

Writing Nutrition Essentials for Mental Health

By Leslie E. Korn



As a somatic psychotherapist I have always integrated several body and mind methods into my clinical work and personal self-care. I began my studies of Ayurvedic Medicine in 1973. These studies included yoga, polarity therapy and, nutrition and vegetarian food preparation. These methods became the foundation of the natural medicine public health clinic I started in the jungle of Mexico, which provided free health care for local indigenous residents. Over 25 years, I taught seminars and provided retreats on these topics for health professionals as a way to support the clinic. While living in the jungle I also went through my own healing process, which included changing many of the dietary habits I had learned growing up in Boston. I also learned from local curanderas about the medicinal use of foods and herbs and shared my knowledge of women's health with them, having been influenced by the 1970's urban feminism. This set the stage for my career and passion to understand the role of culture in food, nutrition and well-being, all of which I explore in-depth in my new book, *Nutrition Essentials for Mental Health*.

After 10 years of living in the jungle, my work as a body worker and public health educator led me to the formal study of psychotherapy (post trauma and

psychodynamic) and I returned from the jungle of Mexico to work in (the jungle of) Boston for 14 years. There I studied psychotherapy and introduced therapeutic bodywork into community mental health agencies and hospitals. Anyone who touches the body for healing knows that the body tells a story the mind often can't bear to share and the stories my clients told while on the table led me to understand more about the physical and psychic traumas they carried. Thus my path became clear—help clinicians bridge the mind/body gap in their training and serve as a translator of the mind for those who focused on the body and teach about the soma to those who focused on the mind. It was also evident to me that while my clients and supervisees attended to the "mind" there was a missing piece. Nutrition. I worked with inner city community mental health patients and with people in alcohol recovery—programs where people received mashed potatoes, gravy and Jello for their meals that only perpetuated the physical addiction to sugar that alcohol addiction represented. Because my work focused on post trauma recovery, I explored with clients the ways in which food and diet was either part of their self care matrix or their self-medication strategy and the ways in which it was to their benefit or detriment. I began writing handouts for clients

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about how to balance their mood by eating more quality protein, healthy fats and eliminating sugar and refined flours. I continued to teach mental health clinicians and body workers these concepts. The state of Massachusetts funded my vision to share this knowledge through multicultural wellness seminars designed to reduce alcohol and drug abuse. All these opportunities informed my later writing, as I was able to explore what worked and what didn't work with diverse populations.

During this time, I was working on my book, *Rhythms of Recovery: Trauma, Nature and the Body* (Routledge, 2013). The book is about incorporating the body and natural medicine into the treatment of trauma. I wrote it between 1994-96, and I had a book contract with a major publisher. When the (male) publisher received the manuscript he did not approve of the feminist analysis I provided in the book; among the topics I addressed was the taboo on touch and the abuse of touch, and I located these issues as a response to patriarchal values spanning centuries that in turn affected mental health care today. The publisher wanted me to eliminate these major sections in two chapters and when I decided not to, the manuscript was rejected for publication. I then turned my attention to other activities and put the manuscript aside for 14 years. I returned to the jungle of Mexico where I continued my seminars, research and clinical work with indigenous populations.

During these years there was a burgeoning of work about the incorporation of the body into the treatment of trauma, and I felt that the time was right to once again seek a publisher. I also decided to expand the book by three chapters. One of these chapters included a section on the nutritional treatment of posttraumatic stress disorder and its physical and emotional sequelae (The other chapters were about Botanical Medicine and Detoxification). Indeed, I feel that these three chapters made the manuscript much stronger and that my own knowledge and integration of the content, obtained with another decade of diverse clinical practice, proved to be very positive. This chapter on nutrition, however, represented just a nugget of the knowledge I wished to share about the role of nutrition in the prevention of illness and restoration of health. I began teaching national

CE seminars to clinicians on this topic and the next opportunity to publish came a year later, with Norton, and I now had the opportunity to expand my ideas into a comprehensive book.

For this new book, *Nutrition Essentials for Mental Health*, I drew on my early training in vegetarian nutrition and cooking (and my 27 years as a vegetarian), and also my cross cultural research and clinical practice, which grew to embrace the integration of biomedical science with traditional cultural culinary practices. The essence of this knowledge suggests that there is no one dietary strategy for everyone anymore than there is just one psychotherapeutic intervention that fits all. Some people are suited to a vegetarian diet but some are also biologically suited to being carnivores and that the best diet is not just an intellectual decision but should be based on the needs of the physical body. For example, I work with Inuit clients from northern climes whose bodies and mind flourish when eating sea animals and sea vegetables but would not survive as vegetarians or by eating soy protein, wheat and milk powder. I noticed that my college-aged clients often had defined notions about what they should eat that often reflected fads or disorders, not always what their individual biochemistry required. I felt that they would benefit, along with their consulting clinicians, from a model of how to think about food, nutrition and mental well being. I wrote more, conducted community based research and discovered that while many clinicians had increasing interest in improving their own health with nutrition, they did not know how to integrate this knowledge practically into their sessions with their clients. Further, they did not know where their scope of practice and ethics intersected with their knowledge base. I was interviewed for Psychotherapy Networker in 2014 and it became clear that while there was a small segment of clinicians working with nutrition, many clinicians, even though eager, had no idea about how to systematically integrate nutritional therapies into their practice.

This overarching question became the seed for the book I developed with my editors at Norton.

Continued on page 32

One of the challenges I faced in writing this book was thinking through exactly how my work integrating these different disciplines evolved organically over 40 years and breaking it down into a step-by-step model that nutrition novices could learn from and adapt for their own practices. My own process is to research all the literature to ascertain the evidence, along with exploring the controversies. This organization and culling of vast amounts of material is perhaps the greatest challenge. Nutrition and diet is also such an emotionally fraught topic and I did not want to have a book based on "ideology". Organizationally the challenge was how to present a level of sophisticated content that a clinician could grow into that was also immediately practical. I received excellent advice from my editors at Norton who were skilled at organization. It was especially interesting for me to identify and write up (confidentially) the cases of individuals with whom I had worked as they informed the major points I wanted to emphasize.

One of the other challenges I faced was how to present complex anatomy and physiology: the process of digestion for example, in a simple way that made sense to non-science clinicians. I sent my early chapters to mental health colleagues who were kind enough not to tell me that they either fell asleep or were confused while reading, but I knew what they meant. I went back to the drawing board. I decided a thematic metaphor might be useful. I expanded on the metaphor of the car (that I often use with my clients) to explain how their body functions. I began with the idea that different cars require different types of fuel; and that we change our oil filters far more often than we change our own filters—that is, cleanse and flush our gall bladders. Using this metaphor throughout the book proved to simplify often complex material.

Because I have a range of clients and clinician knowledge varies as well, I considered their needs as I wrote the book: some were already making their own sauerkraut and had a sophisticated knowledge of nutrition, while others were using artificial sweetener and margarine and drinking soda pop because they thought that was best for their health. Identifying levels of knowledge in the book that clinicians can use at different stages was a challenge. I also wanted the book to dispel myths and offer new, doable approaches to healthy change. Why is nutritional status essential for good mental? How do we use our skills as mental health clinicians to empower and motivate people to change their nutritional wellbeing? I also wanted to address the fact that many of our clients "resist" or do not obtain satisfactory results from psychotropics; many have side effects that make their use intolerable, and I wanted to provide practical strategies, to

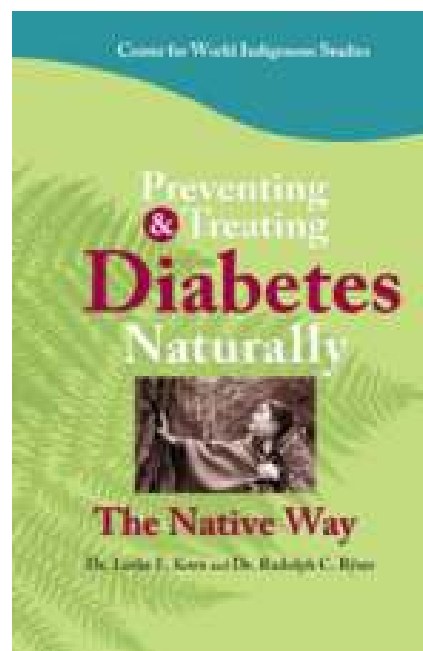
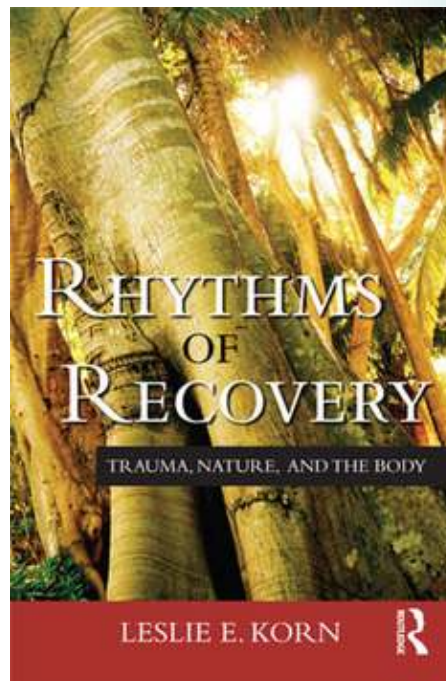
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help people reduce or eliminate psychotropic medications. My goal is also to educate clinicians about the growing niche in this approach; clients are requesting alternatives to medication and how can we help them get the support they need.

My overall goal in this book is to let clinicians know that nutrition is THE missing piece in their treatment plan and that their clients will see results by incorporating this missing piece into their overall program. At the same time I suggest that like our own process of engaging in therapy and somatic processes, so must we as clinicians undertake our own changes and improve our own nutritional status and dietary practices; finally, my goal was to suggest that just like clients will engage psychotherapy or somatic practices at certain stages of their change process, or reject them, so must nutritional interventions be understood as a developmental process that is both stage specific and a lifelong process of change that the clinician can be sensitive to with each client or family with whom s/he works .

With each book I write I gain skills in organization and clarity and importantly, identifying more about how I can write in ways that are practical and useful to both the clinician and the client as I support the integration of innovative ideas into our practice.

Leslie Korn, PhD, is a clinical specialist in mental health nutrition and integrative medicine. A core faculty member of Capella University's Mental Health Counseling Program, she served as a Fulbright scholar on traditional medicine, a Clinical Fellow at Harvard Medical School, and a National Institutes of Health-funded research scientist in mind/body medicine. In 1975 she founded the Center for Traditional Medicine, a public health clinic in rural indigenous Mexico that she directed for over 25 years. Author of six books, she teaches and consults internationally for mental health professional and tribal communities. Visit www.healthalt.org.



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