

(TC: 00:00:00)

Dr Hazel Wallace: Hey team, and welcome back to another episode of The Food Medic podcast. I'm your host, as always, Dr Hazel. I hope you're doing well, and enjoying this season of the podcast, your feedback has been amazing and all of your reviews and ratings have really helped to boost the podcast in the charts, so I'm super grateful for that. This week, we are discussing science and spirituality, and the law of attraction. Now, prior to having any guest on the podcast I always put out my feelers online and explore your ideas and questions regarding the topic that I will be discussing. So, with regard to the law of attraction and manifestation, the majority of you were just really interested to hear more, but it also raised some questions and important points. Some people said it's just pseudoscience and we shouldn't buy into it, others felt it was a toxic idea and that people don't ask for trauma or illness in their lives, and others felt it's only applicable to those of privilege. So, I took all of that onboard and I brought it into the conversation, because as a medical doctor and a scientist myself I am evidence based first and foremost, but as quite a spiritual person I'm also very inquisitive and I like to think relatively open-minded when it comes to these things. I don't want to shy away from these conversant and I also do think we can harness some of the principles to help us achieve the goals that we want to achieve in life. So, I'm inviting you into this podcast, into this space, and asking you to have an open mind and just listen, you know. Just listen, you might find this podcast is not useful for you, you might find it changes your life, you never know.

So, our guest today is Dr Tara Swart, Tara is a neuroscientist, former medical doctor specialised in psychiatry, author of the best-seller 'The Source' and Faculty at MIT Sloan. Tara is also executive coach to a small number of clients in hedge funds and investment banks. Trustee at the Lady Garden Foundation for gynaecological cancers, and an ambassador for brands in health, beauty, fashion and manifestation. So, sit back, enjoy, and I can't wait to hear your feedback.

[AD break]

So, Tara, thank you for joining me today, and like I mentioned prior to us recording, I heard you on my friend's podcast Adrienne, and I, first of all, love her podcast, the Power Hour. I hadn't heard of your book before, but I really resonated with so many things that you were saying. There were a lot of things that I felt like we had in common in that, like, your background is medicine as well as mine, but obviously, you're a very spiritual person, as am I. Sometimes I think people assume that that can't go together, as in you're either one way or another, you're either scientific or you're spiritual, and they can't be combined or they can't live in tandem together. So, I was thinking to myself, listening to the podcast, I really want to get Tara on and discuss this, and that's why we're here today.

(TC: 00:04:57)

Dr Tara Swart: Yes, I want to say to you, thank you so much for sharing that, because I think I felt very much the same until I was writing my book. When I was writing it I really felt the integration of both those sides of my life for myself, and I wasn't worried about what people would think because my personality is to

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take risk and go with my gut. I was really overwhelmed by the positive response of bringing those things together and actually, how much the science did mean to spiritual people and how validated the spiritual side felt by, you know, somebody from a medical and scientific background speaking about their own personal experience. Later, on a podcast actually, someone did say to me, 'Didn't you think you were taking a risk? You've got a position at MIT, you know, you tell people that you're a medical doctor and a scientist and suddenly to start writing about these things, did you think that it might affect your credibility?' That honestly hadn't crossed my mind, but of course it, you know, possibly was a risk but I have to say that the response was very different. I had even thought, you know, maybe if you've shared a similar journey to me, like you, if you've been a medical doctor or like a lot of people who've been divorced or people who come from a different cultural heritage that I could understand it resonating with those sorts of people.

Honestly, I can't tell you just how much it means to me when I see, like, somebody who's nothing like me, who's got nothing in common with me, basically, kind of, saying they couldn't put the book down for a whole weekend, or whatever. So, I feel like, I don't know if I would even describe myself as a very spiritual person, I just think we all want to have a happy life, we all want to find meaning in our life. We're all on a journey, and if that means you're spiritual then yes, so I'm those things. I think at points that you either need proof, and then at other times you're willing to try something, maybe, that you never would, and both of those things are part of the human journey.

(TC: 00:06:57)

Dr Hazel Wallace: Yes, I completely agree with you, and I agree with the label of, you know, spirituality can also be, maybe seem like an absolute label and maybe some people feel like they exist on a spectrum or that they don't assign to any form of label in that way. I think more and more, we're realising that obviously, when it comes to science and as medics it's evidence based and that's, kind of, the process that we go through but when it comes to wanting a good life it's very different. I guess I don't know where I'm going with this, but what I'm saying-

(TC: 00:07:41)

Dr Tara Swart: Well, I think I can help you out a bit, because I'm, like, itching to challenge you already. So, I think my challenge might help you to, kind of, complete the question, which is that of course, as medics everything that we learn is based on, you know, evidence, but as you get more experienced you definitely use your intuition in terms of judgements about patients, which is obviously based on that evidence but then it's also based on your experience. Actually, I felt this from the start but I had to be sure about it, because I would never, you know, put someone's life at risk but I am sure that medicine is an art, not a science. I think science and medicine are different, and I think medicine is more like that, what you were going to say, about the personal life journey, where maybe you listen to your gut, maybe you have to think outside of the box. I can absolutely tell you without any hesitation that in my time as a clinician I had to use my gut and I had to think out of the box. I had to look at, you know, interpersonal things rather than just facts, and if I hadn't done those things I wouldn't have been as good a doctor as I was.

(TC: 00:08:47)

Dr Hazel Wallace: Yes, I agree, and I think, you know, more and more we're understanding that the mind-body connection is a very real thing, and our thoughts and our feelings can really manifest in our body's physically, as well. That is being recognised more and more in, kind of, conventional

mainstream medicine, but yes, I guess before we go any further I'd love to talk a little bit more about your background. You are a medically trained doctor, you specialised in psychiatry and you're a neuroscientist, and now you're doing a lot of coaching and speaking, and obviously you're an author. So, how did you get here? Tell me your story.

(TC: 00:09:27)

Dr Tara Swart: So, I was the first child of a first generation immigrant Indian parents to the UK, and it's such a cliché but I think, like, from the age of two I was basically told that I was going to be a doctor. Luckily, I was good at maths and science, and looking back, you know, I was good at languages, I was good at history and geography, I was good at English. So, I perhaps could have had more choice and perhaps hopefully, as generations go on and, you know, we become parents, we understand that mandating what you think your child should do isn't probably (TC 00:10:00) as good as letting them become the person that they need to be to fulfil their purpose. Anyway, I loved medical school, and as soon as we could start choosing special topics I was interested in the neuro-topics of everything. Then I did that extra year, the BSc, mostly in neuroanatomy and neurophysiology, and then I did a PhD in neuropharmacology, all this time thinking that I would become a neurologist. When I returned to medical school to do the clinical years, I just found the psychiatry element so fascinating, how your mind can play tricks on you, you can hear voices that aren't really there, how your mood can change so much because of chemicals and pathways in the brain. It as more personable in that you really spoke to people, you weren't dealing with brain tumours or brain abscesses, or things like that. So, I did my year of medicine and surgery that I had to do, and then I decided to specialise in psychiatry and always, you know, kept holistic care of my patients. So, I think more than some psychiatrists like to do, I would do the full, you know, if I was referring to a medic or a surgeon I would do the full examination and not just, kind of, pass it on.

Unfortunately, I, you know, eventually got to the point where I didn't feel like my career would change sufficiently in the next 40 years that it would keep me intellectually stimulated. I also began to see this revolving door of patients, and it was very much working-, psychiatry tends to be working at the lowest end of the socioeconomic scale, where people were often excluded by their family, had their children taken away from them, couldn't maintain relationships, couldn't hold down a job, and I thought I must be able to have more impact than working one-to-one with people like this. So, for about two years, because it's very hard to leave medicine, as you know, I started thinking about what else I could possibly do, and coaching came up as something with transferable skills and appealed to me in terms of being very results focussed, but also having a very Zen element to it, and obviously, psychological skills. Once I established myself, which was around the time of the global financial crisis, so as a former psychiatrist and with lots of people, you know, feeling very, very stressed, that was a really fortunate time for me to make such a big career transition. I did a lot of work with financial services and I really felt that I was helping people with really good brains to be even better and, you know, have a cascade effect on their teams and their organisations, and through corporate social responsibility on society. So, it, kind of, fulfilled all the things that I needed for myself and were, sort of, what I felt was my purpose. Then, actually, a few years after that, neuroscience became quite a buzz topic in business and leadership, so the speaking opportunities came up, it wasn't something that I was intending to do but having done a PhD I'd done so much conference speaking that I didn't have any fear of it, so that was quite lucky, as well.

Writing was probably the part, after having done a PhD that, you know, I'll go as far as to use this word, and not disrespecting people who have actually suffered trauma. I had some, sort of, post traumatic response to writing after having completed my PhD, which was the hardest thing I've ever done in my life and the only thing in my life where I said I actually want to give up and don't want to finish this. I did finish, but, sort of, under duress and after, like, a very, very long time, the longest you could stretch it for. So I, sort of, fell into writing my first two books with co-authors that I really liked, but every time I finished I said I'm never going to write again, and then this is the thing about The Source, kind of, it made me write it, you know, I wasn't looking to write another book. I had just become the world's first ever neuroscientist in residence at a five-star hotel and that got a lot of press, so then Penguin approached me. They said we've got a series in our health section where we've got books on-, you know, a book on sleep, a book on exercise, a book on mindfulness, and we think that you could write one as a neuroscientist, that brings all of those together. So, I said I could do that, but I have this other idea about visualisation and vision boards, and they just absolutely loved that idea, so that's how The Source came about.

(TC: 00:14:23)

Dr Hazel Wallace: Wow. Did you find, like, when you were writing The Source that it was, well, not-, I'm using the word 'easy' loosely, but it came to you very naturally?

(TC: 00:14:32)

Dr Tara Swart: Yes, I know what you're getting at. So, basically, the first summer, before I started writing properly, I looked up the laws of attraction to see how easily I could explain them with cognitive science rather than quantum science. There's not really agreement over what twelve exactly they are but, kind of, from the research that I did, sort of, ten out of twelve I could explain absolutely with cognitive science straight away, even without having to do that much research because I had the papers in my mind because of the sort of work that I was doing on neuroplasticity for my executives. Then the couple that, you know, aren't really evidence based as you and I would like them to be, I, sort of, basically said if people don't want to do this, because I can't find a scientific explanation for it then it's fine not to do them, but if you, kind of, think, well, if ten out of twelve makes sense then maybe I should just give the other two a chance, they're not going to harm me. As you know, you know, with medicine it always comes down to do no harm, so if believing in a universal connection doesn't have scientific proof but it's not going to harm you then you could choose to do that, I think. Yes, and then, no, it still wasn't easy, Hazel, but-,

(TC: 00:15:43)

Dr Hazel Wallace: Of course, of course, but I meant compared to you writing your PhD, did you feel like this was your calling, this was almost, like, what you were supposed to write about and it, kind of, came full circle.

(TC: 00:15:54)

Dr Tara Swart: Definitely.

(TC: 00:15:56)

Dr Hazel Wallace: That's, of course, writing a book is never an easy feat, I know this first-hand as well, but it is a great book. (AD break 16.04-16.34). So, you touched on the law of attraction, and I guess that's, kind of, a huge basis of your book, The Source, things like manifestation, and you mentioned vision boards and things like that. I did mention online that we were going to be discussing

this on the podcast and there is so much interest in this, you know, people wanting to know more about it. How can I do it? How can I incorporate it into my life? There are also a lot of people who are calling for evidence, 'Where is the proof?' Some other people who've felt like this isn't a helpful concept in that if we flip it on its head, if the law of attraction is attracting good things into your life, ultimately it could be attracting bad things into your life. People were saying, you know, no-one asks for trauma or illness in their lives and it just happens, and so, I know I just said a lot of things there but I'd love to pick that apart with you.

(TC: 00:17:31)

Dr Tara Swart: I mean, you said a lot of things but they're definitely things I've heard before. So, I think that I can agree with you about the level of interest in it, you know, because the way that I've put it in The Source is, at the end of the day, it's your brain that is the organ that you use to make the best of your life, your health, your wealth, your relationships, your career. So, in terms of the neuroplasticity, which is the ability of the brain to grow and change that underlies things like the laws of attraction, then believing that you can take agency over your life rather than, sort of, live on autopilot and feel like a bit of a victim of life, I think is something that people like to hear from the science. Then the evidence, so the way that I split it up, because, you know, in the new-age thinking there wasn't complete agreement about what the twelve principles were. I don't even call them laws, because I feel like that's too strong a word to use. I split them into, sort of, six themes, the first one is abundant thinking, or an abundant mindset. The evidence there is because from a primal survival mechanism, one of the strongest gearings of our brain is to avoid loss more than to seek a reward. You can completely understand how that keeps us safe and, you know, even the last fifteen months or so, we've had to focus on staying safe, keeping out of danger and giving up things we would want, to keep ourselves alive. So, apart from in something like a global pandemic, that can really hold you back from achieving your full potential. So, you know, rewiring your brain to think more about opportunity and go to grasp opportunities and take healthy risk is usually a very good thing to do.

Secondly, I wrote about manifestation, and the brain processes that are behind that are selective attention, selective filtering and value-tagging. So, because we're bombarded with so much information through all of our five senses but also, you know, other senses that as medics we're aware of, like temperature sense, pain sense, joint position sense, and interoception, which is the sense of the physiological state of the inside of your body. So, you're constantly dealing with all this data, and your brain naturally has to filter out some of that data, it can't possibly attend to all of it. I mean, we would read in a week's worth of newspapers in the modern day what somebody in Shakespeare's time, the amount of data they would experience in their entire lifetime, (TC 00:20:00) you know, and it was bad enough then, but it's much worse now. So, this is the reason that you are not aware of your clothing on your body all day, because your brain filters that out. So, your brain has this natural filtering mechanism, and then what is filtered in it pays attention to, and then what it pays attention to it tags in order of importance. There's a logical tagging system, which is literally to do with your survival, and then there's a more emotional tagging system, which is to do with your sense of belonging, your sense of identity, your sense of purpose. So, if you are more mindful about telling your brain what you want to be filtered in, what you want to pay attention to and what you want to be, you know, seen as important, then you're so much more likely to notice and grasp opportunities that are likely to take you closer to your goals and your dreams. So, you know, that's the, sort of, difference between letting life happen to you and you taking a bit more agency of it.

Then I go into magnetic desire, which is a very, very strong motivation and a really, you know, core aligned emotional reason that you want the things that you want. So, it can't be, you know, 'I'd love a big house because that's what everyone wants,' or, 'I just want to be rich,' or, 'I want to get married and have a family because now all my friends are doing it.' It has to be things that really come from your core purpose. Then the last three are about harmony, patience and universal connection, and I'll just pick up mostly on patience because the other two had a bit less evidence to them. Patience is about neuroplasticity, so when you decide I'm going to be more confident, I'm going to change career, I'm going to, you know, find somebody that's actually worthy of me now. That doesn't happen overnight, you don't wake up one morning and go from being low self-esteem to high self-esteem or single to married, or in a job you hate to running a business that you love. So, as you start to change psychologically, and we'll go through the process, it takes time, just like it would to build a brick wall or build a road, for you to actually, like, embed this new neural pathway in your brain that's your new way of thinking and being. It feels like you're trying so hard and working so hard for a long time and not getting any results, and then it's like there's a tipping point where this pathway has become stronger than your old way of thinking, which maybe was, 'That will never happen for me.' I've seen a few people leave medicine and it's great, but I could never do it, you know, that was a thought that I'd had, so it takes time to get to that point. Once you start thinking, 'If I put my mind to it I can make this work,' then a lot of things, you know, fall into place and change.

Then finally, to the really pertinent point about if the laws of attraction mean that if you think positively or think about good things that you want then you attract those into your life, and if you, like, ever have a down day or worry about your health that you might be attracting negativity or illness into your life. I'm not really sure if this started around the time that The Secret came out, but I know that The Secret was criticised for that kind of concept, but I also don't know if it's just that some people, kind of, worked out for themselves that if the laws of attraction mean that you can bring good things into your life by thinking good thoughts that the opposite must also be true. I don't ascribe to that way of thinking, and the reason is that I don't even call vision boards vision boards. I call them action boards because about all the good things that we want, I always say you can't make this fantasy collage of what you want in your life and then sit at home and wait for it to come true, that's never going to happen. You've got to do something every day to move yourself closer to that goal, you've got to go networking, you've got to go dating, you know, your dream man isn't going to turn up in your life just because you've put a picture of a couple on your vision board. Equally, let's say you've got a family history of some disease and you do spend quite a lot of time worrying that it's going to happen to you, that is not going to make you get a disease. However, as we know with, you know, whether it's genetics, whether it's lifestyle, that there are risk factors, there are physical actions that you can take that make it more likely that you're going to get a certain disease.

So, whether that's smoking, being sedentary, eating badly, or drinking too much, those things can actually lead to, you know, risk factors for cardiac disease and other diseases. So, it's both a case of not giving too much importance to just what you think about, but also trying as much as you can to take the actions in life that are likely to move you closer to the things you want and away from, you know, any familial tendencies that you might have for a certain type of disease.

(TC: 00:24:47)

Dr Hazel Wallace: Yes, and I think what you mentioned earlier, the whole tagging of thoughts that you're focussed on really drives you in the direction of a particular goal. I see that as my process of

when I'm trying to focus on manifesting things, it's more so really dialling in on what I want. I do really resonate with what you said in that it has to be aligned with your values and your personal, what you want, not just, kind of, a random, 'I want a Ferrari,' or whatever it might be.

(TC: 00:25:22)

Dr Tara Swart: Yes.

(TC: 00:25:22)

Dr Hazel Wallace: I think that, kind of, the whole concept of manifestation for some people can seem a little bit, 'Woo,' maybe a little bit awkward when they're first trying it out, I know I felt like it was a little bit forced. Even, you know, little things, like wanting to make some changes in my life and things like that, is it normal to feel like that? How can people best get started?

(TC: 00:25:46)

Dr Tara Swart: Yes, I think, like, with anything, and I always use the analogy of learning a language. So, even though I haven't thought this through I'm going to use it now to see if I can make sense of it. So, let's say you grew up speaking English, you learnt French at school, and now you either want to go and work abroad or you've got a partner that's from a different culture and you want to learn a new language, sort of, in your mid-twenties or mid-thirties. You might think it's going to be really hard, it's going to be much harder than it would have been when I was younger. I don't know if I can do it, I don't have time, you know, we make all these sorts of excuses, but if you got the Duolingo app and you were as self-motivated as you possibly could be, you would at least pick up a few words and be able to go on holiday to that country. If you got a teacher and you had a lesson every week, you had homework and you had an exam at the end of six months, you'd probably be as close to fluent as you're going to get in adulthood, for a language. So, manifestation is like that, it's, of course you do have to believe in it, I mean, I think we all need to see to believe, whether it's factual evidence or just stories of people who've done these things, there is an element of that. Then the process that I use, which is the process of neuroplasticity is raised awareness, so, you know, real clarity about what you want and why, and that it's right for you. Focussed attention, which is looking out for opportunities in your life to make that thing happen, and if that's not happening then noticing why it's not happening for you. Is it because you're not putting yourself out there? Is it because it's a bad time to be looking at that thing?

Then deliberate practice, which is the actual action, you know, the networking, the dating, depending on what you're trying to achieve, and then accountability. That's very similar to the language thing, because with the best will in the world, none of us push ourselves as hard at the gym as if we've got a personal trainer, it's, kind of, like that. So, it can be a friend or, you know, some sort of proper, like, coach or therapist, or you can use a form of technology to hold yourself accountable, but there does have to be-, and that's why I really love vision boards. I, sort of, usually do them annually, and it's just a great way of very tangibly seeing at the end of a year, how many of the things that I put on this board did I achieve? I've really learnt about the patience piece because sometimes some things, you know, they trickle into the next year and you've got to be okay with that, as well.

(TC: 00:28:17)

Dr Hazel Wallace: Yes, and so, kind of, just on a practical level, when you're talking about action boards or visualisation, are you making a physical board?

(TC: 00:28:27)

Dr Tara Swart: Yes, so, the best practice from the start, if people haven't tried this before is to make a physical board, because the fact that you use your hands, that it's, you know, in colour, you can move things around and also just that when you look through magazines that you don't just go with your logical instinct for, 'Okay, I know that I want this thing so I'll find an image of that.' You also go with images that you're drawn to or more metaphorical images, and so you start to bring in your emotions and your intuition as well, which I think is really important. I've been doing it for thirteen years now, and there have been years where I've used Pinterest instead of done an actual board, or both. This year, you know, after the year that we've had in 2020 where it was very hard to see how you could really exert much influence over achieving the things that you wanted to, I have made a tangible board again, because I feel a bit like we're, sort of, starting again, really having to go from nothing to manifesting the things that you really want despite the difficult situation.

(TC: 00:29:30)

Dr Hazel Wallace: Yes, I agree. I do love the idea of using Pinterest because I use it for so many things, whenever I'm mapping out projects and there are just so many images that you can tap into, as well. I also am a very hands-y person and like to get out, like, a bit A3 page and just scribble away. You mentioned, kind of, abundance mentality, is this, kind of, similar to the growth mindset?

(TC: 00:29:55)

Dr Tara Swart: Yes, very similar, actually. So, obviously, the growth mindset research comes from Professor (TC 00:30:00) Carol Dweck at Stanford, so very evidence based, you know, she did research on a lot of children and later, adults. I guess I've adapted it a bit more in two ways, one is that-, because I know Carol, that when the research first came out it was very much you're either growth or you're fixed, and because my research is in neuroplasticity, you know, I had to hold onto that strong belief that you could change along that spectrum, which Carol then did the research to show was correct. Also, her research doesn't talk about things like positive affirmations and mantras but my work does, because I've merged the wisdom traditions with the science, so just a slightly different take on absolutely that research.

(TC: 00:30:43)

Dr Hazel Wallace: Yes, and so, if someone wanted to harness that abundant mentality, is it through processes of action boards and manifestation?

(TC: 00:30:53)

Dr Tara Swart: No, so this is one of the things that I believe has to come before manifestation, because if you're not manifesting from your most abundant self, you're going to continue to play small in life. So, the first part of her work is really believing that you deserve the things that you really want, because that's often a big issue. We haven't really covered that yet, but deserving is a big issue that underlies why people don't achieve things like, you know, New Year's resolutions or lists that they write out or, you know, vision board or visualisation that they do. So, basically, there's an ancient Buddhist, sort of, philosophy that says, 'Replace every negative thought with a positive thought,' and the way that neuroplasticity works, again, if we use the language metaphor, is that you can't unlearn a language that you've learnt, but you can make the pathway for a different language stronger than the previous one. So, you know, I was brought bilingual in an Indian language and English, but since I was eighteen, or maybe even before, I don't really use the Indian language

which I used at home a lot, and I use English all the time. So, now, even though I was equally good at both of them in my childhood, definitely my English is much better than my Bengali now. So, like that, you have to cultivate a mindset of positivity. It's natural for us because of that survival gearing, to dwell on what went wrong, and that's great for learning from but if you don't also dwell on what went right, and we don't, at all. We spend way more time thinking about what went wrong than what went right, then your whole view of the world starts to become, 'Things go wrong, things don't work out, I shouldn't take risks, the world isn't a safe place.'

So, it's really important, and you know when I said at the beginning, I don't know if I would call myself a very spiritual person, I want to be a very spiritual person but I feel like every time you get to one next level of that you realise that you've got so much further to go than you ever thought. So, you know, something I've been working on during the lockdowns is cultivating positivity and happiness, and noticing when good things happen much more, and it's really shocking to me how much we don't do that.

(TC: 00:33:05)

Dr Hazel Wallace: Yes, no, it's so true. I guess that, kind of, is one way that we can reframe failure, which is another thing that you talk about in the book. I think when I reflect on my own life, and I'm only 30 years of age, so it's not, like, a very long life, but I feel like there have been a lot of obstacles and, I guess, failures, I'm using, in air-quotes, along the way. People love asking me on podcasts about this, you know, 'What was your biggest failure,' and blah, blah, blah, and I don't really see them as failures because I just think, like, it just nudged me onto this path that I'm currently on, that I know is right for me. I guess my question to you is, when people do feel like they're coming up against failures or have experienced big failures and are identifying themselves as a failure, how can we reframe that? (Commercial break 33.58-34.29).

(TC: 00:34:29)

Dr Tara Swart: I mean, one of the reasons I wrote the book was because I wanted to offer people tools to, sort of, readjust their life or take more control over their life before they faced some of the things that at the time I considered to be failures. So, you know, I considered my marriage of over a decade ending as a failure, but it was also the biggest push for me to make big changes in my life. I don't personally think this, but if you think back to the story that I told you about my parents wanting me to be a doctor, it doesn't matter how successful I become doing something else, in their eyes I haven't achieved the career that I should have. So, I don't feel that that's a failure, I feel that leaving medicine was absolutely the right thing for me, but I know that if I had that conversation with them, they would say, 'We wished that you'd stayed being a doctor for the rest of your life.' So, that's other people's perceptions as well as your own. I really think that usually it takes the passage of time to look back and think how well your life turned out, or as a result of what you consider to be a failure. Of course, that's not always the case for people, but I think the only way that you can always reframe something to not be a failure is through your personal development. So, the biggest thing that I learnt after I got divorced, when, you know, at points I was literally and metaphorically flat on the floor, was that I had the resources and the resilience, and the determination in me to pick myself up and make my life work. The great thing about that was that next time it might not be a divorce, it might be something completely different, but those innate resources, they apply to everything.

(TC: 00:36:15)

Dr Hazel Wallace: Yes, it's a process of growth, and I guess that's also neuroplasticity, is it in, you know, creating those new connections and rewiring your brain as you grow through life?

(TC: 00:36:27)

Dr Tara Swart: Absolutely, yes. I mean, for me those things are so parallel, you know, if I talk about personal development or becoming more spiritual, I can hardly distinguish between those two phrases and neuroplasticity. It's a bit, like, it's so funny because it's now, you know, because of this conversation I'm thinking about how when I was a teenager, my mum would speak to me in Bengali and I would answer in English, but in my brain I couldn't really tell the difference between those two languages because I understood them both perfectly. I could, you know, mix them up, I could answer in one, listen in another, and to me, neuroplasticity is as intertwined with changing your life, personal development, becoming more spiritual. That's probably just because of my, sort of, academic background, so I'm sure for other people, maybe for a linguist they'll say it's just like learning a language. Maybe for a coder they'll say it's just like, you know, an algorithm. So, I love that, I think, you know, everybody's got their own version of it.

(TC: 00:37:23)

Dr Hazel Wallace: Yes, 100%, and I think, you know, the concept of neuroplasticity is a term that's used quite a lot recently. People are becoming more au fait with what it means and those ways that you can, kind of, harness it and I think meditation and mindfulness often come up as ways we can change our brain, like, physically change our brain. I'd love to know more about this, kind of, what's happening on a physiological level when we do practice things like meditation or mindfulness meditation and being more present?

(TC: 00:38:00)

Dr Tara Swart: Lovely question. So, yes, mindfulness activities, which include meditation, yoga, mindful eating, mindful walking, basically, paying attention, are one very powerful way of changing your brain in a certain way, but any intense learning can change your brain. So, learning a language, learning a musical instrument, you know, the famous case of the London taxi drivers that do The Knowledge, for example, that changes cell volume in the part of the brain that's to do with navigation and memory, that makes complete sense, right. So, when you do meditation it does quite a few things, so just in the moment that you're doing a mindful activity, your brain is more likely to be in a gamma wave state, you know, maybe with some alpha waves, you do get alpha waves when you're asleep but you don't get gamma when you're asleep or completely, like, task focussed and switched on. There's an interesting research study that shows that women who do yoga three times a week have lower levels of the stress hormone, cortisol, than age-matched controls, who don't, so women of the same age that don't. So, that's another mindfulness activity that actually causes our entire normal range for the stress hormone cortisol to, you know, stay lower than it does for somebody who's experiencing the same life events as you. Then with two to three months of regular practice, and this is a minimum of twelve minutes most days of the week, preferably every day, and that's if you do formal practice, like, sit down with your eyes closed. So, the actual, the time that you've got your eyes closed and you're focussing on your breath or your thoughts, or, you know, a mantra or a sound, then we do actually see physical changes in the brain.

We see denser folding of the outer layer of the brain, the cortex, and because the cortex regulates the amygdala, which is in the limbic system, which is the emotional part of the brain, the limbic system, and the

amygdala is where the emotions originate from. (TC 00:40:00) Then you see the effect of that, kind of, having more of a pause button, so that if somebody shouts at you, you don't just respond without thinking about it. You're able to think, 'Okay, what would be the best way to deal with this person right now?' So, those are, sort of, the three main things, and then an amazing study in the US Marines done by Professor Amishi Jha, who's become a friend of mine and she's so incredible, showed that marines who did eight weeks of mindfulness meditation, twelve minutes a day, before being deployed into battle had increased resilience once they got into the battle zone, compared to the control group that didn't do any. What she also found later, which was just literally mind-blowing, is that in the group of people that were selected for daily meditation, of course, you know, like you've said, in your followers and my followers there's a variety of people, there were some sceptics. So, they either didn't do it at all or they did it but, you know, not most days of the week, and when they got to the battle zone they could see that their friends who did the meditation could sleep at night, that they weren't sweating with anxiety all day. So, they phoned up the neuroscientists and said, you know, I'm definitely seeing the difference between my friends who did it and the fact that we didn't, can we please have these meditation tools now?

(TC: 00:41:12)

Dr Hazel Wallace: Wow.

(TC: 00:41:14)

Dr Tara Swart: Yes, but the scientists said of course, we'll give them to you, but these guys trained for eight weeks and you're in the battle zone now. We're really sorry but we can't guarantee that it's actually going to help you. What they found was that in a very short period of time it improved insomnia, anxiety, sweating and stress levels, and I think that's such an important finding for the modern day, and particularly the global crisis that we're in at the moment. That even if you've never done meditation before, if you started today and you did just five or ten minutes and built yourself up to twelve minutes, and tried to do that most days of the week. I used to do mine on the London Underground when I was still, you know, regularly travelling in London, that actually reduces your stress levels, helps you sleep better, helps you regulate your emotions better. So, I think that's, like, such a gift, you know, and the other thing I found recently is-, I actually discovered this during the pandemic because I went for my annual blood tests and it was, sort of, I guess six or nine months after lockdown one. I said to my GP, I'm completely prepared for the fact that all those sorts of factors that are subject to the stress hormone level, like my cholesterol, they're probably going to be worse and I'm okay with that. She said don't give too much emphasis to the effects of stress, like, think about the good things that you do as well. So, the results came back and they were not only not worse than the year before but they were actually better for the first time in quite a few years.

So, I spoke to my ex-husband who is still a doctor and, you know, went through all the details of everything with him, and by the end of it, because, like, he knew what my cholesterol levels were like when we were still married to each other. He said, 'Are you doing a lot more mindfulness than you did before?' I said I'm actually not doing any formal meditation but I just live a mindful life, I always do mindful eating, you know, when I do a walk it's mindful, when I drink my cup of tea in the morning it's mindful. What I've learnt is that the way that you first do meditation is it's separate from your life, and then once you've done it enough or you find ways to incorporate it, they actually become the same thing. So, yes, you don't have to set aside the time to do it. I didn't do that because I knew that, I've actually learnt that recently but it makes a lot of sense to me.

(TC: 00:43:37)

Dr Hazel Wallace: Yes, no, it does make sense. I think meditation can sound like a very, like, elusive and, you know, a very difficult thing to do, but when you have done it in a structured manner for a period of time you do learn how to just incorporate it in different ways. I think I'm similar to you in that I used to have a very structured practice for maybe two or three years, and I found it really difficult during the pandemic to have a structured practice. I was also working in the hospital over here, so it was, kind of, sitting with my thoughts didn't feel like something I really wanted to do, but then instead I swapped it for going out for a walk every single day after work, and using that as my way of closing the stress cycle and just being mindful that way. It was so funny, because I was speaking to a friend recently and I said, you know, I've never really paid so much attention to the weather and the seasons than I have this year, like, I don't think I've constantly been aware of the seasonal changes in the UK because that's all we really had. That was, like, our entertainment was outdoors, which isn't a bad thing.

(TC: 00:44:53)

Dr Tara Swart: No.

(TC: 00:44:55)

Dr Hazel Wallace: You become more conscious and more aware of the little things that bring you joy in life, as opposed to constantly focusing on big milestones or big events, and things like that.

(TC: 00:45:06)

Dr Tara Swart: I love the way that that was so intuitive for you, I actually got goosebumps when you said, 'That was my way of closing the stress cycle,' because, you know, you've got the huge privilege of actually being able to listen to your body and understanding that you need to act on that. That's something I'm really passionate about more people, kind of, engaging with and connecting to. You also mentioned, completely just by chance, two things that are new pieces of research that came out during the year of this last fifteen months, where all the things that, you know, you and I usually talk about, like sleep, good diet and hydration, exercise and everything. As long as you've got those basics in place, two things that had a bigger impact on your mental health and your brain performance are connecting with nature on a daily basis, which you were clearly doing, and having a purpose that transcends yourself. So, I would say, you know, for someone like you that was still working at the hospital, of course it's your job, but you were literally putting your life in danger to protect other people. I hope that you, you know, feel that huge sense of the massive thing that you've done that so many people are grateful for, like, more people than you'll ever know, probably.

(TC: 00:46:15)

Dr Hazel Wallace: I really love this conversation, and I know that there are going to be so many people who love it too and will want to hear more from you. So, I guess, obviously, they've got access to your book, 'The Source', which I'm sure is available online and all good book sellers. Where else could they hear more about you and the work that you do?

(TC: 00:46:00)

Dr Tara Swart: Well, I do love doing podcasts, because I feel like that's a really great way of reaching a lot of people, so I have done a lot of podcasts. There's a podcasts page on my website, taraswart.com, or, you know, if you look on Apple or Spotify, just put my name in then there's a lot there. I'm the most personally interactive on Instagram, drtaraswart, yes, and maybe just one more thing to say about the book, just maybe to end with a little, kind of, inspiration about vision boards and visualisation. I hadn't had any foreign translations of my previous books, and I didn't really know, like, what was a good number or anything like that, but obviously, I was with Penguin and it was, kind of, all, they're an absolute class act and so they have an international rights division. I knew who the head was and I knew who the people were for different regions and stuff, and I'm pretty sure I was the biggest pest that they had to put up with that year.

(TC: 00:47:35)

Dr Hazel Wallace: I'm sure you weren't.

(TC: 00:47:37)

Dr Tara Swart: This is the action part of a vision board, you know, I was, like-, because basically, these translations started coming in, so every so often I'd get an email saying, like, 'The Source, the Korean offer, The Source, the Russian offer, The Source, the Spanish offer.' It was exciting, so I was, like, I read down an email chain and someone, the PR lady had said to someone, 'She's already got fifteen translations, isn't that incredible? She hasn't even finished writing the book yet.' By the time the book came out I had 24 translations, and, you know, yes, I mean, I've got 36 now.

(TC: 00:48:09)

Dr Hazel Wallace: That is incredible.

(TC: 00:48:10)

Dr Tara Swart: Thank you. I think I'm still not, like, really aware of how, you know, what to compare it to, but the head of international rights at Penguin had a Source branded vision board on her door, that had names of countries on it that would get ticked off every time that her team had secured another offer. People from all over the building were coming to, like, marvel at this thing. Recently I was on an Instagram Live with a very dear friend from LA, and I was saying that when I was teaching at MIT, we were talking about languages and the technology that's going to help us to understand, you know, different people whose languages we don't speak. I said I wish I could speak every language and I could, like, communicate with everyone that I come across in the world and understand them as well, and they understand me. My friend suddenly said, 'Well, your book's out in 36 languages isn't it, so you have essentially spoken to people in 36 language territories.' I didn't quite, like, burst into tears at the time, but I was, sort of, that thing that I've always wanted about connecting with people in really random places, I guess I had achieved that, in a way, by having this book translated in so many languages. I had never thought about it until it was just a few months ago that she said that, but I did, you know, want to add in the point that I was regularly phoning up this rights team saying, 'What have you done about America? What have you done about this? Is there any progress?' I think just to, like, stop me phoning they probably did more stuff just to be able to say, 'Yes, yes, we've done it.' So, you know, don't hold back from asking for the things that you want, I think-,

(TC: 00:49:46)

Dr Hazel Wallace: I think deserve, as well.

(TC: 00:49:48)

Dr Tara Swart: Yes, exactly, and believe that you deserve it.

(TC: 00:49:52)

Dr Hazel Wallace: Yes, and playing big. No, I love that, after this I'm going away, I'm doing my vision board, especially after this (TC 00:50:00) conversation.

(TC: 00:50:00)

Dr Tara Swart: Good, I'm so happy, I've absolutely loved speaking to you. I love what you do.

(TC: 00:50:06)

Dr Hazel Wallace: Thank you.

(TC: 00:50:08)

Dr Tara Swart: Yes, let's keep in touch.

(TC: 00:50:11)

Dr Hazel Wallace: Okay team, that was Tara. I hope you enjoyed the episode, it was slightly different to the topics that we normally talk about, but I hope you have come away from this podcast feeling inspired, and yes, I definitely have. It made me feel really validated, it was quite therapeutic for me. I think at the time of recording this I was going through a difficult time, and so just having this conversation helped me walk away from certain things that I knew weren't helping me, and bring my attention towards the things that I really want to work towards. So, I think that is really my take-away from this podcast, it's not about giving everything up to the universe and hoping that it'll all work out, I think Tara makes some really important points that really highlight that we can't just sit back and visualise our best selves, it's about taking action and really focussing on what we want from life. So, yes, I really, really enjoyed this podcast and I went away and made my own action board, so if you also loved this episode, make sure to give it a review, a rating, hopefully five stars, and do share it with someone who you think will enjoy it. I would love to hear your feedback, so you can catch me on Instagram as normal, Twitter, Facebook, wherever you go online, and my handle is The Food Medic. We'll see you again next week for another episode of The Food Medic podcast.