if we don't know that there's something wrong with us, so kind of like Debbie's daughter that we're weak, but also that there might be something physiologically wrong with us that we don't know how to do something that's supposed to come so naturally. And he thinks so much of the time. [00:10:00] It's just inaccurate that idea that we should just know

Debbie Sorensen: Yeah,

Yael Schonbrun: What are other barriers? That, you guys have noticed either with patients that you've seen or in yourselves or in friends that get in the way of asking.

Jill Stoddard: I think for me, I mean, this has been really obvious to me just this week because I had surgery last week. And so I've been physically incapable of doing most of the things that I normally do. I can't drive a car and normally I'm the one who does pick up and drop off with my kids. Um, and so I've really had two.

Ask for help, mostly from my husband. And he's happy to do it. Um, but it's, it's a couple things. One is this, this fear of looking or seeming incapable, but mostly for me, it's I don't like putting other people out. I don't want them to be annoyed at me. I don't want them to think that I'm, what's the word I'm looking for.

I think it's an [00:11:00] annoyance. Like I just, I know how busy everybody is. And I know how busy I am. Right. And I'm happy to help other people. And sometimes it is a little bit of a burden with so much already going on that I don't want to kind of put an added burden on someone else where they feel like they can't say no.

And then, you know, ultimately it's about fear of disconnection, right? That like, I don't want my relationship to be damaged because I'm asking something of someone that's going to make their life. What about you guys?

Debbie Sorensen: I mean, I think that that is a huge thing. Just not, not wanting to be a burden, not wanting to seem and capable. I think a lot of times it's emotional discomfort around the asking itself, right? Like. I think there can be strong fear of rejection. If, if you ask for help and someone says, no, it's very painful.

Sometimes it feels really awkward or vulnerable to ask for help. And when I was writing [00:12:00] my article for psyche, I I delved into the social psychology research on asking for help, which is there's a whole research on this quite fascinating. And I can't remember the name of the authors of this classic study.

We can link to it in the show notes. I can't remember off the top of my head, but Heidi grant writes about it in her book reinforcements, which is all about asking for help it's great book. Um, but that they had done. Social psych study a long time ago, decades ago. And you know, social psych studies are always doing strange things out in the world, um, to try to see how people react.

And so they had people were supposed to go, I think it was something like they were supposed to go into a subway and just ask someone to give them their seat, to see what would happen. And the interesting thing about this study was. The researchers themselves, the research assistants who are supposed to go out and do this, they hated it.

They like wouldn't do it cause they'd get there and they'd get on the [00:13:00] subway. And then they'd be like, you know, it's so awkward and uncomfortable,

but they just like, you know, would come back and have no data because they just, you know, chickened out or whatever. And it's like, why is that? You know, why is it so awful? It's just very, it can be very socially uncovering.

Jill Stoddard: Well, you know how we also have this like negativity bias, where we pay more attention or even the confirmation bias, you know, paying more attention to a perceived threat or that one bit of evidence that does confirm your biggest fear to the exclusion of all the other bits of evidence that show the country.

This brings to mind for me, I do have a friend who developed a reputation in our friend group as being. Asked for a lot of help. A lot of the time. And truthfully, she was talked about behind her back because people felt really put out and also it wasn't a two-way street. There wasn't a lot of given it was all taking.

And so I have this one example though, [00:14:00] that that is what I think about like, oh, that's what everybody is going to think about me. If I ask for help this one time. Right? It's like paying attention to that one time. This was true. That led to disconnection in relationship. And, criticism and like some gossip and basically like all of my fears being proven to come true, but not paying attention to all the times that that absolutely has not been the case.

Debbie Sorensen: . I think that's true. And we also, we, we do have this tendency to assume people will say no. And on average, we think people are going to say no more than they actually do. So there's a little bit of a bias there too, where we, we remember the times we got a no answer and we latch onto those.

But actually that, that causes us to overestimate the likelihood that our requests will be.

Jill Stoddard: Or I think for me, I'm afraid, they'll say yes. And then bitch about it behind my back, because they don't really want to say yes to me, that actually feels scarier than someone. I [00:15:00] would rather have someone say no than have someone say yes. And then secretly be thinking I'm a.

Yael Schonbrun: Yeah. So I actually dived into this in an interview that will be released in a couple of weeks. And Debbie, you cite this book in your article. Um, the book. Influence is your superpower by Zoe Chance. And she talks a lot about the discomfort that people have in asking and some and how that is somewhat related to the discomfort around saying no.

And Jill, she talks about your sort of discomfort with the idea that somebody might say yes, but we're resentful about it and sort of how to manage that. And I will say that actually, I often worry that I'm like your friend that gets gossiped about it. And I don't want to ask for help for that reason because I. Th the area that I often need to open it because I'm a working parent is with my kids, but I'm so overwhelmed already with my kids that I'm worried that somebody will say, well, I helped you out with drop-offs and pickups last week. Can you do it this week? . And so I try hard, not, not to ask so that I'm not being asked and [00:16:00] feeling like I have to say yes, because I'm in this position of owing somebody.

Debbie Sorensen: One thing that we sometimes forget me. People tend not to like those tit for tat reciprocal kinds of situations where it's like, well, you did this and now I owe you this Transactional. It just feels kind of icky. We forget sometimes. So that. Yes, I get what you're saying. It's like, you don't want to feel like now you have to do maybe something in exchange.

That's going to be too much for you. You know, you have to set your own boundaries around all these things. But I think sometimes we forget that most people want to help other, I mean, yeah, there's some people out there who are maybe a little, I don't know, just lack, empathy, psychopaths or something. I don't know, but people, but I think that most people like you probably would want to, if you had. I mean, you'd be happy to bring an extra kid home.

You know what I mean? It's like, if it helps somebody else out, like most of us get a little bit of a boost and a benefit from being given from [00:17:00] doing pro-social actions. Like it's, it's a little bit of a benefit to ourselves. And Adam Grant writes about this actually about how, you know, giving has benefits.

Like

Yael Schonbrun: Right. It's like the science on gift-giving that we get more benefit from giving than receiving. And that's true with, acts of generosity, not just material.

Debbie Sorensen: That's

Jill Stoddard: And I think it also makes it easier to ask for help too. You know, if you feel like you have been doing your part, then some of those cognitive obstacles become

less strong. At least for me, it feels a little easier to ask if I've, if I feel like it's been reciprocal and I've been doing my part to help other people as well.

Debbie Sorensen: What about specific challenges? So, Yael your article was about asking for professional help therapy coaching. What do you see as some of the challenges to that?

Yael Schonbrun: Yeah. So there's a number of things that we didn't actually even talk about in our [00:18:00] article. But I do think that some of the challenges include the stigma of, you know, do I have, is there something really wrong with me? Do I have a mental illness and, and sort of the anxiety about. Uh, diagnosis. And similarly, I do a lot of couples therapy and I hear a lot of couples that tell me, you know, we waited a really long time because we didn't want to admit that there was something wrong in our relationship. I think that more and more that is getting worked out in sort of the modern conversation that, many people can find benefit in, in, professional help in that the stigma around mental illness is. Reducing to some extent, especially in certain segments of the population. I think insurance coverage and financial constraints is a real issue with therapy, um, and availability. I mean, that's been a huge problem throughout the pandemic and we've seen the growth of. services like online therapy, becoming more available. And I think that helps accessibility, but then you have this [00:19:00] other issue that comes up, which is, , what my article with Brad stillbirth talks about, which is a lot of those online resources are not necessarily evidence-based. Um, and so I think that can be a real trap. But one of the things that I like to let people know is that even though resources like our podcast or books or workshops aren't therapy in the traditional sense that they can be quite therapeutic and there are many online and, , bibliotherapy resources that are, that have a strong evidence backing and that are easily available at low cost.

And so that's something that I am constantly letting people know. You don't have to find a therapist to get help. It is one. Can be helpful, but there are lots of other modalities and setups that can be quite helpful if you're struggling with a particular problem.

Jill Stoddard: Right. And a lot of people are offering online courses now. I mean, I think that's such a good point yet. Oh, there's so many different modalities. And for folks who do want therapy, there are a lot of therapists who have wait lists right now. So if you have to wait two [00:20:00] months to get in, that's a perfect amount of time.

Listen to some podcasts or read, you know, self-help books. think the other thing that can be an obstacle is just the overwhelm, you know? And, and I think especially about people maybe who struggle with add or things like that, if, especially if that's the reason that you're seeking therapy. weeding through, like, where do I even begin and who is the right person to help me and how, and then even if I know whether it's a coach or a therapist, like there's a million of those people out there, how, how do I know which one I'm supposed to look at?

So maybe we can talk a little bit about that. Like what are, what are some ways we can maybe break this down for people? Like, maybe we can start this as in your article, your LS, what type of therapy, when somebody should get a therapist versus a COVID.

Yael Schonbrun: Yeah. I also just want to sort of pause on this note that like, what if you feel like you don't have time in this reminds me of something yoga and meditation teachers say, which is, if somebody says they don't have time to do [00:21:00] five minutes of meditation a day, then maybe. You should probably start with an hour a day. So if you don't have time, because you're feeling too burned out, that can be a sign that it really is a good use of your resources to sort of pause and regroup, because if you sort of continue in that cycle of, I don't have time and I'm feeling burned out. Then it's going to take, it's going to be that much bigger of a lift to get out of, you know, the, the burnout cycle. Um, same goes with mental health. The same goes with relationship problems, that if you're feeling like you don't have time to dedicate or resources to dedicate, but things are going downhill. It's a good moment to sort of pause just briefly and say, what would it be important before things get even worse to really carve out some time to make this a priority.

Jill Stoddard: That's a great point. And I think now more than ever, that we have so much access to telehealth, the time commitment is. because there's no more commute. It can truly just be 50 minutes of your day, rather [00:22:00] than two hours to, you know, leave work and get to your car and drive to the therapist that dah, dah, dah.

Debbie Sorensen: Don't you find that sometimes your clients, like during the times when they need you the most is when. You just don't hear from them either. They're just, oh, I was too depressed to come in or I was too busy and stressed and I get it. I mean, I do the same thing sometimes they do.

I don't do the things I know I should because I'm stressed out and it's just a reminder sometimes. Well, that might be a really good time to talk to your therapist. In fact,

Yael Schonbrun: Yeah,

Jill Stoddard: Yeah.

Yael Schonbrun: I've, I've definitely had phases in my life where I've felt too busy and it turned out that I really should have sought help much earlier in that cycle. And I am more on top of it now because I've learned the hard way. But I do think that, you know, when you notice your. What we call like the clinical impairment, if you're having a hard time functioning at ordinary levels and your job in your close relationships with your health, um, that's a good sign that [00:23:00] it's time to pause and get some support in whatever form that takes, whether it's talking to professional, , listening to some self-help kinds of podcasts or audio books or attending a work. I'm Brad. And I talk about the difference between what kind of signals would send you to seek out a therapist versus a coach. And it really is that difference between, is there a significant impairment which would direct you to seek out somebody who's specially trained in treating mental health problems, a therapist, versus are you looking to enhance, perform. Like, you know, get better at dating or perform better in your work sphere or really improve it in your parent child relationship. That would be more the signal to seek out a coach, , somebody who has a specialty in helping people enhance their performance in these specific areas. So again, for therapy, it's really like if you're functioning below ordinary level, Look to a therapist. If you're looking to [00:24:00] enhance your performance, a coach may be a good fit.

Debbie Sorensen: When do you think it's enough to just get support emotional support from your friends and family? Because sometimes it is. I think that sometimes actually back to this idea of not being an island, I think sometimes we carry an emotional load and we, we need support and just connection and someone to talk to about it. And sometimes that isn't it.

Yael Schonbrun: Yeah, I was just reading this terrific piece in InStyle by Jesse Gold, who who's a terrific writer. And she talks about the difference between friendship and therapy and, you know, spoiler alert. They're quite different. Um, In some ways they kind of serve a similar function. Cause w as you're saying, it's like, you know, connection and support and care can come through either relationship. Um, but I'll say, you know, what's interesting is like, I have obviously the two of you and many other friends who are professional therapists, but. I'm careful about what I lay on them, because friendship [00:25:00] really is qualitatively different than , a therapist, client relationship. And there are certain ways that the therapist, client relationship allows you to like really be open and lay all your stuff on because the therapist has. Some

distance, some emotional distance. And so they won't kind of carry it in a heavy way. The way that a friend might their job is really to focus on supporting you and helping you sort out your stuff, as opposed to a more back and forth kind of dynamic that exists in most friendships. And so even if your friend is a therapist, You might approach that relationship in a different way than you would somebody who is acting as your therapist in a professional context.

Debbie Sorensen: I have my husband sometimes they'll say, do you talk to your clients like this? I'm like, well, no, you're not my client. You're my husband. Of course not. It is a different thing, you know? Well, yes, of course it should be.

Jill Stoddard: , I think if people aren't sure. Do I just need to talk to a friend or do I need [00:26:00] professional help is instead of being all up in your head and trying to figure out the quote unquote right answer, you can kind of test this out by your experience. So, you know, if you're talking to friends and you're not getting your needs met, Which may happen a lot.

Like, I don't know if you guys have had this experience where maybe you say like, gosh, you know, yeah. I'll maybe I'll use you if that's okay. As an example where, you know, you, you have a book that's coming out soon and you'll say, gosh, I'm like really worried about how this is going to be received. And sometimes a friend who is not trained as a therapist cause you know, the other differences of course.

Training and how to do this might say, oh, don't be anxious. You'll be fine. And that is really well-meaning, but it's not helpful because you're already feeling anxious. And now you're being told you shouldn't feel anxious. Whereas a therapist might be more likely to say, well, of course you're anxious.

Like this is really important to you. It would be weird if you weren't anxious and something. [00:27:00] That simple can make the world of difference. And so I think if you notice, you're going to your friends a lot to talk about the things that you're struggling with, and you're just not getting what you need, even if you don't think you have a diagnosable mental health issue, even if it's not totally interfering in your functioning, but you're really struggling and suffering and not getting what you need.

Like that can be a really good reason to seek out professional help from a therapist.

Yael Schonbrun: I love that cue. And it's actually something that I talk a lot about in couples therapy. Like if you find yourself having the same conversation

over and over again, even with different people, but especially with the same person and you feel like it's just not moving forward. Like you keep you find yourself on the Greek, eat all the time.

It's a good cue that, you know, something needs to change and you may not know how to change it. And that is when, um, professional help can be quite hard . So I, so I just recently read this [00:28:00] wonderful piece by just Dr. Jesse gold. Who's a terrific writer talking about the difference between therapy and friendship. And one of the things that she notes is that, one of the difference between a therapist, client relationship versus a friendship relationship is that the balance of airtime is larger for a client than it would be in a, in a mutual friendship. But it's not always perfectly clear. So for the two of you, what do you think is a sign of like a healthy balance in a therapist, client relationship versus a signal that your therapist, client relationship might be veering into friendship, territory, which is not what you might need or be looking for.

Debbie Sorensen: Well zooming out on that question. I mean, I think it really, there are some, I think it depends somewhat on the therapist's clinical orientation, because there are certain therapies where either the therapist is meant to be a neutral blank slate, and that's part of the clinical stance or a kind of an expert teaching you things. And there's really. [00:29:00] Behind that there's like philosophies and theories behind why the therapist is in that role. And I think other therapies, therapists self-disclosure is part of the treatment. I think it's meant to take down some of the power hierarchies to give clients a more of a sense of you're not alone. Humans, we're all struggling. And that tends to be my orientation a little bit. So I actually do disclose, and I talked to my clients too. Sometimes when I'm teaching them something, I probably take up a little more air time than I might, if I, you know, if I wasn't teaching them a concept or a skill or something like that.

But I also think I have to watch it because first of all, some of my clients, I really like them. And so. It can digress into chit-chat and it's like, what are we doing here? And let's bring it back because this thought where you're paying me for. Um, but also I think that sometimes, you know, you want it to be clinically useful to be for a reason.

And I think as You know, if you're, if you're in the client seat, [00:30:00] you know, if it's starting to feel like it isn't useful, it's just chit-chat. I mean, a little chit chat is fine, but if it's like half the session is chit-chat, that's probably not good. I think for me, um, in the pandemic, that's got a little blurry because we as therapists, we're all going through, you know, the, all the political people and the fear around COVID and what's happening and we're home and we're

isolated in our kids and we're not sleeping. And I think it's important to a degree for therapists to acknowledge that and to say like, yes, this is so stressful. This is hard. But I did, I had a particular session during the pandemic where I remember afterwards just thinking. I think I made this a little bit too much about like, yeah, I'm stressed out too, and kind of thought I need to just be aware of that because it's not necessarily clinically useful anymore. Um, so anyway, it's a, it's an, I think it depends a little bit and, and I think for different clients, some might really like that. And some might be [00:31:00] like, I don't want my therapist to be talking about themselves.

Jill Stoddard: You just took those two words right out of my mouth. I was going to say one of the things that I think all of us are trained on, no matter what our orientation is, any question that comes up like, should you hug your client or not? Should you drink water during session or not? The answer is always. It depends.

You know, it's contextual. It depends on the function. And Debbie, I think that the, the COVID example is such a good one, because this was the first time where, when clients came into session saying, how are you? It was the first time. It didn't feel like that small talky thing. We all just do to start a conversation where pre pandemic, if a client said, how are you.

I'm great or I'm tired. And then we would go right into the therapy. Whereas I really sensed during COVID that when clients were asking me this question, they were generally concerned about me and wanted to know how I was doing, and that conversation could be done [00:32:00] in a way that was still about them and therapeutic to them.

And, and even if that's just about rapport and our relationship, you know, we know that the. The biggest predictor of outcome and therapy still is the quality of the therapeutic relationship. And that sometimes that disclosure can really be used in that way, especially if clients are otherwise feeling disconnected, like being locked down and not having that same level of, of interaction that they've had in the past.

Debbie Sorensen: I you know, back to the question of how to find a good therapist fit. I often encourage people when they call me for a referral to talk to a few people, because I think that that. Just the relationship that fit, just having that sense of, oh, I click with this person. I feel like they can help me. That is a variable that predicts a good outcome.

And it's hard to know that until you have a conversation with someone and just try it out, [00:33:00] even maybe a session or two to just get a sense of that, because sometimes it's just not, and it's not personal. Even, it might be the most qualified person, the biggest expert. And you're like, we're just not clicking here and that's okay.

But I think that might be a good time. Move on or to interview a few therapists and, and find one that does feel like a good interpersonal fit. Right.

Jill Stoddard: I usually recommend that people give it like three sessions. And if by the end of the third session, you don't feel like you're clicking and comfortable and safe and can open up. That's probably a good indicator that this just isn't the right therapist for you, even if they're perfectly qualified.

Yael Schonbrun: And just to normalize that process, that is a pretty typical part of finding a therapist. That's a good fit And it's unlikely that a therapist would take it personally, if you say I'm interviewing a couple people, can you give me a couple of sessions so that I can find, make sure that this is a good fit for me?

Actually you'll get, typically get a lot of respect from the therapist by doing that. So I think [00:34:00] again, sort of getting back to that fear of burdening people or asking too much of people, this is a pretty standard part of finding a good therapist is really prioritizing the fit between you and, and the therapist, making sure that you feel comfortable. The relationship feels warm and safe and supportive. And as Jill just said, it can take , a couple of sessions to really, to make that determination.

Jill Stoddard: Absolutely. So maybe we can talk a little bit about some of the more specific factors that listeners might look for when they're kind of hunting through the morass of the internet to try to find someone who's a good fit. What do you guys recommend for.

Yael Schonbrun: One thing that I want to say doesn't matter too much is your degree. Like somebody can have a master's in social work, be, uh, you know, med have a PhD, PsyD, years of practice and degrees. Turn out through studies that have been conducted not to matter very much. , and so I think it can be tempting to look for somebody with the highest degree [00:35:00] or, you know, the most number of years in practice, but I wouldn't focus too much on that.

And I think that that's an important myth, to be honest.

Jill Stoddard: Absolutely.

Debbie Sorensen: I do think though, you want to find someone who has. Either as licensed, if you're looking for a therapist, you want to find someone who's either licensed in a mental health field or in training to be licensed under supervision. I think that in some states, including my state here of Colorado, actually, there are some laws that you can't. Deem yourself as a psychotherapist, without training. And some of those people actually do have training, but you just have to be very careful. And I think the public doesn't necessarily know the difference, but I just think that you have to be cautious because if you go to someone who doesn't have that kind of training, they might be doing things that aren't necessarily. Helpful or evidence-based and in some cases might be harmful. And I think as, as a consumer, you, these terms get [00:36:00] very, the difference between a psycho therapist and a psychiatrist and a psychologist. It's like the words are very similar and people don't necessarily know the difference.

Jill Stoddard: I think that's a good point. We, you want to make sure that irrespective of the letters after someone's name, that they have training and licensure in mental health. And then I think beyond that for each specific person, you want to look to make sure that what they're specializing in is.

The same as whatever it is that you are struggling with. And, and I'll add a caveat to that. For me, I think a red flag is when you find somebody who claims to specialize in every single mental health problem that exists, , or similarly, you know, you want to find somebody who practices from. , an evidence-base, you know, a psychotherapy that has been empirically supported.

So things like cognitive, behavioral therapy, acceptance and commitment therapy, there's many DBT EFT. Um, and if somebody claims to be an expert or a specialist [00:37:00] in all of those different therapies, it's literally impossible. You know, the number of years, whether it's a master's degree or a doctoral degree, we do not go to school long enough to truly learn how to.

Um, competently deliver all of those therapies. So really finding someone who says I do this one, two or three types of therapy, and I specialize in these, I don't know, it's, don't take this as a rule, but you know, maybe three to 10 different kinds of things. You're more likely getting a specialist who actually has expertise in that evidence-based therapy than someone who says they do all the things for all the problems.

Yael Schonbrun: And I do want to add that. I think Jill you're pointed to this, that there are a lot of different treatment approaches that have an evidence backing to them. And so it's maybe less important to like, Either do CBT or act. Um, and that's certainly not what we're advocating. We all do act because we

believe in it, but there are many other treatment [00:38:00] approaches that are proven to work, but it is important to ask your prospective provider. What the track record is for their approach to ask them, to show you some evidence. And again, just so that you don't worry about putting them out that that is pretty typical and your providers should be able to provide either, , online resources for the approach that they use, or, um, tell you a little bit more about the track record for the kinds of, um, treatment package or approaches that they drop off.

Debbie Sorensen: And most therapists will offer an initial call. Not only offer. I mean, I don't, I don't really take a client if I don't talk to them first on the phone. And I think that I would encourage You to do a little research and also ask a lot of questions. I know, it takes time, but I think that's part of finding a good fit is you want to at least maybe get a referral from a friend or somebody in your life who knows something about this. [00:39:00] If you don't know anyone that you can ask for recommendation, you have to do some research online and then try to get some questions in a row. What do you want to know in terms of maybe the person's experience or their approach, how they approach therapy? I think it's really important to them.

Jill Stoddard: You know, one way that can be helpful to actually, instead of just kind of Googling, you know, therapist for depression in Colorado, you know, that's going to give you a lot of answers. One of the ways I even had. People find referrals. If it's, if it's outside of my own state where I don't necessarily know people is if you find a professional association that is specific to either the type of problem you have, or the type of therapy you think you want.

So for example, if you know, you want cognitive behavioral therapy, There is a main professional association called ABCT the association for behavioral and cognitive therapies. You can go to abc.org and click find a therapist. There's a professional association for OCD, for anxiety and [00:40:00] depression for act, which is called.

Uh, it, that website is contextual science.org. So it wouldn't be super obvious, but you can find, you know, you can use the, find a therapist option there, and the people who are paying dues to be part of those associations. Typically it means they've really dedicated a good portion of their professional life to treating this particular problem or using this particular therapy.

Yael Schonbrun: And just to add onto that, that research does show that deliberate practices spending a lot of time on your training and really honing your therapy skills in a particular way is a predictor of good. Um, so it is helpful to really make sure that whatever the approach you land on that your therapist

has really dedicated a lot of time and energy to being well-trained in it. The other thing I was going to add that can be helpful is word of mouth. I mean, and that, that can be easier than, than Dr. Google, because you can go to trusted friends, maybe even work colleagues. [00:41:00] Ask, you know, if they know of anybody who, uh, who's good. And I think that can be a great way to connect with somebody that doesn't require you to necessarily know about particular approaches.

Debbie Sorensen: I love. Talking more openly about getting therapy. I heard something about how teenagers is kind of like cool. Now that's not the case. I was a kid, but, um, you know, that the stigma is maybe lifting, like you said, Joel, at least in some circles, um, and people are talking more openly because one thing that can happen is people might say, oh yeah, I have a therapist I'm working with for anxiety or for this or that.

And yeah. You could say, Hey, do you like your therapist? You know, are they, can I get that recommendation? I love it. When my clients refer people to me, You know, in their personal life, because I take that as the ultimate, like, oh wow. They feel like this is helping them. Um, sometimes I can't take it if it's someone who's too close to that person, but then I can, oh, [00:42:00] you know, your spouse needs a therapist.

Here's my, you know, some of my go-to people. And, and so I think that can be a good way to, to. You know, word of mouth through friends that you know, who have a therapist, they really are

Yael Schonbrun: You found helpful?

Jill Stoddard: Yeah, I think one of the most important things, whether you're asking for help, you know, w like we were talking about in the beginning of the, of the recording, you know, just asking for help from a friend, can you take my kids to school or whatever, or looking for professional help from a therapist or coach.

And especially right now, persistence is key. You know, I we've had so many people call our clinic who have said I've called six therapists and no one even called me back, which, you know, that's, that's, uh, that's something I get really upset about is like at the very least therapists who are listening at least have your voicemail say I'm not taking clients.

And so I won't be returning calls. So people know not to sit around waiting, you know, it's taking months for people to sometimes find therapy because they're

waiting for calls [00:43:00] back that never come. And it can be really discouraging. And especially if you're struggling. I mean, the whole reason you're asking for help is because you're struggling.

And so it can be really discouraging and really difficult to persist, but you know, to not give up, somebody is out there who can help. And as you, Ella was saying earlier, whether it's podcast or self-help books that you can be accessing. While you're trying to get help. And if you're struggling to find professional help, maybe there's someone in your life you can ask to help you find that professional help.

Debbie Sorensen: I mean zooming out to, to a broader conversation about help. I just want to acknowledge the cultural. Piece of this, because I think that we, you know, we talked about some of the cultural challenges or barriers . When you're in a more Individualistic.cultural or society, there's that sense of, you know, I have to do everything myself.

I have to be alone. I can't ask for help whether it's professional or, you know, just personal help. [00:44:00] But I do think that creating a cultural shift takes everyone being more willing to ask for help, being willing to talk openly about different kinds of help that they get and give to offer. To ask for help to receive help. And in the end of my article, on my psyche guide on how to ask for help, I actually use our podcast as an example where we try, I mean, I don't know, we probably don't do this perfectly, but we try to make it very acceptable to say, Hey. I am maxed out right now, or I have this issue going on or I'm going out of town and to make it okay to say to people, I can't get this done in time.

Can you con you know, can you help me out with this or offer help when it's needed? Because I think that, you know, there is the snowball effect. I think if you are willing to ask for, or offer help, then maybe that person will do the same. And I think whether you're in a corporate environment, Uh, family or a team or a neighborhood just having that, [00:45:00] that cultural vibe of like it's okay.

It's not only okay. It's good. Like we need each other, it can shift things and make it so that it's not such a big deal.

Jill Stoddard: Well, then we know that modeling is incredibly powerful. It's a, it's a powerful behavior changer. And, and I think that's part of what you're talking about. And I'm thinking about, you know, seeing you guys more. Offering help and asking for help has made it much easier for me to be able to do that. And I'm thinking of another really good friend of mine, my re my good

friend, Tracy, who her husband just retired from the Marine Corps, but being part of Marine culture, you have to get comfortable asking for help. And as an officer's wife, she's someone who's often given her. To, um, you know, other spouses, et cetera. She's so good at providing help and also asking for help.

And having her in my life has been a really powerful model for me too, that G like, I love it when she asks me for, for help and I'm able to help her.[00:46:00] And, you know, she's someone I've come to rely more on without any kind of negative consequence. And those experiences can really help build this.

Yael Schonbrun: Debbie. I also related to that, I love how in your article, you talk about being thoughtful about who you bring into your helping network, that there are some people who are safe and comfortable and there can be a very, you know, kind and reciprocal relationship, not transactional, but reciprocal. Okay. Th that those are the kinds of people that you want to be asking for help and offering help.

And then there's certain people that might be less safe, so who, who may be a good person to having your helping network and think about building you're helping that work.

Debbie Sorensen: Building it. And sometimes maybe even asking someone where you're not quite sure, cause you don't want to keep going to the same nice person all the time and then over, you know, overwhelming them. And so maybe sometimes going a little bit outside your comfort zone to ask someone, , New or somebody where you're thinking maybe we can move in that direction.

Like a neighbor, you know, you, you [00:47:00] start to kind of build that up over time through that reciprocal process.

Jill Stoddard: Well, and Debbie, that makes me think too, you mentioned in your article that it, you do tend to go back to the person who you think is going to say yes. And sometimes women are more socialized to be helpers and to say yes. And then that can add to kind of that gender. Discrepancy we're women are the ones that are kind of always stepping up and nurturing and helping, and to really be aware of those kinds of cultural pieces too.

Well guys, I hope that this was a helpful episode for everybody. We'd love to hear from listeners. If you guys want to tell us on social media about your experiences of asking for help. We'd love to hear from you.

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