MORRA AARONS-MELE: I'm Morra Aarons-Mele, and this is *The Anxious Achiever*. We look at stories from business leaders who've dealt with anxiety, depression, or other mental health challenges, how they fell down, how they picked themselves back up, and how they hope workplaces can change in the future.

Today, we're going to look deeper at the issue of substance abuse and anxieties through the lens of an exceptionally high-functioning addict and the underlying issues that lead to those addictions.

Imagine being in one of the most stressful times of your career or your education. You work long hours, your personal life is nonexistent, you might not be sleeping, and you're not eating well. And to take the edge off, you have a drink, and then a few more. Or a friend offers you an Adderall pill. You take it, and all of a sudden, the work just happens, and you're so focused. Or maybe, you completely separate your working professional self from that other self.

Dependence on alcohol or other drugs is common in the public at large. One in eight adults struggles with both alcohol and drug use disorders simultaneously. Mental health disorders and substance use disorders are quite often co-occurring. And in 2017, there were 8.5 million American adults who had both. Addicts are people like us – people who are high functioning, who succeed in business, who become leaders. Substance abuse, and misuse, and addiction are mental struggles in and of themselves, of course. And they often mask other issues, like anxiety and depression. So later in the show, we'll hear from Dr. Zev Schuman-Olivier, an addiction psychiatrist who focuses on meditation, self-compassion, and awareness as ways to find a light at the end of the substance abuse tunnel. First, a firsthand experience. My guest is Seth Mnookin. He's a longtime journalist who struggled with addiction, and now, he works in the Comparative Media Studies Department at MIT. And you may wonder how did someone who teaches at an esteemed education institution, who's a bestselling journalist, who got in early to Harvard, hit rock-bottom.

So, I want to start off by going back deep into the days of your addiction so we can paint the picture for our audience so that they understand how serious a disease this was for you. Is there a sort of rock-bottom moment that you can recall for us?

SETH MNOOKIN: Yeah, for sure. I started using drugs and really, what I think now is pretty clear, self-medicating early on in high school. And right from day one, from the first time I got high, I never treated it as something that I would do to, sort of, party or have a good time. I just wanted to be high all the time. Rock-bottom, for me, came after college. I moved to New York City to start my career as a journalist and began using heroin almost as soon as I moved. So, the first time I used heroin was on a Sunday morning by myself. And that was the pattern that pretty much played out. I would use it every day, almost always by myself, and became physically addicted very quickly. Using heroin was the first time that I was unable to make it seem to the outside world that everything was fine and dandy.

I was nodding off. I lost my job. And after about a year of being there, I was living alone in my room. I would signal down to the street for a dealer and have them come

up. I basically didn't leave my room and was eating a combination of cranberry juice and M&Ms.

And I moved back to Boston where I'd grown up with the intention of quitting heroin. And instead, I started injecting it. And over the next two years, it was really just a series of doing things that I swore I would never do. I ran out of money often. And there was a period where I would test drugs for a dealer, so he could figure out what purity they were. I ended up injecting a lot of PCP one night and, in the middle of the winter in Boston, being naked on the street and fighting off policemen. I ended up strapped to a gurney in the hospital, and my parents were called and told that if they wanted to essentially say goodbye, they should come by soon. Because the doctors did not think, or were not confident, that I was going to make it through the night. The next morning, I checked myself out of the hospital, didn't even go home, and just went right back to the dealer's house and said, "You really owe me now." I kept on using for about 10 months after that.

Another thing I should say is that during that last year, I think I was in 10 different inpatient facilities. What I would essentially do is when I ran out of money or ran out of drugs, I would check myself in someplace because they would not try and bring you from 60 to zero right away. They would wean you off of opiates. So, I would stay there for a couple of days and essentially get a couple of days of opiates and then check myself out and try and figure out how I was going to score again.

MORRA AARONS-MELE: I was just going to say, when you first started using heroin Sunday morning, I was thinking of that song "Sunday Morning Coming Down" by Kris Kristofferson. What job did you have, and how soon did you get fired?

SETH MNOOKIN: I was the managing editor of a children's entertainment magazine. I think 5 to 10 basically. And I kept that job much longer than I should have been able to because I had a relationship with the editor in chief. My boundaries were not great at the time.

I don't remember exactly what the final precipitating incident was, but this was in 1995. The magazine was part of Time Warner's, sort of, first internet portal. I think there were 10 different magazines that were part of their first internet portal. It was called *Pathfinder*. And there was a day when we were meeting with advertisers to pitch ourselves. And we were all waiting outside the elevator banks, and the elevator opened up. And I just vomited everywhere. It must have looked like a horror movie. Here are these advertising executives about to step off the elevator. The whole staff of the magazine is assembled in front of them, and I just let loose. So, by the time that I was fired, I was essentially not functioning on any level. I wasn't showing up to work anymore.

MORRA AARONS-MELE: Looking back, I mean, you started using drugs when you were very young. What were you seeking, and what did that first instance give you that you didn't have before, in terms of your performance and your ability to function in school?

SETH MNOOKIN: One of the things that's interesting about me is that I write about science, and one of the things that I write about is cognitive tricks and

preconceptions. So, it's always difficult for me to tell when I talk about my past, going back decades, if I'm talking about a narrative that I have placed over my behavior or if that was actually what I was feeling at the time. But what I do know, the first time I got high was one morning. And I was a freshman in high school. In high school, there were different cliques. If it was *The Breakfast Club*, I would have been in the Judd Nelson, sort of, artsy, punky, ultimately druggie group. I bleached my hair. I rode a skateboard, whatever.

MORRA AARONS-MELE: But you got straight A's, correct? I mean, that's part of the mythology around you too.

SETH MNOOKIN: Yeah, I did well all throughout high school. Yeah. But the first time I used was ... there were some older girls, I think they were juniors, and I was a freshman. And they just asked me if I wanted to get high before school. And I definitely did if there were older junior girls that were inviting me. And I don't know exactly what I felt at the time. What I do know is that I had been dealing with obsessive compulsive behavior and, sort of, an anxiety disorder, or behavior that would seem to be attributed to an anxiety disorder, since I had been very young. I had had trouble sleeping since I was eight or nine. And when I started using every day, that was the first time since then that I found it easier to go to sleep.

I think what it ultimately did was just quieted down the drumbeat of anxiety to the point where it actually was easier for me to function. That was something that people who knew me would comment on all the time, that they were amazed at what I could do while I was high. And looking back, I think it's almost more while being high. And this ... I should clarify that at this point, I was sort of a garbage head and would do anything. But what I was doing most was smoking pot. And it sort of leveled me out.

MORRA AARONS-MELE: When you got to Harvard, and I know it was different in the '80's and early '90's, but it seems to me ... You get to Harvard, and a lot of the kids at Harvard are like, "I'm going places. I've got my life mapped out. I'm going to be successful. This is my ladder." Did you have that ladder? Did you have that plan for your life? Or was your drug addiction just everything?

SETH MNOOKIN: Well, it wasn't even that my drug addiction was everything. It was just that I hated those people. I did not have my life all mapped out. I didn't even have my ... I switched majors six or seven times. I gravitated towards the misfits and the kids who would have been the Judd Nelsons from *The Breakfast Club* in all of their schools. And now, we were all together.

As crazy as it sounds, we had a ... In our freshmen dining hall, there was a smoking room, which really boggles my mind. But anyway, there was a smoking room, and I was a smoker, but the smoking room also was, sort of, a place for the people who were not mapping out their career to the Senate, or preparing for law school, or whatever the case may be. We would all gravitate and get together. So, that was the group of people that I felt allied with right off the bat.

MORRA AARONS-MELE: You know, you're a writer. And I would imagine that as a writer, you observe a lot, and you think a lot. Looking back, how much has your

writing helped you understand the condition of someone with substance abuse, and how you might use that to self-medicate?

SETH MNOOKIN: So, it's something I've thought about, and it's a really interesting question. Until a couple of years ago, I never kept a journal, which seems weird to me. It almost seems like an unconsciously deliberate way to avoid looking at things too deeply. I had a mythology of the type of writer that I was going to be and that I admired. I was a huge fan of Hunter Thompson.

MORRA AARONS-MELE: How could I guess?

SETH MNOOKIN: Right. And then I actually ended up becoming friends with him. I mean, not best friends, but friends to the point where he would call me at 3:00 in the morning and say, "Seth, you're not doing anything weird, are you?" I would have to explain to him no. I was working at *Newsweek* at the time. He was the person who was going to be doing something weird at three in the morning. So, I had this, sort of, outlaw image of myself that was not actually reflective of reality in any way. So, I built my drug use into that. And for whatever reason, I did not really look at it in any kind of serious and sustained way. And I don't think I really did until a couple of years after being sober. And even then, I wasn't so much analyzing it as I was trying to understand it on an emotional level.

MORRA AARONS-MELE: And I'm sorry, how do you understand? I mean, now it's been decades. How do you understand it on an emotional level, and what's its relationship to your anxiety, your sort of internal anxiety as a person?

SETH MNOOKIN: It's definitely not coincidental that the drugs that I gravitated towards were downers, things that one could use to alleviate anxiety. I think that as I have come to grips with the levels of anxiety I feel on a daily basis, it's pretty apparent to me that a big role that drugs were playing in my life was kind of in lieu of dealing with an anxiety disorder in a way that was more appropriate or healthier.

MORRA AARONS-MELE: What is the role that anxiety plays in your life? And how do you cope with it and deal with it as a sober person?

SETH MNOOKIN: I have an anxiety disorder. I think, again, that sort of goes against the image that I had of myself as someone who could stay up until five in the morning, and then drive six hours to meet a source, and then write a magazine feature in two hours. But the reality is that anxiety affects me in big ways and small ways. Now, there are a whole bunch of different tools I have. I have been in therapy for probably 15 or 16 years. I am on medication. I have a meditation practice. And it's just something that ... Being aware of having an anxiety disorder also means that I'm aware of things that are going to make me anxious. And being aware of them allows me to kind of deal with them in a healthier way.

I mean, for instance, right now with COVID-19, my parents are in their seventies. I have two kids, one of whom has asthma. And I have been able to not only realize intellectually but, I think, also really internalize that for me, letting myself get really worked up about this would be more harmful than the actual threat of the virus at this point.

But for the most part, I am aware of when my anxiety is going to be activated. So, the bad version of my anxiety monster is that I start thinking about COVID-19, and that starts rolling downhill. And I decide that everyone in the world is going to die, or it's going to be like the 1918 Spanish flu, and 500 million people are going to die, or whatever the case is. And I sort of become paralyzed. Because I'm aware that that is one sort of throughline that I can seize hold of. And then once I do, it takes control of me. I can also, before that happens, understand a narrative that's going to be more healthy for me, that also is more true to real life.

MORRA AARONS-MELE: It's funny because I think a lot of what you're talking about is very mature and is also part of a product of maturity, as we get older and are able to reason with ourselves. You talked about wanting to be a writer like a Hunter Thompson, or a William S. Burroughs, and really living on the edge and creating art that was wrought from pain. And you're not that kind of writer, you're an incredibly successful writer. How do you think of success and your own success perhaps differently given what you've been through? And does your success feel good to you now?

SETH MNOOKIN: It's a tough question. I mean, it depends on the extent to which I'm feeling imposter syndrome at any given moment. One of the effects of using drugs almost daily from 14 to 25, with that little two year, there is that the emotional maturing that takes place. I missed a lot of that. So, I find that I still have to be aware of when I have more of a teenage kind of view of the world. It was something I had to work on a lot to enable me to have a healthy relationship and get married.

But one of the things that I've had to come to grips with as an adult that I think most people come to grips with as a teenager, is that I'm not as great as I thought I was. The reason why I'm not a Hunter Thompson or William S. Burroughs is not because they did more drugs for longer than me. It's because they're better writers than I am. And they were incredibly talented in ways that were unique. In the case of Hunter, he also just worked incredibly hard. He was someone who used to type out Hemingway's novels, so he could get a visceral feel for the language. And it's something that he very much nurtured. But he has this reputation as someone who just would kind of come down and spit out brilliance.

MORRA AARONS-MELE: Right. We don't like our bad boys to work hard. We want them to sort of go out in a flame of glory and just be hit with creative genius. We don't like to think about the work.

SETH MNOOKIN: Right, exactly. So for me, part of my dealing with my own professional life has been accepting and realizing that I am a fine writer. There are some things that I think I'm good at and am able to do. And that has allowed me to write books, write articles, and have a lot of really interesting experiences. But being more realistic about my own talents has also allowed me to feel much more grateful about the success that I do have.

There are a lot of people who are better writers than I am, who have not had the opportunity to write a book. There are a lot of people who are better reporters who've not had the opportunities that I've had. So, part of the maturing process for me has been being able to see myself more realistically and being able to be grateful for the opportunities I've been given and the ways that I've been able to take advantage of

those opportunities, instead of my default, which is, "Why am I not someplace different than I am right now?" If my book got reviewed well, why wasn't it a number one bestseller? Or if it was on the bestseller list, why was it only number eight and not number one? Or why did it sell X number of copies instead of 10 X number of copies?

So, that's been something that's been important to me and has allowed me to be more content with my life. And also, it's allowed me to kind of make sure that I'm structuring my life in a way that allows me to be content. I still have a hard time with that. I think I'm probably more miserable about work-related things, whether it's my teaching job or my writing job. But it's something that I'm aware of and I'm working towards. And that has helped me.

MORRA AARONS-MELE: Whether you're going through a struggle with substance misuse or abuse yourself, or a colleague might be struggling, it's helpful to have a bigger picture to focus on and look critically at how you think about addiction. I loved what Dr. Peter Grinspoon had to say. Now, Grinspoon himself was a well-regarded doctor who had a severe opiate addiction. He wrote, "A good first step towards successfully supporting a person in recovery is to honestly examine your own beliefs and feelings about addiction, and to make sure your response to the colleague you're about to welcome back isn't hampered by any hidden negative attitudes."

Which brings me to our next guest, addiction psychiatrist Dr. Zev Schuman-Olivier. We'll hear more about his approach to addiction that involves meditation, self-compassion, and awareness techniques.

What I wanted to ask is how often in your experience have you seen high-performing individuals who struggle with substance addiction? There's such a common trope in our society that people who are addicted to a substance that's bad for them are living a life that is outwardly falling apart.

ZEV SCHUMAN-OLIVIER: Addiction is widely prevalent. Substance use is incredibly common. Many people are using substances, or involved in addictive behaviors, in ways that others are not aware of. It is true that when people start to dedicate more and more of their time to addictive behaviors or substance use, that often that can impact the work they do in their professional life and can lead to losses and "hitting rock-bottom." Many people do manage to actually hide their behavior for a long period of time. And in fact, those who are people of means, or who have had careers that allow them to have disposable income, can and often do maintain habits for longer periods of time, because they can afford to, in ways that end up probably impacting their overall well-being, their productivity, and their mental health, as well as probably the way they are perceived by their colleagues and the way that they're able to work on teams.

MORRA AARONS-MELE: When you're working with an addict or someone who's sort of turning the corner and is in treatment, do you find that the people in their lives will then say, "Gosh, they were showing all these signs," or, "I should have known"? Is there a lot of retrospective knowing if someone has managed to sort of pass for so long?

ZEV SCHUMAN-OLIVIER: So, I should say that in my primary work, I work with individuals who have had substance use disorders or have been using substances in ways that have been unhealthy for them. And most people don't show up to come see an addiction psychiatrist like me without having had something negative happen around their substance use that has caused them to realize that they need some kind of support or help. That might be a change in their economic status, or their business is not doing as well. And the \$5,000 to \$10,000 a month that they were spending on oxycodone or on cocaine, they no longer can afford it and are looking for a way out. Or they haven't really had any consequences, per se, but they just start to realize that they can't financially afford this anymore.

I've worked with a fair number of entrepreneurs. And I think that the entrepreneurial spirit is one of taking risks and one that often leads to a lot of ups and downs and a lot of dysregulation, as far as late nights. A lot of things can make it hard to, kind of, maintain a steady schedule, which can be important for recovery.

I would just say experientially, clinically as a provider, entrepreneurs often don't have ... They often seem to see themselves as individuals who may not have to necessarily follow all the social rules that you would expect in a larger standard company. So, with that comes greater flexibility but unstable work hours and a sense of being self-invested in the potential for success in the work that they're doing.

MORRA AARONS-MELE: There's interesting work right now in the advertising industry along that line. Because creatives ... If you're creative, you can work in a huge corporate ad agency and get away with a lot of BS. And there are similar patterns, and you think of that, right? You can think of the, sort of, genius creative who might be staying up all night, fueled on whatever, but they produce beautiful work, so no one cares. I think that there are also certain professions that lend themselves to that, and our society has created this iconoclast imagery of them that can fuel bad behavior and addiction.

ZEV SCHUMAN-OLIVIER: I do think that for some people, substances fuel their creativity and also fuel their energy. We see more, I think, especially among the new generations, the millennial workforce, whose use of stimulants is much more common than I think it was 20 years ago for new employees coming into the workplace.

Stimulant use has been widespread in colleges now for probably the past decade as a way to help people with test performance or to kind of get that paper done. So, I see a lot of young adults who are entering the professional workforce that still are relying on stimulants in some way to help them have that edge or to keep up the energy that they need to keep up with the intense career that they've chosen.

At the heart of a lot of this is people really yearning or wanting something more than what they have. And a lot of people's professional aspirations is to get to some new stage or to somehow be accepted or seen as someone more than what that nagging voice inside of you thinks that you might actually be.

And in doing so, people will turn to substances often when they're worried that they'll find out just how incompetent they are or just how normal they might actually

be. I think this is actually where approaches like mindfulness and self-compassion-based approaches can really help because when we can start to accept ourselves for who we are and what we have to offer, we realize that we do add value to society, even if we're not the best of this or the best of that. And that we are lovable and welcomed inside the social circle of normal people, as one of the people that I've worked with before said. That we do have a place in that, even if we're not using substances, which can actually take away one of the things that really fuels substance use for a lot of people.

MORRA AARONS-MELE: I'm curious if you think that a moment like this, where we are all so vulnerable and we are all so open about being vulnerable, can also be a moment for someone who maybe has been sober, but is nervous, to say, "Hey team, while we're sharing, I'm going to tell you this." And if that's okay, or if that can be a helpful window opening right now...

ZEV SCHUMAN-OLIVIER: You know, I sure hope so. I try to never give explicit advice around this to my patients about whether or not they should tell. I really, kind of, have to trust people to see if they're in the place basically to follow their intuition around this, partly because the stigma around addiction has been so strong for so many years. And even though it is similar in many ways to many other chronic illnesses that we rapidly account for and express support for in workplaces, I have seen that some workplaces end up being very supportive, and others consistently are not.

So, I wouldn't just kind of come out and say, "Yes. Everyone, now is the time because of COVID-19 to forget about that." But I would say that I do think that those people who do manage to do that, and do feel like they can get the support of their colleagues, do end up seeming more resilient often in the face of stress.

I'd also say that you may not need people in your workplace to know this specific aspect, but it is good to let them know that you're going through something. And for many patients, they've often talked about it as depression or anxiety because that's one of the things that's fueling their addiction. And that, at least, has been helpful to be able to ask for help.

Because one of the things that sometimes is hardest for people with addiction, as well, is that addiction is, in many ways, a ... or one way of understanding addiction is that it's a desperate search for control as things start to feel uncontrollable. Whether it's your emotions are uncontrollable, or body sensations and bodily processes, or external life, or the economy, or your social situation, people often will start to turn to something that gives them a reliable feeling, to feel okay or good. And nothing is more reliable, at least in the short term for helping you feel good, than substances. And often, the more reliable it is, the faster the onset of euphoria with the drug, and the more addictive it's considered to be because of the reliability and the way it helps people kind of regain control in a moment where they're feeling out of control.

MORRA AARONS-MELE: It sounds so incredibly logical.

ZEV SCHUMAN-OLIVIER: Right. But unfortunately what happens is whenever we try to get in control in uncontrollable circumstances, whenever we try to get certainty

when there is, in fact, uncertainty, whenever we try to stop things from changing when, in fact, everything is changing, we generally just set ourselves up for a bigger fall later – for more uncertainty, for more change, and ultimately, for less control. And that's what happens to a lot of people with substances is that they get caught in that cycle then of searching out for those things.

Part of mindfulness, I think, is starting to really recognize the ubiquity of uncertainty, the ubiquity of our lack of control over things changing. And to the extent that we can turn towards that, welcome in uncertainty, and change or relate to it differently with less fear and more acceptance and warmth, almost like treating it like an old friend that we're seeing again, the less scary it becomes and the less we start to panic in response to those moments.

MORRA AARONS-MELE: That feels so much less logical to me. But okay.

ZEV SCHUMAN-OLIVIER: Can you say more about what you mean by that?

MORRA AARONS-MELE: Well, it's funny. One of the things ... I've talked to several Buddhists on the show. And it's very much about observing and getting unattached, right? And letting the uncomfortable feelings come and not feeling the need to attack them like your body attacks a virus. And that doesn't feel logical to me, but taking a pill to make the pain go away feels inherently logical.

ZEV SCHUMAN-OLIVIER: So, we have a choice. This is an addiction science piece. So, the brain is constantly making predictions about the way that the body needs to change or things we need to do in order to make the next moment as we want it to be.

Often though, the next moment is not exactly how we want it to be. So, our brain is constantly in every moment creating what's called predictive errors. So, it's noticing that things are just a little bit off from where they're supposed to be.

MORRA AARONS-MELE: Like what? Can you give us just a silly practical example?

ZEV SCHUMAN-OLIVIER: Yeah. So, my throat may be hurting a little bit. So, it's a little bit different than I think it ought to be. So, I then have an urge to want to drink some water, to be able to soothe my throat. This is called active inference. So, I'm now doing something active to be able to bring my perceived state to where I think it should be.

So there's a concept that's arising more recently called perceptual inference, which, instead of actively trying to bring your current state to where you think it should be, you bring your should-be state to what you're actually perceiving right now. So, it's a way of getting around this neuro-biological circuit that essentially is constantly evaluating everything and deciding if it is how it should be. And there's this tendency for evaluative feedback that our brain is constantly doing, that helps us to kind of shift our behavior over time. As we try to reduce discrepancy between how we think we should be and what we're actually experiencing.

But it also leaves us constantly feeling dissatisfied. Because even when you place that trade, and you have a big win, a million dollars come in, or a billion dollars, or who

knows, or you get that big deal, or you finally get that recognition you are waiting for from your boss, the next day, or even the next hour, even the next minute, you feel the same way again. You seem a little bit dissatisfied.

These positive, pleasant feelings don't last. And then we're back to this feeling of generally being a little dissatisfied. That's the basic nature of the brain. And it's interesting, you mentioned that this is what Buddhists talk about, because I think this is what the idea of Dukkha in Buddhism is, this kind of general ... this sense of dissatisfaction. So, it's the sense that I think is really based on this brain mechanism, that we're constantly kind of reassessing and evaluating, and realizing that things could be a little bit different. Because things are always changing.

MORRA AARONS-MELE: What evolutionary function does this fulfill? It sounds to me like our brains are always setting us up to either try to fill a hole with something or always seek more and more and more. I think you've described it almost as keeping a buzz going, right?

ZEV SCHUMAN-OLIVIER: Yeah.

MORRA AARONS-MELE: What purpose did this serve?

ZEV SCHUMAN-OLIVIER: So, this is one of the major ways that animals and organisms learn and change behavior. It gets hardwired into what's called the reward system of the brain. And so, we're constantly evaluating both our needs externally around what behaviors we should be doing, as well as just internally, the state of our body. And our bodily needs are constantly being assessed, and our body is constantly responding, often unconsciously, to various different needs. Thirst, hunger, pain, itch, tickle, temperature. When you start to actually start to pay attention to these things and bring your awareness to these stimuli and these sensations, what you can start to see is the way that they're driving behavior, driving emotions, driving thoughts. And if you can actually start to do the opposite of bringing the way things should be to accepting the way they actually are in this moment, it allows you to almost circumvent this thing that's always happening, and you often are suddenly in a moment of what feels like spaciousness and call.

MORRA AARONS-MELE: So like what? Can you give us an example?

ZEV SCHUMAN-OLIVIER: So, if we're able to just stop or slow things down and be able to turn towards whatever it is that we're experiencing. And just allow whatever it is that's arising to be there, just observing.

MORRA AARONS-MELE: So this could be anxiety that I'm going to lose my job because the economy is going to have a global crash?

ZEV SCHUMAN-OLIVIER: Yeah, yeah. It could be that. It could be that. So just observing that that's what's arising for you and noticing what that feels like in the body. Noticing what that feels like in the thoughts, noticing a fear is there, and just noticing if this is a pleasant feeling or unpleasant feeling, or maybe it's a neutral feeling. And just trying to allow that unpleasantness just to be there for a moment without kind of reacting to it or trying to get rid of it right away. Just allow that to be

there. Accept that this is an ache that's here. You don't need to make it go away. Just allow yourself to feel the ache, and maybe even turn towards yourself with some compassion and say, "I'm not the only one out there in the world that is worrying about this."

In fact, this is not the only thing people worry about. There's other things people worry about that are even bigger than me losing my job. There are people who don't have food today. Just getting a sense that this suffering, things not being the way we want them to be, is a global phenomenon. It's common humanity. We all have these moments. This happens to be my moment. Can I be kind to myself right now?

MORRA AARONS-MELE: But not diminishing the feeling. Because sometimes I think that people can feel diminished by that depending on how they were brought up, etc.

ZEV SCHUMAN-OLIVIER: "I'm deserving of being cared about. And this is a moment when this is hard for me. Can I treat myself kindly like I treat somebody else?" Absolutely. This is suffering. This is a big moment of suffering, but it doesn't mean that I need to make it go away. And if we can stay with it, even just for a little bit, stay with that unpleasantness, then what happens is we don't act out or act on a behavior, which is ultimately going to maintain that unpleasantness or keep us running from the unpleasantness.

And we will be in the clearest mindset to be able to actually navigate the coming challenges with as much focus, and presence, and calm as possible. So that when we kind of start to expand our awareness back out again and be open to what's really here in front of us, we can do it from a place of gratitude that we're able to be kind to ourselves, that we're able to find a moment of presence and peace within this chaotic change. That's going to actually help us navigate what's coming up better. If not, maybe we're worried about work or might lose our job, and we come home and yell at our kids. We tell our wife or husband, who made dinner, that, "I don't have time for this right now." And we go sit by the computer and think about the email we're going to send to try to prevent ourselves from getting fired or whatever it might be.

MORRA AARONS-MELE: I would just drink a half a bottle of wine.

ZEV SCHUMAN-OLIVIER: And then as soon as that's done, we drink a full bottle of wine or Jack Daniel's. And now, everyone's miserable, and we haven't actually done anything to be able to help ensure our job or prepare ourselves for whatever the next step is that needs to happen. So, the more and more that we avoid what is arising in each moment, the farther we get from being able to work with what we have.

Some things are out of our control. If every night we're drinking a bottle of wine, very soon we're going to have another problem on our hands, which is that we can't stop drinking that bottle of wine. And now, not only do we not have a job, but we also need to find a bottle of wine that we're paying for every night and make time to drink. So, I think people get caught up.

But at any point, what we can do is to start to just observe what's arising. We can stop and try to allow it to be there. And any effort we make to allow what is arising to

be there actually gains us wisdom and gives us the opportunity to be more skillful in the next moment for our response. And over time, that changes people's behavior and their outcomes and probably their effectiveness in their workforce.

MORRA AARONS-MELE: That's it for this week's show. If you like what you've heard, tell a friend or rate us on iTunes or wherever you get your podcasts. And if you have a question or a topic that you'd like to see featured on the show, you can email anxiousachiever@gmail.com or tweet me @morraam. That's M-O-R-R-A A-M. Many thanks to Mary Dooe, my amazing producer, and the team at Harvard Business Review. And of course, to our advertisers, who keep us going, and to my guests. And if you like *The Anxious Achiever* music, it's by Bryan Campbell at Signal Sounds NYC. From HBR Presents, this is *The Anxious Achiever*, and I'm Morra Aarons-Mele.