

Hi, good afternoon, everyone. Welcome. And thank you for attending this integrative medicine workshop. I know that you had some choices today. And so Stephanie and I are excited that you came here to join us to just talk a little bit about mindfulness and how that can impact Sud right. That's why we're here. So, um, let's get started. Okay. Hopefully, we'll have some fun today. And I will try to make this as interesting and exciting as possible.

All right. So first, of course, the needed disclaimers. So, this certifies that the views expressed in this presentation are the authors and do not reflect the official policy, Department of the Army, Navy, Air Force, the partner, government. Okay, so my name is Lynne Vance. I am the integrative medicine nurse working at Walter Reed. So I serve many functions at the facility. But basically, I work in integrated pain management, and also doing some telehealth. And my primary specialty, especially as it relates to as Judy and my work at Walter Reed is movement therapies. I also do a little bit about Integrative Nutrition. But that's a topic for another day. Stephanie, I'm so excited that she's here today. She's a really dynamic speaker. She's completely excited about her subject matter. And we're excited to have her here. She and I know each other from our doctorate studies we were in, we were colleagues in the program together. So let's start off. Before I get started, I also want to say, if you guys have any questions, if you put them in the chat, I will try to keep track of that. I'm just going to introduce the topic of mindfulness. I'm going to turn it over to Stephanie. And then I'll be back to talk a little bit about the movement therapy and Tai Chi.

Okay. So, as we get started, we want to just talk about, broadly, what is mindfulness? Right? And so how does that I think a lot of different people have different sort of concepts in mind. And in the spirit of honoring sort of the origins of a lot of integrative therapies, we're going to I'm just going to talk a little bit about where the concept of mindfulness comes from. And then throughout the presentation, Stephanie is going to discuss mindfulness as it relates to social connection. And then I'm going to come back on sort of the second half of the presentation and discuss mindfulness as it relates to movement. Right. So, as we can see here, on concepts around mindfulness do have their roots in a Buddhist meditation practices. Right. So, this has been going on for a very long period of time, which is a little bit different than how we think of its day. But the origin has this strong ethical and moral implications, right. So, this is kind of the framework behind which mindfulness kind of became rooted, I would say, in human existence.

So, the core teachings in Buddhism are rooted in the Four Noble Truths. The first of which is that the human condition is marred by suffering, right? So Nothing's ever easy. And then most of that suffering is self imposed through behavior such as, or thoughts or patterns, such as ignorance and delusion, desires aversion. So we start to see how concepts around mindfulness begin with this theory that, you know, we impose this on ourselves, that what is reality is framed a lot by how our minds work, right. So then the third noble truth is that stopping a suffering is only possible by letting go of attachments. So this can have many forms, it could be a mental attachment to things, it could be a realization that, you know, my view is different than your view. It can be physical attachments that people have to things and objects. And then the fourth noble truth is that the way to letting go through the eightfold path and then this is where we start to sort of hone into where we're thinking of meditation now. So you can think of the past as the physical means to ease suffering or to deal with the noble truth or to avoid that all of life is suffering, right.

So the Eightfold Path is divided up, I was talking about the moral and ethical implications right into Epic's concentration and wisdom. So the ethics of the eightfold path are right speech, right action and Right Livelihood. And I'm just going to skip through these pretty quickly here. The concentration portion deals with right effort, hears that word mindfulness and concentration. So when we're thinking of these concepts around mindfulness today, we just want to keep this sort of distance. This is where we're sort of routing our framework for the rest of the day. Right? And then the wisdom part of the Eightfold Path is right do and Right Thought. So most people today nowadays think of mindfulness you may be think of Jon Kabat Zinn, right. And so his definition of mindfulness is that mindfulness is awareness, that right that arises through paying attention on purpose, in the present moment, non-judgmentally. Right. So it relates to a state of being, rather than something that you actually do. Right. And so that's why this concept of mindfulness can be applied across multiple disciplines or multiple interventions. You know, there's mindful eating, there's mindful movement, there's mindful thought, you know, so this is a it's a very broad topic. And it's something that can be applied to many different behaviors. So it's more of shifting your I want to say maybe your framework away from sort of an existing pattern that may be some form of self-imposed suffering, I don't know maybe, right.

So around 1979, Jon Kabat Zinn created this eight week program, which is now known as mindfulness based stress reduction, right. So that's a lot of the root of the present-day principles of what we refer to now as mindfulness. So if you think about the his definition of paying attention on purpose in the present non judgmentally, you can see how that sort of patterned after the Four Noble Truths, right. So my mindfulness based stress reduction is often presented as a treatment. But the actual focus is more related to transforming the patient's attitude toward their illness, rather than a specific technique, or way. So just keep in the back of your mind throughout today, as stepping in are presenting, we want to mindfulness can be incorporated into almost anything, right. But we just want to keep in the back of your mind that it is a way of being more than a specific thing that we're doing. Alright. And, with that, I'm going to turn it over to the fantastic Stephanie Gottschalk. Stephanie, you can take it away.

Thanks so much, Lynne. Welcome, everybody. Thank you. I just want to echo Lynne's thoughts. I so appreciate all of you taking time to expand your knowledge about mindfulness and holistic and integrative practices within substance use disorder treatment and recovery processes. So thank you for being here today. I am a licensed acupuncturist. I practice acupuncture at an integrative health clinic in Fairbanks, Alaska, which is where I'm located right now. And I also am a faculty member at the Pacific College of Health Science where I teach a positive psychology influence class called the psychology of human performance in the Master of Health and Human Performance program.

So a lot of the material that I teach in that class is centered around this concept of mindfulness. And I so love that Lynne started off talking about the Four Noble Truths and this concept of non-judgment and non-attachment to emotions, and feelings and thoughts as they arise, right? A lot of the like, kind of miss thinking around this idea of like positive psychology or mindfulness interventions is that they're just happy, cheery, go lucky, you know, like [Indiscernible] all the time. Right? And that's certainly not the intention, as I think Lynne spoke to pretty eloquently in the description of the Four Noble Truths, you know, we're here to, to experience it all, in in the present in the moment, mindfully without attachment without judgment, to whatever is arising in that moment. And that's going to become pretty clear why that's important.

As we go through our presentation today, and just when With You know, there are going to be some, like, I'm going to talk a little bit about increasing, like positive emotions. And again, that's, that's difficult, right? Because we're coming here we're talking about the importance of like non judgment and non-attachment. But then we're using words like positive, right, or like things that increase our well-being. And just keeping in mind that we don't necessarily want to be attached to that as like the ultimate outcome. But we do want to work on increasing that right, especially in patients as they're moving through their recovery process, like we do need to be introducing things that are helping them to regulate the nervous system, help interrupt, you know, like maladaptive cognitive processes, and bringing about sense of, of some of those more calming restorative helpful, physical and physiologic responses, right.

So we are going to start with a little meditation. So I'd like to invite each of you to get settled in, we'll do a little bit of a meditation. I'm going to lecture for about an hour and 15 minutes or so. So we'll take our break around. I think it's 2:30 is the time for you all, we'll take about a 15 minute break, and then we'll come back, I'll probably have a little bit more to present on and then we'll jump into Lin talking about both Qigong, and Tai Chi practice. And then she's going to share a Tai Chi practice with you all.

So a little bit about the meditation that we're going to do. It's just a mindfulness, it's an invitation to bring yourself physically, present mentally present into this moment. And there are two aspects about why mindfulness meditation is so helpful. So there's that first piece of bringing us aware to the present moment, just drawing awareness. So you'll hear me cue a little bit about that. That's a really significant and an important place to start with patience with yourself, anybody who's like initially Beginning the journey with a mindfulness practice, if we're just coming for that awareness, focused attention in the moment, that's absolutely okay. What I'll then do is bring us back to that with some guided intention to invite you into like a little bit of open monitoring, right, like having an awareness of what are the emotions that I'm feeling associated with my present attention to the present moment, and then experiencing those without judgment, that's a little bit of the next step, it's a little bit more of an advanced step.

When it comes to a mindfulness practice your patients depending on where they're at in their timeline and journey with the recovery process, may or may not be ready for that. And it just may be more beneficial to just focus on that focus attention. That's something that can also just be used in any in any moment, right, where we're having a little bit of like hyper arousal, or distress, just having a having a moment to like slow down, check in and be a little mindful with ourselves.

So I'm going to invite everybody to you can close your eyes, I'm going to go ahead and close my eyes during this portion of the presentation for the purpose of meditation. I'm just going to draw my attention to the breath. You may have had a busy morning and afternoon rushing around bouncing between different rooms dealing with technical issues in life. But right here, we're just here. To take a moment to kind of check in and be present. Noticing where you feel yourself sitting in your chair. Or maybe you're sitting on a couch or stool. Maybe you're at a standing desk, can you just notice how it feels to be still in your body. Noticing where you see your feet touching the ground. Maybe you notice the sensations of the shoes that you're wearing, or your bare feet on the floor, Noticing your hands, perhaps they're resting in your lap, where they're resting on the table or desk or wherever you may be seated in this moment. Again, bringing your awareness where yourself where you feel yourself seated, comfortably supported. Nowhere to be but here right now noticing any sounds in the room? Maybe you

hear a clock ticking. If you hear a coworker down the hall or a family member. Think smells, maybe you smell coffee, maybe your tea maybe you have flowers in your office or space and again, noticing where your feet are touching the ground, where you feel your seat comfortably supported. You notice the sensation of your clothes and how they are on your body. Maybe you notice the temperature of the room on your skin be you feel the rise and fall of your chest and shoulders as you inhale and exhale a little more intentionally, a little more deeply. Now start to notice what sensations you're feeling in your body. How is your heart? How is your breath? What is your face doing? Are your hands holding tension anywhere? Do you feel any physical discomfort sitting here? Can you notice that discomfort without judging it? Or analyzing it? Or hoping to fix it?

It's noticing that sensation in your body today. Just right here and right now. How is your breath? Is it shallow? Is it rapid? Is it slow? Is it deep? Just noticing and observing, taking stock. No judgment. No need to correct. Just taking note of how you are experiencing being in this moment. Are you having any thought? Are you having any emotional reactions to anything that you're drawing your focus attention to? Do you feel happy to be in a very comfortable chair? Do you feel irritated at the sound of your coworker down the hallway? Do you feel frustrated by the ticking clock? Do you feel grateful to be in a warm safe space right now. Just noticing and observing those feelings. They're neither right nor wrong, good nor bad. They're just a feeling and they just reverse out this moment. This fleeting experience of this moment. They don't need to be attached to when you felt that way before in the past. They don't need to be attached to anticipation for feeling that way in the future. They're just feeling.

We'll sit in silence for another moment together just noticing and now, as we bring our meditation to a close. Let's each bring to mind someone for whom we are deeply grateful. Can you see their face Can you hear their voice and you picture what it feels like to be physically near them How does your body feel thinking of this person for whom you are deeply grateful? Have your posture changed? How is your breath How is your heart take two more slow intentional breaths with the image of this person in our minds, maybe you feel a smile at the corner of your mouth as we come back to the room gently blinking open your eyes if you had them closed and coming back to the shared space together. How's everybody feeling? Fantastic. wonderful relaxed. Amy lovely. Did you notice any changes in your body as you brought to mind the person for whom you're grateful? Yeah. It can be really powerful to be present. Right? Thank you all for taking the leap to be in a meditative practice and shared space with me and your colleagues here.

There's so much benefit to just really, really slowing down right like I'm sure you were noticing not only this emotional effect, but probably also a physical effect, I noticed that my shoulders rolled down. I started to feel a smile on my face tension relief from my face. As I was thinking about the person for who I am deeply grateful. I felt an expansiveness in my in my chest, my breathing became more even. Yeah, so we combined a couple of different aspects of what we're talking about today with this practice. I'm so happy. You're very welcome, Clark. It's a nice way to start a meeting, I typically start the class that I teach with a with a brief mindfulness, little meditation. And often it will just take a different tones depending on where the day is going. But I wanted to introduce these kind of three concepts to each of you today with in that meditation.

So first, was that piece of being focused, right? Like noticing? What are you experiencing through your senses, and I'm sure many of you who if your mental health clinicians have used some type of practice like this, right? Like, like deescalating hyper arousal coming into a moment of, I feel this, I hear this, I see

this, I maybe smell this or even taste this, right. So like checking in with those senses and bringing focused attention into this moment. The next piece was that open monitoring, right? So like looking at sensations, physical sensations, emotional sensations, cognitions and just observing them right? The goal of meditation seems meditation can often seem so unattainable, right? If we think that that goal is to just clear our mind or like not have negative thoughts or uncomfortable emotions, right? Like that's not It's not humanly possible, really to like not experience those sensations and emotions, right? We're human beings, with complex lives and rich tapestries and histories of experience and being in that place of non judgment with what it is that we're experiencing, removes that suffering that when we're talking about in the past eightfold path and the noble truth, right? Like life is experienced. And we're just going to move through that.

Oh, yeah, thank you the opening meditation slide, I took this photo, this is near in the mountains near where I live in interior Alaska. So also just a very peaceful photo. And then I'll just get back really quickly. So here's my disclosure similar to, you know, the top of the lecture. I have not nobody in my family has in the past 12 months, or do we expect to have any financial relationship or gifting kind of industry relevant to the subject matter of this presentation, I simply love this subject matter so much. And I'm just honored to be able to be here and share it with you all today. So the first piece about was the final gratitude practice and gratitude as it pertains to being in connection with a person who is significant and meaningful in our lives.

So I'm going to talk a little bit about that towards the end of my presentation today. So that was like a three fold, you got like a comprehensive little meditation introduction right there. So based on where you're at, in your own practice, or where you would like to be with your client, or patients in their mindfulness practice, it's really easy to kind of just start with that place of being attentive focus in this moment, right? You know, that's part of downregulating, and coming into more of a state of calm and present when we're neither overly attached to like outcome, or fixated on things from the past and just being present in the moment. And then the gratitude practice, we'll talk a little bit more about following on.

So why are our mindfulness practices so important in recovery and relapse prevention? Right, so this piece of judgment, excuse me, this piece of non judgment is so integral, right? Like, there's so much that your clients are working with, not only in their own, like physical or, you know, experiences of being in recovery. But there's a lot of social stuff going on, too, there's a lot of stigma, there's a constellation of like, uncomfortable and difficult emotions that can come up in that process, right? Whether or not it's self imposed, or socially imposed. So practicing in in, in like a very safe way, Justice activity of non judgment, you know, it's a little bit safer for me to start practicing non judgment, if it's about, I noticed that I feel irritation about somebody who's talking when I would really just like to have a peaceful meditation is a little bit of like a nice place to start versus, like, I have like deep shame about something that happens that like led me into seeking recovery, you know, we want to jump right into that when we're looking at being mindful, non judgmental around our emotions, we want to start small, just like any kind of a training program, like we physically train ourselves, we physically do activities repeatedly to help contribute to our physical health. We're also doing this for your mental health. And I'm sure that that you're all well aware that, you know, it's an incremental process. So this judgment or the non judgement, right is, and I think when spoke to this definition by Dr. Kabat Zinn, really just the non judgement, simply being aware of the present moment. And part of that practice does help to remove some of the experiences of shame, right, like during our meditation, I spoke to the fact that we just want

to be aware of we want to just kind of openly monitor what it is that I'm feeling without, you know, ascribing a moral value to it.

So if I'm in a place, let's say that I have, you know, maybe, like, my boss needs to speak with me, I get called into my boss's office, perhaps I made a mistake. Maybe I made a mistake at work. And that can be you know, whether or not my boss speaks to me in a kind and supportive and educational way. Or berating and belittling way is not up to me. I can only take care of like how I respond to how my boss is speaking to me, right? And so after that interaction, perhaps my nervous system is a little amped up. I'm like shifting into that sympathetic, I'm escalated, my heart rate is racing, my breath is shallow, maybe I start to then feel some shame, or self doubt or whatever uncomfortable emotion might come up in that moment. And it's pretty easy to get attached to that feeling right? get attached to that I'm not good enough. Oh, I'm such a dummy Oh, I made this mistake. And then we can start going into the past of the other times that we have felt this, we can then attach to the future times in which we will probably feel this again right if we follow this cognitive distortion right like this, this attributing who we are as a person to just an emotional experience, right. So being in the present moment, and having non judgement of I am feeling shame. I am not shame, I am feeling shame is a very different experience, right. So just having that awareness saying what the feeling is and just noticing that you're feeling it, while also not like shaming yourself for feeling it, right.

That's another important piece around mindfulness. And these noble truths and meditative practice is that we don't want to judge ourselves for having, you know, quote, unquote, a negative emotion or an undesirable emotion, like, we simply just cannot always be feeling joy, ease, comfort, pleasure, happiness, like, that's just not physiologically possible. Nor is it you know, reasonable in the human experience, so we don't want to judge yourselves when we have those emotions, right? Like, there's so much toxic positivity, kind of being out there and self-help and in pop, pop culture around, like, just be happy. And, and we simply can't. So we remove that shame around these undesirable or uncomfortable emotions, we then allow them to, like be named, right.

Dr. Brene Brown talks a lot about that in her work on recovery. And you know, how, like in secrecy, and Shame were things are not named, they then kind of become something that we grapple with on our own. So enable and be able to name it and just experience whatever emotion comes up. Maybe it's an ugly emotion, right? Like, we all have different ideas of what like, a desirable or an undesirable emotion is, but without like judging it or labeling it, we're able to better just experience it as a moment in time as like an ephemeral experience, right? Like emotions are not us. They're an experience that we have. So removing shame, is an important part in recovery process, of course, and then just like, you know, enjoying life and being successful and pursuing what it is that we want. I've talked about bringing that awareness to the present moment and the kind of curiosity right and self acceptance, you know, I feel shame, but I am not a shameful person, I made a mistake, I can take steps to rectify it. You know, rather than chasing that, like the rabbit of an emotion and thinking that it's definitive of who I am, it's just an experience that I had. It's also really great to have that physical check in with the body, right, you know, noticing my heart is racing, my breath is shallow, because I'm experiencing an uncomfortable emotions that can that could feel a lot like anxiety, right? Like that can start to feel a lot like a panic attack, that can probably start to trigger a craving, right? So if we're like looking at ourselves in our physiological experience, from like, a curious way of like, Ooh, okay, my body's responding to a stressful response. In fact, it's smart that my body responds to a stressful response to like, try and protect me. But let me go ahead and understand that I'm not actually being physically threatened right now. I can work with what

I'm feeling and then move forward with it in this way, by tending to my physiological response to an emotional reaction, right? Like, in a nonjudgmental, loving, self-compassionate way. So having this curiosity and self-acceptance Oh, I feel very irritated right now. Oh, interesting. Oh, I feel like very serious with my spouse right now. Oh, how interesting. Like, would it be lovely if we could just be that calm about it, but that's the goal, right is like to start looking at these emotions and, and being curious, you know, in, in, in therapy and in, in kind of self-discovery processes, this curiousness and self-acceptance around the processes is key to success, right? And, oh, I backtrack, just because I got excited and that physical check in with the body, right? So like, also being aware of what's my posture? Am I like, ready to go, you know, MMA fighter plating, am I ready to, to get out of there? You know, and that's something that we can immediately impact, we can immediately make the choice to affect our physiology with a nice deep breath that's going to take you know, bring the shoulders down.

This is something that I love to talk about with my patients as an acupuncturist. You know, there are, there are acupuncture points that are used to stimulate motor points and trigger points in different muscles right in the face, and in the upper trapezius muscles all over the body. But I like these in particular, because when we have like, a scrunched-up face or a scrunched up posture, right, like we're sending a very clear signal to our nervous system, that we need to be ready. Like we need to be in this kind of fight or flight you know, sympathetic state by using, you know, breath, mindfulness, or acupuncture treatments to like help release that physical tension were then in fact, affecting our own like biochemistry, right and like inviting us to shift and downregulate into a parasympathetic state. So it's really nice to also just check in with the body. Another important reason to like have that physical check in with the body is like, Am I hungry? Have I like is my cortisol elevating because I am hungry. Am I over caffeinated? Is that where my heart is Racing? It's not because I'm having A panic attack, I just have had a lot of caffeine. You know, am I so tired, that I am not thinking clearly and perhaps have an elevated threat response as to what somebody has just said to me, you know, like that physical check in with ourselves is also really great around welcoming nonjudgement to those emotional responses to our environment.

So, yeah, so we, we did a little bit of a meditation, I'm going to talk about some kindness and gratitude practices, I have put all three of those practices in a, in a document that's available to you, as a PDF, just you don't have to like go through the slides to have those available to you later, if you want to use them. I've also provided the reference, the exercises that I'm sharing with you today around kindness and gratitude come from Dr. Martin Seligman and his work at the University of Pennsylvania, and the positive psychology authentic happiness program that he runs there. So those are all there, I definitely encourage you to check out that resource if you're really interested in it. And then when we after the break, and we finish up our discussion on mindfulness and these kinds of techniques, and then we'll talk about Qigong and Tai Chi, differentiate them, and then we'll look at some practices as well.

So why gratitude and kindness. So a lot of the evidence that I'm gonna share with you today, just like really supports significant benefits to practicing kindness as a remedy to help like a lot of the stress response, and gratitude practices. And these are both really important in establishing those meaningful connections and relationships. And that's kind of how I'm going to tie mindfulness into what we're talking about today. As when, as when had preface to that, we're going to talk about mindfulness. And it's kind of like wide and encompassing, right, like every aspect of life can be approached from a mindfulness based perspective. And in the context of recovery and substance misuse, we definitely need

to be and I'm sure I know that you're all aware that like interpersonal connection is strong, meaningful, relationships are integral to that process.

So I wanted to bring a little awareness around how we can mindfully look at fostering, and building and cherishing and supporting those relationships. So some of the work that like started really coming out about the importance of strong connections is, Julie Holt loves dad and her lab, they she came out with some pretty groundbreaking work that ultimately, people who have stronger social connections have, like 50%, are less likely to die prematurely. Right. And she This is a very significant study, she looked over 300,000 participants for seven and a half years, finding a 50%, like increase in mortality in those who have poor social connections, right. So this is just looking at health measures, if we look at some other studies and subsequent work out of her lab, but she continues to do and recreate results like this, through different studies, that loneliness is a is a very high risk factor for a lot of poor health outcomes, and for negative health activities. Right. So is that why it's a part of poor health outcomes? Or is there another reason that there are poor health outcomes?

Sure, the answer is probably yes. To both right. But looking at this experience of like, poor social connection, feelings of loneliness, and not having that that healthy relationship with others and with oneself, right, so I'll talk about that as well. You know, this is this is gonna lead to negative health outcomes and activities like, like substance misuse, right, and physical activity, or physical inactivity, negative self-thoughts and feelings of low self-worth and depression, which also is a bit of a cocktail, right for like, although it's probably a poor choice of words, sorry, that's a bit of like a combination of like factors that could contribute to substance use seeking, right? If we're, if we're living in a, in an environment where we're feeling, you know, pretty low, we're having negative self-thoughts, probably about some of what's contributing to these negative health activities.

So some of the, the risks of loneliness, right, like we all know that it's not great. It actually has like pretty significant health consequences based on work by Dr. Holtlunhsatand, and subsequent work. So some of the really significant health risks of loneliness are affecting a lot of like cardiovascular health. It's affecting mental health, anxiety, depression. It's affecting, like our neurophysiology, right, like higher rates of dementia, lower quality of sleep. People who experience chronic loneliness, have more immune system dysfunction, they exhibit more impulsive behavior and impaired judgment. And a lot of this research is done by Dr. John Cacioppo and his team. They've also just continued this work on loneliness. It's something I've become very interested in, in my study of like positive psychology and positive relationships, and in my study of acupuncture, holistic health and wellness, and social connections, so I've been like, really into this material lately. But I'm curious as providers, do you why do you think that social isolation, which will differentiate or isolation from loneliness in a moment, but why do you think that these like, like subjective feelings of loneliness are, are having such significant impacts on our health?

Yeah, Lynne says we're wired to be social animals. Exactly. And that's what a lot of Dr. Cacioppo work has found, you know, he, he does work on like, the evolutionary benefits to being in in social connection, and how that preserves our safety, it promotes longevity of the species, right. I Want to Read the comments here. We want to take care of each other, but we're not always good at taking care of ourselves. When that's all we have to do. Yeah, I'm so happy that you bring up that point. Because in our discussion of practices of kindness, especially when we're working with, with a tender, demographic, right, like with, with really significant, you know, life experiences or whatever, we certainly don't want

kindness to be confused with people pleasing, right. So when we're looking at acts of kindness, and differentiating the space in which being kind to being supportive, being loving, being caring, being in connection with others is nourishing to me, is a different place than I will give and give in order to receive validation in order to receive safety, in order to receive love, and support. Those are two different things. So I really love this differentiation between like, yeah, sometimes we can be really great at taking care of each like other people. Or not take any and not taking care of our of ourselves. And there's a whole host of reasons why that might be having a harder time cooking a healthy meal when you're the only one eating. Yeah, yeah, I mean, you know, like, it feels good, it feels good to take care of other people, especially like, if you're here, and you're a provider, right? That's kind of what we are. As a group here, we're kind of, you know, we are those who give care as professionals. And so that would make sense, certainly, but it's like my feel more impetus to, to engage in these beneficial activities, if it's going to help somebody else, right.

So this is that piece to where the work around not only being connected with others, but also being in connection with ourselves is going to help interrupt that and maybe shift that process for you where it is about, oh, being in connection with myself making choices for me, and how I relate to myself is just as beneficial as making that choice about how I really connect to another person, right. So making that shift and realizing, Oh, it is beneficial, and it does give care to me when I cook myself a healthy meal. Or if I make the choice to not reach for a substance, you know, tonight where it may not affect anybody else. But it is going to affect me and my relationship and commitment to like loving and caring for myself, right? So this self connection is such an important piece that definitely gets overlooked when we talk about kindness and caring connection to others. Lynne is saying staying in their own heads with Tibet self imposed suffering. Yes, exactly. So yeah, that's another piece too, about being in connection with others. Where we, we this is part of why it can be so beneficial to recovery is to and why one of like the first prescribed activities for fostering positive relationships is acts of kindness. You know, I have when I'm talking to people about like, well, what is the remedy to loneliness? And my one word answer is kindness. And we'll talk about why.

I also want to differentiate so I use the word isolation, and said that I wanted to make sure I was distinct in the words that we're using, right? So when we're working with patients, clients, people each other ourselves, you know, whatever we, we definitely want to let you know, like patients and clients define, you know their reality and have words mean what they want them to mean. But it's important to have a shared language, right. So a lot of like what initially got me into this material was work by Dr. Vivek Murthy. So he's our current Surgeon General. And during his former tenure as Surgeon General, he was doing a lot of work and research on how to best serve his nation, right as the leader in health, and was finding that evaluating complaints around, you know, high risks of cardiovascular disease rates of depression rates of suicide rates of substance misuse.

He was he was hearing this underlying theme of loneliness. But there's such a stigma around this concept of loneliness, and there's so much emphasis, especially in our country around the ability to go to loan to be strong, to be tough, to, to, to just kind of like be able to handle your stuff on your own, you know, and there's, there's certainly a lot of, like gendered prescriptions around that too, and around the experience of emotions and needing connections with other people. So he was having a really hard time, like, until he hits this underlying key idea around loneliness. And in his work, he wants to really make sure that we differentiate between the types of loneliness, and then some definitions about loneliness. So there are three types of connections that we need in order to feel supported, loved,

nourished, and to thrive. We need to have intimate and emotional relationships. So if somebody is feeling this, this like kind of first level, right, so we look at like a, like a circle, you know, we've got, of course, we have ourselves, right was that like that connection with self, then we've got these three other layers, the loneliness, that one can feel where they're like really longing for a close confidant or an intimate partner, someone with whom you share a deep emotional bond of affection and trust, right, like, that's something we think about when we think about, you know, our supportive family member, our supportive spouse, our supportive parents, or our chosen family, right, like the people who are the most dear and close to our hearts. And key here being like bonds of affection and trust, right, like being able to trust this, this person in order to feel connected to them.

The second level of relationships that we need are these like social relational connections. So if somebody is feeling lonely in this aspect of their life, they are going to be yearning for like quality friendships, social companionship, support, this can look like kind of larger social, social circles, maybe groups that you participate in, or a sports team, or, you know, like a social circle, with shared interests. And then there's finally like that collective loneliness that somebody can feel where one is longing for a network or community of people to share purpose of interest. And Dr. Murthy talked about his own experiences with this, right? Like he, he was appointed Surgeon General, he was at the top of his career, he had deep loving, meaningful relationships with his family, and he had very significant friendships and a strong social network. And yet he felt deeply, deeply lonely. And he speaks to being very confused about that, feeling very ashamed of that, because he had a supportive wife, he had wonderful supportive parents and, and his children, everybody, he had wonderful supportive colleagues, but he still was feeling deeply lonely. And, you know, the reason that he and I, you know, we're here, Lee, speaking about these different degrees of loneliness is because we want to remove that shame piece, right? Like, it's, it's so important to understand that we need different levels of connections, and that we're all going to experience some degree of lack in in one of these areas at some point in our lives, and that there's no shame in that.

There's no need to suffer by trying to go it alone. And that it's absolutely okay to reach out and figure out ways to build these networks, right. So I know that in your work with patients and clients in substance recovery, that looking at support groups and group work, and being in connection, and like really like, like digging into preventing social isolation is really important. And this is why, especially if we look at if you think about somebody who has, you know, perhaps they're at a stage in their recovery process where they still have their loved ones very close to them, right. So they might have a very close, loving partner, who, who simply does not understand or has experienced what it's like to be in recovery, or gone through substance use, and they're not going to be able to hit two connect with that person maybe on that level. And that's why having that that relational social circle, right of like group therapy, group interventions, group check ins, you know, mentors and, and different people who can kind of relate to and understand your experience, who might not be at that closest inner circle, right? Like, they're not the person that you're going to be deeply, deeply bonded with in the way that you'll have an intimate or an emotional relationship with somebody, but there's somebody who's going to be in that social relational circle, those collective connections can be about you know, an affiliation with your with like a religious or spiritual affiliation, or feeling very connected to your professional field or your, your, your hobbies, and passion, you know, like I, I have friends who, and clients and patients who have spoken to like, oh, I can be backpacking through Turkey, but I can go to an NA meeting, and I have community there. Right. So like, that's part of that. Having that social connection, when they're

completely alone, isolated, not isolated, they're alone in you know, emotionally in a foreign place. But they know that they have community somewhere and that's like that strength of community connection is so important. I just want to check and see the three the writing here. I'm getting a note about my audio. Is that still choppy? I can hear you well. Yeah, definitely. I think the phone okay. Okay, I want to read what Kara wrote substance abuse and codependency. Yeah, alienation from themselves. Yes, absolutely. That that loss of connection to self is, is very, very significant.

Now, absolutely. And so that actually, that's, that's an excellent intro to or like that set me up. Thank you for that for that little bit reflection on like that loss of connection to self. Right. So. So this is where we definitely want to consider a little bit of like, differentiation between some terms. So loneliness, right, Dr. Murthy's definitions of the things that are pretty universal, like loneliness is a subjective feeling, right? Feeling that lack of social connection that you need, but people are probably not going to use that word lonely, right? Like this is part of the process, part of being like a team member with your clients, patients, you know, getting in there, they might say where it's like they feel abandoned, or they feel stranded, maybe they feel cut off for others, because they're surrounded by people. And that can be very confusing place because we just don't talk about this stuff. But it's normal, like we are human beings, with very complex brains and like, incredible capacity for social connection. In a world that is very different and always changing.

And, and it's just normal, like, like, we just need to normalize it. I know, people don't want to use the word normalize. But we need to, it's just a part of being human. And so being able to talk about it's going to remove that shame, remove that stigma and say, like, yeah, I felt that two people feel that people can have a sense of loneliness, even if they're surrounded by a lot of people, maybe they're missing that feeling of closeness with somebody, maybe something has happened between them and their partner, where they just don't feel that trust and affection anymore. So loneliness is subjective. Isolation is different is an objective physical state, right? Like being alone. So isolation can be a choice, it can be something that is used to in the practice of solitude, right.

So like, if we're looking at that third definition there for solitude, that's a peaceful aloneness. That's voluntary isolation. That's the time in which we do kind of isolate and choose to be with ourselves. This is, you know, this is often practiced in, in many spiritual practices in prayer and meditation, you know, in retreat, things like this, this is that space that enhances personal growth enhances that connective, or that connection with yourself. And, and can really start to be the remedy for that. You know, that codependency that Kara brought up talking about like, Oh, I'm going to take time to not connect with myself and be in a peaceful sacred state of solitude, where I'm becoming more introspective, more self-reflective, becoming creative. This is really important for emotional wellbeing actually. And so that's different than isolation. I mean, that can in and of itself, is its isolation. And isolation isn't always a bad thing. But it is a risk factor for loneliness, simply due to the fact that prolonged isolation, right decreased interaction with others, and we've seen numerous horrific effects on people's mental health right when they have been put in it isolation. And so that's, you know, voluntary versus involuntary isolation is important thing to remember too. And that's also why, you know, over the past year and a half, it's been really important to differentiate between like social distancing and physical distancing, like, we certainly do not wish to remove the social connection that we can still have while being physically distance from other people. And that's just been a really interesting thing, right sociologically to kind of observe is this concept of social distancing. It's like, I don't like why are we saying we need to not be in connection with others that's that we need that more than ever. Right now. I know that there are other breakout rooms

that are talking about that. And during the pandemic, and during more isolated periods of time, and what's been happening with substance use, you know, I've seen that in my practice and in my community. And so just keeping in mind, they're like, kind of these different definitions of things here.

So something that I think is so interesting, right, so we've talked about these physiologic effects, we talked about kind of like the mental emotional impacts of loneliness. And I'm so thank you for like popping on and sharing your thoughts like, right, I'm looking here to you like as providers to also like, like, share kind of what your reflections are on this material as well. This is an exceptional study, looking at why it's important to address loneliness in the substance use recovery process, right. Two studies done by ANA pull this up. I made little notes about it. Oh yeah. Dr. Naomi Eisenberger and her colleague, psychologist, Nathan DeWall.

So they were looking at what happens to the brain when we feel emotional pain when we feel snubbed, specifically, like when we feel like, you know, like, we are not a part of community, we have been rejected by community, and what that emotional pain looks like. And so the experience of that emotional pain to be physically to be snubbed or disregarded by somebody causes the same physiologic effect as if somebody has been physically experiencing physical pain. Right. So they they're looking at this in an MRI, they're seeing that areas where we, you know, process and experience physical pain in our brain is also lighting up and activated under an MRI, you know, image or image reduction. During artificially initiated, emotional pain is nothing. So they already knew that this happened. But what they then did was they had two different studies one study where they prescribed Tylenol to participants, so they had a placebo group who just took the sugar pill and they had a group that took Tylenol every day for three weeks. They asked the participants to self report those who took Tylenol reported fewer days of feeling social pain, right? So social pains, meaning like loneliness, and perhaps feeling more connected to others or feeling like less impacted by not being connected to others, maybe you know, so the people taking Tylenol everyday for three weeks feeling less social pain.

The second study looked at this a little bit further. And they had participants come in and sit in a simulation, where there were two avatars on the screen who were playing ball cyber ball is the name of this game that they were playing. And the participant believes the two avatars to be other participants in the study. So the two participants who are playing cyber balls are intentionally designed to neglect and snub the participant in the study. So this person is here, they believe they're a part of a group exercise of sharing a ball or playing a game together. And they're not being included by who they believe to be other participants. The people who had been taking the Tylenol every day for three weeks, had significantly less activation in both the dorsal anterior cingulate cortex and the anterior insula, where we also practice physical pain. Right? So they're taking Tylenol and they're experiencing less activation during emotional pain in in a simulated study that is, like designed to cause emotional distress.

So yeah, my saying I never knew that about Tylenol and emotional pain. It's very, very interesting. I have the studies at the end of the slide, so please feel free to follow it like they've done a ton of work to follow up on this stuff. It's just It's fascinating, like a like an analgesic, right. A physical analgesic is affecting emotional experiences of pain, which like MRIs are showing, we're experiencing the same place in our brain. So this is this is why this is so important, right? And it also speaks so the implications of se right, are talking about why if we're looking at like, opioid use, right and like, like pain management, and turning to like something that's going to physically relieve pain, in response to emotional pain, because that's happening The same place, right? Like this is a huge part of that addictive

process and has really significant implications too as to why we need to be integrating more social connection. And these interventions that I'm going to share about gratitude and kindness. Because this, this connection is so integral to enhancing health and recovery, right? It's like, by being in connection with others, right? who've seen the physiologic consequences of that. So if we, if we posit what the opposite of that is, that's, like, if you have an increased physiologic response to isolation, right? Like, again, Dr. Cacioppo, was worried about the evolution of connection, and social isolation, like, our body is escalating, when we feel the threat of loneliness to preserve us to keep us safe, it's actually doing its job. Feelings of loneliness, and, and social isolation, are, are a cue like hunger or like thirst or fatigue, or windedness like, it's telling us that we need something for our survival.

You know, and it's just so interesting that we are, we're kind of we kind of grow up that it's like a shameful feeling like it like you shouldn't feel lonely, you should feel appreciate whatever you have, you know, like, you shouldn't feel these things. But actually, that's like telling me to not feel thirsty when I have not had enough water. We feel lonely because it prompts us to then seek connection in order to resolve that physiologic distress. Right? Like, if we're looking at some of those symptoms of I don't know if I want to go I kind of want to go back to this slide here. Here we go. Right. So we're looking at this physically illogic symptoms, you know, somebody who is feeling lonely, let's say it's like an isolated incident as loneliness, right? Like I've, I've lost my friends on hiking, they have gone a different direction, I have lost them, and I am now alone, it's dark, it's getting cold, I am alone, I am in danger. Like, my sister has got a ramp up, in order to keep me safe. I need to have a heightened sense of awareness around me. So I'm definitely not going to be going into a deep sleep, right? Like that wouldn't be safe for me, I need to be aware and need to have shallow, easily interrupted sleep, when I know that it's not safe around me, I need to raise up my cardiovascular output, I need to physically be ready to protect myself because I am alone, I need to have a little bit of that, you know, that HPA axis is like kicked in, right? Like I'm ready, I'm ready to go, I'm ready to protect myself, my body is doing exactly what it's supposed to do. It's very smart in this instance, to protect me until I can then be with those whom I will be safe. The thing that happens, though, is that when this is chronic and ongoing, and no longer situationally appropriate, we then start to have this cascade of physiologic responses, right. So like, this is where we're having cardiovascular disease happen from an eight like ongoing state, right? Like, I'm worked up to talking about that experience, let alone like, constantly feeling as if that is my reality, this is going to have really, really, this is why this slide is, is so important.

And I think understanding some of the physiologies of it, right? Like, if I am in a dangerous situation, I need to it would be better for me to assume that somebody is, you know, if somebody's intention is harmful than helpful, right? Even if it's a mistake, even if they were helpful, it is better for me to assume they're harmful for my own self-preservation. But after a period of time, that then becomes that cycle of loneliness, where we are then seeing threat everywhere. Because we've malfunctioned, right, like we were at an initial place of self-preservation, and now it's becoming dysfunction because we no longer are in that state. Unless we are, you know what I mean? Like, certainly, depending on where your clients are at and their experience of us where they're at in their recovery journey, like maybe they literally did need to say like this all the time in order to survive. And that's a whole different approach to working with that demographic, right? Like whether or not it is a real or perceived threat, it still affects us physiologically, and we still need to attend to those responses in the body.

Okay, so why coming back to why does social connection enhance health and recovery? So as you as providers, what do you think, like we've talked about some of that physiology and I have some stuff here about how coming together, right, like when talked about how, like, we're wired to be social animals, you know, people on here I've talked about, like, you know, like, we want to be kind to others, we want to be in connection with others. And here's a little bit of physiology, right? And if anybody has any other ideas about why like social connection enhances our health and recovery, go ahead and type them in. But ultimately, you know, hear your reasons why it's really, really important. Like being together doesn't just make us feel good. It actually just makes us feel normal. Like that's our normal state to be in connection. And that doesn't mean like I need to be with somebody right next to me. all the time, I can live alone very happily or I can travel alone or I can be alone without being lonely loneliness and alone are not the same thing, right? Like, if I know that I am in relation to others while I am physically alone, I'm protected against those negative consequences of feelings of loneliness. So I'm curious, out here I want to talk about we cheated a little bit. So as providers with this information I'm really interested in what do you think some of the barriers are to, rebuilding some of those social connections with your clients? Or why do you think like, you can't just say what could be more social? Sure, social anxiety that would be like throwing them in a pool to, you know, turn them in the deep end, deep end, right? Lack of resources, absolutely learn issues of shame or not knowing how to be social without substances? Yes. Yes, Georgina.

It is hard work. Which is interesting. It's interesting that it's hard work, when it is actually our wiring to be in connection. Right. So that's, that's something to think about. Negative social groups. Sure. Right. Like if you're used to being in connection with those who contributed, or participant, you know, maybe we don't want to put blame on other people who contribute to participated in the activity that you were trying to be in recovery from? That's going to be a whole different social circuits that you might need to find transfer issues, not tech savvy.

Yeah, I think that's yeah, Irene. You know, both you and Lynne are speaking to access to resources, right. Like, is it safe? Is it actually literally safe for me to be in connection with people physically? Is it safe for me mentally and emotionally? Right talking about this unhealthy or negative? Group? Hmm. It's an idea, not an action. Oh, just like just giving people an idea without giving them like the step by step. Like, here's how you do it. Is that Is that what you mean by that? Sure, sure. Yeah. Okay. Great. stereotype of rank, i.e. being in charge. Yeah, maybe. So some intimidation around like, how do I connect with somebody? Is that what you're saying? Mary? Yeah, okay. That's what I thought, Amy. Thanks.

Yeah, there are a lot of reasons why it can be really hard to like override the maladaptive patterns, right. And you all know, this your Commission's you're working with, with lifelong maladaptive patterns, right. And this is another one, this is another piece to look at, right. So like, chronic loneliness is causing people to withdraw those threat perceptions that I talked about, like those changes in order lonely, right, like, because it protects me to perceive you as threatening, threatening it, you know, it might be a benefit to perceive everyone as threatening, right? Especially if we're looking at co occurring issues like domestic violence, or helplessness, or, you know, different lack of resources or different dangerous situations, right, like, sure. That would like a change threat perception might actually make sense. And that's a lot of work to challenge, and gently encourage a different perception with a different group of people maybe, right. That's those lonely brains connecting or detecting social threats towards the spouse it makes sense. That's part of that evolutionary function of loneliness based on the work by Dr. Casio. Yeah, so the type of vigilance getting a lot of press and socializing to hard work, like if you're going

against your instinct for self-preservation, it's exhausting. It's very hard work. Yeah. So great. Great. And, and I and I'm, I am so thankful to all of you for like jumping on and like thinking about what are your ideas about this? Because this is where we get to do the work with our clients and with our patients, right? It's being like, you're not like a failure because you're afraid to go socialize like, it actually makes a lot of sense. Like I in my acupuncture practice, I give as much education on like, my diagnosis and my treatment strategy. And I'm missing clinical words right now. But oh, like the prognosis and the treatment plan so that they have like an understanding of their participation in it right? And this is so much about like working the patient centered care, right, and like educating them on what's going on with them physiologically, cognitively. And that mindfulness around what is it that I'm experiencing right now without judgment is the place in which like, the healing gets to happen. So I think some of you already answered this question about like, Why do you think that acts of kindness are helping, so act of kindness, a lot of research around these, this is helping to lower that activity, where we're feeling emotional and physical pain, right? Like where we're feeling processes of pain, acts of kindness actually helped to lower that activity. And, conversely, increase activity in the ventral striatum and septal areas. So this is associated with that. Caregiving, I think somebody earlier mentioned like, oh, it like feels good to take care of people, it feels good to give care. But we want to make sure we're not acting from a place of people pleasing, or codependency.

And helping others reduces our stress and increases our sense of wellness. We'll talk a little bit about that in a minute. This is helping to avoid that override that threat avoidance response, right. So like, when we're in in a place of fear in a place of, of like threat perception, acts of kindness are going to help interrupt that cognitive process and invite a new one. Can you let us know where you're joining us from? What facility you're with, and then what department you're in? So I am I'm in Fairbanks, Alaska, and I am a civilian. Coming in from Italy, wonderful. Walter Reed. Excellent. Okay, wow, this is all coming in very fast. Excellent. Okay. Great. We've got a lot of you here from Walter Reed. Wonderful West Point at Fort Belvoir. Fort Gordon. Nice. Wow, a lot of people from all over. Yeah. Well, thanks for joining us here. I'm sure. You're you know, it's a bit of an early morning for maybe in Alaska, and it's midday on the East Coast. And I'm sure it's evening time over in Europe. How lovely that we all get to come together. For this. Yeah. Nyko, Kentucky, Georgia. So many places. Wow. Wow. Well, welcome. And thank you, again, all for being here. So while the rest of those are coming in Maryland, I've just been hearing such good things about Maryland. Lynne and I had a really great talk about acupuncture and traditional medicine over there Yesterday. I was born in Baltimore. So I've got that. But then my family moved me as far away as we could and still be in the I mean, maybe we can move to Hawaii, but we've Yeah, be more. Yeah. Excellent. Has anybody been to Alaska? Yes. Good spot. I like you here. I like it's going to snow tomorrow. I'm a little sad about that. But that's okay. I'm not going to judge my feeling of sadness. And I'm also just going to know that it isn't definitive. This is my reality. And it's just an emotion. And I can experience it. The whole gamut. Are you right? When right? Yeah. Excellent. And I'll send okay.

Yeah, they're really good facilities. And it's really, really a lovely location. I know a lot of people who got to sign up here and then stay here you get a lot of moose near here. Hopefully, you know, if you eat meat in most cases, and you're going to visit friends and you know, do you know is beautiful? I was just in Juneau earlier this summer, and it's really nice, nice greenery, the oceans. All right. Well, thanks, everybody. It's so nice to get a sense of where you're from and what you're doing here. And you know, we're just like helping you foster that like being in connection. And I really appreciate your interaction

and being here with you. And I'm not just talking to, to like a screen, and I don't know who I'm speaking to. It's just really lovely. Thank you all.

So what we're gonna do is I'm going to kind of wrap up this discussion on kindness, we'll talk a little bit about gratitude, then I'm going to hand it over to win. And then we'll have some time at the end. If y'all want to ask some more questions or engage in some more stuff. I can also lead us in another little meditation or Qigong practice, if time permits. So we'll just kind of see how that goes. I also wanted to touch back on that list of like, like health consequences around prolonged experiences of loneliness, right, and why I think that's important, when we are looking at working with patients in substance use recovery, right? So I, I'm a Holistic integrative health care provider. And when I'm looking at a patient, and whatever aspect of their team I'm on, I definitely want to be considering that whole person, that whole picture, right. So wherever you are in the care coordination of the patient, I just think it's so important to understand the, you know, the physiological things that are happening, that are co occurring alongside their recovery and their experience with substance use, right.

So like, if we're looking at a patient who is like, they're doing really great on their recovery process, they're, they're perhaps like, they're, they're no longer craving to use, they're exercising, they're eating healthy, they're doing their journaling, or whatever, you know, activities have been prescribed. But maybe they're just sleeping horribly, like, maybe they're just really, really not getting sleep. And so I think that that could be right, like, we looked at that shallow sleep as one of the health consequences of a prolonged loneliness. And then, you know, as providers, you know, we all know the prolonged, like the excessive health consequences that come from poor sleep, right. So like, looking at that as CO occurring to the recovery process, and considering like, well, maybe this person isn't, isn't still in connection with their recovery group, or maybe they're lacking, you know, a sense of like, that, that third tier, that kind of like, like global connection to a group, or meaning, or purpose, or whatever, and like coming back and dialing in, like, maybe they're six years in recovery, and they're, they're in an excellent place with most of their health markers, most of the factors that they're interested in working on, but if we're looking at the changing needs, right, the changing needs of us and of our communities and our clients and our patients around what they need socially, which markers of social connection are being helpfully met and which are maybe lacking, I think it's an important just to consider that, you know, we have our peace, right in, in this process, and then also being holistically aware of the person and their health experiences and like, what's going on here, what's going on with, like, their mindfulness and their connection to other people.

And, and so that's kind of why I brought some of that up, too. I think that, that this intentional, and mindful awareness of being, being in connection with others, is so important for many factors, right? We've covered like, why it's contributing to, to what you all do in the recovery process. And also, like in care coordination, and collaboration with other providers, and patient education and empowerment, that's the plug my number one, like part of my mission is, is just to educate and empower patients into what their experiences and what's going on for them and, and how like, they're okay, they're normal, they're whole, they're okay, and we're here to help along the journey. So another reason of why acts of kindness are consequences of prolonged loneliness, is that acts of kindness help us to perceive people more positively and charitably, that's one performing act. And being the beneficiary of a kind act, is also by just observing a kind of act. So this can be a place where if you're a patient or client is not in a place where they are maybe ready, right? Like you're working with social anxiety, or working with lack of resources, you know, different barriers to perhaps being in a place or even just being emotionally or

cognitively ready to perform acts of kindness. Even just looking for an observing acts of kindness can still have this physiologic impact. So, you know, you can assign them to observe whatever the setting is, right?

So let's say they're like in house like inpatient clinical setting, have they can they observe acts of kindness between staff members, or between clients and staff? Can they observe when their clinician did something that was very kind for them? And then and then report back on that experience, right, so like priming them to look for these acts of kindness. If you have somebody who is at a different phase in their process and is out in the world and maybe they're still not ready to start talking to people or performing acts of kindness, maybe They can spend some time looking around at people in the grocery store. And maybe they see a very tiny distribution of like, like, okay, honey, you get, you get the oranges, and I'll give the cereal and like that was very kind and sweet and thoughtful interaction, right? Or like, oh, that when I was at the coffee shop, I saw somebody give up their chair for somebody who was on crutches or, you know, like looking at, like being on the lookout for acts of kindness can be a really great starting point. If that's not something that somebody, I mean, unfortunately, many people have just never been exposed to even receiving acts of kindness, right. So like, that might be the place to start is to just start looking for like, what do you think an act of kindness is? Right? And then what would it feel like? Or like, what would what would a kind act be that you might want to participate in or receive or like, what is something that you might see in others, so that can start to be a really good dialogue that Prime's us to be on the lookout for acts of kindness if we're not ready to start engaging in them? Or are uncomfortable with like receiving them? Right? So acts of kindness, build a sense of interdependence and cooperation, right? So this is about you know, a lot of these things here also talk about if we think about like, humanitarian efforts, right, and how that kind of black altruistic activity, right can help build this cohesive, like, group identity, and that's part of that big, larger social connection, right, or, like this sense of purpose being a part of something greater than myself, I am helping to contribute. I'm, you know, maybe volunteering in a in a soup kitchen, or, or wrapping holiday gifts for a shelter, or, you know, shoveling the driveway. Like, I mean, if I was very kind, I could do that for my neighbor, shovel the snow for them, if they are unable.

But the important thing about kinds of acts is that we certainly don't want them to be, I'm going to skip these slides. And then we'll come back. The important thing about tynax Actually, that was my mistake, let me come back here is we just don't want them to compromise us. Like I don't want to compromise my emotional, mental, physical financial resources in order to perform a kind act. So that's something that's really important to especially, I mean, like, this was brought up by a several of you in the chat box just around like codependence and talking about people pleasing activities, right, like, we definitely don't want these acts of kindness to come at a cost to us, it's also can be asking a lot, right, from, you know, from, from groups of people who already marginalized or have high expectations of what they put out or perform and, and saying, like, we shouldn't be kind, and that'll make you feel better. Like, that's not what we're talking about here. Like we're talking about things that like generate connection with other people, for the purpose of like building your social connections, and your sense of interrelatedness with others to help, like promote social security, like feeling secure, feeling safe, feeling comfortable, and like, benefiting you. And your sense of purpose, if we're looking at that larger aspect of connection.

You might also like to use new skills, right? So that can be really interesting, too, if you're working with clients who are like, I've always, like been so interested in building like, I would just, I think it'd be so cool. Like, I need something to do with my hands, like, right, like, there's a lot of like, like, find activities to kind of keep yourself busy initially, maybe working for a local organization that's building homes could be really, really helpful for them, you know, like, and then that's going to help them learn a new skill, they're going to become more confident in their abilities, to, to maybe do something and this competence will then maybe start challenging that social anxiety, right, but that like might start offering a little buffer around the discomfort of like, Oh, I've been here working on site, this person that I haven't talked to for three weeks, maybe I feel a little more comfortable now, because I have a shared identity and connection with them, and can now further being in connection with them in a way because they've shown themselves to be kind of in alignment with what I'm here working on. Right? So like, these are all different ways that are gonna offer like their life dimension to it, you know what I mean? And you can just kind of, like ferret out what it is with your client or patient like, what's the aspect of challenging for them?

What are some like safe and approachable ways to start, and then it will start to take off. It's pretty great because things like this do start to have like a cascade of positive social consequences, right? Like, I'm feeling a connection with others. I'm doing an activity that makes me feel more confident about myself. I'm beginning to understand and see that people can be kind, and that maybe I don't need to always jump to my survival instinct of perceiving a threat, but that in instances that have proven themselves to be safe it's okay to start entertaining that perhaps intentions are positive and are kind, right? Like, there's a lot of degrees of where we're going to be working with this. So keeping that in mind. So here's a little bit of research about that from Dr. Sonja Lyubomirsky. She was a student of Dr. Martin Seligman, he is I've referenced him in the activities that I've posted. He is kind of acknowledged as pretty foundational to the study of positive psychology in the United States. And, like, she's, her work is really on like positivity and positive emotions, and connection with others, she wrote a book about *MicroMentors*, it's about these micro moments of connection that are so integral to our health and wellness and being connected with others, like a smile at the cash register, or a wave to somebody down the street, an act of letting somebody pull out in front of you. And in a crowded, inner, you know, like, I don't know, words for big city streets, but like coming out of the parking lot, or, you know, like these small, small connections with other people that are really, really integral to boosting up not only our like sense of connecting to others, but also like, it makes us feel good makes us feel good about ourselves. And like that's great, like, especially when we're working with a long history of maybe not feeling very good about ourselves, it's okay to find things that make us feel good about ourselves that are healthy, and nurturing and nourishing and beneficial.

So one of the studies looking at these acts of kindness, group one, five acts spread out over one week group to all five acts of kindness in the same day, performing all five acts of kindness did have higher like those, those were the participants that reported their increase in subjective well being and happiness. So timing of these interventions matter. This is kind of more for like optimizing right like this is this is working with a demographic that's already doing quite well. And then would like to optimize their experiences of positive emotions or connections to others. If we're working with somebody who is like new to experiencing acts of kindness, if they can, like just do one small thing that's perfectly OK. Another study which this like, probably, depending on where people are in their journey, may or may not be appropriate, or based on their experiences may or may not be something that they're interested in, but

like my research, run hugs, and how hugs, like can increase happiness. But again, you know, that's not necessarily going to be the right prescription for everybody. But it does offer a little bit of thought to kind of look into like, physical connection, social connection, safe, consensual connection with other people that can then help increase feelings of happiness and wellness and interconnectedness and combat some of those negative consequences of loneliness, and other negative health factors. So just something to consider, like research and showing the hugs are helpful, how lovely. So here is Dr. Seligman intervention for a kind of one time act to choose a truly unexpected act of kindness. It's best if this is spontaneous, it is often beneficial during more stressful or irritating moments. So for me if I have felt, you know, like, like, offended because somebody cut me off in traffic, you know, because, like, I'm also a person and like, sometimes I'll attribute you know, thought misattributed, like thought attribution. I will like, when I catch myself, in that moment, I'll intentionally be kind around allowing somebody to, like go in front of me, or, you know, like, like, like, like, create a little barrier and wait, while like a mom and her kids are crossing the street or something, you know, like, like, I can do something to counter that stressful effect by being kind intentionally to somebody else. And it's great because it makes me feel better. And it's also nice, because it's nice to do kind of things for people.

So this is like a two fold benefit, right? So one time act and spend, just notice how you feel the benefits of these acts are or sorry, these are the key takeaways. So just like making sure that it's new and special to you. Like there's some research shows, if you just kind of do the same, like, if I just like, automate my contribution to Humane Society or whatever, like, that's not gonna make me feel good. It's automated. It's not it's no longer meaningful, unless that's a cause that I'm like, deeply passionate about. You know, like, so you want it to be kind of new, and that also invites right, like, like neurocognitive plasticity, and like the novelty of an experience, right, and like performing it for the first time and being like, Oh, I've like, never done this type of thing. It's not going to compromise my physical, emotional mental safety or resources or financial resources, but it would be a new and interesting thing to try and it will benefit somebody. Great. That's like the whole hopes of positive consequences are going to happen from that choice to try something new. And to surprise somebody, it's nice to surprise people. It's nice to try something that doesn't come naturally for you, it challenges you that can then elevate your sense of accomplishment, or your sense of engagement, right? Like these are also like pillars of wellness and recovery and healing that, like I teach in my positive psychology class, but trying new things is really good for us for a lot of different reasons. Another suggestion is to like, do something kind but not expect anything in return? Right? And that's like the like, where, where this might be a little different, though, right?

Like, so again, this material is kind of oriented towards like we're doing good, we want to do great. We certainly don't want like secrets or things like unspoken or, or like unshared in a therapeutic setting. So like, maybe they would be great if your if your patient told you about the kind of thing that they did that week, like certainly, and you know, especially because in this process, they're probably going to need to learn about not people pleasing, not being overly codependent in their contacts, right. So that's like, where you as a clinician, and provider get to kind of walk with them in this? How did that feel to you? No, you don't, I'm just making sure that they're not compromising themselves in this effort to connect with others and feel safe and better. Right, like, that's the maladaptive pattern. This is a this is a more supportive pattern.

Alright, I want to see what Lynne wrote here. verbalizing kind thoughts I have about random strangers to them to do something like that is a lovely way to perform a kind act. Absolutely. I love doing that. I

used to do that a lot. When and I forgot all about that. It's really nice. You know, or just like seeing something in somebody, it doesn't have to be a stranger, you know, like, we really don't practice enough gratitude. So this is excellent.

Thank you, Lynne, this is going to lead me into gratitude, where like expressing gratitude and appreciation for the people that we interact with on a day to day basis, like, When is the last time that you told your coworker that you like, like really valuing their expertise, or that you are so grateful for the kindness with which they spoke to your patient, so that your patient was then able to come to you in a more trusting and competent way? Or how often are we expressing appreciation, and gratitude to our family members, right? Like that really should be a daily thing, but it's not very, very easy or common. So even just verbalizing it is going to meet both of these is going to meet the kind act, and then it's going to take us into gratitude. So gratitude, boosting positive emotions. I know when we talked about not being attached to emotions and outcomes. However, when people have not been feeling good for a really long time and have been using substances to feel good or hide the fact that they don't feel good. It's perfectly okay to invite feeling good, right? Like, we want to be able to feel good in our bodies, in our minds, feel things that are like, if you're good to feel joy, if you're good to feel all and humor, and excitement and enthusiasm, like it feels good.

And it's important to feel good, especially in the recovery process. So here are one of the two gratitude practices here by Dr. Seligman, this one is, can be pretty significant and pretty intimate, right. So this is a gratitude visit. This is an exercise in which you write a letter to somebody who has changed your life for the better this person needs to still be alive. So that you can then go and be face to face with this person, perhaps in right in the world we live in. Now you can video chat with them, you can FaceTime with them. But just making sure that you are face to face and interacting with them, reading this letter to them, and then making like letting them know how they've affected your life, and what you're doing now. And then what brings that memory to you in your life about how they influenced you. This is a deeply meaningful act that shows that like one month later, participants who do this activity are happier and they're less depressed. These results do fade in about three months. But gosh, what a beautiful way to like boost your feelings, your positive emotions, to express gratitude and to help foster connection with somebody who was meaningful in your life. Right. And it doesn't have to be huge it can be something very small.

I know that it has been very meaningful to me when I was in a real bad mood and a real rush to get to work and my the person making my coffee was like very sweet and smiled to me and like went the extra mile like the made a really big difference in my day. And expressing gratitude for that is really, really meaningful because it helps to foster and bring in that connection right so that mindfulness and attentiveness to the activities of kindness from others, and then our own experience and like attention to intentionally, being grouped, like grateful around those kinds of activities is very significant. I found some really cool research because I'm, like always researching and looking at stuff. Yeah, so [Indiscernible] So he's a psychologist at Northeastern University, and he's coming out with a lot of research around how gratitude practices not only just affect, like, our levels of happiness, and how we feel, but actually our productivity and our commitment to our goals. And some of his reasoning around this is that by practicing gratitude, we're able to assess, and like the value of our future goal, right.

So like, if I'm having gratitude towards myself or towards somebody else, or for an activity or for a resource, it becomes like, I can assess the value in it. And then when I'm able to assess that value, I can

then make decisions based on how I'm going to behave now as to whether or not that's going to, like impact my experience of that in the future. So this is a lot about, like, how we are able to kind of make those momentary, like in the moment sacrifices for that future game. Because if I am more grateful, or if I just practice the experience of being grateful for something, then I have more awareness that it's going to be worth it, right, like, like if a patient is so do you ask the patient to reflect on something that's grateful?

Let's go ahead and move to the next exercise, exercise. So if you are having somebody reflect on something that went well, today, we need to also look at like, why that went well. So back to this idea that like gratitude helps us make sacrifices in the moment for future gains based on what we value. Let's say your patients deeply, like deeply values and very grateful for their like joyfully dispositioned, five year old daughter who loves to wake up and smiling and hugged and just, she's so grateful to see her daughter's smile in the morning, right? Like this is a really, really significant thing that could then impact a decision and an immediate moment sacrifice for future games, right. So like, if being able to wake up tomorrow morning, sober, not hungover, not, not at home, not whatever consequence may have been this person's experience with their substance use, but waking up at home present with their daughter to see this thing for which they are so deeply grateful, can help them influence the decision that they're going to make in that moment in response to a craving or a thought or an emotion or whatever is coming up, right.

So like this practice of being grateful and assigning value to the things that matter most in our lives, help us to then reach those goals and like, have that moment and that trajectory going for the things that are most important. So this, this, what went well, three happy moments exercise. That's a solid one writes about doing it one night, every week, just right before you go to bed, writing down three things that went well, and why they went well. So this is a little more nuanced than simply I am grateful for this is something that went well. And then why it went well. So this helps give a sense of participation in our reality, right? Or a sense of agency. So one thing that may have gone well is that I came home, and my spouse had done the dishes, because my spouse loves me and knows that a clean kitchen is one of my favorite things to see after a hard day at work. Right? So like, that's the what, the clean dishes, that's what went well. And this is why because I am deeply loved. What went well, I was able to, like, get up and go on a walk this morning. And even though I didn't want to and why because I value my physical health, my longevity, I want to feel good in my body. And that's why I was able to make this choice about what went well. Right?

So like we've got what it is that we contribute to the choices that we make that went well and there was also got like the external factors of like, Oh, my spouse did this kind of thing for me because I am loved. Like because I am worthy of love. Or I got to work early, because there wasn't a lot of traffic and that was just a really nice surprise. You know, like, like, we can have a lot of different degrees like it can be super easy like, Oh, I use my spare change to buy my coffee today instead of putting it on my credit card because I'm trying to be more financially fiscal or frugal. You know, like so we just get to be really creative and what these things can look like and there's no wrong answers like we can just Meet the clients and patients where they're at or yourself with, like, what is it this thing went?

Well, it's something that went well, it's a happy moment. And then it's why, and the why part is very important to this exercise. If this isn't something anybody's interested, or somebody, you know, somebody's not interested in this, or it doesn't seem accessible. This is kind of getting into a little bit of

behavioral cognitive or CBT. Right, with like, what is it? What is the event that that made this go, Well, what are the factors, but you can also just practice gratitude. I like to do mine in the morning, if I get around to it. And that's when I like to do it, because it starts the day priming myself, right. So like, so much of we're talking about here is like training ourselves, to then go out into the world to go out into the circumstances that may challenge us, that may challenge our clients and patients into challenging the challenge by challenge. Sorry, I need to wrap up.

In situations that might be a little more triggering, or, you know, initiate an emotional response that might then be met with a craving or something like that, like this is all just about training, and getting ready priming ourselves to look for kindness, priming ourselves to perform acts of kindness, priming ourselves to be grateful and experience gratitude, to then influence like the future impact of the choices that we make right now. And that mindfulness and that choice, right about how we how we want to experience these things and look at that's also a thing that also just requires training. Like in a meditative practice, I can sit here and I can say, my feel this emotion around this experience that I'm having, that's very different than when I walk into my office, my boss's office and then reprimanded and then I need to draw upon that strength, you know, just like, I'm not going to go run a marathon tomorrow, if I have not been training for a long time, I can't be expected to immediately respond with a with the non-suffering and non-attachment to an emotional situation, right. So these are all tools that are available for your clients to use. And I just encourage all of you to try them, as well. I think that it's, you know, I'm so grateful that for my education as an acupuncturist, every needle that I put in somebody I have had put in me, so I know how it feels like I can be empathetic to the experience.

And I also think that like, part of our diligence, as care providers is also to apply this material to ourselves, right? And like, what's gonna happen, you're just gonna be a little more happy anyways. So it's really great to, like this stuff can be used in recovery. And it can also be used to optimize kind of where you're at. So yeah, that I think that's what I've got, here are some references. I've got like a billion more, because I am just in love with this stuff. So yeah, that's, that's what I got. I am going to go ahead and hand it over to Lynne. And we'll have some time at the end for questions. Or like, I can just keep going about stuff that I'm interested in at the end liquidity. But thank you all for. Thank you. You're so I told you guys, she was like really enthusiastic and passionate about the subject, right, we're so speaking of gratitude, I'm so grateful that you're here with us today. And so we can, I am going to leave some time at the end. So if you guys have questions for Stephanie, you can write them down. We'll be getting back to it later.

So I'm just going to talk about as I referenced in the beginning, Stephanie was talking about mindfulness in a context of social connection, right, and what that looks like for our patient base. And what I'm going to talk is more on the aspect of mindfulness is movement. Right. So just a little bit about me. I am an integrative medicine nurse at Walter Reed. I've been a licensed acupuncturist since 2002. And I Tai Chi with my first class. So I've been studying Tai Chi, I should say I started my studies of Tai Chi in 1999. So that's about how long I've been accessing the you know, the exercise. I got my nursing license in 2009. And I do have a BSN at this point in holistic nursing. And as I mentioned previously, Stephanie and I met in our doctorate program in acupuncture. Mine is in acupuncture and Chinese medicine because I also do herbal medicine.

So, disclosures, I have nothing to work at Walter Reed. There's myself nor anyone in my family has any financial relationship, nothing to disclose. So what I'm going to do the order of my presentation, I'm

going to go into a little bit of the background of chi Ching. I'm going to put it a little bit in context with traditional Chinese medicine as a system because I think it's important to understand that a Tai Chi is up a piece of a hole right In the same way in the beginning, I was talking about looking at mindfulness is just a piece of that whole kind of core of what was it the four truths, you know the things from Buddhism. Tai Chi is a piece of an entire context of an entirely separate, but complete system of medicine. So I'm going to talk a little bit about that not too much. We're going to differentiate between Tai Chi and Qigong, because a lot of people often ask me, Tai Chi, Qi Gong, I've heard of one, not the other I do, what's the difference? And so I'm going to hope to answer that question a little bit. We're going to, I'm just going to briefly touch on why Tai Chi is useful for SUDs, it just didn't, I think it's useful for everybody. So I just kind of take that for granted. But I will just touch on these specific impacts as for that population base, and then I have a 12 minute video, that there's a specific Qigong series, and I will talk about why I teach Qigong instead of Tai Chi, um, it's a video 12 minutes, and I'm going to just kind of narrate so what I'm going to do is take a break between the presentation and the running of the video.

So if anybody wants to make some space, and follow along with the video, you can, the forum can be done seated or standing. However, if you're seated, you probably want to do it in an armless. Chair. So that, so that's where we're going. So does anyone in our presentation here in the audience have any experience with Tai Chi? And if so, what is it? I would like to know that. So just type it in the chat if you do. It's fine. It's okay. So long as you guys are typing and these responses are coming in, I just want to tell a little story, right?

So I learned tai chi, and I'm going to get into to honor speaking of honoring tradition, it is very important. For those of you who don't know, whenever you're doing any kind of martial arts practice, you have to sort of honor the lineage. And so I have my lineage to talk to you about. So this is a story from my lineage, my teachers teacher wrote a book about the young form of teaching, we'll get into that. But Tai Ching developed, the master Chang was just in contemplation, looking out the window or whatever, into a tree at a bird. This bird sees a snake on the ground, and he decides I, I'm going to go get that snake. So the bird died down to get the snake. And the snake just goes move to the side very calmly, smoothly moves to the side. So the bird repeatedly does it attacking the snake, the snake just calmly moves away, calmly flows to the side, just call me with the 10 out of the way, the bird becomes more and more and more frustrated trying to get at this snake and the bird is diving down. He's I can't say all the snake is doing it's just slowly, very smoothly, patiently moving to the side. And in the end, the sequence.

Now I've heard the stories hold where the bird gives up, I've heard that story told where to take actually is able to bite me the bird. So whatever the ending is, sort of the point of the story is that the snakes, I'm just going to be determined the book, slow fluid movement triumphed over the fast, forceful attacks of the bird, which is a perfect example of the Dallas principle of yielding, which says that weakness, overcome strength and softness overcome target. Right. So I think these are important lessons, especially for military folks. And so we talk about that I teach a class A couple times a week. And I often talk in the class about moving in a relaxed fashion and learning how to sort of move through and there are external lessons that can be projected from the practice, right, that you can use in everyday life, which is part of the study of Tai Chi, right? You can apply it to your everyday life principles, because it also harkens back to this concept of wholeness, right or like it's a holistic practice.

So that's where we're going. So let me see and then go back to the chat here and see if anybody I wasn't looking at the experience. I've got all tied up telling my story, former martial arts movement and breathing, right, a little bit from a workshop. Okay. Throw this in there. Yep. breathwork is good at De stresses. Yes, the breath work is very good. And we will see that Tai Chi and Qi Gong It's one of these physical movements that coordinates the physical movement with the breath. And I will show and demonstrate all that work for some of us.

All right, so the history of Tai Chi. So technically it's Tai Chi Chuan. Right? It's the name, very different forms based on the family of origin. And Tai Chi specifically began as a martial art. But now most people know it as a form or an exercise used to promote physical and mental health. So the most common thing that we see are elderly people in the park, and they're going through their, you know, calm meditative movements. Which, by the way, is really funny, because when you know that martial implications, it's some of them. Movements always think, Oh, these old people could beat somebody. But I digress. That's just my thing.

So one of the benefits of Tai Chi, is that anyone can do it, there's really no contraindications, if you can, that even people who were not able to move can do Tai Chi. So there's some benefit. Even if you're physically unable to. physically engage in the posture. If you watch and imagine and your brain goes through, you imagine yourself doing it, there's actually benefit to that as well. So there's really no contraindications for Tai Chi. So to get into some of the history, there's five classic, Tai Chi Chuan styles. There's the original, the 10 form, right? So the Chen form is it sort of combined, slow and quick movements together. And when we talk about how Tai Chi began as a martial art, it's a little bit more obvious when you see the chin form. And then there's a young form, which developed out of the chin. And so that's the most popular one, that's the one where you see all people, the elderly people or the park, it's probably the young form, the movements are bigger, broader, slower, more like weeping. They require sort of greater range of motion.

So this form has an improved effect to increase flexibility. And then there's a Wufu form, which the Wu form, I think this one's more relevant, I think of fighting, there's more of a balance focus, where typically with Tai Chi, you want to be centered and upright. And we're going to do an exercise about preparation posture, which I like to use for posture training. But the Wu form uses more, you're more off balance. So there's your upper, your torso kind of sways forwards and backwards. And so this form is exceptional for balance, it's a little more complicated. The son form has like dancing and footwork involved. So that one almost looks like choreography. It's kind of like a more beautiful dancers type of appearance. And then the how form uses, which is probably the least known, because that one really involves using your internal force and projecting it outward. And so this is considered a highly advanced form.

So we'll see, as I talk throughout this presentation, that, you know, the benefits of Tai Chi are not just external, they're internal. And they deal not just with physical but emotional, as well. And I'm going to talk about that when I narrate the video a little bit later. But I do have, I found since I created the presentation here. They're very well mine has a summary of the five different forms of Tai Chi. So and some of the benefits, it's good, little comprehensive, I didn't put it in the references, because it's you know, it's not a peer reviewed reference or that research. But that link will take you to a nice page that will that just describes sort of the five different styles of Tai Chi. So you can check the so you guys can check that out. And so, because I'm one who's going to honor tradition, this is your speakers lineage. Let me see if I can get it to work the PowerPoint. Oh, it's not working. How do I do it? There you go. So, um,

this is a repeat of the last slide where I talked about the Chen style into Yang into the Wu and then the sun, right and then there's another one. So my master Mary Chow learned from this young style. Yong Chen ooh, that's where I was.

You know, and when I talked about the story, and Mr. Chang that's like, up way up here. So, Mary Chow, interesting little fact, her, she passed a few years back, but her acupuncture license was number seven. So she was the seven my 10,000, or something like that. So she was the seventh licensed acupuncturist in the state of California. So, her student, Tim O'Connor, who was my teacher, he teaches at UCLA Center for East West medicine. He was my teacher at Emperor's College of traditional Chinese medicine. And he taught me. So that's our lineage, just, you know, so it's really a, it's a pretty direct descendant from the original forum. So I'm grateful for that quick little story, when you go and you learn Tai Chi from you know, the older masters, it's a big deal for them to correct you, because you have to kind of earn it. And the first time I went to master tout class, Tim told me to go off for some reason I don't maybe I was, I think I flew back in from out of town. And I just was like, hanging out, I just wanted to see him and I went to her class. And she corrected me. So it was like a big deal. So I feel pretty honored about that.

So, as I mentioned earlier, I just want to briefly talk about tai chi as a, and put it in context, and reference it as part of a whole system. And with a little caveat. Stephanie and I are acupuncturist, and I don't know if there are any acupuncturists in the audience, but I always take the opportunity to sort of discuss that acupuncture is much bigger than putting needles in a point, right, there's a whole entire system of thought system based diagnostic and treatment philosophy behind what we're doing. Right. So the first thing I would say is that traditional Chinese medicine is not the only system. So there are about 80% of acupuncture schools teach to a TCM model. But there are others, there's five element, there's some classic, there's different systems, but I just think you should be aware. So with these different branches within the context, and this is how I learned it, I also want to practice that a lot of what I'm saying comes from my specific teaching, if you talk to someone else, they may say something different, which I think is a little bit part of the struggle with integrating holistic practices into our current healthcare model. But it's important to sort of understand the different context, right, where people are coming from.

So the way I learned it, when a patient comes the first thing that you want to adjust our diet and lifestyle changes, right, these are self care activities. This is where food therapy and nutrition comes in. We you know, if you're eating too much fried, greasy food, don't do that. Right? If you're smoking too much, you stop. Or you know, we don't want to overindulge and caffeine or alcohol or any kind of substance of your body or drinking your body systems. So that's the first step, right? And then the second step is going to be an internal treatment. And this doesn't always hold up, right, somebody comes in into their shoulder, you're going to cheat their shoulder, you're not going to take them through these steps. But as a preventive system of practice and medicine, this is what you would sort of focus on in this order. So that in the next step of insight and lifestyle changes don't work because the person is so far out of balance, you're going to do some kind of internal treatment, which is herbal medicine. And when looking at martial arts and Tai Chi, you'll start to see a lot of like there's a lot of seafoods who are practice herbalist, not so some of its internal but they also there's a lot of herb plasters for healing bone and injuries, right. And so you start to get into this with a practice of any kind of martial arts or Tai Chi included and then there are externally applied therapies like acupuncture cupping. glossa being is really popular now because of Instagram, but I digress. 20 knots type of Asian massage, and so I would put Tai

Chi in somewhere in this between diet and lifestyle change and internal treatment. Um, the other thing that I wanted to mention in the context of for patients And how can you use Tai Chi? And what's the benefit for, you know, for our patient base.

One of the things that I talk about in my class is the discussion in the yin and yang of emotions. And Stephanie talked about this a few times in her presentation where we're looking at an emotional response, you don't want to have any judgment around it right? And avoiding what she did not reference it as this, but it's now it's sort of commonly referenced as toxic positivity, right? So we don't want people to be tell them just be happy, or you know, you just need to be happier. Sometimes there's value in not being happy. Right?

So one of the things I discuss in the context of my movement class that involves either Tai Chi, or Qi Gong is this knowledge that all of our emotions have some kind of value. And not just, you know, in a Western culture, we tend to view things as either good or bad, right, we want more happiness and less anger. Right. So that's the sort of the framework that I think a lot of us are coming from, but in the context of a holistic system, and this is why I'm referencing tai chi into the system of that it comes from each one of these emotions has a positive and a negative. So there isn't such thing as too much happiness, right. And that can be seen as like self sacrifice, or, or you're so far on the other side, that you're not taking care of ourselves, right, definitely talked about, you know, we need to be mindful, speaking of mindfulness, that we're avoiding going over to the other extreme, but anger also is useful. One of the things that I learned from my teachers, is that anger can really be seen as or relabeled as activation energy, right? So the same, it's kind of this big burst of like, fart energy, sometimes in class, I just stuff it as it's the amount of force necessary to get you moving off the path that you're on. So it's big, it's forceful. You know, and sometimes that can have positive benefits, it can, it can, it can take you off of a bad path, you know, but it takes a but acknowledging the amount of energy that that takes, sometimes, you know, anger is the emotion that you need to get you there, like I'm done, I'm not doing this anymore, you know, it can have that kind of value. So I think it's important to recognize and just honored, speaking of honoring your emotions, and you know, just kind of recognizing where you are, and not placing any judgment, whether an a specific emotion is good or bad, but maybe just observing to assess, you know, what can you do with that emotion? Or why is it showing up for me right now.

So, as I said, like it so if you go back to this site, I'm going to put, I would put Tai Chi in the diet and lifestyle change moving sort of into the internal treatments. So there was a study that talked about the effects of tai chi and qi gong for individuals with substance abuse. And the study references these four essential principles of meditative movements. And so this is important if you're using movement in the context of, you know, for therapy or a patient. The four essential principles involve forms of body positioning, right. And so each movement in Tai Chi and Qigong, we refer to them as a posture, explicit attention to breathing. So you'll see when we're going through the practice that when we're sort of moving in an upward direction, I'm going to inhale. And then as I come out, there's going to be an exhale. So even with Tai Chi, when we're pulling back, we're sort of inhaling. And then as I'm pushing, there's like an exhale. So there's this conscious, that actually becomes unconscious with advanced practice. pattern to the breathing with the movement, and it feels perfectly natural. Once you get past the learning of the choreography right. meditative state of mind, I will talk later about how when you are very practiced and well versed in a practice such as Tai Chi, you can feel your brain and your brain chemistry shift your awareness of your surroundings changes, and then a deep state of relaxation is also involved. And I would say that Tai Chi is a very good practice to incorporate all four of these essential

principles, right. So I just want to also circle back to this concept of mindfulness being mindfulness as a state of being more than a practice of a specific app. So we can find mindfulness, and whatever we're doing right. And then I think well, in my presentation when I want to do just to break up the material a little bit, and make sure we have enough time, thank you, Stephanie. I'm going to show you all one of the very first posture, we're gonna break it up.

So stop thinking for a second, just put the focus on the movement. So most martial arts practice. If you look at video three, if you're on videos online, you'll see the person just kind of standing there. And what I don't want people to think, is that the people are just standing there waiting for video to actually not they're actively preparing for their practice. And I just got this lovely office chair that the arms go up, that's a new thing, right. So now I'm like, free. So that's great. So this is what we're gonna do, I'm gonna have you sit in your chair, sit forward, on your chair, don't lean back on the on the backrest. And if you guys can just follow along, just make sure your feet are flat on the floor. You know, you just want to rest your hands on your knees. Take a couple of deep breaths.

So one of the simplest and easiest mindfulness exercise as it relates to Tai Chi practice is something we call preparation. And I just attended a conference for pain skills. And it's I was so excited to hear one of the other presenters about tai chi, talk about this concept, what we're going to do is actually reframe our thinking in terms of posture, most of us are going to be holding our posture, from our abdomen, right, you're going to feel kind of heavy in the seats, and you're going to feel a little bit of strain in your in your back. You may have some difficulty kind of holding up, you feel like you want to sit back, you might feel like you're, you know, you're tensing your abdomen to sit up. If you make a slight mental shift, you will actually fall into what we call preparation. It's the very first posture and the Tai Chi form, which is you want to feel like you want to lift the crown of your head and feel like your body is hanging like a puppet on a string. So by just shifting that little focus, a little mental focus, what you'll find is that your lower back relaxes. What you should find is that your lower back relaxes, your head will realign with your spine. And you should feel lighter. And so what am I mean by that. So I'll show you what most of us do throughout the day.

It's human nature that whenever our focus is forward, our head goes forward. Right. So this is a natural movement when we're walking and moving, humans are built to move. So when you're walking, and your head goes forward, your body catches up. Right, so you're able to keep your head aligned with your spine. So you're not, you know, not falling forward. But what happens too often in our current culture is that our focus is forward in the sitting position so our body can't follow. So we're in the computer, we're typing and our neck is forward and we're doing this or we're driving and we're looking and our focus is forward and it pulls your head right away from the centerline of your torso. But if you do this mental shift, where you just want to imagine that your head you're hanging from a string, look how it aligns your head over your torso, takes pressure off of your neck and your upper shoulders. And you know, you'll be a little taller in the chair, but the force is coming from here, which kind of eases up the tension in your lower back.

So all you have to do is sit forward in your chair and just think of your head. Just think of your body like being pulled up by string on the puppet. Does anybody can anybody feel that shift deputies typing furiously. So that's one of the first things that we can do with our patients. Yeah, it's a good posture training exercise. And it also it takes pressure off this upper neck shoulder area. And it's just a slight shift in mental focus. So, um, yeah, right, because I think normally, and, you know, Stephanie's saying that

she was holding herself up. So I think that's just a basic. That's the first. So preparation is the first posture. I didn't talk about this in my presentation. But there's different forms. It's either like a 25 form set, or an 8183 kind of depends on who's teaching. But the very posture number one is preparation. And that preparation, so that's Tai Chi posture. And just that little shift in mental focus can help relieve a lot of tension for your patients in pain, since that's where I live in pain management, right? So back to the presentation, Tai Chi benefits. So let's read the slide. Right. So it's, it's we refer to Tai Chi as fitness enhancement. In some sense, Tai Chi can help you improve your balance. There are specific postures, I didn't demonstrate any of those. But at the end, if you guys want to see a balance, improving posture, we can go through that. Because balance is improved with Tai Chi more than Qigong. And that's, I'll talk about that in a second. There's minor cardiopulmonary effects. It's not it's not major. Right. But it can increase immunity by helping regulate the nervous system. And I think that, yes, okay. Okay, um, remind me if I forget, let me actually write it down right now. I'll do that after the video. I'm okay.

And so from a mindfulness standpoint, Tai Chi can also help you improve sleep. And it's not to have mental health benefits. I think really, it's related to that shift in mental focus that occurs when you're in that deep meditative state. I also want to mention because I don't have it anywhere in slides that when you have people, if you have patience, or you know, somebody who's telling you like, I can't meditate, I decide, you know, I can't, I can't sit there and my brain, I just keep going. Um, I think it's also very prevalent in the military population, that they'd rather be doing something physical, right, they want to do some kind of physical training. And so sometimes, Tai Chi as a movement therapy is the perfect meditation for people who can't sit and meditate, fidgety all the time, they don't know what to do with themselves, you know, Tai Chi can help them sort of speaking of nothing being inherently good or bad challenge that desire to move into a more productive state of forcing their own relaxation. Right. Erica for self defense, in more than one area, right. So part of self defense is knowing how to defuse a situation a tense situation.

And Tai Chi can help do that, right. If you find yourself in a tense situation is through your breathing, you learn. I'm going to bring it all down. And when they exhale. Sometimes bringing things down. You know, when you're in that sympathetic, all your energy's up here, right? It's all in your neck, and then your upper body. If you know how to physically kind of sort of shove it back to your feet, lower your center of gravity, that shift in the energy often is enough to shift other people in the room around you. Right? And if you're very well versed in Tai Chi, there's physical self defense, but you know, that's not why we're studying it, but it is the thing. So here's the fun thing. So the difference between Tai Chi and Qigong, so some people use these words, interchangeably. I just want to say that Tai Qi, technically is a type of Qigong, right? So Qigong was first and then Tai Chi sort of developed as a Qigong practice, for I think, I've learned somewhere along of course, it's ancient legend, right? The palace guards for the king sort of learned how to do this Tai Chi to learn how to fight. When I was in class. One of the translations for Tai Chi is grand ultimate fist. And so all the hard martial arts guys would come and learn Tai Chi, because they were told by their teacher in order to sort of master your heart, fighting martial arts, like I'm going to beat you down. martial arts, you have to be good at mastering Tai Chi, right? But that's big to the internal peace. So this is just like a side to side comparison.

So of the difference between Tai Chi and Qigong. First thing people ask me is the spelling, right? There's something like so basic like that. tacky, Shawn, the spelling of that is the wage dial system. This has to do with British occupying, like Hong Kong. And they came up with a westernized version of what the sounds that probably more Cantonese and Mandarin was making. And so it's kind of a phonetic spelling of the

sounds, right? Where you see Qi Gong, so otherwise, Qi Gong should be spelled like chi, right? And so why is it different? The cue AI is a pin is the system is now called pinion. It's a more modern system that came out of Beijing and Mandarin to sort of standardize the translation between the Chinese language and English. So that's the difference in the spelling. With Tai Chi, there's always going to be a series of postures and choreography. So I often say that Tai Chi is Qigong plus traveling and choreography, right. So with Tai Chi Chuan, like I mentioned earlier, there are there's going to be a series of postures either 24 or 81, it kind of depends on the set that you're learning. It also depends on the system that you're learning and who your teacher was. And you know how many pots some people count two postures is one, it just kind of depends.

Qigong is typically single posture that's often prescribed by a provider for a specific ailment. Right. The set that we're doing today in the video is an eight seer is a series of eight Qigong postures put together, but you do the same posture over and over and over again, that doesn't happen in Tai Chi choreography, you always you move, like in a fluid motion, from one posture to the next to the next. Some of these postures repeat in the sequence, but you're never doing the same thing immediately, sort of twice. Um, so I have here that Tai Chi is more internal. And I think what we're talking about is earlier, I referenced that how form where you're really working on sort of using your internal force on your opponent. I think that's kind of the point of that statement. Qigong can be used as a healing technique for yourself or for others. So I don't know if anyone in the audience has heard of Reiki. Reiki is a type of Qigong, right? So Reiki is, is gathering your internal force and applying it to someone else or using it to affect somebody else's energy. So in that way Qigong, because Qigong can be either practice as an exercise as a treatment, or as a meditation.

Tai Chi has a steeper learning curve. The choreography is complicated if you're not coordinated, if you don't have good high hand eye coordination, or if you've never played sports, or if you're not a dancer, it takes a minute, I'm highly coordinated. And it took me three months to learn and memorize the young family short form. And that's going to class three and four times a week. So it's a more of a commitment. Qigong, it's easier to learn how to get into the postures. Now what I will say is, it's harder to master them. It's complicated to internally master the postures, but learning how to get into them is far, far easier. So that's why that's what I mostly teach. Tai Chi is really one long sequence where Qi Gong you have that repetition of postures, you want to think about tai chi is more Yang and Qi Gong is more Yin.

Tai Chi is about power and Qi Gong is more about like, when I when we say spiritual awareness, what we mean is, I would translate that more as a mindfulness practice more mindfulness because Tai Chi you really can learn to hurt somebody if you want to get apply it that way. She got never applied that way. And Ty Keyshawn translate to grant ultimate fifth, where Qigong translate to life energy cultivation, right. So that's a little bit of the difference. I always think that's important. Um, is there any questions so far? Do we need to let me see where am I in? I'm gonna keep going. We'll take it. I'm gonna take a short break before I play the video. So I think that'll be a better thing. Yes, let's do that. Absolutely. Okay.

So when we're thinking about using Tai Chi and Qigong for substance use disorders. There are some basic physiologic mechanisms that are affected by the practice of either one of these systems. Part of it, I just also want to throw in here, part of the difficulties with research is that there are so many different types of forms, you know, it matters if somebody's doing this in a group setting versus alone, like, a lot of times, I will practice the tai chi set by myself. But it's definitely different when you go and do it in a group. And that relates to you know, sponsoring or hosting some kind of Tai Chi activity can also

increase, you know, as Stephanie was talking about the social connection, right. And it's definitely a different feeling when you do it, because believe it or not, when you're when you are meditating, and you're just sort of in the zone, especially when you see advanced people, the energy gets shared, quick little story, what I learned touching the park, outside on Sunday morning. And one of the participants in my class had a, um, it was a herding dog. I can't remember, I think it was an Australian shepherd. And we would, you know, all of us would get in the group, and we were doing tai chi. And, you know, okay, so we were in Los Angeles, right at the foot of sort of the hills where all the, you know, celebrities are, and some jerk would come down, and he had it, he would come down in his big fancy car and just open the door, and he had a standard poodle, and he would just let him out of the car, you would let him run around. And, but that the Australian shepherd would heard the entire Tai Chi group, which he didn't have to. And I know, you're like, Oh, this is a dog when they're hurting activity. But there's a cohesiveness that happens amongst the group where you have this sort of coherence, you know, and that's a whole other thing, where you when you talk about gratitude, and improving sort of heart coherence, coherence through your heart, and that type of energy regulation, you know, the dog can tell to the poodle jump out of the car, the dog just heard all of us, and he would go right to center and he would sit and like protect us from this, like, random, you know, poodle with no training.

But um, I think that for me, that speaks to the energy generation and coherence that happens when you practice hygiene and group setting. Um, so some of the physiologic mechanisms for SUD patients, we're going to promote relaxation and decrease your sympathetic tone, right? improve immune function. Some of these studies, reference reduction of inflammatory markers and cortisol and increases your endorphins. I have everything referenced at the end. So and I think there's a download if you guys want to see some studies and resources, I don't like to talk about that during my presentation. So in terms of using Tai Chi to reduce substance abuse, it's possible that young participants are more likely to complete treatment. versus people who do stress management plus relaxation. There's a noted reduction in anxiety and withdrawal symptoms in patients in treatment who also do Tai Chi at the same time. And, yes, I think so to answer your question. Um, and there is also some evidence that participants who study Tai Chi reduce their relapse rate, right? By participating, no worries.

There are no contraindications, as I discussed the forms can easily be modified. And as I referenced earlier, even if you're mentally performing the postures, remember I'm talking about my lineage and master Mary Chow. She was introduced to Tai Chi, she was very She came from a wealthy family, right, which is how she had direct access to this lineage. She had a ridiculous number of children, right. So it was like child number nine, she births a child and she can't get up. She's it's physically exhausted her. So she was bedridden, and couldn't get out. And her doctors were treating her and nothing was working. They didn't really know what was going on. They're like, No, you can do that old Tai Chi stuff. Um, and so somebody introduced her to tai chi, and in the beginning, the only posture so the first posture we learned is preparation.

The second posture is called opening where you, you know, you raise your hands forward, and you come down. She was in bed, and bedridden, and that's all she could physically do for herself. At the time, but starting with that one posture because like I said, if you remember, when we're whenever we're coming up, we're going to inhale everything in from the universe, right? We're inhaling air from the sky, we're inhaling energy from the earth, it's just all coming in. And moving sort of, in an upward, outward expansion, like word like filling up our body with its energy. And then as you come down, it's an opportunity to let go, exhale, everything you don't need can be expelled out into the ground back, give it

back to the earth, sometimes I talk about in class. So all she did was that in the beginning, and that was enough to get her out of bed, to where she, you know, advanced her study. And then she became this ridiculous master. And she was doing Tai Chi till she died. She's like, 100, and something. And so that. So that just goes to, you know, in the beginning, when they were teaching her, she was just mentally going through the form, like physically, she could do the first one and then use Imagine your body going through the others. And there is benefit.

So there's really no contraindication to the next slide here. So in terms of the Tai Chi evidence base, I don't want to talk about it during the presentation that the movement was supposed to have been today. So there is evidence base, like I just discussed the difficulties, but there is some evidence, it's in the handout, if you want to download it from the file section, you will find and so it's pretty recent, so and there, I try to reference some pretty well documented studies of better quality. Right, so now we're going to do this demonstration. So our Amy has put in the, in the chat, a link to a demonstration of the eight broke headset. As I said, it's six lessons. If you go to that website, it's always up there. So if you need something to reference, there are six lessons.

So this that is that this is an abbreviated, this is actually less than six this video, I shortened it for the purposes of this presentation. So it's a little, it's just a little bit more repetition of some of the postures. But I just wanted to show you this demonstration, if you want to move and follow along, you can try and do some of these postures yourself. I can say that you can do these postures seated or standing. So I'm and I'll just discuss what's going on is me in my office at Walter Reed, we've removed the sound so obviously I'm talking in the videos online.

Okay, so what we're going to go through the first thing is, there's always some warm up involved this is a classic warm up, you can see that the wall I just skipped right over it right. But the backhand, kind of gently taps on your kidney. I've gotten a lot of feedback from patients about this tapping exercise being very beneficial for them. Right. I'm just this tapping exercise has helped people and in this video, I teach it different ways. This video you can just tap in since I recorded this video where you're tapping in the direction of the meridian, right? Just down the outside, up, side and you want to do a little scout and I can do this phone with you guys and so there's more demonstration of warm ups and so this is preparation, right? We always come back to preparation. You want Feet shoulder width to hip distance apart. You want to do that lifting a crown of the head. So the first posture is called between heaven and earth. Linking your fingers reaching. And then slowly exhale down. Yeah, Amy, coffee or hands. Inhale up. Exhale down.

As I said earlier, when you're inhaling up, you want to pull everything up from the earth, pull the air in this posture is good for searching out the lungs vertically. And as the postures progress they're in a specific order where so this is we're gonna do a clearing between every posture apologies, my dog's nose, I'm up and moving. So he's gonna make noise, I'm sorry, back into preparation to prepare for the next posture. So this first posture opened up our chest and our lungs, good for immunity, a second posture, you want to widen your stance, and you want to inhale up, crossing your horns, just drawing a bow and arrow, doing a small squat and you want to look at your target. releasing your hands dropping down, inhale up, crossing, and then drawing the air. So this posture, opens up your chest and expands your chest and the lung, which is associated with immunity. It's the most external of all the internal organs. Right. So we're just warming up, we're just starting with the you want to open up you want to keep your pelvis tucked under, you want to keep your arms in a straight line. So there's none of this.

Right. Keep your body upright. Exhale. And then we can clear inhale up, exhale down. Try and keep your feet very, very grounded and shift your center of gravity as low as you can get it back to preparation.

Third, posture is very similar to the first except one hand presses down as the other presses up. You want to pull your fingertips together, and exhale down. Inhale up, opposite hands, pressing and exhale down. So this posture, we're getting a little bit more internal into your digestive system. So this is a really good posture for any kind of acid reflux, gas and bloating after eating. Especially this motion here, where you're, you know, you can prescribe justice posture for anybody with basic digestive concerns and issues, right. Inhale and exhale, boom. I'm not sure how many times I do this video, this posture. If I do it one more, explain one more thing. If you're not an accomplished breather, you can. Yeah, I didn't. So let's just clear. Inhale, and exhale down. Know that we're relaxed. As we're moving to, we're still holding ourselves upright preparation, lifting your crown of the head, lining your head over your spine. And then posture number four, returning our arms and opening up. This posture is really interesting because I talk about this in my class, in the context of opening yourself up and sharing your gifts with the world. And then as you inhale and come back to center, this centered posture, be late to taking time to protect yourself. And then as we open up, we expand and share our gifts with the world and that really relates to Stephanie's whole presentation.

As we start into these twisting motions with the posture, back to preparation. We're starting to massage the internal organs more of a twisting motion. Okay, posture number five, this is twist and release. You want to inhale and place your hands on your upper thigh with your thumb to the back. And with this one, you twist your body one way in your head the opposite direction and you come back to center. So inhale, exhale. Inhale, back to center. And exhale. So as we start shifting, one of the key parts of this posture is as you turn your head, the opposite direction, you're looking and glancing your eyes down, just look at your foot, right behind. So there's this aspect of connecting your internal energy and emotion to the movement. And this is the first posture that really demonstrates and goes into that connection. And the reason why it's a little bit further along in that sequence.

Now, the full video is about 17 minutes, and it's on the website so you can look it up. So this posture here, some people the energy punch, asked me, Why is it so late, he said, It get harder as you get. So again, internal smiling as you exhale as you inhale as you come back to center, right. So it's exhale, inhale. But the what makes this posture particularly difficult, this is muscle memory and training for your sympathetic nervous system. When you're in this punching position, your eyes are supposed to look very focused and almost angry. And as you come back to center, they should be smiling. So as you punch, you want to have that focus and anger. When you sent her you want to be smiling, I punch, focus, smiling i back to center. So this internal shift of your emotions, this posture in particular is very good for people who anger too quickly, or in my case, who don't anger quick.

Right. Um, and then, so let's see, what's the final is not the final posture. This last one, which is bending for health is an overall posture for like full body, but it's, it's the most internal because it addresses the kidney and bladder meridians. That's the whole context and outside of the scope of this presentation. But you can see that this is a comprehensive form for just good for like, adrenal burnout. So you want to inhale, hands on the kidneys exhale, do a back then and you come forwards. You want to press up, this is just like the warm up, you come up the inside, down the outside, and then you raise up from a squatting position. Exhale down. So this will take a few breaths, right. So the breathing pattern is inhale, exhale into the kidneys. As you circle around, as you come down, you want to inhale, coming up, exhale,

going down, inhale, coming up, and exhale down. And in that way, it's kind of a, it's a complete body exercise that is the most internal. This one will help you generate, like I said, it's good for adrenal burnout. But each one of these postures has a purpose, right? In the context of not just mindfulness, but also, you know, there's physical benefits as well, from a health perspective. And that's why it's important to understand how these practices are linked to this greater broader, holistic system of diagnosis and treatment. So there's always going to be an emotional benefit and a physical benefit to each one of these postures. So the final process is, the way that I teach this is to just inhale coming up on your toes. That's like a body scan. You want to pull all the energy way up into your head, out the top and then exhale and release it back down to the earth. So you're creating this cycle of energy, inhale in, up and exhale down. You may we sing everything down. Okay. And then at the end, you want to give yourself some love. I always say it's your closing. Traditionally, women have the right hand on their abdomen and for men, it's the left. You do what you feel better. I don't think it really matters. You can have both hands, one on top of the other and the abdomen. Um, and so the full 17 minute video On the website, Amy did reference the link. But this is a very basic beginner version of the eight bro COD's practice.

You're welcome for the resource and so that is the end of the video. He requested a balancing exercise, we can do that. I don't know if you can see me do my chair out of the way before I start there any questions about any of those postures? You can type them in the chat. Thanks, Amy. No. All right. Um, so the balancing exercise is a Tai Chi posture. Remember when I say Tai Chi is about is like Qi Gong plus a balancing, choreography. So you would traditionally do this in the contest, I don't know if you can see me or see my feet, I can't quite let me what I'm going to do is point my camera down. So you can see my feet even if my heads cut off, because it's more important that you see the lower part of my body. Um for this specific exercise. So there's a posture, it's called golden rooster on one leg, every posture has the name. And they typically reference Remember, a lot of animal postures.

So in Tai Chi, there's this coordination of movement, where if your right hands coming up, it comes up with you, you speaking of like a puppet. So when we're doing preparation, remember I said you want to feel like your head is like a string hanging off of a string, right? Similar thing for your pants and your feet. So in Tai Chi, whenever my hand comes up, my knee comes up. But I want to make that connection with your body. Right, my hand comes up, my knee comes up. That's kind of how it works. So I'll show you the end result. And then I'll show you how to get there from the beginning. Thank you much better view. So as we inhale up, what it looks like at the end, is got this arm up and his foot down. And then as we exhale, we come down, but we're transferring our weight from one side to the other. And then we lift up, inhale up, exhale down. And we're transferring the weight back and forth. So the way that you get there, but obviously, I've been doing this, so I have really good balance. If you don't, what you can do is practice. Just keep your toe on the ground, I don't know if you can see me keep your toe on the ground. And then you can practice this balance weight transfer. If your toe on the ground I'm down, my dog is not happy. If your toe on the grass until you have your way. So there's a couple of things that I'm doing that you can't see on the video.

As you're coming up, you want to keep your hips pulled outward. So what you don't want to do is this. Right, so as I'm coming up here, and I got my weight on here, you don't want to you don't want to like scoot your hip out. It's kind of like yoga principles. I'm here in my workout room. Because that's really convenient. I don't know if you can see this train. So what you want to do is as you're pulling up your hip want to remain in this horizontal position as you're transferring the weight back and forth. So that

requires you to keep your head what you don't want to do is come over here and see how this collapse or the angle changes. That's what we don't want. You want to keep your hips which requires kind of strengthen your foot and then we coordinate that with the hands golden rooster on one leg. So if you can hold it here, right, that's a good balance exercise. exhale down, inhale up. So always Inhale up. Exhale down. Folding rooster Oh, and like so anti cheat that I can't remember what comes after this. But I'm sure there's some kind of movement into a step. And something else, right. But you can just isolate some different postures to accomplish, but I teach that one for balance. But that's it. For 12. I guess we got some time for some questions. For either myself or Stephanie. And then we can wrap it up if you're on a phone, you can star or star pound to unmute, or you can type any of your questions or comments in the chat box. While you guys must have inserter? Or that you covered everything?

Right. It looks like we do have a question in the chat. Do you have yoga? Yeah, I don't. Currently, I will do. Yoga is different than Tai Chi, I think yoga requires a little bit more evaluation on the part of the patient. Because it's, it's easier to yoga requires more active engagement of your muscles. And you can actually do yoga in a way that kind of hurts yourself. So I think yoga requires a lot more supervision. And so I don't personally prescribed yoga, to me yoga is better on a one on one environment where you can supervise what the patient is doing for the patient safety, if that makes sense. Yeah, I agree I, I have a similar principle with regards to like prescribing, like if I am going to suggest that somebody pursue a yoga practice, it's definitely going to be with a yoga teacher that I trust, who is trained in anatomy very thoroughly. And around injury prevention. Like I typically like people to do physical therapy before they go to a yoga practice so that they can get a little more one on one education on how to move their bodies. I do this is a great, this question is so great, because it's a great quote from my friend. Her name is Taro Fenno. And she has been starting, like she's kind of I didn't know, like at the top of organizing this trauma informed yoga through the VA system out of Palo Alto. And so she's been doing a lot of work with that and using, especially trauma informed, right, like if you're talking about working with, with trauma and recovery, patients, like making sure that they're not going to a hot yoga class that's going to push them past their level of comfort, or they're going into a space where they're not going to feel emotionally and like supported.

So Yoga is a is, is something to be really, really careful with. I think I think it's not something to just do. Oh, just try yoga, like yoga is a powerful form of physical and emotional and spiritual medicine, and should absolutely be practiced very, very mindfully with skilled practitioners. Yeah, and I agree, Amy, you do meet the patient where they are, but it takes that person to be able to sort of I, I hesitate to let patients sort of go like, you know, like Stephanie said, just yeah, go try some yoga. No, I think you need to trust the person that you send them to. And yeah, and you do need to meet the patient where they are, because often the patient, especially our patient base, they're going to push harder than they probably should. So you need someone to kind of remind them, yeah, anything for Stephanie?

Thank you, Vincent McMahon. Thank you, guys. Thank you. It's, um, you know, it's our pleasure, right? Like, it's like, I'm so honored to be here and to be able to share some of this information in the ways that I've been working on integrating it into my own practice. And just, you know, like, I think something that Lynne and I didn't talk about, but it's in our BIOS is that both of us did study in China for a little bit like we got to do some of those, like, postgraduate studies. That's correct. When Yeah, yeah, yeah. And what I think what was so wonderful about our experience there as acupuncture providers, who were trained in America is that we got to go see how, how multiple medical modalities exist cohesively and collaboratively over there. And now, you know, I think that's informed a lot of how we practice here in

the United States to is understanding integration and like patient centered, cohesive collaborative care, working across modalities. So that's what's been really fun about bringing this material to a conference like this. Yeah, and so just coming back, right, so we're here to conference working on Howard Hughes material for substance use disorders, and just remembering that like, mindfulness is around meeting the patients and clients where they're at, and, and a significant part of that recovery process.

You know, like, I'm looking through mindful attention to present moment, mindful attention, on judgment, and from that kind of, to experiences of emotion, or our physical experiences. And, yeah, you know, some activities that are very safe to do with your patients, whether or not it's gratitude and kindness exercises, or do Tai Chi exercises, or for you know, looking at Qigong in your area, looking for providers that you're interested in working with, to help aid your patients in their recovery. When did you have anything else that you wanted to add with that? Yeah, I wouldn't say that, for me, the one of the things that I really, really talk about, and I used to actually teach a, I do actually teach this that for a, you know, for substance abuse patients, is under understanding by practicing tai chi, it can help you not only recognize when you're sort of sympathetic, you know, responses being activated, you'll recognize it earlier, right, and then you can sort of self intervene. But it also gives you a practical skill to be able to shift your own system like back into the more rest and digest state. So I think that the value of learning a practice, I mean, there's so many things, right, there's a ritual of it, that some people, you know, in substance abuse need the ritual of something, right. And so there's that it's going to give them that, it's going to give them a little bit of the meditative aspect in the sense of, you know, shifting brain patterns, and, you know, but also that sense of self control. And, you know, one of the things that I experienced a lot with patients is this permission, or relief, but the fact that they get angry is not a bad thing. And the sense of learning how to maybe channel it into something else into something productive, instead of letting it take over and understanding that, you know, you do have some control over your emotional state.

And so for me, specifically, as it relates to the practice of Tai Chi and Qi Gong, it can give patients that sense of control back, or that sense of, you know, believing that they can participate in the process, and everything's not just out of control or whatever. Alright. So thank you, Stephanie, it was so good to get back in touch in this way. I'm so excited you were able to come and join us. Both of you, both of you, this was fantastic. We're so excited. Hopefully, these are some really great tools and skills that people can take with them, and having fun with them when they are treating their patients. So I really appreciate you both being with us this year. It's been fantastic, and really exciting. And hopefully everybody got some blood flow in today in their brain and in their body.

So I also want to just remind everybody, but there's no other further questions, make sure that you go to the CME or get your CME sign in sheets as well as your CEU signing and evaluation. In the files pause, the presentation and the handouts are available. We want to make sure that you download those. If you need them, make sure you go to the website and pick out or go see Lynne's videos. There's a bunch of other resources for pain management and substance use on that website as well. And we hope this training has been helpful for you. Again, we make sure you submit those CME sign in sheets. By Friday, 1600. And the CPUs private I'm sorry, I apologize. The CPU sign in sheets are due by Friday at 1600. Eastern Standard Time. And the CME and CME are due next Tuesday, the 28th. By 1600, Eastern Standard Time, we will not be able to take any other items after that time. Thank you so much for attending. Really, it's been an amazing workshop. And hopefully we'll see you all again next year. And if you want to reach out to us for any further questions, Lynne or Stephanie, do you mind putting your

emails in the chat box? Also, I will leave this room up until about 10:35 and we will definitely if you have any questions reach out and have a great day. Thank you.