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Information for the Oklahoma Nursing & Health Care Professional

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## Compassion as the breath of life

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Being a hospice nurse is not easy, says Regina Burkhead, RN, Good Shepherd Hospice. But love abounds to make life better.

by James Coburn, Staff Writer

Regina Burkhead's calm and collected manner, blended with gentility and Grace serves her well as a registered nurse working in admissions for Good Shepherd Hospice, located in Oklahoma City.

Burkhead has been a nurse for 10 years but did not always work with hospice care. A graduate of Redlands Community College in El Reno, Burkhead has worked in hospital med/surg as well as home health. Now she has been with hospice for one year.

"The one-on-one patient care is one of the main things," she said of what keeps her motivated with hospice care. "I've

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## People pleaser LPN is living her dream

by James Coburn, Staff Writer

A desire to help people is what led LPN Denika Jackson's career to Sienna Extended Care & Rehab, located in Midwest City, she said.

"I was always doing stuff for others, and I just want to make people's situations better," Jackson said. "If I can do anything for anybody, I'm definitely willing to do that."

Jackson has been an LPN for four years since graduating from Metro Technology Center. She said she embraced the intense program for LPNs there. She had been a certified home health aide for 5-6 years before that and is now enrolled at Rose State to earn her degree as a registered nurse. She has already completed all of her prerequisites there.

"It is very exciting," she said.

She has worked in long-term care ever since she became an LPN. She mainly focuses on rehab today. Sienna Extended Care & Rehab is a skilled nursing facility with long-term care, said Adam Stephens, administrator. Sienna primarily offers skilled nursing with a 60/40 split at the 100-bed facility.

"The rehab is a little bit different because the patients are skilled," she said. "So they have a few more needs that the long term care, but it's still really rewarding, especially

See JACKSON Page 2





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See BURKHEAD Page 3

## JACKSON

Continued from Page 1

when you have a patient that come in and can't walk or something. They go to rehab and they're able to walk out of here."

Once and a while she will fill in on the long-term care section of Sienna Extended Care & Rehab.

She enjoys the successful outcomes of patients being met there. Some people cannot speak or get their thoughts straight when entering the spacious building.

"When they leave here they are normal and ready to go back home," Jackson said. "They start their lives again, and that's what's really exciting to me. They come in sick and can't do stuff and then we rehab them so they can go out and continue their lives as they did before."

Jackson's love for people is often returned as the patients and nursing staff love her as well.

"I'm just willing to do anything for them," she said. "I'm a people pleaser. So when I see them and they see me they know I'll get the job done."

If they have problems they will often go to Jackson, knowing she

will see that it is taken care of with high standards.

"Oh boy she really did what she said she was going to do," Jackson said she often hears.

All of the nursing staff is approachable. They are easy going and will help when needed, she said. Jackson commended her director of nursing for being understanding to help the staff when needed.

"I've got my wound nurse right here so if I need anything, she is like the manager on the hall," Jackson continued. "So she's great. If I have a new patient that has new wounds, then me and her go in there and do stuff together. She teaches me a lot. I've learned so much here and have got so many certifications here."

She said she has learned a lot about hypodermic injections that she did not know about when working exclusively in long-term care.

As an LPN she also works closely with physical therapists. The therapists' goals are to get the patient to reach their maximum level of potential, Jackson said.

"They do not know a lot about nursing. So if a patient's blood pressure is too low or too high, 'they're like, 'Do I need to work with this patient? Do I need to lie them back down?' And we'll work together to get their blood pressure up. They may need to lie down and get their feet elevated."

When their blood pressure is back under control, the patients can resume therapy. Jackson might increase their oxygen levels when a decrease of oxygen saturation is noted.

Patients give her all sorts of compliments as they leave the facility. "Oh, you're the best nurse I've ever had," they will say.

Jackson gets to know their families well, answering any questions or concerns about their loved one's health. She explains the goals for each patient.

Usually when a patient is leaving they will hug Jackson and say they will return and visit her.

"I have people come back and visit all the time," Jackson said. "It brings tears to my eyes to see them



photo by James Coburn

Denika Jackson, LPN, arrives at work full of energy to assist the needs of her patients at Sienna Extended Care & Rehab.

coming back walking and doing football at Midwest City High School.

She loves to go shopping during her leisure time. Her son plays football mom," she said.

## Special Event: August 19, 2017

# Pharmacology For Advanced Practice Nurses

The event will be held at the OU Fran and Earl Ziegler College of Nursing, 1100 N. Stonewall Ave, Room 130, Oklahoma City, OK 73117 August 19, 2017 from 8:30 am to 4:15 pm.

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## BURKHEAD

Continued from Page 1

always liked the home health type jobs. I became interested in hospice after my mother was on hospice and passed away."

She came to Good Shepherd a year ago where she has enjoyed comforting people with endless compassion as they make their final transition in life.

Hospice, she said, is an individualized care plan at the end of life to ensure the patient has their needs met with comfort through palliative care, she said. Their families are a part of the compassionate care as well.

"Even in facilities we provide a lot of support for the caregivers," Burkhead said.

The hospice patients and family members that she has known have different backgrounds, but each one faces difficult decisions. So Good Shepherd Hospice provides hope and guidance to help them make choices.

Not every nurse is a hospice nurse or would be. Hospice nursing is a specialty field. And all nursing fields are special.

"I think the level of compassion and caring is a lot more intense and higher with hospice than it is with the other fields," Burkhead explained. "And I guess there's a lot of things the nurse faces, too, in those situations. We lose the patients, too."

Hospice nurses become attached to their patients. They learn about their patients' life histories and where they are at in life.

When a hospice patient dies, nurses also console one another at times. The chaplains and the social workers with the company provide support for the nurses as well.

Families, she said, are dedicated to follow the course of their loved one's wishes after a death, and Burkhead admires them for it, she said.

"To be a part of that end of life care is tough for them but at the same time they usually step up," she said.

For many families, placing a loved one under hospice care is a sudden experience. They may have not anticipated their loved one was so sick, or a terminal disease progressed quickly.

The range of hospice care is

holistic involving a chaplain, and social workers who offer support. They will help facilitate resources in the community that the family might need at home.

Sometimes clothing and food is arranged for family member who are without sustenance. Home health aides assist with bathing needs and personal care. Case manager will manage care after the admission's nurse assigns a new patient.

"Then we have a medical director. We have several who can sign for medical needs," she said. "We have a bereavement coordinator and what she does is provide counseling support groups and literature for the families. When there are small children in the home we have books and things provided for them to kind of help."

Volunteers are available to sit with patients and read to them upon request.

"We have some good volunteers that have been here for years," she said. "But I think there's usually a good need for more volunteers, too."

Good Shepherd often strives to see that the patients' last wishes are met even if it is as simple as

wanting a donut. Burkhead recalls a patient who was passing quickly. She once had a particular person care for her. And her wish was to have that caregiver care for her again.

"And we knew they probably weren't going to make it more than 24 hours. So we worked hard and notified the correct people, and that person actually got to care for the patient," Burkhead said. "And the patient acknowledged that she knew that person was there."

There have been patients who just wanted a coke. A Diet Coke made one of Burkhead's patients happy.

"She said I've been without it for so long for medical reasons and I just want a Diet Coke," Burkhead said.

Another woman wanted a candy bar. Burkhead fed her small bites.

"She said, 'That's so good.' No wonder little kids want so much of it," Burkhead said.



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# CAREERS IN NURSING

## ADVANCED NURSE PRACTITIONER JOINS CTCA TULSA TEAM

by Mary Waller, Tulsa

Nurse practitioner, veteran, business owner and teacher. These are a few titles that describe Gus D. Canaday, Jr., APRN-CNP who recently joined Cancer Treatment Centers of America (CTCA) in Tulsa in the hospital's Quality of Life department. In his new role as an advanced nurse practitioner, he will provide primary and palliative care, from diagnosis to treatment, to patients with all types of cancers.

Canaday brings more than 17 years of direct patient care as a nurse practitioner to his role at CTCA and another seven years of registered nurse experience in several hospital ICU and ER departments. In addition, he is a former clinic business owner and veteran medic for the Army National Guard.

Many clinical settings shaped Canaday's career. He served in a Veteran's Affairs Hospital in both Denver and Dallas as an ICU cardiac/thoracic nurse and later in

rural Oklahoma as an ICU and emergency nurse for the Indian Health Service. A desire to expand his opportunities led Canaday to establish and operate an allergy clinic for four years. Following that success, he founded and served as CEO of Green Country Family Clinic (2001-2016) in an underserved Tulsa community. In these roles, he continued to serve patient needs, while also sharpening his acumen in leadership and management.

Throughout his diverse nursing background, Canaday has grown in his commitment to practicing evidence-based medicine that encompasses a holistic approach and has always remained an ardent patient advocate. He strives to ensure quality of care as well as open lines of communication between all members of each medical setting he is a member of.

Teaching is another skill Canaday possesses. He served as an adjunct

faculty member and preceptor at Ball State University from 2015-2016 for family nurse practitioner students and continues to lecture at the University of Oklahoma-Tulsa. In addition, Canaday is fluent in medical Spanish and currently serves as the Tulsa Metro Region Representative for the Association of Oklahoma Nurse Practitioners. His breadth of experience enables him to pay-it-forward as a mentor, resource and motivator to others.

Canaday graduated in 1993 with a Bachelor of Science in Nursing from the University of Colorado (CU), where he received the Veteran Academic Scholarship Award. CU is where the Nurse Practitioner Program began in 1965, championed by Loretta Ford and physician Henry Silver, and spurred new programs in the Social Security Administration to expand service to low-income children, women, the elderly and people with disabilities. Many

of Canaday's professors were the original nurse practitioners who pioneered the profession and their mentorship instilled in him an exceptional foundation.

He continued this advancement of the profession and was one of the beginning nurse practitioner pioneers in Oklahoma by owning and operating an independent, stand-alone medical practice for the underserved in Tulsa.

In 2000, he graduated from the University of Oklahoma Health Sciences Center with a Master's of Science degree in the nurse practitioner program and became board certified as a specialty Family Nurse Practitioner.

"We are thrilled to have Gus Canaday Jr. join our team of talented and compassionate oncology nurses," said Jay Foley, CTCA interim president and CEO. "During

Continued on next page


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## CANADAY

Continued from Page 4

his time in private practice, Gus's reputation as a caring nurse practitioner spread throughout the community. His experience and passion to be a servant leader is an

incredible benefit to our patients and their caregivers."

Canaday shared that he is excited for his new role at CTCA. "I sincerely enjoy working with a group of professional and kind cancer experts dedicated to providing compassionate care to their patients," he said. "CTCA creates a wonderful team-spirited environment which overflows into top-notch quality care to their patients."

"I am thrilled to be focusing my energy on patient care," added Canaday. "My goal is to treat my patients, and speak to their family members, with dignity no matter what they're going through. I enjoy caring for their whole being honoring the physical, mental, psychological, intellectual and spiritual selves."

A proud dad to nine-year-old twins (a boy and a girl), he enjoys time away from the hospital with his family. Canaday loves being an active father, being involved in his church and traveling to explore new places. An avid outdoorsman, he also believes living a healthy lifestyle through good nutrition, daily activity and meditation, and most importantly keeping a positive mindset.

Gus D. Canaday, Jr., APRN-CNP is a Nurse practitioner, veteran, business owner and teacher who recently joined CTCA in Tulsa. Shown here with his nine-year-old twins.



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## Foundation awards more than \$3.7 million in grants to OUHSC, OMRF

The Presbyterian Health Foundation has awarded \$3.73 million in new grants to the University of Oklahoma Health Sciences Center and the Oklahoma Medical Research Foundation. The grants will support more than 30 research and clinical projects, purchase scientific equipment and provide a recruitment package for a new senior-level researcher.

"As biomedical research grants become exceedingly difficult to receive from the National Institutes of Health and other organizations, it is exciting for Presbyterian Health Foundation to be at the forefront and begin filling that gap," said PHF President Tom R. Gray, III. "These grants will increase the research dollars going to experienced and emerging scientists at OUHSC and OMRF and will allow Oklahoma researchers to continue their important work. It will also support them as they pursue medical discoveries and future funding opportunities."

Grants were awarded in categories that included seed projects, bridge funding, scientific equipment and recruiting assistance.

Researchers at OUHSC received \$2.65 million in PHF funds to advance discoveries in a variety of initiatives in cancer, stroke, obesity, aging and heart disease,

including purchases of specialized laboratory equipment. Grants were awarded to senior-level scientists and clinicians, often collaborating in teams, including a focus on early career faculty.

One project focuses on communication among nerve cells in the aging brain, as well as information processing and memory function in the nervous system. Researchers hope to develop new ways to achieve progress in early diagnosis and effective treatment of neurodegenerative diseases like dementia and Alzheimer's.

In another, scientists will seek to understand why a patient's immune system appears to fail when it encounters the strain of *Clostridium difficile* that produces the most virulent toxins. The *Clostridium difficile* bacterium is the leading cause of hospital-acquired infections and the 16th highest cause of death in people over 65.

"Investments from PHF tremendously accelerate and enhance our OUHSC research programs," said Jason Sanders, M.D., M.B.A., senior vice president and provost at OUHSC. "The funding is vital in helping our researchers take their investigations to the next stage of discovery."

OMRF researchers will benefit from \$1,086,267 in grant awards to



University of Oklahoma Health Sciences Center Senior Vice President and Provost Jason Sanders, M.D., M.B.A., Presbyterian Health Foundation President Tom Gray, III, and Oklahoma Medical Research Foundation President Stephen Prescott, M.D.

support research projects in areas that include autoimmune illness, retinal disease, cancer and age-related muscle loss. A PHF grant will also help provide funds for a new scientist whose work focuses on neurodegenerative diseases.

Michael Beckstead, Ph.D., will join OMRF in September from the University of Texas Health Science Center at San Antonio. He studies the role that dopamine neurons play in Parkinson's disease and drug addiction, with a goal of finding new ways to treat both conditions.

With new grants from PHF, three other OMRF scientists will use the funding for a groundbreaking gene-editing technique known as CRISPR. This will enable the OMRF researchers to do further studies related to blood vessel formation, lymphedema and heart disease.

"Funding of this type provides a huge boost to OMRF's research efforts," said OMRF President Stephen Prescott, M.D. "Many research projects hold great promise

but lack the resources needed to succeed. When local champions like Presbyterian Health Foundation step in to support that work, it opens many exciting new doors."

Since 1985, PHF has awarded grants totaling more than \$160 million. This latest round of grants continues PHF's commitment to investing in local biomedical research, said Gray. "The funding will help continue to foster an environment in our state where scientists can pursue innovative research—work that, we hope, will ultimately lead to new therapies for debilitating diseases."

Presbyterian Health Foundation (PHF) is an Oklahoma City based private foundation that provides grants to accelerate the journey of scientific discovery from ideas to innovations that save and enhance life. Since 1985, PHF has awarded over \$160 million to biotechnology and medical research organizations in Oklahoma with an emphasis on the Oklahoma Health Center. For more information, please visit [www.phfokc.com](http://www.phfokc.com).



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## Oklahoma's Nursing Times Hospice Directory

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coordinator/chaplain

**Autumn Bridge Hospice:** 405-440-2440

**Autumn Light Hospice:** 580-252-1266

**Carter Healthcare & Hospice:** OKC - OKC  
Pat McGowen, Vol. Coordinator, 405-947-7705, ext.  
134; Tulsa - Samantha Estes, Vol. Coordinator,  
918-425-4000

**Centennial Hospice:** Becky Johnson,  
Bereavement Coordinator 405-562-1211

**Choice Home Health & Hospice:**  
405-879-3470

**Comforting Hands Hospice:** Bartlesville:  
918-331-0003

**Companion Hospice:**  
Steve Hickey, Vol. Coordinator, Guthrie:  
405-282-3980; Edmond: 405-341-9751

**Compassionate Care Hospice:** Amy Legare,  
Bereavement/Vol. Coordinator, 405-948-4357

**Cornerstone Hospice:** Vicky Herrington, Vol.  
Coordinator, 918-641-5192

**Crossroads Hospice:** Elizabeth Horn, Vol.  
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**Cross Timbers Hospice:** Ardmore-  
800-498-0655 Davis-580-369-5335 Volunteer  
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Coordinator, 405-840-8915

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Coordinator, 405-789-2913

**Golden Age Hospice:** 405-735-5121

**Good Shepherd Hospice:** 4350 Will Rogers  
Parkway Suite 400 OKC OK 73108 405-943-0903

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of Spec. Projects - Tulsa 918-744-7223

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Vol. Coordinator, 405-872-1515

**Hospice of Green Country:** Tulsa:  
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918-224-7403

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Coordinator, 405-848-8884

**Hospice of Owasso, Inc.:** Todd A. Robertson,  
Dir. of Marketing, 877-274-0333

**Humanity Hospice:** Sala Caldwell, Vol.  
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**InFinity Care of Tulsa:** Spencer Brazeal, Vol.  
Director, 918-392-0800

**Indian Territory Home Health & Hospice:**  
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**Interim Healthcare Hospice:** 405-848-3555

**Image HealthCare :** 6116 S. Memorial Tulsa,  
Ok. 74133 (918) 622-4799

**LifeChoice Hospice:** Christy Coppenbarger,  
RN, Executive Director. 405-842-0171

**LifeSpring In-Home Care Network:** Terry  
Boston, Volunteer and Bereavement Coordinator  
405-801-3768

**LifeLine Hospice:** April Moon, RN Clinical  
Coordinator 405-222-2051

**Mercy Hospice:** Sandy Schuler, Vol.  
Coordinator, 405-486-8600

**Mission Hospice L.L.C.:** 2525 NW Expressway,  
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**Oklahoma Hospice Care:** 405-418-2659  
Jennifer Forrester, Community Relations Director

**One Health Home Health in Tulsa:**  
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**Sooner Hospice, LLC:**  
Matt Ottis, Vol. Coordinator, 405-608-0555

## TIPS FOR OVERCOMING PERSONAL BIASES — DOING SO ALLOWS FOR BETTER PATIENT CARE

*By Beth Smith, Hondros College of Nursing*

If asked, most people would likely say that in general they treat all people the same, but do they really? Sometimes it's very hard not to pass judgement on others, and sometimes we aren't even aware that we're doing it.

Bias (i.e., stereotyping, prejudice, or discrimination) whether intentional or not, can create barriers between patients and the nurses caring for them. It involves "the negative evaluation of one group and its members relative to another" (Blair, Steiner, & Havranek, 2011, p. 71). Most of us aren't purposefully biased and don't see ourselves as being partial to some patients over others, but it's a common and persistent problem in healthcare. We need to ask ourselves whether a patient's race, ethnicity, sexual preference, socioeconomic status, or other characteristics that make them different from us change how we look at them and treat them.

According to Bucknor-Ferron and Zagaja (2016), "Unrecognized and unmanaged, unconscious bias can lead to health disparities which negatively affect patients" (p. 61). These disparities can include "lack of preventive care, mismanagement of symptoms, being underserved, experiencing extended waiting times for appointments and diagnostic tests, and dealing with professional caregivers who don't take the time to understand language and cultural differences" (Bucknor-Ferron & Zagaja, 2016, p. 61).

Being sensitive to and eliminating cultural bias is important for all of us, but it is especially so for nurses who are caring for patients who are at their worst. The suggested strategies of Bucknor-Ferron & Zagaja (2016) presented below can be used to overcome unconscious bias and provide optimal patient care.

**Personal awareness.** Consider how and why you respond to people in a given way throughout the day. Were your actions, perceptions, and impressions of them fair and accurate or not? Constant self-reflection such as this along with a conscious change in attitudes and behavior will lead to better patient interactions and less bias.

**Acknowledgement.** Knowing that

bias exists and can negatively affect patient care is a step in the right direction. We need to admit that bias can be a part of our interactions with others; without this acknowledgement, we can't eliminate it.

**Empathy.** Try to see things from the patient's perspective by considering the personal and social issues that are affecting him. Making an effort to hear and understand where he's been and why will help you provide better care for him.

**Advocacy.** When you understand your patient and his situation, you are in a better position to advocate for him. Avoid using what you think you know when communicating needs and identifying best treatment options for him. You really need to know where he's coming from, so you can help him get where he needs to be.

**Education.** Learning about unconscious bias, whether formally or informally, and working to eliminate it helps create an environment that allows equal treatment for all. Talk about it with co-workers and attend workshops and webinars to be more aware of bias and how to address it.

Nurses need to recognize and be aware of their personal feelings about cultural, socioeconomic, and personal choice differences and work to remove them from their patient interactions and care; doing so will allow them to truly treat the patient in front of them.

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## Call for Nominations of Oklahoma Caring Awards

*Hospitality House honors Oklahoma's most caring individuals and companies*

To honor Oklahoma's spirit of caring for others, Hospitality House, a nonprofit organization providing a home away from home for families caring for loved ones in medical crisis, is inviting Oklahomans to nominate a family member, friend or community member for The Oklahoma Caring Awards. Nominations are open June 12 through July 26.

"In times of crisis, Oklahomans have always been known for their spirit of caring for their communities, neighbors, and strangers," says Toni Moore, President & CEO of Hospitality House. "Hospitality House is excited to recognize those in our state who exemplify this genuine standard of caring. We look forward honoring individuals, organizations, churches, and companies who care for their loved ones, employees, clients, and communities through the Oklahoma Caring Award."

Individuals, churches, and companies

from any county in Oklahoma can be nominated in any of the following categories:

1. The Caring Award - Individual Caregiver (any age and any diagnosis) 2. The Caring Award - Small Business (<100 employees) 3. The Caring Award - Large Business (100+ employees) 4. The Caring Award - Church 5. The Caring Award - Healthcare (<100 employees) 6. The Caring Award - Healthcare (100+ employees)

Winners from each category will be honored at the Oklahoma Caring Awards Gala on Sept. 14, and each will receive a \$1,000 award; for the business and healthcare categories this cash prize goes to the non-profit of their choice. To nominate a caregiver go to: <https://form.jotform.us/71294414235150>

For more information on how to help families at Hospitality House, a mission of Philos Hospitality, visit their website at [www.HHTulsa.org](http://www.HHTulsa.org) or call 918-794-0088.



**Vicki L Mayfield, M.Ed., R.N., LMFT** Marriage and Family Therapy Oklahoma City

*If you would like to send a question to Vicki, email us at [news@okcnursingtimes.com](mailto:news@okcnursingtimes.com)*

**Q. Have you ever wondered how adult beliefs are formed and why if they don't work you don't change them? If something is not working and we have struggled with it a long time but continue to do it day after day, then lets explore why.**

**A.** I can pretty much guarantee that every time you tearfully ask yourself the question, "What is my problem?" the answer lies in some lame, limiting, and false subconscious belief that you've been dragging around without even realizing it Which means that understanding this is majorly important. So this may help.

1) Our subconscious mind contains the blueprint for our lives. It's running the show based on the unfiltered information it gathered when we were kids, otherwise known as our "beliefs."

2) We are, for the most part, completely oblivious to these subconscious beliefs that run our lives.

3) When our conscious minds finally develop and show up for work, no matter how big and smart and highfalutin they grow to be, they're still being controlled by the beliefs we're carrying around in our subconscious minds.

**OUR CONSCIOUS MIND THINKS IT'S IN CONTROL, BUT IT ISN'T.**

**OUR SUBCONSCIOUS MIND DOESN'T THINK ABOUT ANYTHING, BUT IS IN CONTROL.**

I was giving a lecture in an outpatient day treatment program and met a professional adult woman named Cynthia, who had recently been fired from her job. She admitted herself to the inpatient unit because she was suicidal, then transitioned to the less intensive program.

She became suicidal when she started thinking about her father and his reaction to her loss of employment. There was no way she could tell him, he was going to be so disappointed. Therefore suicide appeared the better option.

She learned the following while in treatment:

Conscious Mind - "I want a job that I really enjoy."

Subconscious Mind - "My father wants me to have a job that pays a high amount and stay with that job "forever," that is the measure of job success."

Job Status - Fired and suicidal

Cynthia was not able to quit her job when she became dissatisfied because she believed pleasing her father was her priority. He worked the same job for 40 years, made a large salary and made his belief his daughter's.

Read **YOU ARE A BADASS**, How to stop doubting YOUR GREATNESS and start living an AWESOME LIFE by Jen Sincero.

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"Just being someplace I don't typically get to go and relaxing. Something by the water."



Sarah Manning,  
assistant professor

"Either on the beach or in the mountains in Colorado."



Liz Diener, assistant  
dean

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