Barry Munro: Welcome everybody to this week's installment of our SCI: Moving Forward, Response to COVID-19 webinar series. I just wanted to let you know this is brought to you by the North American SCI Consortium and really wouldn't be made possible without the generous support of the Craig Neilsen Foundation. Jess.

Barry Munro: Just a little bit about who are we. We like to call ourselves NASCIC. It's the acronym for the North American SCI Consortium. Our mission is to bring about unified achievements in research, care, and cure policy by supporting the collaborative efforts across the spinal cord injury community. Our membership really brings together so many of our great organizations throughout all the corners of North America. Recently, we're really trying to make an attempt to bring our Latino brothers and sisters together too, from Mexico and Central America. That's work of passion, of love that we've got to have to bring all of us together to really enhance our message as one community so we can learn from each other.

Barry Munro: We thought that was important because of our position and our connections with all the different great organizations throughout America that we respond with something during this crazy time in the COVID-19 pandemic, that we thought it was important to help our population and our community by sharing some great resources throughout all of North America. What we found though was there's a bit of an infodemic out there, that there's so much stuff coming in from everywhere and even in different languages that it was important that we somehow brought a way of organizing it. What we thought we would do is create this really microsite that you'll see the link here on the PowerPoint here. If you got to that link, you can open it up, and you'll see the past webinars that have been held on the topics along with some great collateral resources that are there with it that you can download. We encourage everybody to look at that site and also to share it with whoever you want to. It would be great to share it throughout our community, or for those of you who are stakeholders, to the membership that you have within your organizations.

Barry Munro: What we do is we have these webinars like today, and then within a week it will be archived and then also it will be translated into Spanish subtitles with a Spanish transcript to help the Latino community in North America to also have an opportunity to hear and understand better what we're trying to share. Right now, we're starting today with dealing with mental wellness and the issue of isolation and resiliency. But going forward after today, next week, we're going to deal with SCI Nutrition 101 with Joanne Smith on June 16th, then SCI adapted exercise presented by Walk-it-Off Rebecca on June 30th. Of course, self-advocacy on July 7th, and then we're going to really try to summarize all the great resources that we've had on July the 14th in English, and then we will also do a Latin version on the 21st of July. Please encourage others if they would like to hear more about what we do to register for the upcoming webinars, and that again is available on our site. When we send out the materials after, Jess will also give you information on how to register for the upcoming webinars as well.

Barry Munro: Okay. Today's agenda, we're going to talk about... We have really two issues really under the auspices of mental health. We're very blessed to have two great speakers here with us. Our first speaker will be Dr. Marc Ross, who will talk about CBT for people with SCI during COVID-19. And then we also have a presentation by one of our executive members, Jenn Wolff, talking about building a better brain. That'll be exciting to hear about. At the end of the presentation, we will have a Q&A available, and we'll have some takeaways to talk about. But you do have an opportunity to speak to us. If you want, just go to the chatroom and send the questions in or hold your questions and you can give to us verbally at the end of the presentations.

Barry Munro: I would like to invite you to join us right now and to listen to our next and great speaker, presented really by a person, obviously you can see the picture like I can, Dr. Marc Ross who is also a person with lived experience. Dr. Ross is a registered psychologist who specializes in areas of evolutionary psychology and integral studies, having worked extensively with biofeedback and hypnosis in his practice. He also has had valuable experience in research, teaching, and writing. He's worked with many adolescents, couples, and families over the years and is affectionately referred to as Dr. Wheelz by some teens. I get that. Given his personal experience with quadriplegia, he helps people adapt to chronic pain, disability, and physical injury. I can't think of a better person from a professional point of view that actually has true lived experience to speak about this topic. I invite you all now to listen to the presentation of Dr. Ross. Welcome, Dr. Ross, and thank you for joining us today.

Dr. Marc Ross: Thank you so much for having me. I'm really excited to dive in with you all. Yeah, it's just really great initiative that you have going here, and I'm really delighted to take part. I titled the talk Thinking Wisely During Times of Crisis: CBT Tools for Improved Mental Health. If you just click ahead here, Jess. The reason I'm talking about these mental health challenges, again, because we've been invited to think about that here as a group, but we can address issues of anxiety, isolation, and depression that we as an SCI community are facing during these times. And because we're a vulnerable population, this COVID-19 pandemic has definitely impacted us in a unique way. It can cause a lot of mental stress, I'm going to launch into these points a little bit during the presentation. If you click ahead here, Jess. The way I'd like to introduce what cognitive behavioral therapy is, fancy terminology for the way we think and the way we act affecting how we feel. CBT is, to place it in a historical context, it's part of this line of psychology that's been around for, I'd say, for about a hundred and almost 50 years now, starting within psychoanalyzes. You probably heard of Sigmund Freud or [inaudible 00:07:13], I'm using the fellows that were delving into our dreams and the understanding of psychology through a very deep perspective.

Dr. Marc Ross: And then there was a second wave of psychology starting in about the '50s that was focused more on behavior and how certain stimulants would cause us to react and behave in certain ways. And so that became a big huge area in psychology. And then there was what they call a third wave, which is the cognitive revolution, so the way we think and the way our thinking affects our experience and how we relate to others and how we interpret the world. What I'm presenting to you today is part of this third wave. It's, again, based on how we think. The core principle as we see here are three. First, in the blue quadrant, psychological problems are based in part on faulty or unhelpful ways of thinking. In the second, in the mustard, is psychological problems are based in part on learned patterns of unhelpful behavior. And then the third, in the orange, is people suffering from psychological problems can learn better ways of coping with them, thereby relieving their symptoms and becoming more effective in their lives.

Dr. Marc Ross: Now, I do want to make a quick comment that the CBT and this emphasis on the way we think and how that relates to how we behave and how we feel, is not necessarily this kind of... I don't know. I've been in the chair for 20 years now, so I got hurt when I was 17. Early on my mom was really worried about me and so she wanted to try and do everything she could to get me fixed and cured. And so she'd take me to these healers, and they would be all these alternative healers that would say, "Oh, if you just think more and you imagine yourself walking, you should be able to cure yourself." I always struggled with that because I tried really hard, and it didn't really work, and so I felt like, "What's wrong with me?" So I want to be clear that this cognitive behavioral therapy is not that, saying that whatever you think happens and you create everything around you through your thinking and your behavior. I think ultimately there are definitely things in life that we can control and that are beyond our influence. But that said, there are definitely things that we could do in the way we think and approach our minds that can actually help and can alleviate a lot of suffering.

Dr. Marc Ross: If you skip to the next slide here, Jess. CBT is based on this three-way circus. And so again, the way we think, the thoughts, affects not just how we behave but how we feel. And then vice versa, the way we feel can affect how we think and act, and also the behavior, what we do, can affect how we think and feel. CBT tries to help us understand this and relate to our thoughts, emotions, and behaviors in new and interesting ways. If you skip to the next slide again, Jess. A key aspect of CBT, or cognitive behavioral therapy, is the idea that we all as humans struggle with, what they call cognitive distortions. Now it's fancy terminology for what I like to call when I speak to teenagers about this, is stinking thinking, or just funky thoughts, inaccurate understanding. I mean you could call it many different things. But in the language of CBT, it's cognitive distortions, so thinking traps.

Dr. Marc Ross: And so all of these distortions, and so in the blue, tendency or patterns of thinking or believing, so it's something that we, again, naturally inherit and we tend to think this way, but that, in the mustard, are false or inaccurate, so they can be tested. And then in the orange, have the potential to cause psychological damage. If you skip to the next slide, Jess. I'm going to quickly go through the list of distortions. Now, there are a whole bunch of them. I'll zip through them pretty quickly, but they're really interesting. Again, this is not only a struggle for people that are experiencing mental health challenges, it happens to the wisest smartest people among us, right, I mean we all can fall into these traps, these ways of thinking that are biased and don't represent a clear picture of reality. The first one that they've identified in their research is all-or-nothing thinking, or polarized thinking, also known as black-or-white. The distortion manifests as an inability or unwillingness to see shades of gray. In other words, you see things in terms of extremes, something is either fantastic or awful. You believe you're either perfect or a total failure. Again, we can fall into this pretty easily and quickly.

Dr. Marc Ross: Yeah, that's great, Jess. The next one is overgeneralization. This is a sneaky one and it can take, for example, the form of generalizing an overall pattern. For example, a student may receive a C on a test and conclude that she is, or he is, stupid and a total failure. When we overgeneralize, this can lead to negative thoughts about yourself and your environment based on only one or two experiences. I think for the spinal cord injury community it can be easy to think, "Oh, I'm disabled and therefore I'm not able to do anything that I used to be able to do." Dave, you were talking earlier about this, getting back into motorbike. I mean that's an example of not letting disability interfere with your ability to navigate new and creative ways of doing things. You're fighting this cognitive bias just in what you're doing.

Dr. Marc Ross: The next screen there Jess. Yeah. This is negative filter which, again, is so common for all of us. I know we can all relate, where we recognize only the negative aspects of the situation while ignoring the positive. We might receive compliments on an evaluation or something we've done, but focus on a single piece of negative feedback. This mental filter can foster a pessimistic view of example and can help you feel pretty shitty because you're focusing on the negative. Again, it's normal to do that, but then the key that we'll be asking later is, how do we change that and what can we do to try and correct that without being to idealistic? Another cognitive distortion is jumping to conclusions, and they call that in more playful terms, mind-reading or fortune-telling. Someone will be worrying about something that could happen in the future, and you said, "Well, how's your crystal ball? Is it really so perfect that you can figure out what's going to happen?" Sometimes we can predict. It's likely that if I push this button to open my automatic door it will work. In that sense, jumping to conclusions is helpful and useful. But there are other ways of thinking like, "How will dinner go with my family tonight?" It's hard to say for sure. And so we can jump into conclusions about that and those can be inaccurate.

Dr. Marc Ross: This distortion manifests as an inaccurate belief that we know what another person is thinking, so again, that's mind reading. Again, it's possible to have that idea but this can often enter into negative interpretations. An example of that is if... I know for most for us in wheelchairs this a common thing, again, it's not necessarily inaccurate but it's hard to know for sure. So when we see a stranger with an unpleasant expression or someone that avoids our gaze, whether you're at the mall or wherever, you can jump to a conclusion that they're thinking something negative about you. Like, "Oh, this person in a wheelchair is such a whatever, whatever." When that might not be the case at all, so we have to be alert to that kind of distortion in our thinking.

Dr. Marc Ross: Next slide there, Jess. Another one is emotional reasoning. This one is, again, a super common thing that all of us engage in a lot of the time. It might be one of the more surprising distortions to many readers or listeners. It's also one of the more important to identify and address. The logic behind this distortion is not surprising to most people, rather it is the realization that virtually all of us have bought into distortion one time or another. Again, the assumption is that emotions reflect the way things really are. I feel like a bad friend therefore I must be a bad friend. Again, we're using emotions to understand reality when perhaps a clear thinking might be more accurate. Next slide, Jess. Another is should statements. This one is, they have a cute line, you may have heard it, you're shoulding all over me or I'm shoulding all over myself, another one is I'm mustarbating, I must do this, I must do that. Life must be this way. So you could be engaged in some mustarbation.

Dr. Marc Ross: These statements are statements that you make to yourself about what should or what to ought to happen or what you must do or should do. They can be applied to others of course, imposing expectations that will likely not be met. An example is, "I should always be friendly." This, again, somewhat common one for people with spinal cord injury because we're so reliant on others often and so there's a sense that I should always be kind and always be sweet and always be friendly, otherwise I might not get the help I need, right? Again, you can fall into some patterns there. Next slide there, Jess. Thanks. Labeling and mislabeling. These tendencies in which we assign judgements and value ourselves or other based on one instance or experience. Another example is a student who labels him or herself an utter fool for failing at an assignment is engaging in this distortion. As is the waiter who labels a customer "a grumpy old miser" if he fails to thank the waiter for bringing him his food.

Dr. Marc Ross: Mislabeling refers to the application of highly emotional, loaded, and inaccurate or unreasonable language when labeling. Again, we can label ourselves disabled, which may represent part of what are struggling with and part of the reality, but might not have anything to do with our minds or the way we relate to people. We can be not disabled in that sense. But the labeling can be tricky and can be difficult for us. Next slide there, Jess. Another is personalization. As the name implies, this distortion involves taking everything personally or assigning blame to ourself without any logical reason to believe you are to blame. This distortion covers a wide range of situations from assuming you're the reason a friend did not enjoy the girls' night out, to the more severe examples of believing that you are the cause for every instance of moodiness or irritation in those around you. Again, another way of falling into a thinking trap is personalizing and making everything that happens about us.

Dr. Marc Ross: Next slide there, Jess. Those are some of the cognitive distortions. Again, I encourage you, you should look them up online. They're really interesting. I guess I'm a bit of a nerd. I find it all fascinating but it is neat to see how we can be off target in a lot of the ways we're think and feel. And so what to do? CBT suggests a very direct approach which is thought checking or challenging. I'm going to lead you through a process and then I'll share at the end a couple of really great free apps you can download on your phone that you can play with and that guide you through this process. Because again, the CBT stuff is one of the most widely researched areas of psychology these days and there's a lot of evidence to show that it's helpful for people. Again, not just if you're struggling with severe mental health issues but even if you're functioning quite well, you're relatively happy, but you just want to work on improving yourself and thinking more clearly.

Dr. Marc Ross: The first step in this thought-checking exercise is to summarize a situation that bothered or upset you. I'm trying to speak generally for us and we'll give the example of not being able to go to the mall and socialize with my friends because of isolation and social distancing. That's the situation. Next slide. Then you note how you feel, so how you feel. You can pick through a list of feelings. You might be angry about this. You might be worried. You might be scared, whatever it is. In this case, I'm going to choose anxious, this makes me worried. How strong is that feeling? So you're ranking from zero to 100. In this case I'll say 90. It's quite strong, I feel very anxious about this, okay? Next slide. And then it asks, "Okay, so now get specific about the situation you're feeling. What were you thinking? What thought or concern was going through your mind when you started to feel this way? If I look at my thoughts or unless I think something like, "This will never end. As if my life with spinal cord injury isn't hard enough already, why does life have to be so unfair?"

Dr. Marc Ross: Okay. The next slide. Again, the next step is to identify which distortions might be at play in that way of thinking. For me, out of the list that I went through earlier, I would say at least two would pop out there, right? There's overgeneralization, which is saying this way of experiencing things is going to be forever and all over the place. Again, related to that catastrophizing, "Oh my goodness, as is life isn't hard enough." It's a bit of a dramatic experience and feeling and way of thinking. The next slide. Then it asks you, "Okay, what's another way to think about this situation without distortions?" This is where you take a moment and you say to yourself, you try to talk to yourself from a different perspective. You might come up with something like, "Okay, there's no doubt that this a challenging time, but I have managed challenging times in the past. I'll find a way through this and it won't last forever."

Dr. Marc Ross: Next slide. Again, now we look at the situation which is not being able to go outside to the mall, socialize, because of this coronavirus stuff. Now, instead of having that original automatic thought, which had distortions in it, my modified, more clearly thought-out thought is, "There's no doubt that this is a challenging time but I've managed challenging times in the past. I'll find a way through this and it won't last forever." If you skip to the next slide. Then you look at the feeling, okay? When we originally started with that situation in the first line of thinking, which was a bit more distorted, I came up with a feeling of anxiety or worry. Now I look at it and it's like, "Well, when I think about how I feel after that second line of thinking, or less distorted way of thinking, I feel less anxious. I feel about a 60 instead of a 90."

Dr. Marc Ross: Next slide. To summarize this wheel of action here, we'll start at the top right there. The situation is not being able to go the mall because of COVID-19. The initial thought is, "Why is life so unfair. This sucks. As if it's not bad enough living with a spinal cord injury already, why do I have to have more drama in my life?" So then the distortion if you look at it closely and you try and be a bit scientific, you might see that you're catastrophizing and maybe overgeneralizing and maybe a few other distortions. You can play with what else might be going on there. And then you're invited to modify your thinking and say, "Okay, what's another way of looking at this? How could I talk to myself I might be a little less distorted?" You might say something like, "Well, I've managed challenging situations in the past, and I can do so again. I'll figure this out." And then you look at the feelings. Initially you felt about 90% anxious with the original thought and with the modified thought, you've dropped down a little bit. "I'm down to about a 60. It feels better to think that way."

Dr. Marc Ross: So then the next slide. Again, I don't want to bore you too much. This excites me, hopefully it's somewhat interesting to you. I really do recommend if you have some time and the interest, these are free apps, so whether you're on Android or on iPhone. On Iphone I recommend Moodnotes. They take you through a really cool exercises. You can rank how you feel and they can guide you through this process that I just went through. They have a list of distortions and you just pick them up and you work with your new way of thinking. It's got some really good research behind it. I highly recommend that. The same with MindShift. It's excellent tools and techniques to help you in all these ways to modify your thinking and to get a little bit more clear in the way you might look at what the world and especially our situation right now.

Dr. Marc Ross: Next page, Jess. If you're really, really excited or really stimulated by it you can also take some online course or do some more reading. Thiswayup.org is an Australian group and they have these self-led courses that you can take that are based on CBT and can help you work through some really neat videos and assignments and stuff so you can really benefit from that if you feel like it. And then one of the best books out there on the subject is Feeling Good: The New Mood Therapy by Dr. David Burns. He's been a really big popularizer of CBT and has some really cool funky examples. You get that on audiobook or whatever way is easiest for you to read, so I highly recommend those resources as well.

Dr. Marc Ross: Next slide, Jess. All right, so I'll let you take it off, Jenn. Thanks so much for listening. Hopefully it was somewhat helpful. If you have any desire to connect with me, ask me more questions, I'm sure that information will be available to you, Barry. Thanks for your time.

Barry Munro: Thanks Dr. Ross. That was fantastic. I'm taking my notes from... I have a couple of questions I'll ask at the end of this and would absolutely want the audience, please send us some questions. You have a great opportunity and a great resource right now to speak to both Dr. Ross and Jenn in a few minutes. I urge everybody to start thinking about this opportunity now because it's very difficult time the world's going through but especially in some cases us. Thank you so much. We'll move to the next presentation and do a Q&A afterwards. I just want to introduce now Jenn Wolff, a member of our executive for the North American SCI Consortium. She's an occupational therapist, a T10 para. She's been an occupation therapist since 2005. She is a doer. She has been involved in systems change advocate for 10 years with Users First, United Spinal Association in Iowa and #UpgradeMedicaid. She's also involved with Backbones Leadership as a program coordinator. She's a writer for Naturally Able. She reminds me, she's a sharer of stories, but she is someone that likes to get things done and a pleaser to work with. I'd like to introduce you now and invite Jenn, my friend and a friend of all of us at NASCIC for your presentation. Take it away, Jenn.

Jenn Wolff: Thank you so much for that wonderful introduction. It's an honor to go after Dr. Ross' it really fits very well. I want to share what I've learned from Dr. Amit Sood. The name of the book is Stress Management and Resilience Training. He calls it SMART. I want to share some things with you. I took his two-day class. He looks at things very differently. He's done a lot of research on the neural traps, which is very similar to the cognitive distortions that Dr. Ross was talking about, kind of our ancestral brains that we rely on very often are misleading at time. Using the front parts of our brain which is called which is called the prefrontal cortex is really our superpower. Anyway, next slide. This is the book, the picture of the book. Actually, we missed a slide but that's absolutely fine. We don't need to go into that next one.

Jessica Bassett...: Oh, I did. I realized that. I think I skipped ahead.

Jenn Wolff: It's all good.

Jessica Bassett...: Okay.

Jenn Wolff: Just stay with this one. I had been working two part-time jobs overdoing it, pushing myself to the limits and had a burnout where an unplanned break forced me to look at what I wanted to focus on. I'd been looking at a mindfulness program both for spinal cord injury for my patients and outpatient. I worked with a lot of Parkinson's and post-stroke folks, really thought I wanted to find an evidence-based program. While I was rehabbing, I spoke to a nurse and she introduced me to Dr. Sood who is out of Male Clinic in Rochester, Minnesota. I read his book and took his wonderful two-day class. Here are some things I want to share with you about it. Next slide.

Jessica Bassett...: Sorry, everybody. I'm having a bit of an issue with the PowerPoint, that's why I think... I apologize. I'm just going to have to stop sharing for a second and bring it back up.

Jenn Wolff: No worries.

Jessica Bassett...: I apologize. Technical glitch.

Jenn Wolff: It's either technical glitch or animal walks through. I can actually do a visual description. The first slide was on the default brain. It's kind of our ancestral brain. It was a picture of a lizard, which is a little bit further back, but we all have that same brain. Our brains still focus much of the day in that ancestral zone which is fight or flight, protect, provide and procreate. You think about that and once we learn things we're at autopilot. You think about riding a bike, you think about driving a car, and how you don't have to put as much thought into those things. They just become automatic. That becomes a default mode. They've done research and even dentists who you think have a pretty intensive job, are in this default mode up to 80% of the day, which means they're just on autopilot. That actually has strengthened the ancient part of our brains which are the medulla and [inaudible 00:31:44] which is too technical. But we're not using this front part of our brain which is the prefrontal cortex enough. With adding all the technology and all the Zoom, we're just getting bombarded with all this information and really our brains can only accept small pieces of information to make decisions and so a lot of the decisions we make are automatic response.

Jenn Wolff: This is a technic that helps you go, "Okay, am I just relying on those automatic thoughts and is that thought true? Is there factual base or is that just based on old information or stuff I grew up on that may not be necessarily be true?" That's very, very important in this time when we're dealing with so much unconscious bias and implicit bias or... yeah, unconscious bias. It's time for us to relearn to use our prefrontal cortex. He calls it mindfulness for the 21st century, it's doable ways of learning this. The next slide actually had... the question was, which causes more fear? It's a picture of a spider web and then the question is, which should cause more fear, the spider web or a donut? Our ancestral brains automatically say that that spider causes more fear, but in actuality, the donut causes more bodily damage. If consumed a lot, it's really bad for us. That being able to use that prefrontal cortex to go, "Okay, is this spider truly a threat to me or is what I'm doing to my body a threat?" A lot of times, again, we're bombarded with so many things to do that we don't take the time to stop and think and practice.

Jenn Wolff: The next slide was a little black girl with great head of hair with a gorgeous smile. It was curiosity versus insight. If you think about it, when you're a child, you have lots and lots of curiosity but you don't have a lot of insight. You don't make a lot of judgements. You don't label things as much because you're learning, you're absorbing, you're taking in all those details. As we get older, we have lots and lots of insight, lots and lots of labels because it's easier for our brains to label things to remember things. It's a legitimate way to help us function but we lose that curiosity, that attention to detail. That's an important skill to maintain for your brain health and for mental health. It keeps you curious and you tend to label less. Again, this is all leading up to a couple of things and we'll help you practice this.

Jenn Wolff: Then I had a picture of... it was a [inaudible 00:35:23] in a wheelchair saying, "Your very own superpower." Your prefrontal cortex, this front part of your brain, when you learn to practice it, these certain things on a regular basis, it's almost like an armor. You're able to fend things off, stressor that might trigger you or make you vent out. It's a superpower or a... I call it my bubble wrap. When I practice on a regular basis, and I don't always practice on a regular basis. This was very timely because I'm starting to relearn this program. It allows us to pay attention to details and seeing things for what they are rather than labeling. There will be handouts that goes through these different techniques on the Resource page. Make sure and check those out but here are our five suggestions.

Jenn Wolff: The first one is morning gratitude, and it's a picture of an alarm clock. You think about when we wake up, normally it's like, "I don't want to get out of bed. I have all these things to do. I'm going to hit the snooze." Think about that, it starts all the neurotransmitters that are stressors, that are not the healthiest for our brains. What if you started off your day with position neurotransmitters? As you as wake up, before getting out of bed, before you drill into anything, you think about five people in your life who mean a lot to you and send them silent gratitude. An example might be a friend you grew up with and thinking of a memory of something you did, like details of how they looked and sending silent gratitude. Recalling a memory or going back to your eight-year-old self and thinking about what you look like and giving yourself a virtual hug of someone who's passed and giving them a virtual hug and thanking them for something that they did for you. It really doesn't take that long when you start practicing it. It only takes a couple of minutes but it really does... I noticed after practicing this for two weeks that things might stress me out or make me start getting worked up, I was able to go, "Okay, that's not worth my energy." It's, again, your own bubble wrap.

Jenn Wolff: That is the main one that I really encourage you to start practicing right away. Again, it's not a mental health treatment. But it's strengthening your brain in so many ways. The second one is a gratitude jar. It was a little picture of a clear glass with gratitude written on it. What you do is you keep on a table a little jar and pieces of paper and pencil. And before going to bed or certain times during the day, you sit and write something you're grateful for. It can be funny, that's the best part of what Dr. Sood taught is having a sense of humor about things that even when things don't turn out right, like I forgot to floss my teeth this morning but my teeth didn't fall out. That's the type of stuff... just funny little things in there. And then another suggestion is that when you're struggling or if you do this at work and the workload is getting to people and people are feeling stressed, you sit down in a meeting and you pick out those things and talk about them and the things that we... reminders of the things we should be grateful for when it's really easy to think about all the other not so happy stuff going on.

Jenn Wolff: The two-minute rule, giving two minutes of undivided attention to at least one person a day who deserves the attention but isn't maybe getting it. One of the things he mentioned the most is our families. We come home from work and we go right into, "What's for dinner? Who forgot to take to out the trash?" Starting this with family members is probably the easiest way to do it. When you come home, you ask how everybody's day went, "Do you need a drink of water?" Two minutes of just being curious about their day and not being critical or asking anything or asking them to change. People will look at you weird like, "What are you doing?" when you first start doing it. But it can really change the dynamic in our household.

Jenn Wolff: The fourth one is increasing your curiosity. An easy way to do that, it's called FOND, find one new detail. You can do this anywhere with anyone. When you're driving down the road with your family, you're looking at all the different antennas or chimneys or different factors and then... Oops, we're getting the screen.

Jessica Bassett...: Sorry about that everyone. I had some technical difficulties. This is our fifth webinar and the first time so I appreciate everyone's patience, especially you Jenn.

Jenn Wolff: No worries.

Jessica Bassett...: Is there any particular slide you want me to go to from here?

Jenn Wolff: The kind attention... oh, no, the increase your curiosity. That's maybe four down.

Jessica Bassett...: This one.

Jenn Wolff: No, keep going. There we go. Increasing your curiosity. Again, it's that not automatically giving your insights or labeling things. One thing Dr. Sood mentioned was looking at flowers. You can label a rose right away, but instead take the time to examine it like a child. Look at how many petals it has, all the color differentiations, the blemishes, and appreciate it for what it is without automatically putting that label on it. When it really comes down to it, it's learning attention and focus, which is really good for our brains anyway. But it's that curiosity and paying attention to details that we start losing as we age. That's a really important thing to have, and non-judgment or being less judgemental because it's impossible for our brains to be non-judgemental.

Jenn Wolff: The next slide is attention practice. Kindness isn't weakness. Every person is special and every person struggles. That's a really important thing to remember, that having compassion for people doesn't mean that you're condoning what they do, but it's showing that you understand and that you care for them as a human being. I think when we start labeling and judging people as different than us, it takes away our kindness and it takes away our humanity of that person. It lessens humanity. This is a good way to think about that. This was pre-COVID, but Dr. Sood said when he opened doors, he that of everybody who had all gone through that door during the day and sent them gratitude and a silent good wish. You can do that in the morning when you're drinking your coffee, thinking about all the people that went into picking the beans and the families that let them go to work. That's compassion and gratitude. It just makes you look at the bigger picture as well.

Jenn Wolff: Next slide. There are lots of different resources, the basics is a really easy read. I'm really trying to get them to do the audiobook version of this. It's the Stress Management and Resilience Training. There's a deeper dive book that's a textbook, that goes really into the neural traps of why our brains still think the way they do and goes into the tenants of mindfulness, how it was taught by Buddhists and to now how he's adjusted it to fit. You can see each one of these practices is much shorter. It's not the 30 to 60 minutes of trying to be mindful and clear your mind of everything and inner thoughts. It's really being mindful in and out of our bodies and really paying attention, which I love because I have a hard time sitting down for 30 to 60 minutes and doing mindfulness. And so this is an easy way to incorporate tactics into your day. Even starting with one of them can really make a difference. He also has online option that if any of you are interested. I don't remember how much a month it is and does it cost, but the SMART book I highly, highly recommend to anybody. That's all I got.

Barry Munro: Wow. That was good stuff. Did you just want maybe just for the viewers just go right back and maybe run through the slides that we didn't see, and then just mention them maybe? How's that sound?

Jenn Wolff: Sure. Okay. Our default brain, our ancient brains. The lizard, the gecko. That a lot of our thoughts are automatic, even the things that we practice on a day-to-day basis. The really intensive things like driving takes a lot of attention, a lot of brain power but it gets down to an automatic process where you don't have to think as much about what you're doing. That's how we spend 40 to 80% of our day in that mode. If you hit return again, Jess, our phones are making it... We're dialed into our phones, we're dialed into technology no more than ever. I think right now is the perfect time for us to learn skills to not rely as much on that automatic brain because we need to, as humanity, we need to learn to use that prefrontal cortex better.

Jenn Wolff: Next slide. Here's the spider web. Which causes more fear? Is it the spider or is it the donut? If you really think about it, it's the donut. We have some things that we really fear but in reality or in the day that we live now, most spiders... We're not living in caves anymore or in that mentality, that brutal life and so we don't have to be as scared about spiders as our brains automatically are. Next slide. Here's that curiosity versus insight. That's a really, really important one, I think, is maintaining your curiosity is really, really something we need to practice because our brains are overloaded by trying to categorize everything and label everything because it's easier for our brains. But we need to practice moments of curiosity and that's what that fond, fund one new details in something you pass by every day. Look for something new.

Jenn Wolff: Again, this is... I really do. I feel strongly that this mindfulness for the 21st century is a superpower. You just have to practice it. It's not an automatic thing, it's easier to live life in default mode but it's to our detriment if we don't start learning a little bit more of this. And then it's just the different technics, the morning gratitude, thinking about five people that mean a lot to you, getting that good neurotransmitters going on your brain rather than the stress ones, the cortisol. The gratitude jar, having fun with that. Thank you for my wife for making supper for tonight or thanking my son for cleaning up his room to think goodness for whoever came up... who made shampoo. Just having fun with those but having moments where you're grateful for the little things. It makes it a lot easier to be grateful for the big things too. And the two-minute rule, spending two minutes focused on the person as soon as they come in like they were gone on vacation.

Jenn Wolff: It's hard. It's really hard to do in family situations but it can change dynamics. Next slide. That's where we started back, I think, is the find one new detail.

Jessica Bassett...: Thank you for going through those again.

Jenn Wolff: Yeah.

Jessica Bassett...: Again, I... well, my computer should be the one apologizing for the glitch.

Barry Munro: We have questions, do you want to go to that chat, Jess?

Jessica Bassett...: Sure. I think unfortunately because I had to come in a second time, I didn't see it. Can you track for me? So Barry if you know what the question was maybe you can ask it?

Barry Munro: This is a question for either Dr. Ross or Jenn. They want to thank you for the resources and links. It's coming from Jeff Burrow. When we're doing our own research own hat type of accreditation or verifications could we look for when trying to determine reasonable or viable source for good information? There are a lot of obstacles out when trying to avoid the quackery or that click-bait stuff, so really what to look for when trying to identify these great resources like the ones you sent out today? Do you have any tips on that, either Dr. Ross or Jenn?

Dr. Marc Ross: Sure. That's an excellent question because there's a lot of misinformation or stuff that's opinionated versus evidence based. My one suggestion around that would be to look up trusted resources for example, the American Psychological Association, the APA or the Canadian Psychological Association, the CPA. If you click on those websites and you look for whatever type of information you're looking for relating to psychology for instance, you're likely to come across work that's been well researched and is bit more evidence based in a sense. That would be my recommendation. And then you'll look at other trusted sources like the Male Clinic or other groups where you feel like it's easier to trust.

Barry Munro: Excellent. Jenn made reference to, in her presentation, about screen time. We were joking around a little bit, maybe half-joking about how we're getting a little Zoomed out prior to this call today. Dr. Ross, what's your recommendations on how much time we really do spend with our eyes glued to our tablets, phones, and screens and trying to get our heads around this stuff?

Dr. Marc Ross: Yeah, absolutely. I've been reading articles on Zoom for teens and so it's a real thing. A lot of us, that's the way I'm practicing these days so I'm on the screen for four or five hours a day. Even little things like looking away from the screen for ten seconds, stuff like that can be helpful. But then listening to your body. I think you said something great earlier, Barry, which is sometimes if it's okay, switch to the phone and say, "Hey, do we really need staring at each other right now or can we connect over telephone." That way you can kick back, you can recline in your chair, whatever you need to do and in a lot of ways just as effective. Those would be a couple of thoughts.

Barry Munro: Thank you. Is there any other questions out there? Feel free to jump in, send a chat. Come off mute. It's wide open.

Dr. Marc Ross: I'm not as quick technically on the Zoom stuff so I just noticed in the chat from Donald, you asked me about CBT relating to NLP. Thank you so much for that question. Absolutely, NLP, neurolinguistics programming, so it's a way of trying to reprogram our thinking and our way of relating to the world through language specifically. So it's very much related to CBT, because again, it's trying reorient and have a bit more accuracy in terms of our perceptions and a better quality of life as a result of that. Absolutely, that's great. Hopefully you're into it, sounds like you're into the NLP. I love that stuff and it's tied to the hypnosis stuff that I'm interested in also. Thanks, Donald.

Barry Munro: It's great. In all the conversations leading up to today and beyond really, we're talking about resiliency and dealing with isolation. Well, I think some of us already have that built in with what we're doing, what we had since our injury so we have a bit of a running start on it. But at the same time, I don't think this easy for anybody, especially if we're going through crises in terms of managing care and being face to face with your loved ones 24/7 for months at a time. That can probably add a bit of stress to our relationships and such and so these tools are fantastic. One thing I will mention is after this, we will on the website, as Marc said and Jenn said, we will have not only the PowerPoint presentations available but we'll tease out some of the resources that you both identified separately such as the apps and other resources that we can have there so people can see them and identify them separately. Because I think, again, these are great tools and it's up to us do what we need to do.

Barry Munro: We're approaching the end of the day and the clock right now. I just wanted to go to our takeaways today, if we could, Jess? What we heard today is we have to take time for self-care in all its forms, both physical and mental. I think one thing people should be aware of, I mean it goes without saying but I think it's applied that last week we did talk a lot about health issues related around what's happening, coming up next week and the webinar in three weeks we're dealing with nutrition and exercise. I think those are very important I mean in terms of our mental health too. I guess you both would possibly agree with me on that one in terms of our body is our temple I guess and how we go forward with that.

Barry Munro: We should also look at the times of crisis are the perfect time to look at ourselves and our society and try to make improvements, practicing mindfulness and compassion is a great opportunity. We have time right now to look inwards. My question to you, Dr. Ross is, is it sometimes we've got to be careful of thinking too much?

Dr. Marc Ross: Yep.

Barry Munro: Yeah.

Dr. Marc Ross: Yeah, I think a good Netflix show, a good... Like Dave, was saying, have a little drinking party with your friends, whatever it is. I think that's excellent. Exercise is a great way to do that so yeah, absolutely. What's the old line? An idle mind is a devil's workshop so if we're spending too much time looking inwardly I think it can be problematic so definitely take all these bits of advice from us cautiously. Yeah, absolutely, I think you're right, Barry.

Barry Munro: As we say, these are challenging times for everyone but for people with SCI especially, there are aspects of our current situation that we have no control over, we have to recognize that. One area where we do have significant influence is the way that we think about what's going on. This cognitive distortion and these thinking traps can skew our perceptions and make us feel worse. The CBT offers simple tools and techniques that can help us to question these traps and think more wisely during these times of challenges.

Barry Munro: I want to thank you both for a great and enlightening... I wish we had a couple of hours to go from this and maybe turn it into a bit of therapy, but that's not for now, I guess. But we do have the opportunity to help ourselves and these resources that you've offered us I think are going to be great. They will be found on our website in the link that's connected. When Jess sends out a followup to this meeting, you'll all get that link. I just wanted to encourage everybody that's been on the call today to encourage you all to become members of NASCIC and you can see the link below. The reason we're asking to become members, it just helps us in our communication in spreading the word. It doesn't cost anything. You can be an individual, you can be a member of an organization, you can be part of industry. It really doesn't matter but you all have an opportunity to be there. It does bring you into the catchment of some of the quick newsletters that we get out right away where we might not get to you right away if you're not "on our mailing list."

Barry Munro: I really want to encourage people to do that. But once again, a great webinar today. You guys were absolutely fantastic. I really want to thank you and I'm sure the people that listen today and the comments we're seeing, really, we're very grateful for your comments and we look forward to really assessing those resources and helping ourselves. I think many of us that are here listening we should think about those that might need help to. Feel free to share these resources to individuals you think that might be in a bit of trouble right now so we can help all our brothers and sisters out there. Once again, thank you so much everybody for attending today. I look forward to seeing you all again back next Tuesday at 4:00 PM Eastern, to hear about nutrition which I think is very important for all of us. I know when I look in the mirror every day I do think about it. I guess I should start doing something about it, but that's okay, and get over this COVID-15 that they keep talking about but oh wow. More exercise right, is that what they say? Okay.

Barry Munro: On that note I want to wish everybody well. Thank you so much for joining us today and look forward to seeing and talking and talking to you again. Thank you.

Dr. Marc Ross: Thanks, everyone. Bye.