

# THE EPOCH TIMES MIND & BODY

## STOP COMPARING YOURSELF

TO IMAGINARY  
VERSIONS OF  
YOURSELF

Page 6

## ACTIVE MOMS

GIVE THEIR  
CHILDREN A  
BIOCHEMICAL  
BOOST

Page 4

Your body will inevitably suffer disease and injury—and produce a pharmacy of substances to heal itself.

## INFLAMMATION:

THE KEY FACTOR  
BEHIND SEVERE COVID

Page 4

# Your Self- Healing Body

MODERN MEDICINE HAS ENTERED A NEW ERA,  
IN WHICH MANY SUFFER FROM OVERTREATMENT

Page 3



## TRUTH CAN BE BLOCKED BUT NEVER STOPPED

Pass it on, one friend at a time!



I enjoy reading The Epoch Times daily and share links, stories and “real news” updates whenever I can. Because of this, several friends and family members are now subscribers and have thanked me for sharing “real news” that is going on globally.

— DELINDA FORSYTHE

### REFER YOUR FRIENDS\*

For each successful referral you make, you get 2 FREE months added to your subscription. Each friend you refer will get 2 months of our paper for only \$2!

Refer your friends and family today!

[ReadEpoch.com/Friends](http://ReadEpoch.com/Friends)

\* This referral program is only valid online at [ReadEpoch.com/Friends](http://ReadEpoch.com/Friends). As we can't currently process check payments for this program, your understanding is appreciated.



Qu-Chi or Pool at the Bend is also known as acupressure point LI11.

### CHINESE WISDOM FOR SEASONAL LIVING

## Exploring Solar Terms: ‘White Dew’

Tips to stay well when facing the year's biggest daily temperature changes

A solar term is a period of about two weeks and is based on the sun's position in the zodiac. Solar terms form the traditional Chinese calendar system. The calendar follows the ancient Chinese belief that living in accordance with nature will enable one to live a harmonious life. This article series explores each of the year's 24 solar terms, offering guidance on how to best navigate the season.

The lungs are called “tender organs” in traditional Chinese medicine because they are fragile and dislike when the weather is either too hot or too cold. The lungs are closely linked with our immune system, thus taking good care of them and the respiratory system is particularly important in the pandemic season.

### Living in Harmony With White Dew

1. Protect your neck, nose, and mouth by covering them up in the early morning.
2. Press firmly into the acupressure point “Qu-Chi” (Pool at the Bend, number LI11). It is at the end of the joint line when we bend our elbows to our upper arms. It also helps those with skin problems, such as dry or sensitive skin, pigmentation, acne, and so on.
3. Press firmly into the acupressure point “Tan-Zhong,” which is in the center of the chest, between the nipples. It can help with congested lungs, coughing, or shortness of breath. You can also use a hair blow dryer to warm the point.
4. Consider getting moxibustion treatments, as the heat can repel the chill hidden in our bodies and be preserved for an energetic start in the coming spring.
5. Deep cleanse by inhaling warm steam, with or without essential oils, which helps to loosen up and dilute congestion inside our respiratory system and can help rinse our cells and tissues.
6. Burn essential oils near the front door of the house to purify the air we bring in from outdoors. This can also help to calm and balance our senses each time we go in or out.

According to traditional Chinese medicine, our lungs and skin correspond to each other, as the lungs and our pores both release air and moisture.

During this solar term, birds begin to adapt for the season. Wild geese and swallows begin to migrate southward while other birds stock their hoards in preparation for winter.

For the crops that can be grown in both spring and autumn, like rice, it's their time to yield. If it rains, the crops may be damaged and unable to ripen or be properly harvested. The name of this solar term describes air vapors that have condensed into white dew overnight. It's the ideal amount of water for crops during this solar term.

According to traditional Chinese medicine, our lungs and skin correspond to each other, as the lungs and our pores both release air and moisture. Because of this, they're both sensitive to the temperature changes that mark this solar term. And the results are similar, we tend to have irritated skin or respiratory systems due to the frequent and significant changes in temperatures during White Dew.

### Seasonal Foods and Scents

#### Foods to Eat:

Chicken, walnut, yogurt, onion, ginkgo berry, potato, pear, tofu, mushroom, coconut, and eggs. Avoid deep-fried foods, pickles, shellfish, and chiles.

#### Essential Oils to Use:

Chamomile, niaouli, eucalyptus, cypress, pine, jasmine, frankincense, peppermint, neroli, and rosalina

Epoch Times contributor Moreen Liao is a descendant of four generations of traditional Chinese medicine doctors. She is also a certified aromatherapist, former dean of the New Directions Institute of Natural Therapies in Sydney, and the founder of Ausganica, a certified organic cosmetic brand. Visit [Ausganica.com](http://Ausganica.com)

ALL PHOTOS BY SHUTTERSTOCK

Modern medicine can rescue us from extreme circumstances, but for general health maintenance, seek modalities that work with your body's self-healing system.



## Your Self-Healing Body

Modern medicine has entered a new era, in which many suffer from overtreatment

### CONAN MILNER

By any measure, modern medicine is a miracle. Countless lives have been saved, epidemics averted, and suffering eased, thanks to the medical advances of the past century.

But this miracle comes with miserable side effects. Widespread addiction to prescription drugs, antibiotic-resistant superbugs, and out-of-control health care spending are a few of the problems that plague the system. According to medical researcher and philosopher Dr. Jeremy Howick, modern medicine has clearly benefited our lives, although we've also lost touch with how to determine a proper dose of it. We've developed effective treatments for diseases that killed mercilessly in the past, but now we suffer from a new problem: too much medicine.

“For the first time since World War II, life expectancy is going down in the U.S.,” Howick said. “We do need medicine, but we're taking way too much of it, to the point where it's bankrupting us and it's not healthy anymore.”

Howick's book “Doctor You: Introducing the Hard Science of Self-Healing,” offers a compelling solution to our unhealthy dependence: learning to tap into our body's ability to heal itself.

The concept of the body as a self-healing organism isn't new. In fact, it's been around as long as people have been treating illnesses. Ancient doctors from around the world noted that, given enough time and support, the body will often correct itself.

Of course, it's much easier to come to this conclusion if all you have is observations from nature, ancient traditions, and primitive tools. Arriving at this insight today is far less likely. One big reason is our sense of entitlement. Along with the miraculous cures that emerged in the 20th century has come an expectation that there must be a pill for every ill—or there may soon be one, given enough research and funding.

This expectation has produced incredible cures, but it has also warped our understanding of what it means to be healthy. Today, 20 percent of Americans take at least five prescription drugs per day, often with little understanding or oversight about how these drugs interact with each other. Medical errors now rank as the third-most-likely cause of death in the United States. Prescription drug errors alone kill more than 100,000 Americans annually.

Meanwhile, drug researchers look at the body's ability to self-heal more as a statistical annoyance than a blessing. In order to deem a drug effective, trials have to prove that it can outperform a placebo. The placebo effect shows that even when patients take a fake drug, their symptoms often improve.

And it's not just pills. A 2014 study at Oxford University looked at more than 50 placebo-controlled studies of various minor surgical techniques and found that placebo surgery was as effective as the real thing in more than half the trials.

We tend to think of the placebo effect as a delusion caused by deception in order to determine an unbiased truth. It's why double-blind trials ensure that both researchers and patients are kept in the dark about who takes the placebo and who gets the genuine drug.

But the placebo effect may also demonstrate how our minds and bodies are naturally bent toward healing—no deception necessary. In a 2016 study from Harvard Medical School, researchers discovered that even when patients were told they were taking a fake pill, the ritual of having it prescribed by a real doctor still resulted in significant improvement in back pain.

Other studies on so-called open-label placebos for IBS, depression, allergic rhinitis, and ADHD all have shown positive effects.

The placebo effect isn't merely a trick of the mind. It taps into what Howick calls our “inner pharmacy”—chemicals with a drug-like effect that are naturally produced inside our body. Becoming conscious of our inner pharmacy may make it more effective. One study looking at preoperative patients examined how much of an effect such insight had on painkiller use. Researchers educated half the patients about endorphins—the body's own painkilling chemicals—while the other half received no such education.

After the operations, everyone in the non-educated group filled their painkiller prescriptions, but only 10 percent of the educated group opted for drugs.

So if our inner pharmacy can be stimulated simply by suggestion, why isn't more done to promote this self-healing mechanism? Howick believes it's primarily an issue of profit. The medical industry sees the healing potential, just not the market potential. “If you work at GlaxoSmithKline, you have an amazing cafeteria with healthy food, way healthier than you get in any hospital,” he said. “They teach mindfulness and yoga. They have programs to help their workers from taking drugs, but their business model for us is for us to take more drugs.”

Fortunately, we don't have to wait

for the pharmaceutical industry's blessing to access our body's self-healing abilities. Diet and exercise are well-established strategies for improving our health, but there are many other things we can do to influence our well-being. We can keep close friends, have gratitude, and cultivate a positive outlook. Perhaps part of us has always known that such behaviors are good for us, but recent science is bringing clarity to their therapeutic value.

Mounting research has begun to quantify the therapeutic value of these approaches in the same way we quantify the effect of drugs.

Even the demeanor of our doctor can have a quantifiable effect on our health. Howick says that a doctor who expresses empathy can have many of the same benefits as over-the-counter drugs for pain, depression, and anxiety.

Once referred to as “bedside manner,” empathy is an idea close to Howick's heart. He's the director of Oxford University's Empathy Program, which looks at the effect that empathy has on healing.

His team published a systematic review of randomized trials that demonstrates just how powerful it can be.

One study found that doctors who receive empathy training see their patients' pain reduced by a point on a 10-point scale. It may not sound like much, but it's enough to take the pain from severe to moderate, or moderate to mild. For some patients, that small shift can make a huge difference.

“In the context of the opioid crisis, people often start taking these drugs and it leads them on a path to stronger and stronger drugs, and for many, it leads to dependence and death. Whereas communication can actually help,” Howick said.

One reason why empathy is so effective is that helps alleviate the feeling of loneliness that so many of us suffer. Research has found that, on average, feeling isolated is as bad for your health as smoking. Having another person with whom we can share our worries and concerns, and knowing that someone has our back, can give us a much-needed feeling of support and reduces our stress.

When you need medical care, opt for the most conservative, least expensive, and lowest risk treatment option first. Drugs and surgery can be lifesavers, but they can also have side effects worse than the disease they are designed to treat.

When you need medical care, opt for the most conservative, least expensive, and lowest risk treatment option first. Drugs and surgery can be lifesavers, but they can also have side effects worse than the disease they are designed to treat.

When facing a serious health problem, consider the evidence behind the suggested cure. Aggressive cancer treatments, for example, are often the first choice among patients desperate to save their lives. They rarely realize, however, that these harsh procedures were never approved, based on trials where they look at mortality as an outcome.

“You want to know if you're going to live better and longer,” Howick said. “The majority of these trials were based on surrogate outcomes—like tumor-shrinking—which is important from a pathophysiological point of view, but it might come back more aggressively.”

Modern medicine can rescue us from extreme circumstances, but for general health maintenance, seek modalities that work with your body's self-healing system.

Ed Paget, an osteopath and movement coach from Alberta, Canada, recently saw a patient who had suffered from a migraine for more than six months.

“It was so bad she couldn't drive, had to quit school, and would go to the hospital just to get some pain relief,” Paget said.

But getting to the bottom of his patient's pain required some sleuthing. “We looked at all the areas of her body that could be impacting or contributing to her migraine and the one thing that stood out was a fall that she had on her tailbone prior to getting the pain,” he said.

With some gentle hands-on work to put her tailbone back in line, the migraine disappeared.

“The body is always trying to get better,” he said. “Even if you are dying of cancer, a cut on your skin will start to heal. Most of the time, we have to find the reason the body isn't recovering. Remove it and let nature do the rest.”

Finally, realize how strong you truly are. Nature is full of self-healing mechanisms. And as a part of nature, our bodies naturally exhibit similar features. Every 15 minutes, our bodies make a billion and a half new cells. Pound for pound, our bones are stronger than steel. Our blood vessels are swimming with powerful cells that constantly seek and destroy harmful microbes.

Consider that, in a world where we are surrounded by numerous forces that can cause our demise, serious illness is relatively rare.

“People may say, ‘Well if the body is so amazing, how come we get sick?’ But it's the other way around, given that all the parasites and germs that come into our body all the time could potentially kill us,” Howick said. “The fact that most people remain healthy for their whole lives, that is the amazing thing. And that's a testament to the incredible nature of the human body.”

Drugs and surgery can save our lives but are often overused—with disastrous results.

### THE EPOCH TIMES

The Book You've Been Waiting for...



## HOW THE SPECTER OF COMMUNISM IS RULING OUR WORLD

The specter of communism did not disappear with the disintegration of the Communist Party in Eastern Europe

ORDER NOW!

[EpochShop.com](http://EpochShop.com)

# Inflammation:

## The Key Factor That Explains Vulnerability to Severe COVID

SHEENA CRUICKSHANK

The severity of COVID-19 can vary hugely. In some, it causes no symptoms at all. In others, it's life-threatening, with some people particularly vulnerable to its very severe effects.

The virus disproportionately affects men and people who are older and who have conditions such as diabetes and obesity. In the United Kingdom and other Western countries, ethnic minorities also have been disproportionately affected.

While many factors contribute to how severely people are affected, including access to health care, occupational exposure, and environmental risks such as pollution, it's becoming clear that for some of these at-risk groups, it's the response of their immune system—inflammation—that explains why they get so sick.

Specifically, we're seeing that the risks associated with diabetes, obesity, age, and sex are all related to immune systems functioning irregularly when confronted by the virus.

### Inflammation Can Go Too Far

A common feature for many patients that get severe COVID-19 is serious lung damage caused by an overly vigorous immune response. This is characterized by the creation of lots of inflammatory products called cytokines—the so-called cytokine storm.

Cytokines can be really powerful tools in the immune response: They can stop viruses from reproducing, for example. However, some cytokine actions—such as helping bring in other immune cells to fight an infection or enhancing the ability of these recruited cells to get across blood vessels—can cause real damage if they aren't controlled. That's exactly what happens in a cytokine storm.

Many white blood cells create cytokines, but specialized cells called monocytes and macrophages seem to be some of the biggest culprits in generating cytokine storms. When properly controlled, these cells are a force for good that can detect and de-



ROBERT CIANFLORE/GETTY IMAGES

▲ A resident is taken from the Epping Gardens Aged Care Home in Melbourne, Australia, on July 29, 2020.

stroy threats, clear and repair damaged tissue, and bring in other immune cells to help.

However, in severe COVID-19, the way monocytes and macrophages work misfires. And that's particularly true in patients with diabetes and obesity.

### Glucose Fuels Damage

Diabetes, if not controlled well, can result in high levels of glucose in the body. A recent study showed that, in COVID-19, macrophages and monocytes respond to high levels of glucose with worrying consequences.

The virus that causes COVID-19, SARS-CoV-2, needs a target to latch onto in order to invade our cells. Its choice is a protein on the cell surface called ACE2. Glucose increases the levels of ACE2 present on macrophages and monocytes, helping the virus infect the very cells that should be helping to kill it.

Once the virus is safely inside these cells, it causes them to start producing lots of inflammatory cytokines—effectively kick-start-

ing the cytokine storm. And the higher the levels of glucose, the more successful the virus is at replicating inside the cells. Essentially, the glucose fuels the virus.

But the virus isn't done yet. It also causes the virally infected immune cells to make products that are very damaging to the lungs, such as reactive oxygen species. And on top of this, the virus reduces the ability of other immune cells—lymphocytes—to kill it.

Obesity also causes high levels of glucose in the body and, similar to diabetes, affects macrophage and monocyte activation. Research has shown that macrophages from obese individuals are an ideal place for SARS-CoV-2 to thrive.

### Other Risks Tied to Inflammation

The same sort of inflammatory profile that diabetes and obesity cause is also seen in some older people (those over 60 years). This is due to a phenomenon known as inflammaging.

Inflammaging is characterized

by having high levels of pro-inflammatory cytokines. It's influenced by a number of factors, including genetics, the microbiome (the bacteria, viruses, and other microbes that live inside and on you), and obesity.

Many older people also have fewer lymphocytes—the very cells that can specifically target and destroy viruses.

This all means that for some older people, their immune system isn't only poorly equipped to fight off an infection, but it's also more likely to lead to a damaging immune response. Having fewer lymphocytes also means vaccines may not work as well, which is crucial to consider when planning a future COVID-19 vaccine campaign.

Another puzzle that has been worrying researchers is why men seem so much more vulnerable to COVID-19. One reason is that cells in men seem to be more readily infected by SARS-CoV-2 than women. The ACE2 receptor that the virus uses to latch onto and infect cells is expressed much more highly in men than women. Men also have higher levels of an enzyme called TMPRSS2 that promotes the ability of the virus to enter the cells.

Immunology is also offering some clues on the sex difference. It's long been known that men and women differ in their immune responses, and that's true in COVID-19.

A recent pre-print (research that hasn't yet been reviewed) has tracked and compared the immune response to SARS-CoV-2 in men and women over time. It found that men were more likely to develop atypical monocytes that were profoundly pro-inflammatory and capable of making cytokines typical of a cytokine storm. Women also tended to have a more robust T cell response, which is needed for effective virus killing. However, increased age and having a higher body mass index reversed the protective immune effect in women.

Studies such as this highlight how different people are. The more we understand these differences and vulnerabilities, the more we can consider how best to treat each patient. Data like these also highlight the need to consider variation in immune function and include people of varied demographics in drug and vaccine trials.

*Sheena Cruickshank is a professor in biomedical sciences at the University of Manchester in the UK. This article was originally published on The Conversation.*

### NAVIGATING AGING

# We Put Off Planning, Until My Father-in-Law's Medical Crisis Took Us by Surprise

A health crisis made one family realize the importance of having the difficult conversations

PHOTOGRAPHEE EU/SHUTTERSTOCK



JUDITH GRAHAM

Earlier this month, my husband picked up the phone and learned that his 92-year-old father had been taken to the hospital that morning, feeling sick and short of breath.

We were nearly 2,000 miles away, on a vacation in the mountains of southern Colorado.

No, it wasn't COVID-19. My father-in-law, Mel, who has diabetes, high blood pressure, and kidney disease, was suffering from fluid buildup in his legs and around his lungs, as well as excruciating knee pain. Intravenous medications and steroid injections were administered, and he responded well.

Doctors monitored Mel carefully, adjusted his medications, and recommended a few weeks of home health care after eight days in the hospital.

In other words, this wasn't a life-threatening emergency. Yet, we realized how poorly prepared we were for a real crisis, should one arise. We needed a plan.

Why didn't we have one already? The usual reasons: denial, avoidance, and wishful thinking. It was easier to imagine that Mel would be all right until it became clear that we couldn't take that for granted.

Although I routinely advise readers about preparing for changes in their health, I didn't want to be a know-it-all with my husband's family. Their assumption seemed to be "We'll deal with whatever comes up when that happens."

Now, eyes wide open, we got organized.

**Some background:** Mel lives in a well-run continuing care retirement community in upstate New York, in the independent living section. His three sons all live at a distance: one out West, one overseas, and one a few hours away.

### Hiring a Care Manager

Last year, as Mel's kidney function declined, I suggested we hire a geriatric care manager who could look in on him regularly. After a few visits, Mel let her go. Her services were too expensive, he complained. In truth, we understood, he didn't want someone interfering in his affairs.

My husband respects his father's autonomy and didn't press the point. So, when Mel went to the hospital a few weeks ago, he was alone, with no one to turn to for assistance.

This was especially problematic because Mel has hearing loss and it's almost impossible to talk with him by phone. "How are you, Dad?" my husband yelled on twice-a-day calls to check on his father in the hospital. "What?" Mel replied querulously. This was repeated a few times, with mounting frustration and no useful information exchanged.

**We realized how poorly prepared we were for a real crisis. We needed a plan.**

Now, a care manager who could serve as our eyes and ears on the ground was necessary, not optional, and we hired back the professional we'd already found.

### Finding Companion Care

What kind of assistance was Mel going to need when he left the hospital, deconditioned and weaker than when he went in?

When we spoke with the physician overseeing Mel's care in the hospital, he suggested that "companion care" for at least a few weeks would be a good idea. Mel needed someone to help him up out of the chair, stay at his side while he walked to the bathroom, and bring him a glass of water, among other tasks. (Also, we realized, we needed to arrange for meals to be delivered and for someone from his senior community to buy groceries for him—a service they'd started during the pandemic.)

An excellent organization that works with older adults in Mel's area supplied me with a list of 21 agencies that provide these kinds of services—a dizzying array of choices.

Fortunately, the senior community where Mel lives recommended an agency that often works with its residents. We hired 24/7 care for several days after Mel left the hospital with the understanding that we'd continue services if necessary. This agency is now on our list of essential resources.

### Understanding the Options

Mel's senior community incorporates assisted living and a nursing home for residents who need short-term rehabilitation services or longer-term, round-the-clock care.

But it was clear that Mel wanted to go home after being in the hospital instead of going to that rehab. Medicare would pay for a few weeks of visits from nurses and physical and occupational therapists. Would that be enough to set him on the road to recovery? We had no idea.

If Mel couldn't return to his previous level of functioning after returning home, he might need to transition to assisted living, where he could receive more medical oversight and assistance. How would this work? We didn't know and asked the geriatric care manager to find out.

### Getting Paperwork in Order

Years ago, Mel assigned power of attorney for his health care decisions and financial and legal affairs to my husband. So long as Mel can manage on his own, he makes his own decisions: The legal papers were a backup arrangement.

But Mel hadn't prepared a document naming all three sons as his "personal representatives" under the Health Insurance Portability and Accountability Act of 1996. This waives privacy concerns and gives them access to his medical information. It went on our "to-do" list.

The brothers also didn't have a complete

list of Mel's doctors, the medications he was on, and why he was taking them. This became another item for our list, especially important since Mel left the hospital with prescriptions for 14 medications, several of them new. While he'd always managed on his own before, in his post-hospital fog, it was clear he was nervous about managing this complicated regimen.

### Understanding the Prognosis

Before Mel's hospitalization, we knew his kidney function was worsening. But what lay ahead? Was dialysis even an option for a 92-year-old in this time of COVID-19?

Who was best prepared to help us understand Mel's prognosis and the big picture?

I've written for years about geriatricians' comprehensive approach to the health of older adults. It turns out, there's a top-notch group of geriatricians affiliated with the hospital where Mel was being treated.

After several calls, I reached one who agreed to see Mel after he was released from the hospital. Now, we have another new team member who can help us understand Mel's health trajectory and issues that might arise going forward.

### Having the Conversation

What has yet to happen is the conversation that my husband hasn't wanted to have.

"Dad, if your health takes a turn for the worse again, what do you want? What's most important to you? What does quality of life mean to you? And what can we do to help?"

With Mel's hearing problems, doing this over the phone won't do.

My husband would have to fly cross-country and, ideally, meet his New York brother at Mel's place for a conversation of this kind. Before that happens, the brothers should talk among themselves. What's their understanding of what Mel wants? Are they on the same page?

Also, no one has discussed financial arrangements.

Each time we explain to Mel one of the new services we've arranged, his first question is "What's the cost?" His impulse is to guard his cherished savings and not to spend. My husband tells him he shouldn't worry, but this, too, is a conversation that has to happen.

### Being Prepared

Professionally, I know a lot about the kinds of problems families encounter when an older relative becomes ill. Personally, I've learned that families don't really understand what's involved until they go through it on their own.

Now, Mel has a new set of supports in place that should help him weather the period ahead. And my husband is keenly aware that planning doesn't stop here. He'll be attending to his father far more carefully going forward.

# How Active Moms Can Provide a Lifetime of Good Health

A special compound in breast milk increases with exercise, passes on a lifetime of benefits

CONAN MILNER

We pass on our genetic traits to our children without even thinking about it. But we can also give them better health through our good habits.

That's the finding of a new study published in the journal *Nature Metabolism*, which shows that women who are active during and after pregnancy can give their kids a lifetime of health benefits due to a special compound in their breast milk.

The lead author of the study is Dr. Kristin Stanford, a researcher at The Ohio State Wexner Medical Center's Diabetes and Metabolism Research Center. Stanford says that her team has been examining the maternal effect of exercise on offspring for years, but their latest work provides good evidence that a compound called 3SL passes on important benefits.

"3SL is an oligosaccharide; a small sugar. It's found in both mouse milk and human milk," said Stanford. "What we've seen is that when we add 3SL in a physiological dose into a mouse we're able to see the same effects as we do offspring who drink milk from active moms."

Researchers looked at mice born from sedentary mothers and fed them milk from mothers who were active throughout pregnancy. They found that the health benefits from fit mice transferred to the pups, showing that they were passed through

breast milk and not simply inherited genetic traits.

Meanwhile, another team of researchers from the Arkansas Children's Nutrition Center followed about 150 pregnant and postpartum women using activity trackers and found that those who clocked in more steps per day had an increased amount of 3SL.

New mothers and mothers-to-be don't have to run marathons to make 3SL. In fact, researchers say higher levels of the compound are not related to exercise intensity. According to Stanford, it doesn't take much movement to make a difference in the amount of 3SL mothers are able to produce.

"What is exciting about this is that it shows that activity, in general, is correlated to increase, suggesting that you can go for a walk, or do something very mild or moderate, and could actually increase 3SL in the milk," Stanford said.

Medical experts already recommend that babies feed exclusively from their mothers for at least the first six months of their lives because breast milk gives them ideal ratios of fat, protein, and other nutrients that babies need to grow and thrive. Mother's milk can also pass on key compounds and antibodies that benefit a baby's immune system.

It's clear that a mother's diet contributes to the quality of her milk. But Stanford's study shows that

a little bit of movement can make it even more powerful.

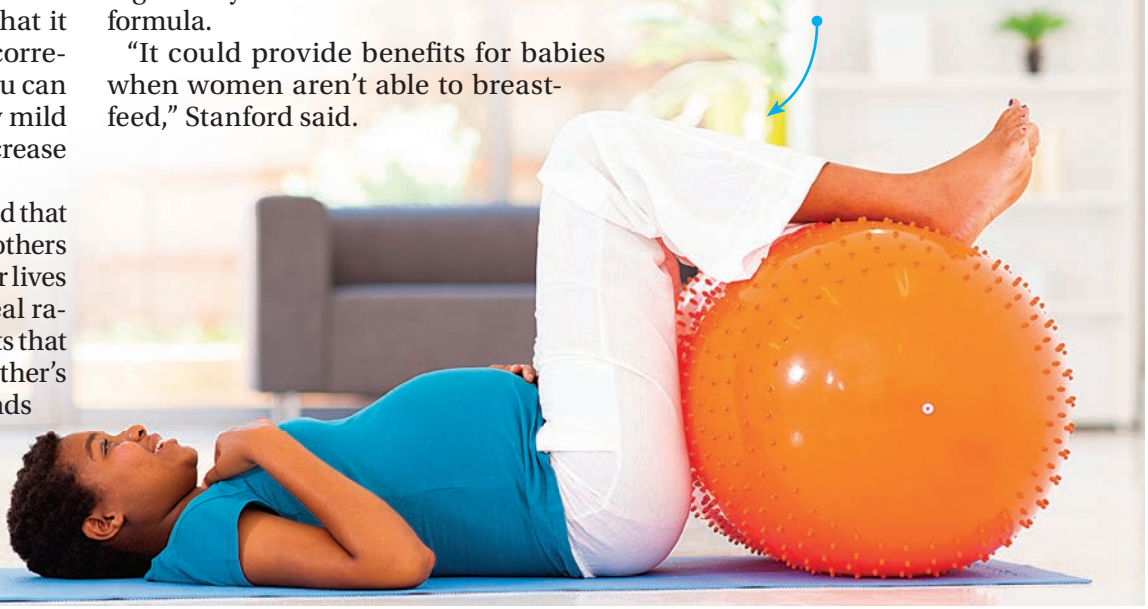
"This is another aspect that shows that exercise is important, for both the mom and their offspring," Stanford said. "So the more you can move, the better for your health, and the better for your baby's health."

Oligosaccharides such as 3SL are found in a variety of plant foods, but the composition of 3SL is special, and the amount babies can manage to consume can make a big difference in their health for their entire lives. For mothers who are unable to breastfeed, or suffer from complications that require bed rest, researchers are looking for ways to isolate 3SL and add it to a formula.

"It could provide benefits for babies when women aren't able to breastfeed," Stanford said.

**Mother's milk passes on key compounds and antibodies that benefit a baby's immune system.**

Researchers have found that even small amounts of exercise can increase the amount of 3SL in breast milk.



NOLA SHELLENBERGER/ISTOCK

# It's Time to Stop Comparing and Look for the 5 Percent

Our minds may latch on to the perfect solution, but small, incremental changes are what get the job done

MONROE MANN



Happiness and life satisfaction can often come from simply improving your life a tiny bit.

We know we shouldn't compare our lives to the lives of "more successful" people because when we do, we tend to feel deficient in comparison.

But far more debilitating to our psyches than comparing ourselves to our neighbors and movie stars is the nasty habit we have of comparing ourselves to what we feel we should have been, could have been, should have done, or could have done. All of these are recipes for psychological disaster.

One of the most common reasons why we get depressed in life is regret about something we did or didn't do. It's often a result of comparing our current life to how we think it should have been by now.

But what should have been is not. It doesn't exist anywhere but in our mind. In our memory. In our imagination of what life today should be like. It's a movie script that was never produced, and for some reason, we believe that it should have been. But ask yourself this: Why should it have been produced? Actually, the answer doesn't matter. It wasn't produced, and that's step one: recognizing reality.

## Facing Reality

We need to learn to stop comparing ourselves to imaginary figments of what the present should have been. And yes, sure, this also includes learning how to stop comparing ourselves to our neighbors or college friends and their accomplishments, because it's all part of this habit we have of assuming things should have been different.

But what if how things happened was how it was meant to be? Consider the possibility that everything happened just as it was meant to happen, and, in fact, the only problem is with you. The problem is how you are interpreting everything.

I am sure some of you are shaking your heads and saying, "What does

this guy know? I made the stupidest mistake 10 years ago and I'm still feeling the effects of that today. My life sucks, and it shouldn't have happened to me, and I shouldn't have been so dumb," and blah, blah, blah. Same old story. But the regret and sadness you have is of your own making and does nothing to improve your situation. In fact, it does the opposite.

The longer you continue to deny reality, the longer you will feel sad and depressed. Accepting life as it is a first and critical step to engaging with it meaningfully. As long as you refuse to accept responsibility for the thoughts that create your feelings, you will remain a prisoner of your own mind. Often we are sad or depressed for one of two reasons:

- 1) We feel our present and future is ruined because of something that happened in the past, or
- 2) We feel our present and future is ruined because of something that should have happened.

In other words, sadness and depression are often related to the past. Or rather, our constant focus on the past.

## Engaging With Reality

Stephen Covey, in his book, "The 7 Habits of Highly Effective People" shares the concept of your circle of influence versus your circle of concern. We should focus on our circle of influence, and never our circle of concern. There are a lot of things that concern us, but over which we have no control. While Covey doesn't explicitly say so, your past is something over which you have no control. It's part of your circle of concern.

On the other hand, your circle of influence is everything over which you do have control. In the realm of time, it's your present, how you approach your future, and how you think about your past. These are all aspects of your life you have control over.

## We want the perfect solution, so we discard the 5 percent improvement as worthless when that improvement could be just enough to make you feel awesome about your life.

Taking this a step further, Dr. Arthur Freeman and Rose DeWolf share a concept in their awesome book "Woulda, Coulda, Shoulda" that the key to happiness usually isn't in fixing your past or making your childhood dream come true (though the latter is definitely still worth pursuing). Actually, happiness and life satisfaction can often come from simply improving your life a tiny bit. That's the 5 percent improvement.

Here's the question to ask, "If you could do one thing that would create a 5 percent improvement in your life/job satisfaction/relationship/etc., would you do it, even though it's not the 100 percent ideal that you dreamed of?"

In an unemotional logical frame of mind, you probably would say, "Yes, of course." Yet, many of us don't do this. We want the perfect solution, so we discard the 5 percent improvement as worthless when that improvement could be just enough to make you feel awe-

some about your life.

## Incremental Upgrades

We often misjudge how much we need to change to have an exponentially positive impact on our life. Consider this: How many times have you been sad about something, and then a friend or family member calls or another event happens, and that spurs a small shift in thinking that helps you to feel better about the situation?

Now, let's take it a step further, with a more active example. Let's say you want to go to Harvard (your 100 percent solution), but you don't get in. Are you going to throw away the idea of a college education? Of course not. You will probably go to another school and get your degree nonetheless. Odds are you will feel pretty proud of yourself when you get that degree and it will still open doors to a whole other life you couldn't have had otherwise.

(On a related side note, go read, "David & Goliath" by Malcolm Gladwell, a story about two women who wanted to become famous surgeons. One went to an Ivy League school. The other to a community college. Guess who became the world-famous surgeon?)

I can think of two such situations in my life that destroyed me for many years, but I ultimately overcame both of these "failures." How? By acknowledging that they happened, and looking for the 5 percent improvement in my life now. It's incredible the effect that an imperfect solution can have.

Consider the two options: living a life that is focused on your past failure, or living a life that improves incrementally by small but significant improvements. The answer (now) to me is clear: Small improvements are the key to a happier life.

Incredibly, just the act of seeking a 5 percent solution can have a major self-esteem boosting effect. The execution will give you yet another boost. And boom, the ultimate accomplishment

of the actual improvement will make you feel awesome. You will wake up one morning and think, "It's hard to believe that I was really upset about losing that job at one point." Or, "Wow, I can't believe there was a time when I was so heartbroken about that girl/guy."

Most likely, you will also look back and be grateful that everything happened as it did, because the life you built is a life you appreciate.

## As long as you refuse to accept responsibility for the thoughts that create your feelings, you will remain a prisoner of your own mind.

As the saying goes, "We make plans, and God laughs." God doesn't laugh at us because he is reveling in the sight of us failing to reach our dreams. No, God is laughing because we are not as clear about our "dreams" as we think we are. We are meant for so much more than we dream for ourselves.

So stop moping, and start micro-improving! These small improvements are will add up faster than you expect.

*Dr. Monroe Mann, Ph.D., is the founder of BreakDiving.io, a not-for-profit social media community dubbed by some as the friendliest place on the internet. He's an attorney, YouTuber, Iraq veteran, public speaker, and author of "Time Zen," "T.R.U.S.T.," and many other books. Reach out at MonroeMannLaw.com*

## BECOMING MINIMALIST

# Decluttering Skills Every Parent Needs

Teaching your children to manage their possessions takes patience, practice, and some important skills

SANDY KREPS

Stuff management is an important life skill—not just for parents, but for the kids we are raising. Parents often stress about how to keep on top of their kids' toys, books, and clothes. This tendency may reflect neglecting an important facet of life with kids: Kids can't learn to manage their own stuff if they don't get the practice and support to do so.

When my kids are grown, I want them to be armed with the skills necessary to manage their possessions, which means I need to help them practice now.

Many parents I've talked to are overwhelmed trying to manage their own home, let alone the prospect of teaching their children how to declutter and organize their own stuff.

But I've found there are only 10 critical decluttering skills that parents need to teach their children so they can manage their own stuff and be set up for success in the future.

If parents can conquer all of these skills, their kids will have a much better chance of learning to manage their stuff.

### 1. The ability to distinguish between a "want" and a "need."

A key part of decluttering and simplifying is the ability to determine what actually constitutes a "need" versus what items fall under the category of "wants." It can be difficult to tell them apart sometimes, particularly for children and teens. The basic idea of food, shelter, and clothing as needs is not as black and white as it may seem.

Yes, clothing is necessary, but are designer jeans a need? A letter jacket? New shoes? In some families, a cellphone may be a need for teens with lots of extracurricular activities, a job, or access to their own transportation, but is a smartphone a need or a want?

It really depends on the individual lifestyle and preferences of the family. Needs versus wants will be different for each family, and it's up to parents to decide what falls into each category—for themselves and often their children.

In a multi-parent family, parents should work to be on the same page with what constitutes a need and present a united front to kids for consistency's sake.

### 2. The willingness to model the desired behavior.

Creating a minimalist lifestyle is not a "do as I say, not as I do" affair.

Parents have to model the lifestyle they want their children to reflect. Children need to see their parents getting rid of their own clutter, curating their own possessions, taking responsible care of their own stuff, managing their own tasks and commitments, and prioritizing what's really important. Importantly, children need to see this behavior before parents can expect to see these traits regularly in their children.

### 3. An encouraging, coaching spirit.

Being a "Decluttering Dictator" isn't going to work. Sorry, it just won't.

Demanding that your kids get rid of their stuff isn't going to result in long-term change—it's just going to generate anger, frustration, and rebellion. Encouragement, thoughtful consideration, and the willingness to coach instead of command are keys to teaching kids how to manage their own stuff. We want to instill good habits that can last a lifetime, not just temporary "my house, my rules" behavior.

### 4. The desire to ask the right questions.

Decluttering isn't about just tossing



Children need to learn how to sort through messes and decide what's important to keep and what's not.

everything that isn't needed. It's about looking at items with the intention of keeping what is useful and fulfilling.

The questions don't stop at "do you use or wear this right now?" That's too simplistic, especially for kids who still place emotional value in material objects.

We experienced a house fire a few years ago, and the aftermath has had a noticeable effect on how each of my kids manage their stuff.

My younger son, a preteen, keeps everything. There's an unconscious fear of losing it all again. Keeping his nest feathered with lots of stuff, particularly stuffed animals and soft blankets, makes him feel safer and happier. He's allowed to keep what he wants within the boundaries of his room and with a mandate that the room stays reasonably tidy.

My older son, a teen, realized he didn't need, or even want, a bunch of "stuff" to deal with... anymore. He has become a minimalist with a fondness for higher-quality items that will last and that make him feel good. He has nicer things now that he puts a lot of thought into curating, and he's quick to discard things he's not using, aren't "right," or don't suit him.

Decluttering has to be tailored to suit the kid's personality and headspace. You need to be willing to go beyond the easy "are you still using this" question. Other questions to consider include:

- Do you use this regularly?
- Does this item make you happy?
- Does it help you feel safe? Loved?
- Does this item bring up sad feelings?
- How would you feel if this item was gone?
- What feelings do you have when you hold this item?

### 5. The willingness to stay hands-off.

As difficult as it can be, kids need to be in the driver's seat when it comes to managing their own possessions, particularly as they get older.

Obviously tiny tots and preschoolers need lots of help, but older kids and teens need the respect and responsibility of deciding for themselves how to manage their possessions. If you're modeling the behavior you wish to instill and helping your kids ask the right questions when it comes to making choices about what to keep and what to let go of, you have to trust that your kids can make the best decisions for themselves—with you there for guidance, not guilt.

### 6. Except when hands-on assistance is needed and/or wanted.

There is a time to back off and a time to get involved, and when help is needed, parents need to be willing to step in and offer to assist.

Chances are good that at some point, your child is going to want your help with their stuff. The important skill is the ability to help without feeling the need to jump in and take over (or if you do feel that need, the ability to restrain yourself!)

Kids need guidance and mentoring—they don't need us to jump in and do it for them.

If I see my child struggling with managing his stuff, I'll offer to help. Not demand to take over, not say "I'll just do it for you," but I'll ask if he would like a helping hand, either with decisions, the manual work of cleaning, or both.

It's tough even for adults to declutter their stuff, so kids can't be expected to do everything on their own. Let them take the lead, and be willing to help them navigate the complex feelings that come with simplifying as well as the actual physical work required.

### 7. The ability to listen without judging.

Sometimes kids don't know what to do with their things, particularly if they have a lot of stuff and have never really processed what it feels like to voluntarily let go of things.

They may be overwhelmed. They may be sad. They may feel anxious. All those feelings are totally fine and expected, and kids need to know that it's OK to feel whatever they're feeling as they learn to manage their own possessions.

As a parent, it's important to be able to sit with them and just listen to your kids without placing judgment on what they're feeling or saying. They need that safe space with you to learn to process their big feelings. Material possessions are often tied to memories, and kids are often anxious about losing a memory if they let go of an item associated with it.

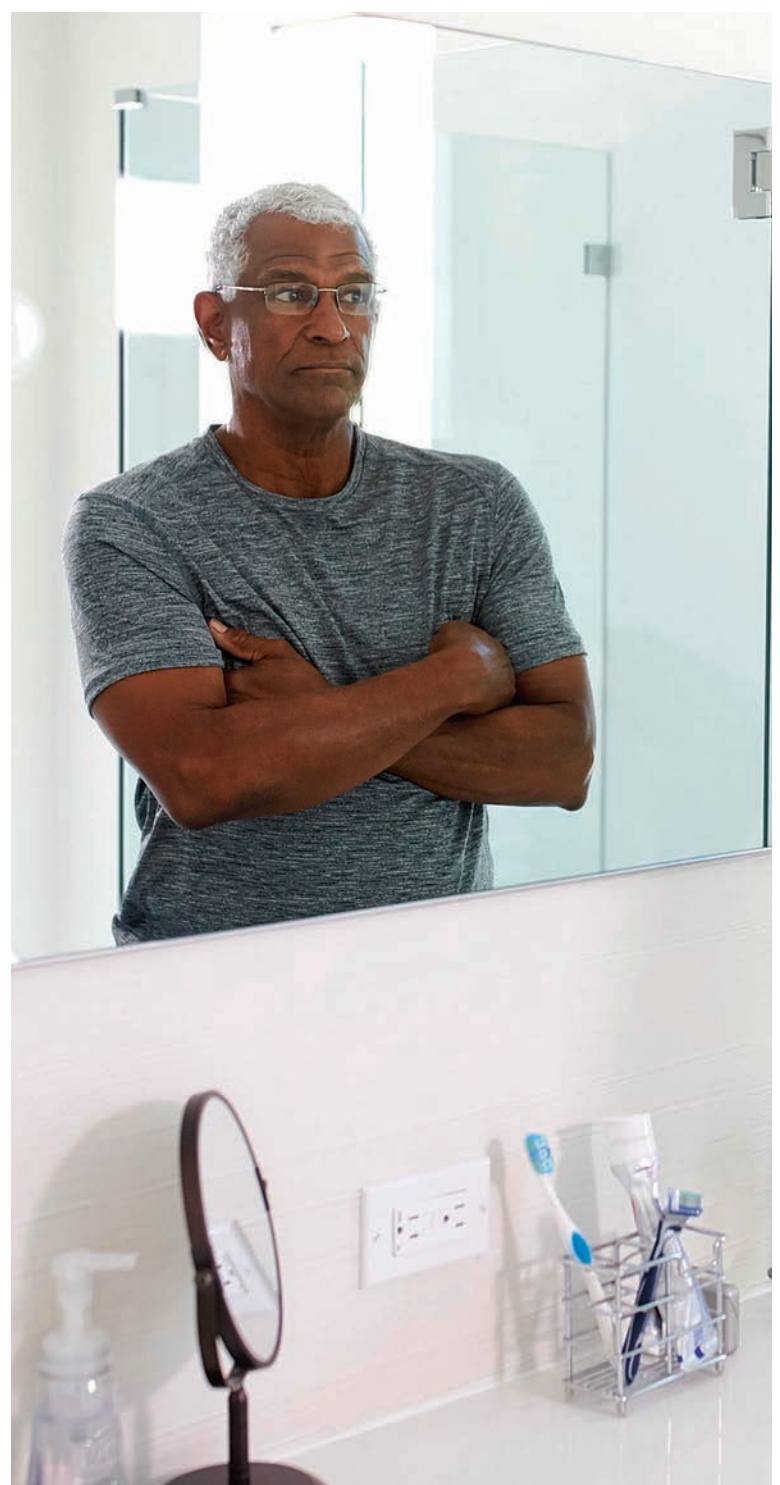
### 8. The ability to explain options.

It's easier to let things go when you have some choices on how to get rid of them. Part of decluttering is learning how to discard responsibly. Showing kids that they have options for how to let go of things can help them feel good (and even happy) with the decision of letting their stuff go.

Things that still have use left may

Children need to see this behavior before parents can expect to see these traits regularly in their children.

ALL PHOTOS BY SHUTTERSTOCK



Accepting life as it is is a first and critical step to engaging with it meaningfully.



Sandy Kreps helps families cut through the chaos of modern life and find a simpler path on her blog, "Modern Simplicity." She has a free ebook, "101 Ways to Simplify Your Life." This article was originally published on Becoming Minimalist.

## POSITIVE AGING

## Older Americans Looking for Employment

MARILYN MURRAY WILLISON

Do you remember the days when everyone seemed to retire on or before that ominous 65th birthday? Well, that was then, and this is now. Research says in recent years, there have been more older adults employed than ever before, and they are often being given jobs that are categorized as age-appropriate.

According to Matthew Rutledge, an economist at the Center for Retirement Research at Boston College, older workers seem to be clustered in what is referred to as "lower-skilled service jobs." For example, older workers are 65 percent more likely to find jobs in child care, 93 percent more likely to find work as cab drivers, and twice as likely to find work in retail.

Rutledge learned that these workers are at a disadvantage when it comes to engineering or physical work but considered well-suited for jobs such as real estate sales or property management. Sadly, most of the jobs available to older employees tend to pay 6 percent to 10 percent less than positions that favor younger employees, frequently because younger workers tend to be technically adept.

If you're an older worker and don't already have a job, however, finding one in today's economic climate will be challenging. David Neumark, an economist at the University of California at Irvine, says that older workers sometimes never even get the chance to interview. He led a study that sent 40,000 fake resumes to employers who had advertised job openings. The resumes that hinted the applicant was 64 to 66 years old received 35 percent fewer responses than those suggesting the applicant was 29 to 31.

I was surprised to learn that according to the Urban Institute's Richard Johnson, between 2008 and 2012, workers aged 62 and older with a college degree had less than a 50 percent chance of finding a job after two years of actively looking for work. The number fell to just 35 percent for those in the same age group who didn't have a college degree. Still, employment experts are reluctant to label these differences as signs of age discrimination.

In spite of these parameters, however,

Some past retirement age are staying in workforce, using special attributes they gained over a lifetime

If you're an older worker and don't already have a job, finding one in today's economic climate will be challenging.



While many older workers lack technical skills, their soft skills are recognized and valued.

labor force participation rates for older Americans have actually been rising for the past decade. And increasing numbers of seniors are holding down full-time jobs even though challenging factors like ill-health, caregiving responsibilities, and a need for a flexible schedule can make continued employment unappealing, difficult, or impossible.

In 2012, the number of workers aged 75 and older numbered 1.3 million. This number is more than double what it was a few decades ago, but it still comprises less than 1 percent of the total labor force. In 1990, 4.3 percent of workers over the age of 75 were looking for a job; in 2012, that number was 7.6 percent. And it's projected to reach 10 percent by 2020.

Dr. Michael North, a postdoctoral researcher of Columbia University's psychology department, says that older workers may have lower levels of what is called "fluid intelligence," i.e. the ability to master new technical skills. But they have valuable "soft skills" that have developed over a lifetime of productive employment. These include the following:

- A higher level of overall agreeableness
- Better grasp of language complexity
- Greater emotional stability
- Increased depth and breadth of wisdom
- More advanced reasoning abilities

Many mature Americans (like me) want to hold on to a job because they don't feel ready—either emotionally or financially—to retire. After all, work is the golden ticket that gives our lives meaning and purpose.

Marilyn Murray Willison has had a varied career as a six-time fiction author, columnist, motivational speaker, and journalist in both the UK and the U.S. She is the author of "The Self-Empowered Woman" blog and the award-winning memoir "One Woman, Four Decades, Eight Wishes." She can be reached at MarilynWillison.com. To find out more about Marilyn and read her past columns, please visit the Creators Syndicate webpage at Creators.com. Copyright 2020 Creators.com

## Why We Should Be More Optimistic About Human Nature

A new book argues that humans are more cooperative and trustworthy than we think, and social institutions need to reflect that

- A higher level of overall agreeableness
- Better grasp of language complexity
- Greater emotional stability
- Increased depth and breadth of wisdom
- More advanced reasoning abilities

Many mature Americans (like me) want to hold on to a job because they don't feel ready—either emotionally or financially—to retire. After all, work is the golden ticket that gives our lives meaning and purpose.

Marilyn Murray Willison has had a varied career as a six-time fiction author, columnist, motivational speaker, and journalist in both the UK and the U.S. She is the author of "The Self-Empowered Woman" blog and the award-winning memoir "One Woman, Four Decades, Eight Wishes." She can be reached at MarilynWillison.com. To find out more about Marilyn and read her past columns, please visit the Creators Syndicate webpage at Creators.com. Copyright 2020 Creators.com

That means recognizing the potential for goodness in everyone, even groups of people who look, think, or act differently from us whom we might be prejudiced against.



Made from Purslane

## NATURE'S OMEGA-3 GOLD

Puritang plant based Omega-3,6,7,9 is made from purslane and perilla seeds. It contains over **61%** concentration of omega-3 – the highest possible without chemical additives, not possible to derive naturally from fish or other plants, and this combined with omega-6,7,9, accounts for more than **90%** of product content!

Purslane is nature's gold mine of omega-3, containing the highest level of any green plant, making pure high concentration possible. Our purslane and perilla are grown on South Korea's beautiful Hwangmaesan Mountain, an area where use of chemical fertilizers and pesticides are prohibited.

0% trans fat and 0% hormones, this product is 100% organic and 100% natural. It has no fishy aftertaste or risk of ocean-borne contaminants. It is also non-GMO. Made in Korea.



Order Online!

PURITANG  
普瑞堂  
Natural Purity for All

Puritang Green Vegetable Omega 3, 6, 7, 9 Inspired by Nature. Made from the Heart.

www.Puritang.com

JILL SUTTIE

In the novel "Lord of the Flies," a group of young boys are shipwrecked on an island and eventually turn savagely against each other. The book is a cautionary tale about humanity's underlying cruelty and the need for civilization to tame our darker impulses—a message that resonates with many people today.

But that's not what happened to a real-life group of shipwrecked kids in 1965. Unlike

the fictional "Lord of the Flies" characters, they developed a game plan for survival that was cooperative, fun, and peaceful, resulting in lifelong friendships.

In other words, the boys didn't turn into devils when left on their own—far from it!

Dutch historian Rutger Bregman recounts this story in his new book "Humankind," arguing against the "Lord of the Flies" unreasonably dim picture of humanity. The key message in Bregman's book is that humans are basically good, when left to their own devices.

That's not to say there aren't characters who will act badly, especially if encouraged (or manipulated) to do so or put under duress. But the vast majority of us are happy to work together cooperatively. This, he writes, is the only possible conclusion to make from the scientific and historical evidence.

And, he argues, it's something we desperately need to understand if we want to work together toward creating a better society for all.

Continued on Page 2

## What Our Readers Say:

“It’s the only sane newspaper amidst all this insanity.”

STAN K., PASTOR

“It’s bringing morality back to newspapers.”

LISSA T., BUSINESS OWNER

“It’s the only paper that I know of right now that actually gives you the honest, old fashioned journalism.”

DRUEL, BUSINESS OWNER

“You’re presenting the facts and letting the reader decide.”

TERRI B., BUSINESS OWNER

“Everything I read in it is fair and balanced, compared to other newspapers.”

JUNE V., RETIRED BANKER



Subscribe to **The Epoch Times**

Please visit: **ReadEpoch.com**

**THE EPOCH TIMES**

TRUTH AND TRADITION

# Why We Should Be More Optimistic About Human Nature

A new book argues that humans are more cooperative and trustworthy than we think, and social institutions need to reflect that

Continued from Page 9

**How We Get It Wrong**  
Some of the most famous evidence for our pessimistic view of human nature comes from the Stanford Prison Experiment done by Philip Zimbardo in the early 1970s. In this experiment, Zimbardo brought students into a lab and had them act out roles as prisoners and guards. Soon the experiment turned sour, as guards began acting too harshly toward prisoners, and it had to be shut down.

The experimenters concluded that people are sadistic underneath veneers of normalcy and can easily be manipulated to do harm. But Bregman points out that the results came about because the “guards” were encouraged from the start to be harsh toward “prisoners.” By enacting their roles, they thought they were contributing to science—a kind and helpful

intent. Also, one student “prisoner” in the experiment, who supposedly “broke down” and had to be removed, confessed to faking his hysteria in order to get back to studying. The whole study and its conclusions were misrepresented.



The children who lived through a real-life “Lord of the Flies” situation worked together, stayed kind, and became lifelong friends.

“What’s fascinating is that most guards in the Stanford Prison Experiment remained hesitant to apply ‘tough tactics’ at all, even under mounting pressure,” writes Bregman. In fact, a later “prison experiment” mounted by the BBC, where guards weren’t told what to do, had very different results. The “guards” soon became reluctant to take on their authoritarian roles and became friendly with “prisoners” instead.

Actually, research suggests that people are quite unwilling to harm others—even in war situations—without strong coercion, which explains why leaving people to their own devices would produce dif-



Research suggests that people are quite unwilling to harm others—even in war situations—without strong coercion.

ferent results.

Bregman takes readers through many experiments and events that seem to point to our flawed natures, and debunks them one by one. For example, we learn that the famous story about Kitty Genovese—a woman who was brutally raped and murdered in Queens, New York, while neighbors supposedly did nothing to help—is largely fiction, perpetuated by The New York Times’ coverage of her death. It turns out that the NY Times’ claim about 37 heartless bystanders was false, and people did come to her aid, including a neighbor who held her while waiting for an ambulance to arrive.

Still, this story of unconcerned bystanders is retold over and over as proof of human indifference and, like the Stanford Prison Experiment, graces many social psychology textbooks. Therein lies the problem.

**Why Does It Matter?**

The danger in continuing to repeat false conclusions from flawed research is that it feeds a narrative that doesn’t serve us. People hearing these findings start to believe that sadists lurk among us and they can’t trust others, when most of the time they can. It also supports the idea that only through strict social control from on high—dictatorships or police states, for example—can we stop our communities from devolving into chaos.

According to Bregman, it’s important to understand that our true nature is (mostly) good, because it can encourage us to create institutions with less hierarchical structures and less stifling leadership. And these ways of organizing ourselves can have better outcomes.

For example, he highlights the home nursing program Buurtzorg, created first in the Netherlands, in which nurses cut out the management and created a cooperative that has been cost-effective and provides better patient care. He mentions city governments in Brazil that enacted public budgeting processes—where citizens had more say in how city funds were spent—that resulted in more health care spending, fewer infant deaths, and more civic engagement. And, he writes, schools that are less punitive and more cooperative, and allow students to be more in charge of their education, help improve students’ intrinsic motivation—one of the most important factors for learning.

The “tragedy of the commons”—the idea that public resources shared by many (such as air, water, and land) can be depleted if people use them in a self-interested way—has long been an influential idea in economics. But Bregman points to the work of Elinor Ostrom,

the Nobel Prize-winning economist, who studied how people around the world actually manage the commons when left to their own devices. Her research paved the way for understanding that once certain elements are present, people act cooperatively and don’t require social control—a finding that resonates with many economists today.

The book is full of other fascinating examples of places and programs being remade based on human goodness and trust. Bregman’s take-home message is that our better nature will win out, if we

It’s important to understand that our true nature is (mostly) good, because this can encourage us to create institutions with less hierarchical structures and less stifling leadership.

can only recognize its ubiquity.

That means recognizing the potential for goodness in everyone, even groups of people who look, think, or act differently from us whom we might be prejudiced against. One way to do so, research suggests, is to work on building positive contact across groups—such as friendships and cooperative work relationships—that will increase our trust for others.

Bregman lists several other tips at the end of his book that people can use to see the goodness in humanity—things such as “When in doubt, trust first,” “Temper your empathy, train your compassion,” and “Avoid the news.” If we take the view that we are born to be good, we can make a society that is fairer and freer for all, he says. That doesn’t take optimism; it just takes paying attention to science and experience.

“To believe that people are hardwired to be kind isn’t sentimental or naive. On the contrary, it’s courageous and realistic to believe in peace and forgiveness,” he writes.

*Jill Suttie, Psy.D., is Greater Good’s book review editor and a frequent contributor to the magazine. This article was originally published by the Greater Good online magazine.*

### MINDSET MATTERS

## Are You Ready to Listen?

The simple change in behavior that can radically improve your relationship

NANCY COLIER

Ava wanted to tell her husband about a troubling and upsetting argument she’d had with her sister. She wanted to process the experience; she wanted his understanding and empathy. She wanted to be heard.

But when she tried to share her thoughts and feelings about the situation, her husband seemed irritated about having to listen. When she wanted to talk about the details of her life, things that didn’t involve him directly, it was as if he could barely stand to listen. She described having to wrestle his attention into the room, pull him away from his own thoughts, where he clearly wanted to remain. She was exhausted from having to get and keep his attention.

This kind of experience comes up frequently in my couples practice, for both men and women—a partner who makes you feel like your life is an annoyance or burden to have to focus on, whom you have to corral into paying attention.

Usually, when a couples’ primary issue centers around listening, it suggests that serious work lies ahead. Listening is love in action. That said, when listening is the problem, chances are we’re heading into complex, painful, and often early childhood territory. But sometimes we get lucky and the listening issue has an easy and straightforward cause, and fix.

**We need to remember that our partner is not us and we are not them; we are living in different internal worlds, no matter how intimate we are.**

In certain situations, we can correct a listening issue with a simple shift in behavior, which is timing: how and when we bring our important matters to our partner’s attention. It’s strange really, we overlook the importance

of timing in communication; we consider timing a far too simplistic and obvious factor to consider. In addition, we are conditioned to believe that attention is something that our loved ones should always be at-the-ready to provide. But this is false or perhaps only true with an attuned and loving parent. In fact, attention is not always available, even in love.

When we want (or need) to share something important, we often share without any real awareness of the other person. We don’t consider what they’re doing or thinking about, or how they are in that moment. In a sense, we pounce on our partner, wanting our experience to be known and shared. We essentially demand to have immediate company in what we’re experiencing.

Now, that can all be natural and normal. An important part of partnership is indeed being able to share our life. The problem is that we expect our partner to be ready to hear us, and specifically, to receive our experience at precisely the moment when we’re ready to share it.

#### Our Personal Reality

This problem arises due to a simple fact of human experience: We each live inside a world colored by our own thoughts, feelings, experiences, histories, and understandings.

That, in itself, is not a problem. The problem arises when we forget that this inner world is an essential aspect of human life. We forget that our partner is not living the same reality as we are; they may be living in our external reality, but they’re not living our internal reality. We assume, without knowing it, that we share an

internal experience with our partner, but this is usually not the case. We forget that our partner may not be ready or able to receive our experience, to properly hold space for it. We imagine that because we’re ready, our partner will or should be ready. We then approach without asking if they can, or want, to give us their full attention in that moment.

At the core, we forget that asking someone to listen, really listen, is indeed a profound ask. When we listen, we literally gift someone with our attention, our most precious asset. When we listen, wholly, we do love. To ask someone to listen therefore is no small request, no matter how easily we discount its importance.

When we share our experience, it’s important that we do so with awareness, and with respect both for ourselves and our partner. And furthermore, that we include discernment and patience, and consider the reality of what’s possible in that moment, not just what we wish were possible. We need to remember that our partner is not us and we are not them; we are living in different internal worlds, no matter how intimate we are.

While it may feel clunky and overly formulaic at first, checking on our partner’s availability before we share, even making a scheduled time to pay full attention to each other, is a way of giving ourselves and our experience the best chance of being received with the interest and attention that we so crave.

#### Preparing to Connect

When we bring our feelings and vulnerability to the table, it behooves us to prepare that table a bit ahead of



Truly listening requires we put everything else aside and give someone our full attention. This is an act of love that sometimes requires more intention than we might expect.

## Behind the Subscription

Your subscription will not only provide you with accurate news and features, but also contribute to the revival of American journalism and help safeguard our freedoms for future generations.

We aim to tell you what we see, not how to think; we strive to deliver you a factual picture of reality that lets you form your own opinions.

We believe that we live in truly epochal times, where the faithful representation of our current events won’t just be important for the people of today, but also for the generations to come. The records we keep now will directly inform the foundations of the history they’ll learn and the values they’ll cherish—and this knowledge is what drives us.

Learn more at

**EpochSubscription.com**

**THE EPOCH TIMES**

TRUTH AND TRADITION

At the core, we forget that asking someone to listen, really listen, is indeed a profound ask.

*Nancy Colier is a psychotherapist, interfaith minister, author, public speaker, and workshop leader. A regular blogger for Psychology Today and The Huffington Post, she has also authored several books on mindfulness and personal growth. Colier is available for individual psychotherapy, mindfulness training, spiritual counseling, public speaking, and workshops, and also works with clients via Skype around the world. For more information, visit NancyColier.com*



# Vitamin C Could Help Older Adults Retain Muscle Mass—New Research

AILSAL WELCH & RICHARD HAYHOE

**A**s we get older, our skeletal muscle mass, strength, and power to move gradually decline. A loss of muscle mass and function, known as sarcopenia, affects more than 50 million people over the age of 50 years worldwide. Sarcopenia also contributes to Type 2 diabetes, frailty, physical disability, loss of independence, and poor quality of life. It's an important condition to prevent during aging to minimize both personal and societal costs.

Currently, there are limited solutions for treating sarcopenia, so early intervention, before symptoms become too severe, is best.

Most research has focused on the effect of eating more protein to prevent or treat sarcopenia. Very few studies have investigated the role of vitamin C in loss of skeletal muscle mass and function in middle and older age. Our new paper shows that the more dietary vitamin C middle-aged and older adults consume, the greater their skeletal muscle mass.

Vitamin C is already known to play an important role in bone health, but may also help us maintain strong muscles. This vitamin is only found in fruits and vegetables.

People who don't consume enough fruits and vegetables in their diet are at risk of vitamin C deficiency, which may cause weakness, tiredness, and fragile bones. In extreme cases, it can lead to scurvy. But before this occurs, insufficient dietary vitamin C can have other effects on health, including our muscles.

Around two-thirds of our body's total vitamin C is found in skeletal muscle. It's used for making carnitine, a crucial substance that provides energy for muscles to function, and collagen, which is an essential structural component of muscle.

Vitamin C is also a strong antioxidant that can help to counteract free radical molecules, which increase when we age. Unopposed, these free radicals can contribute to the destruction of muscle cells.

## Skeletal Muscle Mass

Our study looked at data collected from over 13,000 men and women in the European Prospective Investigation into Cancer and Nutrition Norfolk cohort, aged 42 to 82 years. We used bioelectrical impedance analysis—which sends small electrical signals through the body to calculate water and fat percentage—to estimate the proportion of skeletal muscle in the body.

Participants also completed a diary of everything they ate and drank over seven days so we could accurately calculate

**Vitamin C is already known to play an important role in bone health, but may also help us maintain strong muscles.**

Eating more fruits and vegetables is linked to greater muscle mass among older adults, especially women.



Vitamin C is only found in fruits and vegetables.



how much vitamin C they ate. We grouped people according to the amount, ranging from low to high.

Vitamin C was also measured directly in their blood, providing results less susceptible to a potential error in reporting diet. This allowed us to classify people according to whether they had sufficient vitamin C intake.

Our statistical analysis took into consideration other important factors, including participant's physical activity, protein, and energy intake, which might also have effects on skeletal muscle mass.

We found that the people in our study who consumed the highest amount of vitamin C in their diet had the greatest muscle mass. The biggest difference was seen in women: those women in the highest category of vitamin C consumption had muscle mass 3 percent greater than those in the lowest category.

These differences are likely to be clinically relevant, especially given that most people are estimated to lose 0.5 percent to 1 percent of muscle mass every year after age 50.

A similar picture was seen for both under- and over-65s, indicating that vitamin C is likely to be important in both middle and older age. The findings were also supported by the fact that those with sufficient levels of blood vitamin C had greater muscle mass than those in the insufficient category.

This study complements the findings from our previous work in young and older women. There we found that women who

ate more vitamin C not only had more muscle mass but also had much better leg function, meaning they were stronger. Our new findings in older age groups and men add more certainty that vitamin C is important for maintaining muscle as we age in both young and older people.

Data shows that more than 80 percent of over-75s in the United Kingdom don't eat enough fruits and vegetables daily. Our study also found nearly 60 percent of men and 50 percent of women who participated were eating insufficient vitamin C, according to recommendations. Not eating enough fruit and vegetables could therefore have implications for muscle health at a population level.

Our new findings build on the concept that optimal nutrition may help reduce the decline in muscle. This provides further emphasis and encouragement for people of all ages to follow the healthy eating guidelines and eat a wide variety of vegetables and fruits each day, not only for general health but to protect their muscles.

As vitamin C is readily available in vegetables and fruits, eating more should be relatively straightforward and have benefits for skeletal muscle health in people of all ages.

*Ailsa Welch is a professor of nutritional epidemiology at the University of East Anglia in the UK, and Richard Hayhoe is a senior research associate in public health nutrition at the University of East Anglia. This article was first published on The Conversation.*



Treating mental illness with exercise offers additional benefits.

## Exercise 'Fundamental' for Healing of Mental Illness

Research reveals exercise as an alternative to drugs as primary intervention for hospitalized psychiatric patients

**T**hinking about skipping your workout because of a flat mood? If you're upset, depressed, or anxious, a recent study indicates that's when you need exercise the most. It's so effective for mental health, it may even speed healing for psychiatric patients.

Those findings were revealed in a study on physical exercise published in the journal *Global Advances in Health and Medicine*. The study was conducted by researchers from the University of Vermont Medical Center, in conjunction with the medical center's inpatient psychiatry unit.

The study led by David Tomasi, Ph.D., a psychotherapist and inpatient psychiatry group therapist at the University of Vermont Medical Center, was published in 2019. Tomasi and his team assembled a gym for the exclusive use of approximately 100 patients of the center's inpatient psychiatric facility. The research team then introduced 60-minute, structured exercise and nutrition plans to patients that were incorporated as a key element of their respective treatments for various mental health and mood disorders.

Results on mood were so impactful, Tomasi stated in a news release, "Now that we know it's so effective, it can become as fundamental as a pharmacological intervention."

### Exercise Benefits Mental Health, Mood Disorders

Patients in this study were hospitalized for a wide array of psychiatric issues, with symptoms including mild-to-severe depres-

sion, anxiety, schizophrenia, suicidality, and acute psychotic episodes. According to Tomasi, only a handful of psychiatric hospitals in the United States with inpatient facilities provide exercise areas for patients.

Prior to engaging in the exercise sessions, psychotherapists surveyed patients' mood, self-image, and self-esteem via standardized questionnaires designed to limit bias. Individual fitness levels were not assessed, and no "normal" values were determined, given the possible negative connotations of expectations on patients' self-esteem and self-image assessments.

After patients were led through exercise sessions, the questionnaires were repeated to gauge the effects of exercise on psychiatric symptoms and self-assessments.

Exercise sessions were conducted four times per week for 60 minutes each, and consisted of cardiovascular and resistance training, as well as flexibility development through stretching or use of equipment such as recumbent bikes, ellipticals, rowers, steps, exercise balls, and other gym equipment.

Each session was followed by nutrition education in which patients were taught how to identify healthy food choices, budget, and make meal plans according to the most recent scientific recommendations on the connection between gut health and psychological well-being.

These sessions included facilitated discussions about the unique challenges of maintaining a healthy lifestyle coupled with patients' individual psychiatric concerns.

### Effective Initial Intervention

Researchers analyzed the data, considering specific differences between patient groups related to their levels of cognitive strength, understanding, and ability versus capacity, as demonstrated in the responses provided to questionnaires.

The analysis included cognitive differences between individuals diagnosed with, for example, moderate depression, versus an individual with acute schizoaffective disorder. According to researchers, "These aspects are reflected in some of the answers pertaining to the perceived effectiveness or helpfulness of the interventions offered."

### Overall, patients reported less anger, improved mood, higher self-esteem, and less anxiety and depression as a result of exercise sessions.

The research team was able to identify multiple positive outcomes that were direct results of implementation of physical exercise and nutrition coaching in inpatient psychiatry. Overall, patients reported less anger, improved mood, higher self-esteem, and less anxiety and depression as a result

of exercise sessions.

These positive results were experienced by the vast majority of patients, with 95 percent reporting improved mood and 63 percent reporting being "happy" or "very happy" after exercising.

An impressive 97.6 percent of patients responded in the affirmative to the question, "After attending this group, do you think you will exercise more?" a fact researchers considered to be one of the most important aspects of the study.

According to their report, "The willingness of patients to make room for physical exercise in their therapeutic schedule has resulted in an overall positive effect for the therapeutic environment as a whole."

Tomasi suggests that physical exercise is so effective at alleviating psychiatric symptoms, it could reduce the amount of time patients are confined to acute facilities and potentially reduce reliance on psychotropic medications. It also presents treatment options that may be effective at reaching individuals who are in a psychotic state, a condition when, according to Tomasi, talk therapy or psychotherapy has limits.

"It's hard to receive a message through talk therapy in that state, whereas with exercise, you can use your body and not rely on emotional intelligence alone" explains Tomasi.

### Sweat Therapy: Safe Option to Psychotropic Drugs?

Patients who are hospitalized for mental health and mood conditions are often in an acute state, with hospitalization used as a means of protecting the individuals, as well as others in society, from harm.

However, psychiatric wards are frequently noisy, crowded places that can increase a patient's distress and difficulty, creating barriers to effective treatment. As a result, sedative medications are often the first line of therapy, with self-care practices such as proper diet and exercise not considered part of a standard treatment protocol.

"The priority is to provide more natural strategies for the treatment of mood disorders, depression, and anxiety," Tomasi says. "In practice, we hope that every psychiatric facility will include integrative therapies—in our case, exercise in particular—as the primary resource for their patients' psychophysical well-being."

Exercise is a powerful therapeutic action that boosts overall health and immunity and is one of the top ways to improve your mental wellness. It does this, in part, by stopping mitochondrial aging in its tracks. Some studies even suggest that exercise can cut your risk of developing Alzheimer's disease in half.

You can of a mental well-being boost if you combine exercise with being outdoors. Science has shown that access to green space improves longevity, physical and mental health, boosts sleep, and shortens recovery time from illness.

To learn more about the health benefits of exercise, research more than 670 abstracts on the health benefits of exercise on [GreenMedInfo.com](http://GreenMedInfo.com)

For links to the research studies referred to in this article, please find it online at [TheEpochTimes.com/author-GreenMedInfo](http://TheEpochTimes.com/author-GreenMedInfo)

*The GMI Research Group is dedicated to investigating the most important health and environmental issues of the day. Special emphasis will be placed on environmental health. Our focused and deep research will explore the many ways in which the present condition of the human body directly reflects the true state of the ambient environment. This work is reproduced and distributed with the permission of GreenMedInfo LLC. Sign up for the newsletter at [www.GreenMedInfo.health](http://www.GreenMedInfo.health)*

## Childhood Obesity Could Increase the Risk of Multiple Sclerosis in Later Life

While smoking has fallen as a risk factor, a rise in childhood obesity looks set to increase as a factor in MS rates

RUTH DOBSON

**O**besity and smoking are well-known risk factors for heart disease and cancer. What is less well known is that they're associated with an increased risk of multiple sclerosis (MS).

Several studies looking at how MS develops have associated childhood obesity and smoking with a significant increase in the subsequent risk of getting the disease. MS is becoming increasingly common, and changing rates of child-

hood obesity and smoking may be contributing to this.

Studying the link between behavior or events in childhood and later-life development of MS is complex. MS is an autoimmune disease of the central nervous system that affects about one in every 500 people. This means that a large number of people need to be studied from a young age to get an accurate picture of the effect of changes in behavior or lifestyle on the risk of MS in adulthood.

While we know from earlier studies that

**MS is an auto-immune disease of the central nervous system that affects about one in every 500 people.**

childhood obesity increases the risk of MS, the findings don't clearly show how changing patterns of childhood obesity in the population might affect the frequency of MS in the future. To better understand this, our research looked at the proportion of MS risk that could be attributed to obesity and smoking. The results of our analysis are published in the *International Journal of Epidemiology*.

### What Is Already Known

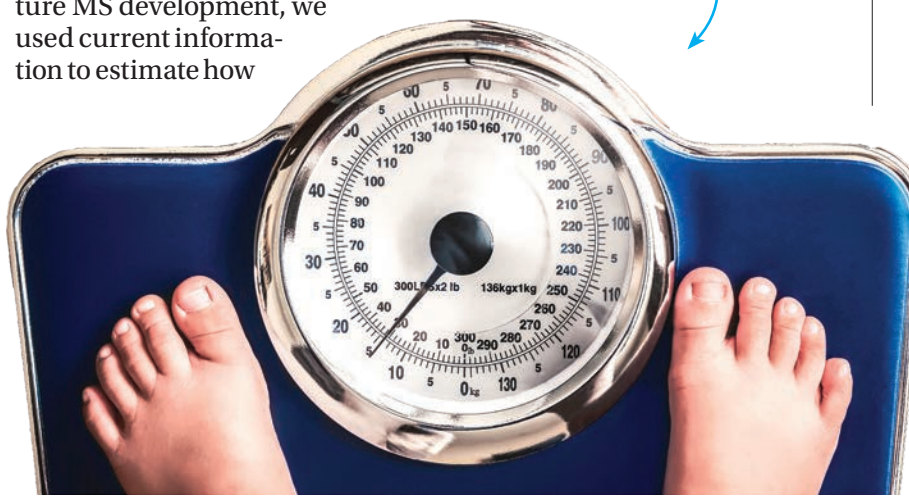
Many studies have looked at the relationship between smoking and MS. The largest of these included more than 590,000 people from around the world. It showed that smokers are around 50 percent more likely to develop MS than non-smokers.

Studying the relationship between adolescent obesity and MS is more complicated—few studies have weighed people in childhood and then followed enough people over the years to see if they develop MS. A study looking at the association between genes associated with childhood obesity and MS showed that people who are obese as children have a 20 percent

increased risk of MS—a similar result to that seen in smaller studies that measured weight in childhood and followed people up into adulthood.

These results can be used alongside information about the frequency of smoking and obesity in the entire population of a country, to calculate how much these factors contribute to MS risk in that country. As there is a time lag between childhood obesity, starting smoking, and future MS development, we used current information to estimate how

In the United States, childhood obesity has become a larger risk factor for multiple sclerosis than smoking.



WINNOND/SHUTTERSTOCK

this might change in the future.

### Smoking, Obesity, and MS

We found that smoking was responsible for between 10 and 14 percent of the population risk of MS in the United Kingdom, United States, Russia, and Australia in 2015. This is much higher in Russian males (22 percent), reflecting high rates of smoking. By 2025, the population risk attributable to smoking is projected to decrease in all the countries studied to between 7 percent and 12 percent.

In the United States, childhood obesity accounted for a higher proportion of 2015 MS risk than smoking. Childhood obesity in the United States in 2005 accounted for an eventual 11 percent of MS risk in 2015. In the United Kingdom, this figure was 8 percent. Worryingly, when the potential impact of 2015 rates of childhood obesity are projected, this will contribute up to 14 percent MS risk in the United States and 10 percent in the United Kingdom in 2025.

Trying to look at the combined effects of smoking and obesity is more complex,

as the current evidence doesn't tell us the amount of overlap between the two factors. The overall effect is likely to remain roughly stable, as the increase in childhood obesity offset reductions in smoking.

While this research can't tell us how childhood obesity and smoking increase MS risk, it shows that there is an urgent need to address childhood obesity. Increasing rates of childhood obesity mean that any gains in MS prevention caused by reduced levels of smoking will be lost. While cancer and heart disease occur in later adulthood, MS onset in young adulthood may be of greater concern to younger people.

Reducing childhood obesity and smoking is likely to have an important impact on MS incidence. Our work shows the size of the problem and highlights the need to act urgently.

*Ruth Dobson is a clinical senior lecturer in neurology and honorary consultant neurologist at Queen Mary University of London in the UK. This article was originally published on The Conversation.*



GOODLUZ/SHUTTERSTOCK



Eating a Mediterranean diet with lots of vegetables, fruits, whole grains, and healthy fats, can help foster a healthy gut microbiome and ward of cardiovascular disease.

# The Importance of the Microbiome to Cardiovascular Health

The bacteria that live in our gut and play critical roles in our health change according to the foods we eat

DEBORAH MITCHELL

What would you think if I told you that the trillions of microbes living in your intestinal tract—referred to as the gut microbiota—contains 100-fold more genes than the rest of your body and that these gut microbiota can have a dramatic impact on your cardiovascular health? This relationship is a prime example of the brain-gut connection.

Experts are uncovering more and more evidence that the gut microbiome has a role in a person's overall health and chances of developing any disease. Thus far, Type 2

BROOKE LARK/UNSPLASH



diabetes, metabolic syndrome, and obesity are a few of the conditions that exemplify the impact of host-gut microbiome interactions, and all three have a significant role in cardiovascular health.

## Trimethylamine-N-oxide

The most convincing evidence illustrating a link between the microbiome and cardiovascular health involves a substance called trimethylamine-N-oxide, an organic compound which is made by the liver after bacteria in the intestinal tract digest certain nutrients, including choline, L-carnitine, and lecithin. These nutrients are found in foods such as dairy, meat, eggs, and fish.

The more of these foods you eat, the more trimethylamine-N-oxide your gut microbiota and liver will produce. High levels of trimethylamine-N-oxide (TMAO) are associated with diabetes, hardening of the arteries, colon cancer, chronic kidney disease, and an increased risk of cardiovascular events. At the same time, there are associations between the composition of the microbiome and various risk factors for cardiovascular disease, such as high blood pressure, inflammation, and impaired metabolism.

The relationship between TMAO and cardiovascular risk has gained considerable attention, so much so that experts are exploring new ways to test for this substance in the blood to help predict future risk of heart attack, stroke, and death among people who appear to be healthy otherwise.

One such test was developed by experts at Cleveland Clinic and measures blood levels of TMAO. Basically, the higher a person's level of TMAO, the more likely he or she is to accumulate cholesterol in their artery walls, which in turn boosts their risk of having a heart attack or stroke.

More specifically, researchers evaluated the strength of the TMAO test and found that individuals who had the highest levels of TMAO had a 2.5 times increased risk for experiencing a major cardiovascular event than those who had the lowest levels during three years of follow-up.

## How to reduce TMAO levels

You can take a number of steps to reduce TMAO levels, create a healthier microbiome, and thus lower your risk of cardiovascular events.

## Mediterranean, Vegetarian, Vegan Diet:

Research has shown that vegans and vegetarians have microbiome bacteria that produce less TMAO than do meat-eaters. The same is true for those who follow a Mediterranean diet, which includes eating more vegetables, fruits, whole grains, and healthy fats, smaller portions of dairy, less red meat, and a weekly intake of fish, poultry, beans, and eggs.

**The trillions of microbes living in your intestinal tract—referred to as the gut microbiota—contains 100-fold more genes than the rest of your body.**

## Consume Prebiotics and Probiotics:

Prebiotics are plant fibers in fruits and vegetables that nourish probiotics, the beneficial bacteria in the gut. It's been shown in animal studies that prebiotics and probiotics can reduce TMAO levels. Some food sources of prebiotics include raw garlic, leeks, onions, dandelion greens, chicory root, asparagus, and jicama. Probiotics can be found in fermented vegetables (e.g., sauerkraut, kimchee), yogurt, kefir, and tempeh.

**Take Vitamins B and D:** At least one study in adults has shown that supplementation with B vitamins (i.e., folic acid and vitamins B6 and B12) along with vitamin D3 (1,200 IU) reduces levels of TMAO.

**Use Resveratrol Supplements:** This polyphenol, found in the skins of red grapes, red wine, berries, and peanuts, has been shown to reduce blood levels of TMAO in mice prone to atherosclerosis.

*Deborah Mitchell is a freelance health writer who is passionate about animals and the environment. She has authored, co-authored, and written more than 50 books and thousands of articles on a wide range of topics. This article was originally published on NaturallySavvy.com*

# How to Share The Epoch Times With Your Friends and Family



**As an Epoch VIP,** you're passionate about the traditional journalism and in-depth reporting you get in The Epoch Times. You've even sent us ideas on how to spread the word. Here are some of the best suggestions from readers like you!

## Request FREE Newspapers to Be Sent to Your Friends\*

Submit the names and shipping addresses of your friends. You can request FREE newspapers for as many friends as you want. The Epoch Times will send the newspapers on your behalf for free.

## Newspaper Sharing

Simply pass your copy of The Epoch Times, or a section of it, to someone

else after you've read it. Consider neighbors, friends, family, relatives, co-workers, teachers, golf buddies, and your boss.

## Newspaper Placement

Place a copy of The Epoch Times at places where people typically wait such as doctors' offices, dentists' offices, hotel lobbies, airline terminals, barbershops, and beauty salons. Also consider placing copies at community centers, company cafeterias, break rooms, coffee shops, gyms, churches, automobile dealerships, or in your car. Visit EpochShop.com.

## Bumper Stickers

Put a bumper sticker on your car plus ask friends and family to put stickers on their cars as well. Visit EpochShop.com.

## Getting the Word Out

Word-of-mouth is always a great way

to spread the news about The Epoch Times. Talk it up at your local library, meetings, birthday parties, special events, and with friends and family over the holidays.

## Using Email and Social Media

Use technology to share stories from The Epoch Times. Forward our daily email MORNING BRIEF to friends and family. Share postings from our Facebook site and YouTube channel. Simply copy the URL and then send it with a brief note such as: "Here's a story I thought you'd like to read."

## Displaying Your Poster

The Epoch Times SPYGATE poster has become legendary—so consider posting it on a wall at your home or office. When friends or business associates ask, explain what the poster is about and how they can get their own copy.

**Not a subscriber yet?**  
Visit [ReadEpoch.com](http://ReadEpoch.com)  
to learn more

THE EPOCH TIMES

\* (1) Please log into your account at TheEpochTimes.com (2) Click your name to manage your account (3) Click "Request Free Papers" on the left menu bar and follow steps