Bice: This episode contains discussion of suicide, which may be triggering for some listeners. If you, or someone you know, is struggling with thoughts of suicide, please seek help immediately by contacting a mental health professional or calling or texting 988, the National Suicide and Crisis Lifeline.

Abbott Nutrition Health Institute typically develops continuing education programs, as well as videos, infographics, and podcasts that focus on nutrition education. While our podcasts typically focus on nutrition, we want to take a hard look at healthcare professionals’ mental health and are releasing a six-part series that covers topics from stress and burnout to anxiety, depression, and suicide.

Welcome to the Abbott Nutrition Health Institute’s Power of Nutrition podcast. My name is Bice Dolciato, and I’m with the Abbott Nutrition Health Institute. I’m so excited to bring you another episode of our mental health podcast series. Today’s episode will focus on putting others before self. It seems like, everywhere you turn, a new study concludes that the importance of mental health is on par with physical health. We’re encouraged to find time for self-care, for meditation, reflection; but how many people actually find time to put themselves first when the needs of their kids, or patients, or parents always seem to take priority?

We are lucky to have Dr. Patrick McGrath with us today. He is the Chief Clinical Officer at NOCD, an app-based platform for the treatment of OCD. He leads their teletherapy services across the world, and has authored two books, titled Don’t Try Harder; Try Different and The OCD Answer Book. Welcome, Dr. McGrath.

Patrick: Hello! Great to be here! Thanks so much, Bice.

Bice: You’re welcome. And before we get started, let me just share something with our audience very quickly. I should note that I’m recording in a studio, while Patrick is dialing in from Wisconsin. So, you may notice a little difference in the sound quality of our respective microphones.

So, Dr. McGrath, I’d like to take a few minutes to just tell us a little bit about yourself and your background.

Patrick: Sure. You know, our microphones here in Wisconsin are encrusted with cheese, so that might be why they sound a bit different. But, I’m a licensed clinical psychologist, and I have been treating anxiety-based disorders for over 20 years now, and my specialty, in terms of therapy, is something called exposure and response prevention therapy where we purposely have people do the things they’re afraid...
of and learn that they can handle them, instead of talking about them. It’s a very behavioral and action-based treatment. So, it’s always thrilling to get people who are afraid of things to actually live the life they want to live, and not the life their anxiety wants them to live.

**Bice:** Thank you for that intro. What I’d like to do is start with just a very basic foundational question. What is mental health, and why is mental health so important? It sounds so basic, but can you describe that to us?

**Patrick:** Yeah, it’s hard to pigeonhole just exactly what it is, because it’s so connected to everything else, right? That, can you have great mental health without physical health? There’s always going to be some influences there. There are people who do maybe have physical things going on, who are very well-adjusted mentally, but there’s other people who maybe have very poor physical things going on and poor mental health. You also have people who might be experiencing some mental health issues where it has little impact on their life and they’ve figured out how to adjust to it. Then there’s other people who might have some mental health concerns that are taking over the day-to-day functioning of their world, and it has isolated them in their homes. So, I would say some of the things that we really want to watch out for people is just – how are they perceiving the world; what are their interpretations of it; and, are those things helping them to get through day-to-day, or are they getting in the way? And, for the work that I’m doing, I’ll – I’m always trying to assess how are people perceiving things – as threats or frightening – what might activate their fight, flight, or freeze response, and how can I help them to maybe have a different interpretation of those things so that it’s not so overwhelming to them? Because, usually – and, Bice, I think you would agree – there’s many times people can be exposed to things, and there might be a whole group of people who think it’s wonderful, and there might be an equal number of people who think it’s horrible. So, many people will talk about the “thing” makes me feel this way, and I change that a little bit, and I try to get people to recognize it’s not really the “thing” that we have to change. We have to help people change the way they interpret the “thing.” And that, to me, is where the mental health piece really comes in.

**Bice:** That makes complete sense, and I do absolutely agree with what you just shared. How people perceive the world does definitely help to put it into perspective. And, you mentioned how life/work experience is a factor that can contribute to mental health, so why do you think we have seen a rise in mental health problems since the pandemic?

**Patrick:** Well, there was such a large adjustment that people had to make that was out of the norm of anything that we’ve ever had to do before, and there was no real direction for a while about how to do it, and what to do, and people were making things up as they went along, and not only was it a work-related stressor, it was a family-related stressor, as well, too, because health care workers not only had to deal with going in to work and all of the PPE and things that were involved and probably the policies and procedures that were changing, sometimes on an hourly basis, but then they also had to go home and make sure their friends and their family were well too, and they might have even carried stressors from those people who were asking them what’s new and what should we do and what’s the information I need, and all that kind of stuff. So, there were people who were on 24/7. There was never a break from
anything, and there comes a point where you just can’t be on 24/7, and you need a break, or else things start to just break down and not function the way that they’re supposed to, and that can happen internally within us, anywhere from how we react physiologically to even the way that our brain processes information and deals with stressors.

**Bice:** And I’m sure you would agree, Dr. McGrath, that as health care professionals, they are trained to put others first. So, let’s just talk about the early warning signs. What should we be looking for as we think about our health care professionals? What are those signs?

**Patrick:** Yeah. First of all, are you driving home and falling asleep in the car, which means that you’re not getting the amount of rest that you need, right? When you do go to sleep, are there just constant thoughts running though your head that are keeping you awake, and you’re not able to let your brain rest? Are there people who are becoming forgetful, and even small tasks that they’ve done numerous times are things that they’re having trouble with doing now? And then there’s – even some of the more serious things that can happen in health care – is there diversion going on? Are medications suddenly missing from people, or things not getting noted the right way that they’re supposed to be noted? And, do you even kind of recognize behaviors from a colleague that might suggest that they’re not all there in terms of maybe there’s a substance abuse going on, or they are so tired that they’re not able to function properly, and do we quote unquote, break the code and say something to someone ‘cause we’re supposed to do that; but, on the other hand, is that getting someone in trouble and could that affect their livelihood? And just think about all of those different stressors going on, plus having to do your own job and deal with your own family and friends, as well too. There are breaking points that people go through, and health care workers, I think, have had an exceptionally difficult issue with all of this, because they’ve been on the front line of this experience. This is not something that we’ve dealt with from a police area, a military area, in the sense they’re the front line – health care workers have been the front line on this one, and they’ve had to take the charge in all of it, and really kind of figure out – how do you protect everybody else, because, in this case, they’ve been in charge of protection.

**Bice:** You just described a lot of great early warning signs. Could we just go in to one example as to what one of those would look like, and then how we could potentially remedy it on the back end, based on your experience?

**Patrick:** Yeah, you really want to watch out for people who are potentially isolating, and who are just not themselves anymore. Obviously, there weren’t abilities to be social during the pandemic. There weren’t the after work abilities to go out and gather with each other, or hang out on the weekends or something of that nature. But, if you’re even noticing people at work who are isolating on the job, and just aren’t seeming to be themselves, you want to make sure that you reach out to those people. Though it can take several years to gather up all statistics, if we look at some of the most recent statistics, which go right back in to the pandemic, over 700 nurses committed suicide. We lost too many people to suicide in our profession, right? And we don’t want that to happen again. Yeah, it’s awful; it’s horrible; and, there just wasn’t enough out there for people to give them the help they needed. There’s EAPs and all these type of
things, but in the pressure of having to take care of everybody else, we lost people who felt so much pressure to do that, that they didn’t take care of themself. It’s essential that we make sure that we’re taking care of ourselves, and that we let our friends know that they need to do that too.

**Bice**: Yeah, and making it a safe place to be able to say that – that makes complete sense too. I will say, just the one example you just shared on isolation – I feel confident that we have helped several listeners, just hearing your one example. So, thank you so much for that.

**Patrick**: Anything that we can do to make people stay alive and take care of themselves so they can take care of other people and get that fulfillment in the profession that they’ve gone in to – that’s what’s most important to me.

**Bice**: Dr. McGrath, can you provide guidance to our audience on ways to maintain a positive mental health, and what does that mean exactly?

**Patrick**: Sure, but, let me just say that, sometimes the idea of a positive mental health might seem overwhelming to people who are feeling very low and down right now, and the notion that they have to become positive might seem impossible. So, sometimes I might even want to work somebody toward, just, more of a neutral feeling about mental health and know that that’s a good step towards potentially getting to a positive way that you feel about yourself and others and the life that you’re living. But it could just be such a jump for folks that I don’t want to say, right off the bat, that that’s the ultimate end all be all for everybody. And, there are some people we know that maybe won’t ever always feel positive about everything, and so positivity doesn’t always have to be the goal. But, for the vast majority of people who can do that, or who would like to be able to get that, I think part of it is the recognition of what I like to say to a lot of my patients is – it’s okay to be selfish. It’s okay to do things for yourself. And, how many of us, especially in the health care field, who went in to a field where we are purposely taking care of other people, have kind of taken that on as our life role, outside of work even too, where what we do is we take care of other people, and that could wear us down. Now, there are some people who could do that for the rest of their lives, and love it, and just feel amazingly fulfilled – that my life everyday is better because of the work and the care that I do taking care of others. But there’s other people who went into this profession wanting to be able to do that, and recognize what a stressor that can actually be, and over the course of their life, that could wear them down. So, allowing people to become selfish and to be able to recognize it is okay to take care of yourself, and in doing so, that could actually make you a better caretaker of others, then that’s a great way to be, and that’s going to be the goal of the work that we would want to do.

**Bice**: Yeah, and you shared a lot of valuable – nuggets is what I would call it – learning just to take care of yourself and being a little selfish with your time. I completely agree with what you’ve shared with us today. As we close out our podcast, I’d like to see if you have any closing insights or key takeaways for us.

**Patrick**: I want to say thank you, to everybody who’s done the work they’ve done. And, I don’t know if people hear that enough. So many people think, “oh, it’s my job,” and one of the things that I’ve learned
when I’ve travelled internationally, and people have come up to me and they’ve said, “why don’t Americans like compliments”? And I say what do you mean? And they say, “well every time we give them one, they say oh no, no, no, no, it’s no big deal – it’s not” whatever, and then they give another one, “oh no, no, no, no.” I want everyone to do something, listening to this podcast, the next time somebody says thank you, I want you to say “you’re welcome.” I don’t want you to say no; I don’t want you to say it’s no big deal – I want you to say “you’re welcome.” And allow for that to be there, and allow for the feeling that people appreciate you to be there. We don’t do that enough. We downplay all the work we do while we build up the work that everybody else does. It’s time to be celebrated, and to allow the fact that the work that you’re doing is good work, and it is influencing the lives of other people. And, when we constantly deny that, we don’t get the sense of a good feeling that everybody else, hopefully, gets if they’re given a compliment for something. Recognize the work that you do. Allow for people to thank you for it, and be appreciative of the fact that people recognize it, and I think you’ll start to feel better about what you’re doing in life.

Bice: Wow. That was fabulous what you just shared. So, let’s just start with you, Dr. McGrath. Let’s celebrate you for this great knowledge that you shared with all of us – thank you.

Patrick: You’re welcome.

Bice: And thank you so much for your insights and for joining us on today’s Power of Nutrition podcast. For listeners, the 988 lifeline provides 24/7 confidential support for people in suicidal crisis or mental health related distress. By calling or texting 988, you’ll connect to a mental health professional. ANHI is excited to provide a series of podcasts on a variety of mental health-related topics. So please join us for the next episode by visiting ANHI.org/resources/podcasts. We will be adding new episodes often, so please check back throughout this year. Thank you for listening. Stay healthy, and be safe.