

Shrink Rap Radio #440, January 29, 2015, Mindfulness & Self-Compassion as Tools for Shifting Out of Depression

David Van Nuys, Ph.D., aka “Dr. Dave” interviews Elisha Goldstein, Ph.D.

(transcribed from www.ShrinkRapRadio.com by Mariana Naldi)

Introduction: On today’s show I’ll be speaking with return guest, Dr. Elisha Goldstein, about his new book *Uncovering Happiness: Overcoming Depression with Mindfulness and Self-Compassion*. For more information about Dr. Elisha Goldstein, please see our show notes on Shrinkrapradio.com. Now, here’s the interview.

Dr. Dave: Dr. Elisha Goldstein, welcome back to Shrink Rap Radio.

Elisha Goldstein: So great to be here again, especially with you, David.

Dr. Dave: Well, thank you and it’s great to have you back on. I’m really pleased to have you on the show again. Our first interview was back in 2008 on mindfulness-based stress reduction. And I think you were kind of just starting to get rolling then and your career has really been taking off. So then in 2012 we talked about your book *The Now Effect*. And today we are going to discuss about your latest book, which I believe just came out, *Uncovering Happiness: Overcoming Depression with Mindfulness and Self-Compassion*. You have been a busy fellow.

Elisha Goldstein: Oh yeah, well, you know when it’s a passion it’s a—you really put your mind to it. But it’s hard at times, but it’s great. It’s really rewarding.

Dr. Dave: And am I right that this latest book just came out very recently?

Elisha Goldstein: Just came out. Yeah. It’s just arriving right now. So, hot off the presses. It’s already been featured in “Good Morning America.” It’s been featured in the lead story of “Parade” magazine and many other places like that. I think it’s really finding the group of people who are really needing it and wanting it and taking it in.

Dr. Dave: Oh that’s great. I’m glad to hear that you are getting lots of good press and hopefully this contribution will add to that. Now something I recall from our previous interviews is that you know something about depression yourself, beyond your training as a psychologist, because in fact there was a period before you became a psychologist, in which your life was going off the rails. And I know you’ve covered that and you cover it in your book, but maybe for new listeners you can take us through some of that background again.

Elisha Goldstein: You know it’s interesting. I actually think people like people like me. There’s a, you know, the statistic is there’s 25 million people in America who struggle with depression and there’s 350 million people worldwide, but that being a very small statistic only because, the way I see it anyway, because it’s, this is something that’s so shrouded in shame that many people don’t talk about it. They aren’t willing to even confess to it and so I think the numbers are even

much larger than that. Even though that's a giant number, the number one cause of disability in our corporate culture being depression. But, for me, you know, I think you're talking about a time where I was in my kind of early to mid-20's. And if I look back, and I can, and if I look back, you know, depression was really some degree there for me earlier on, more around the ages of six or seven. Around that time I was an incredibly angry kid. I was lashing out, everyone would... I was that willful kid that had his arms crossed and this face in a frown. And now I look back on that time and there was some, there was definitely some of that there. And with kids it comes out as anger and irritability, less as like isolation as much. That's also there at times, but more in that way. And then when I was writing, I'll never forget when I was, so that early 20's, that time, early 20's, mid-20's, was the deepest darkest time. There's periods that were the deepest darkest time in my life. It's very clear. Easy to point out for me that that was that where I was working hard in the corporate world. I was successful. And because of that, here's like a little mask of depression, because of that, if you're successful and things seem to be going okay, it's even more reason to deny something that's there. And because as long as I'm doing okay in some way then I don't need to really look at this. But, I was abusing my mind and body—

Dr. Dave: Or if you're using money as a measure for example—

Elisha Goldstein: Yeah.

Dr. Dave: It sounds like you had a good income and so that could lead you to believe well, there's no problem with me.

Elisha Goldstein: That's right. And the fascinating thing, Dave, is that the, for me, I had never been the best at anything. And when I found my place in this kind of like sales world, selling, I was selling telecom to businesses, business to business in the corporate world. At first it was just long-distance because back then there wasn't really internet as much.

Dr. Dave: Yeah.

Elisha Goldstein: And I was like, I was up there with like the best in this company. And you would think that that would be, awww, that would be source of just genuine happiness in some way. And I think that really tells the story of how money really does not buy happiness. And so I was really lost and confused and so I was partying quite a bit. And one night I found myself in a broken down limousine with a guy that was really just a shadow of himself. And he was a guy that I had seen before in the night scene and told my friends that really if you ever catch me with this guy then you know I've hit rock bottom. And I really had. And I had a moment of awakening. I call that that "Ah ha moment," that's that "now effect." And where I said I don't have to treat myself this way. I'm worth more than this. I'm... you know, so that sense of unworthiness, I was working against that to some degree. That's that shame that's really there that's part-and-parcel with feeling depressed. And I picked myself up and it wasn't such a clean transition so much, but I went away to a retreat center for a month and really challenged everything I knew about life. And that's where I got introduced to this, one of the natural antidepressants that science is finding, right now, and what we're finding in our lives. That's where I really became in touch with mindfulness and this idea of intentionally paying attention to what's here. This idea of being aware with a sense of curiosity. It's an approach mindset instead

of an avoidance mindset, which is what depression really is. And there began my journey towards recognizing that really what I wanted to do was learn how to help myself and help other people live a life that was purposeful, meaningful, and genuinely be happy. And what I mean by that is not the passing pleasures that are there, but something that's a little bit deeper more enduring. No matter the waves that come, you know, there's this sense of competence internally, that I can handle it and things are going to be okay.

Dr. Dave: You know one of the things that I'm struck by is that when you were in the corporate world you were experiencing your own competence and success kind of for the first time, feeling like you were the best in the company. You were really good at something. You had a kind of energy and maybe sort of hard-charging kind of energy and it seems to me that that characteristic is still with you, but in a healthier way. You've channeled that charging horse into this other more helpful direction, both more helpful for you and helpful for those around you.

Elisha Goldstein: Yeah, you know that's, in some ways, that kind of learning mindset that's there that I think is also a key, you know, natural antidepressant that's there which is this idea of looking back on my life and saying hey what was—rather than kind of flogging myself, like oh how terrible—I mean there's certainly an emotional impact, even when I—I've done a lot of work around kind of reflecting back on that, on that time of my life and what was happening. And, you know being able to look back there and while, you know, to this day I still get a tinge as I talk about it, because it was really quite a painful time to be treating myself like that. But, I look back and I say, what really worked for me and what did not work for me there? What kind of drew me into that? That world? That life? And what was I doing and what helped lift me out of that. So in other words I'm kind of looking at it really with fresh eyes. And I'm trying to learn versus kind of rate myself that I was really performing really poorly in life in some way there. And you know saying, you know, what a jackass I was in some way, if I can say that on your show...

Dr. Dave: Yes, you can.

Elisha Goldstein: And so like reinforcing a sense of shame that's there instead I kind of look at it and see the wounding that was there and think. What did I learn from that experience? That's the fastest way to not only kind of get back on track, but actually kind of shore up and strengthen what's there. And also just to be kind of clear, when you look at the neuroscience of it, to have a kind of a sense of learning, to have a learning mindset and a sense of curiosity is the—one of the most effective ways to create neuroplasticity, to use our minds to change our brains. And so adopting that kind of mindset, and we can talk further about that because it's a really important topic, is key, is one of the keys to creating what I've called an antidepressant brain.

Dr. Dave: Oh good. That's kind of good news for me since doing this podcast series forces me in a way—

Elisha Goldstein: That's right.

Dr. Dave: To be continuously curious. Now, the other two books were very much about mindfulness as well and, but this newest book of yours, which is also about mindfulness, but it

has a very specific focus on depression. And so what motivated you to tackle the topic of depression?

Elisha Goldstein: Well, actually, let me say—I'll talk about all of that right now. Which is, for the past seven or eight years now I've been teaching about mindfulness and depression. I've been teaching and been very close and in touch with the group of guys that created mindfulness-based cognitive therapy, which is a wonderful program for helping people not relapse into depression. It's a program that teaches people how to create a mindfulness practice in their life, how to get some distance from their thoughts and relate to them differently, and even put into action, some kind of action plan that helps them in some way. It's a wonderful program, but what I learned through that is that mindfulness on its own, when it comes to depression, is not enough. It's not enough to just cultivate a balanced awareness when you've struggled with depression on and off throughout your life. Because the research shows that many people who have been struggling with depression off and on have a very low degree of self-compassion. Self-compassion is the notion of the understanding that I'm suffering right now. There's something in me that's a struggle, whether it's a stressor, whether I'm just feeling down, whether I just got some bad news, or whether I'm feeling shame or I'm worried about something, whether I'm fighting with my kids right now in this moment, or whether I'm worried about my ailing parent. There's something in this moment I'm suffering. I can kind of coin it together, that experience. And there's this inclination—so rather than flogging myself which happens oftentimes when we're starting to feel depressed and being self-critical—I'm inclining to support myself in this way. So that, that experience of understanding that I'm suffering with the inclination to want to support myself is very low. There's a very low degree of that with people that struggle with depression over time. So with mindfulness the idea is that what we should do is we should kind of hold this intentional awareness of what's here and be with the experience that's here. And implicitly what will arise from that is this notion of compassion towards myself. But, what I've found is that that's not necessarily the case. People who have struggled with depression off and on over time, sometimes really need scaffolding. In other words, they need skills, to learn skills to shore up, to increase their self-compassion quotient so that then it can implicitly arise after that. And that's been really helpful. So when I've been leading these classes, I've seen people really drawn to this idea of self-compassion and the skill set of it. And really wanting it as if there's a hunger for it in some way. And I've seen the transformations from being able to cultivate the sense of being kind towards ourselves in the midst of something that's difficult. So the mindfulness and self-compassion, you know, those two, as I talk about in *Uncovering Happiness*, are the...kind of the two wings of the bird that allow us to fly. They're the fundamental natural antidepressants that are there, but on their own there's more. So, again, mindfulness on its own is not enough. So while you might—I say in the first book, a mindfulness based stress reduction workbook. We bring people through the MBSR program which is just such a popular and amazing program that's out there. In the *Now Effect* again, I'm deepening people's experience into mindfulness in an easier, kind of digestible way and then also you'll notice there's a section in there called "Priming Your Mind For Good." I'm already starting to weave in this kind of positive psychology notion of like well maybe we also need to encourage what's good here. Let's start to do that. In this book, I bring that to a whole different level. Which I'm really kind of diving down into the science and practice of yes, there's mindfulness. We need to be aware of our, and we'll talk about this, the depressive loop and the conditioning that's there and why depression is like a trauma, how to reverse the bad habits that fuel that depression loop, how to fundamentally

become aware of depression and what the value and practice of that is, self-compassion—But then there's these other elements that are also equally as important if not entry points even more so than mindfulness and self-compassion when it comes to depression, like purpose, play, and developing a sense of mastery or confidence that comes through having a learning mindset. Those are all key natural antidepressants in the science.

Dr. Dave: Yeah, we're going to get into those as we go along. So, my original question was what motivated you to tackle the topic of depression and what I partly get from what you said, especially in the first part, it sounds like it was almost coming to you as you were working with people that—maybe depression was the thing that kept coming up. Am I right?

Elisha Goldstein: Yeah. I'm a psychologist and a mindfulness teacher. That was just a really, in some ways was a really natural fit. The main program that was out there, aside from mindfulness-based stress reduction, was a program around mindfulness and depression. And in my whole—I have depression off and on, as many people do, all throughout our families and so it wasn't something in my personal life or within my family that's so foreign. And it felt really good getting a group of people inside of a room who all shared, to some degree, a common thread in their background. And the value of that, as you know, even in just being a therapist, the value of that is healing on its own, because of depression being such an experience of feeling so alone. Like, I'm alone, everyone's doing better than me type of idea. But, for people to come together in the group, and I've heard this over and over and over again, to say like God, just being in this group is powerful because no one ever talks about this stuff in public. And so the shame kind of melts away. And so I was really drawn to it, I think that's the—I was really drawn to it because it's something really powerful and it's very touching and meaningful in that work and working with mindfulness and depression.

Dr. Dave: Yeah, you mention family dynamics and I also have that thread running through my family and through my own life. So, this topic is of personal interest as well. Now, what audience did you have in mind as you were writing this book?

Elisha Goldstein: That's a really good question. The audience I had in mind were people that were feeling, that have experienced some form of depression in the past. And that could be major depression, that could be dysthymia, that low grade kind of experience of like ongoing discontent with life that's there, some people who identify as anxious maybe. But, how the anxiety kind of gets a hold of them and really bums them out in life, because they feel like am I ever going to get a hold of this. Like, anxiety is so overlaps with some kind of depressive experiences. People that have felt overwhelmed in life. Again the word depression is such a, for some people is very taboo a word. And so for people that have felt overwhelmed in life and felt like, you know, am I ever going to get out from under this overwhelm, I would describe that also as some form of feeling depressed. So there's a whole range. You know I mention in the introduction that depression has, you know, many faces. And you know we describe it, you can kind of describe it in the science as everywhere from the way pneumonia attacks the lungs, you know depression attacks the brain. You know in that way two kind of people who have allergies, where it's more of kind of a lighter ongoing, kind of off and on ongoing type of experience, but still frustrating and making you feel down none the less. So that whole range.

Dr. Dave: You know you mention the pneumonia example of pneumonia attacking the lungs and depression attacking the brain and I seem to recall reading that chronic depression actually can physical affect the brain in a way that can be seen. Is that right?

Elisha Goldstein: That's absolutely right. I mean, I think in this, what I tried to do, what I tried in my own kind of like experience with this has been to kind of look towards the neuroscience to some degree and say, what do we know about a brain that's been depressed over time or off and on over time? What do we know about a brain that's been actively depressed? And what I found was some very interesting findings, which was in a brain that's been actively depressed over time, you can see some real differences in the brain. For example, the prefrontal cortex, which you know, but many of the listeners this might be revealing to some degree or you might already know this, is involved with it's called executive function. It's what helps us to make our short-term decisions along with our long-term goals, involved with impulse control, all of this stuff, perspective. And so that area of the brain and some brains is even kind of shrunken a little bit. When in a depressed brain you'll see a lot of activity in the right prefrontal region. That's involved with kind of avoiding things in life and that's also involved in... So this is where people get confused and think I'm talking about right brain left brain. I'm not talking about right brain left brain. I'm saying right prefrontal area. So avoiding things in life also lights up when we're feeling negative emotions. The left side of the brain lights up when we're approaching things and also is involved with positive emotions, has been associated with resiliency. So, what that, those are a couple of different—the amygdala, which some people have called the fear circuit, it's really kind of the circuit that first takes in our senses and decides like is it safe or unsafe and then decides to disseminate more activity through the brain if it is, is inflamed if not actually enlarged in a depressed brain. And so we're looking at that like, what's the difference here? So, can we look to the brain to say, what things can help us reduce activity in the amygdala, create a left prefrontal shift. Also in the hippocampus the part of the brain that's right kind of behind the amygdala, is in charge of learning, memory, putting things in context in life. Meaning like when we're depressed in life, you can see people kind of crying just all over the place. There's no sense of the, the brain doesn't have a sense of the context where, as it would in other times in life, where it's appropriate to do that or not. And one thing that we know is when we look at a brain that's gone through PTSD or gone through chronic stress over time, you see almost... you see highly similar, a lot of similarities between those two brains. You see that same shrunken hippocampus, enlarged amygdala, or overactive anyway. You see a lot of right prefrontal shifting going on in the prefrontal area. So that tells me, just neurobiologically, depression is a trauma to the brain. And so when we would look at it that way, just like when we get bit by a dog, the trauma of that, and when you know, you can get bit by a Doberman. And then a Chihuahua comes around the corner the next day on a leash and your body flinches. Depression does the same thing. It creates this conditioned looping of thoughts, emotions, sensations, and behaviors that all get like strongly interconnected together. So all you need is a kind of neuro-firing that ignites one of these things in the loop and the rest of it just kind of fires up together. Kind of like a circle that has gasoline around it and you light you know one end of it and the rest of it kind of lights up immediately. Same type of idea there with that depressive loop. And so you can wake up one morning and just feel tired. You got a bad night's sleep. Or maybe you have kind of a string of kind of negative thoughts that happen in your mind. Or maybe your body's, maybe you're feeling kind of sad one day because grief is starting to arise again. Or maybe you ate a whole bag of potato chips or anything like that. But, any of those things that are associated with

that depression loop from the past will ignite the rest of it and all of a sudden we'll just experience the sense of just being depressed. And we'll say, where did this come from? How did I get to this place? Just like snap my fingers and now I'm kind of depressed. Where did this come from? Meanwhile there's been these little signs along the way that have been there that have been saying, that have been lighting up to say, yeah this is coming right now. And so we all have our personal depressive loops that are there. And helping to identify those, the different elements of them, helps us get a little space, ignites a little bit of mindfulness, helps us get a little space from them where we can get perspective, break that looping when it's happened, and be able to get some perspective on what might be the most adaptive thing to do in that moment.

Dr. Dave: Yeah, you know I like that idea of the loop. Well, I don't like the phenomenon, but the concept certainly is familiar to me personally and also I think I've thought of it more in conjunction with worrying, but I don't know how much separation there is between worrying and depression. I think there's probably a lot of overlap.

Elisha Goldstein: Sure, yeah, well especially if someone worries when they're depressed. So then worrying would be, could ignite the rest of the loop to happen.

Dr. Dave: Yeah. Yeah. So—

Elisha Goldstein: And worrying, by the way, is the brain's kind of number one way of avoiding what's here. You know, it's another kind of right prefrontal shift type of activity. Unless we're kind of intentionally, if we're intentionally worrying, if we're saying God, I have a lot to worry about. So this is where we bring mindfulness into this. I have a lot to worry about. I'm going to sit down, put down a piece of paper, I'm going to actively worry for 15 or 30 minutes. You might have done this or instructed people to do this in the past where you really kind of, it's more intentional. Because mindfulness is intentionally paying attention to something with a sense of curiosity. So I'm saying I'm going to intentionally worry for 15 minutes. That way when I'm practicing there's a sense of personal control which is the antithesis of feeling depressed or anxious. So I'm actively worrying. Now if we're kind of worrying on and off during the day, that's the brain's way of saying there's something uncomfortable here that I'm uncertain about or that I want to try and fix and problem-solve. And that gets us into this worrying place and if worrying is part of that depressive loop it's also going to start igniting other parts of it, other feelings, sensations and behaviors. It's going to kind of spiral us into this place. And as I say in *Uncovering Happiness*, I say you know, contrary to the brain's belief, life itself is not a problem to be solved. It's a constantly evolving experience to be lived. And so the brain is always trying to solve our experiences and in doing that it often times kind of ignites more of that avoidant-type of reactivity in the brain which is associated with depression.

Dr. Dave: Yeah, yeah. Somewhere along the way I learned for myself to recognize when I'm caught in that kind of loop and to realize it and to just kind of say stop. And that's been effective for me.

Elisha Goldstein: There you go. One of my favorite practices.

Dr. Dave: So, yeah yeah. So is this book just for those suffering from depression or is it also for psychotherapists who would be treating depression.

Elisha Goldstein: Oh absolutely. This, I mean, what, anybody who knows my work, in some ways knows that what's most important to me, I made this decision a very long time ago. I made this decision actually when I went to that retreat, a very long time ago, when I challenged everything. And I wasn't going to do anything. I made a decision not to really do anything in life unless it made sense to me, unless it had meaning to me, unless there was some kind of practical value that I understood. And so I think that's why, you know, as I moved into this, years ago as I moved into this kind of second phase of life or third phase of life, or wherever I'm at, and I started becoming a psychologist and doing this type of work, I wanted to make everything simple and practical and meaningful in our everyday lives. So anything, a lot of the stuff that I write is saying okay what's the science of this, what's the practical implications in our everyday life? In other words, how do we make happiness? And we can again get back to the definition of that. How do we create, how do we get a more enduring sense of kind of a meaningful well-being. How do we do that in our daily life? How do we make that come alive in our daily life? Basically kind of a how of happiness. How do we make that real in our daily life? So in this I give you know, some of the science behind it, which is really practical to any healthcare professional, as well as people who are not healthcare professionals, but and also practices that start to ignite these natural antidepressants, start to nurture them that anyone can use to work with their clients. And be able to kind of do that together, kind of collaborate together. So...

Dr. Dave: Yeah, you had a lot of good exercises and practices and I could even see, if you didn't mind, I could see a therapist actually even maybe making handouts from some of the pages as oh, here's something to do this coming week. And come back and we'll talk about it.

Elisha Goldstein: Yeah. Absolutely. Do you mind if I mention one of my favorite practices from the book?

Dr. Dave: I would love it if you would.

Elisha Goldstein: [laughs] Okay. There's a, you know one of the things that happens that many of your listeners may or may not have heard of, but the brain has this kind of tendency toward paying attention to what's negative in life. Rick Hansen does a beautiful job of paying attention to some of the research and science behind the negativity bias. And I explore it also within *Uncovering Happiness*. But the, you know, of course our brain is biased towards paying attention to what's negative because ultimately we're wired to survive and kind of populate, to some degree versus be happy. Because you can be happy and dead and you won't pass on your genes, so, that's kind of just the way we're wired. So our brain's going to pay more attention, negative stuff's going to be a little stickier than positive stuff. But, I make this claim right now that I feel like we're in the middle of kind of an evolutionary period within the human race. And it starts off with a small group of people and then it kind of expands, but where we're starting to understand how our brain works a little better, why it has this negative kind of bias in some way, and why it's important to then open it up a little bit more and nurture some of the good that's there in order to create a bit more balance that's there. And that's why I think self-compassion is so powerful for that, because you are inclining to support yourself instead of being self-critical.

So you are starting even in the, even because of the pain, you are nurturing a greater sense of resiliency. It's almost like you need the pain in order to nurture this resilience. Jalal Al Din and Rumi said "Don't turn your gaze away. Look towards the bandaged place. That's where the light enters." So one of the things that we know is that our negative thoughts are really powerful and we oftentimes identify with them, especially when we are caught in that kind of loop. I'm no good. Life is...I'll never amount to anything. Today is just gon'na be crappy all day long or any number of negative thoughts that's there. So, I love Byron Katie's four questions. Where she asks these four questions which I think kind of help give us a little more space, help us become a little more mindful of our thoughts to some degree. And these questions kind of go like this and I'll say this exercise, which I think is a really wonderful one that I've adapted from her work, and then I'll tell you the exercise that's about encouraging kind of more positive thoughts and confidence. So, the first exercise goes like this. It's just four simple questions. You have a negative thought, such as life is never going to...or I'm not good enough. How about that one. That's a pretty common one. I'm not good enough. So you ask yourself the question "Is that true?" And usually for someone whose pretty identified with the thought, the answer is yes. I'm not good enough. Then you ask yourself a question to kind of further give you a little space, which is "Is it absolutely true?" Is this thought, I'm not good, is it absolutely true? Can I say with 100% certainty in all the areas of my life that this is absolutely true? And usually that cracks open a little window that says, well, okay, that's not *absolutely* true, not 100% true. I can't say that with 100% certainty. And you say, okay so that gives you a little bit more objectivity in the thought for a moment. A little more space. And then you say, how does that thought make you feel? Again you're saying, now you're saying, let's start to tease out the depressive loop a little bit. How does that thought make you feel? What feeling is associated with that thought? And you say, well it makes me feel down, makes me feel...or anxious. It makes me feel...or heavy. You know, it makes me feel these different ways. And you might say to yourself then, so what would be here if that thought wasn't here? So if that thought wasn't here, how would I feel? What would be here? So, you are again, further objectifying the thought, getting more space from it. And a lot of people answer that question and say well then I'd feel lighter. No, no, there'd be more contentment. There'd be a greater sense of ease with me. I'd feel more confident. I'd have more motivation. So what we're trying to do is work on objectifying the thought and getting some space from it, getting some freedom from it. So those are those four questions. So, then I'd say, okay so how do you encourage positive thoughts then? So you're sort of—that helps you kind of tease out, get a little, disidentify a little bit more from the kind of negative thoughts, mindtraps. So how do you do the positive thoughts? How do you encourage this? So I say this is something that encourages positive neuroplasticity. Positive brain change. And so the neurons that will—these neurons will fire together, wire together, and create a little bit more resiliency. So you say, okay well think back into a time that was, and this is a wonderful exercise for any therapist or health care professional to work with their clients, think back to a time when it was a good moment. Something was going well. Maybe it was a sunny day and you were feeling relaxed. Or maybe you got really good feedback at work and you were feeling confident. Or maybe you were with your kids and you were playing and there was a sense of ease that was there. Or you know maybe it was a morning where you were sitting in bed just drinking your coffee or tea and you were just feeling kind of calm. So then you say, well what were you thinking during that time about yourself? And you know thoughts may come up like I am good enough. Life is good as it is. Or you know, things are okay. Or any number of these kind of more positive thoughts about yourself that do actually enter your mind at some points off and on in our

lives. And maybe the negative can be a little bit more often, but these absolutely enter our mind. So then we ask ourselves, okay is this thought I'm good enough, this is an example, is that true? And then what oftentimes is a quick snap comes and says no, that's not true. So, that's what often comes up, especially with someone whose suffered with depression on and off throughout their lives. Then you say, is it possible that it's true? Is there any possibility that I'm good enough? Is it true anywhere in my life that it's possible? And a person often says, well I guess it's a possibility that it's true. You see how I'm playing on this. It's opening that window a little bit. Then you say, well okay, if you step into that possibility, how does that make you feel? What feeling is associated with that, with that possibility? And two things happen here in my experience in doing this with many many many people, including myself. One is a resistance might come up because there's a fear of stepping into that possibility because if I believe that this is true and then I get caught off guard, then the bigger they are the harder they fall. And so there's a resistance that comes, meaning like I don't want to believe this. I don't want to step into the light here, you know in this way. And so then we can add some self-compassion in. This is a difficulty moment in life. There's difficult moments. Now how can I be kind to myself around this resistance right now? And for other people—and so we can massage that. And for other people, they step into it and there's this sense of expansion. This sense of lightness. This sense of contentment, joy that arises from that. So we start recognizing that feeling. And here's where the positive neuroplasticity comes in. The next question, the final question is, can you allow yourself to linger in that a few more moments? Because neurons that fire together wire together. So we're lingering in this space of possibility, this space of emotion that is associated with this positive thought that is possible. And so we are allowing ourselves to kind of linger into that in that moment. And so for a lot of people these four questions really do open up, crack open a sense of possibility that opens them up to seeing things differently in their life. And you can do that both ways, working with negative thoughts or working with positive thoughts. To encourage space from negative thoughts or to encourage more of a connection to a sense of lingering into that positive thought.

Dr. Dave: Yeah, I'm so glad that you shared those two exercises with us and it really reveals a kind of micro way that you kind of tease out, as you say, these different thoughts that can so subtly and so quickly, and usually even unconsciously, flit through our mind, this kind of negative loop that you talk about. And you're kind of breaking it down and, as you suggest, you're kind of creating a little bit of space from the negative and towards the positive. And your book is really chalk full of that kind of processing.

Elisha Goldstein: I mean, all stuff that I've found to be helpful towards myself or the people I've worked with or stuff that makes sense according to the science that's there too to start to kind of push those neurons to fire in a more balanced way. That create that, towards that sense of more of a resilient brain.

Dr. Dave: Yeah. Now one of the things that you advise is that people reverse bad habits and, of course, here we are in January, the time of New Year's resolutions that often are broken. What sorts of bad habits do you have in mind? And do you have specific advice or techniques that would help a person break those bad habits?

Elisha Goldstein: So, this is great. So, I've been teaching well before I even wrote this book, actually inspired by the beginnings of it, which it's taken me...you know, this book is a combination of three years of writing the book, but a decade of, you know, my own research and working with people. And what I've found is, breaking bad habits is really attractive to all of us. That comes from, when we talk about this depressive loop, one of those, two of those parts of that loop are thinking and behaving. Most of the time when we think of bad habits we think of our behaviors, like I'm not exercising enough, I'm procrastinating, I stress eat, you know all of these things we want to break. But, the number one bad habit that may surprise a lot of us is thinking, because before we get involved with any of those behavioral bad habits, our mental bad habits have to kind of kick in. I use the word "bad" even though we're trying to be kind of like nonjudgmental in some way. Bad is like the...kind of destructive to us in some way. Not working in our favor I guess. And the thoughts that come are thoughts that are thoughts that are kind of like the self-judgmental thoughts. The mind traps that are there that are doubting we can do something or always wanting more of something, something never good enough. So, I always need kind of more of something. These types of thoughts we need to kind of learn to get space from, and so that's what you and I had just talked about. So that's one bad habit. The next bad habit being the behavioral ones, which is the ones we mostly associate ourselves with. One way of working with kind of shifting out of bad habits, which again, the thinking and the behaving both work to fuel the depression loop. If we change some of our behavioral bad habits that can really make a strong impact on the depression loop that's there and also create a sense of resiliency. So that's why the very second section of uncovering happiness is all around...is all around kind of like breaking these bad habits that are there to help as a foundation to cultivating, to uncovering happiness. And so with the behavioral ones, I oftentimes think of it and say if my, let's say, my habit is stress-eating, let's say, which is a big one for a lot of us. I have to kind of explore that and say, what is it about the stress-eating that I'm getting out of this? Like in other words, not as a rhetorical thing as saying, well I'm not getting anything out of it. It's a terrible thing for me. But more as a real question, an intentional question to be curious about. That's that moment of mindfulness, to be curiously engaged with something and to say, what is it? And so for a lot of people, they might say, well I feel a sense of ease and I get stressed. I feel a sense of ease. It gives me a sense of relief. But for other people they might say, well I do it because when I dig down I really just want to be connecting with people. I know Charles Duhigg in *The Power of Habit* talks about this experience of his where he's eating cookies all day or during at lunchtime or I don't remember what time of day it was. But, really when he kind of dug down, he realized it was, what he really wanted to do was just be connecting with his friends. And once he did that he didn't have the craving for the cookie anymore. And so, we have to look at, what is underneath this? What am I really craving underneath it? It's not the cookie so much. But, is there something that I'm craving? Some sense of relief. Some sense of ease. Some sense of loving myself. Some sense of connection with other people. And when we get curious about that and look at it, we can then ask ourselves the question, okay, is there another way that I can get this? Is there another way I can get ease, relief, connection, you know these types of things. Is there another way that I can get this? And we can explore a variety of possibilities of doing that. So, for example, I was working with a woman who had a habit of going by a bakery every day. And every day she would buy a cake and she would eat the cake. And so, you know, she was obviously overweight. And the first step is never to tell someone—okay so now that you know for her, it was, she was, it was really kind of a relief from her stress that was there. She was really seeking kind of more ease. It was really filling her sense of insecurity as well. Like, she

didn't have to deal with that as much. And it's not to tell someone, okay, now that you know what it is, go ahead and do it. Go get the connection. Go find the ease. Here's some practices to play with. Go do this and let's see how you are with it. That's not ultimately very successful because in the moment when you are in the midst of the bad habit, you've kind of lost blood flow to your prefrontal cortex in some ways and you're being controlled more by your amygdala or emotional brain. And so you're not really totally in control. Dopamine is pushing your brain. That's the motivational chemical. You don't have the impulse control that's there and so you're really—it's not a real fair fight. And so what we want to do first is visualize. Visualization is a powerful technique to work with people and in our own lives. We know that visualizing can change the brain in the same way that actually doing an activity can do. That was a study out of Harvard, playing piano. I don't know if you remember that one? Dave?

Dr. Dave: Yeah, I think I do. The sense that the brain doesn't really know the difference between what's outside and inside in a certain kind of way.

Elisha Goldstein: Yes, so that was the idea of the—

Dr. Dave: Go ahead and tell us the study.

Elisha Goldstein: They brought students in to play a piano score over time for five days a week, I think for an hour at a time or something like that. And they measured their brain activity and what they showed. And they showed growth in their motor cortex, the part of their brain that is active when we're moving our bodies. Then they took another group and...so that's some neuroplasticity. That's interesting. Then they took another group in and they had them just visualize, imagine playing that score for the same amount of time and they showed the same activity and growth in their motor cortex. So, visualization is powerful. We see it in sports. We see it in corporate culture. We see it everywhere to kind of improve upon certain even kind of skills sets. Even if it's just physical skill sets. So with this, what we want to do is we want to uncover what the real need is for somebody. Then we want to have them visualize, engaging with that habit, whatever it is. Let's say in this case it's eating. And then let's say it's to find relief and ease in some way and someone says, well actually taking a walk would provide me with that space, that relief, that ease. Or calling my friend would do that. And so what we do is we have them visualize that stressful experience in the midst of being with the food that's there, not engaging with the food, and then choosing to do the other activity, whatever it is. And noticing the experience of that. And as they practice and repeat this visualization, they'll find that there's a sense, it gets easier and easier to do. And what's happening is you are creating some kind of memory inside your mind conditioning together the moment of wanting to be with the food or whatever it is and then choosing to do this other activity. That makes it just far more likely, you give yourself a much better chance of now that happening in your life because now you've created a memory of it. And memories are what mediate our brain's automatic decision-making. So your brain is reaching back into its history in the moment that there's food there and it's weighing it, what your memories are telling you to do. And it catches a memory there that says oh I have this other option. What may come to mind, what you may notice comes to mind in your real life is, oh I can choose to do this instead. Because I know what I'm really needing is relief from this. And this just kind of doesn't lead to where I want to go. And you are more likely

to actually choose that. And so that's a form of habit called kind of habit-reversal therapy that we can use, but the visualization part is—

Dr. Dave: Is there any “scientific evidence” to support that?

Elisha Goldstein: There is. There is science behind it. It's not, you don't want to use habit reversal to just change depression. There's no real science behind that. But, it works with the habits which, I think, kind of change the depression loop.

Dr. Dave: Uh-huh. Okay. You talk about five natural antidepressants in the brain. And so we know that there's a lot of concern about the abuse of antidepressants that come in the form of pills and so on. So maybe you can take us through the five natural antidepressants and I'm sure you have already to some extent, but just kind of call them out for us.

Elisha Goldstein: Okay. Absolutely. I think the last thing I want to tag onto that last piece, just to make this kind of easier for people as far as the habits are concerned, is that...it's important...The mindset you want to bring to this is kind of a mindset of experimentation. In other words, you don't want to have like the mindset of I'm going to try this out and if it doesn't work I failed. And look, nothing is helping me. I can't help myself (just encouraging kind of that depression loop). Instead you want to bring kind of that more mindful attitude of curiosity or that learning mindset of saying, you know I'm going to try something. And in life there's obstacles. So I might try this visualization and it may not work the first time. Or I might try it and it may work the first time. But what I want to do is this practice that I've adapted from mindfulness-based cognitive therapy, which is called forgive and invite, but I call it forgive, investigate, and invite. Which is when you fall off the path of doing this kind of work of breaking your bad habits or with anything that we're talking about today. That's the moment of just noticing. The moment you notice that is the moment you are waking up. And what you want to do is then investigate— So that's a moment to congratulate instead of a moment of self-criticism or self-loathing. What you want to do is investigate now, how did I get here, how did I get off track? Because that's the only way we're going to now learn and grow from this. That gives us kind of that leap up, is to investigate what brought us off track. What are the obstacles that were here? Was it certain mindsets? Or did I lose sight of things? Or was there stress that came up in my life that led me to this? Is there certain people in my life that I associate with that kind of lent, I tend to lend more kind of toward these bad habits? I investigate that and I say okay, so now that I've kind of learned from that, now in this present moment I can invite myself to begin again. That's how real change happens. If there's any secret to change, that's really it. Is to practice forgive, investigate, and invite, so we can learn from the obstacles and the waywardness that's inevitable in our life. And bring it back and incorporate it as I move forward again. And so there's a little piece to that breaking bad habits piece or to any of these natural antidepressants. That's the final, and so just segwaying into these natural antidepressants, that's actually the final and maybe the underlying thread natural antidepressant that's there that's involved with mastery. You want to really master something. You engage this learning mindset because that helps you get back on track to just get increasingly better and better at what you're doing. And that's how neuroplasticity kind of works because we start engaging it more and more. So the more neurons fire together more, they wire together more in that particular direction. So that's called a growth mindset. It helps us grow. That's a term that a woman from Stanford named Carol Dweck came up with. Versus a fixed

mindset which is oftentimes a mindset that hits us when we're feeling depressed, which is what I can and can't do. I'm unable to do anything outside of this box. And the research has found that, at least some of the research by Carol Dweck has found that students that have this growth mindset, just students because she did it with undergraduate students, of course, students who have this growth mindset are more likely to be resilient in the midst of a depressive episode than the ones who do not. SO underneath the growth mindset is this sense of being curious and teaching everything as a learning experience. So that's one of the very key natural antidepressants is this sense of having that learning mindset which creates confidence and is more in the direction towards mastery. So I'll let that be as a thread through there. Then the other core natural antidepressants that we're seeing in the science as well as just in our lives and working with people is mindfulness and self-compassion, which is what I mentioned before. Both of those create, well we'll say this...mindfulness and compassion both have been shown to create a left prefrontal shift in the brain which has been, again, more associated with approaching things in life and a sense of resiliency and positive emotions. I, even, although self-compassion is a newer...thing in the...newer kind of... I don't want to say it's a newer term, but it's newer in the field of science, meaning it's just starting to be researched and Kristin Knapp's doing a lot of great work with it among other people. But, you know, when something is newer, it takes a little bit to get grant money, to get neuroscience studies, to get, you know, this type of stuff. So we don't have as much of the neuroscience behind that, but we do, we do have some studies that we can kind of make a little leap and say, okay this is what we're imaging may be happening. But, ultimately, let me say this Dave, oftentimes science is there to confirm things we already know. And so...

Dr. Dave: I agree.

Elisha Goldstein: Yeah. So when I say self-compassion, this practice of kind of putting my hand on my body, my chest, or my stomach, is a way of approaching myself. I have to imagine that creates a left prefrontal shift. But, one thing I do know is that if I put my hand on my body when I'm suffering in some way, when kind of I have a lot of thinking going on, my body has to map the sensation of my hand in order for me to feel it. So, I'm lighting up certain parts of my brain that are inversely correlated with the part of my brain that's trying to analyze, figure out, and fix the issue that's here. Which is oftentimes involved with worrying, rehashing past events, or ruminating.

Dr. Dave: You know, just to highlight that, that's such a simple act of self-soothing, putting your hand on your body, but I never think to do it. But, just as you're saying it now, I'm putting my hand on my heart on my chest and I'm feeling something. Something positive just in doing that simple little act. But, it's the remembering to do these things is the trick.

Elisha Goldstein: And when you do it, like you're doing it right now and if everyone whose listening kind of does this right now, you're creating a memory of it, which your brain is more likely, you're giving yourself, the more you do it the more likely you are, is your brain to reference it. So the more likely it is to actually come up. And I say in *Uncovering Happiness* that if all you do is put your hand on your heart and wish yourself well, your time will be well spent. Because, you know, it's a way of kind of being kind to yourself. This is why this is a natural antidepressant. We know that in at least some of the science that's come out there, not the

neuroscience, but some of the research, we see that depression, I think, as I said before, is inversely correlated with self-compassion. Meaning people who struggle with depression over time have a very low sense of self-compassion. So if you raise self-compassion up, there's an inverse relationship, you're going to kind of bring those depressive tendencies down. And so we're kind of shoring up the skills of this kind of self-soothing techniques in the midst of difficulty. So mindfulness and self-compassion together create a really wonderful healing effect for us in the midst of a depressive loop or just in life during difficult moments in general, overwhelm or anything like that. They are two wonderful things to begin to put into practice. And then the other natural antidepressants, when I say mindfulness is not enough, we have this self-compassion piece and we have a sense of purpose. You go into any, and listeners may or may not identify with this, but you go into any AA or NA meeting, oftentimes people that have an addiction problem also struggle with comorbid depression or anxiety, these different things. I mean how can you not? You are abusing your mind and your body, like I was. Your mind and body. So you naturally are sending yourself the message, I'm not worth taking care of. Which is kind of a depressive message. And so the first thing that they say in any of those groups is go out and do something, like go volunteer somewhere and connect with a cause that's greater than your own. And depression is such a self-loathing type of experience and even anxiety is. And even when we're feeling overwhelmed with life, it's all about us. Our mind is spinning about our lives, what's wrong with us, how can we fix us, our family, our our our...and so what we need to do is fix that by getting involved with a cause that's greater than our own. Something that gives us a sense of connection with something greater than ourselves. That's one of the essence of purpose. And so in the book I bring people through kind of ways to start to uncover different things in their life that they may connect with that give them a sense of purpose. So compassion and purpose to me go hand in hand. Compassion is recognizing someone else's suffering with this inclination to want to support them. And so as we do that we know that creates that left prefrontal shift that calms the amygdala. We've seen that in the studies. And it just feels good because we feel more connected. We know connection, feeling connected makes us feel balanced. And when we feel balanced we feel happy. We feel disconnected we feel imbalanced, we feel imbalanced we feel unhappy. So we're moving towards connection as a path of being a natural antidepressant.

Dr. Dave: Is there maybe—go ahead.

Elisha Goldstein: You were going to say is there any what?

Dr. Dave: Yeah, I was going to ask if there's an example that comes to mind, maybe a case example of helping someone connect purpose that was having difficulty doing that.

Elisha Goldstein: Uh yeah. So I have a...I do this with lots of my clients that I see. So one client that I had, and I'll give you a case example that kind of does both of these things just in...which is the other antidepressant is play. Another one is play. That idea is getting involved with maybe more of purposeless activity that's there, but something that's engaging. Something that creates novelty. Something where there's a sense of freedom to it. And fun. And fun. So as adults we kind of, we kind of lose that sense of things. Both purpose and play are engaging. It's the opposite of how we feel when we are depressed. And so here's a client whose also kind of wayward and had a habit of kind of abusing her body with different barbiturates, sedatives, and

things like that. And like Vicodin. And she came to me and was really really lost. And I asked her to reach back, and this is just a trick to do as far as igniting a little play, I asked her to reach back into her childhood. And I asked her what was playful to you then? And she remembered going on, going to these ranches and helping take care of these horses and riding on the horses at times. And I asked her when was the last time she did anything like that? And she said it's just been a really long time, probably since then. And she said she did know someone in the area that had a ranch. And I had her, I just kind of took a leap of faith as a therapist and I had her call that person right then and there, and this is a story in the book, where she called that person and she got connected with her. And over time started developing a relationship and going there, assisting and being there. And so this woman did equine therapy, which is using horses as kind of a mediation towards kind of different...towards helping people heal. That's a whole different interview entirely.

Dr. Dave: Sure.

Elisha Goldstein: She felt some sense of connection and purpose in that she was helping other people. This woman went on to go back to school, to become a therapist, to become an equine, to go into equine-assisted psychotherapy. And she's engaging in this now. She went and got involved also in a mindful—a meditation center where she felt a greater sense of connection and purpose there too. But, I just received an email from her recently, just saying how well she's actually doing. How well this life that she never thought that she'd have. And so it was clearly a natural antidepressant. So for her, being with the horses was this sense of play. Because it was very connecting engaging and it brought a lightness to her. And then there was the purpose of actually doing her work in that direction too. And there's a whole slew of examples like that and just to kind of ignite people's ideas in that. And oftentimes we talk a purpose, when we've had depression in the past, our mind often goes to what we can't do in life. Well, I can't do that. I can't do this. What, go volunteer at a charity? I can't do that. SO what we want to do is, because that's just the way our mind works, so what we want to do is ask ourselves the question not what can't I do, but what can I do? Try and incline towards that direction. We know all the mind's going to say we can't do. So ask yourself, what can I do instead of what can't I do? This is also a wonderful technique to any therapist or anybody on the line can use with themselves. What can I do instead of what can't I do.

Dr. Dave: Boy, all I have to do is open the gate and let your horse out and run and we just get a ton of great information here. I'm thinking we've reached the point where probably we should begin to wind down, I mean there's so much more in your book that we could cover. But, what would you like to say, as kind of, to wrap things up here?

Elisha Goldstein: I would say that this, this what I've found here is a very practical and strong story of hope. This is...that we, when we often think of the word antidepressant, we think of you know a pill, which is fine and can be very supportive to a lot of people, but that's not the only kind of antidepressant. We now know and we're finding that we have these natural antidepressants within us. That when we intentionally practice and repeat and bring into our lives, actually create the neural change, that I would say not only really does create an antidepressant brain, but more so than that uncovers a deeper and more enduring core happiness that's there and for the taking within each and every one of us.

Dr. Dave: Well, that's a wonderful close. Dr. Elisha Goldstein, I want to thank you again for being my guest again on Shrink Rap Radio.

Elisha Goldstein: Yeah, really a pleasure. Wonderful to be here with you.