Scot McKay (00:01.038)
All right. How's it going gentlemen. Welcome to yet another episode of the big show, The Mountain Top Podcast. As always, I am your host, Scot McKay You can find me on X on Truth Social on TikTok and on YouTube at Scot McKay. And the big news is you can also find me on Substack now at Scot McKay. Lots of good stuff there for you. Articles you won't find anywhere else. Just kind of prepare yourself because I let the fur fly there. The stuff that I don't believe the masses can handle on my newsletter list. Well,

I talk about it there. So you, you'll know if you belong and if you can handle the truth, you'll love it. That's at Scot McKay on Substack. I'm also still on Instagram at real Scot McKay and also on Threads. Although not, although I never use it at real Scot McKay and the website is mountaintoppodcast.com. And if you're not on The Mountain Top Summit on Facebook, you should be, we're having a great time talking about all sorts of things related to masculinity.

and getting better with women on Facebook. So join us there. My guest today is a first time guest. He hails from Worcester, MA and he is a licensed psychologist. He is the author of a new book called Backyard Politics a psychological understanding of today's political and social divide. And since this is not particularly a show about politics, although I'm going to give you every opportunity to get a copy of Craig's wonderful book.

We're going to talk about something completely different today. We're going to talk about how many of us as men either have been diagnosed with something that's better explained by something social or the opposite where, you know, really we've got something going on and people have told us, well, just buck up and get through it or something. And it's my belief that we as men are kind of susceptible.

to being told those sorts of things and basically going through our life as if it might be possible that it's true or that it's definitely true. Whereas my first time guest, Dr. Craig T, Dr. Craig B Wiener, excuse me, from Worcester, MA would have a different take on it. So Craig, welcome to the show, man. Glad to have you.

Dr. Craig B. Wiener (02:13.703)
Thanks for having me.

Scot McKay (02:15.34)
Yeah. first of all, I know you were teased for your name when you were a kid, but actually, all your name really means kind of like the Frankfurter is that you're, you're, you're, someone in your family lineage was probably from Vienna, Austria. Yeah. Right. we were talking a little bit about, about this particular topic before we clicked record. And I Googled you to find out more about your practice and what you were about as is my practice with all my guests.

Dr. Craig B. Wiener (02:30.551)
That's exactly it. Vena. Vena. Right. Yeah.

Scot McKay (02:45.6)
And there's a rather prominent OB/GYN in New Jersey named Craig B. Weiner. And you

were saying that, you know, someone in your family is actually a urologist, which is probably an even better fit.

Dr. Craig B. Wiener (02:56.215)
Yeah, the real Dr. Weiner.

Scot McKay (02:58.124)
Yeah, yeah, the Wiener doctor, Dr. Wiener. That's kind of like the Burgermeister Meisterburger from the Christmas show, right? Yeah. But anyway, enough about that. We got that out of the way. Talk to us about your passion for this particular topic. I know it it all started with ADHD and maybe it does end there too, but tell us about how you got particularly involved with this topic and how it relates to these guys.

Dr. Craig B. Wiener (03:09.367)
Yeah.

Dr. Craig B. Wiener (03:28.437)
Yeah, so I did publish three books on ADHD, a parenting book to help parents and two academic books. And when I first started out with psychology, I noticed how many boys were getting labeled in this way. so it was concerning to me because I saw the behaviors as situational, as things that these kids would do under certain circumstances.

and it wasn't something that they were doing persistently like color blindness or some other bodily deficiency that could be a consistent delay. was something that usually correlated a lot with trying to get the kid to do something that somebody else was trying to get the kid to do and or an assigned activity and that the activities that the youngster

initiated and enjoyed and had a history of doing it successfully, those behaviors never occurred. So what they made it into a...

a diagnosis of performance rather than... it's like the kid knows what to do that's right but they don't do it but it seemed to me that you could say that about so many different things. Does an alcoholic know that drinking is bad or smoking cigarettes is bad or eating too much food is going to make you fat or... everybody, everything's a diagnosis of performance.

in that sense so the question for me was how do you account for when they're doing it and when they're not doing it? are the situational variables? And well they turn the thing into this neurological delay and so that people are left with a sense that there's something inside of them that prevents them from

Dr. Craig B. Wiener (05:19.573)
living in the world as everyone else would but for me I don't really know what that means. They just had this new study, you know,

They looked at a new study, reviewed all types of possible biomarkers for ADHD, including those from genetics, brain volume and connectivity, levels of various

brain chemicals, among others. The researchers found that there are no biological differences that can be used to differentiate people with ADHD diagnosis from those without it. Clearly, if you keep doing the behaviors associated with ADHD,

you can have all kinds of life problems with health and accidents and lack of achievements but it doesn't mean that it's being caused by some other thing like some delay in your body. For people to know what this is all about, when they made this diagnosis they

they said there's people behaving in similar ways. Let's see if we can list the different ways they behave and we'll take the ones that go together the most and we'll call those symptoms and we'll call this diagnosis ADHD. So it became, if you do those behaviors, we call you ADHD, but then as soon as they have a name for it, then they say you have ADHD. So how did it shift to a have versus a do?

Scot McKay (06:33.038)
You

Dr. Craig B. Wiener (06:49.633)
See, that's the foot. Okay.

Scot McKay (06:49.848)
Well, there's a lot, there's a lot to talk about there. First of all, it seems like a lot of the alleged diagnoses in the ever changing DSM.

You know, which is what the APA uses is kind of their Bible for the guys listening. Diagnostic and Statistical Manual is what it stands for, which is all, you know, brainiac speak for, okay, here's the kind of stuff we diagnose people with. Here's the latest roster of mental illnesses potentially. And it always changes because we learn more about the mind and, you know, I'm sure you're purporting here that society has a lot to do with it.

Dr. Craig B. Wiener (07:08.545)
Yes.

Scot McKay (07:27.99)
It seems like, yes, there are a lot of them where you'll list like 12 symptoms. And if you're exhibiting any five of them, maybe you're diagnosed, but then they'll come back and say, well, we got to be very careful about diagnosing somebody as a narcissist or a schizophrenic or bipolar one or two, because that takes years to figure out. Yeah. It seems like teachers and parents in particular will slap these diagnoses of like ADHD or narcissism...you know, the "N word"? It's another one that people just

glibly throw around whenever they feel like they want to just hammer somebody with it often for expediency and That's kind of what you're noticing too here, right?

Dr. Craig B. Wiener (08:09.303)
With ADHD, yeah, if the person's struggling to be confined in a situation, they're uncomfortable, then they're squirming. If they don't want to wait their turn, then

they're unable to control themselves versus there's lots of reasons why people don't want to wait their turn. Or if they're overreacting to something, you could account for it. Are they reinforced to overreact

for particular situations? Do they overreact if a kid's complaining and screaming and then their girlfriend walks in the room and they don't want to look weak? Why did they stop so quickly then? You mean they couldn't stop themselves before? So if a policeman comes into the room and they're doing something wrong, they don't continue doing the wrong, they freeze. So these are behaviors that happen if the...

Scot McKay (08:56.631)
Right.

Dr. Craig B. Wiener (09:01.003)
parent says no and they're screaming and they get the candy if they scream loud enough then they learn to scream when they're in a situation where candy is available. None of this is saying it's not caused by parents because some kids are more difficult to socialize than other kids. If they're active, some kids are more persistent in wanting their way versus other kids that are more timid. If a kid has health problems or learning problems or language delays or motor issues, there's a lot of accommodations a parent learns to do

and the kid learns to get reliant on having the expectations conform to them rather than having to meet the expectations. One of the dangers about ADHD diagnosis is everybody starts to adjust

the standards to the kid, which is you get longer time, don't have to be punctual, you don't have to meet time requirements. And all this keeps the kid from learning to adjust to what's expected. One of the problems with the diagnosis is that you start to believe you're unable to do things rather than

in what ways might these particular actions and these situations continue to be reinforced. But again, no one's causing it. It's the interaction of the kid with the surroundings and what the surroundings are doing, what the kid does in the actions of the surroundings. So it's a very subtle problem, but you're not going to get it in a doctor's office with a checklist because no one's really looking at the subtleties of development. How did this kid come to the world? What were the early things? Was the kid not eating early?

Were they premature? Did the parent worry about whether they're eating or not eating or they couldn't do something they didn't know what to expect so they learn to do extra things to accommodate and then the kid learns those reliant and reliant behavior then they say well the kid doesn't self-manage well

Dr. Craig B. Wiener (10:53.279)
everybody's managing for them, reminding them all the time rather than helping the kid learn to brush their teeth without the reminder, rather than put up a chart for them all the time. How do you get the kid to separate from the dependency on other people managing for them? Those are the kinds of

Scot McKay (11:10.158)
Well, they've kind of been put in a box and they said, all right, well, I'll stay here. They told me I'm ADHD. ADHD is as ADHD does. So, you know, now I've got this license to ADHD my brain's out.

Dr. Craig B. Wiener (11:23.679)
Yeah, so if I'm late and I forget your birthday and I don't remember this, it's ADHD. But I don't forget that I have a meeting to do Dungeons and Dragons with my friends, or I don't forget all the rules of that game. I even look up on the manuals how to do the game. I would never look up anything for a homework assignment.

Scot McKay (11:46.094)
Yeah, but if I'm interested in doing it, I'll do it right.

Dr. Craig B. Wiener (11:48.353)
So then that's psychology. We're psychology in all these medicalization.

Scot McKay (11:55.01)
Right. So we're talking about the medicalization of the social here, which is not a new concept. It's been talked about at least since the late seventies. Authors like David Elkind wrote about, you know, kids being hurried as teenagers into adulthood. And then people saying, my goodness, well, they must be sick. They must be ill cause they're not acting like teenagers when they were impressed upon to act more like adults into

you know, make adolescence shorter than ever. And all of this is very complex as most things psychological are. It's extremely fascinating. one of the things you've touched on here is when people kind of get locked into this pattern of failure, that's allegedly caused by something medical. and the expectation is there that they're going to mess this up because they can't help themselves. And yet.

I think a lot of people feel as if, well, there there's been this, this rise in people saying, well, you know, you can accuse me of all sorts of things. You can blame me for all sorts of things, but it's not me that did it. It was the, it was the psychological diagnosis or something medical. Therefore I can't help it. Therefore deal with it. So you have people who kind of

can manipulate this medicalization of the social for their own apparent benefit. In other words, you you, you, you, you're accusing me of being a narcissist. Well, I'm not a narcissist. I'm, I'm, I'm on the spectrum. I'm autistic or, know, you accuse me of being flaky or whatever, and not keeping my promises. Well, I'm ADHD and that's just what happens. And so it could go that way or it can cut the opposite way such that,

you know, people are like, well, I'd really like to think I'm a normal person, but people keep telling me I'm not. I'm trying to do around here is, is, is live life and live my best life. And people, people keep saying, well, you know, you're going to have limitations, you know, parents and teachers meaning well. Honey, you can't do that. Or you can't go there or you're having trouble with women or making friends because of something you can't control

Scot McKay (14:08.654)
which victimizes us. And I know you can't stand the V word, victim, the way I can't. So talk about that for a bit.

Dr. Craig B. Wiener (14:15.617)
Yeah, they originally thought people would have this mourning reaction to being diagnosed, but people really, in some ways, they're looking for some reason why they're struggling, and if somebody gives them a reason that is happening to them, it can be a relief, and if you also can get extra accommodations, then you can unwittingly reinforce.

the diagnosis because who wouldn't want some the standards to be made easier to meet.

Scot McKay (14:48.846)
Yeah, it's not my fault anymore either. It's not your fault marketing.

Dr. Craig B. Wiener (14:53.079)
Well the other danger too is if we assume that it's some permanent defect or delay, the therapies are very different from what I try to do with somebody, which is if you assume it's a permanent delay, then you tell parents, well you have to kind of manage their frontal lobes for them because they have this...

inability to inhibit their impulses so therefore they need somebody to do more stringent monitoring. But then you know, you doom the kid to permanent reliance on somebody else's monitoring rather than take the therapy in another direction. Let's help them learn how to do it more for themselves and not assume it's some delay that's

genetic and they can't be ...somehow it's irreversible. The fact that people have terrible outcomes, well, because the drugs work in some ways, but over time they don't work very well and they create other problems for people.

I'd rather see if I can solve it without inducing a stimulant to jack up the dopamine system. I'd rather, because that just gets people to be immersed and do things they would normally not do. They would achieve more with it. So you're not distracted because you're more immersed, but it's not really solving it. It's a stimulant. Everybody would react that way. So you're getting people who would typically not do the activity to be more willing to do it.

but it's not solving the problem of why are they objecting to doing the activity? What isn't it about the activity that becomes aversive to them? What's ADHD distractibility other than an avoidance behavior? It's an avoidance of the situation. They're distracted, huh?

Scot McKay (16:43.086)
Well, we're talking about the medicalization here of this. And you talked about how the drugs don't always work. And there are indeed drugs involved with these diagnoses.

How much of this has to do with what's commonly known as "sick care" culture? You know, the military, I'm sorry, the not military industrial complex, but the medical industrial complex, right? in this country, if we can put someone on drugs for the rest of their natural lives, that's very profitable. Is that kind of underhanded shadiness going on here or do people mean well, or we've just gotten into that trap or fallen into that habit?

Dr. Craig B. Wiener (17:25.057)
Yeah.

Scot McKay (17:25.418)
Because what you seem to be saying is that there's a lot of drugs being handed out that maybe are not doing as much good as they should be doing

Dr. Craig B. Wiener (17:34.643)
I think the presumption that most people feel like they're trying to do good and that the doctors, the pediatricians and the doctors are trained in the medical model and they believe the psychiatrist that also believe they're doing good to prevent people from having problems and the drugs do sometimes remarkable things at first for people.

and then if you get people accustomed to them and you try to take them off the drugs you get a real problem so then they don't want to come off because then you're causing other trouble and I think it's very difficult to understand the subtleties of what is going on with the person that they're... let's say you have a graduate student, a PhD

and they really want to get a PhD but they have a diagnosis of ADHD all their life and they're on Adderall and they're not going come off Adderall because that would create a big problem but they don't know why when the person when their mentor tells them they're supposed to read all these articles that they're supposed to read and then they're getting distracted even when they want to read the articles but they're getting distracted but when you

when you get into their life, their parents were forcing them to do their schoolwork and they were doing everything they could to get out of their schoolwork and they learned to do just enough to get by to get the grade. They never really were stimulated to do it and to become great at it. They were just doing it to get by. So then you give them schoolwork and they're trained for 20 years to deal with an assignment as, let me just do as little as I can because somebody is telling me to do it. How do you undo a lifetime?

It's just tricky. And then to get them to understand how were they reinforced to go along with being controlled and when do they not like being controlled and what's the aversion to the assignment that's giving them so much trouble to complete it. That takes a lot of work for a therapist to even get enough experience to even understand what questions to delve into. Well, what happened to you as a kid? When did this first start? Well, when did you do that? How did you feel? What did they do about it when you did this?

Dr. Craig B. Wiener (19:57.211)
That's deciphering a history of a person who's living in the world.

Scot McKay (20:01.816)
Well, you make it sound, you make it sound almost as if this diagnosis, slapping a diagnosis on a kid associated especially with a well-known buzzword like ADHD is just a lazy, cheap way out when it's usually much more complex than that.

Dr. Craig B. Wiener (20:19.497)
It's very, very tricky and intricate to do.

and the diagnostic system behaves as if you get the label everybody's got the same problem when there's a heterogeneity in the diagnosis. One kid might be, wait and raise their hand but might not, but might do some other thing and another kid does some other thing and not that. So we're treating them all like they're the same thing and it's a very different pattern. Like I used to say with some of these kids diagnosed with ADHD are just goofy and goofball and they're getting

attention like crazy and other ones are avoiding attention and they rather not draw attention themselves because they rather if people notice them they're going to make them do something they want to do or they don't want to be exposed to so they're more then as adults they go from attention seeking to avoidance of responsibility so you get less and less hyper and more and more avoidance behaviors.

So it's just a drift in terms of what happens all the time for most people or for many.

Scot McKay (21:26.636)
Well, I think it's very fraught to try to put an entire cohort of people into the same psychological diagnosis box. I've always known that anything related to psychology, psychiatry, is going to be really difficult and problematic if you're trying to take a bunch of people and categorize them all the same way because

just about everybody I've ever known who has been diagnosed with the same thing are still very different in their expression of it or how it acts out. And that just makes everything psychological, all things psychiatric, just insanely more tangled up and difficult. So you almost can't blame anybody, especially laymen like parents and teachers, or even coaches like me, relative to, you know, people who are

PhDs like you in the psychiatry field and the mental health field for wanting to describe this somehow because it demands a description. I mean, going back to what you said before, it starts feeling a little bit like the medical equivalent to lawfare in the legal world. I mean, this seems like a crime, you know, a criminal they're looking to slap a crime onto rather than a crime looking for someone, you know, whodunnit... I mean, who did this? Who did this crime?

So we have a person and you don't like how they're acting. How are we going to explain it? How, what are we going to, what label are we going to put on it so that we can, you know, take some course of action? Cause as long as we're standing around

scratching our head, all we can really do is say, Johnny, stop that. And he won't stop it. But if we know, or we think we know something that's going on, well, then we can, we can act on it. It really isn't unlike the idea of lawfare. is it? It's like medical fare.

Dr. Craig B. Wiener (23:23.787)
Yeah, so I always say that in the natural sciences, all copper is the same copper, but any category in social sciences is heterogeneity. Not all men are alike. Not all ADHD labeled people are alike. And the idea is that...

What are we gaining by the categorizations versus what are we losing in the categories? So the trend has been to do group and get make categories and we're losing the individual subtleties of each person and helping them that way. That's why it used to be...

the drugs needed the categories, because you needed a category that matched up with the drug. And the psychiatry, in medical, they needed categories to have particular treatments, they prescribed, that work for most people with that category, and then they're learning cancer people have to get all these individual variations once they get into it.

But I don't really see any of the... What do you do for ADHD? What's the commonality? Either they're intrusive, more intrusive than we want the kid to be, or more avoidant than we want the kid to be. So anybody who's more, too intrusive or too avoidant is going to be, going to get the diagnosis. And you have enough of those behaviors.

Scot McKay (24:50.478)
Well, like for example, in elementary school, and this came home to roost in our own family. My kid was an impetuous little boy. He went to kindergarten and every teacher is female. Everybody in the principal's office is female and he decided he was too smart for this class. He wanted to lead. He had a few ideas of his own. He wanted to assert himself. He had some aggression he wanted to get out playfully and

my goodness, every other day was a meeting with someone in the principal's office, the principal or an assistant principal who out one side of their mouth was like, he's a troublemaker and he's not being compliant and he's not coloring within the lines. And at the same time they would go, my God though. He's just so cute. just adore him. And I was like, well, you know, w which is it? You know, I mean, they had this emotional response to him because he's easy to like.

Cause he's a cute little boy. And then they're trying to whoop out of him everything that's masculine, everything that, that is an earmark of how boys will be boys and not in an abusive way. I mean, he's not punching people in the nose or starting fires or committing crimes. He just, he just doesn't have a feminine side. And that was basically his crime. If you want to go back and use that analogy and

They were telling us to take him to psychiatrists and psychologists and try to figure out what's wrong when to this day, it doesn't really seem like there's anything wrong with the kid. He's become a great young man. He's going to go to a

great college. He's very smart, which is his downfall. I mean, his IQ is through the roof and he just, he can think through everything much faster than the normal population can, which, you know, leads to acceleration of life in general, basically from his perspective.

So you have a lot of people and I see a lot of parents doing this. Frankly, I, I, know several families, in real life and especially they act out on Facebook. I don't know if "acting out" is a weaponized term, but it's what it looks like to me. I mean, we have a HIPAA act for a reason. You're supposed to keep your medical stuff to yourself. It's supposed to be private. I mean, and they're advertising almost on the daily that something is wrong with their kid.

Scot McKay (27:10.21)
They've got this problem. They've got this eating disorder. They've been diagnosed with Tourette's at age eight. And it's, and I mean, and I know these kids and they seem pretty much like kids, you know, normal run of the mill kids to me. I'm getting a tube installed. we're going and doing more tests and it just seems like someone

must've poked a voodoo doll with, you know, against this poor family because they're just being afflicted by everything. But meanwhile, you know, next time I see them, everybody looks healthy and happy and they're bouncing around like nothing happened. What happens when we as men grow up having been in a family like that, where, I mean, you can call it Munchausen Syndrome or I think the new buzzword that kind of offloads the blame from a medical perspective...

I have it written down here, right, is Health Anxiety By Proxy. In other words, I'm always worried, you know, almost to the point of, of, um, of a psychosis in its own right, you know, at least a neurosis, um, that something's wrong with me and I'm dying of something. Well, they project that onto their kids. Like, Oh my God, my perfect little child. I don't want them to be sick, but they, they had a rash yesterday. So my goodness, we need to go to the hospital. Or

they didn't eat their dinner last night. My goodness, do they have an eating disorder. And again, it's like, we're looking for a problem. We're looking for a diagnosis. And a lot of these guys listening to this show have grown up in that environment. And then we become adults and, and we've been trained to perpetually think something's wrong with us. How do we unwire that bird's nest or, you know, is that even the wrong question to ask?

Dr. Craig B. Wiener (28:57.045)
Well, one thing is there's been less fathers involved with child rearing because of the divorce rates and single motherhood and...

And then males are also being conditioned not to be toxic and therefore they're backing off on buck up and learn to do it whether you struggle or not. everybody's, and the more we learn about all the problems in the environment that we can protect, we become a safety conscious society. So then you're reinforcing the safetyism much more than the old days where you kind of had to.

confront a difficult world and work through it. Now we have enough affluence that

you make things more comfortable. And so there's a whole shift to making sure the child's comfortable, making sure that, and you have fewer children so everybody can be focused on more for their health and safety.

Scot McKay (30:00.684)
That's so true, man. Only children are just hovered over. The helicopter parent thing is, is that struggle is real. And then by the time you've had your sixth or seventh child, they're basically just feral in the wild running barefoot and you don't even care. They'll come home when they're ready, you know, kind of free range by then it's the same parents. They've just, it's not their first rodeo anymore. Yeah. It's very true that pattern

Dr. Craig B. Wiener (30:21.899)
Yeah.

Scot McKay (30:26.88)
I have one last question before we go ahead and wrap up because I know you have a client coming up, which is important.

Dr. Craig B. Wiener (30:26.977)
sure

Scot McKay (30:35.694)
There's been a rise lately. mean, maybe this is anecdotal on my part, but I sure see it a lot. Uh, didn't used to of people announcing to the whole world at age 35 or 50. My goodness. I've been autistic my entire life, or I've had Asperger's my entire life more specifically. And I now just, just now got diagnosed with it. Somehow they've gone their entire life. Uh, somehow

thinking they were normal, but now that there's some place in their social life, they're not thriving. Maybe if I slap a diagnosis on it, it'll explain everything. And I don't know if it's because Elon Musk is the richest guy in the world and it's working well for him to be Asperger's and it's made it cool or something, but it just seems like there's a rise of people not only receiving

later in life diagnoses of being on the spectrum. And I'm assuming ADHD could fall right in line with that too. Matter of fact, I've seen examples. Yeah. What's up with that? Where are we going with that?

Dr. Craig B. Wiener (31:38.069)
have a spectrum.

Dr. Craig B. Wiener (31:43.841)
Well, you know, because we're talking about people who have mental deficiency and they don't make sense of social relationships because they're mentally limited. And then you have people with this sense about...

How do you account for their failure to understand another person's perspective or the subtleties of interactions with others? It's the same problem you've got with other diagnoses. There could be numerous reasons. If they spend a lot of time by

themselves on a computer, they're not learning interactions with other people. If they're raised not to discern another person's perspective and point of view or work out...

how to get affinity or compromise with people. They're not learning the skills that go with understanding human behaviors. I just saw a study that said if kid's less than three and they're spending four hours or something on a screen, they're getting these diagnoses of autism because they're not learning to interact.

with people, their screen behavior is different from in vivo behavior. the idea is that, think again, we're not really making sense of all the different individual cases and how could we account for the individual's whatever lack we think they have. If Elon Musk spent all his time figuring out how to orchestrate

uh... his form of seeing how a company should work and how to do it on the screen and if everybody just did what he said yeah it would probably work out fine but meanwhile he's not really learning the skills that would go with how do you compromise in the government to make people agree to something you're not you're not going to...

Dr. Craig B. Wiener (33:37.621)
You get this with small business owners too. They become tyrants in their pizza place. Everybody's supposed to be doing exactly what they say. They're not paying attention to anything. They just fire people and hire somebody else. So they're not really learning to do other behaviors. So again, I think we kind of have the same problem with all these diagnoses.

Scot McKay (34:00.654)
Yeah, I think it's really fascinating and I really appreciate you coming on the show today, Craig and, and, and laying this out for these guys in ways they can understand. It's given us a lot to think about. I'm, know, the frustrating part is I'm not sure there are real, pat answers we could throw down for these guys, but at least, you know, I'm sure a bunch of guys out here have thought, well, you know, maybe there isn't something wrong with me, or maybe I do need to go see a psychiatrist or a psychologist.

And figure out what's going on here so I can, I can get the help I need... one way or the other, but we definitely don't want to let someone else label us, you know, off hand and live our lives that way simply because someone said so. So I think this is an important discussion. I'm so glad we had it. his name is Dr. Craig B. Wiener and he is a licensed psychologist based in Worcester, Mass. When you go to mountaintoppodcast.com/amazon gentlemen, you'll see.

At the top of my Amazon influencer queue, which is just a douchey way of saying I have a dedicated storefront on Amazon. You'll see, um, his book. Called Backyard Politics: a psychological understanding of today's political and social divide. also has a couple of books on ADHD, which we'll put up there as well. And if you're listening to this show or watching this show, um, within a couple, a few days of its release, it'll be right there at the top for you. Also, when you go to mountaintoppodcast

.com/weiner... why not w i e n e r You'll go to Dr. Craig B. Weiner's website. What are they gonna see when they get there? What are they gonna find?

Dr. Craig B. Wiener (35:38.899)
You'll see the four books that I put out, three on ADHD and then this last book. And then I have some videos on ADHD. I did a series so they can watch some videos on what I think about ADHD in more detail. And so, there's some other podcasts I've done so they can always listen in to that as well.

Scot McKay (35:59.63)
Cool, very cool, very cool. All that's there for you and more guys at mountaintoppodcast.com/weiner W-I-E-N-E-R. Craig, thank you so much again for being on the show. I appreciate you, man.

Dr. Craig B. Wiener (36:08.748)
Yeah.

Dr. Craig B. Wiener (36:12.183)
Oh, thanks for having me. I enjoyed talking with you.

Scot McKay (36:15.618)
Yeah, man. Hope you...hope to have you back. And gentlemen, if you have not been to mountaintoppodcast.com lately, be sure to visit our three wonderful sponsors, Jocko Willink's company, Origin in Maine, The Keyport and the guys at Hero Soap. Always great ways to man up and you're down with a discount 10 % off when you use the coupon code mountain10 Right now, I want to talk to you guys about Substack. Substack is my happy place guys. man.

If you are sick of juvenile social media, TikTok, Instagram, and you want something more buttoned up and have an intelligent conversation for once, hopefully I'm contributing to that. Visit me and anybody else you can find who floats your boat on Substack. Mountaintoppodcast.com front slash Substack is where you'll find all of my goodies. I let, I let it fly guys. I tell you exactly what I think. There's some humor there. I did a piece

on going RVing with my wife that brought a lot of laughs and there's, there's all kinds of variety there. Check me out on Substack at Scot McKay or just simply go to mountaintoppodcast.com front slash Substack. Gentlemen, it's always a pleasure to talk to you. And until we talk to you again real soon, this is Scot McKay from X and Y communications in San Antonio, Texas. Be good out there.