



# YOUNG ADULTS FACING THE FUTURE

Helping today's 20- and 30-somethings make a healthy evolution into adulthood

By Amy Rothenberg, ND, DHANP

In nearly four decades of practice, I have been privileged to help individuals as they progress through life's stages—babies who become children, children who grow into teenagers, and teens who eventually evolve into young adults. With homeopathy, we have a tool to help smooth the way, to help support the healthy evolution of the young people in our care.

## Challenge and change

Thank goodness, too, because young adulthood can be a time of enormous pressure and change. Common challenges include finding work or completing college or vocational training, establishing a career, or seeking a new residence on their own for the first time. Then, it's figuring out what kind of life to live, perhaps looking for a partner or maybe starting a family. For



some young people, these stressors will exacerbate physical or psycho-emotional ailments they've had for years. For others, the stress of these life hurdles may lead to new mental or physical health conditions.

Worries about the world and the future also loom large for young adults, with war, violence, the climate, and our economy weighing heavily on them. They may wonder: Will I find meaningful work that helps make the world a better place? Will I ever make enough money to pay off my student loans or buy a home? How will my low-paying gig job allow me to ever save for the future? How can I find work with benefits? Will artificial intelligence make my job obsolete? Will a pandemic, war, or other crisis turn the world upside down again? How can I ensure my physical safety? How will the changing climate affect our food and water supply? With all the uncertainty in the world, how can I possibly plan for the future or think about starting a family?

Layered on top of these challenges and worries is the ongoing pressure of social media. Young adults have grown up with the internet, and many stay connected 24/7. This can lead to stress from being hypervigilant or “always on,” as well as overwhelm from information overload. Social media can also contribute to feelings of loneliness, sadness, and inadequacy, as users continually compare themselves to others and try to “keep up” with their peers.

### **Exhilaration and freedom**

In spite of all the pressures this younger generation faces, I am often inspired by the young adults I treat—their resilience, their dedication to the things they love, their energy to reach their goals, and their ability to multitask. I am also impressed with how many young adults in their 20s and 30s are generous and accepting of all kinds of people with all kinds of lifestyles.

As a practitioner, as well as a mother of three 30-somethings, I know the exhilaration of freedom, of self-agency, of aspiration, and of achievement—as well as the potential missteps and setbacks—faced by this age cohort. My husband Paul Herscu and I have been blessed with kids who are healthy and engaged with life; we're immensely proud of the people they are, the way they walk through the world, and the joy they bring to us as a family. But I appreciate how the demands of modern life weigh heavily on all young adults, especially those patients who seek my help.

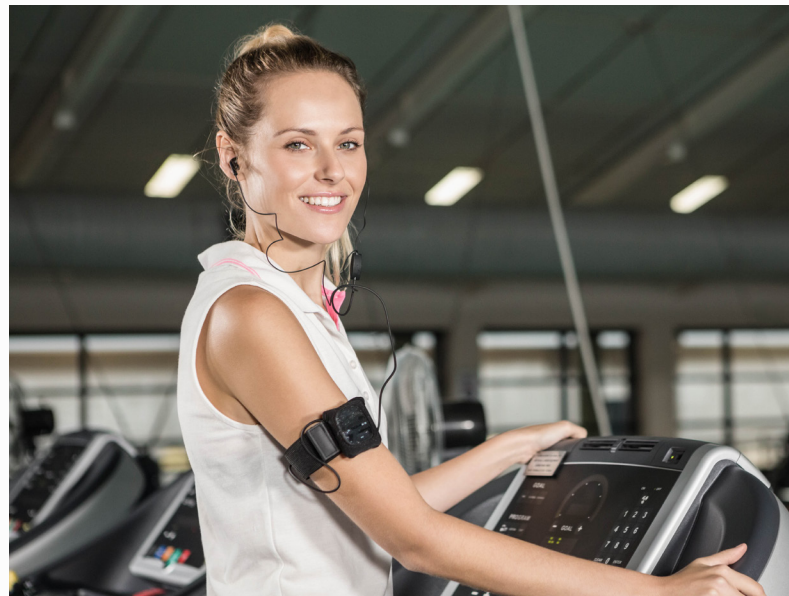
### **Mental health issues**

According to the Mental Health Foundation, 40 percent of millennials (those born between 1981 and 1996) struggle with an ongoing mental health condition. Anxiety, major depression, drug or alcohol dependence, and eating disorders top the list. On the bright side, younger adults generally feel less stigma around mental health issues than earlier generations, so they're more likely to seek help, as was true for my patient, Lisa, whose story follows.

### **Lisa: Self-hatred and disordered eating**

Lisa, age 32, came to me for help with depression and a pattern of disordered eating. For as long as she could remember, Lisa had struggled with self-hatred and a false belief that she was obese (known as body dysmorphia). Although underweight for her height and frame, she felt overweight, which she equated with being disgusting, undisciplined, and therefore unlovable.

Lisa described growing up in a family that was obsessed with how people looked. “Our world revolved around the bathroom scale,” she said. On several occasions in her teens and twenties, Lisa spent time in treatment facilities for people with eating disorders. During these in-patient stays, she learned helpful information about herself and about nutrition. Unfortunately, she also picked up damaging habits and beliefs from fellow patients, such as further ways to restrict calories and overdo exercise. These became woven into her own behaviors and thought patterns, derailing her attempts to find balance and health.



Students often ask me if homeopathy can help with eating disorders. My answer is, “it depends.” Eating disorders come in a number of types and degrees of severity. I always prioritize a team approach and working with the best practices related to eating disorders. The brain does not work well when a person is malnourished or unevenly nourished. I have had many successes helping patients with disordered eating, as in Lisa's case, but I have also had failures.

### **All alone**

Lisa's social isolation was of particular concern to me. With most of her career spent doing remote work, her main human interactions were with healthcare providers and therapists. While she had a graduate degree and a well-paying job as an engineer, she was unable to make friends and had never had a romantic partner.

Lisa's low sense of self made her feel like she didn't know who she was. She didn't have opinions about much, beyond what she should and shouldn't eat. She was vigilant about that though, with many rules around diet and exercise routines, and a daily schedule of events she obsessed on. Without her lists, the have-tos, the self-assigned daily jobs of counting calories, and the feeling bad about herself, Lisa wouldn't know who she was.

### Surprisingly healthy, upbeat

Physically, Lisa was in remarkably good shape, considering that she'd been undernourished for most of her adult life. She had a tendency for constipation, which she managed through diet. She did not menstruate regularly, which is common for those who are chronically underweight. She tended to be chilly and had offensive (to her) sweat when she exercised. She slept well and had enough energy to get through the day, although a lot of her energy each day was spent on negative self-talk, following all of her self-imposed rules, and completing all of her to-dos regarding food and exercise.

And most surprisingly, Lisa seemed upbeat! She smiled easily, and she seemed warm and engaging. Whenever I see or sense a contradiction like this, I try to explore it as best I can. I brought this up to Lisa, saying, "I understand from all you've told me that you're feeling depressed and anxious and are struggling with issues of self-worth. But you don't present that way at all." Lisa did not miss a beat, answering: "I'm a big fake. It's all an act. There's nothing underneath."

### Low self-esteem, low self-worth

That was heartbreaking to hear, but it also helped guide my hand in terms of a homeopathic prescription. When people have issues with low self-esteem and self-worth, we can think about these four homeopathic remedies, in this order, from least limiting to more limiting: *Lycopodium*, *Staphysagria*, *Thuja*, and *Anacardium*. Of course, there are other remedy types that will have elements of low self-worth, too, but these four are most common, in my experience. The cycle of pathology plays out over the physical, cognitive, and emotional spheres for all homeopathic remedies. The different "Segments" of pathology create a "Cycle" of imbalance and illness. (See the footnote for more about the *Cycles and Segments* approach to case-taking, case analysis, and materia medica.)

*Lycopodium*. People who benefit from *Lycopodium* typically have insecurities as a root issue; they compensate for this by being on the bossy side—or puffing up, so to speak. Sometimes, we see that puffing up literally, with excess abdominal gas and flatulence in the gastrointestinal system, for example. Other times, the puffing up manifests as posturing in different social situations to try to appear better than others, or better than the person actually feels.

*Staphysagria*. With those who benefit from *Staphysagria*, we

may see a person with a frail ego who is easily impacted by those around them and irritated by contact with others. They find these interactions too challenging and feel overly pressured by people, so they close off and go inward. They may seem very shy and quiet on the surface, but underneath, things are brewing, and their feelings are strong and intense. The person seems outwardly fine, but they eventually blow up. They hold it all in, and then they lose it!

*Thuja*. People who need *Thuja* can have a profound lack of sense of self, so they find it difficult to build self-esteem. Because of their internal weakness and vulnerability, they are deeply impacted by outside forces, such as overbearing parents and aggressive teachers. Those who need *Thuja* can feel divided and unsure of who they are. And often, what fills that void is the feeling that they have fallen short, that they are unlovable, unworthy, and somehow repulsive. To overcome these feelings, they create all kinds of boundaries, rules, and fixed ideas for themselves, and they try to keep any undesirable parts of themselves hidden. They work hard to present a perfect image of themselves to the world, but this requires an obsessiveness and unrelenting rigidity that makes it difficult for them to make their way through life.

*Anacardium*. In those who benefit from *Anacardium*, we most often see a history of neglect and abuse, where early nurturing did not happen. The person may blame themselves for this and come up with the idea that they are not worthy. They are riddled with guilt, believing that somehow whatever negative feelings they have are their fault and that they actually deserve to be treated badly. One common example is the person who grows up in an abusive household who later forms a relationship with an abusive partner. All that self-hatred also leads to confusion and an identity crisis, where they ask themselves, Who am I? But the person who needs *Anacardium* tends to deeply believe they are unworthy and bad, so they act out in ways that prove they are bad. We may see this in kids with oppositional defiant disorder, which can evolve into conduct disorder and other diagnoses in adults. They may end up angry and hard-hearted, acting maliciously towards others and showing little feeling. Surely, many of the criminals in our prisons would have had a better chance in life had they grown up in loving, safe homes where they were cherished. And many might benefit from the remedy *Anacardium*.

### Deciding on a remedy

In choosing a remedy for Lisa, I considered the four remedies above and immediately ruled out *Anacardium*. While she had destructive behaviors toward herself, she had not and would not ever strike out at others, as we usually see with those who need *Anacardium*.

While those who need *Lycopodium* have low self-confidence, as Lisa had, they tend to have more of a sense of self than



she had. If she had needed this remedy, I would expect her to show irritability, as well as posturing and puffing herself up to others. Instead, she worked to maintain a sunny disposition to the outside world and showed no signs of the compensatory haughtiness or “I know more, and I’m better than others” attitude that we often see in those who need *Lycopodium*.

Turning to *Staphysagria*, people who benefit from this remedy are almost always shy and reserved; in contrast, Lisa was so upbeat (even if she was faking it, as she told me). A person needing *Staphysagria* could not have mounted and kept up that kind of act.

*Thuja* was the best match for Lisa, based on both her upbringing (where she never felt good enough and never measured up) and how she was impacted by it. Lisa’s proclamation, “I’m a big fake. It’s all an act. There’s nothing underneath,” coupled with her self-loathing, was enough for me to appreciate that *Thuja* would be a helpful remedy for her. People needing this remedy also often have fixed ideas, delusions, or obsessive anxiety over minor or imaginary flaws in their body, which was certainly true for Lisa.

I gave Lisa *Thuja* 12c to take each night before bed. I instructed her that if she was having a bad day, however she would define that, she could take another dose at midday.

### Adding lifestyle changes

I also offered Lisa a number of lifestyle recommendations around finding things to do outside of her home and work environment. While she was in my office, we got online and looked at art classes at her community center and volunteer opportunities at a local animal shelter. I knew she needed more interactions and to get out into the world more, even if it was hard and even if she had to push herself a bit.

Since Lisa was already quite knowledgeable about nutrition, I did not make recommendations on her diet. But because she had been undernourished for so long, I suggested a number of nutritional supplements, including a good-quality women’s multiple vitamin, fish oil, and a probiotic.

### New friends, new freedom

We planned to meet in six weeks for a follow-up appointment, but Lisa ended up canceling and rescheduling that meeting. When she returned to see me, it was three months later. Lisa apologized for the delay and explained she’d canceled the earlier date because she’d had an opportunity to go on an outing with a new friend. Hallelujah! This was a great reason for Lisa to cancel going to the doctor—doing something fun with another person! Lisa also let me know that she felt something she had not felt before: freedom. Freedom from the constant mental chatter about how she looked, what she was eating, and how down on herself she could be. She had followed through on taking that

art class we’d talked about, and she’d also started doing some volunteer work. Happily, she had met a handful of people she liked, and more to the point, they seemed to like her. She had also done something she’d never done before; she asked her boss for more challenging work, as she believed she was capable of doing higher-level projects.

Lisa told me that she was feeling less obsessed about everything. She even took some days off from exercise. She said the constant nagging in her head about what and how much to eat was not as loud as it used to be. She could override it with the many tools she had learned from cognitive behavior therapy, tools that she had known for a long time but was often unable to access.

Lisa seemed to be responding very well to treatment, so I asked her to continue taking *Thuja* 12c once or twice per day.

Two months later at our next appointment, Lisa reported that she had recently started feeling “off.” She felt like she was slipping back into her old patterns, with rigidity creeping into her mindset again, especially about her diet and her physical activity level. This told me an increase in potency of *Thuja* was indicated, so I asked her to start taking *Thuja* 15c once or twice per day, in the same manner as she had been taking *Thuja* 12c.

Within a few days of starting *Thuja* 15c, Lisa was feeling good again. She said she was less a prisoner of her own thoughts and more able to be in the world with other people and to do things she enjoyed.

I continued to monitor Lisa, and after about six months of these repeated doses of relatively low-potency *Thuja*, I gave her one dose of *Thuja* 200c.

### Eating disorder recedes

We’re at the two-year mark now, and Lisa is doing well. She has a circle of friends that she enjoys spending time with, and she feels that her eating issues are less the central framework around



which she runs her life. She is now a more normal-for-her-size weight, and she has a monthly menstrual cycle. She is thinking about dating, but she tells me she is “not there yet.”

Is Lisa at risk of the eating disorder returning? I think everyone with a long history of disordered eating could slip back into those patterns, especially if the underlying and root cause(s) is/are not addressed. The homeopathic treatment helped to build her sense of self and put her on a trajectory of more positive experiences and interchanges with others—which, in turn, helped her develop more of a sense of who she is and what she wants in life.

Are things perfect for Lisa? Of course not. Like many of her peers, she is concerned about the state of the world and, at times, can feel defeated by the depressing and overwhelming news cycle. But for the first time in her life, Lisa has people to talk to, to do things with, and to commiserate with when she is feeling stressed or down.

### Emerging into adulthood

For Lisa, like many young adults, figuring out the very basics of who you are and what you want is key. For some people, this happens without much trying, or it is an evolution of a strong sense of self already developed in childhood. For others, it needs to be more of a conscious effort. Quieting the inner critic, having experiences and taking chances, seeing the world, and tuning in to how you feel and what you like are all ways that can help young adults emerge into adulthood. And then, it's important to line up education, work, friends, experiences, and opportunities to help you get where you want to go!

### A tool for all ages

I love that I have homeopathy as a tool to work with people across the ages of life. Overall, I am heartened by the progress young adults can make when they're supported with homeopathic remedies and naturopathic medicine. Common complaints of young adults I've worked with include adult attention-deficit-hyperactivity-disorder, addiction (alcohol, drugs, video games), depression, and anxiety, along with physical complaints that span everything from gastrointestinal challenges to severe acne to autoimmune complaints and more.

We have every reason to be optimistic when we take on young adults for treatment. Their vital force is engaged, we have tools and resources to share, and a well-chosen homeopathic remedy will often be a key to help unlock the path toward healing. 💧

#### Footnote

Cycles and Segments is the philosophical approach to case-taking, case analysis, and materia medica that Dr. Paul Herscu and I use and that we teach to our students. We find that it streamlines the process of finding a remedy, presents materia medica in an organized, precise fashion, and leads to more accurate repertory use and prescription.

A Cycle refers to the following process: An individual is stressed, and their vital force reacts (or strains) to correct the imbalance. The strain manifests as symptoms, and the symptoms get stronger as the vital force overcompensates. To maintain balance, the body then tries to correct the over-compensation, and the person is caught in this downward Cycle of pathology.

When I take the case of a patient, I create a Cycle of their complaints. The Cycle is made up of Segments. Segments are a group of symptoms that represent the same idea. For example, if a patient has copious discharges, such as excessive nasal mucus and chronic diarrhea, and they also have outbursts of anger, I might put these three seemingly disparate symptoms into one Segment called “discharges.”

Using this approach, no individual symptom takes on a disproportionate weight, and I am sure that I am seeing the overall tendencies of the patient. This allows me to understand the whole concept of the patient's pathology, and I can trust that the remedy that will prove helpful to the patient will be found using this method. For more on the Cycles and Segments approach, see <https://nesh.com/what-is-dr-paul-herscu-cycles-segments-approach/>

### ABOUT THE AUTHOR



**Amy Rothenberg, ND, DHANP**, has been in practice since 1986 in Northampton, MA, [www.nhcmcd.com](http://www.nhcmcd.com). Her new book, *You Finished Treatment, Now What? A Field Guide for Cancer Survivors* (Koehler Books, 2022), can be ordered anywhere books are sold. See [www.DrAmyRothenberg.com](http://www.DrAmyRothenberg.com). With her partner Paul Herscu, ND, MPH, DHANP, she founded and teaches through the New England School of Homeopathy, [www.nesh.com](http://www.nesh.com). Her writing can be found at *Medium*, *Thrive Global*, *The Huff Po*, and more. When not working, Dr. Rothenberg enjoys spending time with her family, in the garden, and on the ballroom dance floor.



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