

Speaker 1 ([00:00:07](#)):

You're listening to the journey on podcast with Warwick Schiller. Warwick is a horseman trainer international clinician and author who's mission is to help people achieve a deeper connection with their horses and therefore themselves and everyone around them. Through his transformational training program, Warwick offers a free seven-day trial to his comprehensive online video library. That includes hundreds of full length training videos and several home study courses at [videos.warwickschiller.com](https://videos.warwickschiller.com)

Warwick Schiller ([00:00:47](#)):

G'day, everyone. Welcome back to the journey on podcast. I'm your host Warwick Schiller. And I'm so excited about the guest I have today. Like what a cool dude. So the, this this gentleman's name is Dr. Will Siu. And so he completed medical at UCLA, which is university of California, Los Angeles, big time medical school, and has a doctorate of philosophy from University of Oxford. And then he continued on with his psychiatric training at the Massachusetts general hospital and McLean hospital, where he was on the faculty of Harvard, me medical school for six years. So he is got all these amazing degrees. And what was really interesting about Will's story is after about 12 or 15 years of medical school, he saw the, you know, he got into psychiatry and he saw that the effectiveness of like SSRIs for depression was about 30%, 33%.

Warwick Schiller ([00:01:46](#)):

I think it was compared to placebo, which is about 19%. So he said, you know, I've, I've just spent 12 to 15 years of my life studying all this stuff at the best universities in the world and found out that it works a third of the time. There's gotta be something better at us. So that kind of sent him on a bit of a journey into looking at other things. And so since 2013, he has studied and practice psychedelic assisted therapies. And if you've ever seen the go lab with Gweneth Paltro on, on Netflix, he was actually the the first episode of the go lab was on psychedelics and, and the healing powers of psychedelics. And he was actually the, the expert that they, they interviewed on there. So I'm gonna go on with his biography here. It says you know, he's been doing psychedelic assisted therapy since 2013.

Warwick Schiller ([00:02:37](#)):

His work as a public educator has reached a wide audience through speaking writing and social media outlets like this. Dr. C was co-principal investigator on a pilot research study, exploring MDMA assisted psychotherapy for my fibromyalgia, which is really, really interesting. I actually listened to a podcast to him talking about that. And it was talking about how fibromyalgia can actually be stuck trauma in the body. And when you release that it can cure the fibromyalgia. That was a fascinating one. It says he maintains an office in Los Angeles for patient care, professional development, teaching psychiatrists and psychologists, and is an advisor to a number of companies in the psychedelics at wellness spaces. So this guy's got a list of credentials, you know, up to Yingying, but such a, such a cool human being. And yeah, this conversation with him was I was really excited to talk to him because we actually got introduced by a lady named Christine who is a clinical hypnotherapist, and she has horses and, and follows me, has been to a number of clinics.

Warwick Schiller ([00:03:40](#)):

And I've spoken to her on a number of occasions and she contacted me a while ago. And she said, you really need to, to have a chat with this guy. This guy is pretty cool, cuz they, her, she met will because she and him share a celebrity client. I dunno who the celebrity client is, but they share a celebrity client and she's actually got will into riding horses. And so it's so interesting that in my, you know, my healing

journey, trying to unravel my stuff, I discovered by accident psychedelics and how well, you know, how much they can do as far as healing trauma. And it was the horses that kind of led me to that healing journey, whereas will has been know doing this psyche assisted therapy since 2013 and has recently got into horses and he's discovered the healing power of horses. So it's just a, you know, it's an interesting dichotomy and yeah, fabulous human being. And this was a great conversation. I hope you would enjoy it as much as I did. So here is my conversation with Dr. Wil,

Warwick Schiller ([00:04:44](#)):

Dr. Will see you welcome to the journey on podcast.

Dr. Will Siu ([00:04:47](#)):

Yeah. Thank you for having me. I often say at the beginning every time that I'm excited to be here, but I'm actually, it's, it's extra true this time round <laugh>

Warwick Schiller ([00:04:56](#)):

Oh, I'm, I'm excited to have you here. You know, it's funny, my you know, working with horses led me to my personal journey, which then led me to psychedelics. And you, you know, you specialize or know quite a bit about, quite a bit about psychedelics, so, and you've also come the other way to where, you know, quite a bit about psychedelics and I've heard recently that you've just started taking horse writing lessons. So it's kind of like a, a whole full circle thing here.

Dr. Will Siu ([00:05:24](#)):

I actually think that that maybe the opposite may be actually completely true. I don't know if I started, if I didn't start using psychedelics, I may not have come to horses. So yeah. <Laugh> little bit of a reverse, shared experience there <laugh>

Warwick Schiller ([00:05:37](#)):

Yeah, I think so. You know, it's gonna be good to chat with you on here because in the whole horse riding community, or at least the horse riding community, I've been heavily involved in, you know, it's okay to get really drunk on a Saturday night, but you would never wanna touch drugs because then you're, you know, you're a bad person. And, and I you know, I had never had anything to do with, with psychedelics at all. And I actually came about psychedelics because I had done a year of dialectical behavior therapy and wasn't getting anywhere. And I was actually in Australia doing some clinics and I was listening to an audio book by not Tim Ferris. I think it was the, the Bulletproof guy. What's his name? Dave, Dave Asprey. Yeah. And he was, he had a book called game changers, I think.

Warwick Schiller ([00:06:25](#)):

And it was what he'd done was he, you know, he'd done 900 podcasts or something and interviewed all these people. And at the end he asked him, what's the, what's the three main things that have changed your life? Or what would you, you know, what, what are your three suggestions for people? And then you compile all those and made a book out of the, basically the top three of everybody. And one of the chapters in this book I was listening to was on stem cell stuff. And he was talking about, there's a doctor in Silicon valley, not far from me here that well pulled stem cells out of your body in and inject him into joints in your body, you know, to, to help with old injuries. But he also said he will also do this other

thing where he pull stem cells out of you injects him in your vagus nerve and will give you a complete emotional reset back to factory settings.

Warwick Schiller ([00:07:12](#)):

And I'm driving around Australia thinking Jim mean, I just went to te therapy twice, you know, drove an hour each way every twice a week for the last year. And I could have just had someone inject me with something. And so I got back from that trip and I, I called the doctor that, that Dave Ashby was talking about and made an appointment and I had a big old chat with him and he said, oh, well, what you are referring to is we call a Stella gang block. But based on what you've said, I'm not gonna do that with you. I'm gonna do something else. And so I went in there and he actually gave me IV ketamine and that kind of opened up some things inside me that I had never felt before. You know, you're supposed to go offline for like eight hours with this, the story I got told you, you, your nervous system goes offline for eight hours.

Warwick Schiller ([00:07:59](#)):

And it kicks by back in and it kicks back to, to factory settings. And I did that about three o'clock one afternoon. And the, the next day I had to fly to Washington state to presented a horse expo and nothing had happened. I got up the next morning nothing's happened. So I've kind of written it off as oh, well, that didn't work. And I'm sitting in San Jose airport waiting for the plane. And all of a sudden I felt like Saul, any Weaver in alien. I felt like there was an alien inside my torso. There was this energy in there moving around and bouncing around. And it was energy that I'd never felt there before. I've basically in my life. I felt heartbreak being in love up here and fear and dread in the pit in my stomach, but really nothing in the solar plexus region. And this, I had this energy going around in this solar plexus region. And this was from this ketamine thing. So the, the, the him giving me a ketamine thing is what got me interested in psychedelics in the first place.

Dr. Will Siu ([00:08:53](#)):

Great. Lots I could say about what you just shared.

Warwick Schiller ([00:08:56](#)):

Yeah, I could see you were looking on your face like, oh, you did it all wrong or whatever, but

Dr. Will Siu ([00:09:00](#)):

No, no, no, that was, that's definitely not what I was thinking. You know? Well, the first thing that caught my ear is when you said, you know, this, this piece about, you know, pen, plenty people, perhaps in the commun, your community would, you know, happy to go get drunk, but you know, drugs, the word drugs came up. And so for me, it's important to define what is a psychedelic because to me, please, you know, when I, you know, I grew up Jehovah's witness and I'm not sure if you're familiar with that or people listening, but it's, it's an incredibly restrictive religion. We don't celebrate birthdays, holidays, nothing. And so I, I, you know, and drugs, you know, were certainly things that would take you to hell as would thinking about sex or anything about LL else. And, you know on top of that, I just had a very, very strict mother.

Dr. Will Siu ([00:09:46](#)):

And so and also I was a child of the, the eighties war on drugs. I'm 42. So I like literally <laugh> had multiple, multiple hits of, of reasons why I didn't use drugs. So, you know, some people see me now I have long hair and piercings and jewelry, but when I first started this journey and heard about psychedelics, I was about 33 and I had never tried a psychedelic. So it was the last thing on my mind. And at that time I was a, a first year psychiatry trainee at Harvard medical school. So definitely like I had never, never thought about trying these. And so but, but to go back to, to the drug, you know, the word drug, right. And I had certainly thrown psychedelics into the category of drug and what I started learning over time. And I, to me, the, the, my favorite definition of a psychedelic out there is from like a guy named Stan GRA, who was a psychiatrist who really started this entire psychedelic therapy movement.

Dr. Will Siu ([00:10:43](#)):

And he calls psychedelics nonspecific amplifiers of the unconscious. And I think that is the clearest way to say it. And, and it's very simple, but again, so nonspecific amplifiers of the unconscious. And so, you know, I, I started to think about the things that we store or the things that we don't release emotionally, energetically, it's almost like being kept in like a little pressure cooker or a big pressure cooker depending on, on our history and taking psychedelics sort of opens in pokes holes or, you know, depending on the dose one thing and depending which substance, and depending on which dose in which substance, the amount that it opens that pressure cooker and what comes out or how much comes out, varies tremendously between one psychedelic to another. And so that, you know, we could talk about all, you know, the different ones at some point, maybe we will entry as you, the reason why alcohol, you know, when you mention that at the very start is because society.

Dr. Will Siu ([00:11:47](#)):

And, and I think the reason why the mental health crisis has gotten where it's gotten is because we've ignored emotions, right? We, we take things and things are okay, which suppress emotion, right? So say fear and, and sadness are the two emotions I work with with my clients mostly. And if you think about the categories of our medications in Western psychiatry, so that they're, anti-anxiety anti antidepressant, anti-psychotic which right. When I hear it's anti sadness, anti fear, anti crazy. So it's like, if anything is out of the ordinary, let's let's, we don't wanna see it. Let's quiet it down. Let's put on a smile. And that's, if we think about it, alcohol does the exact same thing. If I've had a stressful day at work, or I've had a stressful week, I go home, I have one to three I've I, I used to <laugh>, but yeah, not anymore, but like it, predictably will suppress my fear and my sadness, same thing that anything I would call in the addictive category, heroin would do the same.

Dr. Will Siu ([00:12:45](#)):

Benzodiazepines will do the same. And, and there's behavioral things that we may get to that, that also suppress suppress, suppress, and or cocaine, right? Cocaine is upper or like Adderall, right? Those things, if you're depressed will bring you up. So psychedelics are different though, right? Like psychedelics, aren't going to predictably reduce anxiety, and they're not going to predictably lift a depression. Like you're gonna open holes into this thing and we don't know what's coming out. Right. And so I like to share that with people, especially who these are new to, because that's why psychedelics are not addictive. Right. I, I've never heard. And, and I was working in substance abuse as a psychiatrist for about five years. I've never heard a story of someone who's addicted to LSD, who's addicted to MDM, a that's addicted to mushrooms. It just doesn't happen because if I'm, or I'm, I'm like really anxious having a panic attack, I'm not gonna eat a handful of mushrooms.

Dr. Will Siu ([00:13:39](#)):

Cause I have no idea where that's going to go. So the reason I wanna bring this up is because it's like, I want people to, you know, if they're really new to understand this, this isn't something that's going to like, make me feel better predictably. So they're not things that are addictive. We just haven't seen that. The one where there's a little bit of abuse and I would say, and potential for addiction is ketamine because ketamine actually dissociates the, the mind from the body. So sensation from thought. And that's why, you know, at its extremes, it's used as an anesthetic, you know? So, so meaning like at high doses ketamine's been available for decades down to doctors. You can inject it or put it in an IV and you can do full on surgery. It's still the, the most used anesthesia in the world right now.

Dr. Will Siu ([00:14:25](#)):

Cuz it's cheap. It's easy. It works. So that's the one, you know, psychedelic that I'm, I'm definitely the least excited about and not because of this addictive potential, but oh, that's one of the reasons, but it also doesn't really seem to help people very much because if we're, if the, the goal is to like let feelings arise, let memories arise to the surface so that we can really work with them. Ketamine doesn't really like connect the feeling with the like memories. So, so predictably as the rest of the psychedelics do. So you know, I know I'm going a little bit off on a tangent, but I wanted to, to sort of at least set, set that groundwork of how I think about psychedelics because you know, ketamine's definitely the most widely used right now, medically. It, it's the only one that's like legal currently and by prescription. But it's certainly, I think not the, the one that will be the most lasting in terms of its therapeutic uses.

Warwick Schiller ([00:15:20](#)):

How does, how does ketamine work as far as therapeutically these days? What, what do they, what do they do with it?

Dr. Will Siu ([00:15:28](#)):

Yeah. So an interesting thing, I mean, just a quick story about why ketamine became, what did it is to begin with is that there was an orthopedic surgeon. I think it was about 20, some odd years ago who was doing a bunch of surgery on his clients. And then he just started looking at his data and he started noticing that people who were depressed already, who went into surgery to see him and who were treated with ketamine, their depressed went down. So it was a complete, like, you know, kind of, he was just like looking at, at, at his data and his surgical clients and noticed, oh, the people who I use ketamine with seem to get better with depression. And that was really the start of use of ketamine for depression. But this was literally like 20 years ago. So this has been around it didn't like wasn't something that was widely used by, by psychiatry at large, but people then started studying.

Dr. Will Siu ([00:16:18](#)):

Obviously it's been on the news a ton in the last about two, two to three years, but it had been, you know, my mentor who taught me how to use ketamine five years ago, he had been, he's been one of the people who were an early adopter and had used it for almost 20 years in terms of the, the mechanism. I mean, people would say, oh, well ke mean, you know, works through the N N N M D a receptor. And to me, like, I, I tend to get less excited about when people start talking about receptors and molecules and like, which, you know, what part of the brain, because we don't really know, you know what I mean? Like, like, like people do studies or they do all this and that in the laboratory, but we don't actually know what's happening in the, you know, in, in, in a live person.

Dr. Will Siu ([00:16:59](#)):

So what we do see though, and is, is now very established in terms of the science, is that with people who have major depressive disorder or bipolar depression, ketamine in an IV setting tends to help that significantly. You know, it's, it's, we have not seen any solid data for anything else other than that. And it's interesting, there's two sort of hypotheses with both, both, I think have some truth to them. Meaning there is this part of ketamine that for some small number of people, there's almost like this complete reset come kind of, like you said, where it does work, like electroconvulsive therapy would be like the equivalent where there is just like this hard reset of the computer. And I've seen it myself where there's some people who are depressed for years, some even decades after one or two or three ketamine treatments, they really are reset.

Dr. Will Siu ([00:17:52](#)):

So like, it's not unusual to hear someone talk about ketamine the way you did. I just think it's being way oversold in terms of one that it works outside of depression and then B that it works for everybody with depression. And we're seeing a little bit of like the, the capital is, and the, the, the money movement coming into psychedelics where it's being sold as like ketamine works for everything. And it really doesn't you know, it does sometimes help people with anxiety or, or things that are not depressive sometimes, but it's, it's actually not that common. Like I would say, you know, if I had to throw a number on it somewhere near maybe 20% or something like that

Warwick Schiller ([00:18:29](#)):

Really, oh,

Dr. Will Siu ([00:18:29](#)):

I was, was gonna say the other, sorry, the other, the other way. So there's that potential reset that we see right away. And then there's another set of people that then will use it with therapy combined and that's at lower doses. And then that's where I would say it's less of a reset and it's more of like a psychological opener. And then that might bring up memory or content from the past of a trauma or something from childhood. And it allows someone to access those sorts of things. So there's kind of like the biological potential reason why ketamine works and then there's the psychological,

Warwick Schiller ([00:19:04](#)):

Okay. Yeah, for me, it wasn't a, it wasn't a reset at all, but the thing it did for, to me was I felt, and you know, I've never had those sensations in there and it's not like at school, they say, okay, children. Now, if you're a fully functioning human being, you will have these energies in your it's also here, they'll move up and down and here and there, depending on what's happening in your day or whatever, they don't tell it that. So I assumed that was normal. And so it's, it's almost like you know, Ramdas got to the point after doing a lot of LSD that he, he kind of said, oh, I realized that doing LSD is not the point, the point LSD shows you what is possible. I had to figure out how to do that on my own. And it was like the, the ketamine did that for me a little bit like, oh, that's what feelings feel like.

Warwick Schiller ([00:19:58](#)):

And so then it was like, then, then the journey starts to try to, to get those working. So it wasn't a, I don't think it was a, you know, a massive reset, but it was a bit of an eye opener as far as, as what a feeling feels like, which I know that sounds might sound odd to a lot of people not knowing what

feelings feel like, but I've been pretty shut. I've been pretty shut down forever. And, and for the longest time didn't know it, you know, that was my normal. And so, yeah, it's very funny to live your life a certain way and then realize, oh, it's possible to feel completely different from that. It's not necessarily normal.

Dr. Will Siu ([00:20:35](#)):

Yeah. And I actually love that. You just used the word shut because I was actually thinking about what you were talking about. And then thinking to, to use the word shut down soon, because it's one I, I learned through doing horse work in the last, I think eight months is, or so is when I first got on a horse, but actually I've been very disassociated and disconnected from my, my emotions in my body. I havet, or I don't know if I still meet the criteria for PTSD, but I certainly did most of my adult life up until, you know, six months ago or so. So I I've seen my journey now, certainly incorporating re re reassociating to my body and coming out of shutdown. And that's why it's been one of the beautiful reasons. You know, many, one of the many, many reasons I've loved working with horses is, is one it's really helped me understand the level of physical numbness that I have been in my entire adult life.

Dr. Will Siu ([00:21:28](#)):

And so the way I would think, and, and, you know, it's sort of like, that is one thing that ketamine does. If we think about at the higher dose, it completely disassociates mind, body, again, that's why we can cut someone. You don't feel anything. And then you sort of allow then mind to come back in and to reconnect to the body. So for some people that does, and I've had experiences with ketamine myself, where I have sensations come up towards the end of sessions or within a day or two. So yeah, it's very interesting that you had that experience and I don't think it's that unusual. The other thing is though that most people going out to ketamine clinics don't understand what we just talked about. Right? Most people don't even know that they're disassociated or that they are shut down themselves. And so for me actually, before I really understood it, even though I'm a practitioner, I actually used to feel more sensation, but my mind has interpreted them and still does sometimes as like, oh, this is scary.

Dr. Will Siu ([00:22:21](#)):

This is uncomfortable. I don't want it. And so a lot of my more recent journey has been coming out of shutdown, but understanding a reason I shut down was because I was feeling one of two things, either intense sadness as a boy and a young boy or intense fear. And it was like that reentering my body through the shutdown. I was going to need to feel those feelings. Again, I wasn't going to go from like shut down to feeling calm and great. And so, you know, so there's been this like, how do I work with what comes up with ketamine or any other psychedelic? And like, when I'm talking about this is recent work on myself, I've been in the field of psychedelics now 10 years, this understanding of dissociation again. So dissociation for those that are listening is like the clinical term for shutdown. Any psychiatrists that, you know, really knows what they're doing would, would basically those two words are interchangeable. We called dissociation clinically and humans. What shutdown is in horses. <Laugh> and yeah, it, I mean, this is in the last three or four months. So after 10, you know, 15 years of being a psychiatrist, I'm like now really understanding what shutdown and this is in humans. So because like they don't teach you this at all in, in training

Warwick Schiller ([00:23:30](#)):

Really what's really interesting is you just pointed out something that a lot of people have trouble with horses. So I, you know, a lot of times helping people with their horses, a lot of times horses are shut

down. They're either highly anxious or they're shut down, you know? And the shut down ones are usually quite functional. The highly anxious ones are dangerous, but the shutdown ones are usually quite functional. But when you start to work through that, shutdown, people go, my horse is getting worse. And I say, no, he's not. He's actually getting better because you don't go from shutdown to calm or relaxed or whatever you shut. You go from shutdown to whatever it was. The dissociation was hiding from the, the, you know, the, the, the fear or the, whatever it is. And so, you know, you don't go from a shutdown horse to a, a good horse.

Warwick Schiller ([00:24:18](#)):

You go from a shutdown horse to the horse that was before the shutdown. And why did he shut down? Was fear, anxiety, whatever it was is now present. And people go, my horse is getting worse and you're like, no, he's not getting worse. He's getting better. The, the only way out is through, as they say, you know, you've gotta go through this bit. And this bit with horses is workable. You can do something with that. Whereas the shutdown, you can't, you can't work with shut. You've gotta get them out of the shutdown first. And I, it's probably the same with humans too, but

Dr. Will Siu ([00:24:51](#)):

Yes, but what I, the reason I'm like smiling right now, and people probably couldn't see how big I was smiling as you were talking is this is why so right. If people are like, I'm okay with alcohol for me or my family member, that's healthy is because alcohol is promoting shutdown. And why do psychedelics scare people? It's because it's like you said, if a non shut down horse for some period of time is more quote dangerous, because they're feeling a lot of fear. That's what people are afraid of. Those are the stories that people used to hear in the sixties and seventies that, oh my God, you take L S D and X, Y, Z happens. Right. It's that, that people are afraid. You know, if, if we're thinking about the lawmakers and not to get, I don't get into politics too much, but this is, it just really seems to naturally, like, why would the government, and, and people look at psychedelics, like, they're so scary.

Dr. Will Siu ([00:25:39](#)):

It's because they're taking people out of shutdown essentially. Right. And so what the society and practitioners need to do, right? So psychedelic were made illegal in 1973. They still are illegal, but it's like, can we reintroduce these into culture, but then support humans in that period of time as they come out of shutdown, that's essentially what psychedelic assisted therapy is. And it's like, just really cool. Cause like few people get it, but it's, it's wonderful that you as a person, that this is not your area, just understand it. So precisely based on your horse work, cuz like, I think it's, it's such a great way to think about it. Again,

Warwick Schiller ([00:26:16](#)):

But the other thing mm-hmm, <affirmative> the other thing too, is I, I totally understand that's that's my path too. So the year of therapy I did was dialectical behavior therapy. It didn't work. I did both individual and group. It didn't work because apparently you need to have some sort of emotions <laugh> for that particular therapy to work. And I remember in the group therapy, there was a, a guy in the group therapy who was a very emotional human being, an anxious, emotional, human being. And, and I, I remember sitting there looking at him, thinking that's gonna be you one day. You've gotta go through that to get to the place you wanna be. And that's when things like dialectic behavior therapy would be good for me is when I start to get all freaked out about stuff. So yeah, I, I, I, I kind of get, I kind of get the, the, I kind of get the path. Can you, can you, you I've listened to, since we made contact with

each other, I've listened to a few podcasts with you and, and there was a, a definition of like trauma to where these two things are that need to come together to, to work through. Can you talk about, can you talk about that?

Dr. Will Siu ([00:27:30](#)):

Yeah. I did actually wanna say something though, if I, if I could before in response to what you said, which is that this thing about, you know, de dialectical behavior therapy and not helping you, like the other thing that I think really is a to people is again, the, the psych the medications that psychiatrists provide. Right. Antidepressants imagine like, so, so I, it's not uncommon for people to come to me and say, oh, will, I've been through years and years of therapy already? How, how, like, how can I expect that you're gonna help me? And I'm a psychiatrist. That'll say I see everybody for at least one hour every week. So I, I very much function as a psychologist. And a therapist. I have not prescribed an antidepressant since 2016 because you know, for my clients, I, I, you know, it's like if they've been going to therapy and most people are like, oh, I've talked about my mother.

Dr. Will Siu ([00:28:18](#)):

I've talked about the trauma. I've done all this thing. I don't feel any better, but often they are also on antidepressant. So it's like, they're trying to bring up with their memory, all these things that happened, but they're taking a medication every single day. That's keeping them in shutdown. So as you were saying, it's like, you can talk about all these things, but they're not being incorporated or felt in the body. And so, you know, when people come in to see me, I actively take them down on antidepressants, but it's interesting because I actually do think there's such a thing as too much coming too quickly. Meaning like I actually, you know, sometimes I'll have clients who come in on an antidepressant who will be crying, like they're able to cry. And so then I usually don't mess with the medication at that point, but there's some people who, you know, with all the tools I have and the way I work as a therapist, can't even like their eyes don't even start watering when they're talking about some of the most difficult, traumatic things you've ever heard of.

Dr. Will Siu ([00:29:11](#)):

And it's like, and then they're on high doses of Prozac or something. So then I start taking them down slowly, slowly, slowly until while I'm like, okay, now you're feeling let's work there. And then, you know, further take them off of medications. So then to answer your questions, actually, it's, it's actually related to this, which is so trauma. I dunno. One of my favorite definitions is, is, you know, someone who I heard you talk about recently GA. So he I was talking to him, I went to an IOSCO retreat with him and he shared his definition of trauma, which he said is, is anything that separates us from our authentic self which again is not the way most psychiatrists would, would talk about it. And so what we're essentially saying is that that trauma is something that happens to us, that, that at the time period is so overwhelming in terms of emotion and sensation, but that we don't actually get to expel it, to experience it, to share it, you know, to yell, to scream and, and, and we hold it in.

Dr. Will Siu ([00:30:15](#)):

And so then what the body does, it has this mechanism of then separating mind and body. And it's a protective mechanism. You know, we were just talking about that. This trauma is something that happens. That's incredibly either one or two things, incredibly scary or incredibly sad. And, and why I choose those two emotions, if you're interested, or you could go into that, but basically intense sadness or intense fear. That's not processed, that's important. And then you get separation of and body. And

then in the background, you always have this thing that's bubbling in the body until it's finally expressed. If it's expressed, you know, most people don't even bother to take that or don't know to go into, to, to any of this mind body stuff. And what I wanna say is that it's key that we it's something that's very powerfully, sad or scary, and we don't have help with it because the majority of the time, you know, most people who went to the Vietnam war don't have PTSD meaning.

Dr. Will Siu ([00:31:15](#)):

So it it's really going through something very scary or very sad and alone. That's what makes us hold onto it. And so it's that those set of people that need that help to get out. And, you know, it's, it's often people whose, you know, come from families that didn't allow this expression of sadness or fear, or the parent or guardian was the one that was causing the trauma, the physical abuse or the sexual abuse. So it's usually when we're in, in, in time periods of our life, in instances where we are alone with it, or the people who are supposed to be caretaking either weren't present, cuz they were shut down themselves or because they were the ones actually inflicting the pain onto us.

Warwick Schiller ([00:31:58](#)):

And I've heard you talk about another podcast, I'm sure you don't mind talking about here, but you've got some of that in your story don't you ha ha

Dr. Will Siu ([00:32:08](#)):

Interesting. Yeah. Great. No, no, it's been a while since I've talked about it, but it's interesting cuz it's, it's so related to what I'm going through literally in the last two or three months of my healing. And so other than being raised, Jehovah's witness and a child of the war on drugs. Yeah, my, my father was physically abusive with me. You know, and, and physically beat me, you know, up until the age of when I could defend myself 13, 14, you know, he was an alcoholic also. And the other thing that happened to me during junior high and high school is I was involved in gangs. When I was growing up here in Southern California and, and there was an instance of about a year and a half in high school where there was kind of a chronic threat to me in terms of my life.

Dr. Will Siu ([00:32:51](#)):

There was kids that, you know, were going after me at this time that that had guns. And I know had done drive by shootings. It's interesting even like talking about this again, cause it seems like such, it seems like lifetimes ago, literally, but now looking back, what I realize is that, you know, those situations with my father and then in high school, both put me into severe shutdown. And I'm like now finding my way back through that in terms of in physically, like in my mind, I've now understood and started re you visiting these things in the last eight, nine years of therapy, but it's not until the last like eight months where I'm actually getting back into my body again. And you know, you may be referring this, but there was, it was one actual instance of, of a beating that my dad gave me that always stood out because most of the time it was like he was drunk or I did something bad and he like, or again, so he interpreted as bad and, and I you know, was kind of spontaneously beaten or hit, but there was one particular instance when I was like 12, where it was the only time I anticipated it for a long time.

Dr. Will Siu ([00:33:54](#)):

And I had like forged my dad's signature by, by then I was already causing trouble at school. And, and so my, my teacher caught me in somehow she recognized the signature was forged. So she called my mom and then my mom was like, I'm telling your dad. And I was so scared and she called him at work and was

like, this is what happened. And I was like in terror for the hour and a half that it took him to come home. It was the first time where I'm like anticipating this beating. And so that I bring up in particular because I remember him, you know, so what he used to do is like, literally strip me down to my underwear would take off. I remember he had this like thick, black work belt. He was a blue collar laborer and would like wrap it around his fist and just start whipping me with it.

Dr. Will Siu ([00:34:39](#)):

And this time was different though. I just, I remembered this in, in, early in my therapy, about eight or eight years ago where I just remember in my child's mind laying on the ground and he was just hitting me on my left side. And he, I remember thinking he's not stopping when he normally does. I'm even getting a little teary. I thinking about this is like still, you know, obviously IM part in my body, but like I thought he is going to kill me. And, and and he kept hitting me and my mom was stand like my mom and you know, my mom wouldn't stop it. Like this was normal in Latin American families, you know, to hit your kids. And then what happened though that time was, I remember right after me almost immediately have after having the spot, he's gonna kill me.

Dr. Will Siu ([00:35:25](#)):

All, all my sensation went away. And I remember this clearly and I remember the, I could hear the belt and I could like feel this light pressure, but the pain completely went away. And I didn't really even like, think of that as shutdown or dissociation until about three years ago. And when I look back, I'm like, now it makes perfect sense. You know what I mean? I was so in so much pain and fear that my body shut down. And so in some ways like that has been, you know, my journey both mentally and physically kind of getting back into the body through understanding all the different facets through, you know, what that one story represents for me. I'm assuming that's the story that you were referring to.

Warwick Schiller ([00:36:05](#)):

Yeah, that that's, yeah, that's the story I was referring to. And

Dr. Will Siu ([00:36:09](#)):

Actually actually one more thing that I wanna share with people just cuz you know, I had actually shared this definition of trauma with you where I was like going through something and then not being able to process it. So a in that story, it was my parents, you know, both my parents standing there inflicting the trauma, right. Or one inflicting it, my other on watching and, and, and again, in my child's mind unconsciously, my mom not protecting me. And I remember then after I, after he finally stopped, I went to my room and I just started crying into a pillow saying nobody loves me. Nobody. He loves me. I just felt so alone. And I remember my mom in that instance opened the door and she was like, what are you talking about? Of course we love you and then shut the door. The reason I wanna share that final piece is because that was the example of, and who was I going to cry to? Who was I going to scream to? That's gonna understand the pain. I just went my own mother, you know, was like, like what are you complaining about? So I just wanna give that just in case that helps people resonate with their own histories of, of, of this is kind of the way, you know, shutdown works. So

Warwick Schiller ([00:37:14](#)):

Yeah. You know, for a while have been on about with the horses on about attunement, about the, the sense of being seen, being heard sort of thing. And, and, and it seems like it all comes back to that and like right there, your, you know, your mom says, of course we love you. Like, so she's obviously not

attuned to what's going on with you in that, in that moment. But I wanted to, I wanted to go back. You mentioned matte, and then you mentioned something that I hadn't heard and I've listened to a number of podcasts that you've been on that I hadn't heard you say and had to do with the gang stuff. And you know, what, what has happened with me on my journey of looking into all this stuff is I've come to see people differently. People who do bad things like or things that society thinks is bad and, and listening to, I think it was GA Matt's book in the room of hungry ghosts, where he was talking about, you know, being in that part of Vancouver where all you know, on skid row basically were all these drug addicts are.

Warwick Schiller ([00:38:24](#)):

And every single one of them has this story about trauma. And, you know, and GA says that all addiction is rooted in trauma. And when you, when you look at it, you know, I was raised to think drugs are bad. And of course, people that take drugs are even worse than the drugs themselves, you know, they're, they're bad people. That was their choice. And once you understand that, that you know, the addiction is related to trauma and they didn't choose their trauma, would you, you, I I'm, I'm pretty sure I know the answer to this, but you've been in the, the gang as a child in the gang scene in Southern LA. I mean, Southern California. That's gotta be all trauma related too, doesn't it?

Dr. Will Siu ([00:39:09](#)):

Yeah. And I think, you know, the way I like to describe you know, I, I, I addiction it's it's, to me, I've learned it's, it's a form. What of what I call. So when I work with clients who, you know, use alcohol or use other substances to numb themselves, like, I, I never use the word addiction with people. And, and, and I've seen a lot of people who struggle with it, use it for themselves and I start to re frame it and I call it it's your form of coping or soothing. And, and again, that I learned because of my own experience, because if we start just calling it what it is right again. So if someone isn't completely shut down and is still feeling a lot of pain, then I've told some people who I've worked with, who have of heroin, who had heroin, addictions.

Dr. Will Siu ([00:40:02](#)):

I was like, you might be thankful to heroin for yourself. You might be dead if you didn't use it. And obviously there's the problems with fentanyl and there's problems with overdoses, et cetera. But, but I hammer that point home because meaning you were feeling so much pain, maybe you would've killed yourself. You know, people don't usually go straight to heroin and you're right. It's not, not this conscious choice, but it's like not unlike alcohol where someone, because of their social environment, because of their friends ends up finding this way to cope, to shut down the pain. And you're right. I love that. You said, you know, society, judges, some of this stuff. So for me, it's not, when I look back in terms of being involved with gangs, it's not by chance that my father used to beat me physically. And then when I went to school, I associated mostly with the bullies, right.

Dr. Will Siu ([00:40:49](#)):

Because I was trying to like UN you know, make up for some stuff that was happening at home. But it was, I was used to this, oh, like males and pecking order and, and bullying each other and making fun. That was very familiar because of where I grew up. So now looking back, I'm like, oh, like it was obvious. I wasn't going to like, hang out with the nice kids at school. I was still like in this having experienced a lot of pain from my father. And then I started inflicting it on other people, right. Who are like lower on the pecking order. And so I do love that you talk about it this way, because like, it's just different forms of

coping, but one can say, and I've seen this, you know, now in the last couple of years after I moved, moved back to LA from the east coast and I was on a Netflix show a couple of years ago, there's a, you know, a large number of celebrities, billionaires, other public figures that I work with who come from a lot of wealth or have a lot of wealth.

Dr. Will Siu ([00:41:40](#)):

And they undergo shutdown also. But the coping mechanism, the soothing mechanism just looks differently, but it, but it's, it's providing the same function and that can be alcohol, or that can even things that we don't consider classically as being illness or disease like overachieving or hoarding of, of, of money in greed. Like, like these are all forms of coping and soothing, right? It's like, oh, if I get more of this, more of this, more of this I'll feel better. Right. But what, but what I, you know, when people talk about money, doesn't buy happiness. And I used to like, repeat that to myself, but then actually seeing people in my office, you know, these are stories that I have so many of literally, like in the last two years, I've had someone come in and say, you know, when my first billion hit my bank account, I felt nothing.

Dr. Will Siu ([00:42:29](#)):

Literally someone said that another person was like, you know, again, private plane, everything I'm walking along. So some of the most beautiful places in the world, private beaches here in B, and I feel nothing. I've heard that so many times or other people who are like at the end of my Workday or on the weekends, I feel completely empty. I'd rather actually be working because I don't wanna feel this emptiness at the end of my day. But again, but some, I like to think about it. Some coping and soothing strategies are criminalized and some are again, look down upon and other coping strategies we actually reward and we look up to in our culture. And so that's why G's new book, which is coming out this summer called the myth of normal is, is like gonna add to this, this realm of data that we, again, this is not saying it's to hurt other people.

Dr. Will Siu ([00:43:15](#)):

Meaning like when I was in pain, there was times in my life where I was really hurting other people. And so I'm not saying this is an excuse, nor nor we need to forgive, but, but we need to understand differently the complexity of everything that goes into this. So that as a society, we in a community, we can start healing together because none of us is free from a very few people. I, I mean, I can number them on one hand who I think are close to being free from shutdown, like, like the vast majority of our population, like 98, 90 9% is in some version of shutdown and some version of coping and soothing. And they don't even know it.

Warwick Schiller ([00:43:53](#)):

Yeah. I'd, I'd say like in the, in the horse community, that's very true. Like for me, it wasn't until six or seven years ago that I actually realized, oh, there's some changes I need to make about me. And, and, and the choices I make, like, there's a, there's a trauma therapist from Canada that I've had on the, on the podcast and name Sarah sch slot. And she does trauma work with people and horses too. And I'll get back to what I was just gonna say there in a second, but a minute ago you were talking about the coping thing and she has a term, she calls coping privilege to where you know, might have two brothers. And, you know, they both had troubled upbringings. And the one brother is a driver and his coping mechanism is succeeding and he becomes a CEO. And the other brother, the other brother is, becomes a heroin addict. And people look at one like a success. And the other one, like he's a failure and they are, they are both coping. They're only, they're where they are because of the coping mechanism that the,

that, and I don't know if, I dunno if you choose your coping mechanism or it's just the way you're wired.  
I

Dr. Will Siu ([00:45:00](#)):

Don't know. I think it's a little of both, you know, I think it's a little bit of way, the way we're wired, but in terms of, you know, people, and when I say people, I mean my own, you know, community of psychiatrists who, who try to mental illness to genetics and, and that has failed. Like we don't, we don't actually have very good data to support. Oh, alcoholism is genetic and G talks about this a lot in his, his last book 11 years ago called the body says, no, but again, anyone listening that wants to read about Gur, I would wait in September, his new book comes out, which is just leagues. I've gotten a chance to read it ahead of time. But it's like some, it's some genetic, but it's the vast majority of this is environmental. And we learn it and, and the that's where psychedelics come back in because before psychedelics, and this is one of the things that early on in my training, I actually almost dropped out of, of my psychiatry training at Harvard, because I got so disillusioned with if nothing was working for my clients.

Dr. Will Siu ([00:45:54](#)):

And it wasn't working for me when I got very depressed and suicidal. And, and I realized that was one of my coping strategies. Additionally, from what you said, it was achievement. You know, I came from a, I was the first in my family to go to college. And then I wanted to go to all the best schools. I went to UCLA for medical school. Then I went to Oxford to get my PhD. And then I went to Harvard, I to train as a psychiatrist and I realized this was another version of soothing. And when that hit me though, like that was like the last soothing mechanism that I kept. And when that one crumbled, I like was very near killing myself. And that's when psychedelics came into my life. And the reason I bring that up is because before that, before psychedelics, we never used to talk about cures in, in, in, in, in, in psychiatry. The best data we have had before psychedelics was SSRIs antidepressants for depression, and it's about 30% and it's called the Stard trial. It was tens of thousands of patients, 30% of people that take it that have major depressive disorder that take antidepressant get better, meaning they don't all longer meet the criteria. And it's compared to placebo, which is 19%.

Warwick Schiller ([00:47:07](#)):

I was just about to say, tell us about the placebo. And

Dr. Will Siu ([00:47:10](#)):

So that's, that's the thing for me is that, that was literally that lecture in my I at my time at Harvard changed my life. That specific piece of data I just gave you is what made me think, what the hell did I just spend the last 15 years of my life doing? And it really, really, that's what threw me into this second vow of depression and suicidality. I'm like, I think I wasted this entire time I'm and so basically again, 10% better than placebo, 30% get better to me again, this is where my logic, like what I felt about what was happening to me and other people. And then what I was being told by the outside world, like, that's the best data we have. I'm like, isn't 30% and 10% better than placebo evidence that this doesn't actually work. Like, like, am I crazy? Or that, that to me, this is clearly not working.

Warwick Schiller ([00:47:58](#)):

Yeah. You can't graduate from Oxford with 30%.

Dr. Will Siu ([00:48:01](#)):

Yeah. And so what the, the reason, I mean, that up is with psychedelics now, like psychedelics for PTSD, like that's now been shown, demonstrated. So 70%, no longer have PTSD who had severe treatment resistant PTSD for an average of 18 years, no longer have PTSD. And we're seeing psychedelics work for anxiety, for depression, for, for addiction. And I'm like, this is now me thinking as a doctor. I'm like what we, didn't all of a sudden get the neurochemist history and the genetics, right? Why are these substances that are bringing up very painful parts of people's lives? They're not numbing them all of a sudden we're, we're talking cures for the first time in history, in, in, in psychiatry. And so I think this is gonna be, I don't know, it's a very exciting time. I think in some ways is a professional in this area. Yeah. And it seems to be coming at a time, you know, where, where the world is living in shutdown, and we really, really need this as a collective. So it's this mixture of excitement. And also <laugh>, you know, it's also scary times in the world right now.

Warwick Schiller ([00:49:02](#)):

Yeah. It was interesting you saying, you know, like this high percentage of people with PTSD. So I went to Florida a few years ago and did a, a three day iOS ceremony. There were 50 people there. And one of them was a, a veteran. He he'd served two tours of duty in Iraq or Afghanistan, one of those, and he just sat in a chair and looked at the floor, had his hands on his knees, looked at the floor and his one hand just tapped on, on his leg. And his other foot tapped on the floor just flooded up and down. And he, he looked at the floor. Wouldn't really look in the eye to talk to you. And at the start of this whole weekend, we sat in his big year, this big round year in a big circle and they passed the microphone around and you got to introduce yourself and say why you were there.

Warwick Schiller ([00:49:50](#)):

And this guy stood up and you know, his name is Mike. He said, my name is Mike. And he's looking at the floor. And he's saying that, you know, I did two tours of duty of, of Afghanistan and, you know, got some PTSD. And that was about all, he said, handed the microphone on the Sunday. When we left, they did the same thing and went around and they hand him the microphone. He stands up with this big beaming, smile on his face, looks everybody in the eye. And he goes, Hey, I'm not usually like this, but if anyone needs a hug on your guy,

Dr. Will Siu ([00:50:19](#)):

Yeah, beautiful.

Warwick Schiller ([00:50:20](#)):

Anybody wants a hug. It was just a complete different human being. It, it was, it was, it was crazy to see.

Dr. Will Siu ([00:50:27](#)):

Yeah. I mean, beautiful story. And you know, for me, I also wanna let people know that are listening, cuz well, a if, if, if you know, there's, I'm sure you have some listeners who are like, this sounds insane and I may never try it or I'm far away from trying it. And the first thing I tell people is that's okay. Again, coming from a former Jehovah's witness, double doctorate at 33, if you need to take the time, like, like it took me a year and a half before hearing about psychedelics before even trying it. Meaning if this sounds scary to you, if, if, if, if this sounds like intimidating, that's okay. Like, like you, like, I, I don't think

anyone needs to rush to do this because now the way it's being pushed in media is that it's some sort of a silver bullet and it is not a silver bullet.

Dr. Will Siu ([00:51:13](#)):

You know, meaning a lot of people have those kinds of experiences that are beautiful. And they're real meaning at the end of an Ika journey. But the majority of the people that you speak to, if you were to check in with that person about two to three months later, most people without the real, the, the additional support to keep them out of shutdown will shut back down again. Why? Because they've usually built a life around them, partners work, et cetera, that promote shutting down again. Right? Like, like I, I tried my first psychedelics during training when I was working 70, 75 hours a week in the hospital. Like they gave me these beautiful insight, but then's life I was living was continuing to support my shutdown. So, you know, it's, that's just another thing I really like to, to tell people these are not silver bullets.

Dr. Will Siu ([00:51:58](#)):

You know, if, if we can open this up in a safe container, help people get through it and also keep supporting people to change the way they are living. That's when it's beautiful, sustained for people. And that's the part that's lacking a bit because most people who are using psychedelics are serving them as a therapist or an underground therapist illegally. And I'm not saying illegally is a bad thing, like, like, but there's a lot of excitement around this. So there's a lot of businesses starting in and out of the us saying, oh, come to iowaska, we're gonna treat this or come to ketamine. We're gonna do. And either people, I have very often come back like you and saying, oh, I saved up a bunch of money. I did six ketamine sessions in two weeks and I don't feel any better or I feel worse.

Dr. Will Siu ([00:52:40](#)):

Right. That's the stuff I see as a practitioner that is, you know, people aren't going out and saying, oh, I went to Peru and did iowaska and it didn't do anything for me. Right. Like people are aimed often cuz they're like, well, why does this seem to be helping everybody else? But it doesn't help me. And it's because like, it's gonna take some time. And by time, I mean years for society to actually understand how these things work and for practitioners to really understand how it works. But I do think that, you know, this is the beginning of, of process. That's probably gonna take, you know, <affirmative> 10, 20 years I would guess to basically take, take society out of shutdown, right. We're essentially living in a culture right now that is shut down.

Warwick Schiller ([00:53:24](#)):

So you've been associated with maps, which is the multidisciplinary association for psychedelic studies. And so you've, you've actually, so I want you to talk a bit about maps and also, so you've been through the MDMA assisted therapy thing as a, as a study with maps. Can you talk about that cuz I, and can you talk about, do you think MDM a is like the future of, of mental health? Is it the, the thing

Dr. Will Siu ([00:53:57](#)):

I, I, yeah, there's a lot I can say about that. <Laugh> as you can say, I have a lot to say about many things, but maps is, is wonderful. So maps, as you said, it's the multidisciplinary association for psychedelic studies. It just played a big role in my life and it was started by someone who I can certainly call a dear friend, but more importantly, a mentor, a guy named Rick Dublin who a few years after MDMA was made illegal. So psychedelics as a whole were made illegal in 19 7, 72 or 73 by Richard Nixon. But MDMA

stayed off the radar for, until the early eighties because it just wasn't grouped with psychedelics. But then during the early RA movement where people were using this in party settings, the government caught wind and then made it illegal. And at that time, a guy named Rick Dublin who at that point was a college dropout had decided that this was so important that this needed for, for healing, for, for society that he needed to dedicate his life, to making MDMA accessible again.

Dr. Will Siu ([00:54:59](#)):

So he actually sued the DEA in the late eighties, won the lawsuit, but then the FDA decided to ignore it and said, we are keeping it anyway. And so that year was 1986 and this is important. And, and you're of the age where you'll remember, I remember 1986 for me as being 42 when I'm 42 years old right now, 1986 to me was the year I was in first grade. And I remember as the year, the space shuttle challenger blew up. Cause I remember we were in first grade, the, you had those TVs where you wheeled them in and like all the kids were sitting there watching this and like this space shuttle blows up. <Laugh> the reason why I, I bring that up is because everything that's happening right now, there's no singular figure that is more responsible to getting psychedelics where they are except for Rick Dublin.

Dr. Will Siu ([00:55:45](#)):

And so I'm like, I just, it blows my mind that I'm like, how did someone 36 years ago say this is so crucial for humanity. I'm gonna make this my life mission. And so anyway, long story, oh, I'm saying a long story, but so to, to finish the story, so Rick then actually went back to school. Then he got his PhD from Harvard, cuz he then was saying, okay, the legal way is not gonna work. I need to work within the system and show that this works medically, cuz he already knew from his experience that MDMA was this thing that brings things, people together, it, it heals this trauma, but he was like, okay, let me try to work within the system. Let, let me not try to fight the system. And so then he started basically yeah, this nonprofit to make MD a medicine.

Dr. Will Siu ([00:56:33](#)):

And it took him a very, very long time. It didn't really start gaining traction until the mid 2000 tens. But yeah, it's the one that's furthest a long over about a year and a half, two years from MDMA to become an actual prescribable medicine and for it not to be considered highly illegal anymore. And he chose MDMA for PTSD as the first indication for that. And you know, I think for many reasons and in one ways he's never used the word shutdown, but the PTSD because of trial shuts people down. And so he knew that MDMA just the way it works and we may, you know, if you want, we can get into it a little bit more, but it basically takes people out of shutdown. More, I would say more consistently and more safely than any of the other psychedelics.

Dr. Will Siu ([00:57:18](#)):

So for me, I think it is the one I am most excited about. It, it just works very beautifully with trauma and fear and yeah, and I think that's why we see again, 70% no longer have PTSD. And like last year there was a couple big organizations. The American academy for the advancement of science listed their like top 10 medical breakthroughs of 2021 and MDMA was listed it as one of those. The FDA also in 2017 listed MDMA as a breakthrough therapy, which means it gets an accelerated path through the pharmaceutical process. So, and that's the first time anything for us, a psychiatric illness has ever been given that designation, you know, the, the FDA use actually does that for things like oh, cancer drugs or, or viruses and aids. And, and I'm like, there's this quote, illegal, dangerous substance. All of a sudden

that like is just working magic <laugh> you know, and, and really helping people through yeah. Decades and decades of shutdown.

Warwick Schiller ([00:58:22](#)):

I have a question about that.

Dr. Will Siu ([00:58:25](#)):

I know I just said a lot. Go ahead. <Laugh>

Warwick Schiller ([00:58:28](#)):

Is it being fun? This is a political question, but is it being fast tracked because big pharma can produce it. It doesn't, you can't grow it in your backyard.

Dr. Will Siu ([00:58:36](#)):

No. So that's the fascinating thing. And Rick in addition to being again, a friend and mentor, he, he has taught me so much through how he runs his life. And so it's interesting because maps remains well it's, it's now a, a, a twofold entity. It's a nonprofit and it's also a public benefit corporation, which the latter one is a for profit company, but basically the for profit company is owned by the nonprofit. That's the way he set it up. And so interestingly, so he has, you know, once it becomes prescribable, which we're about a year and a half away, he's gonna have, what's called data exclusivity in the United States for seven years. Meaning maps is the only organization that can sell MDMA for seven years. And when it goes to Europe, it's 12 years. So meaning this would be like a pharma's company's dream.

Dr. Will Siu ([00:59:26](#)):

And so I remember being at Rick's house a couple of years ago and he had told me, they, the, the Boston consulting group, which is just like a, it's a, it's a consulting company, did a study for maps to try to like project how much they're slated to make in the first seven to 12 years, their, their conservative estimate was 1.5 billion. And I remember telling Rick, I'm like, oh my God, Rick, I was at his house. And I was like, like, like, are you gonna take a percentage of that for your, for your family? I'm like, you've been working your ass off for the last 30 some odd years. And he's like, no. And I'm like, what? I'm like, what about just a little bit, I was like, secure, like your or children. He's like, no, he's like, that's not the way I do things. And so he has like stuck with this, like, you know, this goal of bringing this to the masses without like taking that profit himself. Which is, you know, when I thought about it now, looking back, I'm like, it's not surprising because if he didn't have that kind of ethos, who else would've done this since 1986? You know what I mean? So

Warwick Schiller ([01:00:25](#)):

Right. He wouldn't have got this far.

Dr. Will Siu ([01:00:26](#)):

Yeah. So maps is the only nonprofit that's continuing since, you know, we've gotten a lot of news in the last two to three years around this. There are a lot now of pharma for profits jumping in that, that are trying to do different molecules other than MDMA for more profit. But my, my guess is that they're the vast majority of them are going to fail because people aren't really understanding how different this is. And so yeah. Anyway, that's, that's the, the bit of a short story on maps. <Laugh>

Warwick Schiller ([01:00:55](#)):

Wasn't MDA initially synthesized as a, as a, like a to help with health.

Dr. Will Siu ([01:01:04](#)):

I can't remember the exact history. I mean, I know Merck, pharmaceutical company developed MDMA it's like in the 1920s. And it, for the indication that they were looking at using it for, like, it didn't, they just like decided not to continue studying it. So it's not like a new molecule, but then it was kind of re vibed again in the seventies. As, as people found it again and then found it, had this empathic connection, trusting, loving kind of quality to it. And so then it was kind of used in the therapy community. Again, it wasn't illegal in the late seventies and people were using it, therapists were using it with their clients in couples that's stuff. And so yeah, that what was happening in the seventies. And then again, that's, that's when in the early eighties it started leaking out into the Raven party culture, and that's when it caught on as, as ecstasy and people started calling it ecstasy. But, but before that, it had, had uses within therapy already.

Warwick Schiller ([01:02:00](#)):

Right? Yeah. I have heard stories or seen of maybe a, a documentary or something where this couple had MDA assisted couples therapy. Yep. And they said it was like seven years of therapy in, in a couple of sessions and cuz it just, it just, it just breaks the breaks, the walls down and, and you know, I guess those things that you've held back and the, the walls you've put up and you subjects, you, you, you can't dive into, you kind of opens all that up, doesn't it?

Dr. Will Siu ([01:02:31](#)):

Yeah. I mean, so I'm, I'm just hesitating cuz when, you know, you say like it opens all that up or that this couple said seven years of therapy, that that's the kind of stuff where I, you know, there's some messaging out there again that these are silver bullets. And so to me to try to quantify the amount of healing that can happen, it really depends. Right. So meaning like there's, you know, there's some people who aren't therapy for 30 years and get no very little help. So maybe right. It all the offend. So the reason this is coming up is that, you know, so does it open up some? Yes. but there, we have also this, this saying within the MD and, and I wanna just make sure I wanna it's MD M a cuz you you've said a couple times MDA, which I also, I don't want people to confuse cause it's actually, there is a related molecule that actually is MDA.

Dr. Will Siu ([01:03:20](#)):

So we're, we're talking about MD a and yeah. And so the thing is it, I would say it provides the opportunity to then go through that, as you said, what comes up after shutdown, whether it's fear or whether it's sadness, but it is only an opportunity. It's the human connection between the people are in the room, if it's the therapist or the client or between a couple taking it, it's what they do with it. That actually makes it something that is healing or lasting. So, you know, meaning like, so it, you know, could it in theory be that in a, you know, a well done way that we get rid of something that, you know, potentially could have taken 10 years in therapy. That's fair to say, but I don't wanna say it's like every time and I, I would actually say it's it's, it's the outside of the maps research study where you have two highly trained therapists with one patient.

Dr. Will Siu ([01:04:12](#)):

So that's the way the setup is you have two, two therapists with one patient. So you have two trained, skilled people who are sober, who, and have their full attention on this person for each of those sessions and have gotten to know them over three to four sessions before that, without any sort of psychedelic medicine. So you essentially are recreating this safety structure so that when you give the MDMA and you take someone out of shutdown that you have this opportunity to then not experience. So, so you have the opportunity to reexperience what you went through, but this time not alone. And so my first session that I did with maps, because I got to take MDMA in 2017 as part of my training in a legal setting cuz maps had done this mini study that for therapist and training that they would be able to take MDMA.

Dr. Will Siu ([01:05:02](#)):

And so that, you know, that situation that I was talking about earlier about my father and, and him beating me and me, you know, coming to this place of like, I feel alone I'm I'm so, or like nobody loves me to know that he loves me that came up during that session, but it wasn't just in that time, like a memory and a thought, it actually came with the physical experience of I am alone, which was so overwhelming. Mm. And I'll say this also because it, it didn't like sort of bring it up and I healed it and packaged it up. By the end of the day, it actually started a process that took about four we weeks of continued therapy. I actually became more depressed and suicidal in the three to four weeks after the MDMA session. Luckily I had a very wonderful therapist at that time that helped me sort of process what had come up.

Dr. Will Siu ([01:05:53](#)):

And I would say that honestly, and I, there was probably a chunk of that, you know, instance with my father that was, you know, healed or released in that experience with MDMA. And the month after now, looking back, it may have been maybe 15 to 20%, but at the time, even that felt tremendous. Right. But what I've realized now, even more in over time, is that what I was basically explaining to you in the beginning, I'm still coming out of shutdown. You know what I mean? So it's like, it's, it's, it's a longer process. So anyway, that's to go back a little bit. Yeah. So when people are saying, oh, I did 10 years of therapy and when I, it's not that simple, it's a little bit more yeah, it's got a lot more nuance to it than that, but again, I, they are very, very powerful tools.

Warwick Schiller ([01:06:43](#)):

Yeah. I'm glad you mentioned the fact that, you know, you did the M DMA trial with with maps. Yeah. And it brought things up and you were actually more depressed and suicidal. Yeah. Afterwards, like, cuz I, I wanna make sure people understand this is, we're not screwing around here. This, I, I, I totally believe in these things, but I believe them in them as healing modalities, not as fun stuff, because it might not be the fun you think it is.

Dr. Will Siu ([01:07:14](#)):

Yeah. It's I mean, I would say the, they, you know, maps often quotes this one of the early veterans because about 50% of the, the, the participants in the map studies are veterans war, veterans, and the other half are women with sexual trauma. And there's this early quote from one of the study participants that he, he said after one of his sessions, he's like, I don't know why they call this ecstasy because it, it I've never had a person come through it or, or heard of anyone that went through a study. That's like, oh, that was easy. Like no one, or I just like had fun for the entire time. Like that does not happen. You know, there are stories of people who go to burning man or like RAVs, et cetera, that you

know, are like, oh, this is great. And for some people, I actually think that don't have a lot of shutdown in trauma. It can be a very beautiful experience and I'm not against the responsible use of certain substances to feel good to me. That's not a bad thing. As long as you're not hurting anyone else, you're not hurting yourself. But to take that same medicine and put it in a intentional setting with trained people, you wear an IM mask, you have a set of headphones that you are encouraged to go within yourself. It's a completely different setting to do it in a clinical setting than in a party setting

Warwick Schiller ([01:08:28](#)):

In. So when you did that, so when you had the mask and the earphones on with the earphones, just blocking out noise, you listened to,

Dr. Will Siu ([01:08:35](#)):

So there's music playing and, and it's not that you have headphones on the entire time. It's kind of like they, we call it going out or sorry, going in and then also coming out. So there's this process of, you know, let the person sorry, I wanna also share that there's this, there's this saying that we use trust the medicine, meaning at the doses that we use it at the purity of pharmaceutical grade, MDMA, it's not gonna bring up anything that you can't handle with the help of these two therapists, meaning it like, like it's, it's it's we sort of think the, the, again, the, the what's being brought up through the shutdown is something that can be managed. And so the reason I bring that up is because, you know, it's so, so sometimes like with the, I, I headphones that gives the opportunity.

Dr. Will Siu ([01:09:24](#)):

Usually you kind of sink into yourself and sometimes memories will come up that you, that are novel that you haven't even thought about in your adult life. And then they'll come up and then you'll have the desire to then talk to someone about it because you haven't talked about it. And so then you take the, I mask off and the headphones and the therapists are there and then you get to talk about it. Or sometimes as a therapist doing this stuff, someone will take it and you see them struggling with something and they're not actually taking the I mask out. And then you sort of check on them. And sometimes it's people who have had a really hard time asking for help or sharing. And so there's this process of, oh, I think, you know, it seems like you're having a hard time or something stuck. You seem to be fidgeting a lot. What are you feeling in your body? And so it's this sort of entire beautiful process that happens between, you know, the two therapists and the patient. And it's not. So, so it's not sort of autopilot, there's definitely a lot of watching and understanding and assessing and checking in to, you know, it honors just that we don't, we don't know what's gonna happen every time, you know, and, and, but all we can do is be the best prepared to, to help the person through it.

Warwick Schiller ([01:10:29](#)):

Right. Have you ever read a book called stealing fire by Stephen Kotler?

Dr. Will Siu ([01:10:35](#)):

No. I I've heard of it and I've flipped through it. Someone gave it to me, but I haven't actually read. Yeah.

Warwick Schiller ([01:10:40](#)):

My, my favorite book. I just love that book, but he tells a funny story in there about there was a psychiatrist in the UK who was also on the, the governmental board that regulates what drugs are illegal

and what drugs are illegal. Yeah. Okay. He was on the book anyway, he had a upper middle class client who was a lady mm-hmm <affirmative> and she'd been barred from her local pubs, all the local pubs in the area for just having these rages. Like she would throw glass ashtrays at the bartender, things like that. And he, so he said, so what happened? She goes, oh, I had a traumatic brain injury. And he says, well, how did that happen? And she said, it was a horse riding accident. And he hadn't ever had a client. Who'd had a horse riding accident. So he looked up horse riding accidents in the UK and in the UK, because a lot of times they ride out on little narrow roads with cars, zooming own stuff on horses who shouldn't be out there. And cuz they got no else to ride. He said, there's one in every 350 riding outings in the UK resulted in serious injury or death. And at the time MDMA was public enemy number one. And the, the St. Statistics on that was something like one in every six, 60,000 pills taken there's a serious injury or death or something like that. And so he somewhere or your eyebrow just raised, maybe that's a bit high, but no, I actually say

Dr. Will Siu ([01:12:03](#)):

That's probably low based on what people believe it is. But I probably in reality is probably something like one than 60,000, but

Warwick Schiller ([01:12:09](#)):

Go. So anyway, so he, he at some meeting or public place, a public thing, he said that MDMA is actually 2000% safer than riding a horse. And so his boss drags him into her office and, and in the book it says, she's something like the in America she'd be across between the secretary of state and the head of the DEA. That's basically what her job is. And she reamed him out. She said, you, you can't say that to people <laugh> you can't compare those two things. And he said, why not? She said, because one's illegal, you can't compare illegal things with legal things. And he said, but why is it illegal? And she said, because it's dangerous

Dr. Will Siu ([01:12:51](#)):

<Laugh>.

Warwick Schiller ([01:12:52](#)):

And he said, but one in every 350, person's riding the, a horse in the UK, it's gonna have a serious injury or a death. Yeah. That's a lot more dangerous. She gets anyway, he ended up getting fired over the whole thing, but it's just that, that little back and forth was just so it's, it was like an Abbot and Castello routine, you know? Yeah. Who's on first. Who's on second what's and second, you know,

Dr. Will Siu ([01:13:11](#)):

And that's the thing that's interesting about it's it's coming back and Rick deciding, okay, well I'm gonna work with the system. I'm gonna work with the community because it is. And at some point, you know, when he initially, you know, sued the DEA and did it successfully if like, as a doctor, so the way the, what happened also, if you think back to when psychedelics were made illegal 1973, it was the hippie movement had, had come up and, and hip were associated with LSD and they were saying, why are we in Vietnam? Like, we're killing people. Like, like what's this all about? Let's stop the war. And so who made, who made psychedelics illegal? And at that time, by in the fifties and the sixties, psychiatry was highly studying and was excited about psyche. Like, like one of the things that changed my mind as a doctor, like I said, it took me about a year and a half about looking up a psychedelic to when I actually tried them because I was so skeptical and so scared.

Dr. Will Siu ([01:14:08](#)):

But what ended up happening on, you know, one of the things is I looked up old papers and I'm like, oh my God, there's all of these really good science that was being done in what happened. Richard Nixon, the president of the United States is the one that said psychedelics are now illegal. Now, when I think back I'm like, that would be like, again, Trump or Joe Biden, all of us sudden saying, you know, one of these medicines is dangerous. And like, why would, again, a politician be saying that not one of the, the doctors that was actually studying it, the, the medical community had not said at all, that it was dangerous or addictive. And the reason I bring up those two things is so the way that the DEA made it illegal is they put it on the most, you know, meaning they put all the classes of psychic at Alex and MDMA on what's called schedule one, which is the most restrictive substances in the United States.

Dr. Will Siu ([01:14:58](#)):

Right. And, and on there, on the list still right now are marijuana, all the psychedelics and MDMA and the, the definition of the DEA for a schedule, one substance is two things. It must supposedly meet two criteria. One is that it's highly addictive. Number two, that it has been shown to have no medical benefit. Neither of those things have ever been true for psychedelics MDMA or MDMA. Right. And, and the thing is when I started realize this is what made me be like, whoa, like, I, I don't think I can trust the system that trained me to actually make the right decisions, because this is clearly not what is happening. And especially then, you know, I think this will resonate with you when I thought, what are things that are, that meet that criteria highly addictive and no medical benefit. Two things came to mind for me, alcohol and nicotine, right?

Dr. Will Siu ([01:15:53](#)):

Yes. And, and not things that, that a, those two things are not on schedule one and they're promoted and people are making massive profits off of it. And so that's where we're seeing, starting to see a shift. So meaning like, it's exciting that this is happening right now, but also it's like, this never should have happened to begin with. And there were so many politics behind this stuff. And so that's why, like your average listener again, has probably thought about psychedelics as something dangerous and addictive, because that was the, the messaging that the government gave. But there, there isn't, you know, that history. And so Rick, Rick Dolan often says, he thinks that psychedelics will have learned to use, sorry. Society will have learned to use psychedelics. He estimate mates by 2050. And so because, and I think that's actually a, a reasonable estimate is because he's saying there's gonna be a lot of reeducation that's necessary.

Dr. Will Siu ([01:16:43](#)):

We have to train therapists to how to use it and train the community to, to, to, to reeducate people on what essentially you and I are talking about what is shut down? Why do we shut down and how do we start it feel again, you know, as individuals, but also as a society. And so, yeah. And you know, so I, at this point I'm like, you know, I never tell people and I, oh, you should just go out and try them. No, this is, this has got to be something that people become comfortable with, that they, they think about that they read about. And yeah. So I I'm mostly like saying someone that, yeah, I've seen it help me tremendously. I've seen it help a lot of people. But yeah. Take your time and do your research. It's not something that, again, I think is a silver bullet.

Warwick Schiller ([01:17:24](#)):

Yeah. It's interesting. You're talking about, you know, the whole thing with Nixon stuff. So that book stealing fire, it goes into that quite a bit. And it talks about back in the middle ages in England, there was a PAing fence between England and Wales, I think cuz that's where the wild people lived and you don't go. That's where the saying beyond the pale came from, oh, you go out beyond the, if you go out beyond the pale, when you come back, we don't trust you because you might have seen something. You know what I mean? And so in that book, stealing fire, he talks because it's, you know, stealing fire is about altered states of consciousness. Whether you get 'em from meditation or from, you know, doing dangerous things or from psychedelics.

Dr. Will Siu ([01:18:04](#)):

Yeah.

Warwick Schiller ([01:18:04](#)):

And he's, he talks about the reason psychedelics are illegal, is that the pale of the church and the pale of the <affirmative>. Yeah. And the, you know, like all the like saying you know, like the, the Aztecs and people like that, that, that had certain took certain substances. You know, when that, when the, the Christians came over and they got rid of that and they made em try to drink their sacramental wine and things like that. So there's the, the power of the church, but they're is also the pay of the state. And basically it says the state does not want you taking stuff that makes you be a free thinker.

Dr. Will Siu ([01:18:39](#)):

Yep.

Warwick Schiller ([01:18:40](#)):

I wanna kinda keep you down

Dr. Will Siu ([01:18:41](#)):

A little bit. I sort of, you know, it's interesting because I, I agree with what you're saying. And at times, especially in the beginning, when I was first on this healing path, but also training as a practitioner, like some of the people who are very political about psychedelics and who are very angry and say things like, oh, it's government control. The government doesn't want us to be free. I used to very much resonate with that. But, but then there was a period of time where I actually started thinking of my own history and my own shutdown, meaning like I grew up very religious, right. And probably different religion than, than some people who are listening to you. But I grew up religious. And, and so meaning I had to realize, I just, like Rick said, I'm working with the system. I'm gonna sh I, he kind of, he knew it worked, but he's like, let me work with what I've got right now.

Dr. Will Siu ([01:19:34](#)):

You know, he was essentially assessing and saying, look, the government is shut down. You know, other than, you know, the, the, the part of the war on drugs that was like, oh, we don't want the, the hippie movement to succeed. It's also, again, by then, the world was so shut down emotionally that again, these, these feelings were just scary and they are scary, right. For me to go into an empty EMA session or LSD session. Now there's still fear every single time I go into it. So for me, one of the things that the hippies didn't help with and, and, you know, Timothy leery, who was one of the colleagues of RO Doss, like they were Harvard professors who took LSD out of the laboratory against the agreements, and they

started giving it to students. So there, I think there was irresponsible use within the hippie movement that actually was like trying to force it down the throats of, of an America that was already shut down.

Dr. Will Siu ([01:20:25](#)):

And so what do you do if, if, if you're in power and someone's pushing something on you, you're gonna shut it down. And so for me, I actually now see why it was important for it to come back through medicine, to, in order to reincorporate it into society. And so for me, like there's a part of my heart that says, I want most people to be able to access this. We need to access. Now we need to save the world. Do we need to save the environment? But there's also this piece of respect that look like we have to work within a culture and, and help people feel safe as they do this. You know what I mean? And, and that to me is the, the, the best shot we've got. Cause I think, you know, just putting this into the tap water is not going to be, you know, what saves us is.

Dr. Will Siu ([01:21:08](#)):

The other thing that we haven't started talking about is nothing. You know, when, when I think when I, I, I started having this thought about three or four years ago, none of the stuff that we're talking about requires psychedelics. I like to say that, you know, psychedelics are neither sufficient nor necessary for healing, but with the right support, they're the most powerful tools that we have. Meaning what am I talking about? I'm saying create an environment where people can feel safe emotionally to bring up fears, to bring up insecurities, to bring up sad things, and that someone is gonna be there to listen to them. That's literally the mechanism, which allows people to come out of shutdown. Psychedelics are not required for that. Right. All we need to do is, is be better connected human beings to really be there for each other. And so ultimately that's the goal is to, you know, help society get out of this, but this is not gonna be something that we, we need long term, hopefully as a society, but it's also not something we need short term, you know, if people just learn to connect and to be more authentic and to be able to look within themselves, to there for their friends of the family that I think is what really scales, you know, the ethos of psychedelics, but doesn't, doesn't require them

Warwick Schiller ([01:22:20](#)):

Very well said. You know, I went to a sort of men's emotional resilience retreat a couple years ago, and it was all about sharing and vulnerability and holding for people. And yeah, I got, I got more out of that than, than any of the psychedelics I've done, but it was, you know, you've, it takes a lot of work to get all this group of people in one place at one time and all of them to be vulnerable and have some skin in the game. And yeah, it was, it was very cool experience.

Dr. Will Siu ([01:22:45](#)):

It's interesting though, cuz like it, and to me though, that's gonna scale much quicker than this, this ability for people but you talked about men so we could talk about that. So I mean that has been a resistance for me for a long time, right. Even though I knew what I needed to do in my mind, it, it it's taken and it still takes effort for me to continue to be authentic in my expression of my emotions. Like, you know, I, I, I was crying probably at least twice today during our session. When I started this journey in, at 33, I'd cried twice in my adult life or both around the time when my father died, when I was 28 years old. Other than that, I had been completely shut down. And like throughout this journey I've become more and more and more comfortable crying <laugh> and like, and telling you the stories that I've told you today, you know, and it's interesting because that word vulnerability gets thrown out a lot right now.

Dr. Will Siu ([01:23:36](#)):

And, and it's not like that it's a bad one, but I think we wanna even be more even nuanced when what we talk about vulnerability, because to me, so say, someone might say that that story I shared with you was me being vulnerable or when I've been giving talks, I've shared that story before. And I remember at certain points when people were saying will thank you for being vulnerable. They would either say one of two things. They would usually come up after and say, thank you for being vulnerable. Or they would say, thank you for being strong. And I remembered at certain points in my me that resonated with me, except at some point it stopped resonating. I'm like, if I look at the word vulnerable, I was like, what does that mean? That means if I'm being something or if I'm saying something, I feel like I'm putting myself at risk of something, meaning that at some point ended for me, when I finally processed through this own you through through different stories, it didn't feel vulnerable anymore.

Dr. Will Siu ([01:24:30](#)):

I'm like, what am I being vulnerable to? If I shared this on a podcast or a talk and someone doesn't give me a job, thank you. That's that's, you're doing me a favor. That's not something that that's not the type of people I wanna be around. And that's why I also the, the, the thank you for being strong, stopped resonating as well. Cause I'm like, I'm not being strong. I'm just telling who I am, you know, and this is my experience. And so ultimately I want it to be, you know, move people towards, this is just authenticity. This isn't weakness, this isn't vulnerable. This is just us being who we are coming out of shutdown. <Laugh>

Warwick Schiller ([01:25:00](#)):

Yeah. I do think the vulnerability though is a huge huge part of it though, like initially. Yeah. It's very vulnerable to share those things. Initially. I think that's part, I think part of the healing is the, the being vulnerable. That's the, that's the scary part. And after, like you said, after a while, the same story is not vulnerable anymore. It's just like exactly. That's

Dr. Will Siu ([01:25:21](#)):

That's yeah. So that's, I think you're, you're probably getting to know a little bit about how my mind works. I like to, you know, words and how we say them, all that, that my, my brain works that way. So yeah. I mean, at some points it is vulnerable and we need to encourage people to be vulnerable ultimately. Yeah. Seeing that this is all just human, we all have these different versions of stories of again, how we shut down and how we weren't supported and how we come out of it. And so,

Warwick Schiller ([01:25:44](#)):

Yeah. Yeah. And I think, I think the thing about being vulnerable is you always think that you're gonna be judged and what you always get back is, oh yeah, me too. Yeah. Or, you know, thank you for sharing that, you know,

Dr. Will Siu ([01:25:56](#)):

Often, but not always sometimes, because this is one of the things that like in the map study, we it's interesting, right? The maps M DMA for Ts D study it, the, the study itself lasts about four, four and a half months, meaning there's 16 weeks of weekly therapy. And three times during that experience sorry, during those weeks you have an MDMA session. What was very interesting is that there's a certain number of people at no longer had PTSD after that four and a half months, fascinatingly after one year

follow up. So 12 months after the study was completed, the percentage of people that got better was even higher. And so what maps started looking at is they were realizing, ah, so it's not just the therapy itself. What they started seeing was that people then after the therapy started reconstructing their lives. And this is crucial because then they, some people are saying, ah, this set of friends or this romantic partner no longer fits me anymore.

Dr. Will Siu ([01:26:58](#)):

They were supporting this old shutdown version of myself. And I have to change those things in my life or that job no longer fits me. So the reason I bring this up is because in my journey I've realized like I was doing that too, meaning I was having these experience and, and, you know, sometimes women, I was dating at the time I would open up and they would support the shutdown. You know, they would give me signals or they would tell me that I was being weak or that there was something wrong with me. And then I would shut down again. And this is the nuance I wanna add of why these aren't silver bullets, because we need to be aware that we're li we're, we're sort of trying to heal in a society that is shut down. So it's not gonna be that every single time our, our vulnerability is accepted and held. Some people may reinforce that because for them it's too scary or they're shut down themselves. And they don't know how to, how to support us, you know? And that's, that's one of the benefits of having, you know, someone highly trained is that they in theory have, have, have become, you know, hopefully clear they have a stronger ability to, to, to get out of their own way to support that person in whatever way they need. Does that make sense?

Warwick Schiller ([01:28:12](#)):

Oh yeah. Most certainly. Yeah, definitely think that's, that's the case. I'm a big fan of Brene brown and she talks a lot about vulnerability, but she also talks about, you've gotta make sure that you do it in the right place. Yeah. Cause doing it the wrong place, backfires on you.

Dr. Will Siu ([01:28:25](#)):

Exactly. So that that's, that's the thing. And you, and that, you know, that that's where the, this longer term, you know, oh, it's gonna take 20 or 30 years for society to really incorporate the lessons that psychedelics are giving us, I think is accurate because that's where it's like, we have to get actually people to behave and, and shift the way that they are on a day to day basis.

Warwick Schiller ([01:28:43](#)):

But don't you think society is, is hitting a certain way. Like, like these days, like there's a lot. I mean, I don't my son's 25 now, but reading all this stuff now like, oh, we did it all wrong, you know raising him. But I think I did it better than the generation before, you know, we, we are coming to realize what is important to kids and it's not what we thought was important to kids. You know, like, like the, so many people have had a, a childhood to where nothing went wrong, but there was no attunement. There was no, you know, their emotions weren't encouraged or listened to. And so they become kind of shut down from that, but it's not like there's any big, you know, on, on the what do you call that childhood adverse,

Dr. Will Siu ([01:29:34](#)):

Adverse childhood study, a, a scores,

Warwick Schiller ([01:29:36](#)):

A, a score, you know, nothing really shows up on the, a score, but the, except for that, that lack of attunement to where there was, you know, there was no emotions weren't really allowed, suggested, or encouraged. And so, you know, they, I, I think people are starting to understand a lot of the, what am I trying to say? People are starting to understand that a lot of the little things that, that happen have, have the biggest, the biggest impacts.

Dr. Will Siu ([01:30:10](#)):

I think that there are some people that are certainly doing that. And it's interesting because I'm noting my own. I wouldn't call it. I'd say it's, it's my, I don't know. I would call it a realism to me because there certainly appears to be in a certain population of people. And I will say that this is probably my population of people, but I meaning I, I tend to spend more time with people who are on these journeys. But if we look at the world, you know, often things we see are balanced, meaning like what's happened in, we see more extremes in politics, meaning, or, or, you know, what's happening in Ukraine is, is, are we having other people who doubling down and shutting down even more because they remain so afraid of these other things and the reason, and the person who's actually helped me the most with actually remaining vigilant, I would say, and sincere about my journey and the people I work with is actually Rick Dublin.

Dr. Will Siu ([01:31:04](#)):

I, I tell him, and, and it's he, I told him this last time I saw him. I'm like, and don't think it's actually, I actually think it's true. I was like, Rick is the least optimistic person that I know about MDMA becoming a medicine. Everyone else is waiving a victory flag. They're like, oh my God, this is there. And he's like, no, we've gotta do this phase. And of phase two has to happen. And the FDA has to do this and that because what I, a little bit of what I feel concern in with sometimes with people like, oh my God, look, look, what we're doing is that there can be a little bit of, of lack of then attentiveness or, or people are like, oh, someone else is taking care of it. So for me, it's important to remain. And this isn't isn't meaning like, you gotta like, think about this all day every day, but it's this continual over time saying, how can I shut down even less?

Dr. Will Siu ([01:31:46](#)):

How can I be there for more people even more? And seeing that, ultimately what we see in society is I think is the accumulation of all the little things that are happening in every household around the world, you know? And so it's, it's the taking ownership each of us of as a, as much that we can do to contribute to this, this change in humanity. I think that's actually going to make an effect, you know, instead, you know, meaning like, I'm, I'm not all completely up for the, you know, I think one of the stories that we're sold and that we're we're programmed with is that, oh, there's a happy ending, right? Like the Disney's like, oh yeah, it's all gonna be okay. But I think some people use those types of stories. Like, oh, it's all gonna be okay in the end or, you know, from my religious background, I remember I used that story. Like my mom used to say, you know, in Spanish, her version of, oh, the last shall be the first right. Which was within Christianity. Oh, like we suffer now, but we're gonna be the ones that go to heaven, you know? And I used to re like say, oh, okay. So I, I can say it's okay that I'm in pain because I'll get that later where I realize sometimes that can be used as an escape to not act here in the present moment.

Warwick Schiller ([01:32:53](#)):

Yeah. Totally get your point on that. Okay. So I'm gonna ask you these questions you chose, but I'm gonna add one of mine in, at the start. So you were on the, you were on the, on the go lab.

Dr. Will Siu ([01:33:04](#)):

Yeah. So the goop lab, what you're referring to, it's a show on Netflix. Is that your, so do you want me to just start talking about it or

Warwick Schiller ([01:33:10](#)):

No, I was just gonna ask you a question. <Laugh> is Gwenth, Paltro as cool as she seems like, she seems like just the most down to earth, coolest person.

Dr. Will Siu ([01:33:22](#)):

I've gotten to, I know Gweneth over the last, how long have I known her now in 20 19, 20 21. So about, I've known her for about three years now. She is, I, I just love, she's a gr wonderful person to be around. She's kind of like life of the party energy. She's like a very funny person. And I'm not someone who was into TV or movies. So I've actually, you know, going onto the place where I first met her, I had never actually seen a movie she was in. And, but actually Rick Dolan, as I was prepping for this meeting was like, oh, you should watch this movie called the anniversary party. And I'm like, that's not a movie I've ever heard of with Gweneth. And it was about a movie that actually, she goes into a party and actually serves MDMA, so a, to a group of people in the mid nineties. So meaning I, I share that because like, I've just gotten to like, appreciate her just as a person. I didn't have this background of knowing like any of the movies that she was in. So I've, I've gained a lot of respect for her. And she's, she's also like a, she's a trailblazer, you know, she really, she really pushes topics and things that are really and I, I, I've just grown to have a lot, a lot of respect for

Warwick Schiller ([01:34:27](#)):

Her. Yeah. I'm, I'm not even sure. I know I could name a movie she's been in. It's not like I'm a Paltro fan or anything, but just watching her on that show. It's like, she is, yeah. There's something about it. She seems like she's just a cool human being.

Dr. Will Siu ([01:34:42](#)):

Yeah. I like her a lot and she gets a heat from a lot of people I think. And I think it's unfair at times, but yeah, she's a, she's a cool, cool gal.

Warwick Schiller ([01:34:50](#)):

<Laugh> okay. That was my question. But I'm gonna, I'm gonna hit you with your questions now and I'm fascinated with what your answers to these are gonna be. So if you could spread a message across the world, one that people would listen to, what would that message say? Or your favorite quote, whichever you'd like to do there.

Dr. Will Siu ([01:35:07](#)):

So I'm gonna go with the first one on there, and it's something I've been thinking a lot about because you know, the message for me, for people is that doing your inner work on yourself is the best thing that you can it's, it's the it's it's it's you should, if, if people prioritize just that, I think the world will change. And I think that that's, that's the kind of thing that I, I like to share with people because there's a lot of this, like external and this desire to change, Jen, let's do this and let's donate here and let's like vote this person in. And I think that, that, you know, all those external things are repercussions of what we see at

the individual level. So to me, like if I, if there's something I can make a dent in my lifetime, it is that it is very, very worthwhile for you and your family to yeah. Do that internal work on yourself.

Warwick Schiller ([01:36:01](#)):

Well, you know, that's what I was kind of getting at a few minutes ago, talking about

Warwick Schiller ([01:36:08](#)):

You know, how things are changing. I think if people do the inner work on themselves and then they, they figure out what happened to them in childhood, even though they weren't big things, but they were things that made a huge difference and you can change your child, you know, change the way you parent your child. That's what changes the world. But it all starts with that inner work you're right there. But you know what I mean? Because when you unravel that stuff, not only do you, you find out that, you know, little things that happened to you might have been stuck in you forever and you didn't realize it, but you also start to probably realize that the, you, you thought you were is not, you that's, that's exactly. That is, that is you with all this other shit stacked on top of there. And when you take that off exactly. You might be a completely different human being than you

Dr. Will Siu ([01:36:54](#)):

Exactly

Warwick Schiller ([01:36:55](#)):

Thought you were. Yeah,

Dr. Will Siu ([01:36:56](#)):

Exactly. Which relates to my favorite quote. So I was planning on answering both, even though you didn't. I totally say it let's hear. So actually it was a quote I found very, very early on in my journey by judo Christian Murti and the quote says it is no measure of health to be well adjusted to a profoundly sick society. And it was a quote that changed my life because it was started this process of me trusting myself. And so again, and I, I, I tell it's the only thing I tell people to be greedy, go ahead and be so greedy with your healing and the healing of your family, like, like there, and, and if you do nothing else in this world, if you give to nobody else, it's okay. Cuz I think that will happen as a, as a result.

Warwick Schiller ([01:37:38](#)):

That's a great quote. Can you say that again? <Laugh>

Dr. Will Siu ([01:37:42](#)):

It is no measure of health to be well adjusted to a profoundly sick society.

Warwick Schiller ([01:37:48](#)):

Ah, that's the stuff right there. Isn't it?

Dr. Will Siu ([01:37:52](#)):

<Laugh>

Warwick Schiller ([01:37:53](#)):

Yes. Wow. Okay. Next question is what is the most worthwhile thing? You put your time into something that you have done that has changed the course of your life,

Dr. Will Siu ([01:38:03](#)):

And this is gonna be exactly related investing in myself. I mean, I, I was literally in tears this morning on the, you know, on my way to my writing lessons this morning, because of just looking back at my journey, like, Hey, I don't regret any of it. I would not take any of it back. Not, not the beatings, not the gang threats, nothing, because like, to me, it's like, you know, all these things that I used to want to get rid of, or if I have that or if my look, my life looked like this, I would be happy. Like even now, even though I'm still in shutdown, you know, I think I'm, you know, probably 80% out of my shutdown, but not a hundred percent. But when I started this, I was probably like 98%, 99% shutdown. Like my life looks so much cooler now than I ever could have dreamt of.

Dr. Will Siu ([01:38:50](#)):

And I was trying this morning from just the joy of that. You know, when I, when I think back, like I like have these optics on myself, I'm like, I was this kid who are par you know, the son of immigrants from Nicaragua, mom didn't even graduate high school. Like I went through all this shit. I was shut down. And I remember thinking this the day I was filming that Netflix show with Gweneth. I'm like, look at all this stuff I've been through. I'm just like, like, I feel like I'm, you know, some people have like, I've thought about like writing a book one day, but I'm like, I wanna prioritize like living my book. Like my, my, my life is so cool. And what I mean by like, there's so much awe in my life, there's so much wonder. And I don't tell people that doesn't mean I'm happy. Like, like all in wonder to me is just like how magical this life is. And that is embracing the pain is embracing the joy. It is all of it. And so, yeah. And, and so that biggest investment came from me from just being like, I need to yeah. Just see what is best for me and express myself at its most authentic.

Warwick Schiller ([01:39:57](#)):

That's very, very cool. Well <laugh> okay. So I'm riding

Dr. Will Siu ([01:40:00](#)):

Horses, which I feel like a lot of your that's like all this stuff. I we're

Warwick Schiller ([01:40:04](#)):

Gonna get to that here in a second. So what do you feel? So this question is what do you feel is the worst advice given in your profession or bad recommendations given by people in your area of expertise? And first you've gotta clarify what your profession is, whether it yes. Where's the psychiatrist or to, to do the psychedelic. So you gotta kind of clarify yeah. Who you

Dr. Will Siu ([01:40:27](#)):

Are. Yeah. So I'll start with my more obvious profession from the outside, which is, I am a Western trained psychiatrist, not talking about the psychedelics. And I think the, the, one of the biggest problems is psychiatry has perpetuated the problem to begin with. Meaning it has tried to shut us down even further. And I'm not saying this was intentional, it was not conscious, but it has con you know, at one

point I realized psychiatry and psychology were born within the system that was already shut down. So it, it didn't know any better and how to get us out of it. What was your quote, so many quotes about

Warwick Schiller ([01:41:07](#)):

What was your quote from indigo? The quote, I made you repeat them in.

Dr. Will Siu ([01:41:10](#)):

Yeah. Yeah. It's no matter of health to be well adjusted to the profoundly sick society. Yeah. So that's the thing is like that's the messaging, I think that's most problematic. And I think that it continues that that is not shifted. Psychedelics are starting to be interested. You know, major institutions are starting psychedelic healing centers, but I can tell you from just being so involved in the do not get it right now, they're still trying to study it at the level of the brain. Oh, what does it do to the Amy amygdala? And what's the MRI show. We're still not getting it in terms of academic psychiatrists. And so this is why I'm actually a proponent of also psychedelics becoming available and decriminalized, because I do not think a we can on the system to change fast enough for actually using these, to being the singular entity that promotes, you know, healing.

Dr. Will Siu ([01:42:04](#)):

Because again, we we've, we've screwed it up already. And I think that's why I'm a proponent of both medicalizing and training people and also allowing people to use it within their own communities. And I think that, that, you know, again, as, as we heal and we become more authentic and less and, and more sorry, and more vulnerable people can do this work within themselves. Right. You know, so I'm, I'm big at like training and educating people to, to how to heal themselves. And cause I think that ultimately we are the gauge of, of what feels good for us and our families.

Warwick Schiller ([01:42:41](#)):

Perfect. Okay. What is one common myth about your professional field that you wanna debunk?

Dr. Will Siu ([01:42:49](#)):

<Laugh> so I'm gonna then answer that twofold. So again, for Western traditional psychiatry yeah, I'd like to, to, to be, to add, to debunking this myth that, you know, again, that the problem lies within us that, that we, that, that there's problems with emotion, that, that, that they are bad things to get rid of that we don't wanna see. I think it's really important to, to start normalizing yeah, just feelings and, and that all, all of us go through painful things in life. And the, the debunking I would reemphasize about the psychedelic therapy movement is that they are silver bullets. That that is not, I think that's an unhealthy part of what's happening right now because of the business aspect that's going into psychedelic healing. So I wanna balance that with saying, yeah, these, these are not silver bullets and it's going to take a lot of time to, for society to learn how to use them.

Warwick Schiller ([01:43:42](#)):

Perfect. here's the one here's the, I love this question. You <laugh>, no one has no one I've given the questions to has fail to choose this question. You had 20 questions. <Laugh>, everybody's chosen this question, which kind of tells you who I'm dealing with. What is your relationship like with fear?

Dr. Will Siu ([01:44:02](#)):

Hmm I've I've learned to love my fear. Like, like to me, like an analogy, actually, it's interesting. We got this spar and we haven't talked about it. Like, what I started realizing is that these bodies of ours are basically like our vehicles for life. You know what I mean? And, and say, say if you know, our calling our life purpose, you know, is, you know, if we use the car analogy, you know, maybe it's from me driving from Los Angeles to New York. That is the trajectory that my life is supposed to be on, but like shut down. Basically, I, you know, I enter the coordinates into the GPS and then I turn off the sound of the GPS and I turn off the screen. So basically the things that are telling me wrong turn or go this way, get back on track. I've shut down.

Dr. Will Siu ([01:44:47](#)):

So the emotions I started realizing are there's nothing there's no good or bad emotions. It's, they're basically just signals from our bodies saying, are we doing something that we really want to be doing in life? You know, are we interacting with the people that we are wanting to interact with? Am I living the life that I want to live? Right. And, and so to me, it's like, I've started realizing that emotions are basically just this beautiful tool of saying I'm doing something that I is aligned with the deepest parts of me, or it's not. So I've started, you know, it doesn't mean that sometimes I don't feel sadness or fear and like, oh my God, this again. But, but it's like, I have this building trust of, ah, okay. If I look at this, if I, if I really see why this is coming up and I shift it, I've now grown more and more us that like, ah, I feel even more freedom for myself. So I, I see it as a beautiful, beautiful tool.

Warwick Schiller ([01:45:39](#)):

Great answer. So what do you feel your true purpose is in the world?

Dr. Will Siu ([01:45:44](#)):

To me, it's to, you know, again, I, I love, I, you know, I've, I've learned to love the equine work and, you know, the things I've learned from it, I think it's to, you know, continue to <affirmative> and it, this used to actually be hard. I would've said it in a different order. I mean, my priority number one is to take myself out of shutdown for, for me. And so, so my again, experience of life and for those around me is as, as, as beautiful as it can be. And second I would say is helping as many people also go through that, that same process and to free themselves.

Warwick Schiller ([01:46:17](#)):

You just mentioned the horses again. So tell us a bit about your, your horse journey. <Laugh> how did you, how did you, no, it's just, how'd you start with the horses and, and what do you, what do you find that you are experiencing when you're around the horses?

Dr. Will Siu ([01:46:32](#)):

<Laugh> well, that we could probably talk for another hour hour about, but to keep it short. So yeah, my friend, Christine, who connected us we met through a, we, we were both sharing a mutual client and then, so we once just got on the phone and, and at the end of the call, she's like, oh, and I have horses and I live in this part of, in LA, if you ever wanna come, come by. And this is an example of me, how I was still in shutdown mode. I was curious, but the only time I had been near a horse by entire adult life was in Costa Rica. And it was, I was at this like national park and I went to go touch its butt. Cause I was like, oh my God, like let this beautiful creature. And it like turned and that something in me was like, it's going to kick me.

Dr. Will Siu ([01:47:13](#)):

And I started leaning back and it bucked and it missed me by about two inches. But so meaning I was terrified of horses, but something kept me curious about them. So then, you know, I mean, that was probably 15 years ago. And so then, yeah, Christine was like, this thing sat in the back of line, like, like this person just like invited you to come check out these horses. So yeah, I called her back like a month later. I'm like, Hey, by the way, this is will, again, you, you made that comment. <Laugh> and she was like, sure, come by. And that like started this really wonderful friendship. And so yeah, first it was just getting used to being around a horse. I was, I remember like, it's odd to think that was like seven, eight months ago. I was, it took, took me a while to just be thinking, they're not gonna step on me that they're not gonna kick me and all these things.

Dr. Will Siu ([01:47:55](#)):

And then eventually, yeah, I started taking writing lessons and it has taught me so much about being in my body in particular, my lower body it's taught me so much about like, I would say what, you know, what I would describe as the masculine and feminine, healthy versions of it. I, and how I can move power. And that like using my power isn't necessarily hurting anything. Like meaning, like I I've now like worked and, and, you know, chased the horses around either like riding or not. And I'm like, wow, I can move. And there's all this energy, but it's not necessarily bad. Oh, I'm, I'm like, and that I might even be helping them feel safe for, or by containing them. And, and like this pressure and release, it's teaching me so much that like in, in that's coming out in terms of my friendships and my dating life.

Dr. Will Siu ([01:48:40](#)):

And it's like, whoa, like this thing that I used to be so afraid of, because I used to inflict so much pain on other people, you know? So, so if most of my life before Thur, if you would've met anyone or meet one who knew me before 34, they would've been like, Will's an asshole. He's competitive. He's always angry. I have like no friends from that, you know, from two decades of my life. And so when I started feeling in power, again, I started feeling scared of using it, cuz I had associated with, I can hurt other people with it. And so, or I can be hurt with it. So that's where the horse work gone. So many levels has been so beautiful to see that power does not equal hurting and, and it can be used in a healthy way and it can be used in a helpful way even.

Dr. Will Siu ([01:49:21](#)):

And then, you know, the stuff that I won't get more into, but I've talked a little bit about is how much it's helped me understand my physical nervous system shut down and coming back from it. I remember one day my, my horse trainer was like, at the end of the session, I started crying cuz like, or at the beginning, cuz she had, she had talked about, she was she's working with these horses or were working with these horses that she had sort of taken on about six months ago that were very shut down. They weren't used by the family. That was who, who they were. And she's like, yeah, well she's like, yeah, something happened just before you came. Dylan is one of the name of her. She's like, yeah. He started being curious and he started like, you know, like, you know, playing, playing with me and playing with the other horse point.

Dr. Will Siu ([01:49:59](#)):

She's like, yeah. And she's like, that's what shut down is called. And I started crying at the end of that day cuz I had it just hit me so hard. I'm like, that's me. Like I still, at times, especially in terms of social life and dating feel scared I'm I don't explore my curiosity because I'm still shut down. So it's been so

much, so much learning at so many different levels about horse work and the last thing I'll say it's interesting because like, you know, the other, you know, I've listened to a few of your podcasts and both Christine, my trainer, Belinda, like they both like, I'm like, wait, isn't this the way everybody thinks about horses. Like, like who wouldn't be thinking about the masculine and feminine empower and they're like, no, no, no, no, no. This is not your average introduction to horse work. So it's just been fun learning about the different nuances and yeah, I've, I've just really yeah. Of appreciated how it came into my life. But also again, like, like listening to a few of your podcasts has been so, so helpful in my journey.

Warwick Schiller ([01:50:55](#)):

You know, it's funny, you said a minute ago about, about how your experience with being powerful in the past, it was hurting people. So you're kind of afraid of your own power. And that's a thing about horses is you have to, you know, that, that emotional resilience retreat thing I went to, I was telling you about, there was a guy there whose wife has horses and he said, Hey I've got a question for you. And he heard trained horses. He said, I've got a question for you. He says, my wife says that your horses are a mirror of you is a reflection of you. Does that mean if you horses an asshole, then you're an asshole <laugh> and I said, no, it's, it's not that I said, it's almost the shadow side reflection. Like if you are too quick to anger, they'll be a scared horse.

Warwick Schiller ([01:51:42](#)):

They won't be an angry horse. They'll be a scared horse. They'll be the, the, the polar opposite. If, if you were too timid, then they'll be a bit pushy and, and you have to be able to, I, I said, what you've really gotta do is you have to be able to access all the parts of you to get along well with the horse. Because at times they need you to be firmer at times they need to be more patient there's times that they, you, you need to be able to explore all the parts of you in order to get along with them. Well, and, and if you can't explore certain parts of you, that's when your horse really becomes a reflection of you, because there'll be, be some part of their behavior that doesn't work well. And it's not because they don't work well. It's because we can't provide 'em with what they need.

Warwick Schiller ([01:52:26](#)):

You know, when, when they need it. And it's funny, this whole journey of mind, this healing journey of mine started because I, my wife bought a horse about seven years ago, who was a very, very high functioning shutdown horse. And I wanted to change some small things about him. And I couldn't, I couldn't train that him more, more asking didn't result in more response. It was actually more shut down. And so he was the, you know, I didn't even know at the time that I was shut down, I thought I was just a normal human being, you know? And so it's so funny that he led me to that. And then I <affirmative>. Yeah, it's just been, it's been, it's been quite the journey. The more I, the more I get into it, the more it's like, oh, these horses are like this, this Supreme being that knows everything and they're just waiting for us to figure it out.

Dr. Will Siu ([01:53:20](#)):

Yeah, no, it's like, got it. You people didn't see. Oh, but I just, it brought me to tears was like, I'm so grateful for, for my horse work. It's just been so magical. And and as you were talking, you know, as we were talking about men and vulnerability and this and that, it's like, you know, and you know, that word toxic masculinity has been in our culture for the last few years. It's like, I'm, I'm really learning and embodying what healthy masculinity is and how how important, not only how beautiful that is for men and to really embody a healthy masculinity, but how important that is for culture right now. You know, I

think, I think it's, it's the, you know, if we think of the same things, it's like so many people are scared. There's so they're, they're looking outside and I think to, to have more and more healthy masculine, whether it's embodied in the body of a male, a female, I think is what, you know, what we really need right now. And hopefully that more of that happens in the coming years.

Warwick Schiller ([01:54:13](#)):

You know, it's funny, we talked about little bit brown before, but in one of her books, she talks about how she only used to help women and girls. And then one day she had this epiphany, she said, hang on. If we are doing for men and boys, we're doing nothing for women and girls.

Dr. Will Siu ([01:54:32](#)):

Mm-Hmm

Warwick Schiller ([01:54:32](#)):

<Affirmative> because yeah. You know, that's, that's a half of every relationship and, and, and that's a half of the parenting relationship and yeah, it's, it was, yeah. That, that I thought

Dr. Will Siu ([01:54:42](#)):

That we've gotta take care of the whole herd <laugh>.

Warwick Schiller ([01:54:44](#)):

Yeah. And, and I feel that way with the horses, like I'm, I I'm on about mental health quite a bit, and about doing the inner work, because I feel cuz for many years I helped a lot of people with their horses and I can only help people so far. I can help some people a long way, but some people I can only help 'em so far, some people I really couldn't help much at all and I couldn't figure out why now I know it's, it's split, it's going on in them that needs to change. So then they could help their horse. So for me, it's like if I kind of changed bene saying around to, if we're doing nothing for humans, mental health, we're doing nothing for horses, mental health, really, you know, so I think the riders a huge part of it and that's, you know, I mean, that's why I'm on, on this podcast. You're talking to you about the healing power psychedelics because you know, I, I think not only is everybody healing gonna be better for the whole world, but it's gonna be better for the horses.

Dr. Will Siu ([01:55:40](#)):

Yeah. Let me ask you this work and this something I've been curious about cause think is, cause I'm so excited and I, I think I'm only horses are only gonna be play a bigger part in my, my life. Is that how the percentage of people who work with horses, let's just say in the United States, like if they were listening to this podcast or a different, you know, if we took all people with, with that do horse work and we to listen to one of your podcast, like how many people in terms of the way you work with horses would be like, that's a complete CRO. Like that's not the way you do it.

Warwick Schiller ([01:56:13](#)):

Depend which podcast they listen to <laugh> because, okay. But

Dr. Will Siu ([01:56:16](#)):

One don't we, so you're a pick of like, this is the way you should work with horses. Like, like this is the like

Warwick Schiller ([01:56:21](#)):

Well, I wouldn't, I probably wouldn't suggest they listen of that podcast because it's too far removed from where they're at. Probably the first podcast I did, which was called changes the very first podcast, it was called changes. And I talked about the way I used to do things. And the other way I look at things now and I found there's a lot of, so if, if someone looked at what I do now, what I, the most people they'd probably think, oh, that's a CRO because they're almost not ready for that. But I, I think, I think the thing that's, you know, my journey's, you know, I'm, I'm, I'm here for a divine purpose, I think. And the thing for me is, you know, I had a big, you know, I had probably 23 million views on my YouTube channel or something, maybe 20 something before I started looking at things differently. So I was quite mainstream and it worked.

Dr. Will Siu ([01:57:15](#)):

Ah,

Warwick Schiller ([01:57:16](#)):

Okay. So I got this following of people like, yeah, I like this guy. I look what this guy does and it works. And, and so then when I start getting a bit into the woo woo, they're like, well, we can try a little bit. And then as I go further,

Dr. Will Siu ([01:57:28](#)):

I kind of took the journey along with

Warwick Schiller ([01:57:29](#)):

Yeah. There's been a lot of that. And there's also been the total opposite. If you think about process versus intuition, I've always had lots of process, no intuition, cuz I wasn't listening to my body. I've had people tell me that, oh, we've, we've been waiting for you to catch up. And I'm like, well, what are you following me for? If you're waiting for me to catch up. I mean, you're already there. She goes, they go, no we have intuition, but we don't have process. We need, we need pro we needed your process. But, but we added our, our intuition and our empathy and, and just a certain way of looking at things. And so it's, it's funny though, we, these days I have people that I would not even think would be interested in what I'm doing. Like the type of horse, people that are not interested in, what I'm doing that I think would not be interested who are kind of all over it.

Warwick Schiller ([01:58:18](#)):

It's almost like once you can, once you see it, you can't unsee it. That's, that's the thing with it. Once you start looking bit differently. Agree. I agree with you. Can't go. And so, so this is not to judge anybody where they are on the way they view the world spectrum. But I don't think it's a two way street. I think when you start to see the world differently and, and are more connected and realize we're all connected, we're not separate. There's no going back from that. It's a, it's, it's only, it's only a one way street. And so, but that's, it's, it's, it's kind of hard to say that because then you almost saying, well, the, the people who are over there, they don't get it yet. Like as opposed to, you know there's no

judgment of where people are at, but I do think once you start to see things a certain way, you're not gonna go back to the way you saw it before.

Warwick Schiller ([01:59:10](#)):

It's kind of like, it's like growing up, you know, the way you see things when you're 20 different than when you see things at 10 and you're not going back to the 10 year old way. And when you're 30, you look at things 20 differently when you're 20 and you're not gonna go to the, you just, you just keep evolving. But I do yeah. I love your question because yeah, I am a bit, I am a bit outside the mainstream, but I think the, the mainstream's starting to go that way. Like, like I've been quite public about this sort of stuff for quite a long time and you, you you know, you get the naysayers or whatever, you know, I've just done this thing where I have just gone off social media. Mm-Hmm <affirmative> been on social media for like all day, every day for 10 years now, answering people's questions and, and trying to help people sort of thing.

Warwick Schiller ([01:59:59](#)):

But I've realized it just takes a toll on my mental health bit, both sides of it, because most of the, most of the comments I get are very, very positive. You're awesome. And then some of them are the total opposite and I think neither of them are healthy for me. So what I've just started doing, it's been a week now is I'm, I'm not, I'm contributing to social media, I'm still creating content. Just don't read the comments. I don't interact after the comments. And I think I'm, I'm actually trying to do a, it's very healthy. I'm trying to do a like a, a dopamine fast sort of thing. So it's basically no screens for a month, but I, I, you know, I, I don't see me coming back after that either. I think I'm probably gonna stay put there, but yeah. But anyway, to answer your question, I'd say a lot of people would, would think that's a, it's a CRO.

Dr. Will Siu ([02:00:53](#)):

Fascinating. No, it's just like, I guess again, because this is so new and exciting to me, I guess it's not unlike, you know, I think still like 97 plus percent of psychia just to throw a number out there would, would probably be, you know, think the way I'm talking about mental, if it was a CROX. So it seems like it's almost like, you know, it's it's same thing. Yeah. It just look a little different in your industry, but, but it's I like the way that you said, but, but you seem confident in this, like it's shifting towards this direction. So I think perhaps I'll allow some more optimism and for, for me too

Warwick Schiller ([02:01:22](#)):

Well, the thing is that there's, there's being people out there who who have been looking at horses the way I'm now looking at 'em for years. And so they're way ahead of me, way, way ahead of me. But they're so far removed from the mainstream that people look at 'em and go that's, they're a complete whack job. You know, I think my actual purpose here has been to be, has to be mainstream, get a following and then start to slowly, you know, head off in that direction. But it's, it's too big of a jump from

Dr. Will Siu ([02:01:54](#)):

Yeah.

Warwick Schiller ([02:01:55](#)):

You know, it's too big of a jump from, from be like, say my per okay. Like the town I grew up in a small town country town in Australia, there was no mental health services there, there was, there was no psychiatrist or psychologist in town. And that was actually for people on TV. I didn't, I'd never heard of anybody that went to one sort of thing. So it'd be like, if my parents were to go, oh, you know what? I think we should try psychedelics to help our healing journey. <Laugh> you know what I mean? It's that far removed, like someone who's never been, never had never been to a therapist, just jumping right in. So the horse thing it's, it's kind of similar to where, you know, it's, it's, it'd be a big leap.

Dr. Will Siu ([02:02:39](#)):

Okay. You seem to have a lot more, more patience around it. Which yeah, I'm trying to build into myself that this is honoring that this is just gonna take time for society. So, oh.

Warwick Schiller ([02:02:50](#)):

Like, but, but you can look at how far you got to go or you can look how far you come and like, think, just think about now, like, like where on a podcast here, people are gonna listen to when we're openly talking about this stuff, you know, there's a lot of, you know, there's a long way to go, but it's at least a conversation these days.

Dr. Will Siu ([02:03:11](#)):

Yeah.

Warwick Schiller ([02:03:12](#)):

You know what I mean? So, and, and, and like that go lab episode, you know, you've been on that and just things like that. I mean, that was, there was very, very cool watching that.

Dr. Will Siu ([02:03:22](#)):

No, no, you, you you're just reminding me that I've had numerous, numerous people tell me and people, I know that said, oh my aunt, my grandmother, who I never thought who was like a, you know, born again, Christian, blah, blah, blah, asked me for MDMA so I can try it with my partner. So yeah. It's actually, it's, it is similar sometimes I forget about that, but I like that, you know, you can talk, think about how far got or where, where, how far you've gotten. So yeah, that, that's, that's, it's great. Maybe you can be my therapist. Do you have any availabilities you're interested.

Warwick Schiller ([02:03:49](#)):

Yeah. <Laugh>, I'm open, I've got a day open next week.

Dr. Will Siu ([02:03:54](#)):

<Laugh>

Warwick Schiller ([02:03:56](#)):

So it's been such an honor and a pleasure to chat to you. Will, is there any, got any last parting words for the peoples?

Dr. Will Siu ([02:04:03](#)):

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No. No. It's just really like, it's just, yeah, no, I just really wanna say thank you to you. And yeah. I hope any, like, yeah. If this is helpful for anyone and, and they're interested. Yeah. Just, just, yeah. Keep pursuing it and be curious and yeah. Be curious and be cautious. I think it it's fair. To, to take a look at these tools for, for you and your loved ones.

Warwick Schiller ([02:04:26](#)):

<Laugh> I think that's, that's a great way to end it right there. Be curious, but be cautious <laugh>

Dr. Will Siu ([02:04:31](#)):

<Laugh>. Yeah.

Warwick Schiller ([02:04:33](#)):

Awesome. Well, thanks so much for joining me. It's been such a pleasure to chat with you. You guys at home, thanks so much for joining us and we'll catch you on the next episode of the journey on podcast.

Speaker 3 ([02:04:45](#)):

Thanks for listening to the Journey On Podcast with Warwick Schiller. Warwick has over 650 full-length training videos on his online video library at [videos.warwickschiller.com](https://videos.warwickschiller.com) Be sure to follow Warwick on YouTube, Facebook, and Instagram, to see his latest training advice and insights.