PPP\_S2E4\_Pooja Lakshmin Final Transcript

[00:00:00] **Pooja:** I think of the boundary as in the pause. So your boundary is in the space between when someone asks you for something or offers something and you take your pause and then you can say yes. You can say no, or you can negotiate. So the boundary isn't the no, the boundary actually is the space, and then you decide how you're going to move.

It's not a brick wall.

I am your host, Kaitlin Solimine, and this is the Postpartum Production Podcast. Here we hold conversations about the intersection of caregiving, creative practice, and capitalist production, as well as what it means to reproducing art. While also being a parent in modern society. Find out more@www.postpartumproduction.com where you can also sign up for our newsletter.[00:01:00]

I feel like every time I sit down and record here, I have to sigh, and I think it's probably because it's so blissfully quiet when. I'm recording by design, obviously, because I need it to be, but my life right now with three young children is just full of so much noise, which at times can be like this glorious symphony and at other times this disastrous cacophony that makes me wanna only add to the screaming.

So I appreciate just sitting in this quiet. So for a moment, I don't know if you also are able to listen and quiet, but I welcome you to just take a breath for a moment

because this conversation definitely [00:02:00] for me was a necessary pause and was a necessary shift in attention. And I don't know if it was directly out of this conversation or not, but shortly after this conversation with Pooja Lakshmin, which I'm very excited to share, I was. Scrolling slash doom scrolling as Pooja mentions shortly on Instagram, most likely and mostly only on Instagram.

I don't know what that says about me and my generational proclivities or something, but I try to tap into what makes me feel certain ways, and I was like, this just doesn't feel good in this moment. So for both personal but mostly professional reasons, I do need to keep my Instagram accounts themselves right now, and I do find it such a wonderful space to.

Find resources to connect with others, to build community, and I feel like so much of this podcast wouldn't exist without. It as a platform, not that it has to be Instagram, and I know there are lots of [00:03:00] other opportunities to form community online. But to that end, I recently decided to challenge myself to stop using Instagram, and I said, you know what?

I do have to still check in, so I'll set a certain time and date every week and do it once. Just once a week. I will check in, I will respond to what needs to be responded to. I will share what needs to be shared. And I don't know if this is going to work. I'm sure that, you know, I think the algorithms that be do not promote that kind of pause and that kind of approach to social media engagement, but for me it just feels like what I need right now.

And maybe that'll change, but it feels really good to have done that for just the last week and all that is to say. It did happen after this conversation, so I am, I'm curious to hear for you as well after this conversation, if anything has shifted, and especially after you go out and buy poo's book and read it or find it in your local library.[00:04:00]

That you will most likely feel this shift as well. So I welcome your feedback.

I'm really excited that today. As I said, we are talking to Dr. Pooja Lakshmin. Pooja is a psychiatrist specializing in women's mental health. A clinical assistant professor of psychiatry at the George Washington University School of Medicine. The founder of Gemma, the digital community, focused on women's mental health inequity and a contributor to the New York Times.

She works with women struggling with burnout, despair, depression and anxiety in her clinical practice, and has a wider focus on the intersection of mental health and gender. She helps women in marginalized groups heal from the tyranny of faux self-care, while exposing the systems that have gotten us here.

We dig in on this more deeply. In today's conversation, which I'm very excited to share with you,[00:05:00]

I feel like I know you, which is a nice thing. Maybe it's just like we've connected a lot. I think we've been doing a lot of necessary boundary setting with regards to our time and how to get together, so I feel like we've been enacting all of the work that you do in your book and that you share. So I appreciated that.

It's funny, I, I almost feel like as I've been doing the book Launch Press and things like that with the moms that I've been, Hmm. I mean, most of my professional colleagues are moms. That's mm-hmm. That's true. But also I think the process of getting the time together is in itself, A really lovely modeling.

Mm-hmm. Of what you were saying, the things that we're all trying to learn, but also a way to get to know somebody. And when you land with somebody who totally understands, we're gonna make it work and we'll figure out how to make it work. There's a trust and a compassion that feels really nice. Hmm. Hmm.

Yeah. Absolutely. It does it, I think it immediately connects you in a way [00:06:00] that just feels more authentic and mm-hmm. Compassionate and, Understanding, and you talk about this in your book and obviously today, I, I do wanna talk about your book and I have a few questions and notes, but I also think it relates to your personal story as your book does in such a lovely way.

For me, what struck me most and what resonated most for me was not only the personal work, but the way in which the personal relates to the political relates to the communal. Relates to the social and societal and the economic and all the systems in which we live, and that if we are only looking at. How we treat the self, that's not enough.

And so I'd love to hear how you came to this space in your life of thinking in this way and of revolutionizing the work that we do in terms of self-care. And I'm putting that in quotes, which I don't know if I should or shouldn't, but you can speak much better to that. You know, it was [00:07:00] interesting when I was writing the book, kind of thinking about where I wanted to place my personal story.

Because this book is a prescriptive self-help book, but there is a bit of memoir in there. Mm-hmm. Because I needed the reader to know where I'm coming from and also that I'm not just giving advice from the ivory tower, but that I've actually lived it and been in the mess and the gunk. And had to try and make sense of it for myself and give myself compassion too.

Mm-hmm. And so originally I actually had that memoir section in chapter two and my editor said, you know what? I think we should just put it in the introduction. And I was apprehensive cause I was like, oh my gosh, is it gonna like de-legitimize me like I'm a doctor Or like I'm supposed to like be the expert.

Is it okay? And I think it was the right choice because the fact that I, and, and for folks that are listening, if you decide to check out the book, You'll hear more in depth of this. Mm-hmm. But basically my journey is that I was a psychiatrist or training [00:08:00] to become a psychiatrist. I was married. I checked all the boxes of the things that I was supposed to do, and then I just was so profoundly disillusioned with.

All of the systems, but in particular psychiatry and just how much we failed our patients because we couldn't fix the broken systems that, you know, I just sort of blew it all up. I left my marriage. I moved into a commune in San Francisco that focused on female sexuality and orgasm and meditation. I dropped outta my residency.

And I spent two years in this new life and ultimately came out the other side realizing that can't run away from your problems. And that woowoo spiritual wellness world has just as many hypocrisies and inconsistencies as mainstream medicine. And unfortunately, the hard truth is that there is no easy solution.

Mm-hmm. And I think all of that was like a recognition and an understanding of me as you know, a first generation. Indian American woman who was [00:09:00] in this medical establishment trying to find my place. Mm-hmm. And of course, with lots of privileges of my own, you know, my father's a physician. There was a lot of privilege in my life.

And I think as I've gone through my own psychoanalysis, I didn't realize at the time just how much I was actually bucking some of those oppressive systems. That, that was sort of like what I was shouting against. Hmm. Then when I came back to medicine, it was like a lot more clear to me that the problems are outside of us, whether we're talking about white supremacy, whether we're talking about end-stage capitalism, whether we're talking about patriarchy and sexism.

It's all just baked into everything. Hmm. You know, I became a perinatal psychiatrist, so clinically I focus on taking care of patients who are struggling with things like postpartum depression. Mm-hmm. And postpartum anxiety. And I came to understand that, actually, again, this is a social justice question.

[00:10:00] Mm-hmm. Even the smallest thing, like saying, well sleep, sleep protection is preventative for postpartum depression, which is true, like that's evidence based. Mm-hmm. But the act of being able to sleep when you have a newborn is hugely determined on your social determinants of health. Mm-hmm. Like how much money you have, can you pay for a night nurse?

Mm-hmm. Do you have family that can come? Mm-hmm. What choices are available to you From a feeding standpoint? Mm-hmm. So I think clinically, It was just so clear to me because of everything that I've gone through, that this isn't just about prescribing Zoloft and like mm-hmm. Telling somebody to sleep more.

There's actually like this huge, bigger social picture. Mm-hmm. And I think in some ways that's a little bit of a burden to bear because then, mm-hmm. I'm always a little bit on the outside. Like even when I started my Instagram account, people were like, well, what are you, why are you doing that? But I think when you're somebody who is maybe more of a creative, you have to sort of find your way in these other [00:11:00] spaces and build your own map.

So that was a very tangential answer. I'm not sure if I answered this question. Oh no, you definitely did. I love tangential answers. Those are the best. As you were saying that, I was thinking, and this is very specific potentially, but. In regards to your clinical practice, when you are holding space for someone who it's clear to you, doesn't have that support, like when you're looking at that relationship, like the therapeutic relationship, you're looking at a self, right?

You're looking at an individual self and the work that that individual can do. But when that individual is in a space where, They're not given the support that changes, right. Their capabilities to exist healthfully in that space. That's like just the sleep example is a perfect example, right. Of okay.

Then how do you resource that? Like you're a single mom and you don't have the care parents and you don't have the financial capabilities. How do you get there? Or is it about recognition and does that take some of the weight off of [00:12:00] that? Or is it that's not enough because you literally need the, it's like how do you.

Do that when the system is not supportive, it's hard. And I think the answer is that it's both. And in the sense that the people that are able to work with me individually are people that have enough resources or have mm-hmm. Good enough health insurance that they can get some of it reimbursed. Mm-hmm.

So that's a piece of it and, and that's part of the reason that I founded Gemma with two of my psychiatrists colleagues, because we're trying to do something that is more accessible for women's mental health. But the other piece too that I see is that a lot of my patients are in this like upper middle class bracket, which is actually like a donut hole.

Mm-hmm. For mental health services. Right? Because most therapists and psychiatrists are out of network. So it's this person that is living in a high cost of living city and is well educated and does have a good job, but it's still, life is really expensive. Hmm. And so part [00:13:00] of it for me is helping reframe that it's okay to spend money on care.

Mm hmm. Do, do you need to remodel your bathroom? Or like, do you wanna take that money and pay for a night nurse? Mm-hmm. And I recognize this is like a very privileged conversation to be having. Mm-hmm. But most of my patients would feel guilty for paying that money for somebody who could come. So what, you know, be with their baby sleeping so that they can get a four hour chunk mm-hmm.

Of sleep. Mm-hmm. Now I can be the person that says, no, actually, that's really worth it. Mm-hmm. That's really worth it. Or like the other side of this is why is it that when your partner travels for work and you have a sister that lives in the same city as you and says, Hey, I'm happy to come over to help with bedtime.

Mm-hmm. You immediately say, no, no, no, it's fine. Mm-hmm. It's fine. I got it. Mm-hmm. Mm-hmm. Like, why do you have to be in crisis? To say yes to the people that are offering help. Like it's okay to have help because it's nice to have, you don't [00:14:00] have to be down and out.

So I think yes, there definitely is a very real situation of limitations based on resources. But I think the next layer of that too, there usually is a little bit of a both. And in terms of thinking about what you're prioritizing it and is it okay to prioritize your own mental health? Hmm. As you were saying that, I was thinking about boundaries, which you talk a lot about, and I think is such a.

Sadly, kind of a buzzword now, and I think as you become a parent, for me, especially like as I became a parent, that was a practice I didn't have in my own childhood. So it was a question of creating boundaries for myself with my children and modeling that, which I think is so important too. Where I'm trying to go with this is, as you were talking, I was thinking that we think of boundaries as something that sort of.

Protects or [00:15:00] sort of defends versus, I was thinking in the case of your example of someone whose sister lives around the corner and they ask to help and you say, no, no, no, I'm good. I've got this, that a boundary could actually be one where you, what do you welcome into that from that circle? So it's, it's, I don't know how to describe this is the first time I'm actually thinking in this way.

Almost like consecutive circles or I don't even know what the metaphor would be, but is that, does that make sense? Sense? I agree with you that boundaries. Everybody's talking about them all the time now, and it's almost lost its meaning. One of the reasons we see it everywhere is because they are so hard, so everyone is trying to explain it.

Mm-hmm. I don't know that I have any secret magic sauce when it comes to boundaries. I think of the boundary as in the pause. So your boundary is in the space between when someone asks you for something or offers something. And you take your pause and then you can say yes. You can say no, or you can negotiate.

So the boundary isn't the no, [00:16:00] the boundary actually is the space, and then you decide how you're going to move. So what you were describing actually, I think fits really well because it's not a brick wall. Mm-hmm. A healthy boundary. I think of it as like the mesh net that people put over a trampoline, you know, in the backyards.

It's like the mesh thing. You know, things come and go in between. It should be flexible. And of course none of us live in a world where like we get everything that we want. That's not real life. There are definitely things that you have to do that you don't want to do. The goal is not to have a life where you don't have to do anything that you don't want to do.

The goal is to like have some sort of, I don't wanna use the word balance because I hate that word. I actually think just based on my patience, I think the goal is to have a life where you are actually even included on the team. Like in the equation many, even my patients, it's like you're not even included in the decision making.

Like everything is for others. Everything is in [00:17:00] service of the kids. Or the partner or the parents or whatever. Whereas the goal of a healthy ecosystem boundary, whatever we're calling or thinking about, is like where there is a flexibility and that you can actually not always center your own needs, but at least have your own needs be part of the calculus.

That's really beautiful because I think, and this is a part of your book that I found really compelling too, in terms of you talk about dialectical thinking. Mm-hmm. And earlier in this conversation, you've said both. And that was something that I only came to as a parent, where I started reading more parenting books and things like that and looking at different parenting philosophies and speaking with my children.

Not saying, you know, no, you can't do this, but you can do this, but you can do this and we can't look, we're gonna look over here. Or just changing the language and how that changes the focus. But I mean, that's again, very specific. But I think when we think about [00:18:00] relationships and family relationships, the fluidity or also that, hmm, today, today I'm not gonna do that.

Maybe tomorrow I will. Right? Like I'm in a mood, I'm premenstrual, or I'm in my follicular phase. Like I think that when we allow ourselves, it just feels more human. What you're talking about, like the way that you're explaining the family system and, and also the self and the navigation of self. I think that historically, Mothers or those acting in the mother capacity in a family, I feel like have been really historically alienated from themselves, from identities outside of that specific identity.

And obviously that comes from. Which I think you do some unpacking of in your book as well as patriarchal systems, and there's so much to unpack there. But now that we are where we are, I found that your book really helps to broaden the scope of understanding of how we navigate spaces and selves and relationships.

[00:19:00] And I was curious because like you said, you do a lot of work in parenting. I didn't see this book as specific to only those who are in a caregiver role, which I really appreciated. And yet, As a caregiver, it really spoke to me deeply too, so I don't know how that's come out. As you've continued to roll with this book right now, how is that landing or what are you feeling in terms of your community?

Yeah. It's actually funny because when I, I guess it was 2018 originally I was approached by an academic press to write a book on pregnancy, postpartum mental health, and it was for their mass market division. But it wasn't the book I wanted to write. I wanted to write this book. And at that time I had an agent who I don't have anymore, but at that time, sh I told her I guess I could do this.

It's my expertise, this is my training, but like, I really wanna write this book on faux self-care and what is real self-care. And she said, well, you need to have 75,000 Instagram followers before you can do that. But then luckily that was around the time that I started writing for the New York Times. And so my current agent actually [00:20:00] read one of my articles and found me and was willing to take a risk with me on, on this book.

So I broke up with that academic press and that other agent, and then spent two years working on this proposal. And it was important to me cause I didn't want it to be just for moms because I do feel like there's so much value. Mm-hmm. Actually, I wish I had this book when I was in my twenties, you know?

I'm 39 now, and I think there's also so much value too for women in whatever we call midlife, whatever that means, right? Mm-hmm. Women who are not in that like little kid phase anymore. Maybe kids are out of the house. The issues all are the same, right? It's the same root cause of the problems, but then there's just all of these different ways that it manifests in all the different seasons of your life.

Mm-hmm. Mm-hmm. And so I was just so much more interested in trying to. Write something that could be applicable over time, as opposed to like making it piper specific for mm-hmm. Motherhood. Mm-hmm. Or [00:21:00] caretaking. But of course that's in a lot of the patient stories, because that's my clinical population.

Mm-hmm. So it's been an interesting evolution and one of the fun things as I've been having these conversations actually really has been getting to talk with folks that are in all these different seasons of life. I just did a podcast last week that was with someone who's in her mid twenties, and we were talking about dating and boundaries, and it's nice that it's different conversations with different people

We come to anything that we read or see online with our own individual lens of what we need. What we're seeking. Right. And so for me, I saw a lot of the parenting work in this, but I can totally see how that can shift depending on what mirror you're holding. [00:22:00] That's really beautiful and I think speaks to, again, how powerful the work that you've done is because as you've said, it's not unique to a particular phase of life, and I think we aren't unique, right?

Yeah. We exist on that spectrum too. So to only. Do work at a certain phase or do only approach it from a certain angle. Doesn't make sense. Yeah. Either way. Well, and I think it is thinking about like postpartum, just given that that's, that's your show. I do think that there's this interesting sort of paradox because on one hand I feel like when women are pregnant or postpartum, there's a huge incentive to do personal work or health work.

You're mm-hmm. In this period of anticipation and waiting and wanting to prepare mentally knowing that you quote unquote, need to prepare, but we don't have that language or framework for other seasons of life when I think there is just as much, or maybe not just as much, but there's like other big transitions [00:23:00] that happen, you know?

Mm-hmm. But I think we put a lot of weight and expectation on the pregnancy postpartum for like good reason. But it just makes me think about how if we were having some of these conversations earlier in life, would it set us up for a more emotionally resilient experience when you do come to motherhood?

Mm-hmm. Because I think right now, still so many folks, Really think that preparing for motherhood is about what type of stroller you buy and decorating your nursery and all these different things. Not to say that those things can't be fun, and I know there's some people that really take a lot of joy and pleasure in in that type of stuff.

I'm the opposite. I hate shopping. I hate stress. It all stresses me out. I was really lucky cause I was the last person in my friend group to have kids and I was writing the book at the time, so my friends made my baby registry for me, which is just such a great grif. But. Right. There's this lack of awareness that some of the most important questions are things around [00:24:00] sleep and like how you're gonna feed your baby and what your expectations are.

The dynamics with your partner and all this other stuff that there's no product to answer those questions for you or figure that out. Mm-hmm. Yeah, you're totally right. And actually as you were talking, I was thinking that one thing I've recognized through my own journey is that I had a long fertility journey as well as I know you have too.

And so by the time I got to motherhood, I just felt like in a different place than I've seen others who get like slammed in the face with motherhood for various reasons. And I think I was grateful looking back that I didn't think of it as work at that time, but just. The amount of work I was doing through that process, that did in some ways prepare me.

Obviously, you're never appropriately prepared because we're never prepared for anything in transitions, and there's no perfect way to be a mother, and so I think that at the very least, For me, I think it was mostly about letting go of control. Yeah. And so it was like I didn't have control in fertility and I'll Oh, [00:25:00] interesting.

As a mother, you have no control either. So for I was that super type A person and so it was like, oh, okay. Now I can live in this space. Or am I a type A person? Wait, this actually feels kind of comfortable. Mm-hmm. And the less I try to control, the better things work out. Hmm. You know? Or the less I have this extrinsic idea of what, yeah, this is supposed to look like, or what the perfect nursery is supposed to look like or whatever.

Right. So I did find that that was really helpful. There was a part of your book that looked at perfectionism and perfect productivity. I think you were talking about a specific. Patient named Anita. And I was thinking, because this podcast we talk a lot about productivity and what that means, and then, then you also go into really beautiful sections about time and capitalism and the way in which we view what is seen as productive.

And I was curious to hear more about your thoughts on that and how that influenced your idea of what real self-care is and the work that you do. So in the book I talk about three [00:26:00] ways in which faux self-care. Can be conceptualized as coping mechanisms, the psychological aspect to it, and one of course is escape.

So that's like the retreat where you have to like run away from your life to feel better. And then when you come back to your life, you feel terrible again. And then there's achievement, right? That's the person that becomes obsessed with the five Ks or the yoga or whatever. And then the third is productivity or the efficiency.

It becomes a means to an end, like you're. Consumed by what is the best system, whether it's the bullet journals or whether it's a scheduling app, the meal delivery kits. It's not that outsourcing is bad if you have the means, but I have so many patients who get stuck in trying to figure out what is the perfect thing and hmm, that you're not actually using anytime that you get back for valuable purposes.

And I think that comes back to a lot of the work that we're [00:27:00] seeing now around these questions of time and capitalism and how do we take back our time because right time is like the most valuable resource that we have. Mm-hmm. I haven't yet read Jenny O'Dell's new book. I know it's on my, it's on my, but I know talks about it.

Fox did a review actually, of both of our books together as companions, which was awesome. Cool. And I was awestruck. But write the whole notion of real self care deeper into yourself to figure out what your true values are and what really matters for you. Mm-hmm. You have to take time to do that, and you have to be able to step out of the chaos of your life and trust that it's worth it to not be productive in the way that you maybe were used to.

And that's an anxiety provoking place to be. I've been using the word brave a lot. I think that this requires bravery and courage to say that [00:28:00] you're going to do less, and also like really make choices about which aspects of your life, which roles, which relationships mm-hmm mean the most to you. And then invest in those in a deliberate way, which ultimately means letting go of stuff that doesn't fit or doesn't serve you.

I'm definitely a workaholic. I will not pretend that I'm not, I definitely do do a lot though. I will say over the past, probably six or seven years while I was in psychoanalysis, it has been a process of letting go for me. So I left my full-time academic psychiatrist job. I have a small private practice and I have my company that I'm, I'm trying to grow and then writing.

So I moved away from the more ivory tower stuff because I realized that that actually. Doesn't align value-wise with me. I don't feel like I can be my full self in those spaces. And so I kept some of the stuff that I like, which is like supervising [00:29:00] residents once a month, but I let go of the things that weren't aligned for me, and then at each step, focus more on the stuff that really is aligned and then that.

Of course, there's still lots of hard choices of things that I can't do and have to say no to, and, and of course, having a baby mm-hmm. And navigating motherhood and the time constraints of that and figuring everything out. It's absolutely a mess. It's completely a mess. And I'm learning as I go, but I'm always having this conversation with myself too, of why am I doing this?

Okay. Am I doing this? Because I'm trying to prove something to someone, or is it an ego hit, or is it like a prestige thing, or is this actually something that I really do care a lot about? I think it's so important to keep asking yourself those questions and then also to know what is enough and when is enough.

Mm-hmm. Yeah, that's a big question. Kinda made me step back for a second. Yeah. Well, because the [00:30:00] system tells us there's never enough, and I think I've mentioned this in a previous episode, but. I've been obsessed with the idea of scarcity and just how much I see that play out everywhere. Like right now in my particular little micro universe, it's school season.

Mm-hmm. So it's applying to public schools or private schools and just seeing how much people feel this fear of there's not gonna be enough for my child. Or that could be extrapolated out in so many different ways across American society. But I think that, again, scarcity of time. Yeah. Right. And so we are allowed to make choices.

Like it's not even allow, I don't even, I'm saying a word allowed. It shouldn't be permission, right? Like that is the space that we do have control over. Those are the choices we're making. And I think to your point about that, pause, My mind is blown in terms of boundaries and pause. I like this reorientation.

And now I feel like that makes so much more sense to me and from a daily perspective and practice that really works. And if you're able to be authentic to when the [00:31:00] no is coming from that space, I think that my fear. Growing up or just individually is always what the reaction's gonna look like, right?

When you say no to something, whether it's something as simple as, I'm not doing that exercise today, or I'm not meeting that friend, or I'm not taking on that job. It's all about what's coming back. But if you're coming from that space of pausing and saying, this really isn't good for me right now, then it totally warps the response, cuz the response, a, doesn't matter.

But B, also, I would assume that then whoever's receiving that message is able to also, Respond in a more compassionate way, and it's a modeling right, that then models that for whoever that individual is. It's such revolutionary work that I think does potentially, I hope, and I think you talk about this in your book, that it does change the system.

I hope there's a moment when you say it's our social fabric that needs repair. And I think that the work that you're investigating and that you're espousing in many ways, hopefully, [00:32:00] Helps to repair the social fabric too at At the same time, right? Well, it's like, you know, my critique is structural, but the solutions that I describe are deeply personal, not commercial.

Mm-hmm. Right. And so then when the solution is personal mm-hmm. That's the only way that we have a fighting chance actually of change. Mm-hmm. Because when one person changes the way that they behave or respond, or react, mm-hmm. Like you just said, it models for other people in their life. Mm-hmm. That they can respond in a different way.

Mm-hmm. And then there's this cascade effect. Mm-hmm. One of the ex examples I give in the book is a patient who originally came to see me for depression and anxiety, ultimately worked through this process together and she realized that she was deeply resentful at her husband cuz he had never taken a paternity leave.

And they had two kids at the time and he worked in startups and so it was always the small teams and like never felt like he could take that risk. It would never be possible. And then when she was pregnant with her third baby, she finally was like, no, I really need you to do this. And they had multiple really hard conversations.

It wasn't like it was just [00:33:00] overnight that he was like, yes, sure. But he did finally. And, and the company that he was working for said yes. And, and yeah, we need to actually have a policy. And so that went on to impact everybody else that was gonna work there. And it's not like my patient was trying to be an advocate.

She was just trying not to hate her husband and not be miserable or not get divorced. Right. I'm not saying that that happens in every single situation, but that's the way that we have a chance of these things. Mm-hmm. Mm-hmm. Taking hold. Mm-hmm. So that's my hope too. And that's hopefully the role that I can play as a psychiatrist, where like, again, my expertise is in the individual in that deeply personal space, but I wouldn't have.

Come back to medicine and come back to this clinical work if I didn't. I really believe that there's a very deep connection between personal change and systems change. Mm-hmm. And I don't know anybody who's in the advocacy or activist space [00:34:00] who hasn't gone through some type of personal journey, whether we call it real self care, like whatever we call it.

Right. There's the million things you can call it, but every single person I know that is trying to change systems is there because. They went through something that made them see that they have to show up differently, and then they're paying that forward.

Hopefully that's ultimately a hopeful message. You know, depressing messages are harder to sell, but No, it is. It is because I think I struggle most when I feel like there's a system I can't change, right? When it feels so oppressive and all encompassing and tentacled into everything we do. Mm-hmm. Then it feels like I have no agency.

Mm-hmm. So where does the agency come from, right? Mm-hmm. So if we empower ourselves to be able to make those choices on a daily basis, we do start to chip. And if we all chip away mm-hmm. Then [00:35:00] it's Right. I can't take the hammer to the giant wall. Yeah. And break it down. Yeah. But as I'm saying that, there's just fear in me of is it enough?

Is it enough? And I wonder if that's also the systems. Mm-hmm. Again, trying to oppress like, don't even bother. You know, you do think that, well, it's probably, it's never enough. It's right bec, but when you get stuck in, like, is it enough that pushes you towards cynicism, right? Mm-hmm. And then you're like, mm-hmm.

Well, it's never enough, and so I'm just not gonna do anything. Mm-hmm. Right? And of course there's gonna be days where you don't do anything and you're just dooms scrolling because you're human. Right? I doom scroll all the time. The goal is to keep coming back to that agency. Mm-hmm. Even when you lose it for a day or a week, right?

Mm-hmm. You know, but you still just keep coming back whenever you can, and that's just what you do then for the rest of your life. Mm-hmm. Like again, I find that hopeful in that there's less pressure on any one particular decision or any one particular thing. It's actually just like hundreds of things.

Mm-hmm. And so I think that's actually [00:36:00] more realistic and takes the pressure off that you have to know the answer and know exactly what the right thing is. Mm-hmm. And that's gonna be the thing that fixes everything. Cause it's like, well no, actually there's a million different things. And you just have to be in your little sphere, right?

Do your things, and each thing leads to the next thing. As you were talking, I was also thinking about just how much, for me, a lot of my background in terms of my own therapeutic work is very self-compassion based and compassion based therapy, and so, mm-hmm. I see that in your work. It's like the basis, if we don't have compassion for ourselves, then we can't go anywhere with that.

But you have me thinking also about parenting, right? And the good enough parent Yes. Is the one who just, yeah, you, you're gonna slip up and you're gonna mess up, and that's inevitable. But if you start from a space of. Self-compassion and modeling that for your children too, or self introspection, all these things of where your child can come to you and feel comfortable saying, you know, Hey mom, that [00:37:00] really hurt my feelings.

Or You messed up there and you could say, Hey, let me take a pause and think about this and talk about this with you. All of the. Things that felt so potentially damaging, I think can bind, repair and can find connection. Obviously I'm talking about a scope of not true traumas and Yeah, but like your everyday basic relationship and of emotional hurts and things like that.

But I found so much to feel hopeful for in your book, so I really appreciate that. Mm-hmm. Of course, I was thinking of Ross Gay's work, and I think there's just this beautiful. Momentum that we're seeing now in terms of the way in which revolution can happen and the reclaiming of self and joy, and hope as really revolutionary.

So I really appreciated that as a core tenant in your book. And to that end, there was an exercise in your book that I wrote down for myself and I keep returning to is when you, you talked about, I'm happiest when I feel most like myself when I was like, fill in the blanks. Can I ask you [00:38:00] to do that for us?

Would you fill in the blanks? Yeah, sure. Can you remind me what they are? Sure. I don't have it memorized. I'll say, I'll say each one and then you could, okay. Fill. Okay. So I'm happiest when blank. I'm happiest when I'm in a conversation with somebody else who really enjoys thinking deeply about hard topics.

I feel most like myself when I blank. I feel most like myself when I am on the couch in my sweatpants with my cats and just vegging. I am bound to fail when I blank. I'm bound to fail when I'm not compassionate with myself. Hmm, I know I cannot do blank and be blank. Hmm. I know I cannot do everything and be everything.

I love that. That was actually when I did this earlier today, that was exact. I know I cannot do everything. Mm-hmm. I had the same exact [00:39:00] line. Mm-hmm. And maybe it's be everything to everyone. Mm-hmm. Mm-hmm. Mm-hmm. Well, I am really grateful that you were able to be Pooja today with me conversation, and I know that everyone who listens will be so excited.

I have so many friends and colleagues that are really excited to read your work and be in relationship with it and do the work themselves. So I really appreciate that. I have so much more obviously that I would love to talk to you about, but I know we'll have, hopefully have other opportunities.

Congrats on the book launch tonight. Unfortunately, this will air after that, but if you wanna talk a little bit about what's happening tonight, you're welcome to, but if not, maybe I'll just share like how to find me. Sure. That's great. So, so yeah, people can get the book in all the places that you buy books, support your independent bookshop if you can.

There's also an audiobook if you prefer to listen, and I narrated it. So if you like the sound of my voice, you can do it that way. I'm on Instagram at Pooja Lockman, and then my company, Gemma, that I mentioned, it's G E M M A. And we're at gemma [00:40:00] women.com. So that's something else that folks can check out and yeah, this is just such a pleasure.

I can't wait for the next one. I'm sure there will be. And thank you, Caitlin. I.

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