

#24 Visioning Mental Wellness

M.J. Murray Vachon LCSW: [00:00:00] Welcome to Inner Challenge. I'm MJ Murray Vachon, a Licensed Clinical Social Worker with more than 44,000 hours of therapy sessions and 30 years of teaching mental wellness. Join me as I have an unscripted conversation with guests just like you as we strive to take the mystery out of mental wellness.

Welcome to our podcast today. I am so excited about this episode. Today you are going to meet my very special guest, Marcus Engel. Marcus is a really beautiful human being who has an incredible life story. Marcus at the age of 18 was hit by a drunk driver. As a result, he lost his eyesight and endured more than 300 hours of surgeries. And from that, he's had the courage to create a life that I am sure he never imagined, but is full of lessons and tools and meaning that can help each of us in our everyday life.[00:01:00] Let me begin by welcoming you to the podcast today, Marcus.

Marcus Engel: Thank you. It's great to be with you. I love the podcast.

M.J. Murray Vachon LCSW: Thank you so much. Marcus, I want to begin by just asking you to tell our listeners a little bit about yourself.

Marcus Engel: I am 47 years old. I live in Orlando. I'm a native of St. Louis, Missouri. The trauma that you're referring to, when I lost my sight and had every bone in my face crushed that took place when I was 18 years old, that led me to a career of using those experiences that I had as a patient to help teach compassionate communication to healthcare professionals. That's what I get to do all over the country. I've written a couple of books that are based on compassionate communication.

M.J. Murray Vachon LCSW: It's incredibly worthy work. I met Marcus because my husband is the Director of the Hildebrand Center for Compassionate Care and Medicine at Notre Dame, and Marcus is an adjunct professor in that program.[00:02:00] Today, I want Marcus and I to talk about mental wellness. I want to begin with you, Marcus, like I do all of our listeners by asking you, how do you define mental wellness?

Marcus Engel: Mental wellness to me, is an awareness of what is going on emotionally inside and then being able to respond to what's going on the inside. To me, with the compassion training that I do it's really all about awareness and

how do we stay in the moment, noticing and witnessing our emotions, our feelings and then being able again to respond instead of react to those.

M.J. Murray Vachon LCSW: That's a beautiful definition because I think one of the things we all hope to do as we mature and become healthier human beings, is to move from reaction to a thoughtful response. And you're right, self-awareness is the basic tool for that. How do you know when you are [00:03:00] in a mentally good place?

Marcus Engel: Oh, wow! Sometimes it's hard because I'm like everybody else. I'm human. I get distracted out of the moment. For me, when I know that I'm in a good place, maybe it's the opposite that I know whenever I'm in a bad place by the feelings in my physical self. When my shoulders are tight, my face is tight. My body is tight, and I'm probably thinking too fast. I notice whenever I'm feeling mentally well is when my brain has time to slow down a little bit and I have a moment to breathe and a moment to have perspective instead of just as we said, reacting to whatever that stimuli was.

M.J. Murray Vachon LCSW: A really helpful point because I do think that we cultivate mental wellness from not feeling good. Often we do start with when we're in a place that's rocky. I use Siegel's image of the river of mental wellness, where our mind is as you suggested peaceful, [00:04:00] calm, and alert. Things happen in our life that throw us on the banks, we get chaotic, we get rigid, and those are signals. And that's what I hear you saying. You have developed the skill, the toolkit of listening and looking for the signals in your life that say, oops, I'm at a balance.

Marcus Engel: Yeah. At least for me I think everybody needs to do that. For me, I feel like there's a certain amount of my emotional and physical energy that is eaten up every day just by trying to function and live as a person living with blindness in a quote unquote sighted world. Sometimes just based on logistics I'm so focused on that and I'm so concentrating on that, that I don't even notice my emotions. That's another time that, I have to stop, bring myself back to the present moment be aware and try to stay in that flow of the river, as you said.

M.J. Murray Vachon LCSW: I think that's so interesting. I'm fascinated by what your experience is of moving through the world [00:05:00] without sight. One of the things that you just said is, like all of us, you get incredibly distracted, but in a unique type of way. We get distracted by all the visual cues, you get distracted by, how would you say it?

Marcus Engel: Boy, some of it's just logistics, right? Getting from point A to point B. I'm here in South Bend right now. I'm navigating a new hotel and I noticed yesterday while working in my hotel room, that I was tensed up. I was trying to type too fast and I was trying to do too many things at once. I remember thinking it's Friday afternoon. You've got to mentally take the time to downshift and start moving towards the weekend. There's only so many hours in a day. There's only so much you can. That even when we're productive at times it still feels like a lot, right? It still feels like a lot that's coming at us, maybe too much to handle. Between all of those things it's become very important [00:06:00] for me to know how to try to get centered and get back into the moment.

M.J. Murray Vachon LCSW: You become aware that you're not centered, once you have that awareness, what do you do to become more centered?

Marcus Engel: I used to not even have that awareness, right? That I hope is part of my progress and emotionally healthy side. After years now of a meditation practice, I know how to use my breath and breathing techniques and grounding exercises to get back into the moment. That's something that I do. I know a lot of people use something tactile that they carry a certain object in their pocket that they know, Hey, whenever I touch this I'm going to remember to breathe. I'm going to remember to stop and take a couple of breaths and look around. For me not being able to stop and look around, I have to be even more intentional to work on my breathing and work on centering in other ways.

M.J. Murray Vachon LCSW: Can you talk a little bit about what your breathing practice looks like?

Marcus Engel: I can't say that I have [00:07:00] a formal practice of breathing, but I, many times during the day I'm trying to do box breathing exercises of inhale for a count of five. Hold for a count of five, exhale for five, hold for five and reverse. That's one. And then I try to do as much deep breathing just throughout the day as I can the ocean type of breathing right the tide rolls in. The tide rolls out. I've learned from the evidence and from anecdotal experience that helps to slow our brains. It helps us slow down our heart our bodies, everything just gets slowed down a little bit and we have more time to respond instead of react.

M.J. Murray Vachon LCSW: It's interesting because the first thing we do in life is breathe, and what you're talking about, box breathing and the meditative experience of breathing like the ocean. They really take us back to our origin. And you said, from anecdotal evidence as well as your own experiments, but

that's also scientifically [00:08:00] proven that we have the power to reset our central nervous system, which gets wound up during the day. We are responding to it. We may be responding to it if we see something visual. You may be responding to it because of sounds or because of the challenges of navigating a new environment, which of course would make you and your central nervous system get wound up. You have these tools that you use to really help your body get back to a calmer place.

Marcus Engel: I have to, right? I have to. I've thought a lot about this too when we talk about the visual aspect, I think one of my bad tendencies with mental health is rumination. The negative pattern of thinking that becomes a vicious cycle. I think I do that a little more than the average person because I don't get distracted by the shiny object that just, went by down the street or what the latest flashy thing on my iPhone is. I'm, as addicted to my [00:09:00] phone as anybody else is, but I don't get distracted out of my bad moods and so it becomes even more important for me to practice these breathing techniques and to use the tools that I know how to use during various times of the day when things get overwhelming as they do for everyone.

M.J. Murray Vachon LCSW: Yes. That's really interesting because it really is heavier lifting for you and it's you that has to do it. You're not going to just bump into something that might pull your ruminations out of you.

Marcus Engel: You got to be intentional, right?

M.J. Murray Vachon LCSW: You have to be intentional.

Marcus Engel: Awareness and then intentional to stop that rumination, to stop those negative thoughts that, intrusive thoughts, I suppose they should be called. I have to do that or else I will just spend too much time in rumination.

M.J. Murray Vachon LCSW: Have you found anything that helps you with rumination?

Marcus Engel: Yes. The breathing exercises certainly do. [00:10:00] And getting away from the situation, going and doing something else, that will take all of my attention as opposed to sitting around ruminating. Going and doing something else, physically, doing something else. Even if that just means I'm going to take the trash out to the garbage can in the garage, I'm just I'm going to fold this load of laundry, whatever it is I'm doing something physical that distracts me out of that moment. I don't want to say it's a distraction because it's

intentional, but it gives me something else to do besides sit there and ruminate if I just sit there and ruminate, that doesn't lead anywhere good.

M.J. Murray Vachon LCSW: Because rumination just leads to more rumination. Unless there's an intervention and part of what you're wisely sharing is that one way that you have found is distraction? I like to always separate distraction from avoidance. Because when intentional, as you said, distraction is a healthy mental wellness tool and you're using it in a healthy way. You're saying, I need to stop the cycle of rumination and [00:11:00] I'm going to do that by doing something like taking out the trash, which actually gives you a hit of dopamine. Got that off my list, and that's really a very helpful tool in dealing with rumination.

Marcus Engel: I like that. I didn't realize that there was that hit of dopamine that you got from doing something that you know, that you needed to get done marking something off the list.

M.J. Murray Vachon LCSW: That's why we are list makers, because every time we get it done, we get this little hit of dopamine and usually it's for free. I just want to say one more helpful tool, a mental wellness tool for rumination. Because I think a lot of people that I work with, rumination is something that they struggle with. We have busy minds in the western world, and sometimes they run amok. What you're saying is how do we manage them instead of them managing us? Rumination can be quite painful. When was the last time, Marcus, that you ruminated about something that was joyful and happy and you just couldn't stop thinking about it?

Marcus Engel: Yeah I do that a lot [00:12:00] I, I've got three stepchildren and I've got six step grandchildren. Those kids are the light of my life. There are times that we had a great day with the grandkids and we were playing in the pool and I'll lay in bed with my wife at night and just say, did you hear whenever the grandbaby said this? Instead of ruminating we're focusing on the positive things, the things that bring us joy. Maybe it's as simple as count your blessings, right? Thinking about all the good things that have happened over the day at the end of the day too, I believe is a good way to try to keep rumination in perspective.

M.J. Murray Vachon LCSW: Yes. Also, what you're talking about is, in that case, you intentionally actually floating, in this joyful, beautiful memory. Typically, when we say we're ruminating, we are not intentionally ruminating. It is something that just grabs our brain and runs away with it. I like to, help people understand that physiologically, our [00:13:00] brain leans to the

negative. That rumination is almost a natural extension of how the brain works because if we're walking in a forest 300 years ago, 400 years ago, we were always scanning for safety in case that bear or that wild boar was going to chase us. So, the brain is on alert all the time, but of course, we're not really being chased by wild boars these days. But the brain is still the brain and it's on alert. When we are in a state of rumination, we need to have self-awareness that, oh, my brain is just runaway with me. It's just running amok and I have the power to pull it back. One is through the mental wellness tool you used, distraction, to actually interrupt your brain, take out the trash, or make your bed or phone a friend. But another is to use your body to move your brain from the negative state to a more positive state. [00:14:00] I usually encourage people to ground their feet. You mentioned that in, you're opening your grounding practices, and then be aware of the ruminations. What we tend to do is blame and unclaim them. Like we get mad that we're ruminating and we blame if that hadn't happened or if this hadn't happened. That's often what the rumination is about. That you wish something hadn't happened. Or we unclaim it. We just let it go, and we are worn out not literally paralyzed, but somewhat paralyzed. I've worked with a lot of people who they've had three or four hours of their day just eaten up by this thing that they're worried about. What I encourage people do is ground their feet, find the rumination on their body, often it's in their head, and then do breath work, and then ask yourself, is this true? We are often not ruminating on the truth. We're often ruminating on the most catastrophic possibility of that situation. What I ask [00:15:00] people to do is ask, is this true? Is this the whole truth? And to have a conversation ,gentle, with themselves where they're actually interacting and befriending the rumination. Sometimes when I do this with people, the rumination starts in their head. For example, I had someone a couple weeks ago who had to wait for the results of a medical test. Very common thing to ruminate about and when people have to wait, do I have cancer? Their rumination typically is, I do, it's stage four. I have a few months to live.

Marcus Engel: Catastrophize

M.J. Murray Vachon LCSW: That's what the brain does. You hear a sound in the woods, it's a bear. It's not a squirrel. If we understand that's how the brain works, then we're empowered to help our brain move to a different place. So, while she was doing this in my office, she started her breath work with her hands on her head, and she said, is this the truth? She was no, it's really not the truth. And then what happened [00:16:00] was she moved her hands to her heart and her fear then turned to sadness and she just had a really good cry. And then she said "I can hold this uncertainty without making it the worst catastrophe." We talked about what would she do that weekend using the tool of distraction so she could carry the uncertainty. I want to offer that tool to you because often

with rumination, the more tools we have the better because sometimes taking the trash out, that's enough to get us to a different place. But other times, tending and befriending and really, you know, interacting and talking within ourself about what we're afraid of brings us to a deeper, healthier place. Does that make sense?

Marcus Engel: Absolutely. Yeah. This goes along with what I get to teach to healthcare professionals too. It's sometimes instead of [00:17:00] ruminating on the difficulties of the job or the difficulty with a patient, instead of ruminating on that. The way that I teach is to lean into that and write about it. This is where the narrative medicine academic background comes in actually exploring those difficult issues just by writing. It was in the narrative medicine program that I first learned about the benefits of therapeutic writing and some of James Penna, Baker's first research on using writing as a therapeutic resource. I lean into that sometimes instead of the distraction, it's the opposite, right? It's the intentionally moving towards and thinking about that difficulty, but physically writing out things long hand, which is impossible for me to do, but for the average person even that helps ground. That's another practice that I try to do as much as I can.

M.J. Murray Vachon LCSW: I want to come back to grounding, but you have [00:18:00] a Master's in narrative medicine. Can you tell our listeners what that is?

Marcus Engel: Narrative medicine is a combination of healthcare, of literature, of social work of art. It's a combination and there's only two programs in the country. I graduated from the program at Columbia University, a little over 10 years ago now, and that's the original program. My class was only the third to complete the program, so it's still a very new and emerging field. But what we do in narrative is we take the stories of healthcare and try to turn those stories into something that people can learn from. My use of narrative is to help nurses deal with those pressures of the job and the traumas that you have and that you witness while on the job. Learning how to deal with those by writing and learning about ourselves as we write.

M.J. Murray Vachon LCSW: Is there a process? Do you just sit down and journal in this particular [00:19:00] field? What is recommended?

Marcus Engel: We talk about narrative medicine being much more descriptive than prescriptive. We can talk about what it is rather than define what it is. In this scenario, one of the things that I encourage nurses to do is to bring to mind a difficult situation with a patient or a family member. Maybe there was a yelling fit between a family member and the caregiver. Maybe somebody didn't

get their medicine on time. There's a grievance and it led to something ugly and angry. I'll ask a nurse or a healthcare professional to bring that to mind and write about that scenario just for a few minutes maybe five minutes, maybe a paragraph or two. Then let's write about it again. Maybe another five minutes, just a paragraph or two. But instead of writing from your own perspective, now you're going to write from the perspective of a fly on the wall or maybe the perspective of the patient or the family member, and when we can build a [00:20:00] greater perspective it brings about more empathy and understanding.

M.J. Murray Vachon LCSW: Wow, I didn't know the details, so I'm really happy to have you educate me. One of the tools that I give our listeners is what I call psychological intelligence. My story. Your story. Our story. Part of what I hear you saying is in narrative medicine, which is something that could be applied to our narrative life. It's not special just for nurses. We all have those situations in our life that cause a lot of emotional intensity, anger, disappointment, that somebody writes about it for five minutes. Then they take the perspective of a fly, another person, perhaps the other person that was involved. Often as I teach psychological intelligence, I have people do that, but I've never thought of having them write it out, which I will now incorporate because that's so powerful, because that changes the focus of the mind. When we have something upsetting, [00:21:00] We always focus on ourselves first, typically? I'm sure there's an exception to that rule. What I talk about often is we're stuck in the capital "I" like I am so important. Often mental wellness is cultivated when we're in a lower case, *"i"* where ourselves is there, but we are connecting to other perspectives and it's not all our perspective, which is why I use lowercase *"i"*. Your narrative medicine does that, doesn't it?

Marcus Engel: That's what we've tried to do. My focus of narrative medicine it's the reason that I ever got interested in the field in the first place was because I had written a couple of memoirs about my experiences, and I knew the healing that came from sorting out some of those traumatic events through writing. When I first learned of narrative medicine, I was like, oh wow, this is what I've already been doing anecdotally, and now I can go formalize that and then also be able [00:22:00] to teach that with a more refined and more targeted approach to people who are hurting.

M.J. Murray Vachon LCSW: Can you talk a little bit about your own process of moving from a healthy 18-year-old boy whose life in front of him, in the way you imagined it at that time, and how you moved through the accident, the loss of your sight to really gain mental wellness. It wasn't given to you. No. It was earned. It was hard work.

Marcus Engel: I feel very fortunate though that my roots are solid. I have very few, if any, of those adverse childhood experiences. I have wonderful, loving family. Barely any mental illness in my family. So, I had a good foundation. That foundation was very much needed whenever I went from a typical 18-year-old college kid to laying in a bed with a head swollen up to the size of a basketball and a trach in my throat. You ask [00:23:00] about the process, it's it was almost a blessing to have so much trauma because I wasn't as focused on the rest of my life being blind when I was staring down figuratively of course staring down a 20-hour facial reconstruction the next day. I was in so much physical pain that the idea of being permanently totally blind was going to take a backseat to just stopping the pain. I almost feel like that was a little bit of a blessing at that time. I also go back to being 16 years old 16-year-old high school football player, and one day after practice I had my first fender bender. I backed my car into another car. The car that I hit also happened to belong to my high school principal, which was quite frightening for me. My principal was such a great person and he knew how upset I was by hurting his property, and he took me aside [00:24:00] and he gave me some advice that I focused on during that recovery. I still focus on it every day. When he told me, he said, Marcus, you're going to find as you get a little older, there's so many things in this world that you can't change. This is just one of those things that can be changed. He said, change the things you can and don't worry about the rest because there's nothing that you can do about those things anyway. So, laying in that hospital bed knowing that I was going to be blind, change the things you can what can I change? I can't do plastic surgery on myself. I can't do physical therapy on myself. I can't breathe on my own at this point. I'm that helpless. I cannot breathe on my own. But what do I have control over still? That's where I was like the only thing that I have control over is my attitude and my perspective. How can I change this? That I got a little advice from the famous poet one Bob Dylan, Nobel Laureate, when [00:25:00] he said, "Negativity, don't pull you through!" when I heard that Bob Dylan line about negativity don't pull you through, and I merged that with the idea of changing the things you can, I cannot focus on all the bad things. I have to focus on what I still have and what did I still have? I still had my family, I still had my friends, and somehow by the grace of God, I broke every bone in my face, but I still had my brain. I didn't have a traumatic brain injury. Those were the things that I started to be able to rebuild with.

M.J. Murray Vachon LCSW: Wow. Can you say Dylan's line again?

Marcus Engel: The line is n it's not grammatically correct by the queen's English, but the line is "Negativity, don't pull you through."

M.J. Murray Vachon LCSW: I'm really struck by Dylan's line, "negativity, don't pull you through," because one of the things that you are saying is that we have to have aspirational mental states. [00:26:00] We have so many aspirations in our culture, but they're usually connected to material things, or maybe they're connected to relational things. You are talking about, because of this tragedy, you ended up having an aspirational mindset thanks to Bob Dylan, and also thanks to your high school principal. That again it's this self-awareness. It's so interesting what we remember and I often encourage people to have North Stars when it comes to what their mental state is. Most people think, oh I'm just born anxious, or I'm an Eeyore. No, our mind is meant to be calm. It's meant to be clear; it's meant to be happy. But if we don't have those kinds of north stars, those aspirations, negativity don't pull you through, then we don't know what we're trying to cultivate is what I hear you saying.

Marcus Engel: Yeah. Really, I guess I've been to the quote unquote, bottom I've been about as low as [00:27:00] you can go with physical and emotional distress. You can stay there and you will stay there if you constantly look at the negative, right? If you focus on the positive things, the good things that you do have that's at least giving us a fighting chance to get out of those really difficult situations. But if we stay ruminating on the negative stuff, guess what? You're going to stay in rumination with the negative stuff. At least that's my experience.

M.J. Murray Vachon LCSW: We pick our dance partner in our mind. We pick our dance partner. I want to end because you referred to this a couple times about grounding. Define for our listeners what that means for you. How do you do it, and why do you think it's helpful?

Marcus Engel: Why is it helpful? Grounding gets us back into our bodies and out of our brains, out of the brain, and into the body. When I'm grounding, I actually love to use a little exercise that I learned from a physician who's an expert in meditation and mindfulness called [00:28:00] Where Are My Feet? Simply asking the question, where are my feet? I ask this question to my audiences sometimes. Ask them where are your feet? Some people will say, my feet they're in my shoes on the floor, in this room under my chair on top of my other foot. If you really think about it, You could come up with a hundred places that your feet are without ever moving your feet. When we can get our brains to think about something like that for a few moments, hopefully it's we step out of that rumination and we step into what is a grounded, more centered and hopefully more present life.

M.J. Murray Vachon LCSW: How often do you do that during the day?

Marcus Engel: I try to do it as many times as I can during the day. On a typical day grounding or meditation, I usually am meditating. I don't like to admit this, but I usually meditate for a couple hours a day these days. It's not always super formal. I'm not always sitting to meditate, but I spend a [00:29:00] lot of time lying flat to meditate and just grounding, coming back into the moment.

M.J. Murray Vachon LCSW: I think that we don't understand the power of grounding, that what you're saying is grounding is bringing us into the present of our life. When you were in the depths of recovery, you were probably grounded a lot.

Marcus Engel: Yes, except for the fact that I was in such pain that took me away from grounding. It's the feeling about the feeling that can sometimes be detrimental to us. The feeling was the pain that I tried to get out of that made it harder. You would think that would make it easier to ground in something physical, but usually when we're physically in pain, we're trying to get out of that pain, get away from that pain, and I found myself doing that quite a bit.

M.J. Murray Vachon LCSW: Did you find any techniques to help you with the pain?

Marcus Engel: I did not have nearly the education or the support that I should have. [00:30:00] A lot of these things I had to learn on my own later in life. We have to also go back to the early nineties when Psychiatry and Psychology was not nearly as prevalent as it is today.

M.J. Murray Vachon LCSW: What would you do today?

Marcus Engel: Today in fact I'm mentoring a young man who grew up 20 miles away from me and at 20 years old, just a year or two ago lost his eyesight in a head on collision. What I would have tried to teach to him is to get into the moment getting overwhelmed with the disability, thinking about how you're going to live the rest of your life. Take that time to stop, be in the moment, and acknowledge I'm scared. I am terrified. I am terrified. But sit with that terror for a minute. Just sit with it. You don't have to move but sit with that fear for a minute and then try to figure out where is that fear coming from? What makes me afraid? To your point earlier, is it true? Is it really going to happen? What's the [00:31:00] likelihood that the catastrophe is actually going to happen? That's what I would do these days. I wish I'd had somebody do that a little bit better for me at the time.

M.J. Murray Vachon LCSW: We've all learned a lot in the last 20 years when it comes to really helping us with such catastrophic loss, catastrophic grief. I often think of it in the terms of tending and befriending. I often say to people, pretend what you're afraid of is a dog, that you have the power to tame. Most people love dogs and, you can offer dogs food and they will usually calm down or even think of it like a puppy that is nipping at your ankles, you can pick it up and you can pet whatever you're so afraid of and tame it. To be in the present with it. Because usually it's the catastrophizing. Could you have imagined at 18 you've written two books, correct?

Marcus Engel: Four books? Yeah.

M.J. Murray Vachon LCSW: Do you want to tell our listeners the titles of your books?

Marcus Engel: Sure. [00:32:00] Especially if you're into, healthcare. My two most popular books are *The Other End of the Stethoscope* and *I'm Here* *Compassionate Communication in Patient Care*. They're both just small, 110, 120-page books. Memoir are about my recovery, but about the interactions that I had with nurses and doctors and PTs and OTs and RTs and trying to help those who are providing care to patients to understand that their words have power and they can rephrase some things to help patients retain their dignity and their independence during their healing process. Trying to give some perspective.

M.J. Murray Vachon LCSW: I want to thank you so much for being on the podcast today. This has been delightful and interesting. Thank you so much, Marcus.

Marcus Engel: Sure, thank you. It's great to be with you.

M.J. Murray Vachon LCSW: Marcus really inspires us to step in to learn from and work with whatever life gives us. While Marcus's story is dramatic, my experience as a therapist is that most [00:33:00] of us at some point in our life are faced with challenges that seem beyond what we think we're capable of dealing. Whether it's the unthinkable tragedy or an ordinary day, Marcus has helped us to see that the application of Mental Wellness tools is timeless. Here are my inner challenge insights.

M.J. Murray Vachon LCSW

Insight number one. Our bodies often give us the first hint that our mental wellness is going to hit the banks. Our shoulders get tense, our stomachs feel

queasy, our palms begin to sweat. Turn your vision towards your bodily cues and calm yourself with a little bit of breathing. Make it simple. Just see the ocean in your mind, and breathe in and out.

M.J. Murray Vachon LCSW

Insight number two

Do you downshift on Friday and most days after work? We live at a hectic pace. To cultivate mental wellness, we do need to intentionally downshift [00:34:00] and build in play and rest. Take in a movie, dinner with friends, go bowling. Go for a walk, play some pickle ball. Read a book, give your mind and heart some fun.

M.J. Murray Vachon LCSW

Insight number three

Who would've thought that taking out the trash would be a mental wellness tool in fighting rumination. On second thought, we could think of it as taking out our mental and material trash all at the same time. It's a twofer.

M.J. Murray Vachon LCSW

Insight number four

Next time you have a situation that makes you emotionally distressed, sit down and write about it for five minutes. Then get a cup of coffee and write for another five minutes as if you were a fly on the wall or from the other perspective of the other person involved. Now watch for changes in your body. Do you feel a bit calmer, a bit less wound up? Look for changes in your mind? Do you become [00:35:00] more understanding and less self-righteous or self-blaming? Give this a try. No grades for punctuation or spelling are given

M.J. Murray Vachon LCSW

Insight number five

If you're helping to raise our young people, be it through parenting grandparenting, teaching coaching, or whatever, remember one of your superpowers is being a perspective giver. In the worst moments of his life,

Marcus was guided by these mental north stars. "Change the things you can," said his high school principal and the Bob Dylan song Lyric, "Negativity don't pull you through." We never know when our young people will reach into their mental wellness toolbox for wisdom given to them on the fly.

M.J. Murray Vachon LCSW

Insight number six

If you want more information about subjects discussed on this podcast, check out episode number one on mental wellness. Number two on Notice. Number 12 on Psychological Intelligence. [00:36:00] Also, don't forget to check out Marcus Engel's podcast called Compassion and Courage, as well as the books mentioned on today's podcast episode.

M.J. Murray Vachon LCSW

Thanks for listening, and as you move through your week, be compassionate and courageous, and turn your vision inward to cultivate mental wellness. This is your Inner Challenge.