

DOES YOUR
THERAPIST'S
GENDER MATTER?

WHY YOU
OVERRATE YOUR
OWN IDEAS

TEENS ONLINE:
WHAT WORRIES
EXPERTS MOST

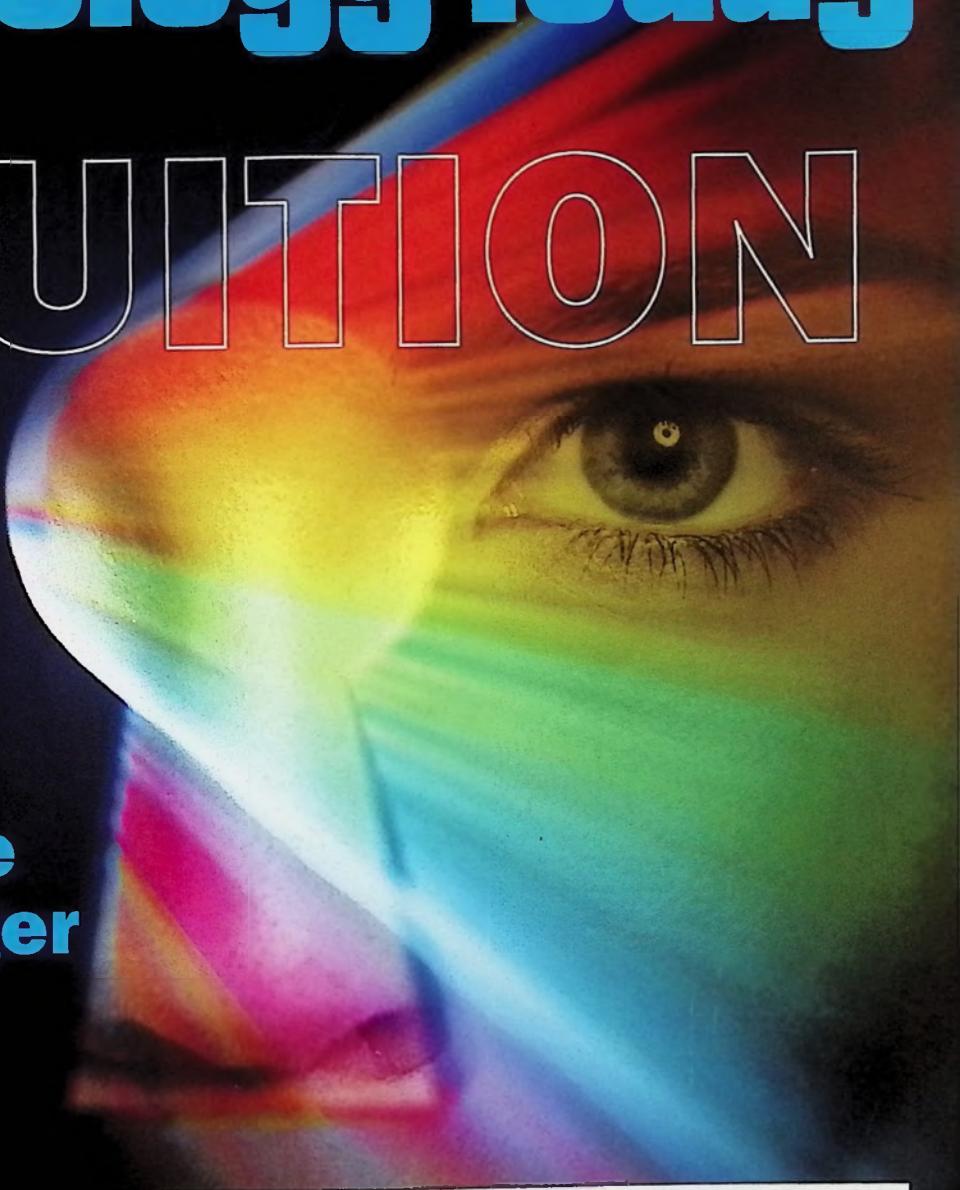
WHY PEOPLE
CYBERSTALK
THEIR PARTNERS

Psychology Today

PSYCHOLOGYTODAY.COM
AUGUST 2023

INTUITION

*When To
Trust Your
Sixth Sense
About Danger
Romance
Health
And More*



CAR-RT LOT#R-021 MIX COMAIL M

TIFFANY CHEKIE
EXCEL PSYCHIATRIC ASSOCIATES, P.A.
10225 HICKORYWOOD HILL AVE STE B
HUNTERSVILLE NC 28078-3431
001269460
582-PSYT1
PS334

10225 HICKORYWOOD HILL AVE STE B
HUNTERSVILLE NC 28078-3431
001269460
582-PSYT1
PS334



naturally extraordinary



New York/S.Connecticut



(212) 247-5296
80 Warren Street
New York, NY 10007
www.synlawn.com

Contents

JULY/AUGUST 2023, VOLUME 56, NO. 4



Intuition

Premonitions, instincts, and gut reactions: What they can tell us and what they can't.

By PT Contributors

3 | Editor's Note

5–6 | Insights

Inside the minds of animals.

7 | Unconventional Wisdom

Drama on a wedding night.

COVER ILLUSTRATION: JUSTIN METZ

PHOTOS: COFFEE & MILK/E+/GETTY IMAGES, ISTOCK



PERSONALITY

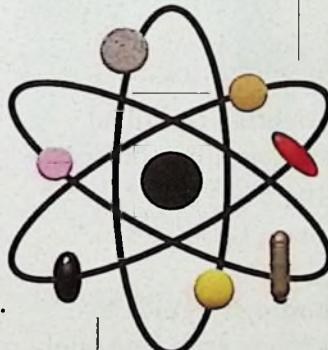
9 | Eccentric's Corner

Deontay Wilder takes on mental health.

RELATIONSHIPS

13 | Trust

Is it OK to snoop on your partner online?



HEALTH

17 | Supplemental Science

How to energize your mind.

TREATMENT

21 | Therapy

Does your therapist's gender matter?

ONE QUESTION

48 | Brandon Wolf

After tragedy, healing through purpose.

Speakup! Send feedback and comments to letters@psychologytoday.com.

CLOCKWISE FROM TOP LEFT: AARON CONWAY, EDDIE GUY, KARJEAN LEVINE, JULIA KONOVALIK/ISTOCK, APOMARES/ISTOCK

PSYCHOLOGY TODAY (ISSN 0033-3107) is published bimonthly by Sussex Publishers LLC., 115 E. 23rd Street, 9th Floor, New York, NY 10010. Periodical postage paid at New York, NY 10010, and at additional mailing offices. Subscription rates: \$19.97 for one year in the United States and its possessions; \$23.97 for one year in Canada; and \$29.97 per year foreign, prepaid in U.S. funds. (CANADA GST NBR. R135582138.) POSTMASTER: Send all UAA to CFS. (See DMM 507.1.5.2); NON-POSTAL AND MILITARY FACILITIES: Send address corrections to Psychology Today, P.O. Box 37968, Boone, IA 50037-0968. Subscribers: Change your address by emailing the old and new information to: subscriptions@psychologytoday.com, or mail to Psychology Today, P.O. Box 37968, Boone, IA 50037-0968, or call (800) 234-8361. Copyright © 2023 by Sussex Publishers LLC. All rights reserved. Psychology Today is a registered trademark. Material in this publication may not be reproduced in any form without written permission. Direct permission requests to Timothy Loo, Psychology Today Permissions, 115 E. 23rd, 9th Floor, New York, NY 10010 or licensing@psychologytoday.com. For back issues, send \$10.00 each for May/June 2003 to present (foreign orders add \$5 shipping fee for each issue) Psychology Today Back Issues, 115 E. 23rd Street, 9th Floor, New York, NY 10010. Sussex Publishers cannot be held responsible for unsolicited manuscripts, photographs, or other materials. Printed and manufactured in the United States.



32

Teens Online

Just how dangerous is it to grow up on the internet? Experts weigh in.

By PT Contributors



38

The Certainty Trap

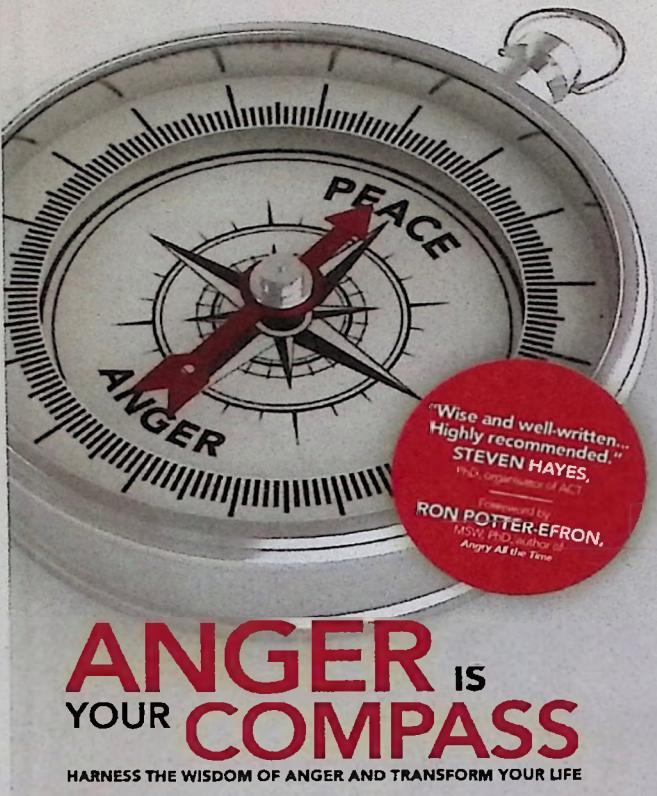
Call it cognitive narcissism. It's why you overrate your own ideas.

By Bruce Grilerson

HARNESS THE WISDOM OF ANGER AND TRANSFORM YOUR LIFE

THIS GROUNDBREAKING FRAMEWORK SHOWS YOU HOW TO **ACCESS THE WISDOM OF ANGER** AND ATTAIN EMOTIONAL LIBERATION.

MOSHE RATSON, MBA, MFT



"This book is comprehensive, insightful, and filled with helpful tips. Read it, apply it, and your life is bound to change for the better."

RAPHAEL CUSHNIR, author of *The One Thing Holding You Back*

"*Anger Is Your Compass* is as thorough a guide to understanding and taming anger as I have seen. The book guides you step by step to a better, more fulfilled life."

FREDRIC LUSKIN, PhD, author of *Forgive for Good*

Moshe Ratson
MBA, MFT

A psychotherapist and executive coach in NYC. As a leading voice in the world of personal and professional development, he specializes in anger management, emotional intelligence, infidelity issues, communication and couples and marriage therapy.

SCAN TO
LEARN MORE!



Psychology Today

EDITOR IN CHIEF Kaja Perina
kaja@psychologytoday.com

CREATIVE DIRECTOR Edward Levine
ed@psychologytoday.com

EXECUTIVE EDITOR Lybi Ma
lybi@psychologytoday.com

SENIOR EDITOR Gary Drevitch
gary.drevitch@psychologytoday.com

SENIOR ASSOCIATE EDITORS Abigail Fagan
abigail.fagan@psychologytoday.com

Devon Frye
devon.frye@psychologytoday.com

Tyler Woods
tyler.woods@psychologytoday.com

EDITOR AT LARGE Hara Estroff Marano
hmarano@psychologytoday.com

COPY EDITOR Pamela Dailey

PHOTO EDITOR Moya Mc Allister

CONTRIBUTING EDITOR Nando Pelusi, Ph.D.

VICE PRESIDENT, BUS. DEV. Batya Lahav

VICE PRESIDENT, PRODUCT Crispin Roven

DIGITAL OPERATIONS MNGR. Mark Khan

CIRCULATION DIRECTOR Robert Berner
robert@psychologytoday.com

CONTROLLER Timothy Loo

OFFICE MANAGER Erika Brito

NEW YORK

EASTERN ADVERTISING DIRECTOR
Alan Berman
aberman@psychologytoday.com

LOS ANGELES

WESTERN ADVERTISING DIRECTOR
Diana Sofko
T: (310) 458-6557
diana@psychologytoday.com

ADVERTISING SERVICES MANAGER
Erika Brito
cbrito@psychologytoday.com

PRODUCTION DIRECTOR
Ray Ramcharitar
ray@psychologytoday.com

RIGHTS AND PERMISSIONS

Timothy Loo
115 East 23rd, floor 9, New York, NY 10010
T: (646) 763-6354; fax (646) 607-5995
licensing@psychologytoday.com

CEO John P. Colman

EXECUTIVE VICE PRESIDENT, PUBLISHER John W. Thomas
johnthomas@psychologytoday.com
T: (646) 763-6362

FOUNDER Nicolas H. Charney, Ph.D.



In consideration of the environment, please recycle this issue of Psychology Today.

Editor's Note



The Shrinking Zone Of Conversation

Talking by taking a step back.

FEAR OF JUDGMENT stops many people from sharing their beliefs. Some don't want to admit that they maintain a personal cosmology built on experiences that can be chalked up to intuition. They think others won't understand.

Those who have intuited the death of a loved one, or had the experience of love at first sight, know that these are among the most powerful split seconds one can experience. Here's what it is not: repeatable, actionable, or falsifiable.

Such experiences—for me and for many others—may become central to our own life narrative. Even if they have no predictive power within the wider world, their ability to color an individual life is clear.

In the case of intellectual or evidence-based beliefs, it is not necessarily the ideas one holds most dear, but the facts one considers fundamental to reality, that people increasingly decline to share.

The window of allowable discourse is closing, and there's less that people can actually talk about without being judged or canceled, even as there's much that needs to be discussed.

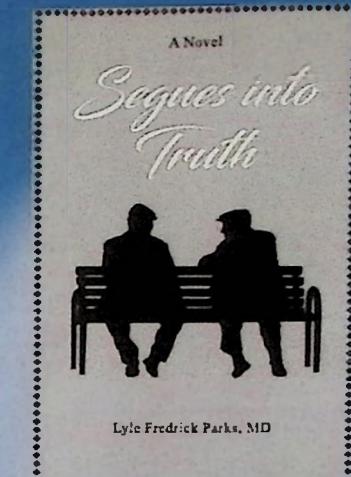
Whether it's an affiliation with a political party or fast-hitting attraction to a particular person, there's a strong tendency to resort to a heuristic that allows us to justify our stance and call it a day. We can, however, challenge ourselves to question our own judgments; we have tools to that end in this issue.

So consider this paradox: What would happen if people held beliefs more loosely, even as they shared them more widely? If we all moved just a bit more in that uncomfortable direction, the theater of public opinion might become less savage and more sage.



Twitter: @KajaPerina

SUBSCRIBERS: Make subscription inquiries and/or change your address by emailing the old and new information to: Subscriptions@PsychologyToday.com. You can also call (800) 234-8361 or write to *Psychology Today*, P.O. Box 37968, Boone, IA 50037-0968. *Psychology Today* is published by Sussex Publishers LLC., 115 East 23rd Street, 9th Floor, New York, NY 10010, (646) 763-6354; fax (646) 607-5995.



Hardcover, 168 pages

Segues into Truth

If you are an alcoholic or a member of Alcoholics Anonymous - you must read this book!



Lyle Fredrick Parks, MD has written a riveting account of how a suicidal, end stage, alcoholic, attorney finds the psycho-spiritual cure for alcoholism.

"A profoundly moving journey from cover to cover, highly recommended"

Midwest Book Review

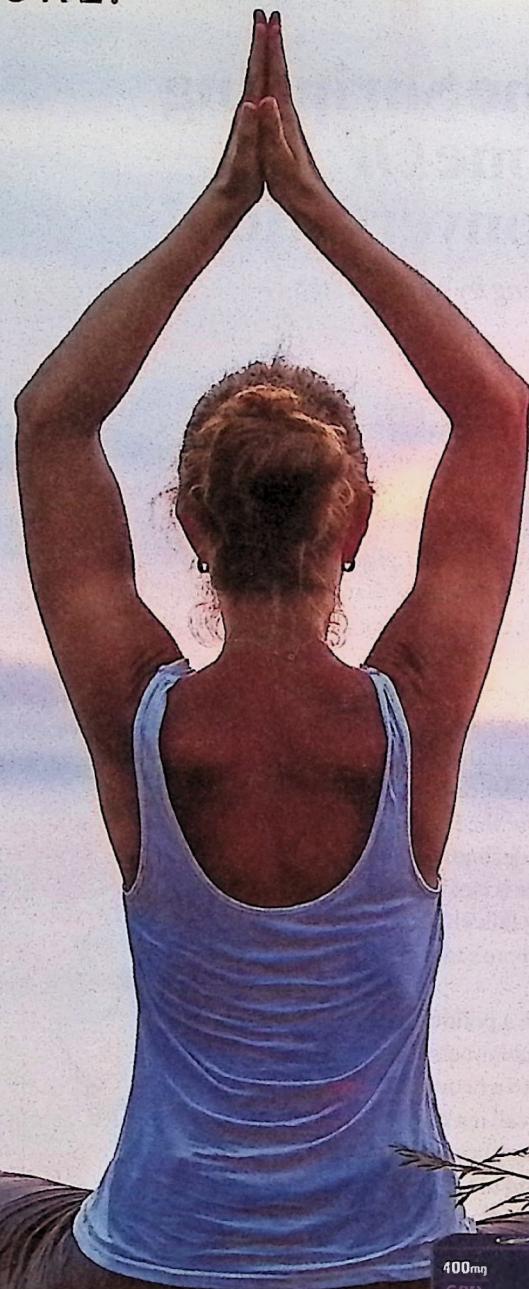
Available at amazon.com
or wherever books are sold.



DORRANCE
PUBLISHING CO., INC.

Wellness.

IT'S IN OUR NATURE.



curaleafhemp.com



InSights

The Real Reason Sharks Might Bite You

Only a few very bold sharks may pose a danger to humans.

SERIOUS SHARK BITES ARE

remarkably rare, but their randomness can still strike fear in the hearts of swimmers everywhere. A popular but unproven theory posits that sharks bite humans due to mistaken identity, confusing them for seals or other prey. But a new paper offers a more plausible explanation—one that could help make sharks a bit less scary.

Writing in the journal *Behaviour*, marine biologists Eric Clua and Carl Meyer argue that the mistaken-identity hypothesis, despite its appeal, has some glaring holes. For one, it assumes that sharks rely on vision as much as humans do. In reality, sharks rely on multiple senses when discriminating prey, making it unlikely that they would bite based on vision alone. What's more, bites often occur in clear water or are committed by species that don't prey on anything remotely human-size.

If sharks aren't making "mistakes," why do they bite? The authors propose a natural-exploration hypothesis, arguing that sharks continuously explore their environments and sometimes investigate novel objects by biting them. Because sharks don't teach their young, individuals must develop predatory skills on their own—and, lacking hands, have little choice but to use their mouths to examine unfamiliar objects.

But sharks, like people, have personalities, Clua explains. "The two main traits linked to shark bites are boldness vs. shyness and risk-taking vs. risk avoidance." The good news? The vast majority of sharks—upwards of 95 percent, he estimates—tend toward shyness and risk avoidance. Only a few bold risk-takers are likely to bite the unknown.

Disabusing ourselves of the idea that bites are mistakes could, Clua hopes, change our perception of sharks as mindless biting machines. "The fact that some 'deviant' sharks exist doesn't make all sharks a problem," he notes; most sharks, in fact, are nothing to fear.

—Mary Bates, Ph.D.

BAD DOG— OR BAD OWNER?

Owners of aggressive dogs frequently engage in antisocial behavior themselves.

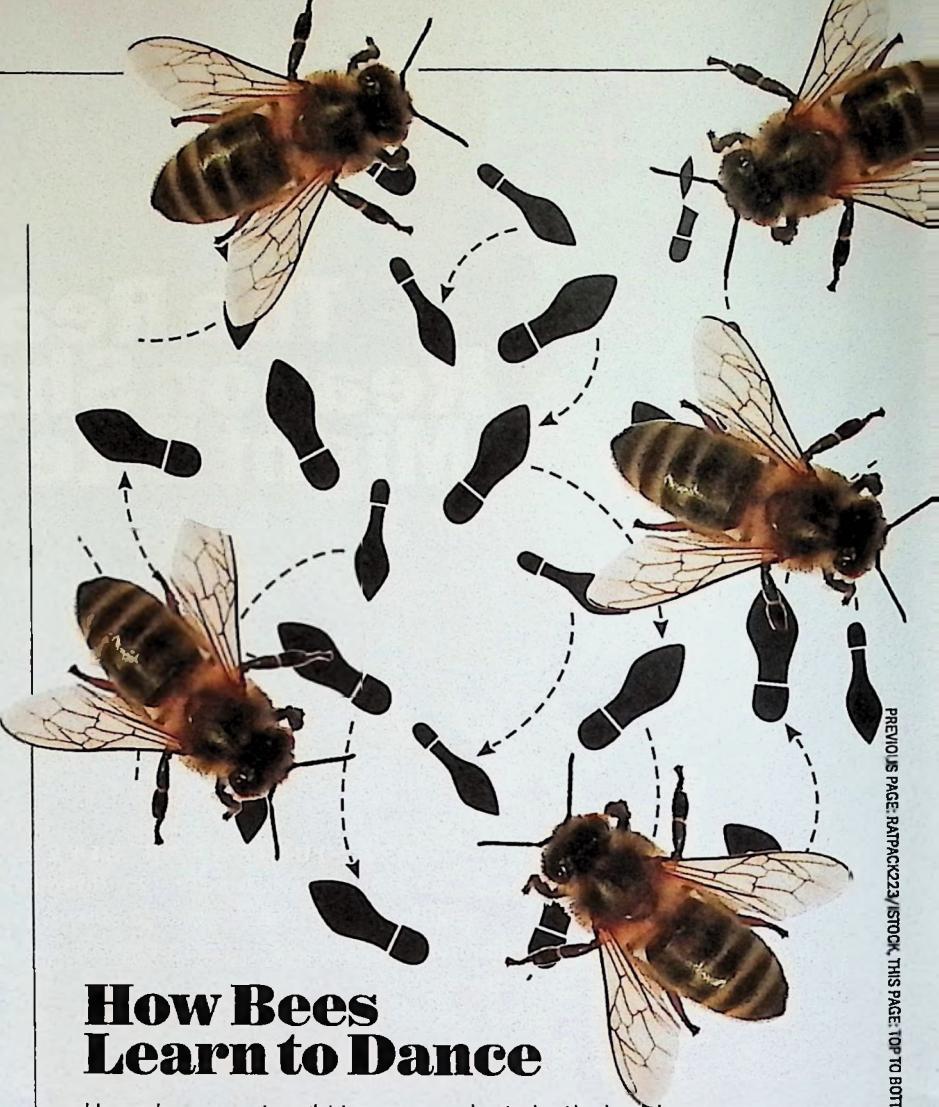
A POPULAR DOG-training philosophy decrees: "There are no bad dogs, only bad owners." While the statement's veracity remains up for debate, a recent study may find some truth in the "bad owner" idea.

The study analyzed reports from 374 aggressive dog-biting incidents, as well as data on the owners' behavior. During the incidents, 63 percent of owners provided no assistance to victims; 20 percent were aggressive toward them. Owners were also prone to antisocial behavior elsewhere in life: 17 percent had abused animals, 15 percent had engaged in antisocial behavior like shouting at strangers, and 7 percent had been reported for domestic violence.

It's likely not as simple as antisocial owners deliberately raising aggressive dogs, warns study author Ineke van Herwijnen of Utrecht University; hereditary and environmental factors have a hand in dog behavior. "Human choice, however, does determine a lot for dogs," including how they're bred, treated, and trained. Antisocial humans may be unwilling or unable to make choices in their dog's best interest—and spotting warning signs early could help prevent bites before they occur. —Stanley Coren, Ph.D.



Do plants cry when they're stressed? A recent study found that plants that have recently been cut or that are dehydrated emit ultrasonic sounds not audible to humans.



How Bees Learn to Dance

Honeybees are taught to communicate by their elders.

THE HONEYBEE waggle dance has long been lauded as one of the planet's most complex animal communication systems. Now, research finds that the dance isn't wholly innate and must be learned from other bees—making it a novel example of social learning in insects and placing it closer to human language than once thought.

A team of Chinese and American researchers isolated newborn bees from mature bees. When the newbies started producing their first waggle dances—which are unique to each colony and communicate the distance, direction, and quality of a nearby resource—they made more errors than bees raised

in normal colonies. When the inexperienced bees were placed back with mature bees, they began to improve their dances but never learned how to convey distance correctly—suggesting that while every honeybee is born with a basic template, they must watch elders to learn the nuances of the local dance.

This makes the waggle dance a kind of social learning—a cardinal property of our language. Children need exposure to fluent speakers to learn and acquire concepts unique to their tongue. The waggle dance works similarly: Newborn bees modify their instinctual waggle skills based on how their elders dance—much like the way humans generate new dialects to shape a language around the lives of those who use it. —Justin Gregg, Ph.D.



HARA ESTROFF MARANO
askhara@psychologytoday.com

Life After Abuse

I AM A SURVIVOR of a very abusive marriage that lasted nearly a decade. But with therapy and support from others, I got out, rebuilt my life, and remarried six years ago. My only sister was my maid of honor. Her partner, on major pain medication following back surgery, consumed ample amounts of liquor, and publicly and viciously verbally abused her. She spent the night with her two

children in my honeymoon suite fearing for her safety while my new husband and I spent our wedding night at our home babysitting a drunk and aggressive man-child. This man has never made an effort to apologize. He still drinks and abuses my sister. I have tried to educate her about abuse. Every time I see her partner I am confronted with an abuser I have spent my adult life moving away from. I do not want to carry this burden forever.

CONGRATULATIONS ON ALL the work you've done to save yourself. You not only escaped from abuse but rebuilt your life. It must be frustrating to find that your hard-earned wisdom can't save your sister. Still, your concerns suggest three fronts on which you can move to relieve the burdens you now carry.

First, Man-Child occupies a huge chunk of your mental real estate. The irony is, you can move away from preoccupation with him by approaching him—about his behavior toward you, and you only. You can meet in a public place for a conversation in which you state matter of factly, without confrontation or humiliation, how he has wronged you by ruining a big day of your life, offer the opportunity to apologize, and set terms for a relationship. This is constructive, empowering, and the adult way to handle problems. (If you are worried about the potential for harm, ask your husband to be seated nearby but out of earshot.)

But before you approach M-C, take a look at yourself. Your intense reactivity to his presence suggests that you still have some recovery work to do. Yes, you left your abuser behind, but what still has you in thrall are the cues of abuse that M-C embodies.

Yet a third matter needing care is your relationship with your sister. You are learning the hard way that you

**You are learning
the hard way that
you can't change anyone
else but yourself.**

can't change anyone else but yourself. Nor can you control the relationship between M-C and your sister.

When I asked New York therapist Susan Birne-Stone what else might help, she pointed to the need for compassion for your sister. After all, you stayed in an abusive relationship for nearly a decade. Your sister "needs to find her own path to realizing that she deserves not to be abused." Birne-Stone suggested that the two of you might benefit from a few sessions with a family therapist.

She added one more thing: It would be helpful to stop seeing your sister as a "victim"—it's psychologically defeating—and instead regard her as someone who has issues that are keeping her stuck in a relationship with a person experiencing substance abuse. It's always difficult to see loved ones struggling, but it's part of being human—and the subject of much writing from the beginning of recorded history from which to draw wisdom. ■

PACIFICA
GRADUATE INSTITUTE
SANTA BARBARA, CALIFORNIA



Pacifica's unique mission primarily attracts innovative and creative working professionals who are interested in a rigorous intellectual experience that connects with their souls and positively transforms how they see the world. A Pacifica graduate degree equips them for the vocation they feel called to, whether to enhance what they are already doing or equip them for new and additional work in the world.

Master's & Doctoral Programs

M.A. in Counseling Psychology

Psy.D. in Counseling Psychology

M.A./Ph.D. in Clinical Psychology

M.A./Ph.D. in Depth Psychology with Specializations in

- Jungian and Archetypal Studies
- Community, Liberation, Indigenous, and Eco-Psychologies

M.A. in Engaged Humanities and the Creative Life

M.A./Ph.D. in Mythological Studies

Ph.D. in Depth Psychology with Specialization in Integrative Therapy and Healing Practices



www.pacifica.edu

Pacifica is accredited by the Western Association of Schools and Colleges (WASC).



Stonyfield
ORGANIC

2 INGREDIENT YOGURT DOUGH!

MAKE ANYTHING FROM PIZZA TO
PRETZELS AND GARLIC KNOTS WITH
THIS AMAZINGLY SIMPLE RECIPE

EVERYTHING
—You Can Make—
**WITH OUR 2 INGREDIENT
YOGURT DOUGH**

READY IN: 20 MINUTES

LEVEL: EASY

PREP: 10

COOK: 10

GATHER:

2 CUPS SELF-RISING FLOUR, PLUS MORE FOR DUSTING
1 CUP OF YOUR FAVORITE STONYFIELD® YOGURT
WE RECOMMEND PLAIN WHOLE MILK GREEK

1 COMBINE FLOUR AND YOGURT ON A CUTTING BOARD OR IN A BOWL. MIX WITH HANDS UNTIL DOUGH FORMS.
(THE DOUGH MAY APPEAR DRY AND CRUMBLY AT FIRST, BUT IT WILL COME TOGETHER AS IT'S MIXED.)

2 PLACE DOUGH ON LIGHTLY FLOURED WORK SURFACE, AND KNEAD UNTIL SMOOTH AND SLIGHTLY ELASTIC.
(ABOUT 4 MINUTES, DUSTING WITH MORE FLOUR AS NECESSARY.)

CHEF'S NOTE:

IF THE DOUGH FEELS TOO DRY, ADD WATER
A TABLESPOON AT A TIME.

3 VISIT STONYFIELD.COM/DOUGH FOR ALL
OF OUR FAVORITE RECIPES USING THIS 2 INGREDIENT
YOGURT DOUGH



Personality

ECCENTRIC'S CORNER



Deontay Wilder
confronts mental health
in a brutal business.

Pulling No Punches

Heavyweight boxer Deontay Wilder squares up with vulnerability. By Tyler Woods

A

MERICAN HEAVYWEIGHT DEONTAY WILDER was not especially boastful or triumphant after knocking out Robert Helenius in October 2022. In fact, he broke down crying out of concern for his opponent, who had been taken to the hospital, and for the health and well-being of boxers in general. Wilder, who held the heavyweight title from 2015 to 2020 and has won 43 matches in his career, recently spoke to *PT* about his men-

tal health journey, including empathy, meditation, and the benefits of crying.

It's rare to see a boxer cry out of compassion after a match. What were you feeling after the Helenius fight? Being a fighter, you go in there and put your life on the line for others' entertainment. I was speaking also of another

fighter, Prichard Colon. [Colon is currently in a vegetative state after an injury suffered in the ring.] Prichard was the breadwinner of his family. Now, he can't feed himself. To see this young man, his life all of a sudden changed, seemingly in the snap of a finger, that saddened me. Doctors always tell me, "The head is not meant to be hit." This is a cold business.

Most pro fighters start training as kids, but you didn't box until you were 20.

You were a delivery driver but became an Olympic medalist less than two years later. What was that path like?

Well, it wasn't that easy. But the whole reason I started boxing was because of my daughter, Naieya Wilder, who was born with spina bifida. We had a big decision to make before she was born, whether to carry on with the pregnancy and go through the different obstacles in life we were going to have to face, or to terminate the pregnancy. We felt she deserved to live, and I decided I was going to take on all the responsibilities that come with taking care of a child with her condition. I started boxing because I needed quick money, something I could do legally to support my child.

You've said that the mental health of boxers is visible only behind the scenes. What should people know that they don't know? A lot of fighters don't want to reveal what's going on with them. They try to be tough, to keep that persona up. But PTSD is very common among fighters. Mental illness is a big thing in boxing. I think a lot of fighters should get checked out.

How do you support other fighters?

We need each other, and we need to show love. It can be words of affirmation or confirmation. One thing is just saying, "Man, I love you! How you doing today?" We need that feeling

that somebody loves me. Somebody cares for me. Somebody is thinking about me. I tell fighters I love them or give them my ears because they want to release something. That four-letter word is a powerful word: love.

Your hometown, Tuscaloosa, Alabama, recently unveiled a bronze statue of you. What did that mean for you? Where that statue lies, the Klan used to hang blacks. Blacks were prohibited from even going in that area

may not like what you do. It's a cleanse of my body to remove some of the bad and allow something good to come in.

You built a meditation room in your house. What is your practice like?

Meditation gives me clarity and confirmation. It humbles me. I like to use meditation with visualization: Say I want to win a race, an obstacle course, so I'm visualizing how I want this course to go. I know that there's a corner right here and a step right there.

You're planning how you want to do it so when you actually get ready to run the race, it's almost like you've done it before.

Is that part of how you prepare for a fight? When I'm in the ring, there might be thousands of people in the audience, but because of my meditation practice, I'm able to zone out everybody. It's like smoke that only I can see that blocks out everything else and that gives me peace of mind. A lot of things have lined up for me due to the exercise I put in on my mind, the exercise of my brain.

You've spoken about battling depression earlier in your life.

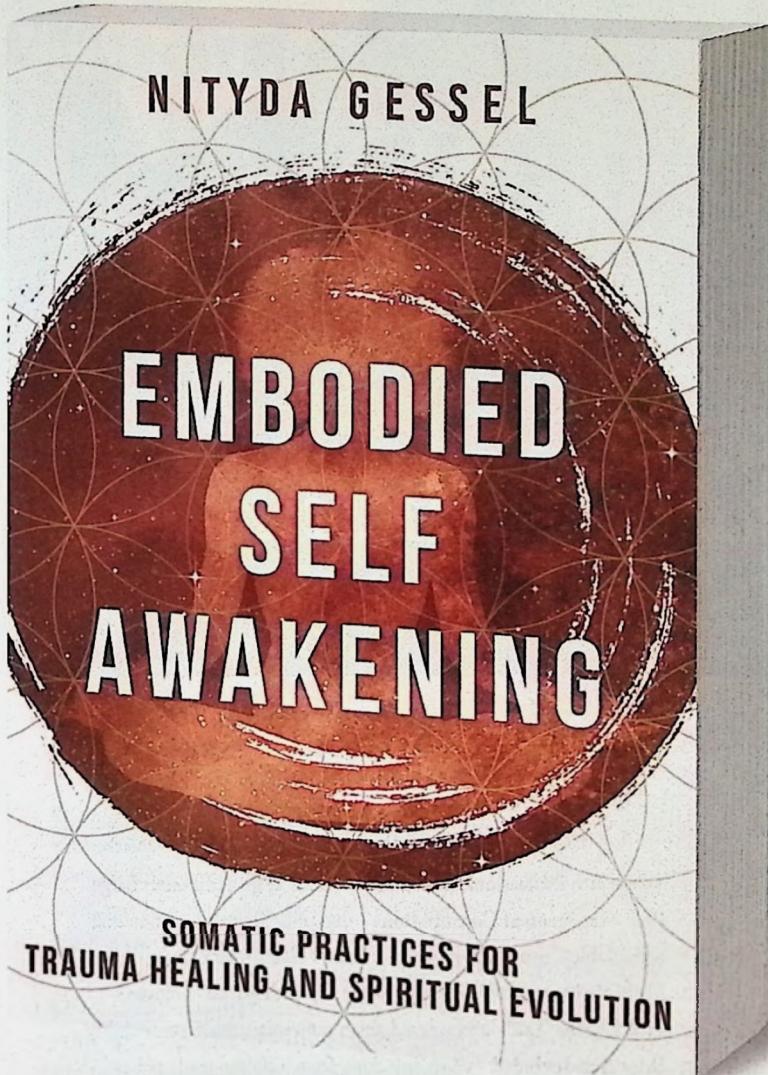
What do you do to ward it off and find happiness? It can be hard to love yourself. I still have my emotional roller coaster, sometimes still feel like I'm not doing enough. One thing I learned is not to let people throw emotional garbage at you, because it will soak in. You'll start to think, "I can't do that" or "I am no good." Some people think having all this money is the prototype for happiness, but they are mistaken. I came to a realization that I don't need to have all these materialistic things. All I need to be happy is simplicity: to be able to sleep, to eat, to take care of my family. ■

Fighters don't want to reveal what's going on with them. Mental illness is a big thing in boxing.

unless they were cleaning houses. Up the street, there's a building where they used to sell slaves. So when I saw old folks, old black people, come up to it, I knew the significance of seeing a statue of a black man in that area. They said they had heard about it, but they had to see this with their eyes. That brought me to tears, and I just couldn't stop.

You've been open about the value of crying. Crying is cleansing. I hold a lot of stuff in. And when you do that, there could be a time where it's like a volcano: You're gonna erupt, and you

A Spiritual Path to Healing Trauma



Nityda Gessel has creatively and intelligently woven insights from Buddhist psychology, trauma theory, and Indigenous wisdom into an accessible guide. Anyone looking to deepen their spiritual path while engaging their psychological journey will find *Embodied Self Awakening* both practical and inspiring."

—Kimberly Ann Johnson, author of *Call of the Wild: How We Heal Trauma, Awaken Our Own Power, and Use it For Good*

In this book, Nityda Gessel invites readers on a journey toward lasting freedom, with insights and experiential practices that marry the wisdom of Buddhist psychology, yogic teachings, and Indigenous understanding with somatic psychotherapy and neuroscience. With Gessel's invitation, readers will learn to look out into the world, and see more than their own trauma reflected back.

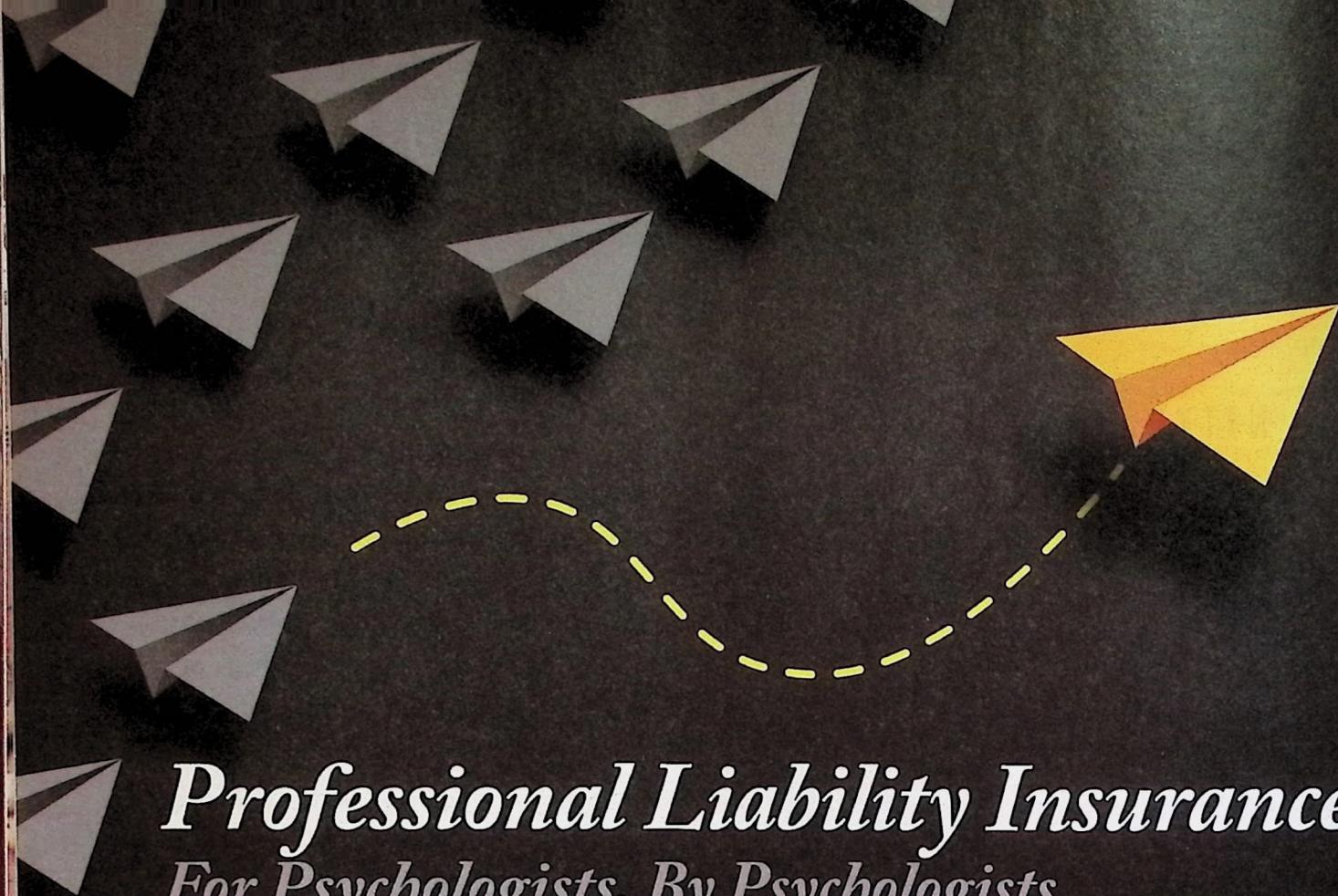


Nityda Gessel, LCSW, E-RYT, is a somatic psychotherapist, trauma specialist, yoga teacher, speaker, writer, and heart-centered activist. Gessel has devoted her life to uplifting others, working at the intersection of Eastern spirituality, holistic mental health, and embodied activism.



NORTON

Available wherever books are sold.
Learn more at www.norton.com/embodied



Professional Liability Insurance

For Psychologists, By Psychologists

Wherever Life Takes You

Whenever you provide psychological services – whether in a clinical, consulting, forensic, academic or telepsych setting – you put yourself at risk for a potential lawsuit or licensing board complaint.

The Trust has proudly supported and protected psychologists for 60 years. Take the important step of protecting yourself by securing a Trust Sponsored Professional Liability* insurance policy!

The Trust Has You Covered

When you're with The Trust, you're more than a policyholder. You're part of a community of like-minded peers with a common goal of making the world a better place, one patient at a time.

In so many ways, we have you covered - because at The Trust, we're about more than just insurance!

* Insurance provided by ACE American Insurance Company, Philadelphia, PA and its U.S.-based Chubb underwriting company affiliates. Program administered by Trust Risk Management Services, Inc. For cost and complete details, call The Trust or visit www.trustinsurance.com.

Complete Career Financial Protection

- Telehealth Professional Services - included at no additional charge
- Risk Management Consultations - free, unlimited and confidential
- Affordable Coverage Options - choice of claims-made or occurrence
- Multiple Premium Discounts - some of which can be combined
- Free ERP or 'Tail' - unrestricted, upon retirement, death or disability
- Prior Acts Included - when switching from a claims-made policy
- Free CE & Discounts - on a variety of live and on-demand courses

**The only insurance provider that's truly
for psychologists, by psychologists!**

THE TRUST
INSURANCE PROGRAMS

www.trustinsurance.com | (800) 477-1200

Relationships

TRUST

Should You Cybertrack Your Partner?

The desire to know what a partner is up to all the time can lead to cyberstalking behaviors that erode trust and threaten relationships.

By Martin Graff, Ph.D.

IMAGINE THIS situation: A man goes to sleep and leaves his phone by the bed. While he slumbers, his partner, who knows his pass-code (or perhaps has face or fingerprint access), opens it and, without his permission, starts checking his messages.

Is this normal? Is it acceptable? Does it depend on the partner's motive? And, appropriate or not, what in the partner's personality drives them to do it? These were some of the questions addressed in a recent study on electronic tracking in relationships.

It's a matter of some debate whether checking up on an intimate partner's activity using phone searches, location tracking, or other techniques should be considered a form of stalking. If it doesn't escalate to harassment or menacing, some may consider such monitoring to be no problem, while others may see it as profoundly violating.

Intimate-partner monitoring can



be driven by a range of motivations, depending on the type of connection the couple shares. Some people who feel insecure about a relationship may engage in online tracking to try to confirm a long-term partner's continuing commitment, while a short-term partner may check someone's devices to acquire background information about them, such as a history of sexual promiscuity.

It is also possible, though, that someone's willingness to monitor an intimate partner online may be related to their personality—specifically, being high in one or more of the traits known

as the Dark Tetrad, which includes narcissism, Machiavellianism, psychopathy, and sadism. The new research, led by Evita March, a psychologist at Federation University in Ballarat, Australia, specifically explored this possibility and indeed found a connection between these traits and someone's willingness to stalk online.

The researchers set out to investigate both the methods individuals used in the tracking, monitoring, or cyberstalking of intimate partners to obtain otherwise hidden information and the personal drivers of the behavior. They

investigated methods used in both short- and long-term relationships, whether the mating goals involved acquiring or retaining a mate, and the presence of Dark Tetrad traits.

Intimate-partner tracking was measured with a 21-item survey in which participants responded to such statements as "I have used or considered using phone apps to track my partner's activities," "The majority of my time spent on social networking sites is looking at my partner's pages," and "To a certain extent, my partner should expect that I would log into their online accounts." Subjects were asked whether they would engage in each behavior, or not, in four different contexts: within a long-term relationship; within a short-term relationship; with the goal of acquiring a partner; and with the goal of retaining a mate.

The team classified intimate-partner online tracking into three different types before analyzing their data: passive (such as checking the online status of a partner); invasive (such as checking a partner's emails, texts, or call history); and duplicitous (such as using the location settings on a partner's phone to see where they've been).

Who's More Likely to Track?

The researchers found that men and women both reported being more likely to passively track a partner than to use invasive or duplicitous methods. This is understandable when we consider that the benefits of duplicitous tracking are often superseded by the risk—and that it involves more effort than other techniques.

Behavior that could be considered stalking is more typically imagined to be a male pursuit, but the team's findings suggest the reality is somewhat different, at least when it comes to online techniques. The research team found that, overall, women were more likely

to engage in intimate-partner tracking than men, using both passive and invasive techniques. Women also were more likely than men to engage in invasive tracking both to retain a long-term partner and to secure a short-term one.

The researchers suggest that this gender difference could be explained in evolutionary terms. Since mistakes made in partner choice are potentially costlier for women, who invest more in parenting compared to men, cybertracking may be a relatively low-risk way to help them avoid selecting the wrong mate. The team did note that it

intimate-partner tracking. However, when the researchers looked at each type of tracking separately, they found only psychopathy to be related to all three techniques—passive, invasive, and duplicitous. This is not especially surprising; as psychopathy involves little concern about potentially hurting others, there's no reason any form of partner-tracking behavior should give pause to those who are high in this trait. The presence of narcissism, Machiavellianism, and sadism, on the other hand, did not track with invasive techniques, and Machiavellianism was not linked to duplicitous methods.

Anyone thinking about engaging in cybertracking should stop and think about whether their anxiety about a partner's commitment is actually based on that person's behavior or is instead driven by their own insecurity, relationship history, or, indeed, their personality-driven tendencies, which are admittedly not always easy to recognize.

Men, in particular, may want to consider the evolutionary explanation proposed by the researchers. With a clear understanding of why women may be more concerned that a male

partner will remain committed, men might become more open and honest in their relationships and resist any instinct to keep secrets or hide aspects of their everyday lives from their partners.

Relationships are built on trust and often broken by its absence, so even if, as this research suggests, one's cybertracking is not entirely driven by distrust, it sends a clear and concerning signal to a partner that it is. ■

Evolution may explain why women are more likely to cybertrack.

was somewhat unexpected that women reported using invasive tracking to secure short-term partners when those techniques clearly depend on having a greater knowledge of the target than one would expect to be available in a short-term relationship—for example, having access to their partner's online accounts.

The Stalking Personality

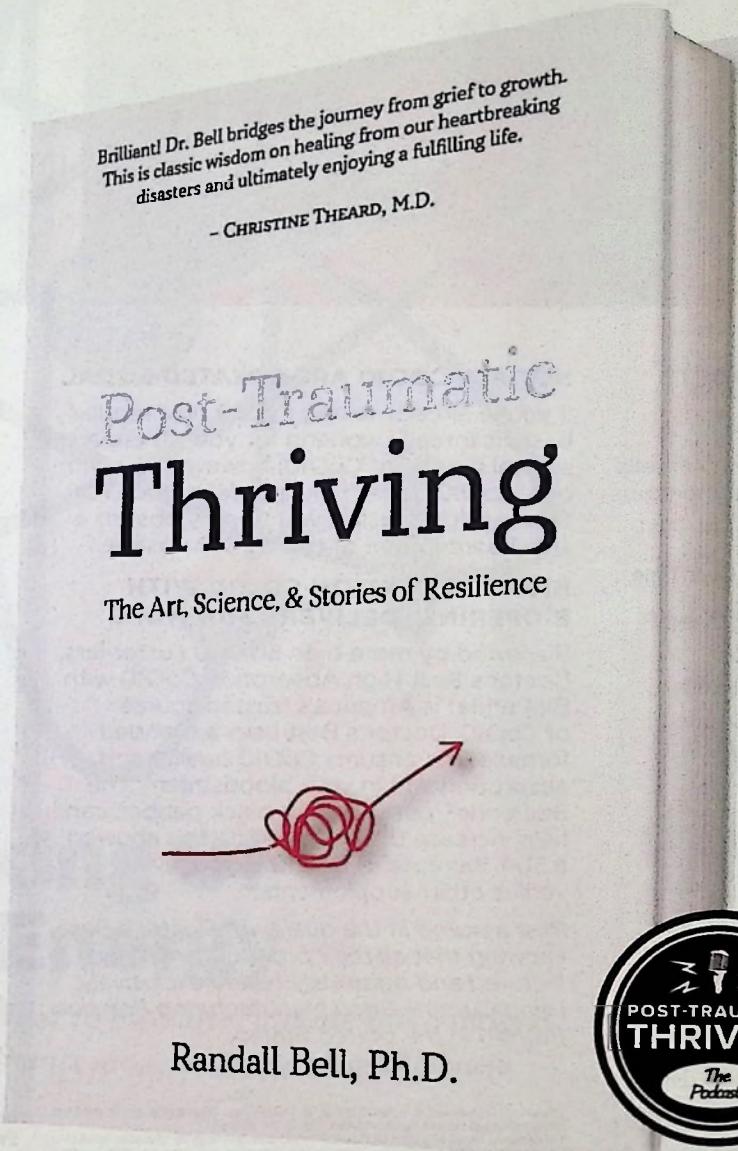
This research confirmed that higher levels of Machiavellianism, narcissism, psychopathy, and sadism were in fact linked to higher levels of

Martin Graff, Ph.D., is a senior lecturer and the head of research in psychology at the University of South Wales.

“A MUST READ”

...NOT ONLY FOR EXPERIENCED PROFESSIONALS WHO TREAT THOSE AFFECTED BY TRAUMATIC EVENTS BUT THOSE WHO HAVE EXPERIENCED IT AS WELL.

**MITCHELL GOLDSTEIN, MD
EDITOR-IN-CHIEF NEONATOLOGY TODAY**



At bookstores everywhere! Be sure to check out the podcast on Apple & Spotify.
PostTraumaticThriving.com



kindle



BARNES
&NOBLE

ARE YOU TIRED OF FEELING TIRED?

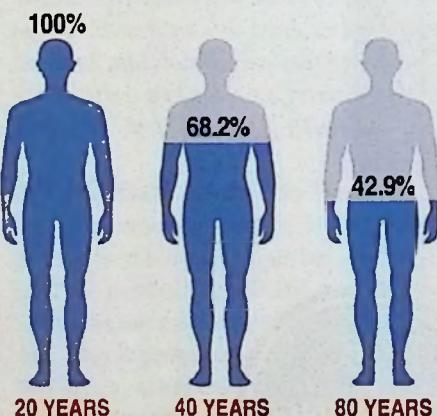
GET MORE OUT OF EACH DAY!



DO YOUR CELLS NEED A BOOST?

CoQ10 occurs naturally in your body, primarily in your mitochondria, which helps provide energy to power your cells and reduce oxidative stress. As you age, your CoQ10 levels decrease.

The Concentration of CoQ10 Levels Over Time Decreases Year by Year⁴



NOT ALL COQ10 ARE CREATED EQUAL

If you're already taking CoQ10 on a regular basis, is it really working for you? There are several brands of CoQ10; however, one with only CoQ10 doesn't always deliver consistent results, causing you to only absorb a small percentage of the CoQ10 dosage.

HIGH ABSORPTION COQ10 WITH BIOPERINE® DELIVERS 30% MORE

Reviewed by more than 50,000 customers, Doctor's Best High Absorption CoQ10 with BioPerine® is America's trusted source of CoQ10. Doctor's Best uses a branded formula that ensures CoQ10 quality and absorption within your bloodstream. The BioPerine®, derived from black pepper, can help increase the absorption.⁵ This showed a 30% increase in CoQ10 blood levels versus other supplements.⁶

Rest assured in the quality of Doctor's Best, knowing that all their products are manufactured and rigorously tested exclusively using Current Good Manufacturing Practice (cGMP) in the United States.

DID YOU KNOW?

MORE THAN 1 IN 3 ADULTS ARE ELIGIBLE FOR OR TAKING A STATIN⁷

Statin medications and age can make maintaining CoQ10 levels even more difficult. Statins reduce LDL cholesterol, and they can also decrease your CoQ10 levels.² Even in people not taking a statin, scientists found that supplementing with CoQ10 helped reduce fatigue and improve physical performance.³



★★★★★ Excellent!

Verified Purchase Rewarded Review

"I really like this product. I didn't realize how much of a difference that it was making for me until I quit taking it for a month and then resumed supplementing with it again. WOW! I won't make that mistake again. This will definitely remain a mainstay in my supplementing regimen."

Disclaimer: Not medical or professional advice.

¹ Mercado C, DeSimone A, Odom E et al. Prevalence of Cholesterol Treatment Eligibility and Medication Use Among Adults. MMWR Morb Mortal Wkly Rep. 2015;64:1305-1311.

² Ghianda G, Oradell A, Manta A, Lippa S, Ucciali L, Caputo S, Greco AV, Litarru GP. Evidence of plasma CoQ10-lowering effect by HMG-CoA reductase inhibitors: a double-blind, placebo-controlled study. J Clin Pharmacol. 1993 Mar;33(3):226-9. doi: 10.1002/j.1542-1690.1993.tb03948.x.

³ Mizuno K, Tanaka M, Nazaki S, Mizuma H, Alaka S, Tahara T, Sugino T, Shirai T, Kajimoto Y, Kuratsune H, Kajimoto O, Watanabe Y. Antifatigue effects of coenzyme Q10 during physical fatigue. Nutrition. 2008 Apr;24(4):293-9. doi: 10.1016/j.nut.2007.12.007.

⁴ Kalén A, Appelkvist, E-L and Dahlner, G. (1989). Age-related changes in the lipid compositions of rat and human tissues. Lipids, 24: 579-584.

⁵ Khajuria A, Thusu N, Zutshi U. Piperine modulates permeability characteristics of intestine by inducing alterations in membrane dynamics. Influence on brush border membrane fluidity, ultrastructure and enzyme kinetics. Phytomed. 2002; 9:224-31.

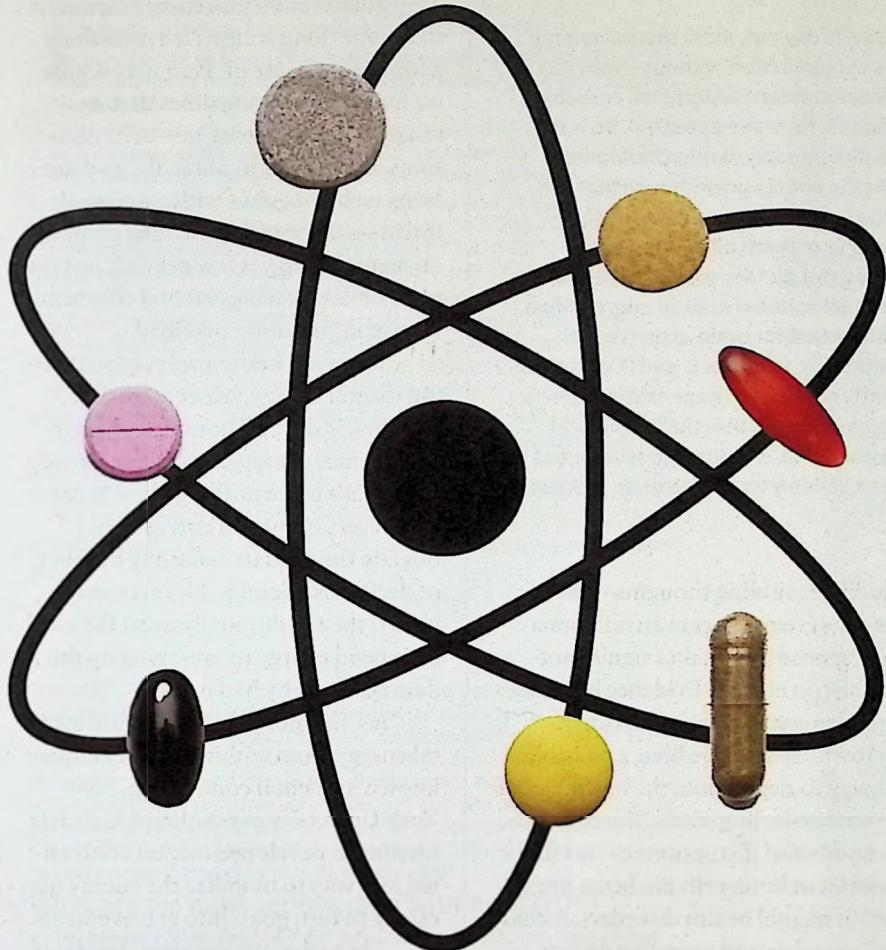
⁶ Badmaav V, Majeed M, Prakash L. Piperine derived from black pepper increases the plasma levels of coenzyme Q10 following oral supplementation. J Nutr Bio-chem. 2000;11: 109-13.

AVAILABLE AT: DRBVITAMINS.COM

iHerb

amazon

SPROUTS[®]
FARMERS MARKET



The Making Of Mental Energy

It's hard to define, harder to measure, but mental energy is something everyone wants more of. By Hara Estroff Marano

IT'S ONLY 2 percent of your body weight, but your brain consumes 20 to 25 percent of your metabolic energy. And that's just on idle, the energy cost to keep your 86 billion neurons and give-or-take 164 trillion synapses on stand-by.

Once the brain is activated, energy demands quickly multiply. Paying attention is an energy-guzzler requiring mental effort, the applica-

tion of self-control. Decision-making, empathy, even meditation consume mental resources. Taking in information and processing it, conducting a quick inventory check against memory, maintaining focus and interest, to say nothing of suppressing distraction—whew, it's exhausting just thinking about it.

You can't think much at all—or laugh, or respond to danger, or dream about the future, or even remember where you put the car keys—without mental energy. It's quite literally at the heart of everything you do and sets the agenda for doing anything at all. Straddling the mind-body divide, mental energization consumes oxygen, glucose, and a full suite of macro- and micronutrients, requiring your heart to step up its pumping action. It's reflected in a rise in blood pressure.

The Missing Link

Despite its sine-qua-non status, mental energy is a missing factor in most accounts of psychic operations. It's not even clear what mental energy is. One model sees it as one part mood state (feelings about having the capacity to complete mental or physical activities), one part cognition (reflected in tests of attention and speed of information processing), and one part motivation (determination and enthusiasm).

The Profile of Mood States scale (POMS) measures mental energy by the level of endorsement of such adjectives as *vigorous*, *enthusiastic*, and *dynamic*. There's no agreed-upon measure of or method for assessing mental energy.

Although motivation and mental energy are often used interchangeably, there's reason to see them as different phenomena. "I think of motivation as the wanting," says psychologist Roy

Baumeister, "and the energy goes into the doing and the thinking. Motivation is one of the foundations of the psyche, closely linked to what you need to survive and reproduce. Wanting can be there in people with high or low mental energy."

Baumeister in fact shook up the world of modern psychology in the late 1990s by introducing the idea that mental energy is a major player in everyday mental life. He put forth evidence that—to a degree still much in debate—self-regulation, the centerpiece of the brain's executive function, is an energy-dependent phenomenon. Self-control (aka willpower) draws on finite energy sources, and a demanding task requiring self-control will impair performance on a subsequent task—so-called ego depletion. It's not that motivation flags but that energy, furnished by glucose, gets pretty much used up.

"We chose the term 'ego depletion' as a sort of homage to Freud because we couldn't find anybody since Freud who said the self was made out of energy, at least in part," Baumeister says. "We weren't buying the rest of Freud's model." All life, he notes, is an energy process.

Whatever mental energy is, it plays a role in shaping personality and accomplishment over the life span. The late behavioral geneticist David Lykken saw mental energy as the companion ingredient that catapults talent into genius. He considered it a capacity shared by great thinkers and achievers from Archimedes to Isaac Newton, Ben Franklin, Alexander Hamilton, Teddy Roosevelt, and Pablo Picasso.

The Cost of Inflammation

As mental energy is closely linked with intellectual performance, so is it tied to immune function.

Activated by stress and infection—any threat, external or internal,

The Energy Pantry

Day in, day out, most mental energy is acquired from without—from diet. Macronutrients—proteins, carbohydrates, fats—are essential. So is the entire panoply of micronutrients. As the energy powerhouse that it is, the brain definitely needs a steady supply of them all. Many people reach for dietary supplements designed to boost mental energy. Most important for brain activity are B vitamins, vitamins C and D, omega-3 fatty acids, and magnesium. There's also evidence that the amino acid L-theanine, a natural constituent of tea, reliably increases brain arousal.

including troubling thoughts—the immune system triggers an inflammatory response that makes significant demands on energy. Evidence indicates that inflammation also shifts attention towards negative bias, a possible pathway to depression, the mother of all low-energy-feeling states. (Increasingly, any number of disruptions to metabolic processes in brain cells are being implicated in mental health disorders, including depression and cognitive decline.)

It's tempting to think that the polar opposite of mental energy is fatigue, that they are the extreme ends on a single continuum. But there's some evidence that they are distinct states supported by different mechanisms and serving differing needs. Sitting at a desk all day decreases energy without necessarily increasing fatigue. And moderate exercise has been shown to increase energy without affecting levels of fatigue.

Neurotransmitter systems seem to differ between the two: Energization, driven by dopamine and norepinephrine, supports approach behavior; fatigue, facilitated by serotonin and inflammatory cytokines, underwrites

avoidance behavior. The opposite of energy isn't fatigue, some find, it's apathy.

Whatever mental energy turns out to be, one thing is clear: It's something people want more of. Perhaps because we live in disquieting times that we struggle to make sense of—even decisions about what to put in the garbage bring us face-to-face with existential threats—there are unrelenting demands on mental energy. Or maybe it's just the price of having a big cerebral cortex in a time of information overload.

There are known ways of sustaining mental energy. Most accessible, perhaps, is the judicious use of whatever mental energy individuals already have. Habits are nothing if not great conservers of mental energy. They obviate the need to make any number of decisions. Good habits are even better; they additionally avert the need to expend energy on mopping up the damage done by bad habits.

It's also possible to generate mental energy from within by a technique known as mental contrasting. New York University psychologist Gabriele Oettingen developed mental contrasting as a way to mobilize the energy necessary to turn goals into achievements.

The technique requires imagining a future you want to attain—writing a book, say—and the best outcome of that desired goal—feelings of accomplishment and pride. The critical part is then avoiding pure fantasy by contrasting your wishes with the reality of the work necessary to attain them.

The judgments people then make about how likely they are to attain the desired future are activating, and the energy mobilization can be measured physically in tests of hand-grip strength. Further, Oettingen finds, mental contrasting gives rise to a universal arousal state in which energy is transferrable to mental tasks wholly unrelated to the fantasy that birthed it. ■



rivaroxaban
tablets & oral suspension

Consumer Brief Summary for XARELTO® [zah-REL-toe] (rivaroxaban) Tablets & XARELTO® [zah-REL-toe] (rivaroxaban) for Oral Suspension

What is XARELTO® used for?

XARELTO® is a prescription medicine used to:

- Reduce the risk of stroke and blood clots in adults with atrial fibrillation
- Reduce the risk of forming a blood clot in the legs and lungs of adults who have just had hip or knee replacement surgery
- Treat blood clots in the veins of your legs (deep vein thrombosis or DVT) or lungs (pulmonary embolism or PE)
- Reduce the risk of blood clots from happening again in adults who continue to be at risk for DVT or PE after receiving treatment for blood clots for at least 6 months
- Reduce the risk of serious heart problems, heart attack and stroke in adults with coronary artery disease (a condition where the blood supply to the heart is reduced or blocked) when used with low dose aspirin
- Reduce the risk of a sudden decrease in blood flow to the legs, major amputation, serious heart problems or stroke in adults with peripheral artery disease (a condition where the blood flow to the legs is reduced), and includes adults who have recently had a procedure to improve blood flow to the legs, when used with low dose aspirin
- Help prevent blood clots in certain adults hospitalized for an acute illness and after discharge, who are at risk of getting blood clots because of the loss of or decreased ability to move around (mobility) and other risks for getting blood clots, and who do not have a high risk of bleeding
- Treat blood clots or reduce the risk of blood clots from happening again in children from birth to less than 18 years, after receiving at least 5 days of treatment with injectable or intravenous medicines used to treat blood clots.
- Help prevent blood clots in children 2 years and older with congenital heart disease after the Fontan procedure.

XARELTO® was not studied and is not recommended in children less than 6 months of age who:

- were less than 37 weeks of growth (gestation) at birth
- had less than 10 days of oral feeding, or
- had a body weight of less than 5.7 pounds (2.6 kg)

Take XARELTO® exactly as prescribed by your doctor. **Do not change your dose or stop taking XARELTO® unless your doctor tells you to.** Your doctor may change your dose if needed. Your doctor will decide how long you should take XARELTO®. Your doctor may stop XARELTO® for a short time before any surgery, medical or dental procedure. Your doctor will tell you when to start taking again after your surgery or procedure. Do not run out of XARELTO®. Refill your prescription before you run out. When leaving the hospital following a hip or knee replacement, be sure you have XARELTO® to avoid missing doses. If you take too much XARELTO®, go to your hospital emergency room or call your doctor right away.

What are the most serious risks with XARELTO®?

- For people taking XARELTO® for atrial fibrillation: Do not stop taking XARELTO® without talking to the doctor who prescribes it for you. Stopping XARELTO® increases your risk of having a stroke. If you have to stop taking XARELTO® your doctor may prescribe another blood thinner medicine to prevent a blood clot from forming.
- Spinal or epidural blood clots (hematoma). People who take a blood thinner medicine (anticoagulant) like XARELTO®, and have medicine injected into their spinal and epidural area, or have a spinal puncture have a risk of forming a blood clot that can cause long-term or permanent loss of the ability to move (paralysis). Your risk of developing a spinal or epidural blood clot is higher if: a thin tube called an epidural catheter is placed in your back to give you certain medicine; you take NSAIDs or a medicine to prevent blood from clotting; you have a history of difficult or repeated epidural or spinal punctures; you have a history of problems with your spine or have had surgery on your spine. If you take XARELTO® and receive spinal anesthesia or have a spinal puncture, your doctor should watch you closely for symptoms of spinal or epidural blood clots. Tell your doctor right away if you have back pain, tingling, numbness, muscle weakness (especially in your legs and feet), loss of control of the bowels or bladder (incontinence).

What are the important warnings?

- XARELTO® can cause bleeding which can be serious, and rarely may lead to death. This is because XARELTO® is a blood thinner medicine that reduces blood clotting. While taking XARELTO®, you are likely to bruise more easily and it may take longer for bleeding to stop. You may have a higher risk of bleeding if you take XARELTO® and have certain other medical problems. You may have a higher risk of bleeding if you take XARELTO® and take other medicines that increase your risk of bleeding, including: aspirin or aspirin containing products; long-term (chronic) use of non-steroidal anti-inflammatory drugs

(NSAIDs); warfarin sodium (Coumadin®, Jantoven®); any medicine that contains heparin; clopidogrel (Plavix®); selective serotonin reuptake inhibitors (SSRIs) or serotonin norepinephrine reuptake inhibitors (SNRIs); other medicines to prevent or treat blood clots. Tell your doctor if you take any of these medicines. Ask your doctor or pharmacist if you are not sure if your medicine is one listed above.

- Call your doctor or get medical help right away if you or your child develop any of these signs or symptoms: unexpected bleeding or bleeding that lasts a long time, such as: nose bleeds that happen often; unusual bleeding from the gums; menstrual bleeding that is heavier than normal or vaginal bleeding; bleeding that is severe or you cannot control; red, pink or brown urine; bright red or black stools (looks like tar); cough up blood or blood clots; vomit blood or your vomit looks like "coffee grounds"; headaches, feeling dizzy or weak; pain, swelling, or new drainage at wound sites.

XARELTO® is not for use in people with artificial heart valves.

XARELTO® is not for use in people with antiphospholipid syndrome (APS), especially with positive triple antibody testing.

Who should I tell my doctor?

Before taking XARELTO®, tell your doctor about all of your medical conditions, including if you or your child:

- Have ever had bleeding problems, liver or kidney problems, antiphospholipid syndrome (APS), or other medical condition.
- Are pregnant or plan to become pregnant. It is not known if XARELTO® will harm your unborn baby.
 - Tell your doctor right away if you become pregnant during treatment with XARELTO®. Taking XARELTO® while you are pregnant may increase the risk of bleeding in you or in your unborn baby.
 - Females who are able to become pregnant: Talk with your doctor about pregnancy planning during treatment with XARELTO®. Talk with your doctor about your risk for severe uterine bleeding if you are treated with blood thinner medicines, including XARELTO®.
 - If you take XARELTO® during pregnancy tell your doctor right away if you have any signs or symptoms of bleeding or blood loss.
- Are breastfeeding or plan to breastfeed. XARELTO® may pass into your breast milk. Talk to your doctor about the best way to feed your baby during treatment with XARELTO®.

Tell all of your doctors and dentists that you or your child are taking XARELTO®. They should talk to the doctor who prescribed XARELTO® before you have any surgery, medical or dental procedure. Tell your doctor about all the medicines you or your child take, including prescription and over-the-counter medicines, vitamins, and herbal supplements.

Who should not take XARELTO®?

Do not take XARELTO® if you or your child:

Currently have certain types of abnormal bleeding. Talk to your doctor before taking if you currently have unusual bleeding or are allergic to rivaroxaban or any of the ingredients in XARELTO®.

What are the side effects of XARELTO®?

XARELTO® may cause serious side effects:

The most common side effect of XARELTO® in adults was bleeding.

The most common side effects of XARELTO® in children include:

- bleeding
- vomiting
- cough
- inflamed stomach and gut

Call your doctor for medical advice about side effects. You may report side effects to FDA at 1-800-FDA-1088.

What important facts should I know?

- This information is not complete. How to get more information:
 - Talk to your healthcare provider or pharmacist.
 - Visit www.Xarelto.com to obtain the FDA-approved product labeling.
 - Call to report side effects to FDA at 1-800-FDA-1088.

Janssen — Your Partner for Cost Support

At Janssen, we don't want cost to get in the way of treatment you need. We can help you explore options to lower your out-of-pocket cost for XARELTO®.

Explore savings options at JanssenCarePath.com/Xarelto.

YOUNG PEOPLE NEED SKILLS TO MANAGE THEIR MENTAL HEALTH. WE CAN HELP.

From expert assessment and compassionate treatment to robust support and educational programming, we help kids succeed.

877.771.0650
mclean.org/child



Treatment

THERAPY



WHEN DAVE, * 35, first sought help for the depression that had plagued him for years, he felt instinctively that the most effective therapist for him would be a woman.

A childhood spent in all-boys schools had left Dave with a sense of competitiveness around other men, a desire to prove himself. "There's a sizing up that guys do with one another that I felt I wouldn't be able to let go of, even in a therapeutic space," he says. "I've always felt more at ease opening up with women."

Dave's gut preference is far from unusual. While plenty of people who seek therapy don't give much thought

Does a Therapist's Gender Matter?

Some clients have strong preferences, but other factors matter more than gender in creating a good therapeutic alliance. By Devon Frye

to a prospective clinician's gender, to others it matters deeply. Should people heed these preferences, or disregard them? Here's what clinicians advise.

What Makes for Good Therapy

Therapists—old or young, male or female, psychodynamic or cognitive-behavioral—generally agree: The strongest predictor of whether therapy helps someone is not the therapist's gender, nor the client's. It's the connection that therapist and client create—the *therapeutic alliance*—that is built on empathy, acceptance, and mutual respect. "These are qualities that go beyond gender," observes Santiago Delboy, a clinical social worker in Chicago.

Decades of research bear this out. One meta-analysis of 295 studies, examining more than 30,000 clients in total, found that a strong therapeutic alliance was robustly associated with the best treatment outcomes. The alliance

was measured via statements like "My therapist and I respect each other" and "I feel I am working together with the therapist in a joint effort." The effect held regardless of therapeutic modality, patient characteristics, or location. Nor did it matter whether therapy was conducted online or in-person.

When research directly examines the link between gender and therapy outcomes, by contrast, the results are more mixed. Some studies show small boosts in symptom reduction when therapist and client are gender-matched; others do not. One study of 500,000 U.S. veterans found that therapy retention rates were higher for women who saw female therapists than for men who saw male therapists—but this may have been due to women being more likely to stick with therapy in general.

To some degree, the question is moot. The field of psychotherapy itself is marked by a significant gender skew. Upwards of 70 percent of therapists today are women; some clients have diminishing choice in the matter.

What Shapes a Gender Preference?

It's not known how many people search for therapists with a specific gender in mind. In one study of more than 2,000 men, reported in *Counselling Psychology Quarterly*, the majority (60 percent) had no preference as to their therapist's gender; of the rest, just as many preferred male as female therapists. Some studies suggest that women are more likely than men to state a preference and tend to prefer female therapists, but by a small margin.

What shapes preferences is highly individualistic, but there are some common influences. Trauma is one, says Lantie Jorandby, a psychiatrist in Jacksonville specializing in addiction: "Many women who have been traumatized have been traumatized by

men—not all, but a large portion."

Conversely, men who have been traumatized may find it especially challenging to confide in a female therapist out of fear of looking weak. "When I worked in a VA setting, a lot of male veterans didn't want to talk to me about their time in the theater of war," recalls Jorandby; they assumed she couldn't understand. Only a therapist who has shared essential aspects of their experience could comprehend what they had been through.

All manner of past experiences can inform a person's therapeutic preferences, and while this is understandable, those seeking a clinician should be aware that they might be limiting their search for reasons that will prove unfounded. A good clinician understands but defies gender-based stereotypes.

A man who has a history of clamping up with his female partners might view talking to another man as less daunting; a woman who has a tumultuous relationship with her mother might anticipate that the same unhealthy dynamic would develop with a female therapist. Similarly, a woman may think, "I don't want a male therapist if I'm dealing with issues related to being a new mom." A man who tends toward stoicism might assume that female therapists will be "touchy-feely," or that male ones will be action-oriented. But these stereotypes, Delboy warns, can interfere with finding a therapist who is the right fit.

How to Find the Right Therapist

"Sometimes, [gender preferences] are worth listening to," Delboy says. Indeed, the *Counselling Psychology Quarterly* study found that the men who saw a therapist of their preferred gender tended to report better outcomes than those who didn't.

Trauma treatment may warrant

some gender specificity, too. Jorandby finds that women who have been traumatized often feel much more comfortable seeing a female therapist, facilitating a better bond. Some research finds, too, that the gender-diverse can be hesitant to broach gender-related issues with cisgender therapists, even if they like them, and may feel more secure with a gender-diverse one.

Yet in many other cases, preferences are worth challenging—especially those rooted in stereotype. That's not because there's never any truth in them, says Elizabeth Heaney, a counselor in Asheville, North Carolina. It's because good therapists are flexible, always adapting their approach to the needs of each person they see: "*Oh, this person comes on super strong and direct; I'd better match that. This person is hesitant, a bit shy; I need to dial it down.*" Competent therapists are skilled at such attunement. Fears of a female therapist being "too emotional" with a stoic male, for example, are often unfounded.

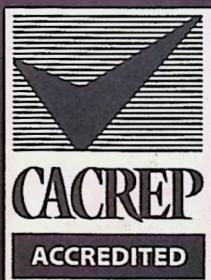
Finding a therapist one gels with can take a little work; Dave saw seven or eight before he met one with whom he felt he clicked. But there are some consequential signals to look for in a first meeting that can help speed the process, Heaney says. Do you feel seen and heard? Do they pick up on subtleties? Are they responsive and engaged? Perhaps most important: Do they add pieces to your understanding? A good therapist of any gender will help clients connect the dots and pull them toward greater self-knowledge, she explains, not just let them ramble.

Dave still suspects that he'd be less forthcoming with a male provider. But the bond he shares with his therapist—a female psychoanalyst a few years his senior—goes beyond gender. "I started by assessing demographics, but it ultimately boiled down to who was best able to guide me through my life," he says. ■

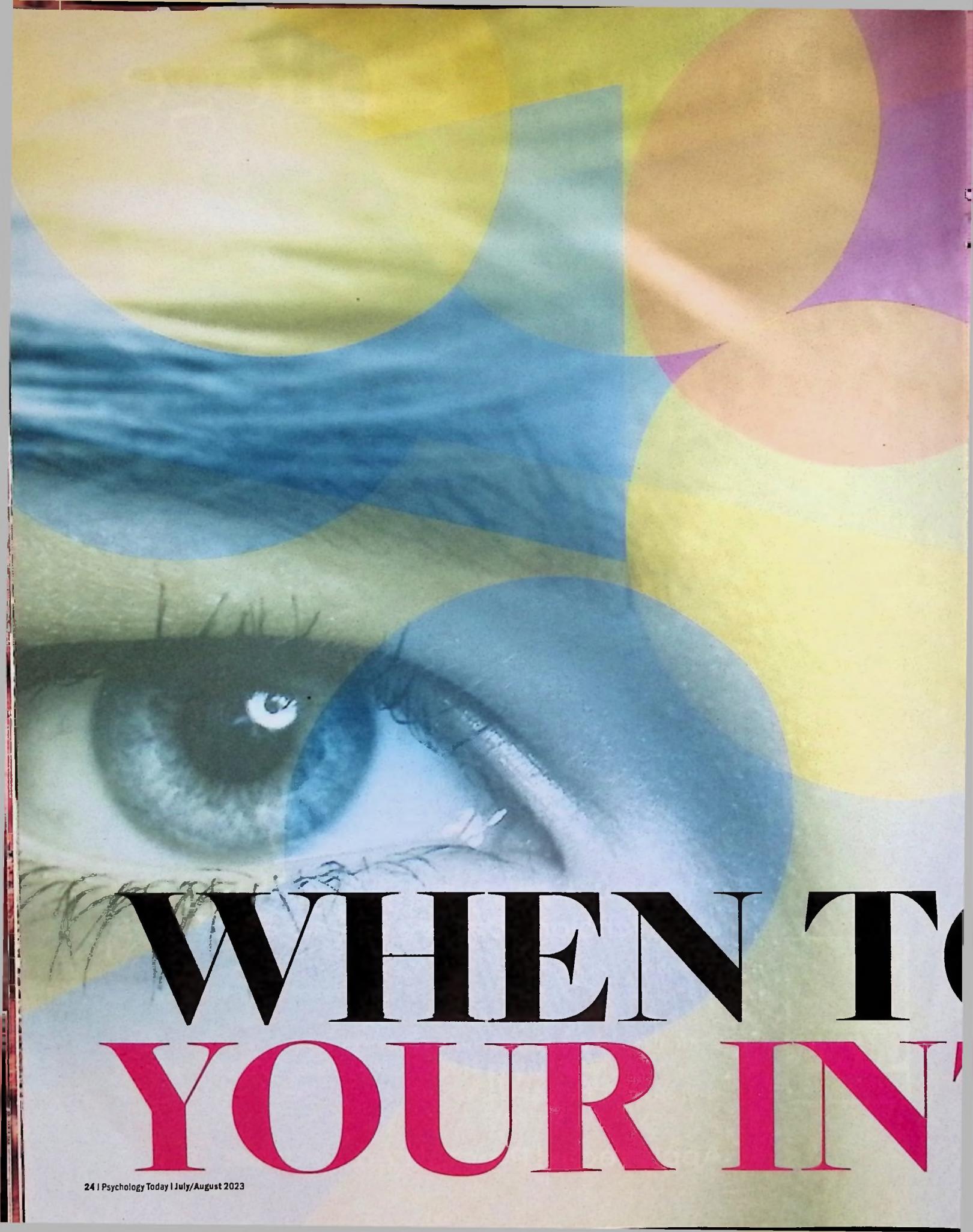
Prescott College

Earn your Counseling or Psychology Degree Online

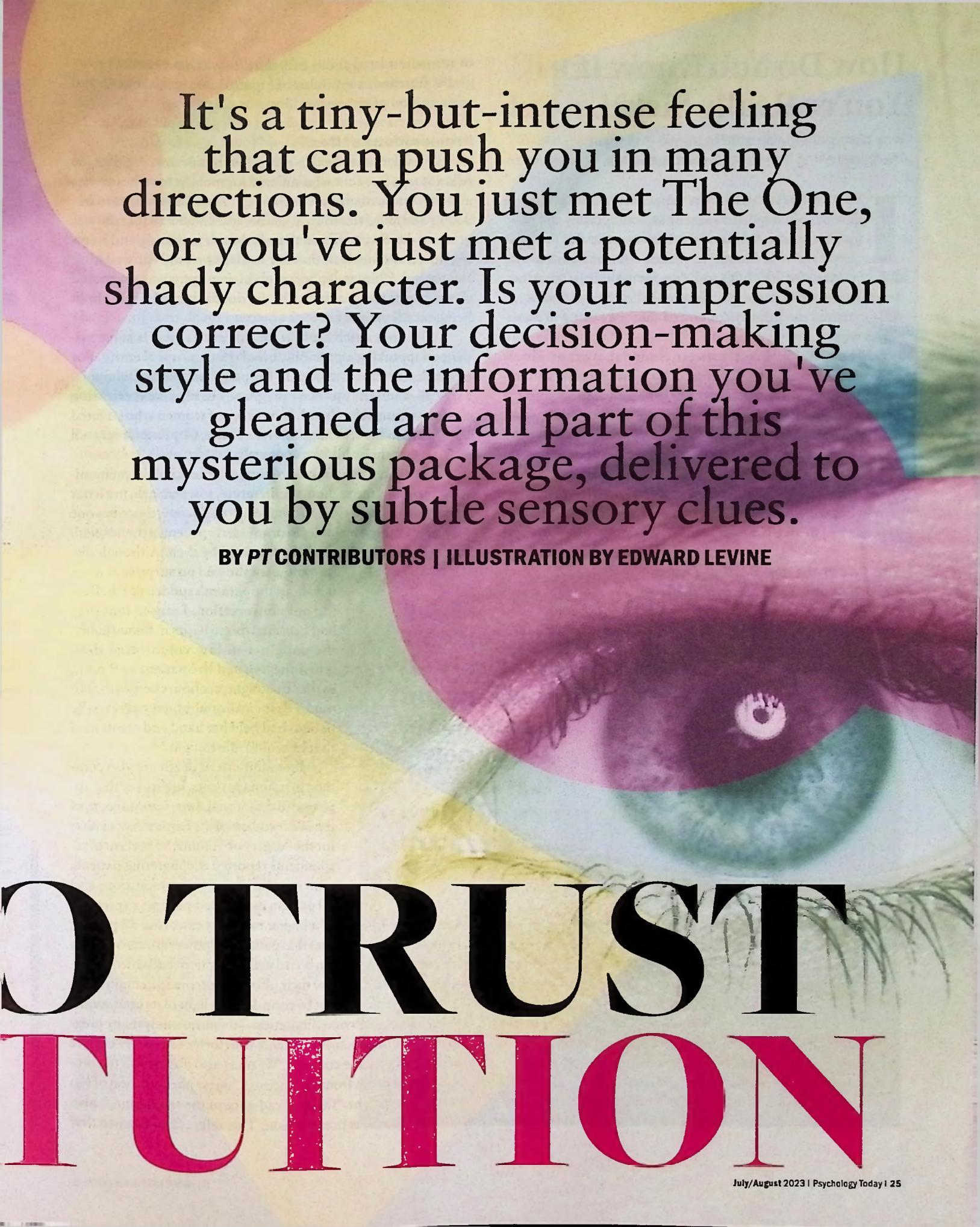
Offering a CACREP-Accredited Master of Science in **Counseling**, an Education Specialist degree in **Experiential Counseling**, a Master of Education in **School Counseling**, a Master of Arts in **Critical Psychology and Human Services**, and Graduate Certificates in **Adventure-Based Counseling**, **Expressive Arts Therapy**, and **Nature-Based Counseling**, Prescott College will prepare you for the next step in your journey.



Apply today! Prescott.edu/admissions



WHEN TO YOUR IN'



It's a tiny-but-intense feeling that can push you in many directions. You just met The One, or you've just met a potentially shady character. Is your impression correct? Your decision-making style and the information you've gleaned are all part of this mysterious package, delivered to you by subtle sensory clues.

BY PT CONTRIBUTORS | ILLUSTRATION BY EDWARD LEVINE

TRUST TUITION

How Do You Know If You're Really Sick?

Why humans may be able to sense their own life-threatening illness. By Dustin W. Ballard, M.D.

IN MY HOSPITAL EMERGENCY department, life-threatening illness is often spotted as easily as pornography and poor fashion sense—we know it when we see it. But for most people, in most situations, sorting out true illness can be difficult. Many healthy folks seek care for nothing because they are anxious, while some very ill people stick it out at home, in full-on denial or stoically convinced that they can will themselves well.

What's the difference between a mind that causes illness and one that can detect sickness early? This seems like an important question, not only for the field of medicine but also for every single living and thinking "patient" in the world.

What are auras and premonitions? And do humans have a muted and under-recognized sense when they themselves are sick? With better recognition skills, could people serve as their own triage nurses? Call centers that give advice are great, but it would be nice if people had a reliable sense of sickness, like an epiphany of medical impairment.

The Accurate and Reliable Aura

The aura that "precedes the headache of migraine is mysterious. There is a process of intense activity, which seems to spread, like the ripples in a pond into which a stone is thrown," wrote British neurologist Sir William Gowers in 1906, "the most frequent among the many forms is that of a small star near the fixing point; it enlarges towards one side, its rays expanding into zigzags."

Auras, as we know, are common in people with migraines and epilepsy and come in a variety of forms—a kaleidoscope of lights, the smell of burnt toast—and may occur seconds to hours before the onset of a headache or seizure. For a migraineur or a patient with epilepsy, the aura is an extremely reliable indicator of impending symptoms, far more accurate than routinely available clinical evaluation or testing. Absent fancy tests like continuous functional MRI or EEG monitoring, most would consider auras the gold standard of disease prediction in these cases.

Yet we don't really understand where auras come from. We assume, of course, that they are associated with the excitation or injury of specific cortical areas preceding the onset of more generalized processes, but we have not been able to capture the pathology and neural circuitry of this process.

Is it possible then that auras are a prominent manifestation

of an innate mental ability to detect illness that represents a more global function: a synthesis of inputs that triggers a sense and premonition of impending illness or death?

Premonitions of Death

Consider other health-related premonitions. A colleague tells a story of an aunt who suffered for months from headaches and dizziness, of unknown etiology. After many visits to her doctor and failed treatments, she became convinced that she was going to die. So convinced that she began preparing and freezing dozens of meals so that her husband would eat well after she passed. Ultimately, her cerebral aneurysm was diagnosed shortly prior to its rupture. She did not die but was right about being on the verge of it.

While not a rich topic in the literature, there is some evidence supporting a premonition of death as a real entity. For example, it is not uncommon for pregnant women who miscarry or otherwise lose their pregnancy to report experiencing a premonition beforehand. In a survey of women who suffered a stillbirth in the second trimester or later, 64 percent reported sensing that their child was not well.

And there are some case reports of other kinds of premonitions sprinkled throughout the literature. Joseph Ngeh, in a letter to the *Journal of the American Geriatrics Society*, describes one such premonition in the death of an elderly patient in the hospital.

"The patient's family had arrived by then. Although distraught, they showed no surprise at hearing about the patient's sudden death. During our conversation, I sensed that they had expected this to happen. Remarkably, the daughter-in-law volunteered that, when they visited the patient at 9 p.m., earlier that night, six hours before the patient's first cardiopulmonary arrest, the patient had held her hand and mentioned that he would 'die tonight.'"

Premonitions of death are also common in trauma patients. In a survey that appeared in the journal *American Surgeon*, of the 302 members of the Eastern Association for the Surgery of Trauma, 95 percent of respondents reported encountering patients who expressed such a premonition, and 50 percent agreed that patients expressing

such premonitions had a higher mortality rate. And 57 percent also agreed with the belief that patient willpower affects outcome while 44 percent were on board with the notion that patients have an innate ability to sense their ultimate outcome after injury.

Such evidence must be considered in light of its limitations. Recall bias is an obvious limitation—there are surely many pregnant women and trauma patients who thrive or recover despite premonitions to the contrary. We must also distinguish the premonition of death from the ancient Chinese phenomenon of *hui guang fan zhao*, or "the final radiance of the setting sun," also called the Lazarus premonition. This refers to a scenario that

screenwriters have used liberally for decades—the transient revival of the dying person before death. This situation is clearly different, as it is not so much a premonition as it is the recognition of a process, like a song in its last chorus, that is nearly complete.

And, of course, absent a biological explanation, it's impossible to prove that humans have an innate sense of being sick. However, we should not be overly skeptical. We accept that animals may intuit when they or others are ill. Remember Oscar, the cat who appeared in the *New England Journal of Medicine* after correctly foretelling the demise of over 50 patients in a nursing home—curling up with them within hours of their death? We also accept that certain animals, including my dear departed black lab, will instinctively put themselves out to pasture near the time of their death (in the case of my lab, ineffectively, as my wife kept retrieving her from the bushes).

It seems biologically and intuitively plausible that humans have an innate aurascopic that can sense true illness. And if it exists, there may be ways to cultivate and enhance it. ■

Dustin W. Ballard, M.D., is an emergency physician, clinical researcher, Fulbright scholar, and author.

Discerning Friend From Foe

We must never ignore clues that something is wrong.

By Joe Navarro

FOR MOST OF human history, we have been very good observers because we had to be. We used all of our senses—touch, smell, taste, hearing, and sight—to detect and discern. The sudden vocalization of animals or the scampering of birds alerted us that someone was approaching. Even the sweat of a sojourner let our ancestors know who was in the area and what they had eaten. At a distance, by examining posture, gait, arm swing, clothing, and accouterments (weapons, water vessels) our ancestors could discern friend from foe.

As generations evolved and eventually moved to cities, close proximity changed how we viewed and assessed each other. Because everyone was so close, we had less time to observe. Close quarters and circumstances dictated we interact on

Steve Taylor, Ph.D., 56

For Steve Taylor, the idea that humans are able to sense and understand everything in the world around them is weirder than the idea that there are forces and faculties we can't normally perceive. "It's completely illogical," says Taylor. "We're just animals. A sheep has its own version of reality, and an insect has one, too. Why should we be the end product with a perfect understanding of reality beyond which nothing else exists?" He has thought and written about end-of-life experiences. His father, at 79, was weak and confused but didn't seem seriously ill. He told a friend, "I've found out when I'm going to die, it will be a week, next Thursday. And I've seen the book with all the dates people will die. I can find out the date of your death if you like." His friend said not to worry and that he would rather not know. A couple of days later, Taylor's dad's health took a turn for the worse. He was diagnosed with pneumonia and died on Thursday, just as he had predicted.





Jaclyn Johnston, 40

It came to her in a dream. When Johnston woke up one morning in March 2014, she had dreamt that Bruce Springsteen pulled her up onstage and sang "Dancing in the Dark." She was set to see Springsteen in concert a month later in Dallas, but she put the dream away and went on with her day.

The following month, she and her friends lined up early for the event to make sure they would be in the front. It was gray, cold and raining, but Johnston stood through the opening acts to make sure she was front and center for The Boss.

He came on, and it happened. During "Dancing in the Dark," Springsteen pulled Johnston (and others) up onstage for a group performance. He did, in fact, pass her the mic for her to sing out to the crowd. Johnston does not believe this was a coincidence, "I think your intuition is partly your subconscious, sending you messages."

• • • • •

which is in fact the limbic brain telling us to be careful that something is wrong, as security specialist Gavin de Becker pointed out in *The Gift of Fear*. So often, after an encounter or a relationship turns problematic, one hears, "You know I had a feeling, in the beginning, that something wasn't right."

Failure to observe, if we are honest, leads to avoidable circumstances as well as accidents. How we feel about something often completes the picture so that we can fully understand it.

While doing research for my book *Dangerous Personalities* I talked to hundreds of victims and invariably they said: "I should have listened to my gut. I knew something wasn't right about that guy. I just could not point to any one thing."

Personally, I am alive today because, as both a police officer and an FBI agent, I encountered many situations where something spoke to me, from the gut, that said, "Don't go in the building, not now, wait for backup." And had I gone in the building on my own, I would have been shot by a wanted fugitive. You just never know. I can't explain it. But we evolved to have immediate reactions to the smallest of sensory inputs. Don't get me wrong, I worked hard at developing my observation skills, but I have been humble enough to listen to my gut or the hairs on my neck that predicted danger.

It is never too late to start observing. Observation is not about being judgmental, it is not about good or bad. It is about seeing the world around you, having situational awareness, and interpreting what it is that others are communicating both verbally and nonverbally. To observe is to see but also to understand, and that requires listening to how you feel.

first meeting rather than later. This was the opposite of what we had done for thousands of years, which was to assess first at a distance and then interact. Close proximity also made us more sensitive to being observed, which is why we are uncomfortable when others stare at us.

Have we allowed ourselves to become careless when it comes to our own safety and that of our loved ones? I see people distracted while driving (applying makeup or texting). Or someone knocks at the front door and we open it without first seeing who is there and asking what they want. Perhaps, in an attempt to be polite, we have abrogated our responsibility to ourselves, and each other, to be good observers.

I saw a young person pushing a shopping cart and talking on her phone without staying alert. As she reached her car and opened the door, she found herself trapped by someone begging for money, so close that her expression showed surprise and fear. Fortunately, the man just wanted a handout, but he could have been a sexual predator or a thief. Had she been observing her environment, she could have better anticipated this event.

We should all look around and listen to our inner voice,

Good observation skills give us the opportunity to test and validate what others think, feel, or intend for us. Are they kind, unselfish, and empathetic? Or are they selfish, cruel, indifferent, and apathetic? When we discover who they are early enough, we have spared ourselves or, some might even say, saved ourselves. Being observant does not mean being obnoxious or intrusive. In fact, a good observer knows that intrusive observations affect what is observed; subtlety, as well as purpose, is required.

Two Things We Look For

Finally, what do we in fact assess for? There are many things, but if you get these two right, you will be spared a lot of headaches. Assess for danger and comfort.

Ask yourself, "How does this situation or this individual make me feel?" For example, you are walking to your car at night and you see someone out of the corner of your eye walking briskly and you sense that you will cross paths. Your limbic brain senses this for you and lets you know something is not right. That discomfort is your brain saying "Warning, possible danger!" If you are to heed that inner voice, you become more alert, look for a well-lit area, and wisely change your pace or return to safety.

Once, while working in Yuma, Arizona, I was given the address of a woman who might know the suspect in a state trooper shooting. She was agreeable enough when she answered the door, but something just didn't feel right. Every time I asked

if Alex, the suspect, could be using her apartment to sleep while she was at work, she would place her fingers at the base of her neck. She did that enough times during our conversation, and only when I mentioned Alex using her apartment, that it made me want to ask more questions. Finally, I asked her if I could do a quick search of the house; sure enough, Alex was hiding in the closet with a gun in his hand. I just remember my gut talking to me way before I made a conscious observation, and I am glad that it did.

Often, a problem is just a decision that we are not qualified to make and need to either delegate or reconsider after gathering more information.

can improve this skill, and we can even teach it to our children, but like everything else, it takes effort. ■

Joe Navarro is a former FBI counterintelligence agent and the author of *What Every Body Is Saying*.

How to Make Better Decisions

A LARGE BODY of research reminds us that we're not well wired to make good choices for important decisions that have long-term consequences.

To gauge your decision-making style, consider three important decisions that you have made in your personal or professional life, ones that didn't need to be made in a hurry—perhaps, buying an expensive appliance, making a change in a personal relationship, choosing an apartment, applying for a new job, or hiring an employee.

Which of the following best describes your decision-making process?

- a) I trusted my gut.
- b) I carefully considered the pros and cons of the different options and tried to weigh all factors together.
- c) I thought back to past similar situations and tried to do whatever had worked previously.

If you picked:

- a) You are in good company—many people follow their intuition. The bad news: Intuition is often wrong, and

sometimes catastrophically so.

- b) You probably pride yourself on being as rational as possible. The bad news: Weighing pros and cons is often too simple a method, leading to unsatisfactory choices.
- c) You might be data-oriented and view decision-making as a learning process, which is good. The bad news: Just comparing a situation with past examples might cause you to miss important information and can easily lead you astray.

—Carlos Alós-Ferrer, Ph.D.

The Science of Love At First Sight

How personality and hormones converge to tell you: *This is The One.* By Helen Fisher, Ph.D.

ISING OF ROMANTIC LOVE—a basic mating drive that is deeply wired in the human brain and evolved millions of years ago to predispose our ancestors to seek a special partner, have babies, and send their DNA into tomorrow. And like fear, anger, and other basic emotions, the brain circuitry for romantic love can be triggered instantly—what has come to be called love at first sight.

People experience it regularly. I say this because I do an annual study known as Singles in America. Every year, since 2012, we have surveyed a nationally representative sample of more than 5,000 singles, based on the U.S. census. And not only do 63 percent of men and 53 percent of women believe in love at first sight, but 41 percent of men and 29 percent of women have experienced it.

A far more complex issue, however, is why this brain system is triggered immediately when you meet one person rather than another. Why him? Why her? Here's where one's cultural experiences weigh in. People are regularly drawn to those of the same ethnic and socio-economic background, with the same degree of good looks, intelligence, and education, and with the same social values, and economic and reproductive goals.

But a host of more hidden forces are also likely to contribute to this instant attraction.

For example, these Singles In America studies have shown that the first three things we notice in a potential partner are their teeth (reported by 76 percent of respondents), their grammar (83 percent), and their self-confidence (78 percent). Each is informative. Your teeth signal your health and general age; your grammar indicates your background and education level; and your self-confidence displays your psychological stability. These and myriad other physical, psychological, and cultural traits most likely play a role in instant attraction.

The Chemistry of Spontaneous Attraction

Basic personality is clearly involved as well. Using fMRI brain scans and a deep dive into the medical literature, I've found that humanity has evolved four foundational styles of thinking and behaving—linked with four basic brain systems. And by looking at a sample of 28,128 singles on one dating site, we can see who was spontaneously attracted to whom.

People who are particularly curious, creative, energetic, and risk-taking, traits linked with the brain's dopamine system,

are disproportionately and instantly drawn to people like themselves. Those who are more traditional, cautious, and detail-oriented, traits linked with serotonin, are also rapidly attracted to people with similar traits.

But women and men who are particularly analytical, skeptical, tough-minded, and spatially adept, traits linked with testosterone, are initially drawn to their *opposites* instead—people who are empathetic, socially skilled, and holistic long-term thinkers, all traits linked with estrogen. And men and women with these estrogen-linked traits are also attracted to their opposites, those particularly expressive of the traits linked with testosterone. We all have some traits in all four of these basic forms of natural temperament, but we express some more than others—making each of us unique. Indeed, I have never met two people who I thought were exactly alike, and I'm an identical twin.

Nevertheless, there are four foundational patterns to personality. And when you are ready to find a mate, each can instantly draw you to one person rather than another and ignite the powerful and primordial human drive to love, contributing to that seemingly magical experience, love at first sight. ■

Helen Fisher, Ph.D., is a biological anthropologist and a senior research fellow at the Kinsey Institute, as well as the chief science advisor to the internet dating site Match.com. She has written six books on mating.

• • • •

The first things you notice in a potential partner are their teeth, grammar, and self-confidence.

Gut Instincts Are Useful Shortcuts

But they can also be misleading.
By Carlos Alós-Ferrer, Ph.D.

THE POWER OF INTUITION is undeniable. Most of the time, what feels right, or what makes you think that you are following your gut, comes down to a few simple strategies—for example, reinforced or repeated behavior that worked more or less in the past. Others include going with the familiar instead of the unfamiliar, imitating people who look successful, or simply trying to fit a pattern. These are heuristics, the mental shortcuts we take to make decisions and judgments quickly and with little cognitive effort.

Intuition is a catch-all for a series of associations that your brain executes, often automatically. Those intuitions served us well for survival in the savanna, and they served us well when we were children learning the basics of the world. Familiarity, reinforcement, or imitation will work well if we face exactly the same decision again and again. However, they are often wrong in our modern, complex, fast-changing society, and they can be dangerous if we apply them in the wrong situation.

Intuition and Simple Patterns

Intuition makes you feel good when your brain spots a pattern. Consider the following riddle. If it takes five machines five minutes to make five bricks, how many minutes will it take 100 machines to make 100 bricks? This is one of a number of standard questions used in the cognitive reflection test, which gives a rough measure of how reliant on intuition people are. A very large percentage of people answer 100. Because, you know, five and five yields five, so 100 and 100 must yield 100. Wrong. The 100 machines are 20 groups of five machines. Each of those 20 groups of five machines will make five bricks in five minutes, so the 100 machines together will make $20 \times 5 = 100$ bricks in five minutes. They all run in parallel. The correct answer is five. The interesting observation is not that people make mistakes but that most people who make a mistake say 100. Not seven, not 93. They give the intuitive answer and stop thinking because a satisfying pattern has been found.

This pattern-seeking intuition became embarrassing for a newscaster and a newspaper journalist in 2020. At that time, the businessman Mike Bloomberg was a candidate for the Democratic nomination for U.S. President and was spending a considerable amount of money on advertising. The newscaster

and the journalist read a tweet stating: "Bloomberg spent \$500 million on ads. The U.S. population is 327 million. He could have given each American \$1 million and still have money left over." The commentator and the journalist praised the tweet and used it to argue that there is too much money in politics, all the time failing to notice that \$500 million divided by 327 million people is a dollar and 53 cents per person. We can laugh, but maybe we shouldn't be so harsh. All they did was intuitively trust a pattern. If five and five yields five, a million and a million must yield a million. It feels good to trust your intuition.

Many examples of successful intuitive behavior are due to expertise. If you are a highly trained professional—say, an expert on detecting forgeries in classical art—your brain has been exposed to a lot of relevant information and has internalized a series of subtle associations to the point that they are not even conscious anymore. The result might be described as "intuition," but it is really expertise. If you are not an expert in a field, your intuition is untrained and will serve you poorly. It is best to stop, think, and gather data.

INTUITION *continued on page 44*



Rula Abirafeh, 42

Rula Abirafeh does not think of intuition as a one-off flash of insight. To her, intuition is unspoken data that steadily provides another source of information. She credits her conception of intuition to her Druze heritage. The Druze people, mostly found in Syria and Lebanon, have a mystical faith that combines Islam with other ancient teachings. Abirafeh believes that she can sense meaning beyond words and understand outcomes beyond simple cause and effect, in part due to this wisdom and tradition. "Intuition isn't supposed to lead you down a road where you'll never make mistakes," she says.

Take her marriage: She met a boy in sixth grade. She retained a photograph of the two of them as children through several moves in her adult life. She never forgot a memory of his waiting on her table at a mall restaurant when she was a teenager. Even the memory of Christmas cookies he'd brought to a party they both attended one year stayed with her.

"People who say, 'Don't trust your intuition, trust the evidence,' don't understand what intuition is. It's a different kind of evidence, and it takes time, reflection, and a connection with yourself to be a useful tool."

There was no force telling her she would marry this man, but when she found herself reunited with him years later, she recognized the cosmic bread crumbs life had given her, and only then, she says, did she see the trail she was meant to follow.



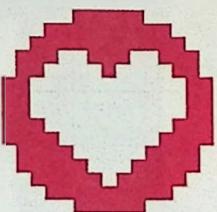
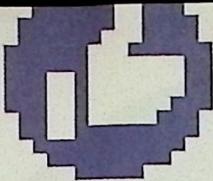


TEENS ONLINE

WHAT CONCERNS EXPERTS MOST*

**and why you may not need to worry as much as you do*

By PT Contributors Illustrations by Eddie Guy



The Challenging Combination of Childhood Curiosity and Internet Access

by Carl E. Pickhardt, Ph.D.

MAYBE IN YOUR youth, when a young person asked an unwelcome question about an adult experience, she or he might have been told, "Wait until you're more grown up, and then we'll talk about it." Those days are gone. Now young people have immediate 24/7 access to the internet to satisfy curiosity's call.

Sometimes parents will decide to limit this exposure by monitoring or restricting children's internet activity, disabling or forbidding the use of devices or of sites where they don't want a young teenager to go. They may do this to protect their daughter or son from what they consider dangerous exposure to violence, hate, sex, drug use, gambling, adult dating, law-breaking, cults, conspiracy theories, or whatever else they fear.

The internet is an ongoing challenge to traditional parental oversight.

Around middle school, when more worldly curiosity often takes wing, discovery now occurs online. Certainly, parents can put restrictions on internet

If your disapproval is the starting point and focus of the conversation, your child will just shut down.

activity consistent with their values and beliefs. At most, however, they have only a measure of local influence since they cannot control a teenager's access to devices, such as those of their friends, outside the home.

A Better Approach

What's a parent to do? First, accept the reality of immediate information availability and treat any adolescent searching or experience you find worrisome as an opportunity for discussion and education. Parents can help evaluate what a young person is being electronically told and be open to following wherever that curiosity leads. For example, "While it's tempting to believe stories and follow advice you find on the internet, it's best to evaluate them first. Understanding that every site has an agenda to influence your thinking or actions, ask yourself: Why would anyone want to post this information? What am I being asked to believe? What response is wanted from me, and why?"

If you discover that your adolescent is watching something you disapprove of, such as pornography, on their computer, take a step back first to assess your emotional response. If you feel shocked, horrified, disgusted, or furious, remember this one simple rule: *Calm before communication*. Take a break. Take a breath. Take yourself to a quiet place. Maybe talk first to a friend. Remind yourself what you love about your child. And take time to prepare to listen, learn, and talk. If you let your fears rule, your upset is liable to detract from this opportunity to educate: If you make your feeling offended the focus of your communication, then, instead of finding out what your child experienced or learned, you'll shut them down.

When a Search Leads to Porn

Young viewers need an adult to help evaluate their internet experience—to see it for what it is, what it isn't, and what is really intended. Consider exposure to pornography, which is increasingly common by middle school age. As suggested, I believe it's best to treat an unwanted or disapproved internet exposure as an



opportunity for discussion, not punishment. After collecting yourself, simply state, "I want us to be able to share about our days in two ways—about our offline day and about our online day. Existing in two worlds makes life more complicated for all of us, so there is a lot to keep up with. Since you're old enough to find this kind of site, I'd like you also to act old enough to be willing to discuss it with me. I'm not out to change your mind, just to offer my perspective for you to consider."

You can reassure your child that sexual curiosity is normal, just as sexual thoughts and feelings are. Pornography shows naked people having sex, so, to that degree, you may point out, it can be visually informative, but it's really

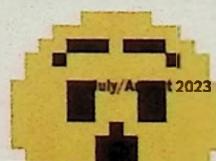
made to be entertainment, not accurate instruction, and so it involves more pretending and distortion than depictions of real life. It portrays sex for pleasure, not for emotional closeness, and it makes any kind of sexual treatment look acceptable. It can make having unprotected sex seem OK. It can make human relationships appear to be about sex and little else. And it can portray harmful activity as consensual. In other words, what may look OK on the screen may not feel OK, or be OK, in the real world. It's fantasy, not reality.

The internet, virtual reality, social media, and online gaming have sparked an evolutionary burst of creativity, and enthusiastic, educated young people are often at the cutting edge. To the degree

that a teen is lagging behind, parents can sometimes feel torn between wanting them to keep up and worrying about the risks of harm.

What could work best is treating an adventurous adolescent as your instructor: "You know so much about this that I don't. Could you show me what I don't understand?" Becoming a teacher of ignorant parents can be an esteem-boosting role for a teen, and becoming an adolescent's student can help parents stay adequately informed. ■

CarE. Pickhardt, Ph.D., is a psychologist in private practice in Austin, Texas. His latest book is *Holding On While Letting Go: Parenting Your Child Through the Four Freedoms of Adolescence*.





Battling TikTok's Mental Health Misinformation

by Ashvin Sood, M.D.

"IF YOU HAVE inattention and rejection sensitivity, you may have ADHD," a vlogger tells Clara one evening online.

"When I get anxious, I zone out, and that's how I know I have ADD," an influencer asserts in the next video.

In clip after clip, Clara is served up influencers, experts, naturopaths, and everyone in between, all claiming expertise in ADHD symptoms or diagnosis.

As one might imagine, Clara is confused. A 15-year-old with normal identity issues for her age, she was socially isolated during her early adolescence due to the pandemic and is trying to figure out and make sense of who she may be. TikTok has become her main source of information, offering hints and explanations about how she interacts with the world.

Inevitably, Clara tells her mother one day, "Mom, I have ADHD." Her mother, confused and having no mental-health training, ignores the declaration. This leaves Clara feeling more isolated and continuing to question who she is, hoping that perhaps a diagnosis can finally give her a stable identity.

TikTok has quickly become a social media titan, rivaling Meta and Snapchat

with more than 1.5 billion active users—57 percent of whom are female, and 28 percent of whom are under 18. When the pandemic was at its peak, and children and teenagers were socially isolated with severely limited access to outpatient therapy or psychiatry, emergency room visits for suicidal ideation and self-harm skyrocketed, eating disorder incidence rose, and teen depression and anxiety reports reached an apparent all-time high.

It's no wonder that teens turned to their screens for information as well as connection to peers. Starting in spring 2020, social media use among 15- to 25-year-olds in the U.S. rose as much as 28 percent. TikTok in particular provided teens with content from peers and adults who shared their mental health burdens.

The sounding board grew, and so did the number and types of distributors (and sometimes sellers) of mental health information. All flocked to the bazaar.

As mental health became a trending social media topic, content creators found an audience that wanted to name what they were experiencing. To serve them, creators produced flashy videos that were generalizable and relatable, even if also often inaccurate. On the positive side, legitimate medical educators and licensed therapists also joined the fray to offer evidence-based information—and many teens with clinical diagnoses have found or built support networks through TikTok.

Clara viewed content creators dancing to catchy songs, discussing nonspecific symptoms, and suggesting that she might have a mental health condition. Each click on a video, and subsequent engagement in the form of comments and shares, raised its own popularity and the chances that the app would recommend more clips like it to Clara, no matter how accurate the information or who provided it.

Identity formation is an integral part of a teen's development. With access to a digital world that provides troves of seemingly valid information, they will understandably search for meaning in what they watch. The adults in their lives can help them think more critically.

How Parents Can Help

- ❖ Begin with a nonjudgmental approach, expressing curiosity about what a teen may be watching.
- ❖ Ask questions like: "Where did you learn about the diagnosis?" "What parts of it do you connect with?" and "Do you know others who may have similar symptoms?"
- ❖ Be patient with their responses. They do not have to have an exact answer, but they do need an adult who will listen.
- ❖ Ask to view the saved videos in their TikTok profile. Watching together, ask them to point out the parts they most strongly connect with.
- ❖ If there are mental health concerns, ask how the symptoms described affect them day to day. Do the symptoms interfere with schoolwork, peer

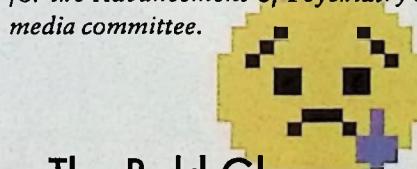
interactions, or home time?

- ❖ Ask if there are parts of the videos that don't resonate with them. Offer observations that may take a different view and allow them to reflect on your thoughts.
- ❖ If there are more serious concerns, offer to help them seek out support by setting up a doctor's appointment or a therapy evaluation.

How Clinicians Can Help

- ❖ Offer curiosity and a nonjudgmental approach when asking teens about a self-diagnosis.
- ❖ Screen for symptoms of the condition and speak with the parent regarding the history.
- ❖ Specify what helps reduce the symptoms and what seems to worsen them.
- ❖ Ask why this diagnosis is important to them and what it might mean to them if there were no diagnosis.
- ❖ Highlight that diagnoses are helpful but do not define an individual.
- ❖ Inquire about traits or personality aspects they like about themselves.
- ❖ If treatment is applicable, discuss that it is meant to relieve a symptom and not define a person by their diagnosis. ■

Ashvin Sood, M.D., is a child and adolescent psychiatrist in Fond Du Lac, Wisconsin, and a member of the Group for the Advancement of Psychiatry's media committee.



The Bold Glamour filter forces teens to compare what they really look like to what they "should" look like. The emotional effect could be profound.



The Radical Threat Of Photo Filters

by Gwendolyn Seidman, Ph.D., and Keith Feigensohn, Ph.D.

WE ARE NOT the first to point to one of Silicon Valley's favorite tenets—move fast and break things—and say, that's fine, as long as those broken things aren't people. Nowhere is this risk more apparent than with TikTok's Bold Glamour filter. It is a live action video distortion filter that "beautifies" any person using it, altering facial features and delivering an image with flawless skin. The results are technically impressive; the filter can indeed seem to turn any face "beautiful." Broadly speaking, there are some arguable benefits to using reality-distortion filters during virtual communication, but widespread everyday adoption of this technology has the potential to be quite harmful, particularly for young people.

What's Different About Bold Glamour

There are arguments to be made about the biases inherent in designing any facial-modification technique. Previous beauty filters have been identified as not working identically, or effectively, for people of all races, and critics have pointed out that there is no universal standard for beauty, so there's a risk in a single person or company defining one for the entire population. These are important discussions, but we would argue that they don't really matter in the context of the harmful effects new filters can have on the way people feel about their appearance.

Regardless of the rules used by a platform's algorithm, its filter will show people, in real time, what they actually look like compared to what they "should" look like. Apps have done this before, mostly with still shots and, to varying degrees of success, with live action. Instead of smoothing out and touching up minor

KIDS ONLINE continued on page 44

The Certainty Trap

The willingness to actually listen to others and to display your ignorance in a world full of know-it-alls is a bold move that now has a name—intellectual humility. It's not only a developable skill, much needed today, it could just end the culture wars.

By Bruce Grierson | Photographs by Karjean Levine



A

N JUNE OF 2011, MAJOR LEAGUE pitcher Wade LeBlanc had bottomed out. Having bounced around the league, slowly eroding his early promise, he was back playing with the club that had drafted him, the San Diego Padres. The morning after a particularly bad outing, he hailed a taxi for the airport; he was being sent down to the farm club.

The cabbie had watched the previous night's game, and he couldn't resist offering a few pointers. "You know, you've got some good stuff," he told LeBlanc, "but I think there are some things you should think about trying. Maybe like going over your head in the windup." LeBlanc might have been forgiven for putting his ear buds in at that moment. But he sat there and listened.

When he reported for duty in Tucson with the Padres' minor-league affiliate team, LeBlanc told the pitching coach that there was something he wanted to try. What if he brought his hands over his head in the delivery? Astonishingly, it worked. He found he had more control. In his next start he deployed the technique and pitched lights-out, allowing one run over seven innings, with no walks. He incorporated the cabbie's tip into his technique for the rest of his career.

Psychologist Daryl Van Tongeren is less surprised at the result than most. "Whomever you meet, it's a good idea to assume there is something to be learned from them," he says. An associate professor at Hope College in Michigan, Van Tongeren is a leading voice in a subdiscipline of psychology that is emerging at the precise moment in cultural life when it is desperately needed—intellectual humility (IH).

With roots in almost every major philosophical and religious tradition, IH occupies an intertidal zone of knowledge somewhere between the Bleedin' Obvious and the Secret of Life. "Globally right now there's a rise in the opposite of IH—intellectual arrogance," which make us privilege our own positions and stubbornly refuse to entertain competing viewpoints, says Michael Patrick Lynch, a philosopher at the University of Connecticut and the author of *Know-It-All Society: Truth and Arrogance in Political Culture*.

"Democracies," he maintains, "have a special interest in protecting and promoting the pursuit of truth." But the contemporary cultural machinery is geared to chase folks out of the middle ground or push experts in one area out of their lane, leading them to confidently pronounce on matters they have no business banging on about. Call it cognitive narcissism. Curious, collaborative inquiry has been abandoned for the brute force of unilateral persuasion. Intellectual humility, instead, courts the kind of nuance that's often found in the middle ground.

It also contains a strong element of respect: "I respect you enough to engage with your position, and together we commit to search for truth," says Rick Hoyle, a professor of psychology

and neuroscience at Duke University. The brass ring may be what philosopher Agnes Callard calls Socratic humility, when we come to crave other people's wisdom—wisdom we ourselves don't have. The impulse is generous. "You don't go into a conversation expecting to persuade any more than you expect to be persuaded," Callard writes. Not only are you open to being persuaded, you actually hunger for it.

Ilana Redstone, a professor of sociology at the University of Illinois Urbana-Champaign, has her own term for intellectual arrogance—the certainty trap, which blocks our path to seeing things clearly and getting along. "The certainty trap tells us that there are two possibilities for an opinion we disagree

with: ignorance and hateful motives," she writes. But there's a third possibility we fail to consider: Our opponent might have principled reasons for their position. "When we refuse to hear or recognize the reasons, we can't communicate."

According to Mark Leary, an emeritus professor of psychology at Duke, intellectual humility is "the degree to which one accepts that they could be wrong"—and that someone who's challenging their position could be right, or at least more right than they're giving them credit for. No one, but no one, says Leary, has a full claim on the truth. The corollary of that fact: The more diverse perspectives we entertain, the smaller our blind spots and the wiser our decision-making will generally be.

Leary and his colleagues have looked for factors and traits that might incline someone to be intellectually humble. Does political persuasion matter? It seems not; neither liberals nor conservatives appear, as a group, to be more intellectually humble. Gender? No. Nor does a high level of education correlate with intellectual humility. If anything, the reverse may be true.

Do people with IH make more thoughtful decisions? Do they have stronger connections with their friends and partners? Are they happier than others? (Early returns say yes, yes, and yes.)

From the emerging data, here are eight ideas about fostering intellectual humility.

1 | You can't actually know when you don't know what you're talking about.

Some of the major discoveries in behavioral science of the last 20 years are our cognitive blind spots and just how big they are. We think we know more than we do. Our intuitions about what we're right or wrong about are faulty. "Wrong never feels wrong in the moment," writes Kathryn Schultz, Pulitzer Prize-winning essayist and pioneering "wrongologist." What does it feel like? "It feels like being right. We know what it feels like to have been wrong in the past, perhaps just seconds ago, but not what it feels like to be wrong in the present. Because the instant we realize that what we believe is wrong, we no longer believe it."

One major culprit is the overconfidence bias that afflicts most people—the tendency to overestimate our abilities, knowledge, and beliefs. Most of the time we are simply way more certain than we should be. “Think about all of the disagreements you have with other people—from minor ones about relatively unimportant issues to major ones about important matters,” Leary asked a sample of adults. “Now I want you to estimate how often—what percentage of the time—you think you’re the one who is correct.” The average answer: 82 percent of the time.

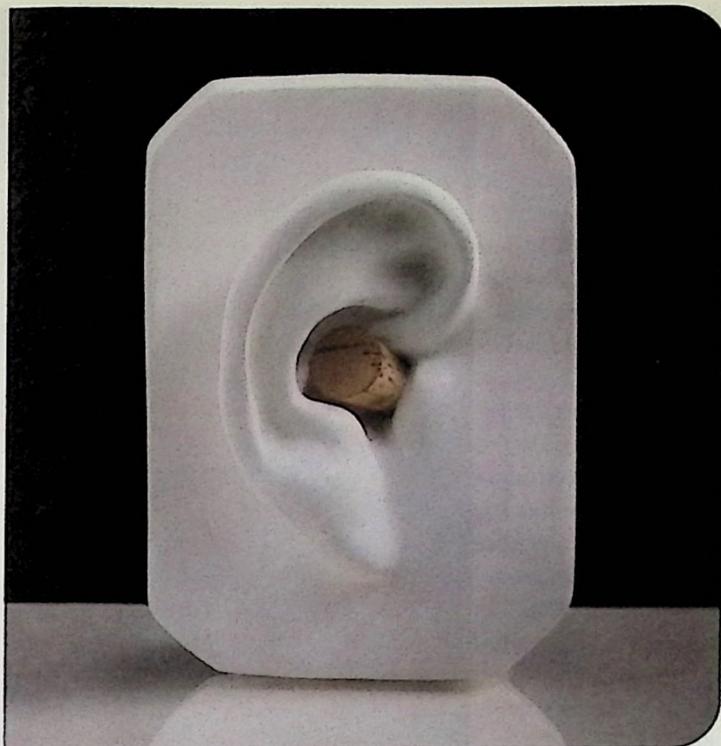
Unjustifiable confidence is not just rampant, it can be dangerous. “No problem in judgment and decision-making is more potentially catastrophic than overconfidence,” insists Wesleyan social psychologist Scott Plous. Its consequences include the Chernobyl disaster, the sinking of the Titanic, the Challenger and Columbia space shuttle disasters, and the Deepwater Horizon oil spill, among many others.

Given the unreliability of our memories and our predictions, the fallibility of our perceptions, and the dubiousness of our confidence that we look marvelous in this haircut, how could we lead with anything but abject intellectual humility? Maybe the patron saint of IH should be George Costanza, and his solution should be our default: Whatever it occurs to us to do, assume we’re wrong and do the opposite.

2 | The road to intellectual humility is paved with curiosity.

Leary’s research revealed a strong correlation: Curious people tend to be intellectually humble.

Our human desire for certainty—understandable if also



sometimes unhelpful—is tempered by curiosity. “Certainty is about being right,” says George Mason University psychologist Todd Kashdan, whereas curiosity is about exploration. And that is an instinct almost beyond right or wrong. It’s simply data collection—a definitively intellectually humble pursuit. Curious people ask a lot of questions—and that is a sneaky superpower in a culture obsessed with answers.

HOW TO CULTIVATE INTELLECTUAL HUMILITY

BECAUSE ACCEPTING OUR fallibility is so hard—in a sense we’re working against an almost primal impulse to be right—the enterprise of becoming more intellectually humble has to effectively be a training regimen, deliberate and systematic. But it can be done. Here are three strategies that have been proven to work.

Put your money where your mouth is.

Immanuel Kant claimed that if everyone were forced to put a wager on their casually floated opinions, they’d back off their certainty. Modern behavioral science has borne out the principle generally: One way to boost intellectual humility is to raise the stakes.

That’s one reason University of

Pennsylvania professor Philip Tetlock decided to create forecasting tournaments where folks try, very publicly, to predict the outcome of unfolding political and social events. When people are forced to accountably make a specific prediction, they’re likely to take a more moderate stance than they otherwise would. There’s “the cognitive dissonance thing,” Tetlock explains. “Secondly, the mere fact that you know that your prediction is going on the record makes you more self-critical.”

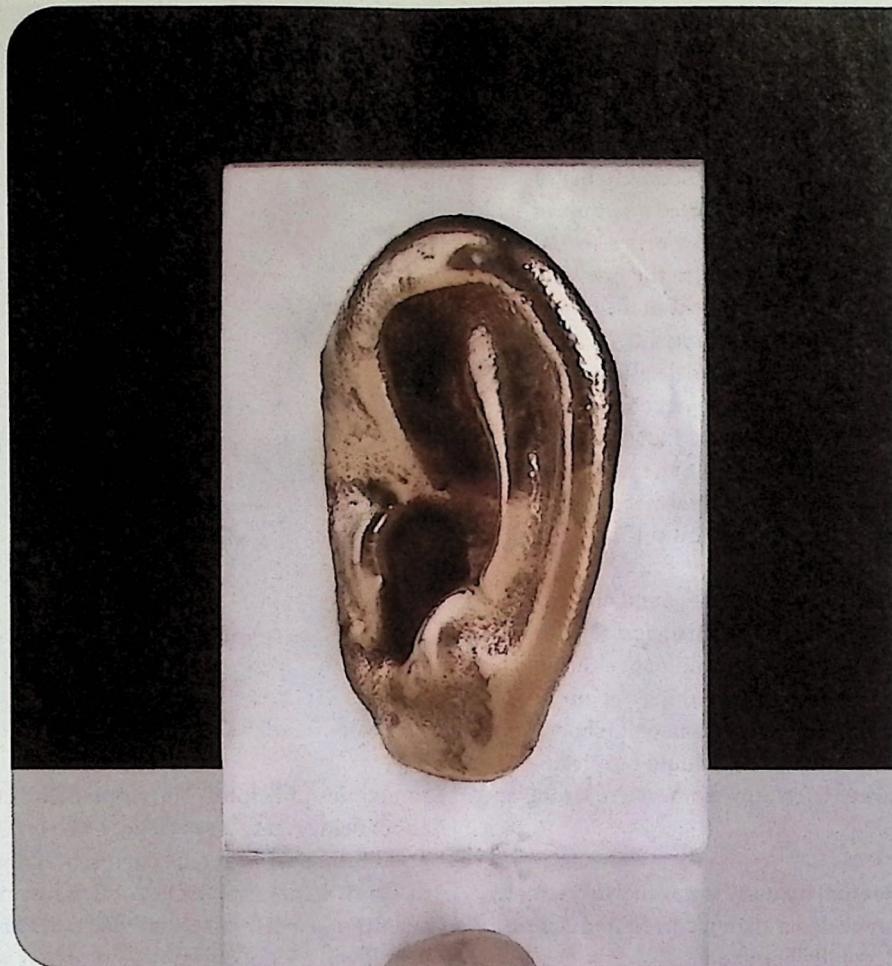
Hunt for the smartest adversary you can find.

To peek into our blind spots and push through our biases, it sometimes helps to have an accomplice. Before she became a columnist for *The New York Times*,

Columbia University sociologist Zeynep Tufekci invited her most formidable critics to take her down in her own newsletter. This is the steel-man strategy (vs. the more familiar straw-man strategy, where you reduce your foe’s argument to its flimsiest parts and blow them away).

“Explain it to me as if I were a 5-year-old.”

You think you know how a toilet works? A zipper? Explain it. Pressed to describe the workings of familiar objects, most of us find our shaky command of the details nakedly exposed—what psychologists call the “illusion of explanatory depth.” “We begin to see that the whole damn thing is far more complicated than we thought,” says Leary.



Social curiosity, it turns out, is a particularly potent attribute—an interest in other people's behaviors, thoughts, and feelings. Unlike extraversion, the tendency to socialize with others, social curiosity is motivated by the desire to understand what makes people tick. Social information is gathered by directly talking to people. Besides being more agreeable and less lonely, Kashdan has found, socially curious people are also more open-minded than others. Psychologists Tenelle Porter, of the University of California Davis, and Karina Schumann, of the University of Pittsburgh, have found that people high in IH are even interested in understanding the reasons that people disagree with them.

The application of curiosity softens your defenses against hostile pushback. Tufts University psychologist Jamshed Bharucha calls this a "golden rule of cross-group understanding." When you're genuinely curious, it's harder to be judgmental, and when you're judgmental, it's harder to be genuinely curious.

Kids are naturally curious, but sometimes it takes deliberate commitment to remain highly curious as an adult. Curiosity may be a particularly sharp tool in situations of conflict. "When someone starts to launch an assault on your world view," notes Adam Grant, "it's not that difficult to ask, 'How did you arrive at that view? I'm really curious.' Suddenly, they no longer see

you as a preacher or a prosecutor or a politician. You are just a curious human. And they let down their guard and start to trust you enough to spill their guts, unguarded.

Of course, it's not enough to be privately curious. You have to demonstrate that curiosity. What percent of people, at the end of a conversation, say they felt "heard"? A study recently published in *Frontiers in Science* answered the question: 5 percent. Only in one in 20 conversations do we feel genuinely heard at the end. We are really not very good at listening to each other.

3 | Not everything should be up for humble reconsideration. For many of us, there are certain domains in which we're willing to be intellectually humble, open to the possibility that we may be wrong. But there are also areas we simply draw a line around. It could be anything from the case for gun control or the effectiveness of vaccines to the existence of God.

"Each of us is intellectually humble about some topics but dogmatic about others," Leary says. That's normal and healthy; we all need a few no-go zones. What has happened, however, is that, for many of us, our no-go zones are proliferating. As polarized discourse becomes a cultural reflex, there's a kind of scope-creep in what we are not willing to entertain.

Part of the work of intellectual humility, then, is to try to

decrease our “latitude of rejection,” as it’s sometimes put. To periodically check in with ourselves about what’s impermissible speech—or even thought—and ask why we drew a boundary there. We should probably keep our number of no-go zones to a small handful of genuinely inviolable offenses: Human trafficking or child abuse, for sure, hold the line. But maybe not Beatles vs. Stones.

4 | A conflict-resolution tool? Maybe, maybe not.

As we toy with intellectual humility as a tool to bridge conflict, it’s important to remember that conflict in itself is not the problem. Ian Leslie, the British journalist and author of *Conflicted*, has a good line: “The opposite of conflict isn’t harmony—it’s apathy.” People should disagree. A population that’s all in line is not a healthy population. This is about how we disagree and learn to disagree well.

The commentator Ezra Klein has said that when he writes an article he ends up more convinced of his position, but when he contributes to a podcast he ends up less convinced. The difference is this: In the first act, he’s alone; in the second, he’s actually mixing it up with another human.

5 | Proximity helps.

A large body of research suggests we often have wild misconceptions about our ideological opponents, which amplifies conflict. Every hard progressive would do well to imagine how some of their messages are landing on the ears of a random Boomer conservative from the heartland. What they hear: Revolution’s a comin’, and you and your family are on the wrong end of it, Bud. They aren’t likely to lean over the fence and say, “Tell me more.” What can help—maybe the only thing that can help—is stripping away the propaganda layer by getting folks together, in real life, where each may realize that the other is not the twisted cartoon character they imagined.

Not long ago, Monica Guzman, a senior fellow at the New York-based nonprofit Braver Angels, recruited volunteers from her native King County, Washington (mostly Seattleites), to take a bus ride down the I-5 to meet some of their political antipodes in Sherman County, Oregon. The two counties voted exactly opposite in the last presidential election. Braver Angels is dedicated to political depolarization, and Guzman was interested here in the power of genuine curiosity.

She coaxed her subjects to ask themselves this question: If people are voting opposite me, are they feeling opposite me on the issues that matter to me? Or is there something I’m missing?

There was no self-righteousness, just an attempt to understand, and folks listened to their opposite numbers. The visitors discovered that many of their hosts voted for Trump for reasons they hadn’t even considered. Not the environment. Not LGBTQ rights. (Many had no quarrel with those issues.) Rather, a farmer may have worried about losing control of his land because of the Waters of the United States legislation, which Trump was fighting to have removed.

“We assume people oppose what we support because they hate what we love,” Guzman says. “But that may not be true at

all.” One participant told Guzman that being there in person changed everything. “I was surprised by the complexity of the stories I heard,” she said. They made sense to her in a way that the online stories she’d read could not.

6 | There is such a thing as too much IH.

Clearly, one can have too little IH. But one can also have too much. If you think of intellectual humility as a continuum, with arrogance on one end and abject servility the other, healthy IH occupies the sweet middle. The key is to take the appropriate amount of space as befits your level of knowledge in this domain. Appropriate. Not less.

“People who shrink in a situation—that’s not intellectual humility,” Van Tongeren, says. “I wouldn’t want my brain surgeon to say, ‘I dunno, Daryl, what do you think I should do?’” The question to ask yourself in a given situation is: Am I the right size here? “I think of it as calibrating your certainty to the level of your knowledge, while still recognizing that you could be wrong,” Leary notes. “You’re asking yourself: Given everything I do and do not know about this topic, what’s the probability I’m correct?”

Beware, though, of false humility, which is actually a kind of stealth arrogance. “Some people will be, like, OK, I admit I could be wrong,” says Lynch, “and my own genius will later discover other things I could be wrong about.”

7 | IH Is something humans will always have that even the smartest machine learning will not.

As the chatbots encroach on our most intimate precincts, here’s one place that they will likely never reach. AI can argue a position with an assurance that borders on annoying. What it can’t

HOW SURE ARE YOU OF THAT?

On a scale of 1 to 5, would you say:

- I question my own opinions, positions, and viewpoints because they could be wrong.
- I reconsider my opinions when presented with new evidence.
- I recognize the value of opinions that are different from my own.
- I accept that my beliefs and attitudes may be wrong.
- In the face of conflicting evidence, I am open to changing my opinions.
- I like finding out new information that differs from what I already think is true.

Scores can potentially range from 6 to 30. Leary and colleagues find that the average score is 22.2. Scores below 20 fall in the lower 25% in intellectual humility. Scores above 25 fall in the upper 25%.

Intellectual Humility Scale Courtesy of Mark R. Leary, Kate J. Diebels, Erin K. Davissón, Katrina P. Jongman Sereno, Jennifer C. Isherwood, Kaitlin T. Raimi, Samantha A. Deffler, and Rick H. Hoyle.

do is humility.

Machine learning "does not have the capacity to question its own capacity," says Emily Tucker, a human rights lawyer and executive director of the Center on Privacy & Technology at Georgetown University. While chatbots appear to be thinking deeply, what they're really doing is just pattern-matching, with no sensitivity to whether the correlations they detect are meaningful. And they certainly can't consider that some of their answers might prove wrong in ways that haven't occurred to them yet. "That is a faculty that's essentially unrepresentable mathematically," Tucker says.

8 | People arrive at truth collaboratively.

In their book, *The Knowledge Illusion: Why We Never Think Alone*, cognitive psychologists Steven Sloman and Philip Fernbach argue that individual intelligence is more limited than we recognize and we are all basically sharing our class notes. It would be silly not to. There's just too much material in the syllabus; we'd be crazy not to distribute the work.

When we divide the cognitive labor, we're undertaking intellectual humility as a communal enterprise. Kant would tip his cap. If everyone learned to see through the lens of contingency, then that would be the end of dogma.

The more we know, the more we realize how much we don't know. We peer from the crater rim of the known unknowns into the vast caldera of the unknown unknowns.

In Kurt Vonnegut's debut novel, *Player Piano*, a character makes a pronouncement that could be the calling card for the whole field: "We should recognize that while we may be able to offer something useful, we're also flawed actors, hampered by our own lack of knowledge. Let's build opinions like sandcastles, with curiosity but no great attachment." Because the next tide could take them out. ■

Bruce Grlerson, a writer in Vancouver, has won the Canadian National Magazine Award five times. His work appears in many publications around the globe.

INTUITION continued from page 31

The Decisions You Don't Make

Suppose your car breaks down. There are many things you could try to fix the problem. But, unless the problem is obvious or you happen to be a car mechanic, you probably will not start tinkering with the engine. Also, you are apt to come up empty when trying to list the pros and cons of possible options, and it is unlikely that past experience will help you. In the end, you will call a mechanic.

You probably do not think about this as a decision, even though it is. The mechanic will examine your problem and make a decision. It is not a decision you would comfortably make yourself, because your intuition is not trained in this field, and you do not have the knowledge to weigh the pros and cons. At which point do you consider a problem to be a decision that you can make yourself?

Consider the really important decisions in your life—choosing a career, a partner, or a new house. Is deciding

whether to leave your current job and pursue a more fulfilling activity more or less important than finding out whether you have a cold or the flu? If you do not dare decide how to fix your car on your own, why do you agonize over your career choice instead of seeking help?

The first step in approaching an important decision is to ask: "Am I qualified to make this decision?" "Do I have enough information?" Too often, we brood over important decisions when we should be gathering new information or looking for help. To make better decisions, be more conscious, and also more cautious, about what a decision is. The boundary between problems and decisions is a subjective one. If you are facing an important decision and are having doubts, it might be time to stop, get more information, and consider whether you can get help. ■

Carlos Alós-Ferrer, Ph.D., is a mathematician and currently the editor-in-chief of the *Journal of Economic Psychology*.

KIDS ONLINE continued from page 37

imperfections, however, Bold Glamour completely alters faces. It is instantaneous. It is powerful. And when people who desire social approval and positive feedback start using it, they will not like what they see—or, rather, they won't like what they see when they turn the filter off.

Social Comparison And Mental Health

Research has shown that exposure to unrealistically beautiful people, such as those on social media fitness sites, makes "ordinary" people feel less attractive. The contrast effect created when the unrealistically beautiful image is a version of one's own face could be even more profound, but the contrast is inevitable because the filter forces a direct comparison between oneself and an altered, or "improved," version of oneself. Research has shown that people are already prone to comparing images of themselves with and without their usual makeup.

Surveys have found that women

who extensively photo-edit or use filters on their photos tend to have poorer body image, but experiments designed to test the immediate effects of image-editing have yielded mixed results. One found that photo-editing a selfie led to decreased satisfaction with one's facial appearance and greater negative mood. Another study on beautifying photo filters found that using them doesn't lead to immediate dips in self-esteem or body image.

Most professionals who work with children and young adults are aware, at least peripherally, of the increasing rates of negative affect reported by adolescents, particularly girls. A widely discussed recent CDC report found that a disturbingly high number of adolescent girls reported thoughts of suicide and overall negative feelings compared with results from previous years. Social media use is likely just one factor, but it may be an important one. Teens and young adults use photo filters extensively, which is a problem for a cohort already at risk of making upward comparisons and suffering declines in self-esteem. Many schools educate on

internet etiquette and safety, but much of that time is spent on information-sharing and privacy, not the potential emotional effects of reality-distortion filters.

How We Can Prevent Harm

The effects of a technology that creates such realistic and dynamic contrasts is especially likely to lead to dissatisfaction with one's appearance. Parents and therapists should ask children what they know about these filters, how they use them, and how they feel about their images. You can shout to the sky that appearance has no relationship to self-worth, but young adults will still value being physically attractive. We need to explain to them how this filter applies to its alterations a set of standards that have never been universally agreed upon, are unlikely to be culturally sensitive, and can affect self-esteem.

Research has not kept up with hyperrealistic, dynamic filters, but we would not be surprised if their users experience an increased risk of appearance dissatisfaction, mental health episodes, and even self-harm or suicidal thoughts. ■

Gwendolyn Seldman, Ph.D., is a professor of psychology and **Keith Felgenson, Ph.D.,** is an associate professor of psychology at Albright College.

7 Reasons To Doubt Social Media Hurts Teen Mental Health

by Dylan Selterman, Ph.D.

MANY COMMENTATORS ARE convinced that social media usage is to blame for the recent rise in reported mental health concerns among young people, especially teenage girls. But developmental and clinical psychologists who actually work with adolescents do not uniformly back this hypothesis. Here's why they, and I, remain skeptical that social media use is responsible for rising distress:

1. Studies show conflicting results.

Some researchers find links between social media use and well-being, while others do not, or find mixed results. And some developmental psychologists go as far as to suggest that social media might have positive effects on teen well-being.

2. The studies vary in quality. Some claim that if there are 30 studies published on a topic and 17 report a correlation, then we can be confident that this correlation exists. I don't buy it. What if those 17 used poor methodology while the other 13 used more reliable techniques? For example, we know that people are not especially accurate in reporting how much time they spend on various activities. So a larger number of studies that have unreliable measures of social media usage shouldn't outweigh a handful of higher quality studies that use more objective measures.

3. Which came first? Even if there is a link between social media use and mental health, it's not clear which precedes the other, and while it's a cliché to say, "Correlation doesn't equal causation," few believe that depression causes increased social media use, and not vice versa. But it may not be such a crazy idea: Some psychologists suggest that teens turn to social media to help cope with negative emotions. We saw this during the COVID lockdowns, when physically isolated young people still craved social connection. Some longitudinal studies show that worsening depression predicts more social media usage in teens, but not the other way around.

4. There's a missing cognitive link. What is it about social media use that would make people feel distressed? Is it social comparison? A more sedentary lifestyle? Sleep disruption? Physical isolation? There's no consensus, so simply pointing a finger at total screen time doesn't help clarify things.

5. There is no clinical significance. The studies that show a link between social media use and mental health do not suggest an increased risk for mental illness (e.g., bipolar disorder), so researchers suggest that digital technologies are "unlikely to be of clinical or practical significance." This is an important distinction. Just because someone feels upset does not mean

they have a mental health condition.

6. Social media apps are not a monolith. Does anyone really think Facebook, Twitter, TikTok, LinkedIn, and Reddit all have the same social or psychological properties? Perhaps there was a moment when people on all platforms encountered photos of their friends looking unrealistically happy or beautiful, which caused a type of negative social comparison especially detrimental for teenagers. But this is no longer the norm. On most platforms, masses of people consume content generated by a relatively small group of creators. Plus, most teenagers don't even use Facebook, the platform that's been most extensively researched.

7. We aren't a mentally healthy society, and we haven't been for a very long time. In North America, depression and distress have been rising for 80 years. This is something even researchers who blame social media as a causal factor acknowledge. Why weren't people in the 1980s or '90s asking why adolescent depression was at an all-time high? It's not clear, but this trend isn't new, and it's only going to worsen in the absence of major cultural adjustments.

We should be talking about commonsense reforms of social media apps. But we should refrain from making broader claims or proscriptions in the absence of strong evidence. For example, if we were to restrict young people's digital technology use until they pass through puberty, is there any evidence to suggest it would have a positive effect on their well-being? I remain skeptical.

I believe that poor mental health in teenagers stems from broader societal problems that must be addressed with creative solutions designed to maximize psychological need fulfillment and self-determination. If we create environments and communities in which teens can flourish, then I don't see social media having detrimental effects on a mass scale. ■

Dylan Selterman, Ph.D., is an associate teaching professor at Johns Hopkins University in the Department of Psychological and Brain Sciences and a cohost of the podcast *A Bit More Complicated*.

EMPORIUM

EMPORIUM Special Section

**ADVERTISE YOUR
PRODUCTS AND SERVICES TO
OVER 3.7 MILLION READERS!**

Reach both licensed,
practicing therapists and
general consumers.

Our affluent readers
have a median HHI
of \$90,697 per year.

Ask about our
**FIRST-TIME
ADVERTISER
DISCOUNTS**

To advertise, please contact:
Diana Sofko at 310-458-6557 or
diana@psychologytoday.com

ATHENA PHEROMONES™ 10:13 and 10X INCREASE AFFECTION



**Dr. Winnifred Cutler
Creator of 10:13 and 10X**

Created by the biologist
who codiscovered human
pheromones in 1986. Dr.
Cutler, Ph.D biology, U.of
Penn, postdoc. from
Stanford in behavioral
endocrinology, author of 8
books on sexuality,
menopause and women's
wellness and 50 scientific
papers. Visit our website
to see her credentials.



PROVEN EFFECTIVE IN 3 DOUBLE BLIND STUDIES IN PEER REVIEW JOURNALS

♥ Shirley (OH) 48 orders "The 10:13 really
is a secret weapon. I walk into a room full of
men and I get good professional attention. I get
all the other kind of attention from my
husband."

Contains human synthesized pheromones. Cosmetics. Will work
for most, but not all; body chemistries differ. Athena Pheromone
10:13 for women: \$98.50 10X for men: \$99.50 for 6 month supply.

Not in stores. Call: 610-827-2200 or order online at:

www.athenainstitute.com



Mail: Athena Institute, 1211 Braefield Rd., Chester Springs, PA 19425

FREE US SHIPPING.
SAVE \$100 on 6-Pak



PY



ALTIOR™ Healthcare

Altior Healthcare is on a mission to elevate the mental health
of adolescents and young adults 12-28. With
13 beautiful locations in 5 states, we manage and support 400
employees serving 225 residential clients daily.

Come Join Our Team

**Therapists | Psychologists | Clinical Assistants
Nurses | Other Positions**

in California, Idaho, Texas, New Hampshire & Maine

Excellent benefits, competitive pay & more.
Send resume and cover letter to
HR@ParadigmTreatment.com

© 2022 Altior Healthcare, LLC. AltiorHealthcare.com

EMPORIUM Special Section

Employers

ARE YOU HIRING?

Advertise your job
positions to the vast
membership of the
nation's largest and
most authoritative
directory of licensed,
practicing therapists.

ENQUIRE ABOUT OUR
SPECIAL, LOW-COST,
FLAT RATE FOR
JOB POSTING ADS.

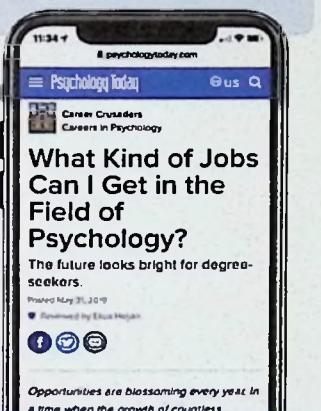
To advertise, please contact:
Diana Sofko at 310-458-6557 or
diana@psychologytoday.com

Expand Your Campaign Online

PsychologyToday.com



To advertise contact: Diana Sofko,
diana@psychologytoday.com



Borderline Personality Disorder.

What can be done?

Many of us wrestle with the legacy of a parent with BPD. Many of our clients do too.

There's been no program to help you. Until now.

Join our next
training for therapists
SEPTEMBER
2023



THE NEW SCHOOL OF POSITIVE PSYCHOLOGY

www.psydp.org
psydp.edu@gmail.com



- Lowest Tuition in America!
- Finish in 3 to 12 Months.
- You Determine Your Own Schedule.
- Guided Self-Study.
- \$5,000 Scholarship if You Qualify.
- BA, MA, PhD, Board Certification.
- Online. Affordable. Accelerated. Accredited.

START TODAY!

THE GRADUATE
UNIVERSITY OF AMERICA
888-506-1106



Healing Resources for Survivors of Child Sexual Abuse

Saprea is a nonprofit known for using proven, practical methods for helping adult female survivors of child sexual abuse find healing.

Saprea Retreat

A free clinically informed four-day experience followed by a self-guided online course.

To learn more, please scan the QR code below or visit: saprea.org/saprea-retreat



Saprea Healing Webinar

A free interactive and educational virtual experience.

To learn more, please scan the QR code below or visit: saprea.org/healing-webinar



 saprea

The Power of Chosen Family

GROWING UP IN rural Oregon, as a biracial, queer kid, Brandon Wolf "felt like a stranger who had overstayed my welcome." At 20 years old, he flew to Orlando for a job at Disney World, which flung open the doors to freedom, belonging, and a new group of friends centered around his best friend Drew and Drew's partner Juan. Yet in Wolf's new community, a location that had emerged as a safe space, Pulse nightclub, became the site of a horrific mass shooting in 2016. Wolf survived the shooting. Drew and Juan did not. In the face of incomprehensible grief and trauma, Wolf eventually found healing in activism; he's now an advocate for LGBTQ+ civil rights and gun safety reform. He documents his story in a powerful new memoir, *A Place For Us*. —Abigail Fagan

Q You found community with Drew and Juan, and you've built a new community after the shooting. Can you tell us about that journey? The term "chosen family" didn't mean a lot to me before 2014. I'd heard it before—in LGBTQ circles it's a common refrain—but it didn't have meaning for me. But in 2014, I went on

a half-blind date with Drew, who would become my best friend. I found him fascinating for so many reasons—one being that he was one of the first people I'd met who was queer and mixed race and didn't try to hide any of who he was. Then he met his partner Juan. We became the three musketeers, and that's how I discovered what chosen family really meant.

If Drew and Juan were the emotional embodiment of safety, Pulse was the physical embodiment of safety. It was that for a lot of people. Pulse is one of the first places I went where I held hands with someone I had a crush on without looking over my shoulder first. Pulse is a sliver of the idea of a place for us in the world, but our place isn't just inside four walls—it's with people, in the communities we build together.

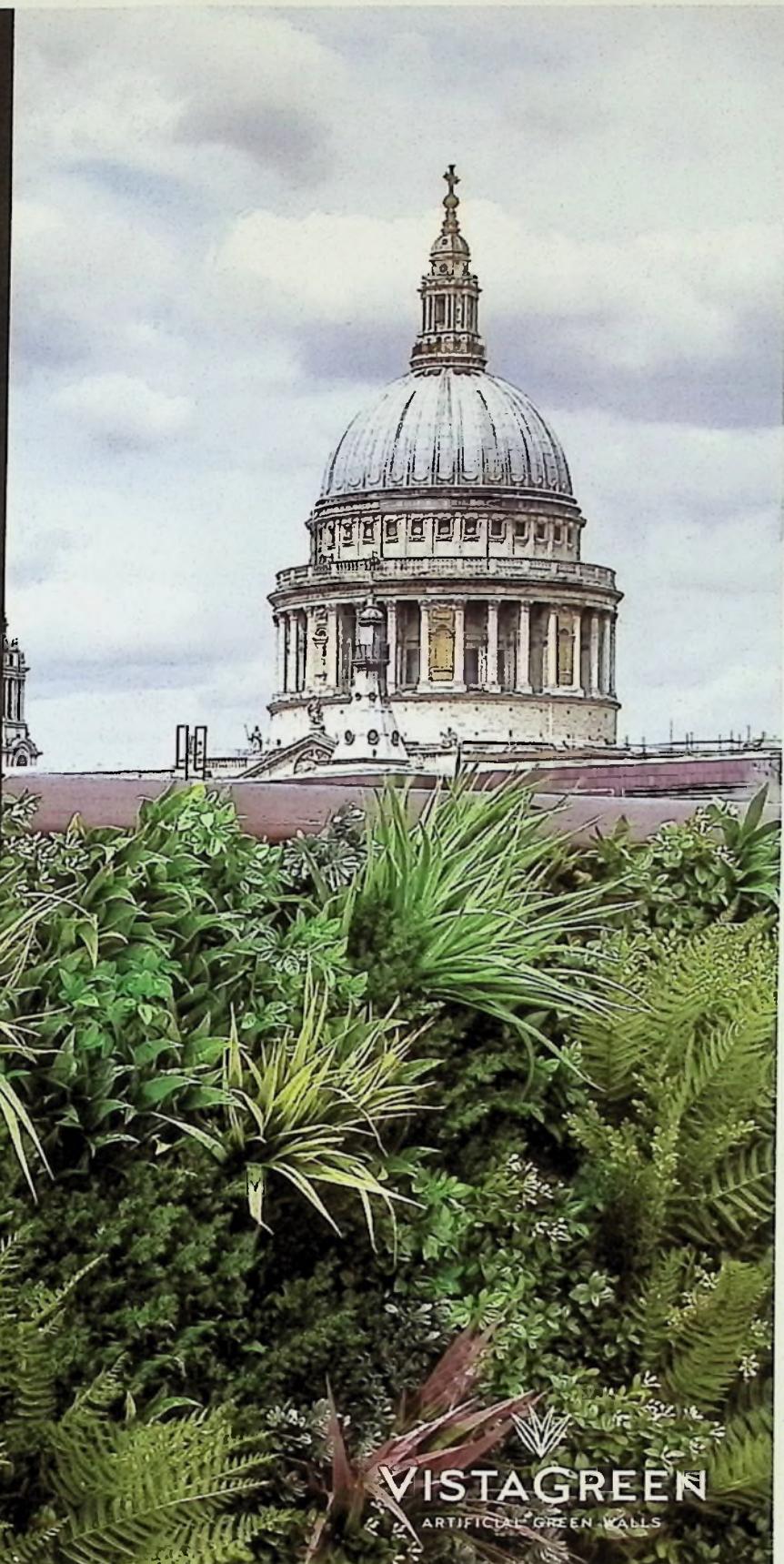
At Drew's funeral, I promised him that I would never stop fighting for a world that he would be proud of. I've found power and healing in that commitment. It isn't just the drive; it's the people I've met along the way. They've given me a new sense of community, one grounded in purpose. ■



Artificial Green Gardens

Fall in love with artificial green wall solutions by SYNLawn New York. Custom-fit to any surface dimension, our panels are ideal for irregularly shaped spaces. Different types of foliage can be added for seasonal interest or the panels rearranged to alter the look of the wall.

We feel and work better when we are surrounded by elements of nature, or elements that remind us of nature. With no need for watering or sunlight an artificial living wall can save you time and money while creating a beautiful green living space.

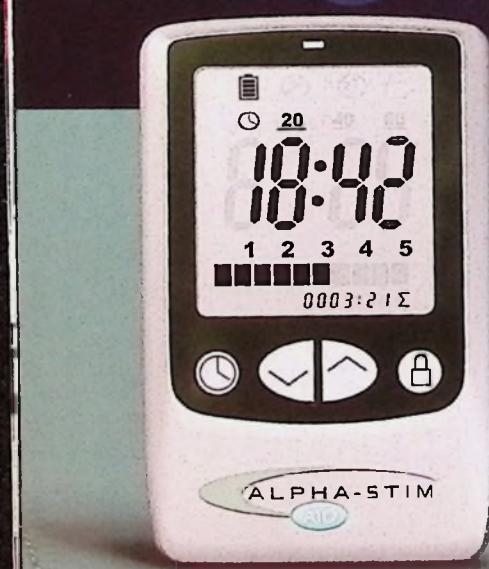


VISTAGREEN
ARTIFICIAL GREEN WALLS

 | **SYNLAWN®**
NEW YORK

(212) 247-5296 • 59 Franklin St B, New York, NY
newyorkartificiallawns.com

TAKE CHARGE OF YOUR ANXIETY



FEEL LIKE YOURSELF AGAIN

Alpha-Stim is the drug-free, clinically proven treatment to alleviate anxiety, insomnia, and pain.

Get dramatic relief fast. Alpha-Stim is an FDA-cleared, easy-to-use handheld prescription medical device that treats anxiety without lasting side effects or risk of addiction. Get started at alpha-stim.com.

ALPHA-STIM®

©2023 Electromedical Products International, Inc. All rights reserved. Alpha-Stim and the Alpha-Stim logo are registered trademarks of Electromedical Products International, Inc. Read a full disclosure of the minor and self-limiting risks here: alpha-stim.com/risk