



## Episode 009- “Working mothers and Covid burnout—how to fill empty cups with self-compassion”

**Guest: Dr. Lindsay Ulrey**

Lindsey Douros:

Welcome to Peak Connection, the podcast for individuals, couples, and professionals about engaging in life with vitality, deeper emotional connections, love, intimacy, and authenticity. We're recording this episode outdoors and socially distanced, so there may be the occasional ambient noise.

L. Douros:

I'm Lindsey Douros, and joining me today is Dr. Lindsay Ulrey. Dr. Ulrey is a clinical psychologist who specializes in maternal mental health, and has two children of her own. Last week, we spoke with Jessica Guerrieri on the challenges of our relationships to substances during quarantine. Today, we're going to follow up with some professional insight into that discussion, as well as some better coping mechanisms. Welcome, Lindsay.

Lindsay Ulrey:

Thank you. It's a pleasure to be here.

L. Douros:

You chose to focus on the area of maternal mental health. I know there's probably a hundred different clinical focuses to choose from. Why this particular topic?

L. Ulrey:

Yeah, so I originally actually started working with children in my clinical training in my predoc and when I was in grad school. I loved working with children, and I still do. But when you work with children, you always have to work with the parents too. It's kind of an essential part of the work. More often than not, I was working with the moms.

L. Ulrey:

This was when I was in my early 20s, so before I was a mom. I noticed that a lot of the moms were doing all the drop-off and pick-ups, and were coming to a majority of the sessions with me. I often noticed that the moms were sometimes reluctant to engage in a conversation with me about their experiences, or they often never had their own treatment. But as I asked more questions, I would learn that they often had, and not always, but there was often an undiagnosed kind of mental health struggle that they were kind of facing, that they had never gotten treatment for. So I found it really interesting that mothers would often be really quick to take their kids to therapy and get support for their child, but they also would often not get help for themselves.

L. Ulrey:

But I also noticed that when I did have moms who would come into sessions and had had their own treatment or had had some sort of therapeutic support, and this isn't always the case, of course, but they were often moms who were able to kind of express themselves emotionally a little bit more and maybe had a little bit more of a psychological mind. That actually would translate to the children quite often as well.

L. Ulrey:

I found this to be very curious, because you would see... And sometimes moms would also then start their own treatment, because I recommended it, and then the kids would also get better too. So what I

was starting to learn was like, "Wow, it's really important that moms are taking care of themselves and getting their own support, but there also seems to be this reluctance to reach out and get help too."

L. Ulrey:

And then during my postdoc, which was the Infant-Parent Program in San Francisco, which works with infants and their moms, I got pregnant during my training. So then becoming a mom who was also doing work with children and their moms opened up my eyes to a whole new world of, "Wow." I also actually had my own undiagnosed postpartum depression. It was really fascinating, because you would think I would know. I would see the signs as someone who's trained professionally in maternal mental health disorders. But I didn't even recognize it until about six months after I had my first child.

L. Ulrey:

Once I got treatment... I went to my PCP and I got a therapist and I actually got some medication, and it really, really helped me. I thought, "As someone who this is their job and know so much about mental illnesses and mental health, if this is happening to me, then I could only imagine for how many moms maybe out there who really don't even know how or when to ask for help."

L. Ulrey:

So it got me really interested in the whole idea of really focusing on how to help moms. Because I think also when you help moms, you're helping an entire family. So there's a ripple effect there. If the mom is being taken care of, then it can really support the entire family.

L. Douros:

It's amazing, talking to you and hearing that story that you yourself, being a therapist, were not able to recognize-

L. Ulrey:

I know.

L. Douros:

... your own signs and your own struggles. Which is concerning, because I mean, then you've got how many moms out there who are not specialists in this field and may have been struggling for awhile with something like this. Can you tell me a little bit about what it was that brought you to that point where you finally felt like, "I need to get some help here."?

L. Ulrey:

For me, it was interesting because my postpartum depression actually kind of manifested more in being very irritated and having a very, very short fuse. I didn't feel like myself. It was really hard to not feel extremely irritated.

L. Ulrey:

I mean, initially I was like, "This is maybe just how it is being a parent." Because I was always thinking like, "Postpartum depression, I'd feel really sad." And I had seen some friends who had gone through it and it was more of the sadness than it was... So I didn't identify with being sad, but I had this agitation and this irritation that did not feel like me. It was really hard, because I initially was like, "Is this just what I'm going to be like? Or is it just because I don't get enough sleep? Or is it just I'm adjusting to all the hormones?"

L. Ulrey:

That's what I think is so challenging with maternal mental health overall is that there's so many changes already and your status quo is already changed forever. Your identity completely changes, your hormones are raging, you're not getting sleep. All these things that can also impact your mental health,

even for the healthiest of people. So I think it's really hard sometimes to determine like, "Is this postpartum depression or is this just the transition?"

L. Ulrey:

I actually, with my second born, I had much more of an awareness of when I started to feel like, "Yeah." Because I didn't actually really even notice it until I got out of it, until I got treatment, until I got on some medication that really helped me. I was like, "I'm back." I'm never going to be who I was before a child, but I felt more like myself. I was way more resilient and I was way less irritated and agitated. And I said, "Oh my gosh, that's what that was for me."

L. Ulrey:

So sometimes it can manifest not just as being sad, but it can be as being extremely agitated or... Yeah, it's just sometimes people's symptoms or the way that it's presenting can look a little bit different. But I think basically it was like I wasn't myself, and that was a big thing for me that I realized.

L. Douros:

Yeah. I think too, I mean, as mothers, right? We do take on so many of the burdens of the family, and just with the care of the children, and the household, and working, and all these things, we just kind of absorb them. So in a lot of ways, I feel like we're not used to reaching out and asking for help, because we just feel like we just have to get through this.

L. Ulrey:

Exactly.

L. Douros:

We just have to double down, and work harder, and suck it up, and somehow be this amazing mom, which is really hard.

L. Ulrey:

Exactly. And it's unrealistic to expect ourselves to be able to do that. I think especially when you become a mom, you kind of do get this message that you're in charge of everybody, and in a way, you are. But at the same time, it is very easy to lose yourself in the shuffle of everything.

L. Ulrey:

I think that there's a lot of messages that we get that are, "You need to be the fixer. You are the one holding us all together." And if you are not doing it well, or you're doing it with some struggles, you're not doing it right. I think that's a dangerous message, and I think that it is part of why maternal mental health in particular is so important to just have more awareness about and to have more support around, because I think we try to be stoic. Moms tend to have a really hard time asking for help, because we are the helpers, we are the caregivers. Giving care to a caregiver is very challenging, because often we don't even know how to ask for it and we don't know how to accept it.

L. Douros:

Exactly. I think right now we're in this time where mothers are really struggling to ask for help. I mean, we're in this bizarre universe where now we're stuck at home with our kids, with our families, and everything is just infinitely harder in quarantine.

L. Douros:

I mean, I know I've really struggled with knowing when to ask for help, how to ask for help. I mean, oh my goodness, I just feel like my kids are going to pop out at any moment and ask me for a snack. I'm working part time while also doing the majority of our cooking and cleaning, and now I'll be overseeing

our first grader's virtual school this year. So to say I'm having a difficult time juggling all of this is probably a gross understatement. And there's a dog. Almost forgot about him, which I usually do.

L. Douros:

So going back to how you were saying you were on a shorter fuse, I feel like a lot of us right now are running on these short fuses and we are having a really hard time regulating ourselves. I'm having a hard time knowing, "Is this just now the new normal, or do I need to ask for help?" Do you have any strategies that you might give someone like me who is just struggling to manage so many things and oftentimes has a hard time finding space to regulate my own reactions to seemingly small things, let alone regulate my children's?

L. Ulrey:

Yes. I mean, when we think about motherhood right now in the current context, it wouldn't be fair to pathologize feeling like you have a short fuse or to feel like you're overworked, because we are doing way more than we ever signed up for, that we were ever designed to as human beings to take on. We were designed to do these things as a community, right? So I think you ask a really important question and it actually parallels really well with the becoming a mom thing too. And then can you imagine becoming a mom during COVID?

L. Douros:

No.

L. Ulrey:

I mean, that's the thing. It's like we are in a really unique circumstance right now. I always try to kind of err on the side of like, "When in doubt, reach out." What I mean by that is if you have any sort of question about, "I really don't feel like I'm as resilient as I once was, or that I'm able to manage my family or myself as well as I've used to," I mean, it wouldn't hurt to maybe reach out and talk to somebody. It doesn't have to necessarily be a therapist. But I think to reach out to a friend or to reach out to someone who you really trust or a spiritual leader or something like that.

L. Ulrey:

I think it's tricky to say like, "Is this depression or is this just the result of this crazy situation we're in right now?" But I'm also here to say I'm not sure if it actually matters. If you are feeling like you're really struggling and you could use help, and you have access to that, and which I think is another discussion, go for it. I think challenge yourself. It's actually really brave to say, "This isn't working." To say, "I need help."

L. Ulrey:

I think moms get a message that they have to... Yeah, like we said earlier, you just have to kind of suck it up and go with it. But I feel like when we show our family that we can say, "What I'm doing right now is not working. I need help," it takes a lot of bravery and a lot of vulnerability to admit that. So I think regardless if it is a clinical diagnosis, which means you meet the criteria for depression, anxiety, eating disorder, whatever it is, it's almost, at this point, I would say I don't know if it actually really matters as much as it matters to feel honest with yourself.

L. Ulrey:

I mean, it does matter in terms of you want to be really clear when you reach out to a therapist or you reach out to your primary care provider what you're experiencing, and to report those symptoms as clearly and concisely as you can. But I also think sometimes... And I did this too. I fell victim to this, where I was like, "Well, I'm feeling weird, not myself, but I don't think it's postpartum depression. So I'm just going to keep going along and see if it works itself out," and it didn't. It really didn't. Once I got help, it was like, "Oh my God, what was I waiting for? What was I doing?"

L. Ulrey:

But then to be kind to yourself. Because there's so much misinformation about what it means to need help or to reach out to a therapist or a support group or whatever it may be. Again, like I said, when in doubt, reach out. You don't have to be severely, severely struggling. I think if you are not feeling like what you're doing is working, reach out for help.

L. Ulrey:

Again, you can reach out to a friend. If it feels like you need a little bit more, get on Psychology Today and look for a therapist. Get on your insurance panel, ask your primary care provider, see if there's any virtual support groups for moms out there or something along those lines. You do not have to do this alone. The more that you can be really honest with yourself, talking about what you're going through, the more you're going to get actual help that's going to make a big difference in your life and your family's life as well.

L. Douros:

What comes to mind to me specifically is that we, as a culture, have been fine for many years normalizing alcohol use as a means to cope with motherhood. Especially motherhood. Parenting in general, but I feel like this is really specific, where it pertains to the mommy wine culture with moms. And yet we're really quick to stigmatize therapy and mental health as an effective solution. Why do you think as a culture we're doing this to ourselves?

L. Ulrey:

Yeah, I think that's such an important question for many reasons. But I think to answer the first part, I think that a big part of the mommy wine culture and the acceptability of drinking and coping with drinking is... I think we are in a society that really wants a quick fix. Eight things to do to feel better in one second. I think that alcohol does provide a very appealing escape. It's social, it's accepted by most people. It's a lot less quote unquote, messy than dealing with your actual problems or admitting that you need help.

L. Ulrey:

I think it's a way that we feel that we can get together and we can feel connected. I think it can maybe feel a lot less uncomfortable to be like, "Let's get together and talk about what's so hard in our lives right now," with moms versus like, "Let's get together and have a glass of wine and just kind of relax," and that kind of thing. So I think that it has become very appealing for a lot of moms to instead of being honest and admitting... And I feel like it can feel almost like a flaw to ask for help and to say, "I am struggling. This is not working. What I'm doing is not working."

L. Ulrey:

The hard thing about alcohol in particular, or any sort of numbing, is you continue to avoid what's really going on. The more that you engage in an avoidance behavior and the more that you numb yourself from what's really going on, the less practice you get in actually problem solving.

L. Ulrey:

You can understand the appeal of when you're so exhausted, and you've had a long day, and you just don't want to think about anything anymore. But I have to say also, I have seen a lot of people who have really made a priority and have really made it top priority to challenge themselves, to work on their mental health in whatever ways that they decide makes the most sense for them. You see such an improvement pretty quickly when you decide like, "This is my top priority, because what I'm doing right now is not working. This is a slippery slope that I have gone a little too far down. Tomorrow's a new day. I'm going to try again."

L. Ulrey:

I think the fact that you can always begin again each and every day I think can be very empowering and really important, because we do also live in an all or nothing society. So I think there's the appeal too of like, "I'm going to either fully just do this all and I'm going to only focus on this one task. And I'm going to do therapy. I'm going to do it, and it's going to be hardcore." It's like, "That's not how it works." Unfortunately, it's a lifelong learning process and it's hard and it takes a lot of work, but it's worth it. It's the gains of getting in there and not avoiding and diving really deep into what needs to be dove into.

L. Ulrey:

You don't have to do it alone too. That's why therapy exists, right? Because it's really hard to do alone, actually. When you find the right therapist too, it can be the most rewarding thing. So challenging, but so rewarding.

L. Douros:

Exactly. I've seen this meme pop around a lot lately and it's people before quarantine and people after quarantine. One of them is super ripped, because they've just been working out nonstop. And the other person just needs a wheelchair now to get around, because they have gained so much weight from eating all the baked goods, which I'm on my way there.

L. Douros:

But I feel like that's kind of also a metaphor for our mental health going into COVID. We're presented with this really kind of unique opportunity. Yeah, it's been really hard, and I feel like a lot of times people have been focusing so much on the negative. But one of the really positive, unique things about COVID is we are stuck at home right now and for the first time maybe ever, you have all these wonderful virtual support groups, virtual therapists. What if instead of focusing on how hard is this, "I am just losing it," and you've instead focused on, "Wow, I have access to things I would have never had access to before, because I would have had to worry about childcare," or this and that and the other thing, "Now I can just log into a Zoom call and get help."

L. Ulrey:

Yeah. Yes, I completely agree. I think when we can actually focus on all the unique aspects of this time and really challenge ourselves. It's challenging though, to shift, I think, that perspective of... Because we kind of tend to go towards, "This is so hard. How am I going to do this? This is impossible." And all these things that I think are totally valid. This is hard. I mean, there's no sugarcoating this. This is a challenging situation.

L. Ulrey:

But I agree with you. I think you can set an intention of trying to be as grateful and open to learning whatever... Accessing resources that may be out there that you've never tried to access. And setting little goals for yourself like, "This week, I'm going to really try to do one of those online courses on meditation that I've been really curious about." Or I mean, as moms, those things are hard to fit in. I understand, of course.

L. Ulrey:

But at the same time, I think when you really prioritize those things versus zoning out and watching a show... Nothing wrong with that. That has a time and place too. But I think it's about finding that balance of like, "Today wasn't as hard as maybe yesterday. So today I'm going to maybe focus on going on that virtual support group or trying that meditation that I've been wanting to try after the kids go to sleep, instead of watching a show." It doesn't have to be every single night too. You don't have to be hardcore, always doing self-improvement stuff. Because I feel like that's when you lose people, is when it's an all or nothing thing again.

L. Ulrey:

But I also think what you said about this meme that you thought about, the memes about like, "People are either going to get really buff or go really overweight." That's such an American kind of way of living. Yeah, you're either totally ripped or you're letting yourself go entirely. I think that that's where we have to be very intentional about like, "I'm going to try to find my medium of I'm going to really try to exercise, and I'm going to try to do whatever else you need to do that's going to make you feel better. I'm going to journal once a week," or something like that.

L. Ulrey:

We need to be able to say, "I am not fine," and that's okay. It's okay to not be fine. It's actually better to say, "I'm not fine. This isn't working." Be brave and be courageous in that.

L. Ulrey:

Again, you can provide a beautiful model for your children to say like, "When things aren't working, I'm not going to just pretend like they're not working and continue on and numb myself." You can provide a model of, "This is what life is about, is getting through hard times. Not the avoidance or the absence of hard things. It's how you get through hard things that's really going to matter." They're not going to learn that in school. Or maybe they will, but they're going to learn these kinds of lifelong skills from you. If you can really set that intention of like, "I want to show my kids how I get through hard things," this is a good opportunity for that.

L. Douros:

I love that, and that's so true. You touched a little bit on some coping mechanisms that I liked, like journaling or maybe meditation. I know everybody's experiences are different and there's a lot of complex layers to each person, but do you have any other favorite coping mechanisms that you'd like to share with us?

L. Ulrey:

Yeah. Yeah, so I actually like to call them... I mean, you can call them coping mechanisms, but I've found the term wellness rituals for me, for whatever reason, that resonates more with me in terms of... Because I think it sets the intention of you're not necessarily always just trying to cope and...

L. Ulrey:

Because what happens sometimes is with a lot of coping mechanisms, people often only use them when they're super overwhelmed or super distressed and they're in crisis mode, basically. I think that that does all coping mechanisms or all wellness rituals a disservice. Because people often in therapy will come to me and say, "I've tried breathing, I've tried mindfulness, and it never works." I'm like, "Well, walk me through what it looks like." And they're like, "Well, the kids are screaming and the house is on fire, and then I try to do my deep breathing. It doesn't work."

L. Ulrey:

I don't want to take away from... That's really stressful. I don't want to belittle that at all. But I also want to say that the reason I call it wellness rituals, because it has to be done often. It has to be done when you're not in crisis too.

L. Ulrey:

For example, one thing that I find just to... It's kind of like a re-regulator that can be one of your wellness rituals, which is something called paced breathing. It's really, really simple, but it can be extremely helpful when you are overloaded, everyone's screaming at you or whatever it is. So it's essentially you just pause and take a moment and you count up to whatever number to take a full breath.

L. Ulrey:

Usually, I try to guide my clients through a one to four and then a one to six. So one to four on the inhale, one to six on the exhale. So you find what feels like the most nourishing for your body. But the key is to really fill your lungs and your belly all the way down to your stomach. Your in breath is going to be one, two, three, four, or whatever number. And then the out breath is going to be two numbers higher than the in breath. So one, two, three, four. One, two, three, four, five, six. Something along those lines. This is something that you can do any time, right? I do really encourage people to try it before bed, when they're not stressed, and when they're stressed.

L. Ulrey:

This doesn't solve anything. It's not like this is going to change your situation. But it is something that can just re-regulate your nervous system and kind of bring you down, so you can think more clearly about how to problem solve.

L. Ulrey:

Again, you can provide a beautiful model for your children. If you're just honest with them and say, "Mommy is completely overwhelmed right now." You can even say dis-regulated. Whatever word feels right. "I'm going to try my breathing. Maybe you can try it with me." Or maybe, "I just need to take a break." If they're yelling and screaming and they don't want to engage, go to the bathroom, wash your hands, get some... Anything that can kind of bring your senses into the experience.

L. Ulrey:

Actually, I have a spray bottle of just water with a couple drops of essential lavender oil, and I spray that and give myself a little aromatherapy. It's not like it's fixing my problems, but it helps me just ground myself, recenter, because I'm dysregulated, right? And then you can kind of think more clearly about how we've solved this problem kind of thing.

L. Ulrey:

So I think just having a couple of those really small kind of tricks up your sleeve can be really helpful. I also think a mantra of some sort or a saying can really be very empowering. I like to say something like, "I can and will get through this. I can and will get through this." But you want it to be something that belongs to you. So something that feels really empowering. Something short that you can memorize and say to yourself when you're in a really challenging situation. Those can be really, really empowering.

L. Ulrey:

Those are just a couple things, but anything where you move your body. Yeah, downward dog, if you're a yogi or whatever it is. But just getting those things, I think, having your go-to's and practice them and try out different things on certain days and see what's working for you.

L. Douros:

A lot of these strategies center around supporting your various nervous systems, but what strategies would you give to a person who says, "But I just want to numb myself right now. I need my wine, sugar, midnight potato chips, gummies," whatever it is, "because I'm just feeling so overwhelmed and I don't want to deal with processing anymore of my feelings today."?

L. Ulrey:

Yes. I'm not sitting here trying to say, "You can never watch a show and just unwind and relax with a glass of wine or a cupcake," or whatever. I'm not saying that that is always a bad thing every single time, you should never do it. I'm saying when that becomes your default or it becomes your only way to cope, that is a very slippery slope. So I think being extremely open and honest with yourself like, "Have I kind of



been relying a little bit too much on numbing probably more days than not?" If so, be kind to yourself and say, "I'm going to try better tomorrow."

L. Ulrey:

So this is not about like, "No way, you can never watch your shows on Netflix, or not..." If you are constantly emotionally processing everything, that wouldn't work either, right? Again, it comes back to finding your honest kind of gauge of where you're at and, "Oops, I've been really kind of relying on XYZ, and I'm realizing that I'm totally avoiding." No judgment. It's just it is what you've been doing. And then how do you make a change the next day? I think that that's important.

L. Douros:

We know that the experts aren't even immune to the antics of their own children, I'm sure.

L. Ulrey:

No way.

L. Douros:

Do you have any resources that have personally helped you through the years?

L. Ulrey:

What's really wonderful about this day and age is there are tons of really helpful resources. I think you just need to know where to look, how to look, and how to find time to get these resources, right? I think that especially for moms, that's a huge thing.

L. Ulrey:

I think two women who are actually both really amazing writers, and researchers, and clinicians that stand out to me that I often use both personally and professionally are Dr. Brene Brown and Dr. Kristin Neff. So-

L. Douros:

Brene is with a B.

L. Ulrey:

Brene, yes. Brene Brown. You might've seen her TED Talk. She has a really awesome TED Talk about shame and vulnerability that I cannot recommend more for all women, especially moms, to listen to. It's incredible.

L. Ulrey:

But so she's in a lot of research on women and shame. I'm just going to really quickly read her definition of shame. I think once I read it to you, you'll kind of see... Because when I read her book, I was like, "Wow, a lot of this resonates with me as a woman and as a mom."

L. Ulrey:

Dr. Brene Brown defined shame as quote, "The intensely painful feeling or experience that we are flawed and therefore unworthy of acceptance, connection, or belonging." She stresses that shame is a universal core human emotion, and while we all experience it, nobody really wants to talk about it. It's almost like we're ashamed of our shame. Ironically, not talking about it actually allows it to kind of bury itself deep within our psyche, and it kind of like stays in our body and in our mind, and it kind of can come out in ways that are not healthy for us. Shame often floods us with strong emotions, like fear, blame, rage, despair. These strong feelings often make us lose perspective about ourselves and about our lives in ways that can be extremely destructive.

L. Ulrey:

In her book, I thought it was just me, but it isn't, making the journey from, "What will people think?" to, "I am enough." So I think the reason I recommend this resource in particular is because I think that we as women have so much shame that is not even talked about and unrecognized in our lives.

L. Ulrey:

It also comes up... Not always, but a lot of times, whatever shame triggers we had developed kind of growing up from our childhood, we actually can be triggered by our children and actually kind of pass it along to them unknowingly. So the more that we can talk about it and put names to, "That is a shame. I'm having a shame reaction, and I'm feeling extremely rageful right now. But that's my shame," then the more we can stop the automatic process of then passing it along to our children. Speaking to our children in shameful ways or using shameful discipline or something like that. So it can be extremely powerful and it can also really help us build more insight into like, "I'm getting triggered right now. This has nothing to do with my kid. This is about my stuff that I think can be really helpful for me to deal with," kind of thing.

L. Douros:

I mean, I think too, we're all stuck together and we're all-

L. Ulrey:

Yeah, exactly.

L. Douros:

... already kind of triggered, and all this stuff is coming up.

L. Ulrey:

Exactly. A lot of the times, it's actually found that our parents unknowingly and not maliciously, but maybe their parents used shame tactics to discipline them, and then they did it for us. So I think the more that we can be aware of it, the more that we can be like, "I don't want to use that. I want to be more aware of different ways that I can parent my children without using shame."

L. Douros:

It sounds like it's been a really good resource for you.

L. Ulrey:

It's been a really good resource, yeah. And then so I mentioned Dr. Kristin Neff. She is a brilliant researcher and clinician, and she does a lot of work with self-compassion.

L. Ulrey:

I wanted to bring this up because I feel like it ties so closely with kind of this idea of filling your cup. Trying to fill from an empty cup is impossible. But I think self-compassion work and really focusing on that is a way to fill your own cup when you feel like you don't have more to give, but you do. Because I think if you can work on building this self-compassion skills, then you can realize like, "Wow, I've been really, really hard on myself throughout all of this. My cup is empty, but we can't really count on maybe anyone else filling it up right now." So having these skills, I think, can be really helpful.

L. Douros:

You talked about women having empty cups. I think that's so relevant for right now. I think all of us are really feeling very empty, especially working moms who are struggling to juggle so many things right now. What do you think they should take away from this discussion?

L. Ulrey:

Be kind to yourself. Be very kind to yourself. This is bonkers. That's a clinical term too, by the way. This is unbelievable, the things that we're expected to do. You're going to make mistakes and you're going to need help. So I say be kind, be honest, as honest as you can, and ask for help.

L. Ulrey:

I mean, there's a lot more else I could say, but I think keep it simple too. Simple as you can. I know it's complicated, but when we can really just try not to get ahead of ourselves and really focus in on just beginning each day, practice whatever coping skills or wellness rituals that you want to set the intention of using that day practicing.

L. Ulrey:

This is lifelong work though. I wish there was a quick fix. I wish I could give you the magic solution to getting through COVID as a mom. I wish we had a way to just kind of get through this without having to do hard work, but it's not possible. However, we can do hard things. We've done a lot of hard things. We will continue to do hard things. I think we'll surprise ourselves by what we can actually do when we get really intentional about it and get really open and honest with ourselves about what we want to do.

L. Ulrey:

You're going to have good days. You're going to have really bad days. It's all part of the experience. But again, I think if you remember that this is lifelong work and anything that's good is worth working for, it's definitely worth doing.

L. Douros:

You've been listening to Peak Connection with our guest today, Dr. Lindsay Ulrey. Dr. Ulrey has a small private practice and is certified in distance therapy and teletherapy. She can be reached at [drlindsayulrey@gmail.com](mailto:drlindsayulrey@gmail.com). And that's DR Lindsay Ulrey @gmail.com. If you'd like to know more about the resources she spoke about, they'll be available on our website [peakconnection.net](http://peakconnection.net), as well as the transcripts for this podcast. Thanks for joining us today, Lindsay.

L. Ulrey:

Thank you for having me.