CASAT Podcast Network.

Welcome to season five of CASAT Conversations, a holistic look at mental health.

Join us for a series of thought provoking conversations that delve into the vast dimensions of mental well being from the intricate link between physical, emotional and spiritual aspects of well being to the latest scientific research practices and therapies.

We navigate the multifaceted landscape of mental health together.

We hope you enjoy today's conversation today.

I am delighted to welcome Dr. Tanya Crabb, senior Psychologist at Kirk Kerkorian School of Medicine.

For sure.

It is.

It is welcome, Dr. Crabb.

It's so nice to have you here today.

Thank you.

It is an honor and pleasure.

So as we get started, please share with us a little bit about yourself and why the why you do the work that you do?

Ok.

So I am a first generation graduate Jamaican immigrant, marine corps gulf veteran, wife, mom, comic book enthusiast, and a very strong advocate for mental health.

So the reason I do the work I do is because many, many years ago, when I was going through my own challenges, I ran across this wonderful human who through conversations with her.

It was, it was life changing.

It was a game changer.

And I was like, oh my gosh, this is a thing that exists in the world.

Like there are people out there who exist to support other people in their mental health.

And I was like, I wanna be one of those people.

That's awesome.

So it sounds like a light bulb went on for you in that moment.

And this is how I want to spend my life, you know.

Yeah.

And, and the big part of it is, you know, growing up Jamaican, growing up in Brooklyn, um mental health wasn't one of those things we did.

It was just, it was just, wasn't one of those things we did.

So I, I had not even realized that this was something other humans partake in.

We, when I think of a doctor, I think of the person who takes my pulse, you know, um I don't think of someone who takes my emotional pulse, I just think because I wanna take my physical pulse.

So taking the emotional pulse.

So as you know, our topic this season is a holistic look at mental health.

I'd love for you to briefly describe um what mental health encompasses and why it's important to take a holistic approach.

So for a very long time, we understood mental health to just be dealing with our emotions, however, through time, trial and error and understanding, we now realize that our mental health shows up also in our bodies.

And so it's really important to that when we talk about mental health, we talk about the whole human, not just their thoughts, not just their feelings, because certain conditions do show up in your physical form.

Anxiety can look like stomach issues, it can look like nausea, you know, and these kind of things have a compounding effect over time.

But if I'm only focusing on the ways in which it's showing up in your head and not the ways in which it shows up in your body and your body impacts the way that you live.

Am I really taking care of all of your mental health needs?

Hm.

I'm curious.

Do you think that our current medical system uh practices in this way of looking at the mind body holistically and the way I say the reason I say I is because there are some physicians who are very in tune to the idea that when a client comes in complaining about these, what seem like somatic feelings or traumatic body sensations that it could be mental health related.

There are c clinicians that realize, you know, that chest pain might be anxiety and not some sort of a coronary situation happening, you know, and then there are others that may not be as in tune that may not be as oriented towards looking for the mental health underpinnings of that physical condition that shows up in their office, you know, it may not be the first thing that comes to mind.

So, I think I, and I think we've gotten a little bit better.

I think we tend to lean medical more than mental health unless, you know, the world is on fire or something goes bad.

And they were like, oh, mental health.

So, I think we're, we're, we're getting better but I think we still have a ways to go, you know.

Mhm If you were to have a magic wand and change the system in one way, what would that way be?

Oh, I happen to have a wand but not on me.

I would absolutely wave the wand and say, think about culture because that's important, family history and first childhood experiences, whole human beings, environment.

I would just like throw all of those things into the ways in which we look at our clients that have an impact that we may not even be aware of trauma being one of the big ones, you know, that is not always disclosed, that's not easily talked about.

That may be something that's driving either the good behaviors or the bad behaviors, mostly the bad behaviors.

And if we could find a way to sort of peel back the layers so that we can get a really deep nuanced understanding of our clients as opposed to what we do now is we have this book that says, if they check these boxes, then this is what's going on with them, which is problematic in the sense that sometimes when they check these boxes, if you look a little deeper, it's like, oh, it's not this thing but it's that thing.

So I would force holistic viewpoints on, on them all.

Well, it sounds like also returning to our humanity and not treating people as checkboxes or symptoms as checkboxes and um maybe data and statistics and it's, and it's hard, but not because there aren't good humans behind it, but because the system that we're a part of does not allow us oftentimes the flexibility or the freedom to be those people.

You know, um, we had a doctor many years ago, doctor mommy, who is my favorite doctor in the world.

I felt like he knew me, you know, so he understood and for, I don't know how he got away with it, but he would talk to me for as long as I needed to talk to him during the appointment.

And that's just not the situation now.

We're just, it's, we're financially driven, not because of the clinicians, but because of the bureaucracies that they're part of.

So how do you get to know someone in 15 minutes or less?

Mhm.

Yeah.

And there's an inherent trauma in that I would imagine for the provider who goes into this profession wanting to help and heal and then to not be able to spend the time to do that can be really disheartening.

Oh, yeah.

So when I was working at one of the institutions who shall remain nameless, um, that's just, it was a big institution that served a lot of people and a lot of bureaucracy.

Um I learned this idea of moral injury, the, the feeling that I'm failing because the system doesn't allow me to succeed.

You know, and you carry that with you, you want so badly to do the best for your patients until you realize that the wrong insurance type, the the wrong does not allow you to, to give them the care that they need, you know, so that you, you aren't able necessarily to, to give them the time you want to.

But the system you're a part of does not allow for that.

So you're forced to choose between having a job, you know, and, or saying to hell with the rules, I'm gonna spend the time I need with my clients because my clients need me to spend the time with them and not everybody has the flexibility and freedom to do that, especially a new clinician.

Mhm Yeah.

You know, when you, we talked about the magic wand, one of the things that you first mentioned or the first thing that you mentioned is culture um and cultural backgrounds can influence um how mental health is perceived and addressed.

How can mental health conversations become more inclusive and sensitive to various cultural perspectives?

I think one of the things that I think is really important is to put away your perspective.

Like, you know, so OK, we go to school, we learn all of these wonderful tools that are magical and amazing that teach us how to be good clinicians.

However, you gotta find the right tool for the project you're working on.

And if you show up with a hammer and it requires a screwdriver, you're not gonna work very well for that particular project.

So we have the toolbox, but we have to depend on the client to tell us, give us the blueprint of how we need to work and what is needed to work.

And sometimes what that means is that the blueprint may be in French, which is frustrating and aggravating because despite our best interests, there's a communication gap.

So we have to take the time to listen to and understand what our clients need.

They are the authors of their life, you know, um we, we are the companions on the journey.

You know, we, they have to live with whatever recommendations that we make, we should make recommendations with a firm understanding of their cultural relational context.

You know, what works for my western lens may not work for their lens if they have to implement it when they get into their homes.

So the first step is conversation and, and understanding and just checking our our egos at the door and that we are the experts on someone else's life.

It also strikes me that beginner's mind uh is important in that.

And you know, another way to say that is client centered, but bringing curiosity to each new individual, right?

Because I love this what you said about throwing perspectives out the door because it's like, again, coming back to that check box like, oh, this person is this.

So then I'm going to respond in this way when we don't have an understanding of their life experiences.

And so it's really about that curiosity and connection that serves healing.

I love that curiosity, connection and conversation.

Yes, I love that too.

Those are some of my favorite things to do.

I I absolutely agree.

You know, um even if we're part of a culture does not mean that we are experts on that culture.

So we have to leave space for them to have nuance and different perspectives and not hold so tightly to our understanding that we cancel out their experiences within that you also mentioned adverse childhood experiences.

Will you speak a bit to how that impacts this holistic look at mental health?

Oh My gosh, this is so much, so much, so much.

So adverse childhood experiences is a survey that talks about the things that Children experience that are impactful in their physical beings, as adults, in their emotional well-being, as Children and adults.

And so the thing that I love the most about the adverse childhood experiences, which is very different from how I learned counseling, a lot of counseling is present here.

And now you know what's happening in this moment what's happening now.

But adverse childhood experiences helped you look at the scaffolding, I get to look at the foundation of the building, which is super important if I want to understand why the building isn't standing up so good.

I think that if we, if the more we know about someone's experiences growing up, the more we can understand how they became, the humans that they are.

At first childhood experiences include things like divorce, childhood, poverty, um parents who are incarcerated, parents who have mental health issues, you know, growing up in, in households that were punitive, you know, all of these kind of things that from an adult lens is like, oh these things happen but from a child could be earth shattering.

It can be destabilizing, it can set them up for for genetic conditions, it can set them up for anxiety conditions when they grow older.

You know, these I remember this really great quote from the um crow.

It said mother is like God on the lips of a child.

How destabilizing it is when that person who is supposed to be shepherding you with care is unable to provide care because of whatever is going on with them.

You know how terrifying it is to be without strong sensitive caring adults in your life.

And um Doctor Bruce Perry in his book, uh what happened to you, does a really great job about talking about how childhood trauma shapes your relationships going forward to include your relationship with yourself.

So I think Aces are extremely important to understand in order to, to help a person formulate a plan to be their best version of themselves.

Yeah, I couldn't agree more.

It's, I love how you described it, the foundation um of our, our being, right?

It sets us up for how we respond or react in the world in coping strategies that may have served us well to keep us safe and that may no longer be serving us and harming us in some ways.

And we see that show up so, so very much.

Um some of our foundations started out with crack accidents and we held it together with Plato and bubble gum.

And that tells you a great deal about how you move forward in this world.

But, but the truth of the matter is if you understand and, and this includes the clients, if you understand how you get here, then it might change where you're going.

But if you just feel like you're at odds with the world and you don't know how to respond in the world the way quote unquote normal people do, then that further stigmatizes you, it further isolates you, it further shames you.

So yeah, if you know what happened to you, you know why you're responding in the this way to the things that are happening to you.

Now, I'm curious your thoughts on a person who addresses and works to heal that aspect of themselves, right?

That has had childhood experiences and helps potentially break that cycle of intergenerational trauma.

Can you speak to that?

So, my favorite quote, it ran in my family till it ran into me.

Um I love that.

That just gave me chills at my spine.

My absolute favorite quote.

Yes.

Um We are not able to do anything about the things that we came through, but we can create new beginnings.

We can start new, healthy ways of living.

We can recognize that we don't have to hold on to the old ways of fighting.

We can move from survival into living.

That only happens if you get the support and the care and the compassion that says, OK, I get it.

This is what happened.

This is how it shaped your life.

Can we figure out what we need to do to, to be better once you know, better, you do better, right.

Mhm Yeah.

It's really without the awareness and understanding, it's so difficult to make different choices and someone to help you navigate the guilt and the shame, right?

If you come from a family of smokers and you don't smoke, you're gonna feel like, well, you know what's wrong with me and the family that you're coming from is gonna like, oh, you think you're better than us?

I look at you with your healthy lungs breaking up and there's this lack of connection, right?

When the family members go out to smoke and you don't partake in that, then there's this feeling of even more disconnection that can perpetuate.

So then the question is, how do I find healthy ways to connect that don't compromise my boundaries.

You know, it's, it is possible to do both have good boundaries and be kind, they're not separate things.

So I agree.

You know, the connection piece is lost sometimes when you, when you're healthy and also there's part of some families where you're being unhealthy, serve the purpose of the system and now you've broken out of the system and you've thrown the system in disarray.

Mhm.

And there's shame.

Right.

There can be shame on both sides, right?

It's really fascinating.

Um What are the ingredients for being healthy?

Hm.

You know, I think that's a really good question.

Um I think self love is a big one and self love is hard, you know.

Um I, I always talk about the self love bank account and how some of us are born broke.

So we, when we talk about self love, it's like, oh, either you have it or you don't and it's no, you accumulate it over time, you replenish your account, you make small deposits in the self bank account until you have enough to stay afloat.

You find good investors, you cut off certain people who have been embezzling from you.

Maybe you might have to revoke a pin number or two, you know.

So I think self love is a good step because self love feeds into your self concept, which feeds into your self esteem, which allows you to have healthy boundaries.

Um I think boundaries.

My favorite B word is a really important ingredient, ingredient.

But um, they're hard and, and, and if you grew up in a home environment where they did not exist, you wouldn't know necessarily where to start.

And a lot of families are boundary list.

You know, Children are possessions to be ordered around and not human beings who are given choices or opportunities to make decisions that benefit them or not.

So I think boundaries is a very good one.

I think connection is important because we're, we're pack animals, you know, babies die without lack of love, we die without lack of connection.

But the right type of connection, I think um often it's in any port in the storm kind of a situation and you may get to that point and not even realize that it has a hole and the roof is in danger of collapsing on top of you.

But hey, it's good enough for now, right?

Um mhm What if this be another ingredient?

Um I don't know.

I think empathy and self compassion, I think self compassion is a huge one because we're not always gonna get it right.

And you don't want to spend your life living with someone who's beating you up and that person is you, no one wants to wake up in the morning to criticism and being stared down and, and the worst is when it's you and in your brain and you can't escape you.

You are the longest relationship you will ever have the most substantial relationship you will ever have your literal ride or die.

So given that aspect of it, learning to love yourself and talk to yourself with kindness is necessary to come through this life.

There's just no other way around it.

And the reason I say empathy is because the the, the extent to which we can feel for others is the extent to which we can feel for ourselves.

And sometimes those rough emotions that come out, that judgment is really self judgment being projected on somebody else.

So if you can lean into humanity, you can lean into someone's suffering, then you can lean into your own way of, of being connected to the world.

So those I think would be key ingredients if I think of any more, I'll let you know.

Thank you.

I love that.

It's interesting.

I um I'm a health and wellness coach.

And so that means that I study and teach about behavior change.

And I actually created a behavior change model that looks at lasting change, like actual change over, you know, a lifetime.

And at the core center of it is self love.

So I think you and I speak, speak the same language or see the same foundation there.

You know, I think self love is probably the hardest concept because it's, it's a lifetime thing.

I tell people, you know, my self esteem bank, it took a while.

I had like bad self esteem credit.

So it took a while for me to dig out of my emotional hole and then it's, it's always, it's like the stock market, it dips, it rises, you know, it's something that I'm always going to have to invest in probably for the duration of my life.

And as I build my community of support because I have good donors and I'm better skilled at knowing how to invest in myself.

It's less cumbersome.

But you know, I'm not over here rolling with Jeff Bezos level self esteem, you know, II I have enough self esteem to keep food in the fridge and to keep the lights on.

So enough to help me to not hurt myself or others.

Well, and it, I this example like I'm thinking of a traumatic life experience where all of a sudden you might feel bankrupt, right?

And so how do you come back from that?

Well, hopefully you have good investors and by good investors, I mean, humans in your life with a healthy sense of self that can feed into you without bankrupting themselves, you know, um they're giving you from their overflow, they're not stealing from themselves or into you kind of place.

Hopefully, because you have had practice building your self esteem bank, you don't bottom out completely as you always have.

And hopefully, if you experience a trauma that destabilizes you and bankrupts you, you can go to your fiduciary, which is your um therapist, get a short term loan, simple so much and some good investment strategies to help you dig out, you know, um what you don't want to do is to embezzle from yourself or steal from yourself in order to prop someone out, you want to acknowledge.

You know, people, you know, bankruptcy is not uncommon and it takes a while to come back from it, but people do come back from bankruptcy.

You know, its failure isn't fatal and just because you went bankrupt doesn't mean you're not worth investing in, you know, even great companies have gone bankrupt.

So yeah, you know, with mental health providers and the work that you do, we talk a lot about compassion fatigue, right?

Like this showing up for others and how it can at times be depleting.

Um And so I'm curious like what strategies do you use to care for yourself to give yourself that love?

Oh, so I love that.

You asked me that question.

I, I like to tell people about the time I got called out because, you know, as mental health professionals are always self-care, self love, self love and then go home and be like zone it out in front of the television, not doing anything for four hours.

So I had an instance where I was like, yeah, so here's a self care strategy.

And the person said, oh, that's wonderful.

What do you do?

And I was like crickets.

I was like, oh damn.

And then this lovely human says to me.

So I make something up right on the fly, something I used to do that I haven't done in a while.

And this lovely human says to me that is so wonderful Dr. Crabb.

So next week we'll check in and you can tell me how it went with yours.

It's uh some good peer support and accountability right there, man.

I gonna have to go do this thing that I told the person I did that I have been doing.

Oh my God blimey.

So um it was a good reminder.

It was a wonderful reminder that we should practice what we preach.

So for me, self-care looks a lot like um honesty, grace and compassion.

You know, I recently purchased this thing called the rest deck by Trisha Hershey.

Um and it says things like the systems were under our trash, you deserve to rest.

Oh I love that.

So, so the the integrity and the grace comes in this right?

I'm not gonna do self-care perfectly.

I am gonna at least try and some days self-care looks like dancing in the shower of the day.

Self-care looks like a massage at the base level self-care.

Looks like.

Did I put food in my stomach this morning or have I been running on coffee since nine?

Self care?

Looks like, huh?

Did I go to sleep at a good time last night or was I watching Ted Lasso until midnight?

Knowing full well that I have a day that I have, I have things that I have to do today.

So it self care looks like how did I love me today?

And in some instances it's so funny.

I, I like to think of self care.

Like as if I'm caring for a child, would I not feed my kid until two in the afternoon?

You know, would I compromise their health and well-being and if I wouldn't do it to somebody I love, then why am I doing it to me?

Sometimes self care looks like acknowledging that I, I need to take the time off to sort things out.

I need to not cancel a doctor's appointment because I have a, a meeting that day.

You know, it's the small pieces we think of self care often as the big things.

Why I must go on a massage in a spa day?

No.

Mm mm.

It's the little things.

It's the little loving gestures that you do to yourself every day.

So for me, what self care looks like in the moment is when I get up in the morning, I play my little meditation song, then I slap on my headphones and I dance around to Lizzo or whomever else I have a whole joy playlist on here.

You know, II I drop to my knees.

I ax things out.

I spin around the room like a 10 year old.

You know, I give myself space and grace to feel and live and I'm kind with myself when I fall short.

Mm I love that.

Thank you for all of those beautiful examples.

Um I also love this like, ha having someone to call out or learning, I'll share with you that.

Um on a previous season, I was interviewing doctor Patricia Watson who has the stress continuum from developed by the National Centers for PTSD.

And Yeah.

Yeah, me too.

I love it.

I love teaching on it.

And so she's describing it and this is work that I do I teach about and she's, you know, articulating the green, yellow, orange, red.

And at the time, like in the interview, like, I almost started crying because I was like, oh my gosh, like I'm in the red and I like, hadn't even, oh, I didn't realize it until that moment, right?

So then with awareness, then I had to double down on those self care practices or self love practices because it was like, oh, I'm, I'm not doing well here.

And so there's times where it's like, oh, OK, gotta, gotta check it and maybe add in a few more.

So you know what that reminds me of?

It's like, so you're so we're, we're always putting out emotional fires of others and sometimes you haven't realized your hair has caught fire like you run around one 100% the fire.

Oh, thank goodness what?

That's, I'm fine.

I'm fine.

What is that?

Oh, that's fantastic.

Uh You are a joy, my dear.

You are a joy.

Thank you.

I, I love being here.

Thank you so much for this opportunity.

Um I'd love for you to share with us a little bit more about the mind body connection and the role that it plays in mental health.

Um uh And then I'll give you a two part question or a stack question.

Are there specific practices or activities that promote a positive connection between the two?

Absolutely.

So, um so, you know, the funny thing about the mind body medicine is, and as we're speaking of cultures, for certain cultures, when they talk about things that are happening with them emotionally, they, they usually, they manifest somatic symptoms like I have a stomachache or I have chest pains because the language of mental health isn't built in, you know, so that's where the doctors come in because sometimes someone will come in with a physical complaint that is 100% related to their mental health.

And when you ask them, you're like, what's going on in your life?

And you're like, I'm very stressed out things like I can't breathe.

I'm having difficulty breathing my shoulders and my backache because we hold our tensions in our, in our bodies.

So, having an understanding that, you know, it's all one, we're, we're one giant machine.

We, we're, we're, we're one giant machine.

All of it is connected.

You know, they learned way, way, way back in the day, back when they had diagnosed shell shock, um, that veterans that came out of the field had interesting symptoms, like not being able to see, not being able to move.

And at that time, they were like, but they couldn't find a physical rationale for it, you know, and that was the beginning of the underpinnings of learning that sometimes it manifests in physical form.

All mental health conditions aren't necessarily gonna just show up in what they say, it shows up in behaviors, it shows up in your body.

And so what we've learned over time also is that there are components in our brain that are activating and deactivating that are causing these physical sensations to occur.

You know, it used to be that depression was just, I feel sad for two weeks and they're like, no, there's actually a biological component behind depression.

The same thing with PTSC.

There's a biological component behind it.

We're now understanding that even things like the things we experience in childhood, shape our genes and our genetic structures to manifest in certain different ways.

So the idea that we can have a conversation about mental health without talking about the body.

It's a bit a bit, I don't wanna say saying that I it's, it's um it doesn't make sense, it doesn't make sense that we're dividing humans into separate parts when we are just one giant organism floating through this life, trying to make our best and simul simultaneously.

If something is going on with you emotionally, your physical health can deteriorate.

Babies have died from lack of affection.

That right there is proof that our emotional state does in fact impact our physical state.

You know, prognosis have gotten worse depending on uh of uh a mental health condition.

I'm gonna give you an example.

That was very weird but very cool.

I'm not probably gonna say it wrong, but I'm gonna go ahead, forgive me, Doctor Bruce Perry.

Um So there is this one child he describes in the book that has um diabetes and she was hospitalized for a while and her sugar levels kept fluctuating and the doctors are like, she must not be being honest about reporting whether or not she's taking her medication or eating certain foods because it doesn't make sense that, that we're not able to stabilize her insulin while she's hospitalized.

And what does this mean?

Well, when doctor Perry showed up, he noted that when an ambulance passed her room, it changed her body physically, it impacted her insulin.

Like so because for her, an ambulance was representative of a trauma that she had experienced.

So it would legitimately change the way she showed up on lab results and tests because of her body's response to this trauma.

And we know that about trauma, we know that trauma in particular can change the ways your body secretes chemicals in your brain, which then in fact impacts your memory.

The same stuff that keeps you ready for fight or flight is also the stuff that trick drink your hippocampus.

So we already know that emotional states can in fact impact our physical condition.

And we know that our physical conditions are oftentimes a representation of what's going on with us mentally.

There shouldn't be a question of whether or not these two things are connected.

We know that they're connected.

We've done enough lab tests to know that.

How do we handle those mind, body connections?

I said, you know, one of the things and we talk about mindfulness all the time and like when I was in Hawaii, they'd roll their eyes at mindfulness, not because they didn't believe in it, but they're like, you know, how many ancient cultures have been doing this for like 100 years and like, and suddenly now it's, it's considered good mental health because someone did a test and decided it was a good thing, you know.

Um So we're not always present in our minds and we're not always present in our bodies.

We are not always aware of our experiences.

And I think slowing down to first understand what's going on in your body so that you can determine what the need is.

And that includes our emotions.

What I need when I'm scared is very different than what I need when I'm sad and very different than what I need when I'm angry.

But our emotional vocabulary feels so shrunken.

You know, I'm angry.

Are you angry?

Or are you disappointed?

Or are you hurt?

Are you embarrassed or you ashamed or you filled with regret or are you grieving?

You know what you need when you're angry is different than what you need for any of those emotions.

So trying to be fully present in our bodies so that we can know who we are in our body.

And then I'm, as I speak, I'm convicting myself because I had this very conversation with Doctor Wiseman where I said, you know, I recognize that at 53 I have not yet.

I don't think that I fully understand my body.

You know, we're so used to shutting down the signals like hunger sleep.

Like we're so used to overriding the systems like we don't even know when the alarms are going off anymore.

So mindfulness being present in your space in your body and your mind is helpful, being present in your body and moving your body like yoga.

So yoga you know, has been around forever and then we've done tests.

Now we're like, oh good yoga counts.

We can do yoga.

You know, and the thing about yoga is, um, it isn't even about the posing, it's about the presence and the breathing.

It's about getting connected to feeling our bodies again.

Even if it's just to say, oh, that hurt, you know, stretching, checking in with yourself physically and emotionally.

You know, the, these are, these are small ways in which we can regain our center being more immersed in your environment and your life.

You know, how many conversations have gone on that?

That you're like, wait, what?

You know, how many times have you driven by something like, oh my God.

When did that tree get there this whole time?

100 year old tree, they must have transplanted that.

Where did they do that?

10 years ago?

Like, you know, um we spend a lot of time in autopilot.

We don't really even sit down and enjoy our food.

It's just another task that we have to complete and we tell ourselves we cannot rest until we've earned it or until we're weary.

And that is insane.

And, or, or the lie we tell ourselves is we fill our cup so we can put stuff in other people's cup.

Do you realize your cup will still be empty again?

You realize you are not filling your cup to share like you will still be thirsty.

If you're pouring out everything in your cup to other people and just refill you, why don't we just put a hole in the cup because, because, because, because there'll be nothing left in there for you.

You know, we, we, we told ourselves that rest is a reward and not a requirement and not a divine, right?

And we've bought into this system that says, you know, your worth is wrapped up in how much money you make.

I, I heard this great quote when I was younger, I was judged by letters and when I became older, I was judged by numbers.

And we forget in the end, none of this matters.

No one's, you know, there's, there's nobody's paycheck that's written on their tombstone.

Here lies Jane Doe.

She made a million dollars over the course of her life.

You know, your bankers won't visit you at your grave, you know, so check in with you, check in with the people you love, checking with this world that you haven't been living in because you've been living in.

Yeah, I'll just say for listeners, uh Doctor Tanya Crab is pointing to her head that we're living in our head, not in our full bodies.

Get out of your head and get into your life, man.

Mm I love that.

You know, I'm struck by a few things and that is coming back to really where we were talking about self love and then integrating this mindfulness piece, something that I use a lot um with myself and clients is what's called for right now because it helps us to tap into the wisdom of our bodies to acknowledge and give space to what's living here, right?

What, what emotions are present, what life experiences am I carrying with me?

Um et cetera, et cetera.

But it's, it's this beauty of like, I guess I come from this lifespan perspective, right?

So we're kind of moving the full gamut today as we talk about the foundation and Aces and then growing into an adulthood and learning to have this beautiful, hopefully or, you know, tyrannical relationship with ourselves.

Um, depending on where we're at.

Um, yeah.

Well, and, and also like getting to know who you are, we have so many different voices telling us who we are.

Oh, especially if you're a woman.

Like, oh, especially if you're a woman.

We haven't.

When was the last time you sat back and asked yourself what makes you happy?

What do you need, what brings you joy and even more?

So, what do I need in this moment?

Like when I get up in the morning instead of thinking about what I need to do, maybe what do I need to be in this instance in this moment?

What do I need?

Mostly coffee but, but also sometimes quiet.

I don't, I really don't think we know ourselves as well as we could because I feel like from you become older than five, then everyone else's opinion of you matters more than your own.

Mhm.

You know, I, I'm embarrassed and not embarrassed if I wanna say it anyways.

I, this may sound really derogatory but just yesterday I was saying to a friend I really need a wife, like, because I'm like, I need someone to help me take care of all of these demands.

Right.

Like managing children's schedules, uh, just got a new puppy work demands.

Um, making sure all the groceries are here, the dinner.

Like, it's just so interesting and it's the way that we're socialized in so many ways because if I'm not doing it right, then I may feel a lack of worth.

Um It's so I'm glad you brought up women.

You know, I I think it's important that you mention that because it's so here's the thing, right?

We need a wife because no one has taught us that we need a partner because there's nothing that you mentioned there that someone with testicles couldn't do.

I hope that's ok to stay on the radio.

So sure, why not?

But I think it's true.

I think we have been conditioned to believe that we are the keepers of the knowledge.

I was talking to someone.

And I said, you know, when we had our son, there was this expectation that I knew more about raising a child than my husband.

But he arrived at the same time for the both of us, like literally the package came for us at the same time and I did not like get any sort of matrix level upgrade when he was in my stomach.

So, wouldn't that be nice?

Yeah.

Yeah.

So, so there is, so there is the societal expectations that we carry forward and the reason we carry for it is because there's this little shame piece.

Right.

I'm supposed to know these things.

I'm supposed to know all.

How, how, when did, when did, when was this master class that made me more capable?

And it's the same with guys, like, he's supposed to know how to fix the car because they teach that in grammar school.

Like, you know, this rigidity of this understanding around roles is crippling, you know.

And this idea that if you outsource it, you're less than the mother real talk.

If I could have afforded nanny, I'd have had a nanny.

Heck with that.

I have been all Nanni up.

You'd have been on vacations.

We would have been having the best time.

Me, nanny and baby, you know.

Yeah, we don't have to carry it all and all those pieces that you talked about, you know, and then that they can be outsourced and should be able to be outsourced to a competent human being who doesn't necessarily have breasts.

Uh, they're not magical.

They don't come with any special abilities.

And if they did then maybe the bigger ones have more abilities and the little ones, I don't know, someone can do a study on that and, and part of being a woman is being the condition to care for everybody.

But you like you're five and they hand you the thing, the peas and poop and it's like it's your responsibility now hands him a nerf gun.

Go conquer the world.

Mhm.

Yeah.

It's fascinating.

It, it's such an important piece of this conversation.

Yeah.

Gender plays a huge role in who we think we are and how we move in this world and I'm glad that there's more fluidity.

Mhm No pun intended there.

Hm I do love that.

Uh So I have one.

Well, I have two final questions.

Um We talked a little bit about sleep and you know, the food that you're nourishing your body with movements.

Um These pieces of our lifestyle, our daily habits are often linked to our mental well-being.

Um How can lifestyle factors be optimized to support good mental health?

I am so glad you asked.

So my favorite subject is sleep because sleep drives train.

If you are not sleeping, you can't control your mood, you can't control your appetite and your brain is literally not forming new memories.

So um there's this great, very important, this great neurologist who has this podcast of what happens or he just is what happens to your body and your brain when you're not sleeping.

And he called being awake, low level brain damage.

Oh my gosh.

I love that sleep literally can like it increases heart attacks like it it can infect it can affect your fertility.

It has this thing where it builds up these things called beta amyloids that, that lean towards Alzheimer's like sleep, drive the train.

So if you're a person who's not sleeping is like, oh dear lord, I'm doomed, know that you are not doomed.

You know, it's the small incremental changes that matter.

You don't have to conquer all of these things overnight.

You know, you don't have to go from, I'm not eating coffee, I'm not drinking, I'm not eating until like noon to, I'm gonna have a pizza for breakfast.

It's the small things.

Can you put an apple on your desk?

A granola bar?

Can you have one in your purse?

So that when you remember to eat, you can eat when it comes to sleeping.

Can you learn about and practice good sleep hygiene?

So that the place where you sleep is set up to help you sleep your best or improve the quality of your sleep.

And if you struggle, can you go get a sleep study to make sure you don't have sleep apnea or something else that's standing the way if sleeping is if, if stress is the thing that's prohibiting you from sleeping, can you get support to lessen the load so your brain can do the job that it's built to do, which is to take care of you and to keep you healthy in terms of movement, you don't have to go run a marathon.

That's crazy talk.

You, you know, you could dance around your kitchen, you could just wiggle with it.

You could put on Taylor Swift and shake it off like like you can find a three minute tiktok video and learn some moves.

You know, if you are not a dancer or you're like, oh no, someone might see me dancing.

You can just stretch your body out, get back in touch with those achy parts.

Here's another piece you can do.

If you have achy parts, you can go see a doctor about your achy parts.

You don't have to accept pain and suffering as part and parcel of your life or being older.

That is a form of self love too.

Doctors visits are a form of self love as our dental visits.

It's the small thing.

It's the very smallest things that you do.

The question is always how can I love me more?

Am I loving me more?

What would it look like to love me?

And if you're like, I don't have time for all these things.

Ask yourself if it were someone you love?

Would you have time then and then ask yourself, aren't you supposed to be someone you love?

Oh, very important.

Meaningful questions.

I'm imagining them like on a little on a wall.

So you can check in each day.

Absolutely.

Check in with yourself every day, your mind, your body, your spirit, your emotions, you know, when they show up, talk to them have curiosity around them and recognize they are just passing through, you know, they don't live here, they're just visitors.

It's ok to acknowledge that they exist.

They're not ghosts.

Hm.

Yeah.

So my final question for you today is as we wrap up, is there anything else that's on your heart or mind that you want our listeners to know or understand today?

So I totally forgot one last piece and I'm not saying this to Shell.

Um But I'm also an author.

And the reason that I mention being an author is because I feel like everyone has a story worth hearing or telling.

Maybe it's time to rea your story, maybe it's time to beau the story of your life.

Whatever chapter you are in there is always an opportunity for a plot twist, your story matters and you are the author, trust the author and make it epic.

Well, thank you, Dr. Crabb.

I so appreciate you being here and I already named it.

But what a joy to have you with us.

Thank you.

I have had the absolute best time.

I love this.

This is wonderful.

Thank you for giving me an opportunity to share.

Thank you for listening to CASAT Conversations, your resource for exploring behavioral health topics.

We hope you found today's conversation timely and meaningful.

Please share this podcast with your friends and colleagues.

If you want to learn more, visit us at our blog at CASATondemand.org.

CASAT Podcast Network.

This podcast has been brought to you by the CASAT Podcast Network located within the Center for the Application of Substance Abuse Technologies.

A part of the School of Public Health at the University of Nevada, Reno.

For more podcast information and resources visit CASAT.org.