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MIND & BODY

The Impact of Loneliness

As social isolation takes its toll, the health effects of loneliness come into sharper focus

CONAN MILNER

Most of us have been under some level of lockdown for a better part of a year, resulting in a drastic drop in our social activities. These restrictive measures are intended to reduce the spread of a potentially deadly illness, but could they be breeding another problem?

Compared to an infectious pandemic, loneliness seems more like an inconvenience than a legitimate concern. But research finds that loneliness can be hard on both the mind and body. In addition to the anxiety and depression that commonly characterizes the social isolation of loneliness, studies find that it also poses a higher risk for heart disease, high blood pressure, stroke, obesity, a weak-

ened immune system, and neurodegenerative diseases such as Alzheimer's.

Youth are often highlighted among those whom loneliness impacts most during this pandemic. In July, the Center for Disease Control (CDC) Director Robert Redfield said that suicides and drug overdoses have far surpassed the death rate for COVID-19 among high school students.

Licensed clinical psychologist Dr. Jodi DeLuca has seen many adolescents in her practice struggling with restrictions due to the lockdown.

"It's because that age is all about socializing," DeLuca said. "They're very depressed."

Continued on Page 6

Human beings rely on each other for more than physical security. Our mental and emotional health hinges in large part on social connection.



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A study found that bitter orange and lavender significantly improved the mean sleep score of the first group compared with the second one.

Benefits of Bitter Orange Essential Oil for Anxiety and Sleep

Research-backed benefits on this common essential oil suggest multiple uses with little risk

The rind of bitter orange (*C. aurantium*) is used to create an important essential oil with benefits that seem particularly helpful for those suffering the stress of these trying times.

Essentials oils have been known since time immemorial for their wealth of health and therapeutic uses. These liquids contain many of the extracted properties of the plants used to create them, particularly scent.

Inhaling this essential oil is effective in reducing anxiety and stress levels in patients undergoing coronary angiography.

Bitter orange (*Citrus aurantium*) essential oil is popular for its ability to address anxiety and sleep difficulties—issues that are often rooted in a barrage of diet, lifestyle, and stress-related factors. While this oil may be used to flavor drinks and liquors, it has also garnered interest for its antimicrobial activity.

This essential oil is usually extracted by cold-pressing the peel. It has a yellowish orange to greenish orange hue, thin consistency, and smells like a cross between sweet orange oil's sweetness and grapefruit oil's slight bitterness.

Bitter Orange and Anxiety

The results of a single-blind, randomized controlled trial published earlier this year found inhaling this essential oil is effective in reducing anxiety and stress levels in patients undergoing coronary angiography.

In the trial, 80 subjects in Iran were randomly divided into two groups: a group that inhaled bitter orange essential oil for 15 to 20 minutes about an hour before angiography and a control group that inhaled distilled water. Their Spielberger State-Trait Anxiety Inventory (STAI) results and vital signs were recorded before and 20 minutes after the intervention.

The anxiety scores and vital signs of the essential oil group—including blood pressure and pulse rate—significantly decreased, while the control group showed no significant change in either area.

In a 2015 trial, researchers tested bitter orange alongside lavender in resolving anxiety in postmenopausal women. Bitter orange significantly reduced anxiety scores of postmenopausal subjects compared with the control group, with no significant difference in performance from the lavender group.

Bitter orange also offered the same benefit and an anxiolytic effect to patients with chronic myeloid leukemia,

who had reduced signs and symptoms linked to anxiety.

Bitter Orange and Sleep

A similar trial in 2015 compared the effects of lavender and bitter orange on sleep quality among postmenopausal women. The first group received 500 milligram (mg) capsules of bitter orange or lavender flower powder, while the second group had 500 mg capsules of starch.

Using the Pittsburgh Sleep Quality Inventory, the study found that bitter orange and lavender significantly improved the mean sleep score of the first group compared with the second one. The results suggested that both can be used for enhancing sleep quality in that cohort of women.

Research backing the efficacy of bitter orange essential oil supports the following therapeutic uses:

- Potential healing of the gastric mucosa
- Management of pain and inflammation
- Antimicrobial and antioxidant properties, serving as a sound ingredient source for food and medicine
- Reduced fatigue, such as in hemodialysis patients
- Improved symptoms of premenstrual syndrome

Safety Value

Assessments of bitter orange over the years vouch for the overall safety of the extract, both in food and dietary supplements at commonly used doses. Reviewing the potential dangers of bitter orange extract, a study concluded: "The data indicate that based on current knowledge, the use of bitter orange extract and p-synephrine appears to be exceedingly safe with no serious adverse effects being directly attributable to these ingredients."

While essential oils can be greatly beneficial to your health, it's always best to be cautious. Always dilute them properly, diffuse them regularly and consume them only under the guidance of a knowledgeable holistic health care practitioner.

If you're looking for a natural, cost-effective way to solve your anxiety and sleep problems, then essential oils are worth exploring for their potential to be part of your arsenal of healing tools. The GreenMedInfo.com database is a good place to start with 287 abstracts of essential oils research.

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COVID-19 has forced many physicians and patients to adopt virtual appointments through telephone or video conferencing. The move has revealed the convenience of this approach.



Telemedicine Surge Likely to Remain

Benefits of telemedicine reveal themselves as doctors and patients forced to new form of appointments

BERNARD J. WOLFSON

As COVID-19 took hold in March, U.S. doctors limited in-person appointments—and many patients avoided them—for fear of infection. The result was a huge increase in the volume of remote medical and behavioral health visits.

Doctors, hospitals, and mental health providers across the country reported a 50- to 175-fold rise in the number of virtual visits, according to a report released in May by the consulting firm McKinsey & Co.

The COVID-19-fueled surge has tapered off as patients venture back to doctors' offices. But medical professionals and health experts predict that when the pandemic is over, telehealth will still play a much larger role than before.

Studies show patient satisfaction with telehealth is high. And for physicians who previously were skeptical of remote care, necessity has been the mother of invention.

"There are still a few doubting Thomases, but now that we've run our practices this way for three months, people have learned that it's pretty useful," said Dr. Joseph Kvedar, president of the American Telemedicine Association and a practicing dermatologist who teaches at Harvard Medical School in Boston.

For patients, the advantages of telemedicine are clear: You typically can get an appointment sooner, in the safety of your own home or workplace, saving time and money on gas and parking—in some cases, even avoiding a loss in wages for missing work.

James Wolfrom, a 69-year-old retired postal executive in San Francisco, has had mostly virtual health care appointments since the pandemic started. He particularly appreciates the video visits.

"It's just like I'm in the room with the doctor, with all of the benefits and none of the disadvantages of having to haul my body over to the facility," said Wolfrom, who has Type 2 diabetes. "Even after the pandemic, I'm going to prefer doing the video conferencing over having to go there."

Telemedicine also provides care for people in rural areas who live far from medical facilities.

The growth of virtual care has been facilitated by Medicare rule changes for the COVID-19 emergency, including one that reimburses doctors for telemedicine at the same rate as in-person care for an expanded list of services. State regulators and commercial health plans also loosened their telehealth policies.

In California, the Department of Man-

You typically can get an appointment sooner, in the safety of your own home or workplace, saving time and money on gas and parking—in some cases, even avoiding a loss in wages for missing work.

aged Health Care, which regulates health plans covering the vast majority of the state's insured residents, requires commercial plans and most Medi-Cal managed care plans during the pandemic to pay providers for telehealth at parity with regular appointments and limit cost sharing by patients to no more than what they would pay for in-person visits. Starting Jan. 1, a state law—AB-744—will make that permanent for commercial plans.

Five other states—Delaware, Georgia, Hawaii, Minnesota, and New Mexico—have pay-parity laws already in effect, according to Mei Wa Kwong, executive director of the Center for Connected Health Policy. Washington state has one that also will begin Jan. 1, 2021.

If you are planning a telehealth appointment, be sure to ask your health plan if it is covered and how much the copay or co-insurance will be. The appointment may be through your in-network provider or a telehealth company your insurer contracts with, such as Teladoc, Doctor On Demand, or MD Live.

You can also contact one of those companies directly for a medical consultation if you don't have insurance, and pay between \$75 and \$82 for a regular doctor visit.

If you are one of the 13 million Californians enrolled in Medi-Cal, the state's Medicaid program, you can get telehealth services at little to no cost.

Large medical offices and health systems usually have their own telemedicine platforms. In other cases, your provider may use a publicly available platform such as FaceTime, Skype, or Zoom. Either way, you will need access to a laptop, tablet, or smartphone—though, for a phone conversation,

a landline or simple cellphone will suffice.

Smartphones with good cameras can be particularly useful in telemedicine because high-resolution photos can help doctors see certain medical problems more clearly. For example, a photo from a good smartphone camera usually provides enough detail for a dermatologist to determine whether a mole requires further attention, Kvedar said.

Relatively inexpensive apps and at-home tools enable you to measure your own blood pressure, pulse rate, oxygen saturation level, and blood sugar. It's a good idea to monitor your vitals and have the numbers ready before you start a virtual visit.

Be aware that a remote visit isn't right for every situation. In the case of serious injury, severe chest pain, or a drug overdose, for example, you should call 911 or get to the ER as quickly as possible.

Virtual visits also aren't recommended in other cases for which the doctor needs to lay hands on you.

Wolfrom has had only a few in-person health visits this year, one of them with a podiatrist who checks his feet every 6 to 12 months for diabetes-related neuropathy. "That can only be done when you are in the room and the podiatrist is touching and feeling your feet," Wolfrom said.

Face-to-face visits are generally better for young children. Kids often require vaccinations, and it's easier for doctors to monitor their growth and development in person, said Dr. Dan Vostrejs, a pediatrician at Santa Clara Valley Medical Center in San Jose.

In general, telemedicine is effective in cases that would typically send you to an urgent care clinic, such as minor injuries or flu-like symptoms, including fever, cough, and sore throat.

It is also increasingly used for post-surgical follow-ups. Telemedicine can be a godsend for geriatric or disabled patients with reduced mobility.

Among the top telehealth adopters are medical specialists who treat chronic illnesses such as diabetes, hypertension, cardiovascular disease, and asthma, said Dr. Peter Alperin, a San Francisco internist and vice president of product at Doximity, a kind of LinkedIn for medical professionals.

Providers can monitor patients' vitals remotely and discuss lab results, diet, medications, and any symptoms in a video chat or a phone conversation. "If you happen to see something that's awry, you can bring them into your office," Alperin said, adding it's "a better form of triage."

But telemedicine has some serious disadvantages. For one thing, the less formal setting can allow some routine medical practices to slip through the cracks.

In the second quarter of this year, blood pressure was recorded in 70 percent of doctor office visits compared with about 10 percent of telemedicine visits, according to a study published early this month.

Elsa Pearson, a resident of Dedham, Massachusetts, had a medical appointment scheduled in March, which was switched to a telephone call because of the pandemic-induced lockdown.

"It was honestly the most efficient appointment I've had in my life," said Pearson, 30. But, "I must admit, without the push of having the labs right there when you leave the appointment, I've yet to get them done."

Perhaps the biggest pitfall in telehealth is the loss of a more intimate and valuable doctor-patient relationship.

In a recent essay, Dr. Paul Hyman, a Maine physician, reflected on the times when an unexpected discovery during an in-person examination had possibly saved a patient's life: "A discovery of an irregular mole, a soft tissue mass, or a new murmur—I do not forget these cases, and I do not think the patients do either."

Bernard J. Wolfson is the managing editor for California Healthline, which is published by Kaiser Health News. This article was first published by California Healthline, a service of the California Health Care Foundation.



Doctors, hospitals, and mental health providers across the country reported a 50- to 175-fold rise in the number of virtual visits.

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Maintaining healthy muscles becomes more crucial as we age—crucial to our independence.

MADE TO MOVE

The Impacts of Muscle Loss

Preventable muscle loss can cause a range of health problems as we age

RICHARD KIRWAN & CLAIRE STEWART

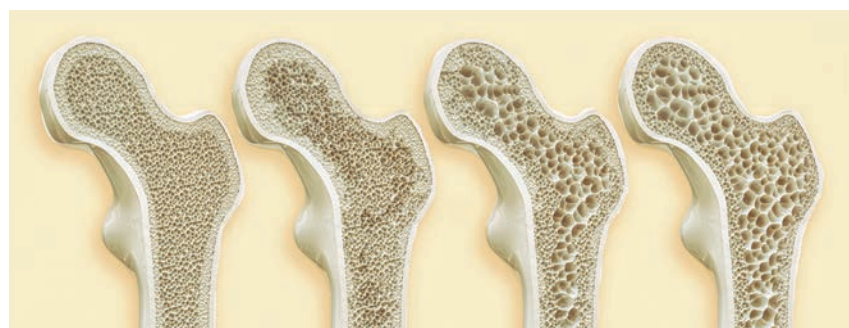
Here's a sobering fact: You can lose up to 40 percent of your muscle mass between your 20s and your 80s. That might sound outlandish, but it's a natural part of aging. Known as sarcopenia, this is the gradual loss of muscle mass that occurs as we age. Although we can start losing muscle from our 20s, this loss really speeds up once we hit our 60s. At the same time that sarcopenia causes loss of muscle mass, we simultaneously gain fat mass, and see a big drop in strength. All of this can affect how well an older person moves.

Sarcopenia and sarcopenic obesity (the combination of low muscle mass and excess fat), and dynapenia (the loss of muscle strength) is associated with a surprisingly wide range of health conditions, from heart disease and diabetes to frailty and dementia.

Muscle mass plays a huge role in our health. So much so that sarcopenia and sarcopenic obesity (the combination of low muscle mass and excess fat), and dynapenia (the loss of muscle strength) are associated with a surprisingly wide range of health conditions, from heart disease and diabetes to frailty and dementia.

In fact, in people who already have heart disease, those with the highest levels of muscle mass seem to have the best chance of living longer. On the other hand, people with the lowest amounts of muscle seem to be at the greatest risk

People with low muscle mass and excess fat are more prone to losing bone mass and developing osteoporosis.



CREVIER/SHUTTERSTOCK

of dying prematurely from all causes. This tells us that muscle might play a protective role in heart health. Why this happens, we don't yet know—but it may have something to do with chemical messengers (myokines) produced by healthy muscles, which can help reduce inflammation throughout the body.

Another major benefit of having healthy muscles is that they help protect us from diabetes. When we eat and digest carbohydrates—such as potatoes, bread, or rice—sugar enters our bloodstream, of which a lot is sent to our muscles. Our muscles use this sugar for energy or store it as glycogen in order to maintain stable blood sugar levels. This process is an important part of blood sugar control and helps explain why people with less muscle are more likely to develop diabetes.

In older people, low levels of muscle are also linked with greater frailty, weakness, and being less able to carry out normal daily activities. This means people can have trouble with regular tasks such as getting out of bed, standing up from chairs, climbing the stairs, or carrying groceries. All of this can make living independently a lot more difficult. Difficulty moving can also mean people end up moving even less, which speeds up muscle loss.

People with sarcopenia who lead sedentary lives are also at greater risk of osteoporosis. This is because active muscles send signals to bones that help them stay strong. The drop in strength from sarcopenia means people may be more prone to falls and bone fractures. Again, this fear of falling may make some people more sedentary, which may reduce the quality of life and put them at a greater risk of depression.

Although sarcopenia is a natural part of aging, muscle loss is largely accelerated by inactivity. As we get older, we tend to move less. But exercise is one of the key signals that our body needs to keep our muscles strong and healthy. Without that signal, our muscles start getting smaller and weaker over time. Eating protein also acts as a signal to grow and maintain muscle. However, as we age, we tend to have smaller appetites and eat less protein, increasing the risk of muscle loss.

Lower levels of the hormones testosterone and estrogen, higher levels of body fat, insulin resistance (where the body doesn't handle glucose as it should, which can lead to diabetes), and higher levels of inflammation are other reasons why older people lose muscle more easily than younger people. In fact, all of these factors combined lead to something called "anabolic resistance." This means the body doesn't respond as well to the signals that normally cause muscles to grow.

If that isn't enough, current COVID-19 restrictions may be making muscle loss even more likely. Data from smartphones has shown that people have been more sedentary than usual during the lockdown. We also know that people's sleep quality has declined and people are probably feeling more stress and anxiety. These factors can also speed up muscle loss by affecting hormones that increase muscle breakdown and encourage weight gain by affecting appetite hormones, causing people to eat more processed foods that have more calories.

Muscle loss can be prevented—or at least slowed—with a few lifestyle changes, namely exercise and diet.

This is called a "catabolic crisis"—a brief period of time when conditions come together to make muscle loss much more likely. Another example of a catabolic crisis would be if someone was hospitalized or forced to spend days or even weeks in bed. COVID-19 could very well create a catabolic crisis for many older adults after a lockdown.

Muscle loss can be prevented—or at least slowed—with a few lifestyle changes, namely exercise and diet. Resistance exercise, such as lifting weights or using elastic resistance bands, helps keep muscles strong and healthy, and regular walking can help, too.

High-protein diets, containing foods such as lean meats, fish, eggs, and low-fat dairy products, can also help to build and maintain more muscle than exercise alone. Getting at least 25 to 40 grams of protein each meal is especially important. On top of that, widely available supplements including vitamin D, fish oil, and creatine (a naturally occurring substance found in the muscles that help them produce energy) may help people hold on to more muscle and improve their quality of life as they age. During this pandemic, when muscle loss is more likely, prioritizing regular exercise and a healthy diet can make a big difference to long-term health.

Richard Kirwan is a Ph.D. and researcher of clinical nutrition and physiology at Liverpool John Moores University in the UK. Claire Stewart is a professor of stem cell biology at Liverpool John Moores University. This article was first published on The Conversation.

Natural Remedies Found in Your Kitchen

PICSTZ1/SHUTTERSTOCK

Our cupboards contain medicinal foods with a long history of helping to heal us

TATIANA DENNING

"An apple a day keeps the doctor away," at least that was the philosophy of my Grandma Konchesky.

Like many of our grandmothers, she swore by a host of home remedies. For my grandma, garlic was the cure for what ailed you, a swig of cod liver oil was a daily ritual for keeping your brain sharp, and Prevention magazine, with its many natural remedies, was a regular on her kitchen table.

While modern medicine has moved away from these traditional, and often ancient, remedies, my grandma was onto something. After all, she lived a very healthy life until she passed away at the age of 93. She even ran her own business until just a few years before she died.

But don't worry, I'm not going to force cod liver oil on you. There are some other great, and fortunately more palatable home remedies that are known to have several health benefits. And some of these remedies are as close as your own kitchen.

Ginger

A staple in traditional Chinese medicine for millennia, ginger not only helps improve blood flow, it's one of the best anti-inflammatory foods there are, with some studies showing it even rivals ibuprofen in treating arthritis and menstrual cramps. Ginger is also great for nausea, helps detoxify the colon and liver, aids in digestion, and possesses antifungal, antibacterial, and antiviral properties.

A 2015 study showed ginger improves glucose levels in diabetics, and while further research is needed, these preliminary findings were encouraging. Several studies have also shown a significant reduction in cholesterol levels, and even benefits in weight loss.

To reap some of these amazing benefits, try adding some ginger into your next stir-fry or chicken dish, or steep a few slices in hot

water and enjoy a cup of warm ginger tea. There are also a number of ginger candies on the market aimed at treating nausea.

Honey

Honey has been used for centuries for both its medicinal and culinary benefits. While pasteurizing, or heating, honey may increase shelf life and improve color and texture, raw honey is where the real health benefits are believed to be found. Just be sure to purchase it from a reputable source.

This ancient remedy has been used to not only help soothe a sore throat, but studies have even found it's more effective than some over-the-counter cough syrups, especially in children (note, honey should not be used in children under the age of one, so please consult your pediatrician).

While modern medicine has moved away from these traditional, and often ancient, remedies, my grandma was onto something.

Honey contains phytonutrients with anti-inflammatory and immune boosting properties, but cellular communication and immune-boosting properties as well. Research has shown that Manuka honey, in particular, can kill a number of common pathogens, including E.Coli, Staph aureus, and H. pylori. For this reason, it's been used to treat cuts, wounds and burns, diarrhea, gastric ulcers, and chronic gastritis. The next time you have a cough, try taking a teaspoon of honey. A little honey stirred into your favorite tea, or glazed over salmon, is another great way to benefit from honey.

Apple Cider Vinegar

I've had many patients over the years swear by apple cider vinegar (ACV), particularly the raw, unfiltered form containing the starter bacterial culture known as "the mother," which is full of enzymes and good bacteria.

ACV has long been believed to have antimicrobial properties, and while little research exists

on its benefits, there have been studies showing it to have anti-oxidant properties. A review study published in Molecular Nutrition & Food Research in 2016 found it may even help decrease blood pressure and blood sugar levels. Apple cider vinegar has also been shown to decrease hunger and may help promote loss of weight and belly fat, according to a Japanese study published in 2014.

Many patients have said they use 1 to 2 tablespoons of ACV, mixed in a large glass of water, to resolve heartburn. While it may fly in the face of reason to use an acid to treat heartburn, they promise it works. They've also said it works like a charm for leg cramps.

It's important to note, because apple cider vinegar is acidic, it should never be used alone, otherwise you risk wearing down your tooth enamel. Instead, use it in a salad dressing, as part of your cooking ingredients, or mix a tablespoon in a large glass of water with a little lemon and honey to taste.

Garlic

Packed with nutrients, garlic has long been used for both its medicinal and culinary benefits. This well-loved ingredient not only has antifungal, antiviral, and antibacterial properties, but antioxidant properties as well.

As part of the onion family, garlic has a strong taste when consumed raw, but develops a mild, somewhat sweet taste when cooked. While my grandma used it both ways, she swore by raw garlic, just as my husband does. For years, he's used a concoction of crushed garlic soaked in raw honey and raw apple cider vinegar. He drinks a shot glass of strained liquid 1 to 2 times a day, and swears it's the reason he's been able to stave off the chronic sinusitis that once plagued him. He and my grandma would most certainly have hit it off, were she still alive!

Studies have shown that garlic reduces total and LDL cholesterol by 10 to 15 percent, while high-dose garlic extract has proven to be just as effective in reducing blood pressure as the drug atenolol.

And if that's not impressive enough, a 2006 review published in The Journal of Nutrition found antioxidant-rich aged garlic extract may even reduce the risk of dementia and heart disease.



Curative foods are hidden away in your cupboards.



Ginger is a great anti-inflammatory.

NATALY STUDIO/SHUTTERSTOCK



Honey is full of phytonutrients.

KOVALEVA_KA/SHUTTERSTOCK



Olive Oil is loaded with polyphenols.

BAIBAZ/SHUTTERSTOCK

Olive Oil

While there are many options to choose from for our last remedy, we'll end with olive oil.

Composed mainly of monounsaturated fatty acids, olive oil has long been touted for its beneficial role in the Mediterranean diet. Loaded with polyphenols, olive oil has powerful antioxidant properties that help fight inflammation. It's because of these properties that studies show olive oil may help prevent cardiovascular disease, cancer, and even stroke.

Olive oil has been shown to decrease the risk of Type II diabetes, and even fight Alzheimer's disease. In combination with fish oil, it has also been shown to improve joint pain and stiffness in rheumatoid arthritis.

With such impressive benefits, making olive oil a staple in your diet just makes good sense.

Conclusion

As with anything, be sure to talk to your doctor first, as even natural remedies can have unintended consequences and may need to be avoided with certain medications or health conditions.

With that caveat, the next time you're looking for relief from that scratchy throat, want to lose a little weight, or boost your immune system, why not check your kitchen? As our grandmothers knew, nature offers many amazing options for improving health. You may just be pleasantly surprised at the results.

Tatiana Denning, D.O., is a family medicine physician who focuses on wellness and prevention. She believes in empowering her patients with the knowledge and skills necessary to maintain and improve their own health.

Potatoes Aren't Bad for People With Type 2 Diabetes, Says Study

Long-held assumption about this high glycemic index food don't hold up under rigorous review

MAT LECOMPTÉ

New research confirms that potatoes are not as bad as once thought for people with Type 2 diabetes.

The findings challenge a long-held belief that high glycemic index (GI) foods, such as potatoes, should be avoided by those with diabetes because of the way they affect blood sugar levels. However, this new information goes against what experts have suggested for decades.

The findings of the study published in Clinical Nutrition show that when people with Type 2 diabetes ate a mixed meal with skinless white potatoes, they had a better 'nocturnal' GR, compared to when they consumed a macronutrient-matched mixed meal that included basmati rice, a low GI carbohydrate food. A rise in

Potatoes can deliver key nutrients in relatively few calories, which is essential for people with Type 2 diabetes.

ULRICH2/SHUTTERSTOCK



Potatoes have a high glycemic index, but that doesn't make them a bad influence on blood sugar, finds new research.

blood sugar during the night has long been associated with cardiovascular disease and endothelial dysfunction.

Participants consumed the same breakfast and lunch for the study, but they were randomly assigned to one of four dinners. Each meal included either skinless white potatoes (test meal) prepared in three different ways (roasted, boiled, or boiled then cooled and reheated) or basmati rice (control meal). The meals were repeated with a 9-day break in between each trial to cycle through all test meals and the control.

All participants had blood samples collected immediately after the meal and again every 30 minutes for 2 hours. They were also required to wear a continuous glucose monitor overnight to track changes in blood sugar

levels while sleeping.

After following a rigorous methodology by using a randomized crossover design and measuring glucose levels both immediately post-meal and overnight to obtain a better picture of the potatoes' impact on GR, researchers were able to gain a better insight into how potatoes may affect blood sugar levels.

The researchers concluded that no differences were found in the glucose response between meals or following the dinner that contained the potatoes or basmati rice. Participants' overnight GR was also more favorable after eating the evening meal that included any of the high GI potato side dishes compared to the low GI basmati rice.

Other Factors to Consider
Dr. Brooke Devlin, Ph.D., the pri-

mary investigator at Australian Catholic University in Melbourne explains, "Despite its frequent use among nutrition researchers, GI is not an appropriate tool for understanding how a meal impacts glycemic control; it is a very specific measurement for foods consumed in isolation, typically conducted under controlled laboratory conditions. It's rare that people eat foods in isolation, and findings from this study demonstrate how other factors, such as the time of day or food pairings, need to be considered when investigating the GR of mixed meals in individuals with Type 2 diabetes."

This research helps to better understand the relationship between food choices and Type 2 diabetes. It challenges dietary guidance and observational research which has previously suggested that potatoes are not an appropriate food choice for those with Type 2 diabetes. This new information helps people to understand that white potatoes can be consumed as part of a healthy evening meal without negatively affecting GR. Potatoes can deliver key nutrients in relatively few calories, which is essential for people with Type 2 diabetes.

Mat Lecompte is a freelance health and wellness journalist. This article was first published on Bel Marra Health.

Our Minds May Be Wandering More During the Pandemic

Amid lockdowns, many people may be experiencing the benefits of mental downtime and a roaming mind

JENNIFER WINDT

Many feel the pandemic has changed not just our everyday lives, but also our inner mental lives. There has been talk of a mental health pandemic, lockdown brain fog, and reports of more frequent, vivid, and bizarre dreams.

We tend to think of our waking and dream lives as separate. But it is striking how deeply they are linked.

Spontaneous thought, or mind-wandering, occupies up to 50 percent of wakefulness. Our thoughts and attention frequently drift away from what we are doing and what is happening in our immediate surroundings, with one thought following another along an associative trajectory.

Spontaneous thoughts and experiences are also pervasive in sleep. The clearest example is dreaming, which has been described as an intensified form of the mind wandering that happens when we are awake.

Considering dreaming and mind wandering together suggests the fluctuations in spontaneous experience, the natural ebb and flow of attention and somewhat erratic trajectory of thoughts continue throughout waking and sleep.

In normal circumstances, we mostly remain oblivious to the fact our minds have wandered. Most people, when awakened in the sleep laboratory, only rarely remember their dreams but can report multiple dreams per night. Like mind wandering, dreaming is also largely (with the exception of certain lucid dreams) beyond our control.

However, attention to our inner lives may be amplified at a time when control over our everyday lives is elusive.

Paying attention to your dreams when you first wake up in the morning drastically increases dream recall. And attempting to harness our thoughts and attention throughout the day can actually make us more aware of our failures, including lapses in attention. If you have been paying more attention to your spontaneous thoughts during the pandemic,



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Sometimes it takes a wandering mind to sort out complex issues lurking in the back of our minds.

ic, you might have become more aware of what was there all along.

Changes in Spontaneous Thought—for Better or Worse

If you have been sleeping more under lockdown, you are probably experiencing more early morning REM sleep. Because REM sleep is typically associated with the most vivid and complex dreams, this might lead to an increase in actual dreaming.

If you have also ditched your alarm clock, you are probably awakening directly from REM sleep, which further increases dream recall.

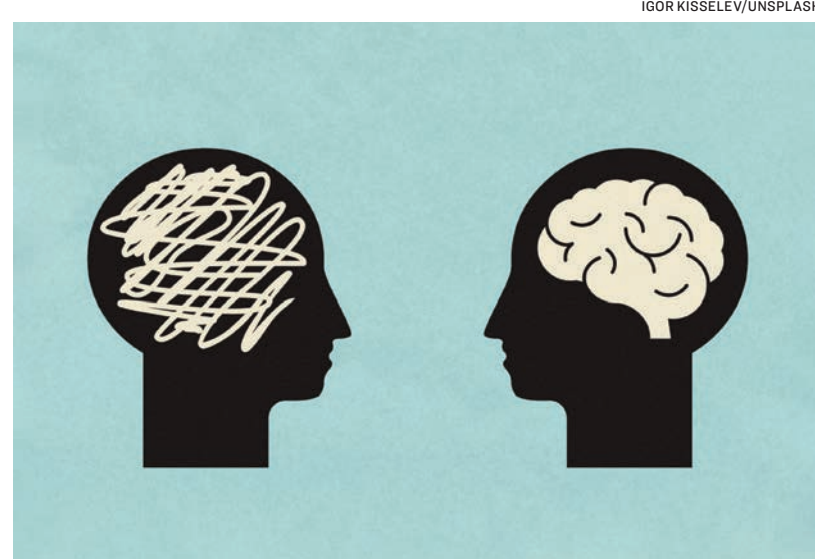
The pandemic has also changed what we daydream and dream about. Waking concerns about the pandemic seem paralleled by more frequent nightmares and dreams about topics such as social distancing, contagion, or personal protective equipment.

Some changes to our spontaneous mental lives can indicate something is amiss. Anxiety and stress are linked to increased repetitive thoughts and rumination, as well as trouble focusing, disturbed sleep, nightmares, and unpleasant dreams, all of which seem to have increased during the pandemic.

These repetitive, sticky, and non-progressive thoughts contrast with the free, meandering movement that characterizes most dreams and mind wandering.

Spontaneous Thought Might Be Beneficial

The restlessness of our minds might



IGOR KISSELEV/UNSPLASH

Attention to our inner lives may be amplified at a time when control over our everyday lives is elusive.

also have a silver lining. Mind wandering certainly does compromise how well we perform tasks demanding attention. But because of their associative nature, dreams and mind wandering can also help us make new connections and see familiar topics in a new light. When our minds wander, our thoughts are often drawn to the future and personal concerns.

Similarly, dreams have the tendency to weave disparate waking experiences and concerns into new and sometimes bizarre narratives. You might encounter a dream character who is a mixture of different people you have been close to at different times in your life.

Or your initially pleasant dream of visiting friends in a faraway city might morph into a nightmare about getting infected, putting your family at risk, and being pursued by the police because you are

breaching lockdown.

Spontaneous thoughts in waking and sleep might help us process memories and guide future planning and decision making, for example by enabling us to imagine alternative courses of action. They can also be a source of insight and creativity.

Such thoughts may also contribute to coping and emotional processing. Future-oriented mind wandering is often positive, whereas past-oriented mind wandering tends to be associated with negative moods and emotions.

A Great Escape

Being in the here and now is often lauded as a virtue we should aim to cultivate through mindfulness. But sometimes, distraction can be useful: Mind wandering can provide a welcome break from boring tasks, allowing us to return with refreshed attention.

Other times, distraction might just be pleasant. In our dreams, we experience alternative realities; we can travel freely, and because dreams are rich in social interactions, we can interact with people we are separated from in waking life.

Given the monotony, restrictions, and social isolation many of us are experiencing, the unruliness and unboundedness of our minds might sometimes be a great escape.

Jennifer Windt is a senior research fellow at Monash University in Australia. This article was originally published on *The Conversation*.

Metabolic Inflexibility

Is Key Risk Factor for COVID-19

Lifestyle factors that are within our control double and triple the risk of a fatal COVID infection

Metabolic flexibility refers to our body's ability to adapt to different demands, such as changes in temperature or when we need our metabolism to ramp up while exercising.



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JOSEPH MERCOLA

While SARS-CoV-2 is a rampant virus that can cause severe problems in vulnerable individuals, the real pandemic—the underlying cause that makes people susceptible to complications from the infection in the first place—is poor metabolic health.

Metabolism is the sum total of all the chemical reactions the body uses to maintain a living state. It has two major types: when our body breaks down molecules in the food we eat to provide cells with energy, and when our body synthesizes all the compounds needed by our cells.

Metabolic flexibility is key to our overall well-being. This refers to our body's ability to adapt to different de-

mands, such as changes in temperature or when we need our metabolism to ramp up while exercising.

When we feed our body problem foods, we undermine all the chemical reactions that make up our metabolism. This can end up undermining our overall metabolic flexibility. Diabetes is an example of metabolic inflexibility, a lack of ability for the body to deal with different energy demands and process food into energy properly.

Type 2 diabetes (insulin resistance) and obesity are two conditions that are almost entirely affected by lifestyle and are also two of the major factors associated with worse COVID-19 outcomes. Obesity has been identified as one of the primary risk factors for being hospitalized with COVID-19—doubling the risk of hospitalization in patients under the age of 60 in one study.

Dr. Aseem Malhotra, a British cardiologist and author of "The 21-Day Immunity Plan," explains the role insulin resistance plays in the COVID-19 pandemic. "The real pandemic is poor metabolic health, or metabolic inflexibility," Malhotra says. "I had become aware, as early on as March, when we

were getting data from China and Italy, that there was a clear link between conditions related to excess body fat, in simple terms defined as poor metabolic health, [and] worse outcomes from COVID-19.

"We're talking about conditions like Type 2 diabetes, high blood pressure, heart disease and, of course, obesity. And that data kept emerging. That link was so clear, and it wasn't just out of the blue."

Malhotra says after two decades as a practicing doctor, it is clear to him and others that people with poor metabolic health have worse outcomes from any infection. "COVID-19 has highlighted it more, and made us think about it more," he said.

And although the data is clear, that information doesn't seem to be making its way to public awareness.

"I was looking at that data and thought, 'There's something missing out of this mainstream conversation.' [COVID] was getting a lot of immediate coverage across the world, in the UK, in the United States, but no one was talking about lifestyle."

Continued on Page 10



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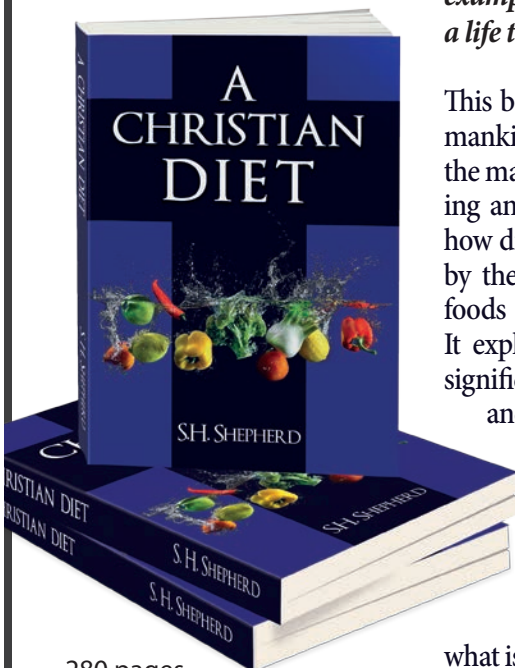
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TRUTH AND TRADITION

Christians have a diet, one given to them by God

In the beginning God created the heavens and the earth. He also gave to mankind a simple diet. He then showed the human race the way to live and the path of salvation through Jesus Christ. Jesus' example and teachings lead us into a simpler life, a life that is better for us in numerous ways.

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Metabolic Inflexibility

Is Key Risk Factor for COVID-19

Continued from Page 9

Obesity Is a Significant COVID-19 Risk Factor

Aside from old age, obesity has been identified as one of the primary risk factors for being hospitalized with COVID-19—doubling the risk of hospitalization in patients under the age of 60 in one study—even if the individual has no other obesity-related health problems. A French study also found obese patients treated for COVID-19 were more likely to require mechanical ventilation.

One hypothesis for why obesity worsens COVID-19 has to do with the fact that obesity causes chronic inflammation. The body uses inflammation to fight disease and heal itself, but when this reaction goes awry, it becomes a major contributor to disease. Chronic inflammation can lead to having more pro-inflammatory cytokines in circulation, which then increases your risk of experiencing a cytokine storm.

A cytokine storm response is typically the reason why people die from infections, be it the seasonal flu, Ebola, urinary tract infection, or COVID-19. Obesity also makes you more vulnerable to infectious diseases by lowering your immune function.

Insulin Resistance Augments Infection Risks

Obesity is often rooted in insulin resistance, brought on by a flawed diet. Insulin resistance is another top risk factor for COVID-19 that worsens outcomes and increases your risk of death. An April 15 article in *The Scientist* reviews evidence showing how higher blood glucose levels impact viral replication and the development of cytokine storms.

While the research in question looked at influenza A-induced cytokine storms, these findings may well be applicable in COVID-19 as well. In a *Science Advances* press release, co-author Shi Liu said: "We believe that glucose metabolism contributes to various COVID-19 outcomes since both influenza and COVID-19 can induce a cytokine storm, and since COVID-19 patients with diabetes have shown higher mortality."

Obesity probably doubles your risk of death, but with metabolic syndrome, it's around a 3.5 times increased risk of death.

Dr. Aseem Malhotra, cardiologist and author

COVID-19 Risk Factors Can Be Rapidly Ameliorated

The good news, as Malhotra stresses, is that the lifestyle factors that make you more prone to severe COVID-19 infection and death can be modified and ameliorated in as little as 21 days, simply by changing your diet. Like me, Malhotra feels this has been sorely missing from pandemic response messaging.

"They should have been saying, 'Listen, there's no better time for you to really think about trying to improve your health and looking into what you eat, [get] moderate exercise, sleep, all those things,'" Malhotra says. "But it wasn't happening."

To fill the information gap, Malhotra began writing. Initially, he wrote a series of articles for British newspapers. He also got the opportunity to speak about this on Sky News.

"I made it very clear. I said, 'Listen, there's a chance at some point we're all going to get this virus, and we want to make sure that we're in the best position to be able to deal with it, so that we don't

get sick from it when it happens.'" "I think I was probably, maybe, the only doctor who had the opportunity to say that in a mainstream media, probably in the world, at that time; I think no one else had said it."

As more data became available, Malhotra's writings turned into "The 21-Day Immunity Plan." Malhotra also had the opportunity to share information with the United Kingdom's Secretary of State for Health, Matt Hancock. By the time the book was finished, Prime Minister Boris Johnson came out saying something needs to be done, on a policy level, about the obesity epidemic.

That said, we don't have to have government policies in place to personally implement these lifestyle strategies. The information is available. It's well-documented, noncontroversial, and relatively simple to do. Surprisingly, Malhotra's message has been largely well-received, and hasn't been censored to the extent that many others have.

The ideal scenario is to get vitamin D from sunlight because it actually stays in your bloodstream longer.

Dr. Aseem Malhotra, cardiologist and author

Unfortunately, we're still fighting against a tsunami of dietary misinformation and false advertising on a daily basis, which makes it difficult to really get this message out and make it stick. "If every day the government was putting out a message saying, 'Metabolic health is the key,' then we would have a really big impact," Malhotra says.

Most People Have Poor Metabolic Health

The central thesis of Malhotra's book is that we have a pandemic of metabolic inflexibility or metabolic ill health. There are five primary parameters of metabolic ill health, which include having:

1. A large waist circumference
2. Prediabetes or Type 2 diabetes
3. Prehypertension or hypertension (high blood pressure)
4. High blood triglycerides
5. Low HDL cholesterol

If you have all of those five parameters within the normal ranges, you are in good metabolic health. Having three or more abnormal parameters is indicative of metabolic syndrome. Metabolic inflexibility can further be divided into two primary subsets: insulin resistance and vitamin D deficiency.

Signs of insulin resistance typically include high blood pressure, high triglycerides, high cholesterol, obesity, and other variables connected with it.

In the United States, NHANES data published in 2016 reveal 87.8 percent of Americans are metabolically unhealthy, based on five parameters. That data is more than four years old now, so the figure is likely greater than 90 percent of the population today.

According to a January 2019 update by the U.S. Centers for Disease Control and Prevention, more than 122 million American adults have diabetes or prediabetes—conditions which have been shown to increase your chances of contracting and even dying from COVID-19.

Metabolic Syndrome Triples COVID-19 Fatality Risk

While abdominal obesity and insulin resistance are hallmark characteristics of someone with metabolic syndrome, they don't count as metabolic syndrome

They should have been saying, 'Listen, there's no better time for you to really think about trying to improve your health and looking into what you eat. [get] moderate exercise, sleep, all those things.'

Dr. Aseem Malhotra, cardiologist and author

on their own. That distinction becomes more important when it comes to COVID-19, Malhotra notes.

"The data from COVID-19 shows the highest risks of death and hospitalization are in people with metabolic syndrome, not obesity. Obesity probably doubles your risk of death, but with metabolic syndrome, it's around a 3.5 times increased risk of death—more than threefold—and about five times the risk of hospitalization if you get COVID-19.

"So that is the major problem. And the reason why that's important is it also affects many, many people. This is why BMI [body mass index], to be honest, I think should be thrown out; I mean, it's useless, it's outdated." "We should be looking at metabolic health, because up to 40 percent of people with a so-called normal BMI, who may be told they've got a healthy weight, actually are metabolically unhealthy. That's a huge proportion of people, and there are disparities depending on which ethnicity you're from."

The problem with BMI is that it's based solely on weight and height, without factoring in body fat percentage, muscle mass, or ethnicity, says Malhotra.

"It misses a huge group of people who are probably vulnerable and could institute lifestyle changes to help themselves if they were advised to do so. But a lot of them aren't being advised because they're being told they've got a healthy weight."

"If everybody knew their metabolic health markers and were then given advice to do things about it, then, as I point out in the book, within a few weeks you'd probably notice significant changes. Of course, it's going to vary from person to person."

Another crucial factor to immune function is vitamin D. Malhotra says this crucial link is overlooked. Vitamin D deficiency is a well-known and widespread problem in the United States and United Kingdom.

"Most cell receptors in your body have vitamin D receptors, and it is involved in enhancing both innate and adaptive immunity," says Malhotra.

The bottom line is you need to have the five metabolic parameters listed above within the normal ranges, and you need an optimal blood level of vitamin D, which is now thought to be between 40 ng/mL and 60 ng/mL.

"There was a study in Indonesia that showed that in people hospitalized with COVID-19—those who had severe vitamin D deficiency versus those that had normal ranges of vitamin D in their blood—there was a tenfold difference in death rates, which is extraordinary. So, [vitamin D] certainly has a very important role to play," Malhotra says.

"The ideal scenario is to get vitamin

D from sunlight because it actually stays in your bloodstream longer. But, certainly, at least through the winter months, you should be taking a supplement. And I think the good thing about that is it's cheap."

"I suspect getting good health actually is going to come from just eating real food, and being out in nature, and doing more exercise, and reducing our stress, and social connection; all of those things, I think, are the key to longevity and good quality of life."

How to Improve Your Metabolic Health

So, just how do you improve those five metabolic parameters? Malhotra addresses this in his book, of course. In summary, to optimize your metabolic health and reverse metabolic syndrome, you'll want to mind your diet, activity, sleep, and stress.

Diet

Limit or eliminate foods that promote insulin resistance. Topping this list are processed foods high in industrial seed oils, added sugars, and refined carbohydrates (i.e., bread, pasta, and white rice).

"Sugar is probably one of the major dietary culprits," Malhotra says. "It certainly also, beyond its calorie issue, seems to have independent effects and adverse effects on metabolic health."

Malhotra says eliminating sugar is one of the first things he raises with people. Sugar cravings can be difficult for some people, but Malhotra says they pass.

"Most people you can break those addictions usually within 3 to 6 weeks."

Another major dietary issue is the widespread use of industrially processed seed oils such as canola, corn, and soy oil—most of which are also genetically engineered.

"When used in cooking, they also produce toxic, carcinogenic aldehydes. In lieu of seed oils, use healthy saturated fats such as coconut oil, grassfed butter, organic ghee, or lard.

Activity

Be more physically active. This too can ameliorate and reduce metabolic disease risk markers. Just be mindful not to go overboard, as excessive exercise will

actually lower your immune function and put you at increased risk of respiratory infections.

Sleep

Be sure to optimize your sleep. It is crucial to your body's renewal cycle, and a lack of sleep is linked to increased risk of many diseases.

Stress

Manage your stress. Stress spurs the release of the stress hormone cortisol. This reaction is helpful in short-term situations when you need to flee a threat or focus your attention on immediate threats to your survival.

But this reaction brings a host of problems to modern life. In the end, the ongoing influence of cortisol leaves the body depleted and vulnerable to a host of disease.

Conclusion

As we face the risk of COVID-19, it is critical to be aware that our lifestyle will have a major impact on our risk of a severe infection or possible death from the virus. Taking the steps above will help lower that risk. Tending to these aspects of lifestyle will also ensure overall health.

One hypothesis for why obesity is worsening COVID-19 has to do with the fact that obesity causes chronic inflammation.

"Combining all those together—that synergy of the diet and all the other lifestyle factors—has profound and rapid effects on health. So that's where we need to change the narrative," says Malhotra.

"One of the bits of advice to start with is what you should cut out ultra-processed food and low-quality carbs. At least go cold turkey for a few weeks. You may reintroduce them or have them as occasional treats, but this should not be making up the bulk of your calorie consumption."

"That is really where we need to start." To learn more, be sure to pick up a copy of Malhotra's book "The 21-Day Immunity Plan." It's an easy read that emphasizes and summarizes the core lifestyle basics you need to understand and apply to improve your metabolic health, which in turn will reduce your risk of complications should you come down with symptomatic COVID-19 illness. Social media information for Malhotra can be found on his site at doctoraseem.com.



Another major dietary issue is the widespread use of industrially processed seed oils such as canola, corn, and soy oil—most of which are also genetically engineered

Dr. Joseph Mercola is the founder of Mercola.com. An osteopathic physician, best-selling author, and recipient of multiple awards in the field of natural health, his primary vision is to change the modern health paradigm by providing people with a valuable resource to help them take control of their health. This article was originally published on Mercola.com

How Humility Can Help Us Bridge Our Political Divides

With so much political division, we may need to practice more modesty to communicate and cooperate

JILL SUTTIE

Many Americans worry about the political divide tearing our country apart. A large percentage are unwilling to engage with people who have opposing political views, and that's creating more animosity.

This is especially worrying considering how many issues require cooperation, trust, and solutions a diverse citizenry can get behind. How can we find a way across our divide and come together for common cause?

At Greater Good, we've been studying and writing about various ways to bridge divides, putting together tools to help people connect. But there may be one key character trait that's necessary for applying those tools in a constructive way: humility. "Humility is a kind of a master virtue that can pull along other virtues if people develop it," says humility researcher Everett Worthington.

Humility, as Worthington defines it, is multifaceted, involving an awareness of our personal strengths and weaknesses, as well as a willingness to acknowledge those weaknesses while working to improve upon them. It requires presenting ourselves in modest ways, while caring about the well-being of those around us.

A growing body of research shows that being humble may be useful in bridging political differences. That's because humility helps people let go of defensiveness, take in information that challenges their political views, and see the humanity in people on the other side of the political spectrum. Though it's not always easy to embrace—especially for those who wrongfully equate it with weakness or a lack of conviction—humility may be what we desperately need right now in the United States.

Why We Should All Be More Humble

Considering the research on perception, it's pretty clear that, when it comes to understanding others, we all have weaknesses that could use improving.

Research suggests we are not always very good at understanding what another person is thinking or feeling, even when trying to "put ourselves in their shoes." Often, we are better off simply asking people about their experience and being open to listening than trying to second-guess anyone.

Cognitive biases may be partly to blame. For example, the fundamental attribution error—attributing others' actions to their fixed character traits rather than considering what outside forces contributed to their behavior—can make us misjudge others or believe they "get what they deserve." This can explain why we label a colleague who falls behind at work "lazy" or "incompetent," instead of realizing they may be managing difficult issues at home or have too many assignments—or why, when we see people fail to evacuate during a disaster, we call them "stubborn," even though they didn't have the means to escape to safer ground.

Our brains often trick us into seeing only what we already believe, too. For example, one study showed that people assigned to watch a demonstration reported different levels of protester violence depending on whether they agreed with the cause being protested. They literally could not see the same events in the same way.

Research has found that people often mistake how large differences are between people without noticing their commonalities. For example, people in different political parties tend to misjudge how far apart they are in terms of their beliefs and hopes for the country. This can create a lot of antipathy, which makes it hard to come together.

As a new book, "Perception," explains, many unconscious factors affect how we feel, think, and make decisions, including our personal energy levels, physical abilities, moods, the company we keep, and more. That means we can't always trust ourselves to see others (or even the world around us) clearly. Seeing our limitations is a good first step in recognizing the need for humility.

How Humility Helps Bridge Differences

It makes sense that knowing we don't own the corner on truth could help us bridge our differences, lessening our intolerance for diverse opinions and antipathy toward people on the "other side." And scientific evidence bears this out.

In a study conducted by Elizabeth Krumeri-Mancuso and Brian Newman, participants

Some people have a greater ability to imagine their own ignorance. And this awareness of their shortcomings helps them get along better with others.

Seeing our limitations is a good first step in recognizing the need for humility.

Humility requires presenting ourselves in modest ways, while caring about the well-being of those around us.



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noted their political affiliation and filled out a questionnaire measuring their intellectual humility around sociopolitical situations (recognizing their limited knowledge around issues such as immigration and gun control). Then, they reported how warmly they felt toward Republicans, Democrats, Christians, and Muslims. Those who had higher levels of humility reported feeling warmer toward those who were politically or religiously different from themselves, regardless of political affiliation or religion.

"People that have more humility treat people that disagree with them in better ways and have less animosity toward them," says Newman.

Why would that be? Newman believes humble people are more likely to think an opponent could know something they don't know or have experienced something they haven't experienced. People with less humility, he adds, would consider people who disagree with them to be suspect, unintelligent, or morally deficient—not endearing qualities.

"How I see the infallibility of my own position (and, by implication, an opposing position) determines how willing I am to demonize people that are on the other side," says Newman.

In a second part of their

study, Newman and Krumeri-Mancuso had half of the participants fill out a questionnaire that measured their intellectual humility around the topic of immigration and crime (priming them to consider the limits of their knowledge). Participants were instructed that they would be asked about people who had legally immigrated to the United States. Then, all participants were asked how much they agreed with the statement, "In general, immigrants are more likely to commit crimes than those born in the U.S."

Then, after getting factual information about the topic, half of the people in both the primed and unprimed groups were told they'd be writing an argument for or against the statement about immigrants and crime. The researchers told the other halves of both groups to defend their current position, so they could focus more on evidence that supported it.

Once participants read the information (which explained that, while there is some disagreement among experts, most evidence shows immigrants do not commit more crimes), participants again reported on how much they agreed with the statement. Those who were high in humility and primed to think about it were willing to reconsider the strength of their position when presented with the facts.

"People high in intellectual humility are going to pay more attention to the reasons for their views," says Newman. "That means they are going to notice the limits

of their knowledge and the limits of the evidence in favor of their position, and be more receptive to new information."

These findings mirror those of Tenelle Porter and her colleagues, who also found a connection between having more intellectual humility and being open to opposing views. In that study, believing in a "growth mindset" around intelligence—that people aren't naturally intelligent, but can grow in learning through trial and error—was what led to increased intellectual humility, suggesting that adapting a growth mindset could indirectly affect how accepting we are of other views.

According to psychologist Joshua Hook, humility can help bridge differences even when people have strong convictions around their beliefs. In one study, he and his colleagues measured intellectual humility in religious leaders and found that those with higher levels of humility had much more tolerance for religious differences in others than those without humility—regardless of how religious they were or whether they reported being politically conservative or liberal.

"If you have an awareness of the limitations of your own beliefs and how they came to you, maybe you are more in tune with the idea that you don't have the corner on the truth," says Hook.

Even though you might expect that religious leaders surrounded by family and friends of varying faiths would be more tolerant of diverse religions, Hook's findings

Humility helps people let go of defensiveness, take in information that challenges their political views, and see the humanity in people on the other side of the political spectrum.

“ If you have an awareness of the limitations of your own beliefs and how they came to you, maybe you are more in tune with the idea that you don't have the corner on the truth.

Joshua Hook, psychologist

didn't support that. Instead, having more religious diversity in one's social group only led to more tolerance if someone was also high in intellectual humility.

"It depends on whether or not someone is open for their interactions with people who are different from them that leads to religious tolerance or not," he says.

How to Cultivate Humility in Ourselves

If that's true, maybe we need to find ways to increase humility in ourselves and in others. Though the research on how to induce humble states in ourselves is young, there is some evidence that it can be done.

Worthington and his team have developed a do-it-yourself workbook to teach humility that has shown promise. Through various exercises offered in the workbook, people can learn more about what humility is and isn't, use self-reflections and inspirational stories to examine humility in themselves, and engage in practicing humility in their own lives, among other lessons.

The workbook has been tested in randomized controlled trials, along with other workbooks designed to teach forgiveness, patience, or self-control, or to improve mood. In one study, people who completed the humility workbook were found not only to be humbler according to their own report but also scored higher in forgiveness and patience—and they had fewer negative moods.

Unfortunately, Worthington had to suspend a large-scale study of humility and civility when COVID-19 hit. However, he's hopeful that teaching humility could improve political dialogue, as other research has shown that it improves interpersonal interactions in other situations.

Of course, political conversations may be harder to keep civil than other conversations, where there may be more goodwill present. Still, at least one recent study showed that when people are seen as having more intellectual humility, they may help foster better conversations with people who disagree with them on politically charged subjects such as the death penalty, affirmative action, physician-assisted suicide, and genetically modified food.

Worthington says there are good reasons to expect more politically humble people to have civil conversations and so bridge divides—even if they are the only ones being humble in a conversation or even if they have very firm convictions. That's because people who are more humble don't need to denigrate others' arguments or denigrate them as people, which helps reduce defensiveness and opens up the possibility of better engagement with one another.

"Anybody who's doing their best to be respectful is going to end up having a more positive interaction than someone calling each other names or being verbally aggressive," he says. "The more politically humble people are able, the more able they are to have civil conversations about political differences, even if they disagree."

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.

WISE HABITS

When Your Task List Is Overwhelmingly Long

Taking the time to review priorities—and why they are priorities—can help you make the 'short list'

LEO BABAUTA

I've talked with several people lately who have task lists from the floor to the ceiling, and it just overwhelms them. They're not alone—I can relate, and lots of people have this problem.

If we're fairly organized, our task list has everything we could possibly want to do on it, and it'll get longer and longer.

That's the good scenario—most people don't have everything on the list, and the tasks are scattered across different systems and lists, in email inboxes and messaging apps, in browser tabs and pieces of paper, and in their heads.

Either way, it eventually gets so overwhelming that many people will give up whatever system they're doing and start afresh because the old system wasn't working. In truth, they just didn't have a way to deal with the overwhelm.

So what can we do? It turns out, several key things.

Get Clear on Priorities

Let's call this Step Zero—if you're already clear on what matters to you, you're ahead of the game.

But think about this: If you don't know what matters, how can you focus on anything? Everything will seem urgent and important, and you'll be scattered in lots of directions.

If you know what is most important, you can focus on that. The rest can wait. It's like if you're a doctor in a hospital, and one person needs a life-saving heart operation, and a hundred people have ankle sprains. You'll focus on the heart operation, and let the ankle sprains wait.

Get clear on what matters to you. Make a list. Write out why. It's worth spending 30 minutes on this.

Get clear on what's important this week. And what you need to focus on today.

If you can get clarity on what matters and what to focus on, it will make you so much more effective than jumping around from task to task as if you were putting out a thousand small fires.

Sometimes there are just too many things to do, and sometimes there just isn't enough clarity about why they are worth doing.

Change How You Relate to Your Tasks

Think about your list of tasks right now—does it feel stressful? This is a sign that you think of them as burdens, as something stressful, or as a potential way that you're going to let people down or fail or look stupid. Or maybe all of the above.

How I've often related to my tasks is something like, "If I don't do this task, I will be deficient and let people down." If I have a list of tasks that's full of these kinds of potential failures—of course it will be stressful.

How do you relate to your tasks? Is there a more empowered relationship you can create? Some examples:

- I'm fully committed to this task because it's incredibly important to me, so I'm going to create a sacred space of 30 minutes today to be fully present with it.
- This task is an opportunity for me to serve someone I care deeply about, with love.
- These tasks are training ground for

me to practice presence, devotion, getting comfortable with uncertainty.

- These tasks are an adventure. An exploration of new ground, a learning space, a way to grow and discover and create and be curious.
- This task list is a huge playground, full of ways for me to play today.

These are some examples from my life, but they don't have to be your relationship—what empowered way would you like to relate to your tasks? Find that, and practice it daily.

A Short List

I find it helpful to have a long list of tasks, separated by area (work, personal, finances, etc.) and project, if applicable. But this long list can't be done today.

So I create a short list, of just stuff I'm going to do today. I call it "Today's Joy List." I try to keep it to five or six things, though often I give in to the temptation to add more joy opportunities than I actually have time for.

If I have meetings, those are on the list, and the more meetings I have, the fewer tasks I allow myself to put on the list. What things have to be done today? What things would be a really powerful use of your day?

Just focus on those. The rest can come later.

Full Focus

With a short list of high-priority tasks, and an empowered relationship to those tasks, the world is yours!

The final thing I would say is to focus on one thing at a time. If you can practice this regularly, the overwhelm starts to lessen.

The opposite of this is constant switching between tasks. Doing quick emails, working on a task, but 30 seconds into that task you go check your favorite website or messages, etc.

Full focus is picking something important to work on, and then clearing everything else away. Make this the only thing in front of you. Notice the urge to go do something else, breathe, then bring focus back to the task.

Let it be your whole world. Be grateful to have this task in front of you, this opportunity to serve people you care about, this opportunity to play and be curious, this opportunity to learn and find joy and delight.

Now that I've shared these ideas of working with an overwhelming task list, how would you like to practice?

Leo Babauta is the author of six books, the writer of "Zen Habits," a blog with over 2 million subscribers, and the creator of several online programs to help you master your habits. Visit ZenHabits.net



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MINDSET MATTERS

The Practice of Surrender

Sometimes the best solution to difficult feelings is to get out of our own way

NANCY COLIER

When I am confronted with difficult feelings, or any feelings really, my tendency is to try to figure out how they can serve as lessons, make me more aware, and help me grow as a human being. I guess you could say this is my way of keeping feelings at a safe distance and under the control of my mind.

Some people create distance from their feelings by strategizing—focusing on how to change and improve them, or how to hold onto good feelings and stop them from disappearing. Others manage feelings by turning them into a story and continually narrating or describing them to themselves and everyone else.

There are also those who avoid their feelings altogether by projecting them onto others through grand schemes of blame and the like. The point is, whether we're understanding, learning from, examining, manipulating, managing, fixing, projecting, interpreting, or narrating, we are quite clever at finding ways to not feel our feelings directly.

We are taught that we shouldn't get too close to our feelings and certainly shouldn't feel them in the flesh or inhabit them. We don't want to experience suffering, so we keep our feelings a safe distance through countless self-protective strategies. We believe that if we were to feel them directly, we might never come out on the other side.

But herein lies one of the greatest mysteries of life: Somehow, when we stop trying to change or manipulate our feelings and just experience the raw emotions directly (without any story to go with them), they tend to transform on their own. There is a natural pro-

cess, a flow of grace that kicks in when we give ourselves permission to actually feel what we feel, without a narrative about what it all means or what to do with it.

I was not confident when I first started practicing this simple (but not easy) teaching. I did not believe any good could come from not analyzing or managing my feelings in some way. It seemed like a waste of time and that feeling what I felt directly would extend the bad feelings. Why would I need to feel it anymore or any more directly than I already did? How would that help?

When I began the practice of embracing my feelings directly, without an accompanying story or strategy, my mind kept telling me that without its help, nothing good would come of it. But in reality, what I experienced when I set the mind's narrative aside was far better than anything I could have thought up.

Getting Out of the Way

Astoundingly, when my feelings were given permission to be experienced, from the inside out, they did change—on their own. As it turned out, the feelings themselves had a wisdom and an energy of sorts. I didn't have to be in charge of changing them or of doing anything with or to them. All I had to do was get out of the way and give them an invitation to be felt. With that, my feelings relaxed and transformed on their own.

Once experienced directly, felt in the body and heart, with no "middle mind," my suffering loosened. Ironically, the feelings could then actually become my teachers (as I had previously hypothesized). This was a revelation—that the feelings could transform on their own, without my pursuit.

Through this practice, I discovered

that I can surrender to life and don't need to vigilantly manage my experience to fit a desired outcome. When I took the risk to let my heart simply feel what it feels, I was able to experience a larger, more magical, and mysterious process at work. I got to experience grace, which moves things forward on its own, me included.

Had I not taken the leap, I would never have trusted the river of life that is pushing us onward, no matter how much our mind tries to convince us that we are in charge. What I learned through this practice is that it is safe to sync up with my experience, to get inside it. Then, there remains only one entity, one experience, and one self, rather than a separate experience that I am having and must control.

So, too, I discovered that my feelings

know how and what they need to feel better. They know this better than I ever could. I can then relax and trust life, trust grace, trust the process of change itself—all of which is happening on its own.

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



Sometimes the best way to resolve our difficult thoughts and feelings is to end the pursuit.

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