

Getting Mental Health off the Couch and Into Your Community

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What you need to know about me

- My psychological superpower is knowing what I'm bad at.
 - I'm terrible at treating eating disorders. I refer out.
 - I get overwhelmed by the Autism spectrum. Can't be the primary diagnosis for me.
 - Bipolar disorder brings up a lot of stuff for me. I need to make sure I take care of myself with these cases.
- This is how I discovered I'm good at anxiety
 - Research is me-search.
 - The treatment makes sense to me.
 - I can do this for the rest of my life, never get bored, and have limitless compassion.
- My greatest success [all details changed to preserve patient's privacy]
 - Beth, an evening news producer in NYC.
 - Developed a vocal tic in adulthood. Then, social anxiety and generalized anxiety.
 - Everything was worse around breaking news. She couldn't do her job. Her team wanted her to get help ASAP.
- We did it all, and quickly
 - Emotion regulation to work with her stress.
 - Habit reversal to tackle the tic.
 - Put it all together with exposure for social anxiety and acceptance for generalized anxiety
 - Deep breathing competing responses, while lying down in a production meeting, during the 2016 elections
- Then, she came to one of my anxiety talks
 - I'm a great anxiety therapist.
 - I'm an award winning teacher.
 - And one of my favorite patients just gave me devastating feedback.
- Why this hurt so bad.
 - I didn't get into this field to help the 20 people who were able to jump all the hurdles to get into my office.
 - There are approximately 700,000 mental health professionals who provide services in the US, compared to about 75 million people who could benefit from services.
 - I believe in "giving psychology away":

- Psychologist George Miller, 1969: "...psychology must be practiced by nonpsychologists...the secrets of our trade need not be reserved for highly trained specialists. Psychological facts should be passed out freely to all who need and can use them...There simply are not enough psychologists, even including nonprofessionals, to meet every need for psychological services. The people at large will have to be their own psychologists, and make their own applications of the principles that we establish. Our responsibility is less to assume the role of experts and try to apply psychology ourselves than to give it away to the people who really need it."
- What went wrong?
 - The things that make us great clinicians can actually prevent us from having a broader impact.

3 problems we need to solve:

1. We hold life-changing knowledge but it's trapped in our offices.
2. We're trained to help many but structured to help few.
3. We need to be ethical. Promote quality. But we're competing with charlatans.

The solution:

- I'm going to share a framework that transformed my reach from 30 patients a week to millions of views.
- But first, we need to understand what's really holding us back.

The enemy: curse of knowledge

- Made to Stick by Chip and Dan Heath
- Evolution of a psychologist's schema for anxiety
 - Before grad school anxiety means "scary feeling go away!"
 - During grad school it becomes "worries about the future, fearful sensations in the body, and an urge to avoid and seek safety."
 - As an expert it becomes:
 - Neurophysiological predispositions to dysregulation in arousal, inhibition, and emotions
 - Deficits in information processing
 - Conditioned responses that are reinforced through experiential avoidance
 - Metacognitive beliefs that maintain cognitive attentional syndrome
 - Attributional bias (internal and external).
 - We need this complexity to do our job.
 - We can navigate it well one on one.
 - But we're not trained to do this one to many.
 - It's like trying to teach someone to ride a bike by explaining physics.

- Demo: How would you teach a child to play chess?
 - A very complex game with overwhelming rules.
 - Instead of teaching how every piece works, start out with just the king and queen. They're the two most important pieces.
 - Teaching the complexity is boring. People want to play as soon as possible.
 - Most of what experts think people need to know, people don't need to know.
- Curse of knowledge is enemy number 1. We know how to overcome it one to one. But how can we navigate it when we are one to many?

The solution: R.E.A.C.H.

- I kept falling victim to the curse of knowledge.
- Then I stumbled upon a framework that worked. And kept working.
- REACH Framework
 - R - Research your audience.
 - E - Engage through story.
 - A - Approach your audience
 - C - Connect to what they know.
 - H - Help them take action

R - Research your audience.

- Storybrand by Donald Miller
- Regular humans don't talk like psychologists.
- Learn how your audience actually talks about their mental health. The specific words they use to describe their problems, goals, and beliefs.
- How to do it:
 - Go to the Reddit community most associated with the problem you want to address.
 - Sort by most popular posts from the last month, year, and all time.
 - Read through comments for those posts.
 - Paste descriptions that are most upvoted in a document.
 - Run that data in your preferred AI assistant (I use Anthropic's Claude but you can use Google Gemini, OpenAI's ChatGPT, or Microsoft's Copilot).
 - Ask it to analyze the data and identify patterns in how people discuss this problem.
 - Ask on LinkedIn.
 - Because it's a professional platform people tend to be more civilized and helpful there.
 - Talk to the people who are hosting you.
 - Have organizers send out a survey
 - Ask, "What would make this a win for you?" Or, "How do I make sure this isn't a waste of your time?"
- Demo: How do real people talk about depression? How do we talk about depression?

E - Engage through story.

- Storyworthy by Matthew Dicks and The Moth: How to Tell a Story
- Stories...
 - Simplify information.
 - Boost focus.
 - Help us work together.
 - Run mental simulators.
 - Easily get stuck in our head.
 - Psychologist Dan McAdams: "Stories help us smooth out some of the decisions we have made and create something that is meaningful and sensible out of the chaos of our lives."
- How to do it:
 - Every story is really about a 5 second moment of time. This is your ending.
 - What is the opposite of this moment? That's your beginning.
 - Your story shows the change that got you from the beginning to the end.
 - "I once thought this. Now, I think this."
 - Telling us what was going on in your head.
 - This happened. I was thinking this. Then, this happened. Now I think that.
 - We see the big moments when we should be looking for the small.
 - Example: *Jurassic Park* is actually about a guy who goes from hating kids to caring about them.
 - "First Last Best Worst"
 - Car
 - Kiss
 - Pet
 - Trouble
 - Movie
 - Gift
 - Worry
 - Failure
 - Joy
 - Anger
 - Stress
 - Loss
 - Sadness
 - Prompts:
 - Things changed for me when...
 - A moment I will never forget is the time that...
 - If my life were a movie, one unforgettable scene would be...
 - Something someone said to me, that I will never forget is...
 - Put your best stories in a document and organize by topic.
- Ethics and boundaries.
 - Best to tell your own story.

- But everyone is different. You need to know your own boundaries.
- I only tell stories about my scars. Never my wounds.
- You can find a way to ethically share patient stories. I remove personal details and combine multiple patients into one. See ethics code on confidentiality (4.01 and 4.05).
- You can also use pop culture, current events, or history.
- Or just talk about your patient's in the second person.
 - "Have you ever felt this way? No matter how much you do X, Y keeps happening. And all you want is Z."
- My patients *love* this story → "We've got a doctor down"
- Demo: A story about stress

A - Approach your audience

- [Psychology in communities wiki \(Society for the teaching of psychology\)](#) & The Science Writers' Handbook: Everything You Need to Know to Pitch, Publish, and Prosper in the Digital Age
- Go to where the people are.
- Get welcomed in.
- Speak to their values.
- How to do it:
 - Take time to understand the community.
 - This works best if you are already part of the community.
 - Ask community leaders what their people need help with and then used this method to bridge their problems with psychology's solutions.
 - Possibilities:
 - Pitch an article to to someone or an organization you follow or one that is connected to a specific community
 - Find a local (or global) community and offer to answer their questions (e.g. Facebook groups).
 - Get involved in your local science fair
 - Volunteer at the local school's career day
 - Mentor a high school psychology club
 - Reach out to places of worship
 - Ask local businesses if they need help with workshops related to stress, anxiety, motivation, productivity.
 - Trade disposable assignments for [open pedagogy](#)
- Watch out for potential multiple relationships (ethics code 3.05)
- Example:
 - This talk is framed around "Giving Psychology Away" for psychologists
 - I've given a version of it to lawyers framed as "How to Get Clients to Truly Listen (and Act)"
 - For YouTube creators I've framed it as "How to Create Must-Watch Videos Without Burning Out"

- My YouTube audience:
 - My audience is mostly watching on their phone in the bathroom, on the couch, or in bed.
 - They might be in a state of anxiety, have Insomnia, or under the influence of...something.
 - My focus is on helping them to feel seen, realize they aren't alone, give hope that things can get better, and direct them to *one* specific action they can take.
- Demo:
 - If you want to give a talk about substance use and mental health, how would you frame it to these different communities?
 - High School Students
 - Healthcare professionals
 - Clergy

C - Connect to what they know.

- Use metaphor to bridge what they know with what you know.
 - Neal deGrasse Tyson: "You don't have to teach...pop culture. They already know who Beyonce is, what football is, who the Kardashians are. If they come in with that, and we analyze that scaffold, here's science that can fit this and that section, you walk away with an enhanced understanding of the pop culture you already care about and realize that science is infused everywhere. You'll recognize that science is a fundamental part of what it is to be alive in modern civilization...If knowledge connects with other things you care about more, then it's better than knowledge, it's enlightenment."
- Creates connections between well complex existing memories and mental health topics
- How to do it:
 - It's [familiar thing] for [new context]
 - Mindfulness is like a pause button for your mind.
 - Link abstract to physical experiences
 - Depression is like carrying a backpack stuffed with heavy rocks everywhere you go.
 - Link pop culture.
 - Just like how *Inside Out 2* shows us that anxiety is trying to solve a problem...
 - Connect to common experiences.
 - Bipolar disorder is like experiencing unpredictable weather in your mind.
 - Use tech concepts.
 - ADHD feels like having too many browser tabs open at once.
 - Sports.
 - In my office I'm the head coach and you're the star athlete. I can teach you what to do, but it's up to you to play on gameday.

- AI works exceptionally well at this. Collaborate with your patients to identify their interests and see what you can come up with through Anthropic's Claude, Open AI's ChatGPT, or Google's Gemini.
- Demo:
 - Improv a problem in anxiety and topic of interest.

H - Help them take action

- Don't outline the whole process of treatment. Focus on easy, specific, achievable next steps.
- Focus on three specific actions:
 - What is *one* thing someone can do right now that would immediately improve their functioning?
 - While there are lots of ways psychologists can help a recently disabled person, the most important next step is to improve access.
 - How can they activate social support, get help in the way they want to be helped? Share their struggle? Ask for help? Be less alone?
 - Psychologist Shelley Taylor: "Group living is perhaps the most significant adaptation of primate species, including human beings. Whereas other animals are armed with weapons, such as sharp teeth or claws, and defensive resources, such as thick skin and speed, primate species depend critically on group living for survival."
 - What is the next step to getting professional help? What resources are available? Who can they go to? What do they need to know about that process?
- Example
 - Recently diagnosed ADHD child.
 - Increase physical activity before periods of prolonged focus.
 - Connect with *this* parent support group.
 - Answer common questions about ADHD accommodations, treatment, and medication.
- Demo:
 - What specific advice would you give related to Thanksgiving stress?

Start doing this:

- Write down the good stuff
 - How your patients uniquely describe their pains
 - The things you say that make them go "oh wow, I didn't think about it like that"
 - The stories and metaphors you keep using
- Talk to the communities you're already connected to
 - What's the intersection of you, your personal interests, and your professional expertise?
 - Start there.
- Make it *very easy* for people to take action

- Remember ethical code Section 5.04 - you are responsible for what you say publicly so stick to your areas of competence.

Conclusion:

- We intuitively apply the REACH framework when we're one on one
- Now you know how to take your compassion and scale it up for a larger impact
- Our communities need us now more than ever.
- It's the marginalized people in our society who have the most to gain from us giving psychology away and the most to lose by our silence.
- But you now have the tools to give psychology away to those who need it the most.

Recommended resources:

- Made to Stick by Chip and Dan Heath
- Storybrand by Donald Miller
- Storyworthy by Matthew Dicks and The Moth: How to Tell a Story
- [Psychology in communities wiki \(Society for the teaching of psychology\)](#)
- The Science Writers' Handbook: Everything You Need to Know to Pitch, Publish, and Prosper in the Digital Age
- Anthropic's Claude, Open AI's ChatGPT, or Google's Gemini.

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