

[00:00:00] **John Moe:** The following is an encore presentation of an especially popular *Depresh Mode* episode originally airing in September of 2022.

[00:00:09] **Music:** Spirited acoustic guitar.

[00:00:17] **John Moe:** Yale University was founded in 1701. It's the third oldest institution of higher learning in the country, behind Harvard and William & Mary. In the 321-year history of Yale, the most popular class ever is called Psychology and the Good Life. Out of every single class ever at Yale, this is the one the most people have wanted to take. It's a class about happiness, designed and taught by Dr. Laurie Santos. She's a cognitive scientist, director of Yale's Comparative Cognition Laboratory, and director of Yale's Canine Cognition Center.

*(Music fades out.)*

The class started in 2018 and was hugely popular right out of the gate. So popular, Yale now offers the class online to anyone for free. And Laurie—Dr. Santos said I could call her Laurie—Laurie is a great professor, presents fascinating stuff in a clear, understandable way. But the popularity of the class is about more than her. It's about people being really, really hungry to find a way to be happier in the world today, especially college-aged students.

We are in a mental health crisis in this country, and young people are getting slammed particularly hard. And we're at a bit of a nexus point too, where there's a desperate desire for better mental health and a greater willingness than ever to speak out about that desire to pursue a better life. Things suck and we're talking about it more.

Like here! It's *Depresh Mode*. I'm John Moe. I'm glad you're here.

This class on happiness led to a podcast that Laurie hosts. It's called *The Happiness Lab*, and what impresses me about Laurie's work is that it's not cheerleading. It's not vapid platitudes of daffodils and rainbows. It's real information and insight, practical stuff on how to better position yourself, to feel better, to feel happier. I was happy to talk to her.

[00:02:22] **Music:** Fun acoustic guitar.

[00:02:34] **John Moe:** Dr. Laurie Santos, welcome to *Depresh Mode*.

[00:02:36] **Dr. Laurie Santos:** Thanks so much for having me on the show.

[00:02:38] **John Moe:** So, I host a show that talks a lot about depression, and you are a happiness expert. Do you think by the end of this interview we'll both feel kind of just okay?

[00:02:51] **Dr. Laurie Santos:** *(Laughs.)* Let's hope so. Let's hope we can bring, you know, the *Depresh Mode* folks up to just okay. And hopefully, I won't get too much of a hit myself.

[00:02:57] **John Moe:** *(Laughing.)* Yeah. Hopefully, we won't drag you down to where we are. So, happiness is a big word. It's a loaded word. It's a word with some ambiguity. When

we talk about *The Happiness Lab* and the work that you do on the subject of happiness, how best to define it? What's the most useful definition?

[00:03:18] **Dr. Laurie Santos:** Yeah. Well, I tend to be very nerdy, and that means I tend to use the definitions that social scientists use. So, often when social scientists think about happiness, they're thinking about what's often called subjective wellbeing. And that's kind of thinking about happiness in two ways. It's sort of being happy in your life and with your life.

So, being happy in your life is just, you know, how many positive emotions you have, right? Do you have joy? Do you have laughter? And do you have a decent ratio of those with negative emotions? Things like sadness and anger and so on. And it's worth noting that that doesn't mean you have zero negative emotions. It just means that you're kind of on balance, you know, experiencing a lot of positivity, right? That's kind of being happy in your life, but there's also a component of happiness that's about being happy with your life, right? All things considered, how satisfied are you with your life? Do you have meaning? Do you feel like your life is going somewhere? Do you have purpose? And my sense is that if you're achieving both of those two things, you're experiencing a life that at least a layperson might say is pretty happy.

And it's worth also noting that I think those things dissociate sometimes, right? Like there's a lot of people who are, you know, happy, you know, in their life. You know, they have all the hedonic pleasures; they're super rich, taking first class, and blah, blah, blah. And then, you know, in practice they really feel like with their life they're not super happy. Right? And I think you can get the opposite too, right? You know, have a friend of mine just had a new baby. And I think, you know, with your life, oh my gosh, everything's great. But you know, in your life there's a lot of dirty diapers; there's like not as much sleep. It might be frustrating, right? So, I think best case scenario is we're maximizing both of those things.

[00:04:47] **John Moe:** What does hedonic mean?

[00:04:49] **Dr. Laurie Santos:** Hedonic just means like, you know, your totally basic human pleasures, right? You know, hedonic is really just like, you know, I'm eating delicious ice creams, or I'm having a wonderful, you know, glass of wine, like I'm sleeping in the most comfortable bed. It's all the like, super, super basic pleasures. And so, when you're talking about hedonic pleasures, you know, it's all the easy stuff that we just assume, obviously, that's the kind of thing that feels good.

[00:05:12] **John Moe:** Hmm. So, this differentiation between in your life and with your life, is the idea that you have achieved happiness—(*chuckles*) maybe I'm oversimplifying it—if you're above a certain ratio on that? If you're more happy in your life than not happy in your life, then you're a happy person?

[00:05:31] **Dr. Laurie Santos:** Yeah. No, I think we're not trying to have these two things compete. I think you're trying to maximize both of them. And I think, you know, when we think about happiness, it's not a destination. I think this is one of the many, many things we get wrong when it comes to improving our wellbeing, which is that, you know, we can get there and then we're like, “Done! Happily ever after.” You know? You like walk away and, you know, checkmark on life or whatever.

I think what we're—what we're doing is really putting in work to kind of feel better. You know, it's like any good thing we're trying to achieve in life. You know? Take fitness, right? It's not like, you know, there's some point where you get fit and you're done and you can stop going to the gym or stop worrying about what you eat, right? It's a kind of, you know, a constant practice where you're putting in effort, and hopefully you're getting something along the journey and not just getting something with that end result.

[00:06:15] **John Moe:** Can anyone achieve happiness?

[00:06:19] **Dr. Laurie Santos:** I think so. I mean, I think we often have this misconception that some people are, you know, naturally born to be happy. You know, we look out in our lives and in our workplaces and we see, you know, that person, you know, is super easy. You know, they have a really easy time at being happy. We look at other people and think, you know, that person, you know, not so much. And there is some evidence to back that up. You know, there's some component of our overall wellbeing and our overall mental health that is heritable, meaning some proportion of the variants we see in the population is due to people's genes. And we like—we get that. Right?

But I think there's also evidence that there's many, many things that we can do to improve our wellbeing over time. There are many things we can do to try to help ourselves overcome things like depression, overcome things like anxieties. We can take control over it. Not perfect control. It doesn't mean you'll go, you know, from 0 to 100 on a happiness scale overnight, but there are simple things we can do to feel better.

[00:07:11] **John Moe:** And those are things that we can do through cognitive behavior, like talking through things as opposed to a chemical solution, a neurological solution. This is just the power of suggestion and talk and training. A mind can get us there?

[00:07:31] **Dr. Laurie Santos:** Yeah. Well, I'm not sure I like to think of a distinction between the biological and the, you know, the talking and the behavior. I think everything we know suggests that those things are importantly intertwined, right? If you change your behaviors, if you change your thought patterns, if you regulate your emotions, ultimately you're gonna be changing physiologically what's going on in your brain. We've known that forever. But you know, when I talk to my students about the things that really will improve their happiness, you know, I kind of steal a lot from cognitive behavior therapy.

You know, I often like to think in terms of, you know, the cognitive triads. So, kind of behaviors, you know, thoughts and feelings or—you know, if you're British, I actually like the British version better. There's this cognitive hot cross bun; so, there's like four points on this big axis. You kinda split feelings into physical sensations, right? Like working with your body to feel better, and then also your emotions. And so, you know, I think if you're finding ways to maximize those things, you're changing your behaviors, you're changing your thought patterns, you're working with and regulating your emotions, and you're making sure physically you're kind of up to snuff in terms of your wellbeing, then all of those things are going to wind up improving how you feel and overall, how happy you report being.

[00:08:39] **John Moe:** Well, let's get some foundation for you here and how you became the happiness lady (*chuckling*) at Yale with this class that you taught. Tell us about the origins of you teaching about happiness.

[00:08:54] **Dr. Laurie Santos:** Yeah. Well, I've been a psychologist, you know, for much longer than I have any business being a psychologist. (*Chuckles.*) It just feels like I've been doing that forever. But, you know, for a lot of the time I was really interested in cognition. You know, how we think and whether we think differently than other animals. I actually studied what's called comparative cognition, where you compare human and animal behavior. You know, so that was what I did for most of a decade. I saw students, you know, in my life at teaching at Yale, but they were kind of just, you know, in the back of the classroom, right? So, I had a sense of what was going on in student life, but I didn't see it up close.

All that changed when I took on a new role on campus when I became a head of college. So, Yale's one of these strange places like Hogwarts and Harry Potter where there's like colleges within a college. You know, they have these dorms that are like Slytherin or Gryffindor or something. I was head of Silliman College, but that meant that as a faculty member, I lived on campus with students, I ate with them in the dining hall. I hung out with them in the coffee shop. I was seeing student life in the trenches. And honestly, I didn't like what I was seeing. I was seeing this college student mental health crisis up close and personal, where—you know, right now, nationally, this isn't just at Yale, but nationally—over 40% of college students report being too depressed to function most days. Over 60% report feeling overwhelmingly anxious. You know, more than 1 in 10 has seriously considered suicide in the last year. Right?

I mean, these are statistics that I know you talk about on the show, but you know, I was seeing them up close and realizing, you know, this was impacting this community that I cared about. You know, heads of college are like these benevolent aunts that like kind of take care of this community of students. And I was just watching, you know, my students get ravaged by this stuff—you know, being too depressed to enjoy college, you know, feeling so anxious that they just, you know, couldn't even do their schoolwork. You know? Even things like suicidality and panic attacks, you know, I was seeing this up close. And I thought with some frustration that like, you know, this is not what college is supposed to be like. This is not what we're showing off in our shiny admissions catalogs. Like, we need to help our students develop some strategies that they can use to deal with this.

And so, because I'm again, a nerdy psychologist, I'm like, okay, how do I do this? You know, I'm not a counselor, but I am an academic psychologist. And I said, well, you know, I'm a faculty member. I teach classes. Why don't I develop a class on strategies that students could use to feel better? Like what does the field really say about kinds of tips that we can use to do things to improve our wellbeing? And so, I kind of slapped them all together and created a new course on that topic.

[00:11:13] **John Moe:** Okay. And then that—I understand a few people wanted to sign up for that class.

[00:11:18] **Dr. Laurie Santos:** Yeah. You know, it was a new class on campus, so we kind of had no idea. I figured like 30 kids would take it or something. You know, you could

imagine my surprise when I walked into, uh—not a classroom, because it wasn't a classroom at first; it was a university church, because 800 students were shopping the class trying to get in. And then, when word spread, over 1000 students showed up. We ended up teaching the class in a concert hall, 'cause that was the only spot it'd fit on campus. Which was a logistical nightmare. (*Laughs.*) It was kinda a pain in the ass, but what was cool was that it taught me that students, you know, they were voting with their feet. They don't like this culture of feeling stressed and anxious. And I think what was cool is they really wanted some evidence-based solutions that they could use to improve, to kind of feel better.

[00:12:00] **John Moe:** I think a lot of people don't realize that the rather bleak numbers among college students and young people of college age as well, that's not just a pandemic thing. That goes back before that, right?

[00:12:12] **Dr. Laurie Santos:** Correct. In fact, those statistics I was just quoting you were from the last year where I have data on this national college survey, which was 2019. Right? I mean, I'm sure these things have gotten worse over Covid—I mean the data are just kind of coming in, but you know, signs point to the fact that it hasn't gotten more awesome in the context of a global pandemic. And you know, not to count all the other things like, you know, anti-Black violence and climate change. And you know, this—it hasn't been a great run for our young people. And I think it's taking its toll, but I think it's not, you know, just those things. I think we have a culture of, you know, incredible achievement.

You know, I think all high school students today think, “Oh man, if I just worked hard enough and prioritized my sleep and kind of mortgaged my mental health, then I could win this coveted prize of getting into this amazing college and reshaping my future.” And so, I think we're not helping our young people with the goals we set for them. I think, you know, we'd be better off trying to help them figure out strategies they can use to function and feel resilient rather than push themselves to the brink.

[00:13:12] **John Moe:** Are the colleges and universities to blame for that, or is that a society-wide thing?

[00:13:20] **Dr. Laurie Santos:** I mean, I think the colleges, you know, aren't helping the situation. You know, I mean, I think—you know, if I was a university president, I would try to get other university presidents at big schools like the one I'm at to, you know, agree to deescalate a little bit. You know, call what's really going on the truth, which is that, you know, we have these selective colleges where it looks like only 3-5% of students get in. But in fact, that's not because the students—you know, that's not because we had picked the best AP scores, it's kind of just a lottery, right? There are just so many students applying that you're just gonna have some selectivity there.

And so, I think there is this sense that colleges could do better, that they really should be prioritizing mental health. I mean, what I saw on the ground in the classroom is that, you know, over the now almost 20 years that I've been teaching at Yale, honestly, I think the students have gotten less good at their academics. And they've gotten less good at their academics because their mental health is suffering. You know, how can you be paying attention to computer science or Chaucer when you know you and 40% of your colleagues are too depressed to function most days?

How can you be doing anything like the academic rigor we want of a student at Yale when, you know, you and 60% of your classmates are, you know, so overwhelmingly anxious that it's hard to function. I think we've been selecting for the wrong things, and I do think universities are a little bit to blame there.

[00:14:38] **John Moe:** And I think too, a lot of standardized testing and a lot of a college experience could be how well does a student's brain naturally match the order and systems that are baked into the particular institution where they're going.

[00:14:53] **Dr. Laurie Santos:** Totally. And I think, you know, we—these days, you know, especially among more privileged students, you really have a culture of, you know, parents' kind of anxiously helping. I think, you know, some of the stress of college isn't helping kids' mental health, but it's not helping parents' mental health either. You know, I think parents are more anxious than ever and anxious about their students' success down the line. And so, I think, you know, universities are to blame, but you know, universities are also just reflecting the broader culture.

I think we have an incredibly individualist culture, especially here in the west, especially here in the US. I think we have an incredibly kind of pushy culture that you are your achievements, you are what you do at your job. I think this is some of what we're pushing against in the context of the pandemic and learning, well, maybe that was wrong. But yeah, I think, I think society and what we think of as achievement and what we assume is gonna bring us happiness just, you know, is wrong. And I think it's not that people aren't working on feeling happier. They are, they're just going about it the wrong way.

[00:15:47] **John Moe:** It's funny, when I heard about your show—this was some time ago—and the work that you do, I had kind of a knee jerk, cynical reaction to it. Which I, you know, I sat with for a moment, like, you know, because I go to cognitive behavior therapy too. (*Chuckles.*) I sat with the feelings for a second, and I thought, “Huh, why am I doing that? Why am I—why am I cynical about happiness being something that that we can get to?” When you do this kind of work, how much of an obstacle is it with the people you teach, the people you talk to, to get past cynicism about happiness?

[00:16:28] **Dr. Laurie Santos:** Oh, I mean, you know, I get that all the time. I mean, in fact, I think the first episode that I did of my podcast featured one of the students who took my online class. So, I developed this class at Yale for the Yale students. We get so much press about the class and about what was going on at Yale that we turn the class into a free online class, so anybody in the world could take it, you know? So, a bunch of people do, but then that means I get lots of emails from people who are like, “You know, I heard about your class, and I was like, what the hell is this?” I think one of my eventual students said, “You know, it sounds like California hippie shit. Like, you know, this is gonna be stupid.” But then, you know, my experience with people who are cynical is then they try some of these strategies out and they say, “Huh! Like, I actually do feel better.” Right?

I think happiness has been kind of co-opted by people who are in the woo industry or wanna sell you platitudes and so on. But this is a scientific approach, right? Like, and it's not like rocket science, right? Like, researchers go out and they find happy people. There are individual differences. They are out there. People are feeling happy. And you say, okay, what

are these happy people doing on a daily basis? You know, how are they behaving? What do they do to their thought patterns to kind of regulate their thoughts? You know, how are they achieving more positive emotions? What kind of mindsets do they have? And you say, okay, we'll bring some not so happy folks in, and we'll see if we could teach them those strategies, and we'll see if they start to feel better.

And lo and behold, they do. And again, it's not like people go from 0 to 100. Right? You know, in my class for example, what we often see is that people who take the online class on a kind of, you know, 0 to 10 scale of happiness wind up going up about a point. So, that means if you start using these strategies, you go from a six to a seven. Again, which is not, you know, a huge bump, but it's significant. Like, you feel a lot better if you're a seven than a six.

[00:18:12] **Music:** Relaxed guitar.

[00:18:14] **John Moe:** Coming up, who's stopping you from getting happier, and why is it you that's stopping you?

*(Music ends.)*

[00:18:27] **Promo:**

**Music:** Bright, hopeful music.

**Cameron Esposito:** Hey, Max Fun listeners. This is Cameron Esposito. I'm a standup comic actor, writer, bestselling author, and podcaster. I got a great show, called *Queery*, where I interview LGBTQ+ luminaries across, oh, a bunch of fields. People in entertainment, astronauts, musicians, rock stars. I am bringing the show to Maximum Fun. You can listen right now. And I am so happy to be on this network. We have new episodes out every Monday. You can listen at [MaximumFun.org](https://MaximumFun.org) or wherever you get your podcasts.

*(Music fades out.)*

[00:19:07] **Music:** Spirited acoustic guitar.

[00:19:11] **John Moe:** Back with Dr. Laurie Santos of *The Happiness Lab* and professor of the most popular class in Yale University history.

*(Music ends.)*

Definitionally, happiness seems to be an elevated state above being just okay. And as such, it didn't seem inherently sustainable. Because, you know, if you're always feeling better than average, when are you gonna revert to the average, you know?

[00:19:42] **Dr. Laurie Santos:** Yeah. And that's why I think the definition is so important.

We're not—happiness is not this destination. I think our culture has sold us a Bill of Goods, you know? Disney, for example. You know, the happily ever after. Again, that's just not—psychologically, that's not how it works. My colleague, Dan Gilbert, who's a professor at Harvard who studies positive psychology among other things, is fond of saying, “Happily ever after only works if you have six minutes to live.”

*(They laugh.)*

Like it's just not gonna be a sustained thing, right? But we can all work to achieve a little bit more positive emotion, right? We can work to achieve a little bit more meaning in our life, and we can work to enjoy the process and the journey as we do that. And I think, you know, to me that's happiness. It's not like I got to some destination, and I've ticked it off and that's it. It's kind of constant work to improve how you're feeling.

[00:20:25] **John Moe:** So, we're talking about a happiness that is a quality of life, quality of mind kind of thing, that isn't constantly smiling, because that would be creepy.

[00:20:34] **Dr. Laurie Santos:** And it wouldn't work, right? I mean, I think—you know, one of the dumb features of our mind that I talk about in my class is what's known as hedonic adaptation. We talked about hedonic before. This is just, you know, feeling good. And you get adapted to feeling good, right? This is what's often also referred to as the hedonic treadmill. You know, the awesomer things get, the more you get used to it. And that means that if you were constantly happy, you wouldn't achieve the benefits of that. If everything in your life was perfectly going well, you'd stop noticing it. This is why people who live in Southern California and don't have weather like I'm having here—you know, on the East coast where I am in Boston, where it's like, you know, hot one day and then rainy the next, right? You know, we appreciate it when it's a nice, you know, calm, sunny day on the East Coast in a way that I think Southern Californian folks don't, because it's like it's perfect like that all the time in.

In my class, I share with students that DJ Khalid song, “All I Do is Win”. And I know it's like, look, if all you did was win, then you wouldn't get happy for winning. It would just be boring.

[00:21:27] **John Moe:** It's not really winning. Yeah.

[00:21:29] **Dr. Laurie Santos:** ‘Cause it's not really winning anymore. It's just—in fact, all you would have is like deep anxiety about what if this time I fail, right? You know, that's what winning and having it perfect all the time is. And so, I think—you know, again, one of the reasons I think we're all not as happy as we could be is our minds are walking around with these misconceptions. We think we wanna win all the time. We think we want it to be perfect. We think happiness is a thing we can achieve forever, but that's just like not how our minds work.

[00:21:55] **John Moe:** I'm so disappointed that DJ Khalid has let us down once again.



[00:22:01] **Dr. Laurie Santos:** (*Laughs.*) Yeah, I think he just wanted our hands up in the air the whole time. Maybe not winning the whole time, but yeah.

[00:22:05] **John Moe:** Yeah. Wave them like you do care. So, I wanna talk a little bit about what this means for people who maybe have depressive tendencies, anxious tendencies, post-traumatic issues. But let's talk in a broader sense first about what the people who are happy have in common.

[00:22:25] **Dr. Laurie Santos:** Yeah, well, I think they tend to have a certain set of behaviors, a certain set of thought patterns, and a certain way of dealing with their emotions. So, let's kind of unpack that. So, let's look at behaviors. Happy people tend to be pretty social. Every available study of happy people suggests that they hang out with people more. They prioritize time with their friends and family members. They're just around people more often. And you could say, "Well, that's just a correlation. You know, I'm depressed; I don't wanna hang out with people. You know?" But the evidence suggests that if you just build in a little bit more social connection into your life, even if you're an introvert, you'll wind up feeling better.

Happy people are also other-oriented in a different way, which is that they're often willingly doing nice stuff for other people. I think this is another spot where we get it wrong all the time. You know, if you look at any article about happiness, you'll see this stuff about self-care. You know, treat yourself, you know, from *Parks and Recs*, things like that. We are like self, self, self, but the evidence suggest that's not what happy people are doing. Happy people—controlled for income—donate more of their money to charity than not-so-happy people. Happy people, controlled for the amount of free time they have, are volunteering more than not-so-happy people. Happy people are just kind of focused on other people's happiness, ironically enough, and that's kind of what builds their happiness.

And happy people also do behaviors that we know are just good for mental health no matter where you fall on the spectrum. They're exercising more often. They're making sure they prioritize their sleep. Just these healthy habits that we know matter. And finally, happy people are not like so overwhelmed in terms of time. It's not like they have zero on their calendar, but they have a decent amount of free time to do what they want with. This is what social scientists call time affluence. You're a little bit wealthy in time. I think that's—especially with our young people these days—where a lot of people are going wrong.

So, those are kind of all the behaviors, but then you also have to deal with people's thoughts. And I think happy people tend to have certain kinds of thought patterns. First, they're relatively grateful. Happy people are constantly moving their attention to the blessings in life rather than the hassles. They also seem to have a little bit more presence. They're kind of in the moment more. They know that it's about the journey, not about the destination. So, they're kind of enjoying their presence along the journey as they go. They also don't beat themselves up as much in their thought patterns.

You know, there's lots of evidence that happier people are a little bit more self-compassionate, that they're okay with failures. They have a bit of a growth mindset, you know? So, these are like ways that you can think better to kind of achieve more happiness. And then finally, we have to deal with feelings, right? It's like a central component of this

definition I've given you for happiness, which is that you wanna boost your positive emotions and not completely get rid of your negative emotions but find ways to better allow them and regulate them. And this seems to be what happy people do. Happy people have a whole host of positive emotions. They experience things like awe, right? Like this sense of, you know, connection with nature. There's a lot of laughter and humor. There's like a focus on delights. They can kind of train their attention on good things out there in the world. And I think happier people tend to have strategies of regulating those negative emotions. They allow them to be there. You know, they can kind of be Zen with them and not try to run away from them.

I think a lot of the reason negative emotions feel so negative is we're like pushing them away and freaking out about them the whole time. Whereas if you just had strategies to sit with them, it might not feel so bad. And so, yeah, in a nutshell, that's kind of what happy folks do. And it's worth noting that like a lot of that for many of us does not come naturally, but all of those things are things that we can, you know, work on with a little bit of effort.

[00:25:48] **John Moe:** Well, yeah, I mean, it strikes me that especially if someone's in the position of having major depressive disorder or even the dysthymia kind of thing going on, that a lot of what you're describing is a result more than a process. You know, even being around more people and making a connection—there are people with depression who wish they could do that, but can't just, you know, chat up somebody in a coffee shop line, because they're too—there's too much going on. Or they wanna get out in nature, but when they get out there, they're so in their head from these kind of chronic mental health conditions that they can't get to it.

So, where does—? The advice that you have is really great, or the observations that you have of these people who are happy is really great, but how do people get to those places?

[00:26:37] **Dr. Laurie Santos:** Yeah, I think it kind of depends on where you are. And you know, I think we can mess this up in mental health, but we understand it so much better when we're dealing with our physical health. In so many ways, you know, I think we misunderstand our mental health. But let's take a physical health analogy, right? Let's say you walk into your doctor, you're like, “Doctor, haven't been feeling so good. Kind of have high blood pressure.”

What does the doctor say? The doctor's like, “You need to pop on the treadmill more. You know, you need to work out, like you need to get your blood pressure down.” Right?

[00:27:03] **John Moe:** Or “You need to relax. Hey, just relax more.”

[00:27:06] **Dr. Laurie Santos:** You need to relax. Yeah, yeah. The doctors all—eat healthy or whatever. There's like a whole set of things doctors will say, right? But you walk into the doctor's office clutching your chest and you say, “Doctor, I'm having acute cardiac arrest right now.” Your doctor doesn't then say, well, hop on the treadmill! You know, just relax. Your doctor, you know, like, “Clear!” and they rush you in like on—you know?

[00:27:24] **John Moe:** Try to smile more.

[00:27:25] **Dr. Laurie Santos:** Yeah, and I, and I think we need to think about the same thing with our mental health, right? Like, these strategies I'm suggesting are probably pretty good if you're experiencing a little bit of dysthymia, right? Like, if you're feeling a little lonely, if you're feeling a little depressed, maybe a little anxious. If you're acutely suicidal, if you're in the midst of a panic attack right now, like I'm not gonna say, "Oh, you know, like make a gratitude list or go, you know, hang out with—" Like, we need a different kind of clinical care depending on the level you're at. And again, we get that for physical health, right? I think we need to do the same for mental health.

So, I think if you're in this acute situation, you obviously need a different kind of care. That said, I think when you get back to baseline—you know, let's go back to our heart attack victim. You know, he gets the stint or the care, whatever, and you know, now he's like recovered from that acute moment. I think the doctor might go back to saying, you know, "Okay, now you know you might need to boost your physical activity a little bit. And you know, now is the time when you need to go back and work on what you're eating. Maybe relax, right?"

I mean, I think this is kind of what we're experiencing in the mental health domain. The things I'm suggesting I often consider like preventative medicine, like these are the kinds of things we can do when we're not really at a point of true suicidality, you know, acute panic attacks and so on. That said, you know, there's also evidence that some of these strategies—in baby steps, when you do them with some self-compassion—can help people that are experiencing depression. You know, there's evidence for example that, you know, boosting your social connection—again, in baby step doses. This is not if you're socially anxious going to some huge party or like public speaking or something like that. This is like call a close friend who you just haven't chatted with in a long time, right?

Like those kinds of things can make a big difference. There's huge evidence that the healthy habits I mentioned make a big difference, right? You know, exercise. There's evidence, for example, that a half hour of cardio a day can be as effective at reducing symptoms of depression as taking a prescription like Zoloft, you know, one of the leading anti-depression medications. So, again, I think not for the acute, acute cases of mental illness that so many people are suffering from. And it's not to belittle that, right? There's a lot of people who don't need what I'm talking about. They're past preventative medicine, and they need real care. But I think if you're not there yet, these kinds of things can help. And if you're getting care and starting to feel better, then building in some of these things might actually do the prevention to help you from relapsing later.

[00:29:44] **John Moe:** When you talk about this idea of giving to others—like if helping other people who are in rough shape when you're in rough shape can, you know, almost counterintuitively make things better—I've talked with comedians who say that they used to be so jealous of other comedians, you know, who got a big break, got a TV show or something. And it was a switch to saying, "I'm just gonna be really happy for this colleague of mine instead of living in this jealousy and this misery." And then, that turned their own fortunes around, that turned their own happiness around. Because it was able to be—that feeling could be replicated in other areas of their life.

[00:30:22] **Dr. Laurie Santos:** Yeah, and I think this is true, you know, for so many of the different mental health issues we go through. You know? Take loneliness. In this current

season of my podcast, I was just talking with Vivek Murthy—the current Surgeon General—who, despite dealing with Covid and all these other things, is really worried about mental health. He's particularly worried about loneliness, and he talked about how one of the best cures for loneliness is to try to help loneliness in other people. If you can get out of your own head like, “I'm lonely; I don't have any friends.” Be like, “Alright, how can I reach out to somebody else? How can I help somebody else? How can I, you know, try to do something for somebody that I'm worried might be lonely?” All of a sudden, that starts to reduce your loneliness, ‘cause now you're reaching out to other people, and you're connecting, and you're getting the kind of happiness boost, warm glow that comes from helping someone else.

And so, again, I think we often just have incorrect theories when it comes to this stuff. You know, I see this with introversion all the time. You know, there's a lot of evidence, for example, that introverts get the same happiness boost from being social that extroverts get. What they have that seems to be different is they have a very strong theory that being social is gonna suck. (*Chuckles.*) You know, everybody kind of thinks being social is gonna suck. One of my favorite experiments on this comes from Nick Epley; he's a professor at the University of Chicago. And he does this study where he forces people to be social. He does this on the L train in Chicago. So, people are commuting to work. He says, “Hey, do you wanna be in a study? I'll give you a \$10 Starbucks gift card.” And everybody says yes, ‘cause \$10 Starbucks gift cards are the engine oil of social science research.

*(John laughs.)*

People are like, “Oh yeah, I'll do anything for a \$10 Starbucks gift card.”

So, he says, “Okay, for the rest of the train ride, you need to talk to somebody. You know, really try to get to know them, make a deep connection.” Or he says, “For the rest of the train ride, just enjoy your solitude. Don't talk to anybody.” He has a different group of subjects predict—and people predict this is gonna suck. It's gonna be awkward. You don't wanna talk to this person; you're not gonna get any work done. In practice, what happens is that the people who talk to someone on the train feel better, and the people who are attempting to enjoy their solitude wind up feeling worse, in terms of measures of positive mood and connection. But that's absolutely not what people predict. People predict this is gonna be terrible.

And if you look at what introverts predict, they don't just predict it's gonna be like regular level terrible. They predict it's gonna be like, you know, the most terrible thing ever. But they too get a happiness bump. Right? And so, I think this is kind of telling. I think especially when we're feeling depressed, especially when we're feeling anxious, you know, we have on the like reverse rose-colored glasses. I don't know what's the opposite of rose, but it's like that way you're looking at the world thinking, “This isn't gonna work. This is gonna suck.” You simulate what it would be like to do some of the strategies I'm mentioning. You're like, “Either that wouldn't work or that would feel so terrible, you know, it would make me actively worse.”

But then sometimes in these cases, what the evidence suggests is if you try it—and again, try it in a baby steps, not, you know, some crazy version of it—like you try it, then you often wind up feeling a little bit better or at least better than you expect.

[00:33:03] **John Moe:** Now a lot of the steps that you talked about, like you say, are pretty logical. Like, if you connect with other people, you're gonna feel a little bit better. When I used to work in a big office with a lot of people at with desks all around me talking about their weekends, I think I had an easier time than in the last two years when I work from home with just my dogs around. (*Chuckles.*)

They're wonderful dogs. But you know, I can tell like, oh yeah, I'm in better shape when I'm connecting with more people. It's logical. What are some aspects or some approaches that you found that were surprising that that wouldn't seem to follow that kind “of course” path?

[00:33:40] **Dr. Laurie Santos:** Yeah. Although, I would think it's worth, you know, mentioning of the “of course” path, like—you know, it's common wisdom, but it's not common practice. Like, I think there's all these things we know that we don't do, right? And so, I think that that's another interesting bias of the mind. I think we can know what we're supposed to do and still have a lot of resistance and a hard time doing it. But yeah, those are cases where I think, you know, our grandmother could have told us that. They didn't—you don't really need a Yale course to figure out that social connection makes you happy. Right?

But I think there are other domains where we kind of don't get it. You know, one of my favorite ones that I think really strikes my students is this idea of the importance of self-compassion, of not beating yourself up. I think we all have this lay theory of human motivation that the way I'm gonna be motivated to do something is if I scream at myself in my head like a drill sergeant, or I just berate myself about how crappy I am and I better freaking get my act together. Right?

[00:34:30] **John Moe:** (*Intensely.*) “You gotta want it! You gotta push yourself!”

[00:34:32] **Dr. Laurie Santos:** Exactly. And it's so funny, ‘cause like we wouldn't do that to our friends. Probably, or you probably won't have too many friends if you do that to your friends all the time. Like, but we do it to ourselves constantly. And again, I think we're not horrid masochists. I think we think this works. I think this is—we think this is the only way, you know, to get our act together. But the evidence suggests absolutely not. Right? We are more likely to procrastinate on the goals we have the more we talk to ourselves negatively.

This is the lovely work of University of Texas at Austin, psychologist Kristin Neff. You're more likely to like procrastinate and not do the things that you need to do if you're talking to yourself in a mean way. You're less likely to succeed if you fail. ‘Cause if you fail, you just beat yourself up, and you kind of turn into a little, you know, beat up ball. And you're not gonna really succeed. There's also evidence that we wind up being more empathic and more compassionate to other people when we talk to ourselves compassionately.

‘Cause if you're kind of nice to yourself, you can sort of extend that same thing to other people. So then, you wind up more easily socially connecting and so on. And so, I think this is one domain that, you know, definitely my students and even I myself report a lot of like—a kind of game shift of like, “Oh, maybe I shouldn't scream at myself. You know, maybe I shouldn't contribute to my own self feeling like crap all the time.” Like again, that—maybe that should also be common wisdom, but I think it's really not. I think we just have this theory of motivation that that kind of thing violates.

[00:35:50] **John Moe:** Well, and to get back to depression, because—well, that's my tendency to do in a lot of conversations—it is a kind of internal logic so much of the time. Like, you know, if I try to connect with other people, it's just gonna be horrible. If I try to write down things I'm grateful for, I'm just gonna be reminded of all the hardships that I have. It's kind of this—depression's a liar, and it's really good at covering its tracks and masquerading as a rational thought process.

So, how can we get to some of these steps you're talking about to form a happier life—maybe not one where we're smiling and singing all the time, because that would be annoying—but to get to that happier life and overcome that internal logic that goes with something like depression?

[00:36:36] **Dr. Laurie Santos:** Yeah, I mean, I think one of the spots where it's important to start is to recognize that your mind is lying to you. Like, definitely in depression but in general, I think minds like. It's one of the premises we start with in my class. I start with this idea that, you know, becoming happier is gonna take some work, and the most important work that you can do—and perhaps one of the hardest, you know, things you have to start focusing on your happiness—is to recognize that your mind is lying, is to recognize that you have these strong intuitions about something, but those intuitions are leading you astray. I actually use the analogy of visual illusions. I show—I don't know if you remember the dress, you know, that was like—you know that thing that was going on on the internet. Or just like—

[00:37:12] **John Moe:** Oh yeah, gold and black and all that.

[00:37:16] **Dr. Laurie Santos:** Yeah. It's like you might have a very strong intuition that it's like white and gold or whatever it is, but that's just wrong, right? It's just like your mind is telling you very strongly, like without question, like this is what it looks like. But your visual system is wrong. And the analogy I use is this is true of your motivational system. Your mind might be telling you incredibly strongly calling that friend's not gonna work. It's just gonna suck. I'm gonna hate it. It's not gonna help. Or your mind might be telling you very strongly, like there's nothing I can do to get out of this. You know, sleeping in bed all day is gonna feel awesome. Right?

Like, we get these intuitions that feel really strong, but you need to recognize that like they're wrong. Like it's just a case of your mind lying to you. So, I think if you're listening to this with depression and you're hearing my suggestions, you're like, “Nope, that's not gonna work. Nope, that's not gonna work.” Like, think of the last time you looked at a visual illusion where you're like, you know, “Those two lines are the same length,” and you measure them. Like, nope, totally wrong! I think our mind has the capacity to lie to us in an incredibly convincing way. But when you realize that that's what minds do, then I think you can start to do small baby step experiments.

Like, okay, I have the strong intuition that this isn't gonna work but let me just try it. And then mindfully notice what happens, right? And then like, actually, that didn't feel as bad as I thought. Right? And that I think can allow you to sort of see through some of these mind lies.

[00:38:31] **John Moe:** Does it just come down to the kindness that you need to show to yourself? I mean, not to make it too Hallmark here, but a lot of things you're talking about like this involve a kind of generosity to other people but also to yourself. This—the gratitude, even the exercise and the sleep and the, you know, meditation—if you're into the meditation. It's kind of a reversing from being nasty to yourself vs. what can I do to be the most kind to myself?

[00:39:03] **Dr. Laurie Santos:** Yeah, I mean I think it is amazing that natural selection built these minds that are in some ways our worst enemy. But you know, here we are. *(Laughs.)* Like, we're only primates in beta version, you know, who knows? But yeah, I mean, I think that's right. I think we have a lot of intuitions that lead us exactly on the opposite path of where we wanna go. This is true for sure in depression. This is true for sure in anxiety. Both of those conditions we know cause people to naturally wanna do exactly the thing that will be the opposite of what will make them feel better. But I think you don't have to be clinically depressed or anxious to show the same thing.

You know, so many of my Yale students who don't necessarily, you know, have those mental health issues are working 'til they can't sleep to get perfect grades, which we know are not gonna make them happy. Or you know, like working towards accolades that we know will instantly make them feel worse about themselves. They're trying to win all the time in a way that we know won't make them happy. And so, I think these lies are more pronounced in the context of mental health disorders. That's the nature of mental health issues. But I think, you know, not-so-depressed and not-so-anxious people are walking around with exactly the same lies. And recognizing like sometimes your intuition is gonna lead you astray can be a powerful way to realize like, well, maybe I should try something different.

It's very similar to the great insight I had—you know, I think one of my moments where like, you know, mental health advice hit me really hard and I was like, “Whoa, game changer!” was this idea of recognizing that you are not your own thoughts. Right? You know, my thought is saying, “I don't wanna call my friend. I just wanna sleep in bed.” I can say, yeah, that's a thought. It might be accurate. It might not be accurate. I don't have to have this thought. Like, what a game changer! Right? And I think when you recognize like your brain is telling you something, like you don't have to listen to it, you could try something else. You know, that can be a real game changer too.

[00:40:47] **Music:** Relaxed guitar.

[00:40:51] **John Moe:** Just ahead, putting yourself on the witness stand and asking yourself some tough questions.

*(Music ends.)*

[00:41:06] **Promo:**

*(Celebratory noise-maker honk and applause.)*

**Music:** Relaxed synth.

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*(Noise-maker honk. Music fades out.)*

[00:41:44] **Music:** Thoughtful acoustic guitar.

[00:41:48] **John Moe:** Back with Dr. Laurie Santos of *The Happiness Lab*. She says she's heard some helpful tips on confronting your distortions from the psychotherapist, Andrea Wachter.

*(Music ends.)*

[00:42:02] **Dr. Laurie Santos:** —who talks about like just interrogating whether or not that belief is helping you. Does it have to be true? Are you absolutely positive it's true? Is there any doubt whatsoever? And if you say yes, then you say, you know, what would I be if I didn't believe that? You know? Or how would I act if I didn't fully believe that? You know, what would I—what would I do if that wasn't true? And sometimes, that can give a little crack in this strong intuition to say, “Wait, hang on. You know, maybe I don't need to believe what this backseat driver's telling me in the worst possible way. Maybe I can try something else.” And that can be so powerful. Because, again, so much evidence suggests that trying something else is probably gonna work much better.

[00:42:37] **John Moe:** Yeah, yeah. I mean, *(chuckling)* I always say to people, “How's the status quo working out for you? How's the current thing going?”

I was really struck by something that you said in a talk or an interview that you gave about the Olympics and the gold medal/silver medal/bronze medal finishers. And it struck me, because when I was in I think third grade, I was on the school track team like everybody else was. And we had one race. And I'm not a very fast runner. I'm a very not-fast runner, but I came in third. I gave all my effort and came in third in that race, and I was so happy. And I quit the track team right after that, because I knew I had peaked. I knew it wouldn't get better



than that. (*Chuckles.*) And there was a lot that you've talked about—that third-place finishers are actually doing really, really well. I wonder if you could explain that.

[00:43:33] **Dr. Laurie Santos:** Yeah. So, this gets to another way that our mind kind of sucks, another way that our minds lie to us. Which is, you know, I think we assume we're trying to be absolutely the best. You know, get absolutely the best grades, you know, be absolutely the happiest, get absolutely the most money.

[00:43:48] **John Moe:** Right, because then we'll be happiest. If we get the most, then surely we'll be the most happy.

[00:43:53] **Dr. Laurie Santos:** Exactly. Right? But our minds can't really tell absolute stuff. Our minds really just think in relative terms. So, you don't know—you know, what's the most money? I have to come up with some sort of reference point. Like, okay, Jeff Bezos is the most money. Like, if I get more than him, great. Right? Or you know, that guy at work who got the raise. If I got as much as him, I'd be happy. Right? You pick another person that you're comparing yourself against.

And our brains, again, suck. They don't pick comparison points that make us feel good. You know, we're not normally looking at all the people who are doing worse than us. We're normally looking at the people who are doing better. That means that performing absolutely amazingly but having a few people that are better than you can make you feel like crap.

And this is where we come to our silver medalists. A set of psychologists did some analysis of Olympic videos looking at silver medalists on the stand. Now, silver medalists—again, they've just, you know, won a medal for their performance. They're the second best in the world, better than billions of people at whatever sport they're doing. And on the stand, they look miserable. They're showing active emotions of things like disgust, sadness, contempt, anger. And you might say, why? Well, there's a very salient reference point that's making them feel like crap. They almost, almost got gold. Right? You know, they're like within like, you know, 0.2 seconds, like they would've won gold or something. And that makes them feel like crap.

But the point is that you don't necessarily have to look to the worst reference point. And this is where, you know, bronze medalists or third place folks come in, right? The salient reference point, you know, for you in your track game of getting third place wasn't, you know, winning, right? It wasn't getting first place, 'cause you were probably a couple people, you know, maybe a few seconds off, but very salient to you was like, "Man, you know, within 0.2 seconds, I would've come in fourth. Like, I wouldn't have placed at all. Like, I wouldn't have gotten some trophy or—" I don't if you got a trophy or a ribbon or whatever you got back in high school or whatever.

But the key is that we can try to focus reference points on things that are healthier, and that's kind of naturally what happens for a bronze medalist or a third-place runner. It's just not the thing we naturally do, because there are often, you know, gold medalists out there. I have the privilege of kind of sometimes doing trainings with people in interesting fields, and I was talking to a group of professional basketball players. Again, so these are like NBA players

who, you know, should be over the moon with their own talent. And I was like, you know, “Who's your reference point for, you know, best free throws?”

And they're like, “Oh, Steph Curry.”

Or like, “Who's your reference point for being the tallest?” So, you know, Tacko Fall. “Who's your reference point for, you know, what the right amount of money is?” You know, it's like, I don't know, LeBron or just Steph or whatever.

And I'm like, you picked the one reference point that's gonna make you feel like crap. Like, and if NBA players, you know, who are making all this money doing so well are doing this, you know, this is stuff we do in all domains of our life. Our minds naturally go to reference points that make us feel like crap. And I think this was always true in human history, but these days, you know, we have these incredibly curated reference points around us—you know, on the internet, you know, to make us feel like, you know, our vacation's not as good, our body's not as good. You know, we don't have as many friends as other people.

I think we're constantly seeing reference points that make us feel crappy, and it's just our mind's way of soaking up information that we didn't necessarily need to soak up. We could be absolutely doing amazingly and still feel like crap, because we're not as good as some random reference point.

[00:47:02] **John Moe:** And so, we can say like, “Okay, you know, I don't need to make as much as LeBron, or I don't need to—” You know, maybe in one of our fields like, “I don't need to write X number of books or have them sell X number of copies.” Whatever it is. X number of downloads on a podcast. And I can understand that intellectually, but I'm often still stuck with those feelings, those tendencies that are happening unconsciously. How do we train ourselves out of that so that that isn't just like a reminder but a better way to live with our brains?

[00:47:37] **Dr. Laurie Santos:** Yeah, I think, you know, with all these biases that I talk about—whether it's, you know, this kind of reference point setting, whether it's that phenomenon we talked about earlier, hedonic adaptation, where you get used to stuff—it would be nice to just shut those off. It'd be like, “Oh! My mind's biased. Just shut it off.” Sadly, not the way minds work. Like, it would be great if we could do like a little tweak in the brain or like some—you know, I don't know—gene that we move around or something, but no.

[00:48:00] **John Moe:** Some switch we could flip or something.

[00:48:03] **Dr. Laurie Santos:** Exactly. Sadly, it doesn't work that way. What you gotta do is understand the bias and kind of work with it. With reference points—your mind's gonna soak up reference points, right? It's gonna naturally soak up the terrible ones. But I think you can switch it. You know, there's a joke about finding the silver lining. I think silver, as we saw with silver medal, silver lining bad. But you can find the bronze lining!

*(They chuckle.)*

You can find a third-place lining. Right? Like, you know, with any domain, you can look and find somebody—if you pay attention—that's not doing as well as you, and that's not necessarily to like, you know, gloat and feel better than that person. But it just shifts your perspective and gets you back to gratitude mode of like, man, you know, this is not as bad as it could be. Right? You know, I really do need to have some gratitude for where I am.

[00:48:45] **John Moe:** Mm. You've been studying happiness for quite a while now. You've been teaching that class for a long time. You've been hosting *The Happiness Lab* podcast. What has surprised you the most about happiness?

[00:49:00] **Dr. Laurie Santos:** Oh, I mean so many things. I mean, I think maybe the biggest surprise for me personally is like how you can know all this stuff and absolutely not put it into practice like yourself in your own life. (*Laughing.*) Right? It's one thing to know this stuff, but it's another to turn it into real habit. And you know, that is still a constant struggle for me. I think—you know, we talked about how I got interested in this, you know, and me being so sad about seeing my students. But I think, you know, a deep level of sadness was that, you know, it wasn't just them. I was watching—I was seeing myself in all the ways they were reacting to things, all of their stress, all of their depression, and so on. You know, I'd run into one of them and be like, “How's it going?”

Like, (*exhausted*) “Oh, if I could just get to spring break.” And part of me would think like, damn it, they're fast forwarding their whole college experience; what's going on? But then, another part of me would think like, yeah, dude, if I could just get to spring break with you.

(*They laugh.*)

I'm with you on that, you know, how miserable this is and so on. And so, I think, you know, people think ‘cause I—I think this is a different misconception and why people are cynical is they think like, “Oh, this happiness professor, she's gonna be annoying and super happy or whatever.” And I think one of the things people end up liking about the podcast is like, nah, I'm flailing just like everybody else, right? Like, I'm going through exactly the same stuff. My instincts are just as bad and it makes sense, ‘cause like these are just human intuitions. Like our minds are just built badly, you know?

And so, I'm kind of trying to go through all the same strategies to figure out how I can fix my own misconceptions and behave and think in patterns that are gonna make me feel good too.

[00:50:22] **John Moe:** What do we do then, like about the mental health of college students, of young people? Which is in such horrible shape, and as wonderful as your work is, I can't imagine it's solved everything. Like based on the fact that that rough shape that these people were in gave you the impetus to start this work, what do we do from here? How can we make a difference?

[00:50:47] **Dr. Laurie Santos:** I mean, I think one thing is really to learn some of these strategies. If you're a parent, help your kids learn some of these strategies. You know, I have the Signs of Wellbeing class that we put online is there completely for free. And I have lots of parents—especially of like, you know, middle school age or high school age students—take the class with their parents. Because like, you know, if you've enjoyed this conversation,

that's basically what the class is. It's not like a class. You could watch it like a Netflix series where you're just watching videos about some of these strategies.

And parents will write to me and say, "You know, thank you so much for that, because I didn't realize all the things I was doing wrong. You know, or I'll say to my kid like, yeah, you know, we don't—we don't push for grades in this family."

And their kid will be like, "Mom, you know, you push for grades all the time. Like, you're always asking me about my homework and these things." And so, I think parents can't always see the kind of pressure they're putting their kids under. And so, sometimes understanding that better, seeing these strategies together and talking through them can be really powerful. I think parents also self-report that they didn't realize how much they were modeling bad strategies to their kids. You know, like, "You know, see honey? I'm always grateful."

And he's like, "Mom, like you're never grateful. You're always talking about—" You know, so it's—I think—

[00:51:00] **John Moe:** You're complaining all the time.

[00:51:00] **Dr. Laurie Santos:** The kids will call you out. Right? And so, I think we can't often see the kinds of things we're modeling. You know, another piece of advice I give to parents is that if you have kids who are depressed or anxious, you know, one thing to know is that there's lots of evidence for emotional contagion. That, you know, one way you can help at least a little bit with your own kids' sadness and anxiety is to work on your own. And this was something I used to see all the time, you know, in students. You know, I'd talk to, you know, a Yale student who's like incredibly anxious, and then I'd get the call, you know, from his parent who was, you know—like even just on the phone, I could watch my heart rate going up, talking to this mom. And I was like, no wonder this poor kid's anxious, right? Like this is a mother who has to solve her own issues about her anxiety about her child's performance and success and so on.

And so, I sometimes, you know, tell parents like, "It's so helpful to worry about, you know, what's going on in your mental health and your life."

There was this like little kid meme of like a goofy video for a while that—it was like, you know, some kid would be like, "Worry about yourself." (*Laughs.*) That's what I tell parents sometimes, like, "Worry about yourself!" You know, I think it's—there's evidence that that can really impact the people around you is to focus, you know. And sometimes for parents who otherwise feel guilty about focusing on their own mental health, like that can kind of give you permission too, right? Like, if you take care of yourself first—you know, put your own oxygen mask on first—that can really help the people around you more than you expect.

[00:53:14] **John Moe:** I just tell my kids that I want to screw up with them in a different way than my parents screwed up with me. I just want the innovation to take place at some point.

(*They chuckle.*)

[00:53:25] **Dr. Laurie Santos:** The random walk from screwed up around (*inaudible*).

[00:53:27] **John Moe:** Yeah. Yeah. I just want to try a new approach to the dysfunction. Dr. Laurie Santos, thank you so much for being with us.

[00:53:35] **Dr. Laurie Santos:** Thanks so much for having me on the show.

[00:53:38] **Music:** “Building Wings” by Rhett Miller, an up-tempo acoustic guitar song. The music continues quietly under the dialogue.

[00:53:45] **John Moe:** That's Dr. Laurie Santos. This is from that internet meme she was talking about—the one with “worry about yourself”. It's a toddler struggling with undoing her car seat buckle, but she doesn't want dad to help.

[00:53:58] **Clip:**

**Dad:** What do you want me to do?

**Toddler:** Worry about yourself. Worry about yourself.

*(Dad holds back a laugh.)*

I do this one. So, um. You gonna do that? You drive! Worry about yourself! Go, drive!

*(Dad laughs silently.)*

Go!

[00:54:18] **John Moe:** I've been watching this so many times.

*(Music resumes.)*

*(Chuckling.)* It's made me very happy. Oh, do we ever have supporting material! Our own happiness syllabus on our show page, talks from Laurie, links to where you can take her class. We have a video of Paul Rudd goofing around to the Partridge Family song “Come On, Get Happy”. We have the full 46 seconds of the worry about yourself toddler video. So, enjoy that. Go check us out.

Next time on *Depresh Mode*, sometimes the biggest jerk you'll ever meet is your internal monologue, and sometimes you make a TV show about it.

[00:54:53] **Speaker:** My own voice was brutal in a way that other people weren't experiencing. It's not just, “Oh, you gained weight.” It's like you're a bad person. It's not just your body's bad, it's that you're a bad person. You're bad. That's where the disorder comes in.

With a lot of recovery under my belt, there's certainly days that I look at myself and think, "Well, I don't love that." But it's just that. I'm not a bad person because I can't zip my pants up. Right? Or—that's to me what I would define as recovery, is just having a pretty typical, normal amount of bad feelings about yourself.

[00:55:27] **John Moe:** Annie Weisman, creator of the TV series *Physical* is with us.

If people support our show, we get to have a show. If they don't, we don't. It's real easy to support the show. Just go to [MaximumFun.org/join](https://MaximumFun.org/join). Select *Depresh Mode*. Find a level that works for you and keep us going. If you've already donated, thank you from the bottom of my heart. You make this show possible, and it's helping people, and you deserve some of the credit for that. Be sure to hit subscribe. Give us five stars. Write gushing reviews. That helps get the word out about the show out in the world where it can help people. The Suicide and Crisis Lifeline is available in the United States by calling 988. Just those three numbers, memorize those. 988. Or you can call 1-800-273-TALK. The crisis text line, also free, always available. Text "home" to 741741.

Our electric mail address is [depressmode@maximumfun.org](mailto:depressmode@maximumfun.org). We'd love to hear from you about anything at all. If you're on Facebook, look up our mental health discussion group, Preshies. Our *Depresh Mode* newsletter is on Substack. Search that up. I'm on Twitter [@JohnMoe](https://twitter.com/JohnMoe).

Hi, credits listeners. The singer-songwriter John Grant has a song I adore, called "GMF", which stands for Greatest Motherfucker. It's all about self-esteem and self-mockery, and it touches on the idea of happiness. That's why I was thinking about it when I was putting together this show. I don't really want to pay for rights or hassle with lawyers, so I'll just read to you the closing lines.

"Don't forget, you could be laughing 65% more of the time. You could be laughing 63% more of the time. You could be laughing 25% more of the time."

*Depresh Mode* is produced by Gabe Mara. Our senior producer is Kevin Ferguson. We get booking help from Mara Davis. Rhett Miller wrote and performed our theme song, "Building Wings".

[00:57:25] **Music:** "Building Wings" by Rhett Miller.

*I'm always falling off of cliffs, now*

*Building wings on the way down*

*I am figuring things out*

*Building wings, building wings, building wings*

*No one knows the reason*

*Maybe there's no reason*

*I just keep believing*

*No one knows the answer*

*Maybe there's no answer*

*I just keep on dancing*

[00:58:02] **Kevin:** Hi, this is Kevin from Long Beach. I just wanted to say: whatever you're going through, you're not going through it alone.

[00:58:09] **John Moe:** *Depresh Mode* is a production of Maximum Fun and Poputchik. I'm John Moe. Bye now.

*(Music fades out.)*

[00:58:21] **Sound Effect:** Cheerful ukulele chord.

[00:58:22] **Speaker 1:** [MaximumFun.org](http://MaximumFun.org).

[00:58:23] **Speaker 2:** Comedy and culture.

[00:58:25] **Speaker 3:** Artist owned.

[00:58:26] **Speaker 4:** Audience supported.