

Buyer Beware! Pseudoscience and the Self-Help Industry, featuring Pooja Lakshmin

Jill Stoddard: [00:00:00]

we titled this episode by or beware. And I thought that was such a perfect way to capture that, that it, it's essentially saying if it, if it seems too good to be true, it probably is.

Yael Schonbrun: science isn't a truth that we discover it's a methodology,

Debbie Sorensen: if people trust science without doing that critical thinking piece of it, that can make them more vulnerable to pseudoscientific claims.

Pooja Lakshmin: Writing real self care, you. Is coming from my practice as a psychiatrist that specializes with women's mental health.

But probably more importantly, it's coming from this personal experience of really knowing what it's like to put all of your faith into an answer that then turns out to, , not be. It's the right one because, because the truth is there is no one answer, . That was S cohost, jill debbie and you Al as well as our guests pooja lakshman on psychologists off the clock [00:01:00]

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, author of Act Daily Journal, the Act Daily Card Deck, and the upcoming book Act for Burnout.

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

Jill Stoddard: And from Coastal New England. I'm Dr. Jill Stoddard, author of Be Mighty, the big book of Act metaphors and the Upcoming Imposter. No more.

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

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

Debbie Sorensen: There's a lot of misinformation out there in the world that we're living in today. We have so much access to information on the internet, on social media, people. Spouting conspiracy theories or talking [00:02:00] about some research that they've supposedly done on really complicated matters that are best left to the experts.

And we see a lot of people falling prey to conspiracy theories and other harmful ideas out in the world. And we know that the self-help world is an area where this happens a lot we're in the era of wellness influencers and a lot of people who are making claims online and people who have very popular platforms on social media and other places who are, you know, they want you to buy their product or they want you to follow them.

And as co-host, we are kind of talking about how this might be a really interesting thing for us to talk about. Because while some of these self-help products and programs might be helpful to some people, some of them are kind of snake oil in the sense that they're probably not super helpful and sometimes they can even be harmful or be borderline, you know, conspiracy theory or, or sort of cultish type [00:03:00] behaviors.

And so we've all been reading about this and also. Are just aware that this might be a kind of an interesting thing for us to talk about on the podcast today.

So we have today an episode that is mostly a conversation between the three of us co-host because we've been thinking a lot about this.

And we have some tips at the end of the episode to share with you that are just things you can think about and look out to help you be a, thoughtful and critical consumer. Um, and we are also gonna have a little excerpt

Yael Schonbrun: yeah, I had a chance to speak to Pooja Lakshmin, who, uh, wrote a new book called Real Self-Care, a transformative program for redefining Wellness. That really fits well into the conversation that we're having about how we can approach the science of wellbeing.

And so, um, within our conversation, we'll also share a bit of the conversation that I had with Dr. Pooja Lakshmin

Debbie Sorensen: so we all learn some skills in our PhD programs about , how to look at. [00:04:00] Research evidence with a critical eye and research methods. But even with our training, sometimes it can be tricky and it's something that we grapple with on the podcast because we're bringing information out to the public.

And sometimes we're kind of asking ourselves this question like, you know, what is, what is legitimately research based and what's helpful to people? Um, so we've all been reading about this topic and sort of exploring it. Jill, what have you been thinking about related to this?

Jill Stoddard: So I read a little bit of a book called The Quick Fix by Jesse Single and , there was one quote in there that I thought was pretty brilliant, and he said the fads that ask the least of us are the most apt to go viral. And I thought that was so interesting. And to me, you know, we titled this episode by or beware. And I thought that was such a perfect way to capture that, that it, it's essentially saying if it, if it seems too good to be true, it probably is.

And that as consumers, you know, we really need to be skeptics. And, you know, you guys know I have a, a book about, , the, the imposter [00:05:00] phenomenon coming out in September. And one of the issues I ran into when I was trying to report the science around this phenomenon is that almost everything I found.

Correlational data and you know, correlation just means two things, have a relationship. It doesn't mean one causes the other. And you know, I remember when I used to teach psychology and, and when I taught the the psych 101 students about correlation, the example I would use is there's a correlation between eating ice cream and drowning.

right? So like the more ice cream that is eaten, the more drowning occurs. And if you say eating ice cream causes drowning, that's clearly not true. The reason these things are correlated is simply because they both happen more often in the summertime.

Yael Schonbrun: Maybe It depends how much you eat. No, I'm just kidding.

Jill Stoddard: maybe if you eat too much ice cream, you might be

Yael Schonbrun: the way I approach ice cream might be Causational.

Debbie Sorensen: haven't they debunked that thing about, remember when you were a kid wait 30 minutes after eating to swim? I [00:06:00] think that's been debunked. Which is a good example cuz didn't we all learn that

Yael Schonbrun: Yeah.

Jill Stoddard: it absolutely is. And so I think a lot of the things we come across, so, you know, one of the things I think we need to be wary of is anytime there is an industry that stands to make gazillions of dollars on trying to sell, a fad that asks very little of us. You know, they'll often use correlational data as a fear tactic or as proof that something is effective.

Um, and they're really sort of like overselling ideas that aren't as, you know, objective or science backed as they're made out to be.

Debbie Sorensen: Yeah.

. Well, I've been at, coming at this topic a bit from the angle of this social commentary that's out there right now on the wellness industry. And I just, I've been really interested in this lately. So I've read a couple of books. One is called the Gospel of Wellness and the other one is called American Detox.

Um, and I've also been [00:07:00] listening to a few podcasts. There's some really interesting ones out there. Maintenance phase is one. Conspiratorality is one, decoding the gurus, that lend a critical eye to some of the claims that are being made and the ways that people are susceptible to following some of these. People who are, you know, I think some of them are well-intentioned and maybe are doing things that are helpful to a lot of people, but that it can sometimes cross this line into where, you know, they're making money off of people. Maybe they're problematic in some ways. And I think one of the things

that really stood out to me was from the gospel of wellness, that it's kind of like what you're saying, Jill, uh, was about how people are sometimes given some scare tactics to buy certain products or, you know, there's this real pseudoscience behind how dangerous certain things are and how you need to buy this, this product, or you need to pay for that as a way to try to, you know, it's really market.

but that it's [00:08:00] done in a way that looks scientific. And so it's it people who are just trying to be careful and take care of themselves sometimes I think are, are victims of the, the people who are out there doing this. Um, so that's kind of where I'm interested in this.

Jill Stoddard: Yeah, and, and I think too along those lines is you can present accurate data that says, you know, this significantly improves your depression or anxiety or skin or whatever it is they're trying to sell. But that word significant can mean so many different things, right? Statistically significant doesn't mean clinically me.

Or, you know, somebody who's just marketing can use whatever word they want and it, they can, they could still say it's true and not false advertising, but it doesn't necessarily mean that it's going to vastly improve your life in a, you know, in a way that's meaningful, that isn't just a one point or 1% or, you know, silly little marginal change.

Debbie Sorensen: or [00:09:00] even, you know, you mentioned the example of skincare products. That's, that's a good example. Cause that's one that she writes about in the Gospel of wellness. Because sometimes it's like, yeah, if you inject someone with a huge dose of certain chemicals, it can be bad for your health, but at the dose that people are actually using it, it's really not significant.

But they don't really share that detail with you. Um, and, , those kinds of things. I think it's like, it's like a slight exaggeration often. How about you Yael?

Yael Schonbrun: Yeah. Well, and the wellness industry is just full of this, right? Because it's an industry that is for profit that is trying to, um, market various products for. For the purpose of making people feel better in their lives, either physically better, mentally better, um, relationally better. And so there is such a strong motive as you both are, are speaking to, to make profit and, and what drives it isn't necessarily good science, but also the science is so complicated.

[00:10:00] And I recently had the chance to read and then speak with the author of a new book called Real Self-Care, the author is Puja Lachman, who is a board certified psychiatrist, New York Times contributor, and a leading voice at the intersection of mental health and gender.

She's focused on helping women and people from marginalized communities escape the tyranny of self-care, and she calls it that, a tyranny of self. There's so many really interesting things about this book and we're in a few minutes gonna cut away and share some of my conversation with her. But what's so fascinating about her story is that she, too, somebody who is a board certified psychiatrist, was taken in by the wellness industry. So she shares this painful history and she is really aware of how the wellness industry can take.

Consumers in, in this very unhealthy way. And so she juxtaposes what she calls faux self-care, which is sort of like this viral. It's very simple. Just pay for this and you'll feel so much better to [00:11:00] real self-care, which is more process-oriented. And she actually draws on acceptance and commitment therapy as a framework for how we can engage in, um, more authentic and effective self-care.

Has science backing it, but not science in like a simple way. It's really about a process of engaging what we know is more effective for building wellbeing over time for, for people who live complicated lives. So we hope that you enjoy this piece, and then we'll come back to our conversation between the co-hosts about buyer beware.

Dr. Puja Lachman is a psychiatrist, New York Times contributor and assistant professor at George Washington University, and a leading voice at the intersection of mental health and gender she also maintains a private practice where she treats women struggling with burnout and perfectionism as well as clinical conditions like depression and anxiety. Her new book, which we are here to discuss is Real Self-Care, A transformative program for Redefining Wellness, crystals, cleanses, and [00:12:00] Bubble Bath, not Included.

Welcome, Dr. Lachman. I'm so excited to be chatting with you.

Pooja Lakshmin: It's such a pleasure to be here. Thanks for having.

Yael Schonbrun: So I first just wanted to share that I was really excited to discover that your framework for real self-care draws on acceptance and commitment therapy, which, which is a treatment that I and my co-host practice.

and what I love about your book is that it is really authentic and you reveal a lot about yourself. I'm curious about what that has been like just in the journey of it, but also I wonder, you know, if you'd be willing to share sort of your own story, your quest for self-care in your twenties, where that led you to make some pretty drastic decisions and I.

While not everybody's gonna make the kind of decisions that you made, I think we can all really relate to that universal drive and that how the world that we live in sort of sells us this false bill of goods that if we just get the right answer, that will feel better. We won't feel so burned out and boxed in and, um, unhealthy inside of our.

Pooja Lakshmin: [00:13:00] Yeah. Yeah. I share in the introduction of real self care about my own journey. So I, I'm 39 years old, um, now, um, but about a decade ago when I was a trainee, after I'd finished medical school and was in my psychiatry residency, I sort of, I. Found myself in my late twenties. I had ch, you know, kind of checked all the boxes that I was supposed to, as you know, a first generation South Asian woman.

I had gone to med med school. I was a good Indian girl. I'd gotten married, you know, gone to all the Ivy League schools and done everything that I was supposed to, and I kind of, it was almost like I, I had a. Quote unquote arrived. And I was waiting to kind of like feel that moment of like, okay, like now I'm supposed to be happy, you know,

Yael Schonbrun: here it is. Now I good. Right?

Pooja Lakshmin: right. And it didn't come. It didn't happen. And, um, I was really destructive and I was really angry about that. Um, and I left my marriage. I moved into a commune in San [00:14:00] Francisco that was focused on female sexuality and practiced orgasmic meditation. Um, and then pretty quickly after that, I dropped out of my residency program.

Um, you know, my Indian parents. Thrilled. Really thrilled . Um, all of my friends were also just like, you know, like, what happened to Puja? What is Puja doing? You know? Cause I was like, valedictorian at my high school, you know? I was just like, sort of like very on this, like straight and narrow. Um, and I was with this group for two years and, um, you know, I like exactly what you said, Yayel.

Like, it was like, I really thought that I had found. I thought I'd found the answer. I thought I'd found the solution. And , and, and then it was a fulfilling time in my life. Professionally. I, I worked at the Rutgers Neuroscience Lab, orgasm Lab, , where we put people in F M R I machines and looked at their brains while they were having orgasm.

, and now part of my clinical practice is I do take care of women who are suffering from NIA and, and genital pelvic pain [00:15:00] disorders. , but I, at the end of that two years, ultimately I realized, No wellness practice, no grew, no external solution can fix your own life or your own problems. Like you can't run away from it.

And I left the group, you know, really heartbroken, really depressed. Um, and I had to go through my own, you know, therapy and, and I was, , and I was.

Privileged and fortunate to have the resources to find a good psychiatrist to get back into therapy, to take medication, have access to all these resources.

, and, and years later I found out the story inside this group was actually really dark. , and a lot of people that left that group did not have those types of resources. So, you know, for me, writing real self care, you. Is coming from my practice as a psychiatrist that specializes with women's mental health.

But probably more importantly, it's coming from this personal experience of really knowing what it's like to put all of your [00:16:00] faith into an answer that then turns out to, , not be. It's the right one because, because the truth is there is no one answer, right? And the truth is that the answers are many and they only come from, from you and your own experience.

And, um, so I had to come back and, you know, rebuild my life and I got into psychoanalysis. , and , really sort of began this journey of like, well, what is real self care for me? , real self care for me. Going much slower in my next relationship. , taking a long time to come to motherhood. I was 38 and a half when I had my son.

, and, , building a, a professional career that is, um, Much more flexible and creative. I guess I, I kind of call myself a freelance psychiatrist in that I, you know, I,

Yael Schonbrun: I love that.

Pooja Lakshmin: residents at gw, but I do that, , as a clinical adjunct faculty, [00:17:00] I write for the New York Times. I do media on Instagram.

I am, , I founded a women's mental health community, Gemma. , so I kind of have all these different hats that I'm wearing . and that suits me, that suits my values, that suits my internal, , like my internal blueprint. , but I, it took me years to create that for myself.

Yael Schonbrun: Yeah. And I think that journey, Trying to seek out the answer to feel happier and working your damnedest to get there is such a common myth that we all fall prey to though, like if we check all the boxes, if we go to the right schools, if we marry the right partner, if we, you know, achieve things on the right timeline, that will feel good.

I had my own. , my book Work Parent Thrive, came out of my journey into feeling like, oh, once I get the right job, have a baby, you know, marry the right

partner. And if I do it on the right timeline, I'll feel great. And I also kind of had that reckoning, and I think that that's probably where a lot of self-help books come from because it is such a universal [00:18:00] experience.

We live with this omnipresent myth that if you do the right thing, you'll feel happy. And as you're saying, it doesn't work that way. Um, and in fact, that's sort of where. Distinguished pho self-care from real self-care. So I wonder if we can maybe have you talk through like what are the differentiators between pho self-care and real self-care?

Pooja Lakshmin: Is. Suppose self-care is a method. So it's like, you know, getting a massage, getting a mani-pedi, going on a juice cleanse. Um, real self-care is the internal principles. So in the book I lay out four principles of real self-care, setting boundaries and dealing with guilt, developing self-compassion for yourself, and talking to yourself with compassion, identifying your values and moving in the direction of your values.

And then understanding that this is actually power against systems of oppression. [00:19:00] So if we take the example, you know, kind of the universal example that I see in my practice all the time. I struggle with as well. It's like, you know, the woman who's super busy but finally works up the nerve to take, uh, an afternoon off from work and, and goes to get a massage and then spends the whole time on the massage table worried about her to-do list and ruminating.

And then she gets back to her desk and she's like, oh gosh, I got a make up for all of the emails that I missed and the productivity that I missed cuz I was gone for an hour. Um, and it's like, no, no, no, that's that. , that's not that it's not working because you just checked the method off, but you didn't apply any of those principles.

You didn't do the internal process of real self-care. And it's that internal process that actually allows you to have the method. And kind of going further, again, it's not about. So, so for some people it might be a great yoga class. Like yoga might actually be really soul nourishing. For other [00:20:00] people it might be, , you know, meditation or whatever it is, everyone's gonna have a different method.

But the process that gets you there is actually the thing. It's not external method. And because we skip that external method, that's why. Self-care right now as it's sold to us is foe because it's just like another thing on your to-do list that you feel bad about, that you never have a time to get to.

Um, and it doesn't actually feel like it's doing anything for you.

Yael Schonbrun: Yeah. And when I was reading that in your book, it like a light bulb went off for me because it, it has always driven since I became a parent. It has driven me crazy that whenever I express to a friend or colleague that I'm really stressed out that somebody might recommend me, you know? To go on a retreat and for me that would be so stressful because I would have to line up care for my kids and it would be so hard on my partner and it would be so expensive.

It'll be time away from work, which just D feels not that helpful to me. There are other [00:21:00] things that are more helpful, and I think it's really important to recognize that one person's self-care is not gonna work for another person. You have to really ask. What for you is value aligned and soul nourishing?

And it, it might different, it might be surprising, right? That the things that work for you might not really fit in with other peop other people's ideas of what self-care looks like.

Pooja Lakshmin: Yeah, I, that's such a great example. Um, and I have a couple things that I really, it reminds me of. So like, the first is that in real self-care, I, I actually talk about retreats and how they, um, are. A form of escape. Right. And it's not that escape is bad. We all need that every once in a while. Um, you know, I give the example of, I, I went to Eslan, which is that, you know, gorgeous retreat, very wbu retreat, un fixer.

And, um, this was a couple years ago and, you know, I was like very serious about my time there and like I had my journal and I was meditating and then, then there was this like [00:22:00] couple there that was like, oh, this is our vacation. We come here every, they were like in their sixties or seventies and they. We come here every year for, for vacation.

And I was like deeply offended. Um, even going on a retreat, you know, you come back and you still are in your regular life. And like, and the reason that, yes, it's an escape, but it doesn't work because the real self-care is in all the decisions in your daily life, right? Like that's where you have to do the actual work of making the hard choices.

And you know, I think. , you know, you could take that money and you could spend it on childcare and that would probably make more of a difference to your mental health than, um, running away for a week. Although, you know, the week away might be very beau pretty. It's a, again, it's like you have to know

what you really need, um, like you were talking about there and, and that require, the thing that that requires that women often don't have the luxury of is like, that requires the [00:23:00] time and the space to actually step back and look at your life and look at how you're spending your time and your energy and really thinking deeply and reflecting on like what's most important to me and.

You know, the other point that this brings up or reminds me of is I think when you're in that place of like burnout or, you know, just feeling lost, it's really easy to, to falsely believe that there's gonna be one choice or one decision that's gonna fix everything. When in reality, when you're in that hole, it's act, there's gonna be hundreds of decisions that you'll have to make to get out.

and, and to me that's actually not depressing, that's hopeful because that means that it, it doesn't all rely on the stakes are not so high. It's not just like one thing that's gonna fix everything. It's actually like you will have this path and this journey and each step will build on the [00:24:00] next. And you don't have to know the one answer or the one right thing.

You can just do the next small.

Yael Schonbrun: Oh, plus that's a frozen reference. No, but I

Pooja Lakshmin: Oh, I haven't seen it. My son still hasn't gotten into frozen yet, so I don't

Yael Schonbrun: Yeah. Just do the next right thing. But it's so true. I, I love that framing that it's a lot of small decisions that need to be thought about. And I wanna talk a little bit about. Uh, intervention, I guess I would call it, um, that you suggest, which is use pauses. And I, I wonder if you can maybe even give an example, because I think it can feel really overwhelming.

Right? Hundreds of decisions, but, and, and lots of time in reflection. It can feel like a, a big ask if you're feeling really underwater. , but as you're saying, if you just kind of break it down into small, minuscule bite size things that feel accessible to you wherever you're at, that can be a place to start.

And so I love the, this idea of using pauses.[00:25:00]

Pooja Lakshmin: I got that idea actually from it. So I talk about that where I'm talking about boundaries, right? And sort of your boundary is in your pause. Um, when I first started on the faculty at GW back in 2016, my mentor, Dr. Lisa

Catano, um, took me out to lunch and she was like, oh, my one piece of advice is, you know, don't answer your phone.

You know, let it go to voicemail. And that was like really mind blowing to me as, as a, after I just graduated residency and then back at that time, like, you know, we had the beepers, the pagers, like, um, and so it was like, oh my God, you, you know, you answered immediately. Um, but in that pause, you, you, you let it go to voicemail and, and that's your pause.

And then you listen and you see what the person wants. And then I, it was up to me to decide, you know, if it's the front desk that they have some paperwork they need me to sign, I can say, Hey, I'll take care of that at the end of the day on my way out. Or if it's a patient that needs a refill urgently, I can attend to it.

Right? And so it's in [00:26:00] the pause that you get to actually decide whether you say yes, whether you say no, or whether you negotiate. when you don't have the pause, you're just reacting and you're usually just saying yes, right? Because you just wanna swat it away. You wanna get it, you get it off your plate, don't wanna have to deal with it.

Um, and the pause feels uncomfortable if you've never done it before, because you'll have somebody on the other side of that email or the other side of the text that is, wait. , right? Um, and so you'll feel this anxiety and this sense of urgency, but your, your job is to learn to tolerate that. And, you know, just let yourself have that space before you respond.

And then you can actually think about whether the request works for you, whether it fits into your schedule, like what's being asked of.

Yael Schonbrun: and I love that you make clear that [00:27:00] self-care is not about feeling good all the time. In fact. , you say the pause is uncomfortable, and that's okay. We need to make space for that discomfort so that it, it's in the service of our values. It's so that we can reconnect our values and figure out what is the right choice for me and making space for being uncomfortable as you make that choice is a part of self-care.

So it self-care isn't all roses and sunshine and feel goods. It's actually allowing for discomfort so that you can make life alignment choices that work well for the kind of life that you wanna be building.

Pooja Lakshmin: Yeah. Yeah. And, and I think like inside of that, I love how you said that and like kind of threaded into that, what is so. . Um, what's maybe

a little bit provocative about it is that like you actually get to decide the life that you're building and it doesn't have to, like, there's no one answer to the right life.

Um, that it really is up to you and, and you know, your partner, if you have a partner, if you have a [00:28:00] right. Like, it's like you get to create it. Um, and that's what's I think, so kind of, to me, I find that more empowering as.

Yael Schonbrun: Yeah, totally. And you're such a great example of that because you hailed from this very straight and narrow path and here you are doing this very creative sort of off the traditional path kind of work. . We often think there's only one right way to do it.

And so people like you who are carving out new ways to be a psychiatrist out in the world contributing, , new ways to contribute to academia outside of the traditional pathways. I think it's so inspiring and just allows, you know, all of us watching to think in more creative outside of the box, ways that work better for us.

Debbie Sorensen: So one of the things that we grapple with here on psychologists off the clock is that we are trying to share with our listeners. Some interesting ideas that might be helpful to them. And we wanna bring you ideas from psychology that are interesting and [00:29:00] helpful and also grounded in research.

At least that's our hope, and we're trying to make it accessible and useful to everyone, but without oversimplifying it. But I think it's a challenge, right? I mean, I think there are some challenges to doing this. So for instance, I've gotten it wrong before, and I, I have an example actually on the podcast, which is that one time I talked a lot about a very popular sleep book and I mentioned it.

I talked about it in this episode. I didn't interview the author that time, but I, I talked about it and I mean, I, I knew about sleep, but I'm not really in the sleep research world, so I just sort of assumed that it was accurate. I found out after the fact, after we had aired the episode, that a lot of sleep researchers were very, very critical of this particular book.

That they thought some of the claims were overblown and that it wasn't actually true to the science. And I remember thinking, oh, I kind of, you know, I, I, I just [00:30:00] assumed that that book was, you know, it seemed legit to me. And,

and I'm sure there are some legit parts of it, but I think I was unaware of some of the criticism of that book.

Um, but I think there's some challenges in the field of psychology in general, and I'm really curious what the two of you think of that. Cause I, and I mean, to be honest, we're trying to do something really hard here, right? Like we're trying to understand humans and our brains and our behavior and our group behavior.

And I

think that this is so complicated.

Jill Stoddard: Yeah. And that knowledge evolves over time, right? Like science changes. I mean, the example that comes to mind for me is systematic desensitization was the end all be all treatment for phobias back in what, maybe the seventies and eighties and then, you know, as more research.

Was done, rigorous research was done. It really fell out of favor because we learned more. You know, the idea at that time, for people don't who don't know what it is, is people who had a phobia would be exposed to a [00:31:00] trigger. So if you're afraid of snakes, maybe you'd look at pictures of snakes or snakes, and then you'd be taught how to relax while looking at those things.

And the idea was that relaxation is a response that's incompatible with fear and over time. , was sort of replaced with more of an exposure base, . So our understanding of the way these mechanisms really work has evolved over time and newer technologies have taken the place of systematic desensitization.

And so I think that's something for all of us, whether we are therapists, scientists, consumers, is to re. That these things are constantly evolving. They're not static. And to kind of keep an eye toward, um, you know, what we've learned. And I think that's especially true for the people who make the discoveries.

I think sometimes, like you get so wedded to your we, whether you've made the discovery or you are a student of that discovery, right? If you've gone to graduate school and you've been taught the systematic des. Desensitization is the way to go. It can sometimes be hard to keep [00:32:00] up with the kind of more modern advances, and I think it's really important for us to do the, the work and the learning, both as practitioners and consumers to do our best to kind of stay on that, that cutting edge and to be open to the dances.

Yael Schonbrun: Yeah. I mean, and a couple of thoughts come to my mind. I mean, one is that I think we need to remember that most human phenomenon are inherently complex, and so, The cognitive bias that we have is to simplify everything cuz the world is so complicated and overwhelming and we wanna do that in psychology too.

Of course it makes perfect sense, but things are usually pretty complicated, so it's rarely the case that there is one right answer. It's almost never the case that there is a panacea. The other thing I wanted to highlight is that science isn't a truth that we discover it's a methodology, and that we're always, we're committed to the methodology of science, not to a particular answer.

And that's why what Jill said is so on point because it's [00:33:00] okay for us to change our answers. In fact, that's what science asks us to do. In an Adam Grant's recent book, think Again. He highlights this point over and over again. I think it's such a beautiful. An important argument to make that what we really need to do in the wellbeing industry and anywhere where we're looking to the scientific approach for answers is to be open to the process of always thinking.

Again. That's what makes us wise consumers of whatever is out there that we're using to better our lives.

Debbie Sorensen: I would imagine that a lot of our listeners have been to school in psychology and participated in psychology research, participated in conducting psychology. But also many of our listeners haven't, and I think there's some things that people should know. You know, we talk a lot about randomized control trials as the gold standard.

Um, but even within that, the best tools that we have aren't perfect. You know, it's like, who's your sample? What's the situation? Can you generalize this [00:34:00] beyond the study at hand? And I think often people do err on the side of generalizing things beyond the point where they're, that's really gonna be.

Applicable to everyone. I think there's also a, a lot of times in psychology there's a problem where it's hard to reproduce studies. Somebody finds something and then nobody else can replicate it later. Even classic studies that probably everyone's read about at some point or another, you know, later, sometimes they're criticized for some of the methods that were used.

And in psychology, we talk about the file drawer problem, which is how they really, you know, what makes it into a peer reviewed journal is.

A finding where there's a result that looks interesting and you know, what, what you would call a significant result or something that looks like, oh, there's an effect here. Well, think of all the ones

that

Jill Stoddard: been supported.

Debbie Sorensen: the hypothesis support a bit, a lot of null results where it's like, oh, you know, we didn't find what we're looking for here.

They don't get published, so you know, [00:35:00] they go into somebody's file somewhere, but then it, that makes it look like. The studies that are published are the be all, end all,

Yael Schonbrun: and are the correct answer, right? When there's other evidence to the contrary, it just hasn't been published.

Debbie Sorensen: it's not

Jill Stoddard: Right people. And, and, and there's the, there's the problem with journals not publishing null results. There's also the problem of researchers not publishing results that don't support what they want to find. As an example, the pharmaceutical industry is sort of known for highlighting results that are going to be more likely to result in the purchase of their drugs, their medications. And, you know, we're we, we are not necessarily privy to the entire story.

Yael Schonbrun: And I think the same problem can happen in media. Media picks up from science, from, from researchers that are putting out interesting research and they pick out the most provocative or startling findings. Um, and the null findings or the, the findings that are more likely to end up [00:36:00] in a researcher's file or are tend to be less interesting.

So those aren't the ones that get out to the, you know, mass audiences and. That's a problem too, because the, you know, if you're not in academia, then you're really getting a very skewed sampling of what research is being conducted. It's not the full story by a long stretch. And in fact, you know, media will sometimes take a finding and, and make it even more clickbaity, which really can be quite misleading.

Jill Stoddard: It's also incredible. Some things once they've been reported are really difficult to undo. So I have, I have two examples. So there's the ego depletion theory that essentially says like we start the day with a full gas tank.

So if we're trying to change behavior, quit smoking, or quit drinking or something like that, it's easier at the beginning of the day and we sort of lose steam. So as we have to like make decisions and do more things, kind of our gas tank empties, and at the end of the day it's like harder to have willpower essentially.

And that [00:37:00] I still see that everywhere that is touted as kind of being. True, the end all be all. Um, and I think Carol Dweck and others have done kind of more nuanced research investigating that and have brought that theory into question and yet it like really sticks.

And the other is there was research done on hormone replacement therapy that, you know, the Today Show and all, going back to what you were saying y about the media, all these media outlets pick this up basically saying it's. Bad and you're gonna get cancer and it's awful. And it was much, much, much more complicated than that.

And then there were all these women, you know, for decades essentially, who stopped using hormone replacement therapy. And there's actually a great podcast that came out recently that I'll put in the show notes. So for anyone who's specifically interested in menopause and hormone replacement therapy and the science behind it, um, we'll go ahead and put that in the show notes cuz it's a great example of how science can be mistaken.

Um, and how it is, [00:38:00] how it is more complex than is often reported when they kind of like land on one finding to the exclusion. They're not telling the whole story basically.

Yael Schonbrun: I'll share another example of a book that I just read, which is Against Empathy by Paul Bloom And Against Empathy is a really provocative title, and I think, uh, f I know for sure I have bought Hook, line and Synchron to the idea that empathy is an unadulterated good. Like we want more empathy, good for relationships, good for society, good for parenting, good for all the things, but he makes a pretty interesting.

and in some ways compelling and I'll, I'll, I'll say a bit more about some of the nuance here, but he makes a compelling argument to be skeptical about buying into empathy as an an, as an unadulterated good hook, line and sinker, and to

have more nuance. What I thought was interesting though, because I, I really did think that he, um, very cleverly caused me to question.

Empathy in, in some ways was that it almost seemed like an overcorrection. And to some extent I think that can [00:39:00] happen too, is sometimes when we're, we have a tendency to kind of throw the baby out with the bathwater to take down something that we really previously believed and that there's a tendency to kind of swing from one side to the other.

Oh, well it's not true, so it must be totally false. And I'll just come back to the point again where I think almost all human phenomena are. Extremely complicated and that the answer is not, is it true or is it false, but more how, what parts are true, what parts are useful, and what parts should we have more skepticism about and how can we use scientific methodology to really disentangle the answers to that?

Those kinds of questions to be able to complexify our thinking rather than aiming to come to a conclusion of like, is this true or false?

Debbie Sorensen: You know that tossing the baby out with the bathwater thing. I think we see that a lot in the world of therapy and clinical psychology, because people will often buy into one school of thought and then completely critique and dismiss every other school of thought. And it's like that old, you [00:40:00] know, that quote from Alice Wonderland, where the dodo bird says everybody has won and all must have prizes. So sometimes it feels like that everyone wants their prize. Like I'm right. I have the therapy here that works the best. You know, every other therapy is like, Bad and wrong and not a good approach when in fact, you know, most therapies are not that different in terms of effectiveness.

I mean, as long as it's like a reasonable, legitimate form of therapy that the therapist, you know, finds helpful and the client finds helpful, the, the differences aren't that huge in the research. Um, and yet people really start it like they won't even consider the possibility that some of the other therapies might have something to offer that could help.

Jill Stoddard: Right. And, and that research shows that the most important factor is the relationship, the working alliance between, I think it accounts for like 30% of the variants and treatment outcome.

Yael Schonbrun: Yeah. It's like these common factors and common factors have been studied to be helpful in making therapy [00:41:00] effective regardless of this specific modality.

Debbie Sorensen: That's.

Jill Stoddard: to what you were saying before about there not being a panacea, you know, even the very best, most well-researched, empirically supported therapies, you know, are, are somewhere or anywhere from like 30 to 75% effective depending on the treatment. And what's it? What it's for. But the bottom line is like, we have not found an answer, right?

Like we just haven't. And so to stand in a place that's like my therapy is the best therapy and it's better than your therapy really is, is silly.

Debbie Sorensen: Yeah. So all of these things are really about how people build a career off of taking a strong point of view and sometimes that actually leads people to even exaggerating their research findings.

Yael Schonbrun: Yes. Sometimes scientists are largely good. I would argue. But I think sometimes scientists can behave very badly, and I actually have a personal experience with this. So early in my career I [00:42:00] was deep into couples research, but specifically looking at couples treatments for substance use disorders, something called behavioral couples therapy for substance use disorders.

And there was A couple of really prominent scientists who were doing this work and who I was sort of following in their footsteps and building on their work. And I was right in the middle of submitting a grant to N I H that would have let me be promoted from postdoc to faculty when one of the main researchers, and I'll share his name cuz it's a fascinating story and it's in the public domain.

His name was William Fall Stewart. I never actually met him personally, but I had corresponded with him, , over email and knew a lot of his co. So the story is that he was originally accused of misconduct, fabricating DA data in federally funded studies, and then he was acquitted.

But after he was acquitted, he went back and he sued the state of New York for damages. And then in the hearing, , after he sued New York, it was discovered that the testimony that had [00:43:00] been given in the original testimony in the, When the original allegations for fabricating data had come about in that testimony, he had actually hired actors who didn't know that they were in a federal trial.

He allegedly told them that it was a mock trial to state that the data was not fabricated, that the consent forms, the number of consent forms that they had

was legit. And a week after he was arrested for grand larceny, for perjury, for identity theft, for falsifying records. He was found dead in his home.

So this is a pretty crazy story and one that had a pretty intense impact on my own research career because it cast out as it should on the efficacy of this treatment. So here was this one scientist behaving very badly, but there was a number of other scientists, Barbara McCrady, tim O'Farrell and, and others who were doing similar research on couples treatments for substance use disorders.

That that was, um, that was looked into very carefully because of the doubt that was cast through the work of Bill Falls Stewart and their data and [00:44:00] findings were found to be totally valid, but it sort of was this real moment of questioning of research and the process. in this particular treatment, and I actually think it was handled well because people came and they were skeptical using the scientific methodology, questioning the, the sort of outcome of the finding, but using the methodology to really look into like, does this treatment have validity?

Does it work? Given that some of the research, uh, looks like it came out of a lab from a scientist that was behaving badly. So it does happen that scientists behave badly. But again, the process, the scientific methodology and the ability to be skeptical of one another's findings and to look really carefully at how the data was collected, how the research was done, um, is really an important part of how science moves forward.

Debbie Sorensen: Wow, that's quite a

Jill Stoddard: I that it is quite a story. I mean, it's like, it's unbelievable. And you know, we were talking before we started recording that each [00:45:00] of us have had one or two experiences, you know, of, of knowing. Knowing stories about scientists behaving badly or personal experience around scientists behaving badly.

And you know, I think it just goes to show that anytime someone has an incentive, you know, and academia is very competitive. Um, and so in academia where people are doing science, there are incentives around, you know, promotion and tenure, uh, and getting grants, right?

And then in the. Wellness guru type industry. It's about money and about followers and, you know, marketing. And, you know, all of this is just to say that I think it's important to be to,

to, we need to be vigilant, like, to be skeptical, to be vigilant, like not to dismiss science. That is not the argument at all.

And most scientists do not behave badly. Right. And are like doing this for the right reasons and the advancement of knowledge of course, but that it really is our job. To do our due diligence and at the end of the [00:46:00] day, like we are the experts on our own experience, right? .

Like nothing that we learn from science is ever gonna be a one size fits all. And, and the type of even really good science doesn't often look really at individual differences. And we're all different. We have different learning histories and cultural backgrounds and social backgrounds and, you know, so, so I think really relying on your own personal experience is important.

Yael Schonbrun: And at the same time, being aware that one of the things that science has taught as well is that we are all biased, right? We all have a tendency to take in data, to take in new information, to take in treatments, in particular ways that are influenced sometimes at totally outside of our conscious awareness.

And so, Again, I think just like complexifying sort of being open, like being open to data from inside, being open to data from outside, and being aware that we sometimes get tugged in different directions outside of our awareness. Um, and so, you know, always being willing to [00:47:00] kind of think again and be, be, be a little skeptical.

Debbie Sorensen: , so we're moving now I think, into talking about like, what can you do, right? So I think using your own personal experience to, to be aware of, you know, Is this gonna work for me or not? I think using that critical eye that Yael is talking about is really important.

Like, I think that it's very important to exercise some critical thinking around some of this and to be aware of these kinds of things going on. And, and Pseudoscientific claims we, I read this really interesting study about, Actually, people can be vulnerable to pseudoscience if they trust in science, which in general, I mean, I trust in science.

I think it's generally good to trust that, you know, science matters and that people need to research things to know what's really effective and what's not effective. But that actually, if people trust science without doing that critical thinking piece of it, that can [00:48:00] make them more vulnerable to pseudoscientific claims.

Right. So you read that. That one statement like, oh, if you take my online course, you'll be 500 times more efficient than if you don't. And it's like you should ask yourself, wait, does that seem reasonable? Can I see some data to support that? I think that. When people do that, the same study makes the conclusion that when people actually take the time to do that critical evaluation, then they're less vulnerable to pseudoscience.

And so I think that's the piece that, to me, that's really kind of the take home message I wanted to, to put out into the world is, there's a lot of people out there online these days who are making claims. It's our job to, to just be aware of it and you know, if you're looking at some sciencey jargon, but it doesn't quite make sense, just be aware that that might be more of a marketing thing.

I think that goes a long way.

Jill Stoddard: Sounds like some [00:49:00] of the other things we've said too are, if it seems too good to be true, it probably is. Um, and see, and, and what you're saying, Debbie is like, but see, maybe there are data to support the claim, find out. I would also, I would also, look at the source. You know, is somebody claiming to know a, like what is this person's background?

Do they have a background in psychology or science, or are they just somebody who are like a self-proclaimed guru using their own knowledge and wisdom, which isn't necessarily a definite no-no, but it's, I think it's one of the things to look at. Do, how do they stand to gain or benefit? You know, is someone really gonna make a lot of money?

Like what is the, is there, is there agenda? Like looking at like who it's coming from in terms of how expert they are, but also like what is it that they stand to gain by trying to sell this information? You know, if it's a, if it's a free podcast or

Yael Schonbrun: if it's a free podcast called Psychologists Off the Clock, you can trust it [00:50:00]

Debbie Sorensen: Yes, clearly

Jill Stoddard: well,

Yael Schonbrun: but.

Jill Stoddard: a way that's sort of true.

Yael Schonbrun: Yeah, but I do think, so one of my red flags is if somebody has trademarked a treatment that has their name embedded in it, don't trust in it. Like if it's the Yael method, don't buy it. Trademark symbol.

Debbie Sorensen: tuned for the Yael \$50 a week.

Jill Stoddard: If you're hiring someone for money, ask what the deliverables are gonna be. Like, what, what promises are they making and what can they follow through on? You know, like I, I actually paid a lot of money to kind of a, like, book launch coach type person where I got nothing more than I could have gotten from a, a free podcast.

there were, there were ways to get the same information for free, and unfortunately, I paid for it. And part of the problem was I didn't do my due diligence and I didn't ask enough questions. You know, there, there weren't really data, there wasn't really science. But anyway, you get, you get [00:51:00] the point.

Yael Schonbrun: One of my favorite tips, and I said this earlier but I'll just come back to it, is to remember that science isn't an answer. It's a method of looking at answers. So this is sort of like a process versus outcome shift. , and because things are really rarely. Cut and dry and set in stone, at least when it comes to our wellbeing.

And answers often change or develop new nuance as we learn more. So hold solutions lightly, but fall back on the scientific method of being skeptical and curious and curious about the data, both that's coming from science, but also the data of your own experience and self-knowledge.

, and, and again, remember that it's, it's a process. , you know, answers are are not gonna be black or white, and they're not gonna be unchanging.

Debbie Sorensen: I think it is tricky in our field, right? Like when we come bring an episode on the podcast, we're always kind of trying to just make sure it's reasonable advice and that it's more helpful than harmful, but it's, again, it's complicated. But one of the things I like [00:52:00] to do is when I pick up a book, a self-help book or a psychology book, is to kind of take a glance at the re.

Section and just see, you know, are they citing studies? Are they looking at the research? Are they keeping up with it? And yes, the research changes, right? So something we believe 10 years ago may have been sort of debunked in the

research. I'm not saying that it's. You know, proven forever if it's in a study one day.

But I also think that it's important that people who are experts on topics are kind of paying attention to the research. So at least they know that, oh, if this is really off the mark, you know, they're, they're gonna have some sense of what's going on in the research.

Jill Stoddard: and Debbie, you had. Earlier about, you know, do these findings, can we really say these findings generalize? So, you know, one thing might be asking the question. So even if we have science, so let's say we have science around heart disease, one [00:53:00] question. A female consumer might ask a doctor is, is this true for women?

You know, do you know if there are data? Because most of what we know about heart disease and heart attacks and interventions were based on studies done on men many years ago, right? So, like even asking questions around, you know, this is an empirically supported therapy. Do you know anything about whether this research has been done on people like me?

If I'm a person of color, if I'm a, a person from an L G B T Q, or other marginalized community, what can you tell me about whether this will be effective for me? You know, it's always good to ask. Questions because even when there are good data, it's not necessarily data that applies to every single person, especially if the studies are old.

I mean, now we do a much better job of making sure we recruit diverse samples, more representative samples. But you know, a lot of research is, is old, and especially in medicine, it's old and was done predominantly on white men.

Yael Schonbrun: Well, and a lot of wellbeing research still takes [00:54:00] place on college campuses just because those are the easiest participants to recruit. And that remains, it remains a challenge for the field of psychology and social science in general. Um, but I think it is something that the field attempts to create a, a place where more generalizable findings can be.

Debbie Sorensen: So one more thing I wanna say, and this is actually, this could probably be its very own episode. Um, but

Yael Schonbrun: stay tuned.

Debbie Sorensen: so yeah, maybe someday, but I think it's important to be aware of biases, of our tendency to wanna oversimplify or find a quick fix solution to things, but also to be aware that we tend to be a little bit suggestible.

There's this really fascinating psychology research. Again, it could be on its whole episode of its own on suggestibility and how sometimes we can be easily influenced in ways that are problematic. We can start to believe things and then dismiss everything that goes against what. Believed to be true.

And there are some really dark examples of this in the [00:55:00] history of psychology. I think there was a period of time where people had these false memories of things that they really believed were happening. Things like satanic cults and childhood sexual abuse that were really turned out to be based on suggestibility.

I mean, you know. . Unfortunately, sometimes those things were honestly implanted by therapists who were doing something that they thought was helpful at the time, but it was kind of a fad in the eighties. Eighties into the nineties, and it was very harmful for people. But I think the good news about this is that if you're aware of these kinds of biases, if you're aware of how we can be suggestible, it can actually just keep you a little bit more savvy.

You know, if.

Jill Stoddard: Is that gonna make me stop buying things on Instagram because there's a bathing suit that keeps getting shown to me over and over and over, and I'm feeling very suggestible and I'm not really sure how to fight it and not buy the dumb bathing.

Debbie Sorensen: I mean, so advertisers know how to utilize our [00:56:00] suggestibility,

Yael Schonbrun: do, and repeated

Jill Stoddard: Yeah.

Yael Schonbrun: is one of the ways. But Debbie, to your point, they're, they're now doing really interesting, interventions with students about consuming media, like political news, information, and. Teaching kids to be aware of their biases and of the, their tendency to , take in information in particular ways, particularly if it's cited to believe in it more, and to adopt a more questioning attitude as they consume media.

And that does help people to, end up with a more accurate read of what's going on out in the world. So it is helpful to be aware of the bias.

Debbie Sorensen: and I mean, at its extreme versions, you know, it can help you. Stay safe from charlatans and gurus and cult leaders and people who are trying to get people to stop doing critical thinking, you know, because they gain from it. They get a following, or they get people to, you know, Pay them or whatever the case may be.

And so I think it's, you know, it's kind of a way [00:57:00] to protect yourself is to just be very aware of it and be on the lookout for it in your own life. So whether it's advertising or something more serious, I think it's all this idea of just knowing that possibility and, and being, well, buy or beware, right?

Yael Schonbrun: Beware . Can I just share one, one final thing. I tried to write a piece about this and this particular part ended up hitting the cutting room floor, but it was an article written by Sigmund Freud about the merits of cocaine , and he just like went on and on about how wonderful cocaine was and how he had prescribed it to a friend and had solved his friend's, you know, all their dilemmas as well.

And it was really convincing. If you didn't know much about what cocaine actually does, and he really believed it and he was, you know, this physician who had good standing in the community and had a really lovely way with words and he had gave historical examples and his own personal anecdotes.

And so I think. again, you know, it's not just the source, it's not just that it comes from science. It, it's not just sort of what you wanna hear, but it's the, it's zooming out [00:58:00] and being curious and putting things into context and having a little questioning as you consider the baiting suit or the cocaine or whatever else you're considering adapting into your wellbeing or, or sort of wellness routines, um, and just making that kind of a part of your practice.

So there's so much to think about and you know, if you're listening to this podcast, you're probably interested in wellness. So we're curious for you, what have been the most useful ways that you've, , engaged a buyer beware attitude about, , wellbeing ideas or practices or, or goods that have been, presented to you and what have been helpful tips for you to, to maintain a buyer beware attitude.

Jill Stoddard: Yeah, we'd love to hear from you on social media. We're on Twitter, Instagram, and Facebook,

Yael Schonbrun: Hey, psychologists, off the clock listeners, I'm gonna guess that if you got to the end of this episode that you also love to geek out about books in psychology.

Michael Herold: If you don't know where to store all your books and people are already [00:59:00] complaining that you talk about this book that you're reading all the time, then why don't you join us once a.

To read a book together.

Yael Schonbrun: If you're interested in joining us, we hope you are. Just send an email to off the clock psych gmail.com and we'll send you more information.

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