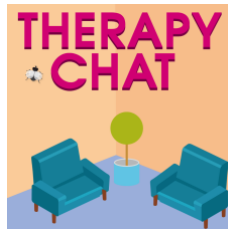


Therapy Chat Episode 276



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[00:00:00] **Laura Reagan:** Therapy Chat Podcast Episode 276.

[00:00:04] **Announcer:** This is the Therapy Chat podcast with Laura Reagan LCSW-C. The information shared in this podcast is not a substitute for seeking help from a licensed mental health professional. And now here's your host, Laura Reagan LCSW-C.

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[00:01:12] Hi, welcome back to Therapy Chat. I'm your host, Laura Reagan. And today I'm so thrilled to have a returning guest for his third interview today. My guest is Tim Desmond. Tim is the author of self-compassion and psychotherapy. And the self-compassion skills workbook, as well as his newest book, How to Stay Human In a F****d up World, and he's a co-founder of the Morning Sun Meditation center, a co-organizer of Occupy Wall Street, which I just found out about today. I think that's so cool. And a student of [inaudible] distinguished faculty at Antioch university. Like I said, he's been on the podcast twice before and his newest project is peer [00:02:00] collective.com, which is a platform for emotional support that I'm just so interested to hear about.

[00:02:05] So Tim, thank you so much for coming back to therapy chat today.

[00:02:08] **Tim Desmond:** Yeah. Thanks for having me.

[00:02:10] **Laura Reagan:** It's always a pleasure and I can't wait to let our audience sort of hear how you, what all you've been doing since the last time I had you on and how you're really spreading your message of compassion, just, you know, far and wide.

[00:02:27] So before we even dive into it, though, will you just start off by telling our audience a little bit about yourself and your work?

[00:02:35] **Tim Desmond:** Sure. Yeah. So I think maybe the easiest way to, to sort of start is how I ended up getting into professional psychology i, um, I spent most of my time after undergrad going back and forth between grassroots kind of political organizing and spending time with [inaudible] at different, um, Buddhist monasteries and learning meditation.

[00:02:58] And those are sort of like [00:03:00] the two things that have been really huge strength and force in my life. And I went into professional psychology as sort of a way to extend my interest in meditation and Buddhist psychology. And then in my professional life, I ended up kind of focusing on mindfulness and self-compassion practices within psychotherapy, as well as just like psychotherapy outcome research, and just really understanding, which for me are so deeply connected.

[00:03:31] What is it that drives outcome? Like my background in Buddhist psychology, the core question is sort of like what what's, uh, how do we recognize and transform suffering and, and so, uh, and learning years of, of, uh, meditation and sort of Buddhist psychology and sort of this understanding that compassionate presence is really the energy that transforms suffering and then seeing it.

[00:03:55] So that's kind of driven a lot of my interests in terms of [00:04:00] like outcome research, as well as like teaching people, meditation practices.

[00:04:04] **Laura Reagan:** Awesome. Um, yeah. And that's really, that all makes sense. I don't know if I interrupted you if you wanted to say more.

[00:04:12] **Tim Desmond:** Yeah. That's I mean, that kind of like leads me to where I'm at now and that leads me to the last time we spoke I think I wrote how to stay human as it is. So, this kind of interesting story there is I, um, I was pitching a book that was called mindfulness for people who don't meditate. And it was sort of like a little bit more of a niche kind of book.

[00:04:36] And my, um, my editor at Harper Collins basically said like, well, what if you wanted to write a book just kind of, for everyone just like a very general public general psychology book, you know, what would it be? And I was just like, yeah how to, how to stay human in a world was sort of like what came up for me.

[00:04:54] And the idea is we all go through pain [00:05:00] in so many different ways. And, you know, w what have I learned in my life as a therapist and as a, um, as a meditation teacher about what helps us to stay in touch with compassion and empathy, and just like our real sense of, of humanity and feeling alive and feeling connection, like, how do we stay in touch with what's really alive for us, going through all of this pain?

[00:05:26] And so in the book, I talk about a lot of challenges that I've been through my life in my life. Um, I talk about work as an organizer. I talk about my sort of growing up and I grew up in Boston with a single alcoholic mom and we were, we were homeless for awhile and sort of struggles there and that as I was writing it, my wife was, my wife had been diagnosed with stage four, colon cancer.

[00:05:51] And she passed away just not, not long or actually just a little while before the book came out. And so a [00:06:00] big part of writing it in the big part of the book was sort of like learning how to practice kind of in the midst of crisis. And then, you know, this a couple of years later and now everybody we're sort of all in this shared crisis together.

[00:06:12] **Laura Reagan:** Very true. And I'm so sorry for the loss of your wife.

[00:06:15] **Tim Desmond:** Yeah. Thank you.

[00:06:17] **Laura Reagan:** I think that point about like being able to withstand suffering, I guess, during, you know, really hard times is just so powerful because people always talk about meditation as you know, you're up on a mountain and you know, you're away from everything, it's so peaceful and you're silent for days and weeks. And that can be one way, but you know, in this real life, day to day full of struggle, competition violence, you know, it can, it could seem a lot more difficult. So I think the idea is very valuable.

[00:06:53] **Tim Desmond:** Yeah, it's interesting because when I was first starting, so, so a little bit more just like stuff that's happened since [00:07:00] we last spoke. So. Um, I was invited to give an author talk at Google, um, in the, on the mountain view campus. And when I was there, they actually recruited me to run a team I'm working on. There were some people who are wanting to do a mental health project. So I ended up working at Google for about nine months working on this basically doing research about online peer counseling. And I'll talk a little bit more about kind of like why that was my interest and where I, why I went there and went, was sort of given the opportunity to try to start a new thing, um, in mental health. Part of it, so, uh, I was, when I was like, thinking about coming to Google, I was talking with a lot of people in the field whose opinion I really respect.

[00:07:41] And I'm not sure if you're familiar, um, Bruce Wampold. He wrote the Great Psychotherapy Debate. He's like, uh, he's from University of Wisconsin. And basically, he's like a big researcher in the world of common factors. Basically, the idea that like a very small part of what makes [00:08:00] therapy effective are the specific interventions that are sort of differ from one type of therapy to the other.

[00:08:06] And he's one of the people who really kind of mathematically showed how it's the common factors like empathy, and warmth, and the relationship that drive most of the outcome. So talking with Bruce about trying to understand, like, you know, how do we like, how do we make that those kinds of relationships, you know, relationships characterized by empathy and warmth, how do we make them more available?

[00:08:31] And one of the things that he brought up that I thought was kind of fascinating, and this is interesting, this like relates to your point about meditation. He was saying, we were talking about how emotional intelligence is contextual, like in the sense that you could, so one person could be at a cocktail party and exhibit a lot of emotional intelligence for that place.

[00:08:53] Like they're really, they're charming and they're like making jokes and they just have a lot of emotional intelligence within that [00:09:00] context. But then you try to talk with that person about your divorce and they have no idea how to respond and the opposite can be true. Someone can be like really uncomfortable at a, at a cocktail party, but really great at being present for you when you're going through a hard time.

[00:09:15] And one of the things that that Bruce was talking about is a lot of the research in, in looking at the impact of our, uh, social networks, like in our lives. Like, I don't mean like the online works. I mean, like our actual, like social systems, one of the things that he was saying is having a lot of friends and family and a big social circle- it's very protective against, depression and anxiety and that kind of stuff. But once someone's experiencing depression or anxiety, it's not that helpful for recovery. And his hypothesis was that most people have the type of emotional intelligence or skillset to relate positively to someone who's in a good mood.

[00:09:59] Like [00:10:00] most people find that relatively, relatively easy, like keeping someone happy who is already happy. And very few people have the skillset to relate positively to someone in a lot of distress. But that's sort of a, uh, an uncommon skillset. And so that's why he was saying like, some people do have friends and family that they can go to when they're in distress who are really helpful, but broadly speaking, it's, it's a rare trait.

[00:10:26] And it's one of the reasons that, that the sort of research shows up that way. And I felt like I'm just curious, like what your thought, if that makes sense to you, or I'm just curious, like to hear you, I thought about that?

[00:10:36] **Laura Reagan:** Yeah, it does. It does make sense to me because I think that when you were talking about that, I was thinking our culture is so averse to any unpleasant feelings and you know, we avoid them. It's just such a positive vibes only type of culture. And, you know, we really want to turn away from when we see, let's say, for example, a person on the [00:11:00] street who's homeless, we would rather turn away than think what it might be like to live on the street. Or, you know, when, when someone says I've experienced trauma, I see this so often people will say that their friends will be just like, oh, they just don't want to talk about it. And you know, they need someone who can hold that for them.

[00:11:20] **Tim Desmond:** And yeah, and for me, that comes back to how, how does someone practice mindfulness or meditation? And one of the things, so Bruce and I actually developed this video assessment tool, um, and basically how it works is you watch seven short videos that are like simulations of really challenging moments that you might face in trying to offer somebody support. Um, but you know, the, like one of them is sort of like,

you know, I'm really Christian and I just need to know, are you a Christian? And then another one is like, yeah, I use Coke at work. My wife doesn't know, but it's not a problem. And so you watch [00:12:00] these sort of simulated encounters and then you respond, right?

[00:12:03] And so each of these seven little videos. You respond, like, what would you say to this person? And then we developed a tool to sort of grade the responses based on everything that we know that correlates with being effective in, um, in providing mental health care. And so that a big part of what we did at Google was sort of like studying and refining this tool to help us to be able to predict, you know, for non-professionals completely untrained people.

[00:12:33] Could we predict who would be good, who would be effective at, at sort of providing, um, emotional support? And so one of the things that I found that was really interesting is when I started, uh, so we were testing this on Google employees. We were testing this on like, you know, various people that we just kind of like, you know, put an ad on Craigslist.

[00:12:52] And then I started testing it on a bunch of Buddhists that I knew. And the thing that I found fascinating was about half of the Buddhists [00:13:00] were exceptional. Like top 2% of all the people that we study. And then the other half of the Buddhists were awful. And when I talked to them a little bit more, it came down to what do you do when you're meditating?

[00:13:12] And the people when they're meditating, who are paying attention to their own suffering and their own distress, And, and at least part of not all, but part of their meditation is like welcoming and embracing, you know, tension or fear or those sorts of things. Those were the people that were excellent at this.

[00:13:33] And then people whose whole meditation practice was just all about trying to stay positive. When they were confronted with someone who is like in a lot of distress, they were just like a deer in headlights. I had no idea what to do.

[00:13:46] **Laura Reagan:** That's a such a beautiful point you're making here, because this is that, you know, when you are meditating, are you dissociating or are you actually present to the pain?

[00:13:58] **Tim Desmond:** Exactly. [00:14:00] Yeah. And, and it's like, so, so that's, that's been a big thing for me. And so what we, so we, we did this research at Google for a while. And Bruce Wampold and a few other kind of academic psychologists got involved. And then it became clear that this should not be a Google product. It should be like its own thing.

[00:14:18] So for various reasons, you know, like various things kind of came together and we decided, yeah, we should leave. Uh, so I left Google and then started something called Peer Collective. And the idea of Peer Collective is that we, we were just like peer counselors.

Um, on our platform, don't need, some of them are like, you know, certified peer support specialists.

[00:14:40] Some of them have graduate degrees in psychology, but a lot of them don't have any background in mental health in order to get on our program, you need to be able to kind of go through this video assessment and score in the top 3% in terms of your capacity for empathy and warmth and alliance when someone's in [00:15:00] distress.

[00:15:00] And what we're finding is that those people are like from the whole spectrum of society. And so the idea for Peer Collective and this is the thing that I want to, one of the things that I wanted to talk about with you is so many people need more emotional support right now. And as mental health professionals, it's like, there's just not enough of us.

[00:15:21] And we can't be as available as people, as a lot of the people that we're seeing really need. And so the, the, one of the big things that I'm thinking about in terms of, as we grow Peer Collective is just trying to be a service to mental health professionals to supplement what, what they're doing. And so I'm just like, I guess I'm curious for you, like, as you, when you look at the field and when you look at kind of what's happening in the world, what do you see as like what's really needed?

[00:15:50] Uh, or like, yeah. Um, yeah, I'm just, I'm just curious, like what, what comes up for you?

[00:15:55] **Laura Reagan:** Yeah for me there's clearly a, I can just say for [00:16:00] one thing as a therapist, there's a huge number of people seeking therapy right now. And almost all of the therapists I know are full, not to say that another crop won't be graduating from grad school soon, which is wonderful because we need more people. I feel like with COVID the pandemic there've been, there's a much higher need now and will be in the future because of COVID. And because of this experience, you know, on top of what people were already dealing with, I think it's overwhelmed a lot of people's capacity to cope. And, and then the other part is accessibility to emotional support that is, you know, available, not just like therapists, who don't have openings, but availability and affordability and, you know, really being feasible for people to be able to get into. So, one thing I'm thinking about what you're doing is it seems like a way to de-stigmatize seeking help, you know, for people who are less comfortable with the [00:17:00] idea of talking to a therapist and they're like, well, it's not that serious, you know, but I just need some support.

[00:17:05] **Tim Desmond:** Exactly. So, so one of the things that we've been thinking about is that there's a huge gap right now between like a crisis line and then seeing a sort of a full-price you know, a licensed professional and then there's like nothing in between. And we know that. And so what Peer Collective is trying to be is that in-between space and, and we've seen kind of two main, so we, we actually, we launched about six months ago. And in those six months, we've had about almost 2000 people as we're recording this have used the platform

[00:17:42] **Laura Reagan:** That's great.

[00:17:43] **Tim Desmond:** Yeah, thanks. And in that time we're seeing the two categories of people that keep coming back and coming back. And one is someone who needs support and has limited access.

[00:17:55] So either they can't afford the \$200 an hour, a [00:18:00] therapist they've contacted their insurance. Maybe they don't have insurance, or if they do their insurance has a six-month waiting list and they really need to talk to somebody now. So what they're really interested in is the accessibility and the affordability because, you know, we're, we're, we're roughly, we, we pay our peer counselors \$20 an hour, and it's sort of like, aren't, they, they work kind of whenever they want to, they set their own schedules.

[00:18:24] So right now a half hour session at Peer Collective costs, \$14 and an hour long session costs 28. And so that's affordable for a lot of people. And everybody who comes on the platform gets a free session just to try it out. So there's some people that need help and have limited access. And then the other thing, like what you were saying, some people actually could afford a therapist, but they're looking for a non-clinical relationship.

[00:18:49] And it's interesting because I know a lot of therapists who are pretty nonclinical in the way that they relate to their clients, but still it can feel formal for people. I [00:19:00] mean, I certainly know a lot of therapists who do act very clinical and they keep that sort of clinical distance and others that don't but I think the whole idea of like this isn't therapy it's, you know, it's peer support and it's just sort of like somewhat ideas that like it's a helping relationship based on shared experience. And, um, yeah. And so there's definitely that thing of like it being nonclinical that, that makes some people be able to approach it a little easier.

[00:19:25] Yeah. I think that, uh, I guess like one question for me as you're sort of talking about that and this awareness of people who are, have a full practice. Yeah. Like how to, I guess I'd be curious. I'm just curious for you, or were you either speaking for yourself or just like, you could say like hypothetically for any therapist, but I'm curious, like about using something supplementally like this, like, what would you be thinking about in terms of what would you need to know about or how you feel about, or how could you imagine either? Like, so it's like people who are coming to see you and you don't have a space for them or [00:20:00] people that you are seeing, but maybe you need more support. Like how, how would it, I'm just curious, like what you think about utilizing something like this or what you'd want to, what'd you want Peer Collective to be able to provide or whatever, to make that easier?

[00:20:11] **Laura Reagan:** I think one of the questions that would be in my mind, for myself and to, to explain to someone I would refer to using this as a compliment to therapy or supplement, um, would be, how will it be different from therapy?

[00:20:26] **Tim Desmond:** Yeah. Yeah. So, so it's interesting. I think the, you know, the, the legal definition, you know, when we look at, uh, sort of like what makes psychotherapy different than other helping relationships is that there is some element usually of diagnosing and treating like the idea of like, um, that you're giving somebody a diagnosis and then

creating sort of a treatment plan. I know that again, not all professional therapists work that way and not all professional therapists even believe in diagnosis.

[00:20:57] They sort of. Uh, but most do. [00:21:00] And so I think that that is the clearest, like night and day thing that in Peer Counseling, you're not going to be diagnosed. Um, and there's not sort of that type of treatment plan. I think the idea and, and what you'll get with Peer Collective is someone with a lot less training, but someone that, you know, is a warm and kind of empathetic person that you can, and that you can be able to talk with kind of as much as you'd like. So how does that sit? Like how does that sit for you in terms of like, like, is that like clear about how it would be different or,

[00:21:37] **Laura Reagan:** Yeah, it is and I think something that's definitely been in the back of my mind while you've been talking is there are some online platforms right now that are calling themselves, you know, online therapy whenever you want it, 24/7 and you know, a lot of therapists are balking at the services being presenting what they provide as [00:22:00] therapy. So I feel like because, yes, the person you're talking to, maybe a licensed mental health professional, but how can you be doing quote therapy, like by exchanging texts back and forth and without the structure of the therapeutic relationship?

[00:22:14] I mean, maybe it's just a different way, but I feel like this, your service seems like a more aligned, it's really doing what it says it's doing instead of sort of presenting something and packaging it as calling it therapy when it really sort of. I don't know if it really is. I'm not saying it isn't, but I'm not sure it really is.

[00:22:35] **Tim Desmond:** Well, so actually the, the idea of Peer Collective kind of came back to me a long time ago. Like several, several years ago, I remember working in my private practice and feeling like there were out of it at one point I sort of, I went through and I was like, so about a third of the people that I'm seeing, I feel like I'm really able to use my expertise.

[00:22:58] Like I feel like they [00:23:00] really need someone with my level of training and, but more than half, they just wanted to be able to talk about their week and for someone to care. We're just talking about their life and just be, have that type of witness and care. And I remember just feeling like God, I would be able to help so many more people if I had a, if I could like send those people basically to be like, well, when you're ready to do a deep session and you want to like really kind of untangle something, that's like, kind of, you know, that's, that's hairy for you. Come back and let's do a session. And in the meantime, if there was just somewhere that I could go, where there would just be like people who care and could listen.

[00:23:40] Um, and I was like, yeah, I could, I feel like I could really help a lot more people that way. And so that, that sort of like a Step Care Model of like a lot of the time, people just need empathy, but sometimes they need something that's like requires more expertise that that's like one of the things that, that sort of led me to start thinking along these lines.

[00:23:59] But when you're [00:24:00] saying like the, the, um, you know, the Talkspace Better Health, like a lot of those sorts of companies and the exchanging texts. I can just say for me, I do not think that I could be nearly as helpful to people that I've worked with if we were just emailing back and forth, which is kind of basically what, what these things do.

[00:24:23] I, I at least sort of like philosophically for me, if you believe that a big part of what's transformational is human connection and that experience of like compassion and empathy, I think you can get a little of it through exchanging texts or emails. But I, yeah, it just doesn't quite sit right for me.

[00:24:44] **Laura Reagan:** Yeah. There's a, there's something about the face-to-face voice to voice connection. And I know that the services you mentioned can do offer actual therapy sessions virtually as well, but you know, for the text and email aspect, [00:25:00] I agree. I just, it's not nearly as relational and you can, you know, you can read someone's words and you can, you know, you can know that they're kind words, but I feel the relational you know, the spark of relational being relational is the actual feeling of the person.

[00:25:19] **Tim Desmond:** Yeah. Yeah.

[00:25:19] **Laura Reagan:** And that's hard to do in, in words, in that way. Yeah.

[00:25:25] **Tim Desmond:** Yeah, and just sort of like feeling that someone really cares for you.

[00:25:28] **Laura Reagan:** Yeah. But I think it's also really interesting that we as therapists are certainly not vetted to that level of how much EQ do we have. So I think that's a really interesting aspect of what you're offering that, um, not every therapist may have the level of emotional intelligence that you're saying, you know, you're asking of your peer counselors and I think that's a real benefit to what you're doing that you're really carefully choosing selecting [00:26:00] people who have those qualities and then training them in how to help.

[00:26:04] **Tim Desmond:** So after, after we established Peer Collective uh, Bruce Wampold, uh, had finally convinced the University of Wisconsin to use sort of a similar model for vetting doctoral candidates. At first, um, you know, program in the country, that's doing that, but they're starting to do like a similar model of like there, there are some, there, there are some personal qualities.

[00:26:28] So, um, I, I, I really believe that people can develop empathy and compassion, but I believe it takes a tremendous amount of time and energy and effort to be able to really improve those qualities in yourself. I think it can be done, but I think it's slow and hard. And I, and so for us, it's sort of like, well, ideally you just start with people that already have those qualities and then you teach them the parts that are like more easily teachable.

[00:26:54] **Laura Reagan:** That makes sense to me.

[00:26:55] **Tim Desmond:** Yeah. Yeah.

[00:26:56] So, so that, so we're, we're really excited [00:27:00] about this and we're trying to figure out ways of, of partnering with therapists to sort of be an extension because what you just described is totally the way that I see it and sort of like so many therapists are full. I mean, sadly they're like, especially people in private practice, there can almost be this fear of not having a wait list.

[00:27:21] Um, because you don't want to have, like, you know, just in terms of your, your economic livelihood, you don't want to like lose people. But then at the same time, like really from like a, from a social standpoint of really trying to, to improve the mental health of our society, it's like, how do we really get if, if, if we believe that this sort of relationship of, you know, empathy and care is has, you know, healing powers that can be helpful, then we just want to get that to as many people as possible. So we're just trying to figure out like, yeah, what, how can we create the service in such a way that it feels like [00:28:00] it's supportive for therapists to utilize, either with people that they can't see or even, and people at the RC.

[00:28:08] **Laura Reagan:** Yeah. I think it sounds like it can be a great either a replacement for therapy, for people who don't really have that level of need or a compliment for people who need more than their regular weekly, or every other week session with their therapist.

[00:28:23] And, um, so I think another question that I would have as a therapist, Is like, how does your model handle, if someone is having like a severe mental health concern, that's really sort of out of the scope, you know, let's say they've already been using the service, but then on a certain day they're extremely in crisis or, you know, suicidal or anything like that.

[00:28:48] How would your model handle that?

[00:28:51] **Tim Desmond:** So luckily we're in touch with, we've worked with people from Crisis Textline and, um, [00:29:00] and a couple of other crisis lines. And we've we based our, you know, crisis and escalation training just on, like, if you were to use crisis, text, line, most likely the person that you, um, that responds to you and actually, and you know in a lot of crisis lines that they're not professionals. Um, and so we kind of based our training on what they're doing because we want wanted, we felt like, yeah, We're not advertising ourselves as like, you know, we're here if you're in crisis, but we will get people in crisis. So we want to have that level of, of training there so that that's like the that's, uh, that's one of the core pieces, uh, that our peer counselors go through.

[00:29:38] So it's basically, we respond just like a, like very similar to a crisis line. And we really, you know, we, we do the same sort of assessments and safety plans. And we have licensed providers who are available to get on a call whenever a peer counselor says, you know, sort of feels out of their depth. And we use, you know, resources like 211, and other ways of like plugging people [00:30:00] into the professionals, uh, um, system.

[00:30:03] We like to say that we do resources, not referrals. And so the idea is when someone comes onto Peer Collective, we're never going to kick them off of Peer Collective because Peer Collective is the whole point is to be like, to be there if you can't get anything else.

[00:30:17] **Laura Reagan:** Yeah.

[00:30:17] **Tim Desmond:** Um, but we offer resources. So we say like, Hey, if you want to see a psychiatrist, we can try to help you find a psychiatrist in your area.

[00:30:24] If you, if you want to see a therapist, we can help you find a therapist in your area or a community mental health center. Um, you know, like if you need help signing up for Medicaid or whatever it is, it just help like navigating your insurance plan or just someone to talk to, like, while you're on your insurance plans waiting lists, like we, we just try to be have that type of type of collaborative spirit.

[00:30:49] So we, I think like the first question that somebody has, if they're in crisis, Do you have a doctor or a mental health professional who's overseeing your care and like trying [00:31:00] to like, make sure that they're, that they, that that person is plugged in is, you know, has notified that person. Who's the one who really should know. And if they don't then trying to help them get one.

[00:31:08] **Laura Reagan:** Okay. Well, that's really great too. I mean, and, uh, help signing up for Medicaid and, um, things like that, that, that kind of stuff is very very, very much needed, very much needed.

[00:31:21] **Tim Desmond:** Yeah. So, because we provide a free intro session to, um, anyone who, who finds us, we do a lot like I've, uh, you know, I've, uh, we we've done a lot of just like helping people to try to find other free services cause we're not a totally free service and we're not Medicaid reimbursable yet. We hope to be, um, we're actually doing a randomized controlled trial right now through, uh, UT Austin. And hopefully when we get our evidence back, we might be able to be reimbursable in different ways, but for now we can only do one free session.

[00:31:53] So a lot of the, it, this is substantial amount of time that we do trying to help people find more free services.

[00:31:59] [00:32:00] Wow that's, uh,

[00:32:01] **Laura Reagan:** I just, I think the whole thing is amazing. I think that's like a really wonderful thing. I mean, for access.

[00:32:09] **Tim Desmond:** Thanks. Yeah. I mean, yeah, so, so. Yeah. So, so that's kind of like the, what I've really been up to is, is that sort of like, you know, um, and I think like for me,

what it, what it comes down to is like, I was, I was really trying to teach people how to develop self-compassion and to grow that in themselves.

[00:32:28] **Laura Reagan:** And, and then sort of got to this point of like, that's hard for a lot of people. It would be great if there was just like an app that you could go to. And there were just a lot of compassionate people that you can that you know, that you can choose from and could listen to you when you don't have compassion for yourself.

[00:32:44] Yeah. That's another piece of it that I think is very special that you mentioned to me before we started recording, being able to choose who you're going to talk to. Can you speak about that a little bit?

[00:32:56] **Tim Desmond:** Yeah. Sure. So if you go to peercollective.com, [00:33:00] you'll answer a couple questions about yourself and then a couple of questions about the type of person that you believe would be likely to help you. So do you have a gender preference? Uh, any sort of like age or identities preference? And then you get to read profiles and kind of look for who seems like they might be the type of person that, that, that you think would get you. And then you can book either a 30 minute or a 60-minute session, and it can either be over the phone or over video chat.

[00:33:28] **Laura Reagan:** That's awesome.

[00:33:29] **Tim Desmond:** And we've been surprised it's like almost two thirds of people, uh, choose phone. I don't know if it's like zoom fatigue or if it's just sort of like the, you know, the pressure of not wanting to be on camera, but, um, but yeah, we've been, I thought everyone was going to like video and I've been surprised that a lot of people, I just want the sort of, we call it a call, my mobile, uh, option. They just receive a call.

[00:33:49] **Laura Reagan:** You know what, so it sounds like you're saying that the person can, can select call my mobile and then they receive the call instead of having to make the call. And I think that if that's what you're [00:34:00] saying, I think that's genius because it's so hard for people to, they want the help and they want the connection, but making the call can feel so hard.

[00:34:11] **Tim Desmond:** Yeah. And, and we do, we got a lot of people, especially in the first, uh, in the sort of free interest session, we get probably at least like 25% of people who don't pick up and just kind of like, yeah. So we're trying to figure out how to do that and how to, how to make it a warmer, you know, even just sort of like leading up to a type of experience.

[00:34:31] We've experimented a little bit with like before the session, you know, sending a text and being like, Hey, this is your peer counselor. I'm going to be calling you in a couple of minutes. Is there, you know, do you want to, is there anything you want to say before we start talking or you just like trying to make it feel a little more approachable.

[00:34:46] Cause yeah, it's, there's that like hesitancy and shyness. That's like a big thing for when someone's reaching out for help.

[00:34:54] **Laura Reagan:** Yeah. Yeah. It's such a vulnerable experience to need help and to want help and you know, being [00:35:00] afraid that you won't really be met when you try to get help. There was something, oh, I wanted to ask you, how would, let's say someone who's listening is not a therapist or they are, and they feel like this would be something that they would like to help with.

[00:35:17] They would like to work on your Peer Collective site. How, what do they need to do?

[00:35:23] **Tim Desmond:** So you can email me, uh, tim@peercollective.com, or you can just go to Peer Collective and click on one of the contact, us kinds of things and yes send a message. And, um, we'll, uh, kind of figure out depending on like where you are.

[00:35:37] We're, we're probably going to need to hire more licensed professionals that the licensed professionals that, that, uh, um, the role we call it a counseling support role, like a, cause people are kind of contractors. We're not, we're not like managing them, but we're there to support [00:36:00] around clinical issues.

[00:36:01] And so it's that type of relationship. And we do check-ins and I don't know, like, yeah, I get, I get calls from peer counselors in the platform, many calls a day, just sort of like, oh, I have someone, someone booked a session with me for an hour from now. And. I've never, you know, uh, you know, like I've never had a panic attack.

[00:36:23] Like, you know, I say that I have anxiety, you know, I've, I've had anxiety before, but I've never had a panic attack. What do I need to know about panic attacks to be able to support somebody? And so that's like a big role that that's like a big sort of like, um, a role where we're going to be hiring more licensed people.

[00:36:39] Um, and then, yeah, but if somebody just wants to have the app, like some of our peer counselors are Google employees and like other people with like kind of full-time jobs and they just want, but they love this type of work. And so they do it in their spare time. And so yeah, you can just, you can find me, um, through peercollective.com and just reach [00:37:00] out.

[00:37:00] **Laura Reagan:** Okay. So you hire both peer counselors and licensed professionals. So people who are listening, who are not licensed professionals, but they are just really empathetic and like helping people, they could contact you as well. Right.

[00:37:14] **Tim Desmond:** Absolutely.

[00:37:15] **Laura Reagan:** Wonderful. Well, I think this is a great thing. And I think, like you said, there are crisis Textline and other crisis lines, which are for crisis, and they're not just to listen when you're not in crisis.

[00:37:30] And then there's therapy, which is when you have a, you know, a deeper issue that you really need to explore and work through. And I think you're right, that this is a great gap filler. And also seems like it could do a lot to just making our world kinder and more compassionate, which is much needed. Well, Tim, where is there a place where everything you're doing is all in one place or would you rather people look you up on peer collective?

[00:37:57] **Tim Desmond:** Yeah, I mean, You can [00:38:00] find my sort of books and talks around on the internet. I don't, I sadly, I'm not good at kind of like keeping all that in one place for people. Um, but yeah, you can just, if you just kind of Google my name, then you can find, you know, books and talks and things like that. But for me, like, yeah, so, so much of what I'm doing right now is really focused on peer collective and trying to grow that.

[00:38:18] **Laura Reagan:** Wonderful.

[00:38:19] Well, I'm glad to help you spread the word about that. And I hope that many people who need it will find it through listening to this.

[00:38:27] **Tim Desmond:** Thanks.

[00:38:27] **Laura Reagan:** So I just want to thank you again for being my guest today.

[00:38:30] **Tim Desmond:** Yeah, it's great to connect again.

[00:38:35] **Laura Reagan:** Hey therapists, do you feel stuck working with clients who can't access their emotions or named their inner experience?

[00:38:43] Do you find it difficult to work with people who are disconnected from their own emotions and they may be disconnected within the therapeutic relationship as well? Learn a comprehensive approach to conceptualize your client's concerns. Sensorimotor Psychotherapy uniquely includes the body in therapy as [00:39:00] both a source of information and target for intervention, because words are not enough.

[00:39:04] We all know that talk therapy is limited. You've heard it discussed on this podcast multiple, multiple, multiple times. And if you've been listening to this podcast for a while, you also know that I am a huge fan of Sensorimotor Psychotherapy. I've completed levels one and two, and plan to pursue the certification level, level three.

[00:39:25] And the reason why I love it so much is because I've experienced shifts within myself through the experiential training process and huge shifts in my work with clients, through the training that I've received with Sensorimotor Psychotherapy Institute. I highly

recommend that you check out their website, sensorimotor.org to learn about their trainings.

[00:39:48] In fact, they have trainings coming up this summer and to view their webinars, learn more about what Sensorimotor Psychotherapy is, it's a beautiful, powerful method [00:40:00] that I can't recommend highly enough. So check them out at sensorimotor.org.

[00:40:06] **Announcer:** Thank you for listening to Therapy Chat with your host, Laura Reagan LCSW-C. For more information, please visit therapychatpodcast.com.