



Heart to Heart

NEWS FROM ST. LUKE COMMUNITY HEALTHCARE

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Dr. Tyler Thorson treats patient Frank Thomas at St. Luke Community Hospital in Ronan.

ST. LUKE PHOTO

MOVING FORWARD Plan for your best health in 2021

2020 WAS QUITE A YEAR. Let’s decide to make 2021 a better year, beginning with steps to improve your health.

Mike Schallock, a physician assistant at St. Luke’s Ridgewater Clinic, noticed that many people in the past year have neglected their health. He’s seen an increase in patients with higher blood pressure, obesity, diabetes and heart disease. There has also been a significant increase in the number of obese children,

more so than in any other age group.

Another byproduct of stress in the past year is an increase in depression rates and mental health issues. Mental health difficulties rate second only to a sedentary lifestyle in terms of being the cause for physical health problems.

To start the year off in a healthy direction, Schallock encourages people to see their physician and discuss their health history, including any weight gain, feelings of depression or other health

related issues. He also urges everyone to exercise for 30 minutes at a high intensity three to four days per week for improved physical and mental health.

“Don’t fall into the COVID-trap of inactivity,” he said. Even though gyms have intermittently opened and closed and exercise groups have started and stopped, everyone can find a way to increase their physical activity. Riding a

continued on next page

“St. Luke providers are prioritizing patients based on those who have the highest risk factors, such as age and co-occurring medical conditions.”

- Greg Weller, St. Luke Pharmacy Director

COVID-19 vaccines given to staff, now offered to ‘at risk’ groups

THREE-HUNDRED MODERNA COVID-19 vaccines arrived at St. Luke Community Healthcare on December 22nd, according to Greg Weller, Director of St. Luke Pharmacy. These vaccines were designated for Montana DPHHS’s Phase 1a of the vaccine rollout, which targeted healthcare workers and staff and residents of long-term care facilities. St. Luke’s Extended Care vaccines were provided by a separate round of vaccinations, so St. Luke began employee vaccinations just before the holiday, with 10 staff stepping up to lead the charge.

Weller was one of those initial ten and said he was honored to demonstrate to his community the safety of the vaccine. Following the administration of the first vaccines, a system offering doses to all frontline healthcare workers was developed. To date, St. Luke has administered over 400 vaccines to employees and those community members at highest risk.

“St. Luke providers are prioritizing patients based on those who have the highest risk factors, such as age and co-occurring medical conditions, and staff are reaching out to them to get their vaccination scheduled,” Weller said. The team is also working on an online form that community members can use to indicate their interest in

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COVID VACCINE BRINGS HOPE AND SUPPLY CHALLENGES

THE PAST FEW MONTHS HAVE LIKELY BEEN SOME OF THE MOST CHALLENGING IN OUR 67 YEAR HISTORY. Our team has dealt with unprecedented challenges as a result of the Covid pandemic including; our hospital being full beyond our capacity with patients still coming, having lines of cars and testing well over a hundred people in a day, and having important patient services curtailed as a result of staff being unable to come to work due to infection or family quarantine. During October, November and December, we saw multiple surges of Covid patients and all the Covid-related issues that came with that. So far in January things have calmed down a bit. We’ve said many times that tough times don’t last, but tough teams do. St. Luke has a tough team. So far, we have weathered the storm and while we are not out of the woods, there is reason to be hopeful. Our team remains here, ready to serve and we have Covid vaccines. Yes, we do have Covid vaccines, but please let me try and qualify exactly what that means.

We have administered over 400 doses of vaccine. We are beginning to vaccinate health care workers with the second dose, while providing first shots to some of our most vulnerable community members. And while the vaccine brings hope, the process of vaccinating our community is not without its challenges. The challenges with the vaccine range from supply to logistics.

While the headlines would have you believe it is as simple as calling and getting on a list for the Covid vaccine, for now this simply is not the case. At present, the vaccine supply and our ability to receive the vaccine is not assured. As an example, a larger hospital in our region, just last week, only received 20% of the doses that they had ordered. You can imagine how this might hamper your ability to schedule and give vaccines when you only get 1 out of the 5 doses you expected. Contrary to what you may have been led to believe, we do not have a stockpile of vaccines on hand. Here is how it works for us. On Monday of each week we are able to place an order for vaccines (presently 200 vaccines). We receive no assurances that we will receive

this amount. We do not get information as to how many are available. Once we order, we do not get notified that we will receive the vaccine until the following week, when hopefully, we receive a shipping confirmation notice. Last week we received 100 doses, this week we hope to get 200 doses.

In addition to the supply challenges with the vaccine there are logistical challenges in how we need to administer the vaccine. The Covid vaccine is not like the flu vaccine. The vaccine comes in multi-dose vials and once the vial is punctured, all the doses need to be given within six hours. For the most part we have received the Moderna vaccine, which comes in a 10-dose vial and means we need to schedule in 10-person increments. In an effort to ensure no vaccine doses are wasted, we can’t have a “walk-in” vaccine clinic in the hopes that only a multiple of 10 people show up. The vaccine has to be stored carefully to ensure it remains effective. The recommendations require that those who have received a vaccine be monitored for 15 minutes to ensure there is no immediate reaction. Added to the logistical challenge is the fact that everyone who receives the vaccine needs to come back around four weeks later for a

second dose.

As excited as we are to get the vaccine out to anyone who wants one, the supply is simply not reliable enough at this point for us to accommodate that. So, for the coming weeks, our physicians will be prioritizing patients based on known risk factors and we will be reaching out to those patients to schedule an appointment. Please realize that this system is likely to change as we move forward. We hope in the coming weeks to receive assurances of the vaccine supply. If and when that happens please look for information on how to get your Covid vaccine. We will do our best to keep our website, social media, newspaper and radio up to date with the latest information. If you don’t have access to those platforms, we encourage you to have a family member or friend watch them for you and keep you updated. In the meantime, please stay safe and remember to mask up!



Steve

To make this year one of vibrant health, start by taking simple steps in the right direction.

your best health (from page 1)

bike, swimming or walking are a few ideas.

Good nutrition practices may have also declined in the past year. “While being isolated it may have been easy to pick up a carton of ice cream and go to town,” Schallock said. Eating healthy and avoiding junk food, he said, plays as vital a role in one’s physical health as exercise.

To get back on the right track, take a common sense approach to healthy nutrition by focusing on whole foods: choose to eat an apple rather than a sweet, baked good.

Dr. Tyler Thorson said he likes to take his patients on a virtual tour of the grocery store. “The outside aisles (of the grocery store) have 90 percent of what you need. The inside aisles have the delicious foods that aren’t good for you.”

“One simple prescription to follow is the 5-2-1-0 method. Every day, make it a goal to get at least 5 servings of fruits and vegetables, 2 or fewer hours of recreational screen time, 1 or more hours of physical activity, and 0 sweetened beverages. This is a simple practice the whole family can follow and encourage each other to maintain,” said Dr. Thorson.

Though some may have neglected addressing health issues

for fear of exposure to the COVID virus, the screening and masking protocols St. Luke employs allows for patients to safely visit their doctor’s offices and clinics. All who enter a St. Luke facility are routinely screened for COVID symptoms and checked for a fever. Those who need to see their physician should feel comfortable doing so.

To make this year one of vibrant health, start by taking simple steps in the right direction. If you give your body good sleep, good nutrition, exercise and water it will reward you, Schallock notes. “Use your own body to heal your body,” he said. “You can fix a lot of things on your own.” Chronic health problems can be improved through good nutrition, exercise, and medications and by measuring/monitoring your blood glucose and cholesterol levels. He further recommends turning off devices, unwinding and getting plenty of sleep. Insurance companies, he noted, are beginning to look at how healthy their clients are, rather than how unhealthy, and are considering ways to incentivize maintaining good health.

Setting small fitness goals with measurable targets that are easy to achieve is a recipe for success. Reaching incremental goals is good for your mental health and more realistic than trying to lose 50 pounds in one month’s time. Remember, slow and steady wins this race.

HEALTH
WATCH

For those experiencing
suicidal thoughts, or know
someone who is: please
reach out.

1-800-273-8255
SuicidePreventionLifeline.org
Text MT to 741-741

Strong, resilient workforce leads to better patient care

THIRTY-YEAR VETERAN OF COUNSELING IN LAKE COUNTY AND THE MISSOULA AREA, ANDY LAUE, LCSW, created a program to teach skills to healthcare workers dealing with secondary trauma. The welfare of workers is what his STAR-T program is all about. With a desire to be proactive rather than reactive to the challenges of healthcare workers, his interactive - practicum 50 minute ZOOM workshop provides tools for resiliency by teaching self-grounding and awareness skills.

Healthcare workers may not experience the automobile accident or the disease of COVID firsthand, but they are affected on a daily basis by the stressors that accompany caring for those who have.

Learning to manage stress in the face of trauma is imperative to a healthy workforce. Secondary trauma is the name given to the deep emotional connection caregivers feel for trauma patients, an empathetic reaction to the trauma another person is experiencing.

Building cultures of strength inside agencies by addressing secondary trauma as it happens is his goal. Laue seeks to address secondary trauma on the front end with his STAR-T program, (Secondary Trauma Resiliency Skills Training). This requires a paradigm shift. The training provides skills that strengthen workers in the midst of trauma rather than waiting for them to be overly stressed and needing “self-care” after the fact. His program aims to help agencies prosper and grow by training the whole workforce. Workers receive tools that produce resilience in face of all they are going through. Based on current data from the field of neuroscience,



ANDY LAUE PHOTO

Licensed Clinical Social Worker Andy Laue makes his STAR-T resiliency training engaging for attendees.

he instructs clients to practice the following: #1 morning grounding; #2 tracking their experiences during trauma; #3 transitioning from work to home and releasing the day’s material.

The COVID-19 global pandemic in particular creates ongoing anxiety and pressure for workers caring for the very ill and dying. Laue described a situation with a nurse working at the bedside of a dying patient gasping for breath only to soon after be on the receiving end of scornful looks and comments regarding the mask she wore while on her lunch break.

Because Laue’s program has been so positively received, he hopes to train five professionals to facilitate his resiliency workshop in Lake County. He hopes that by different caregiving agencies sharing this training it will help link county agencies closer together making patient care all the better.

Laue first developed this training while working with Missoula County attorneys. He adapts the program to the group he addresses including healthcare workers, social workers, police, firefighters and lawyers. With the advent of COVID-19, he developed an interactive practicum using ZOOM to address resiliency skills for anxious healthcare workers. He has given hundreds of trainings on these critical resiliency skills all over the state of Montana.

The training experience

St. Luke Community Healthcare case manager Jill Pennington, said the resiliency training offered to her

and other employees, came at the perfect time. With the COVID virus rearing its ugly head, learning to stay centered became even more important. The resiliency training provided tools and support for healthcare workers facing increasing numbers of intense circumstances while working with patients. The training provided support and tools to avoid burnout.

Pennington especially enjoyed the mindfulness activities and learning to take deep breaths. She said she tends to live in her head and disconnect from her body. She learned grounding exercises where she checks in with herself when her mind takes over. These practices and learned visualization skills help her deal with stress.

She also appreciates the support of the team she trained with and how they check in with each other. They put their stress out there and talk about burnout with one another, acknowledging their feelings without judging them and then letting them pass. They have a better understanding that feelings, even undesired ones, are simply part of being human.

Specifically, the STAR-T resiliency training teaches participants: a morning grounding activity, skills for tracking body cues during the work day and how to create a personal transition ceremony to end the work day with. This final skill helps keep work issues separated from home life.

Pennington has shared what she learned in the training with her patients - in particular how to breathe deeply when feeling anxious. She found the training to be so valuable, she said she would take it again.

FOUNDATION NEWS: new skills, collaborations carried forward from pandemic

AS WE, A BIT EAGERLY, CLOSE THE DOOR ON 2020, it’s very easy to look back and think of the fear, discomfort and sadness that so many experienced. But here at St. Luke Community Healthcare Foundation, we are challenging ourselves to look back at the positives that we can take forward into 2021.

As the year began and we were met with unfamiliar pandemic protocols, our Board of Directors continued to meet monthly, via Zoom, without skipping a beat. Our dedicated members dove right into this new technology and helped navigate the Foundation through the rest of the year. One of the major actions we took, at a time when so many were cancelling fundraising events, was to change a 20-year tradition of a social gathering style fundraiser to an online event. Having never done anything like it in prior years, we knew it was a risk. Our priority was to continue to raise funds for our Maternal and Child Health Services and reassure our community

that we will stand strong in the face of anything that threatens our community’s health. With the help and support of many, we had a successful event and are already utilizing funds within our behavioral health and obstetrics departments.

Throughout this unprecedented year, the Foundation assisted with raising funds for technology with new vigor. Telehealth took center stage as an avenue to safely “see” patients and ensure that health issues did not go unaddressed. Embraced by physicians and patients alike, telehealth will continue to be part of the comprehensive and inclusive services we offer. On another front, our highest risk residents in our Extended Care Facility also became



Teresa Nygaard

quite adept at using technology to maintain contact with family members and friends. We know technology can never compare to face to face connections, but it can help us bridge the pandemic more safely, and we look forward to a day when we’re all face to face once again.

So, we close that door on 2020 but we usher into the new year some newfound skills, problem solving, ingenuity, creativity, new partnerships and collaborations and a reinforced optimism that we can get through this together.

The Foundation welcomes your gift toward Maternal & Child Health Services, a general gift where it’s needed most or if you wish to designate to one of our special needs: Safe Sleep Campaign, Baby Warmer or Physical Therapy/Lite Gait.

Please contact Teresa Nygaard, Foundation Director, if you have questions or need additional information. Foundation Office: 406-528-5324

New project brings ACEs screen to St. Luke family practice physicians

A SCREENING TOOL FOR CHILDHOOD TRAUMA IS NOW AVAILABLE TO ST. LUKE PHYSICIANS via electronic patient records. The screening tool is being made available to physicians as part of a study to see if physicians will use the ACEs (Adverse Childhood Experiences) screen as part of adult patients’ health profile.

David Vaughan has worked as a nurse practitioner for the past 13 years in the St. Luke Community Clinic in St. Ignatius. In May he will graduate from Montana State University’s doctorate of medical practice program. The study is one of his last projects before graduation. His inspiration for the project comes from knowing how common the knowledge about ACEs is and yet how seldom it is talked about.

Vaughan claims, “Governance and mission need to be part of lived experience. As one of the few, true, community hospitals left in the country,” Vaughn said, “St. Luke’s mission is to serve the community.” In their service to the community, physicians can help our local culture when they use ACEs scores as part of their knowledge base to treat adult patients. While pediatric physicians are more familiar with ACEs scores to treat children, family physicians will now have the opportunity to do the same with their adult patients.

The results of ACEs are manifested not only in a person’s physical health but also spill over into their mental health. Exploring the different dimensions of childhood trauma can aid physicians who work with patients and their chronic health issues. It is thought by bringing to the forefront a better understanding of past trauma, patients can leverage the good and the bad from their lives and become more resilient.

Approximately 60 percent of the American population experiences one trauma before the age of 18, while 17 percent of the population have four or more traumatic experiences during their childhood. Research shows individuals with an ACEs score of four or more have poorer health outcomes. In addition, it appears that it’s the higher number of traumatic experiences, not the type of trauma that correlate with chronic health issues. For example, a child may experience a short span of homelessness and no further trauma. Another child may have been emotionally and physically abused, lived through their parents divorcing, and grown up with alcoholism in their home. The child with the greater number of traumatic events during their childhood will most likely experience more health issues throughout their life. (To determine your own ACEs score, go to: acestoohigh.com/got-your-ace-score/)

The purpose of Vaughn’s study is not to dissect patients’ previous trauma but instead to determine the likelihood physicians will use the ACEs screen to inform their practice and whether continued use of the screen is sustainable. It’s hoped ACEs screening ultimately leads patients to take beneficial steps toward a healthier life through initial recognition of past trauma, and possible treatment.

This study project has just started. Results will be shared in April. It is hoped providers will incorporate the ACEs screen into their repertoire of tools thereby



ST. LUKE PHOTO

David Vaughan, a nurse practitioner with St. Luke Community Clinic in St. Ignatius, has brought an ACEs screening tool to St. Luke physicians in an effort to gain a more comprehensive picture of patient health.

closing the gap between what research says and what current practices are.

Understanding ACEs also helps physicians address health equity issues.

Sarah Teaff, COO of St. Luke Community Healthcare, said that social inequities lead to health disparities.

St. Luke physicians currently screen for depression, basic needs, anxiety and substance abuse on a yearly basis and more often if necessary. Screening helps healthcare workers connect clients with needed resources. In some cases, clients require assistance just to navigate through the red tape that surrounds access to many resources. Social aspects of health include issues of housing, safety, education, transportation, and healthcare.

Teaff explained that St. Luke seeks to “meet patients where they are at and attend to the needs of our population.” Assisting clients with their social issues improves their health outcomes.

Vaughn’s project to encourage family physicians to use the ACEs screen and its results may lay the groundwork for St. Luke to become an ACEs Trauma Informed Care facility in the future.

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Radiology

Northwest Imaging
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Sleep Medicine

Kim Damrow, MD
406-676-4441



ST. LUKE PHOTO

COVID-19 vaccine

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the vaccine and identify any health risks. This will help St. Luke scheduling staff prioritize vaccinations so those at the highest risk receive them first. “We’ll let people know as soon as that tool is available,” he added.

As staff begin to receive their second dose, Weller explains that the anecdotal feedback so far is that most people feel a bit sore and achy for day or two afterwards, but he stressed that you cannot get COVID from the COVID vaccine, as it’s not made using a live virus. He encourages everyone interested in the vaccine to follow St. Luke’s website (www.stlukehealthcare.org, “COVID19 Updates”) and social media outlets for continued updates.

Everyone interested in the vaccine should follow St. Luke’s website (www.stlukehealthcare.org, “COVID19 Updates”) and social media outlets for continued updates.

ECF **PROFILE:** Albert & Norma Knutson

ALBERT (AL) KNUTSON WAS BORN ON APRIL 11TH, 1932 ON MAIN STREET IN POLSON and had an adventurous Montana upbringing. His grandfather was the Polson Fire Chief, so Al got to drive fire trucks before most people knew how to drive a car. At 19, he helped with the completion of the Going to the Sun Road in Glacier National Park, hauling dry mix up the steep mountainsides. Norma was born on March 21st, 1936 in Twin Falls, Idaho. She moved to Ronan with her family in 1945, when her father started a harness and saddle making business. Norma also worked hard her whole life, starting even before graduating high school in 1954. Over the years, she had various careers including agriculture, dictation, bookkeeping, office cleaning, and working in a school cafeteria.

Al and Norma met at the Ronan Movie Theatre in 1953, but fate wouldn't bring them together quite yet. At the time, Al was dating Norma's good friend and she was seeing someone else. Later, Norma decided to go to prom and, as they were both single by then, Al offered to take her and their paths haven't parted ways since. The couple were married in 1955 and went on to have two sons, Al and Mike. Norma then learned she couldn't have any more children, but her dream was always to run an orphanage and Al loved children as well. "So we just raised everyone else's kids," she says.

The Knutson's took in a foster son and daughter, and often anyone else who was in need of help. Norma said she wasn't surprised if she got home and Al had brought someone new who needed a place to stay, "but we never turned anyone away." The couple's life was built around people and the special relationships they created over the years. They were both involved in Boys Scouts and active members of the Good Shepherd Lutheran Church, so helping others came naturally to them. They had family and friends over every Sunday for a big, home-cooked meal. Al also played "Santa" every year, by buying and delivering toys to children of local friends and family. They both loved to make other people feel special.

The busy family still made time to enjoy camping, fishing, gardening, and Norma loved to bake. She also got to enjoy some adventure later in life, when she flew on a plane for the first time in 2004 and visited Israel, Greece, and London. The Knutson's lived in Pablo until Al moved into St. Luke Extended Care and Norma joined him a few years later. They remain active



Albert & Norma (present)

in the nursing home, where Norma makes cards for sick residents and led the internal church service until COVID hit. Since then they've "had to adapt," but Norma says their deep faith has gotten them through, along with their love for their fellow residents.

After 65 years of marriage, the couple admits they still disagree from time to time, but Al and Norma both say they took their vows very seriously. "We may have considered murder at times," jokes Al, "but never divorce!" Norma is grateful they can still be together at this stage in life. "We're blessed to be at St. Luke. They are careful and take good care to protect us all. My mom was here at the nursing home, and I knew I wanted to be here as well when the time came." If there's a lesson to learn from this resilient and loving couple it's the power of hard work and a good dose of humor. No matter what challenges they have faced, they've faced them together, with good spirits, and will continue to in the time they share now. May we all take note and do the same!



Albert & Norma (1955)

EMPLOYEE OF THE QUARTER

Quarter 1:
Natasha Balderas, Surgery

Natasha creates an environment of positivity and possibility wherever she goes. Co-workers describe her as unfailingly generous in sharing her knowledge and resources. "She wants us all to do well because she is a team player!" Natasha's clinical skills are excellent as well. During COVID, she has stepped up to help wherever she might be needed. Natasha is clever, creative, and puts her patients at ease. St. Luke is incredibly lucky to have her on our team!



SL Heart to Heart

www.stlukehealthcare.org

IN RONAN:
St. Luke Community Hospital
St. Luke Community Convenient Care
St. Luke Community Extended Care
St. Luke Community Oxygen & Medical Equipment
St. Luke Community Hearing Center
St. Luke Community Healthcare Foundation
107 6th Ave. SW 406-676-4441
St. Luke Community Clinic – Ronan 406-676-3600
St. Luke Orthopedic Clinic 406-528-5580
St. Luke General Surgery 406-676-3600
126 6th Ave. SW

IN POLSON:
St. Luke Community Clinic – Ridgewater 406-883-3737
St. Luke Community Clinic – Ridgewater PT 406-883-2666
107 Ridgewater Drive
St. Luke Community Clinic – Southshore 406-883-2555
104 Rufus Lane

IN ST. IGNATIUS:
St. Luke Community Clinic – St. Ignatius
330 Six Tracts Way
406-745-2781

**The Heart of Healthcare
in the Mission Valley**



NUTRITION CORNER

Ditch the dieting resolutions

LEARN HOW TO EAT INUITIVELY AND MINDFULLY TO REACH YOUR GOALS

By Diane Grogan, RD

IN JANUARY, MANY AMERICANS MAKE NEW YEAR'S RESOLUTIONS. In 2019, it was estimated that nearly 50% of Americans made resolutions to lose weight and 54% resolved to eat healthier. Many of us would like to blame 2020 for not achieving our goals, but the reality is that only 10% of resolutions are reached on any given year and out of the 10% that are achieved, even fewer goals are maintained for greater than 1 year.

Why do we break our resolutions?
For many of us, old habits are hard to change, this includes eating habits. Then, add the craziness of 2020. Many of us held onto our old habits, simply to find stability and comfort in uncertain times.

Also, it can be defeating for some who have set weight loss goals when they don't achieve their specific goal in a quick manner. Often, the "dieting mentality" can set individuals up to unknowingly sabotage themselves in reaching their goals.

Lastly, at the end of the day, many find it difficult to find the time, motivation or energy to devote to something that maybe isn't as interesting or as easy as they thought it would be. The feeling of "failure" with reaching your goals often produces guilt and stress, both of which can lead to falling back into old habits.

What is the Dieting Mentality?
The Dieting Mentality is basically having rules and judgments about food and food groups which distracts one from enjoying several types and amounts of food.

The Dieting Mentality includes a wide range of thoughts and behaviors. It may be very apparent to some, but for others they have dieted for so long that certain dieting behaviors have become subconscious. It often leads to feelings of guilt, stress, anxiety and possibly to negative body image issues.

Practices that are often included with the Dieting Mentality are as follows:
Cutting out major food groups
Counting calories, "macros," weighing and measuring foods
Strict rules and judgments around food
Expecting/Needing results NOW
What is Mindful Eating versus Intuitive Eating?

As defined by the Center for Mindful Eating, mindful eating is "using all your senses in choosing to eat food that is both satisfying to you and nourishing to your body and becoming aware of physical hunger and satiety (fullness) cues to guide your decisions to begin and end eating".

Intuitive Eating allows one to focus on behavior changes and improve the relationship with food and body image.

Although Mindful Eating and Intuitive Eating are often used interchangeably, there is a slight difference. When you first work on *intuitive* eating (your relationship with food and body image), you then allow yourself to come *mindful* about foods you choose to eat...leaving the Dieting Mentality behind.

Steps to Start Eating Intuitively and Mindfully (this is not a complete list):

- Stop dieting: find a meal plan that suits you...it may be based on any medical conditions you have, but work with your care provider or registered dietitian for guidance. There is not one "diet" that fits everyone. Grant yourself permission to honor your cravings, being flexible with your choices while being mindful about moments of indulgence.
- Learn when your hunger is satisfied: This is definitely one of the biggest challenges and it takes patience but is worth it! Eat slowly. Pause periodically during your meal. How does your food taste? Are you still enjoying it or are you eating mindlessly? Are you still hungry or are you feeling satisfied?
- Shut down negative thoughts: Eliminate negative self talk, including that you were "good" or "bad" with respect to your eating habits. Practice calmness; finding balance in eating and activity will help you reach and maintain your goals.
- Learn to cope with your feelings without using food. Find healthy ways to cope with stress, anxiety or depression. Ideas include talking to a counselor/therapist, journaling, going for a walk, meditation, etc.
- Respect your body and shape: It is important to acknowledge your body and the fact that everyone is built differently. Throw out the scale. Be the best version of yourself...by working on being the healthiest version of yourself.

As we move into 2021, I hope you will give yourself the opportunity to learn about Intuitive Eating and Mindful Eating.