

Mark Watson - Episode 789

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SPEAKERS

Mark Watson, James Geering

J James Geering 00:00

Welcome to the Behind the Shield podcast. As always, my name is James Geering. And this week, it is my absolute honor to welcome on the show, educator and Chief Executive Officer of ABI wellness Mark Watson. So in this conversation, we discuss a host of topics from his learning difficulties as a child, his journey into education, his transition into the world of neuroscience, neuroplasticity, cognitive rehabilitation, traumatic brain injuries, and so much more. Now, before we get to this incredible conversation, as I say, every week, please just take a moment, go to whichever app you listen to the song, subscribe to the show, leave feedback and leave a rating. Every single five star rating truly does elevate this podcast, therefore making it easier for others to find. And this is a free library of almost 800 episodes now. So all I ask in return is that you help share these incredible men and women's stories. So I can get them to every single person on planet earth who needs to hear them. So with that being said, I introduce to you, Mark Watson enjoy. Well, Mark, I want to start by saying thank you so, so much for taking the time and coming on the behind the shield podcast today.

M Mark Watson 01:37

Oh, it's my pleasure. I love the work you're doing. It's really important. I have friends in this community. And I love that you're just spreading the word and raising awareness. I love your mission. Your vision gives me goosebumps just thinking about still your purpose. It aligned with mine. And mine is not quite as extreme. But you know, I absolutely love it. So anything I can do to help I'm here for you.

J James Geering 01:57

Well, and I'm very grateful. I was a guest on your podcast brain mastery. So we'll get to that in a little bit. But I want to thank you for that invitation as well. It was a great conversation. That's wonderful. So very first question, where on planet earth are we finding you this afternoon?

M Mark Watson 02:14

I am in Surrey, British Columbia, a suburb of beautiful Vancouver, British Columbia.

J James Geering 02:20

Brilliant. Well, I would like to start at the very beginning of your story. So tell me where you were born. And tell me a little about your family dynamic what your parents did and how many siblings

M Mark Watson 02:30

I'm so lucky. You know, I was born right here in British Columbia, in Vancouver. Raised by two my heroes, my mom and dad, unbelievable people diagnosed with I had some complications early on in my life. So diagnosed with dyslexia early on in grade one. What that looked like for me was, you know, a lot of anxiety and worries growing up. But I had the amazing parents that provided me with the opportunities educationally to help me to learn how to succeed. And they provide me with a ton of love, but also gave me the opportunity of a challenge too. They didn't make it easy. They They encouraged me as I as I pursued different interests, and were always there for me. So mom was a classic, you know, protector, and dad was an encourager, so just as the luckiest guy ever,

J James Geering 03:25

and what about professions? What were they doing?

M Mark Watson 03:28

So my dad was a in telecommunications. So he worked with the phone company, and had kind of like an engineering background. And my mom was at home with us, until our early teens, and then went into working in the retail world in the fashion world, and then ultimately was really inspiring, ended up working in special education, following her true passion, because both of our boys had this dyslexia. And she wants to be a part of that change in the world. So it's pretty, pretty awesome.

J James Geering 03:58

So when you look back now, what was some of the challenges learning wise? And also, did you feel any kind of elements of bullying as you were progressing through your school ages?

M Mark Watson 04:10

Great question. So for me, the learning was graphical motor, so dysgraphia, so written output disorder. Early on, I didn't want to know what that what that meant. Actually, I was quite

stubborn about that. And it wasn't willing to open up about that at all with anyone. So I was a bigger kid in school. So and I was slightly older than a lot of the kids because I was held back half a year between moving schools from Ottawa back to Vancouver. I wasn't really bullied because I was so big. And I was pretty quiet. So because I was insecure, right and quite anxious about my learning, and I didn't want to really I just tried to fit in which didn't work, because I was too big. But But what I did witness and I've always been kind of this sort of a person was I, I always had a relatively I didn't know what that meant at that time, but I always had a really relatively high EQ. And I did notice a lot of other kids that were in sort of outlier situations or learn differently being bullied. And that upset me deeply. And it was something ethically that really concerned me. You know, I saw people, one of the women girls, too, went to a school that I went to an Ottawa had a pretty severe seizure disorder. And she would be made fun of by the kids all the time, and I would see kids who are in difficult family dynamics. This was when I was in high school and the captain of the football team, getting bullied who had clearly some, you know, what appeared to be some level of abuse issues at home, and was being made fun of, by, you know, friends of mine, and I and I had to courageously challenge them at times. And that was hard, because it was almost like the reverse, having the courage to do something like that. I like to think that'll show up when, when times are hard. Like that, but, but in that one particular many times I didn't, but in that one I did. So typically, I wasn't bullied, school was, you know, I liked going, I liked working hard, but I found it very challenging early on very, very hard. But I just kept kinda kept hammering through it as much as I could, and not wanting to understand what my learning weaknesses really were, I just wanted to kind of blinders on and just keep moving, which is not a good strategy, folks. I'm not suggesting that. But that was my path early on until I found sports. And I found that I had an island of competence there. And, and really kind of went into that and built a lot of self esteem from sports.

J

James Geering 06:44

The phrase that you use, grapple,

M

Mark Watson 06:47

or describe, describe scrapper a motor output written output. So

J

James Geering 06:52

am I is it fair to say that most physicians in the world have that because they've got fucking awful handwriting?

M

Mark Watson 07:00

Maybe to get a physician to diagnose it for you? It Yeah, it would appear as though that that that would be the case. But again, with the EMR, no, everything's digital. So the they'll spit it out to you. There's less handwritten doctor's notes.

J

James Geering 07:18

So if it's like a meme, and it was a bunch of doctors protesting, and it said, this are our demands, and then it just had a bunch of his handwriting, you can understand what? Yeah, when I was young, I was told I was probably going to be a doctor, because my handwriting was so bad. So there's probably an element of that in mind, too, but I think it was more impatience, just want to get to the end of the sentence. But bear with me going back to that bullying for a second, just because I think this is an important principle for all human beings. We have on occasion, and sadly, it's painted like, this is everyone that's not but we have times where a child is getting beaten up, or picked on or whatever, and everyone's got their phones out. And I've always told my little boy, don't just wait in there and be a lone hero turn around to everyone else and say, Look, are we just going to stand here, or we're going to stop this? Because this is the problem, I think, is a lot of people. They kind of have that herd mentality. And it's not that I mean, that to be patronizing. It just is a human condition. And so if you can actually stand up and turn to the group and lead them say, Hey, this is what we're going to do this is wrong, we're going to stop it, you can cause a shift sometimes. What was what was your experience? When you did stand up that time? Were you able to turn your friends from the way they were to change their behavior?

M

Mark Watson 08:35

Interesting, good question. This, this sits beside my desk every day, physician writing right. You know, from Marshall Goldsmith, a real leader, writer, interesting guy. And I heard him speak. And he said, only have one note on my desk because I recalled it and said, Did I do what I thought was right. Did I do my best. And in that moment, I didn't think about anything, I just acted. And I think more people need to do that. Sometimes, I tend to get caught in my own head. And that kind of left prefrontal cortex, where you're analyzing and analyzing and analyzing and that's paralysis by analysis. And sometimes you just need to go do it. And all I could think of was this poor kid who is much smaller, who was not a part of that same social circle was getting bullied. And it was wrong. So all I did was I just went in, I just went, I didn't think about it. I thought about it, I wouldn't have done it, because those were my seemingly friends. So I just wouldn't do it. And in doing it, I learned I've learned a ton and doing it. The other guy. Some of these weren't close friends, but these are the associates. And they're like, Oh, come on, man. What's what? Come on Watson? Ooh, we're good. Good. big tough guy. Oh, whatever. He's not even worth it. And I was looking at you want to bully someone bully me. I'm right here. And in that moment, I wasn't thinking I was I was just doing. And then I took him walk down to the one of the teachers walked through it. And at that point, I really didn't care. Because in that moment, I realized that one of the first times in my life if they were okay with what I did, I don't want to be associated with these guys anyways. And then after the fact that they came up with a watts, appreciate it man, that, you know, I was having a bad day. And you know, he's an easy target. And, and we're all humans, we all make mistakes all the time and make them all the time. And especially, you know, sometimes us boys, when we're young, right, the prefrontal cortex has not developed to work 24/25 Or so maybe even later. So we need to understand and recognize that and have a bit of compassion around that, too. You know, I'm raising two boys myself with my amazing wife. Well, she's doing a better job than me, but, and you know, about 16 and 14 at home. So I think that, I think that in that moment to answer your question I wasn't thinking I was doing. And I think sometimes that's the right thing. As long as the only thing that I would I would want to be clear on is you need to know what's inside of you. First, what do you stand for? What are your values? Do that internal work? And if you know what that is, then you know, your Northstar, then your actions can be clearer, as long as you understand what you're trying to do.

J

James Geering 11:19

Absolutely. Well, I think this is a big thing. A lot of people listening to this podcast, have the qualities to be a leader in that community. I mean, they're wearing uniform, you know, whether it's military or police or fire EMS. And yet that paralysis by analysis, that worst case scenario, Oh, this one time someone intervened, and this is what happened. Yeah, but I mean, there's 1000, other times when people intervene, and they just help the person, you know. So I think, by standing up and saying this is wrong, is something that we need a lot more of, you know, there's bullying all the way from, you know, schools through to the White House and everywhere in between, I think we need to refine that kind of good samaritan Shepherd element within, you know, not only our homes, but our communities and and ultimately, our countries.

M

Mark Watson 12:05

I represent, I think we need to honor it, I think we need to, I think we need to celebrate it. You know, the first responder I hear for some people, I'm very quick to correct them. Now, unless I if you talk to people, I'm rather politically correct, but I'm working towards changing that a little bit. And doing more of what I say I want to try to do, which is doing the right thing. You know, you look at what our first responder has to do. They're going in blind to to the worst day of someone's life. And they're going in blind. They're speeding down the highway, and some, some one in traffic isn't going to move over because they wanted to get to the red light faster. Give your head a shake. You know, these people are on all the time. So what I'd like to see is a world where that is valued at a higher level, these public servants are valued at a higher level, because for them their norm. When I when I think about those first responders, when I think about a personal experience related to someone who's in a similar kind of service type work that has to deal with a ton of trauma. People who who work in a palliative care ward, a family just lost a loved one. But for them, it was just Tuesday afternoon shift. So what do we do about that? I said, as concerned citizens, I want that first responder, I want that allied health professional, I want that nurse, I want that person that's exposed to that high degree of trauma to be their best self for when we when it's our turn. Now, how do we do that? Well, what we do is we raise awareness about that we raise awareness about what you and I were talking about before about this remarkable opportunity for the brain to change itself and to improve itself. It's not easy, though, right? It's a hardwired thing. And that takes work. But our and our neurophysiology is, is is hardwired more towards the negativity, right, for good reasons. But the work of Dr. Rick Hansen, I think I may have mentioned him before, he talks about hardwiring happiness, neurophysiology, like the brain can change through focused repetitive work. One of my mentors Barbara Aerosmith, young, remarkable human, I'm very biased but remarkable human being has has created some groundbreaking work that's been studied by Dr. Norman Doidge, who's like one of the leaders in the world in neuroplasticity, everybody's brain can change for it. And that's not a positive thing. It's for the negative to, you know, but it's just a reality that the brain can change. And it's not that it can only change early on. It can change throughout a lifetime. And I think that's a super hopeful statement. So when we think about this in context with our first responders, and the community, supporting the first responders, our belief, our our biases, those can change through education like you do every day, with with your cause, but also through treatment protocols, do training protocols, just like we train the body, we can also train the brain. And and remember, like, I think there's a really good Thomas

Edison quote, I just heard it from my friend Jim, we were just talking about him. And I think that, as I recall it, Thomas Edison, he said, the purpose of the body has to carry the brain around. I love that.

J James Geering 15:22

Makes perfect sense. It really does. And you see some of the the cut, what was it got? Megamind? I think his assistant in that is literally this robot that carries a little talking fish head, you know? And it's like, yeah, that's us. Everything that, you know, that we are made of is designed to protect that little tiny sphere on top of our shoulders.

M Mark Watson 15:42

100%. So I want to see a world I have friends in the first responder world who've told me about the shift work and asleep. That's not good. But how do we how do we find better behavioral protocols to support them? The science is out there. You know, I think Matt Walker wrote a really cool book about it about sleep. And you know, one of my friends, Pat Byrne, wrote a very good book called inconvenient sleep with his daughter very good book that people should be reading, because sleep is very important. And the other big thing here is that none of us are perfect, we're going to likely make mistakes. So read, hit refresh, and keep moving forward and know that there's a hope for that brain change, it can happen. We see it in other fields all the time. You know, it's a great book by Malcolm Gladwell. Many of them are good. And it's not just because he's Canadian, okay, I'm not saying this. But there's a book, David and Goliath that he wrote this very fascinating when we look at kind of moving the standard of care in health and wellness. And he talks about the advent of, of cancer treatment and chemotherapy. And so it's a it's an awful, but also hopeful story. It's both. And that's what makes it compelling, is that when they were talking about that problem, when we think about first responder health, when we think about mental health, when we think about brain health, it's a very general concept. It's it's sometimes don't beat me up too much. It's sometimes not as action focused, as perhaps maybe it should be to have the impact. It also always has to start with education. But what Gladwell did a really good job of and I didn't know this story of chemotherapy and where it came from, are you aware of this story? No,

J James Geering 17:27

I'm not. Okay,

M Mark Watson 17:29

so it's an interesting story. And maybe we have to fact check it after I but I choose to believe Malcolm Gladwell did his homework. But my understanding of it was the prognosis for young kids with leukemia was very, very poor. And they these kids were bleeding out very quickly. So they he brought in one of the kind of top people in the hematology world, it's a blood doctor, right? And then, so he was one of the top in, in America. And then he brought in kind of a data analysis type person, they're kind of looking at the numbers saying, well, these kids are gonna die anyways, like, we need to try and do something. And they're the prognosis was terrible. So

then they started to look at different drugs and combining them right for different purposes and different reasons. And what ended up happening is a messed up, some die faster and died very graphically. But they kept learning and they kept trying to understand because the prognosis again, was very poor at the at the front. But what ended up happening is they started to figure it out. Right, they started to figure it out, they're asking the right questions and research well, how do we extend the life of this child? How do we stop the rapid growth of these two of these these abnormal cells, which is all cancer is right, those are abnormal, rapidly dividing cells that the white blood cells can keep in front of so they break through so they found with these smart smart scientists found a way to to bring in this you know, in essence really poison to kill the the rapidly dividing cells and then to also work to keep the child alive long enough, it took that equation and that understanding to ultimately move away from because initially, of course, when the when the child's when the children died faster. Everyone's like, You're terrible. Look what you're doing. They're dying faster. And, and these objective sort of scientists are like, yes, but they're, like, that was the problem. These are the steps it was already going to happen. We're trying to find a way to help them live. But they had to walk through that ultra painful step first, nothing worse than that. A child. Right, but like, but they found a way. And that's part of the innovation that I think is is hopeful for the future. Because chemotherapy is now it really interesting starting to go away. Now we're looking at a more natural immunotherapy. And I think that's really exciting. Because it's not good to have that many toxins in you. That's a very bad thing. That's very, very bad.

J

James Geering 19:48

I never understood I mean that the origin story is interesting, but to me as a very kind of white belt, Medic, to Agent Orange to whole body and then fingers crossed to see if it comes back again. And as amazing as some areas of science that we have that seem like a Hail Mary, at best, you know, and now we're seeing a big, big shift into creating a healthier body. How can we affect all of these these pillars of health and get as close to homeostasis, and trust the body in its own innate properties to be able to heal?

M

Mark Watson 20:23

100%, who couldn't have said it better myself? You know. So that's why we just have to keep moving forward. And keep asking, keep asking questions and ask ourselves, are we asking the right question related to the problem that we're trying to address. And you know what one of the areas that I did want to touch on today with your audience is, when we think about our first responders, and we think about mental health, I also want us to think about brain health. I don't want us just to think about mental health, because for some people, talk based therapy may be the solution that will help for other people, maybe some element of biofeedback could really help. For for some people, maybe there is, you know, independent sort of neurotransmitter type mental health issue that requires some level of medication, wonderful. But remember, like, the brain, what I said is true, the brain has remarkable capacity for change. So let's try to as much as we can use that for good use that opportunity for good so that people ultimately, behaviorally can do as much as they can to exhaust that potential.

J

James Geering 21:24

Absolutely. Well, you touched on playing football in school. Now we're going to get into

neuroscience and brain health, with this lens that you have now and 2023. What is your perspective on impact sports in our youth, and you know, maybe removing some of the contacts until they're at least of the college age?

M

Mark Watson 21:50

Well, I think there's a good someone that you should have on if you haven't yet is Christina Winsky, who runs the concussion Legacy Foundation there in Florida. He's one of the people who worked alongside or followed the work of Dr. Omalu. And Dr. And key is at Boston University. Molly was at another location when it started. But what he's advocating is that for tackle football to only begin at age 14, and and I think I think it just it just doesn't make sense that our brain is not designed to be hit like that. And I was terrible as a football player. I use my head frequently. I realized after the fact, part of the reason why I love football so much is the teamwork of it. It was great. But I think that you know, one of the great sorts of scientists who I had some pleasure to spend a little bit of time with Dr. Nazarene Virgie babble out of the Faculty of Medicine at the University of British Columbia studies concussion, and one of the first slides he pulls up is sort of the neurophysiology of a woodpecker. And the woodpecker has a neurophysiology that's designed to protect the prefrontal cortex, the tongue kind of wraps around or protects the front of the brain, we don't have that function. So I, you know, my thought on that is limit any any sort of that, that trauma, when I see the UFC stuff, I get it, it's exciting, I understand it's very primal. But also, these are repetitive head injuries. And I've seen the other side of that it's not good. The brain, you know, you know, when people talk about a better helmet, I want to see the data on how that's reducing the sharing of the neurons inside of the brain. When that happens, that changes behavior, I liken it to the egg, right. So if we could, if we could stop the cracks on the outside of the shell, that does not mean that the inside is not getting damaged.

J

James Geering 23:50

Yeah, because we have the whole coup contrecoup, which doesn't matter, you know, what you're wearing. In fact, if correct me if I'm wrong in the believers, the boxing world, there was a push to a larger head protector, and then they were realizing that added mass on the brain was causing more trauma, not less.

M

Mark Watson 24:09

Good intentions, right. But as an optics, you know, I remember having the opportunity, I won't name the company, but I had the opportunity to speak about some research that we were doing with a mentor of mine, Howard Eaton, who's a real leader and sort of educational and neurological assessment. And we went met with this, this this group, and we're talking about people with brain injury, doing cognitive rehab, and they're like, well, people with long term brain injury, they have problems with attention, memory planning, and organizing, and they kind of looked at me saying those are called executive functions and, and higher order cognitive function like it yeah, I know. But if they have those challenges, and what do we do about it? Right. And and they, they were involved with some studies, where they were talking about the football lens at that time and people that may suffer after a career in football. They were talking about this new helmet that was going to seemingly reduce concussions. And I was

like, That's really interesting. And it may really help with reducing skull fractures, and that sort of damage. But it's great marketing. Right? And it looks cool. It looks different. So when you see on on TV on Sundays, oh, different looking out, there must be a concussion helmet. But you know, and I'm not the smartest guy in the world, dude, you've already figured that out. But like, what I do know is that but repetitive brain trauma is a bad thing. And not following concussion type protocols is a bad thing. And I'll tell you, they're not followed? Well, all you have to do, all you have to do is watch what happened with the dolphins this year. All you have to do is go to a kid's football game on the weekend somewhere and ask who who's trained and certified to watch this. And I think organizations are doing a better job. I think they're really working on it. But I think the same is probably also true in the first responder community, I think it could be taboo to say that, you know, if I, even if I fell on a call, or if, if I got, you know, if a certain trauma got to me to be able to communicate that requires an openness in the culture to be able to disclose that. And, and I think there's a little, you know, way more than me, and I know, this is a big part of your mission and vision is we need to work together to change that culture.

J

James Geering 26:32

I agree. 100%? Well, I want to get into going to your journey into neuroscience. But before we do, I know there's a big large of education first. So when you were in school, at the high school level, what were you dreaming of becoming and then walk me through your first kind of career that you found yourself in?

M

Mark Watson 26:49

Okay, so football, obviously, football star. But underneath that was really, I was thinking about, I liked the idea of collegiate athletics. So I had a pretty narrow, pretty narrow down, I was pretty specific. I wanted to be an athletic director of a small American private university, because I thought I'd have the agency to make some decisions and ultimately do right by the players and by this by the staff. But I didn't think I could do it. Because I still didn't know that I could graduate high school. I really, I I knew I was decent enough at football to help that to help me have the courage to continue in high school and to go forward. Had I not gone to the amazing school like did with the teachers I have, I wouldn't have done it and I didn't have the parents I had probably wouldn't happen. So. So that was the idea was to was to do that. If the fallback the fallback plan was I was pretty strong so I could lift boxes. I knew that possibly, if needed, I could work in warehousing. And I was willing to work hard. That was something I didn't know about myself. Like I was a gamer. So I got to school early every day. I was on time. I rarely ever missed a class, you know. So that was the goal, and then ended up graduating actually doing pretty well. Towards the end, I started to learn I had some really great teachers who challenged me and I had one teacher misfield shadow misfield, great teacher. She was one of the first people to look at me and say, Actually, Mark, your thoughts are pretty good. You know, you Yeah, your written output is not very good. But when you express it verbally, you're very good. And I never realized that I didn't know I could speak. I was super quiet. I just wanted to stay in my lane. Hope nobody figured out I was dyslexic. You know, like this, okay, like if somebody sees me spell a word wrong. The world's gonna end right. No one cared. But, you know, in my mind, I had this narrative that it was such a such a challenge. It's such a problem, such a weakness, right. But then ended up getting some some soft recruiting for football, and then ended up going off to University of Alberta.

J

James Geering 28:50

So you played for Uber? Yeah, I played for university Alberta. Okay, so then did you continue after that was at the end of your football journey?

M

Mark Watson 29:00

That was the end, the last time I played football was on what they call the third degree concussion. So what had happened before that I had suffered to that I could really say were real concussions. And after this one, they took my helmet away. Thank goodness for the trainer. Trina was her name amazing person. Football never panned out the way that I had envisioned it, it never panned out. And multiple injuries. Trouble with schoolwork and everything trouble with identity, right? Who am I? If I don't have football, whoop, God, I'm like, What am I then? When in reality? I was always interested in psychology. I was always interested in all these other things. I just, I was afraid to name it. Right? Because what would my friends say in a lot of those kinds of cultures is assimilation. Right? Everybody's got to look the same. Do the same. You know, so played there. The last time I ever played, I had this concussion, they took my helmet away, and they just gave me drugs and rest. And that was that was the idea, which is again the best they had because I came to learn later they're looking for a bleed right? So you You gotta rest if there is bleeding, the MRIs are expensive to run. So you just wait those 24 hours and then see.

J

James Geering 30:07

So the conversations come up a lot the last few years with people that will high level athletes with people that have been in the coaching world, some very, very experienced coaches. It's interesting now when we look at the Youth athletics through a 2023 lens, that the lines between performance and wellness were blurred, a lot of times, so you had concussions in games you had, you know, baseball players throwing 1000s of pitches until our arm fell off, you know, you had children encouraged to eat. So they would be this brick wall of a linebacker, rather than thinking about obesity, when they left, you have as what I've talked about a lot when I came in from England, Uncle Rico's left, right and center talking about how they should have been in the NFL, but, you know, I blew my knee, I blew up my shoulder, I blew out this. And it really made me think, you know, games sports are so much fun. But what we've done in the US has created such a high level of performance. But a lot of times it's the cost is the wellness of that child, who then goes from extreme athleticism, to more often than not, you know, obesity and inactivity. So, you know, what has been your perception being involved in that world on that line between performance and actually the well being of the child or the young athlete?

M

Mark Watson 31:31

Great question. I love this question. So great. Again, I like books, he's starting to learn a little bit about me, David Epstein wrote a great book called range. Okay. And this book is about the generalists. And I think, I think being too specific, too early in your sport, is problematic. Because what are we trying to accomplish here? And game Canada, every kid that plays hockey is surely going to be the next Wayne Gretzky. That's kind of what happens. And then,

and then the parents in some cases go a little spun out crazy. I, you know, I get it, because we're excited about our kid. But I think it's really important, what is the goal of sport, right? The good sports should be a conduit for building a better community. So you know, build relationships, learn how to work together, learn how to move a little bit more, learn how to accomplish a shared goal, you know, learn how to lose, right, learn how to, to take it on the chin and learn from it, you know, learn about culture, right? You know, sports sense, what a beautiful opportunity to learn so many life lessons for kids a little bit earlier on so that when you go to that next big business meeting, and you don't, you don't accomplish what you want it to, you understand, okay, yeah, right. That was like that game when we lost and then we, we came up with a different game plan next time, and we put another person in a different position, and we move forward. But if you don't get that opportunity early on, I worry for people, it doesn't need to be Dysport. It could be music, it could be art to drama, it could be anything. But learn how to work together, it can be individual could be swimming, look at the work ethic that's involved in getting up at four and working on your very specific stroke. But don't only focus just on the task at hand, understand and this comes to the parents understand underneath that is actually the generalization of that to your personal quality of life and activities of daily living. That's how I look at it.

J James Geering 33:26

Yeah, well, thank you, I think it's an important thing, because, you know, sports are supposed to be fun. And like you said, in all those things that you pulled out, these are the takeaways, you know, the suffering and the fitness and being out in the heart and being out in the cold. These are the, you know, the discomforts that are so important. But contrary to that, how many kids spend game upon game on the bench, because they aren't going to, quote unquote, win the game? Well, the point is that these children are supposed to be playing the sport, you know, and I get the competitive side and I get the, you know, the desire for a school or a college to win, you know, whatever championship it is. But if you've started to lose, the fact that these children came because they want to play the sport and through this kind of distort our perception of winning as the gold standard. To me, you've kind of missed the whole point of sports in the first place.

M Mark Watson 34:20

100% 100% And I think that's education. I think we need to lead with that in a lot of sports situations. And I'm actually seeing it change here. Like I see a lot of this change. A you know, it's pretty awesome to witness because I didn't know that I would see that change in my lifetime. And in reality, I wasn't really competitive guy, so I want it to win. You know, there was many car rides home after a basketball game where I wouldn't talk to any, you know, like did I was just built that way. But now I can see a different perspective and again, neuroplasticity, my brain can change the way I look and perceive those things, which is a good thing. Thank God it did.

J James Geering 34:58

So you'll fit in at your football career. or stops, you know, at obviously due to someone who was, you know, forward thinking when it came to brand heart brain health. Walk me through the career path you took after that.

M

Mark Watson 35:12

That's interesting. So I mean use that term very loosely football never really worked out at all. And University for me was injury after injury. It was just it was it didn't end up happening was weird. And I really struggled with it kept coming back and like at what point do we just say no, and then that concussion was the perfect opportunity to say, you know why I don't think this for me, then what happened? I went in, here's a picture this rural country, Alberta, northern Alberta, one of the former players that you have a invites me to go and coach and volunteer coach, so I'm like I can't go into I've never coached kids. So I have this ragtag group of kids and Ardrossan, Alberta. And I'm tasked with becoming the offensive line coach for this team, I found myself driving between Edmonton and Ardrossan every day and just loving it. And then working a part time job and going to school. I just love working with these kids and seeing them develop. And I was like, Oh, that's it. I love seeing people develop themselves. I love putting together a little bit of a plan. I love empowering them. And I love seeing them work together. That's it. So then from there, I coach, these kids were amazing, parents were unreal. Turned out I was okay, I'm pretty good at it. And then went on to do a little bit of coaching after I finished school, then did a sports marketing placement with the Vancouver Canucks. And I learned that sports marketing probably wasn't going to be the career I wanted to do. Didn't quite scratch that itch. But it was super interesting. And then ended up working through some connection by dad, but the phone company prevent and learned that that probably wasn't the environment for me yet. Or maybe maybe it will be one day, I don't think it is. And then ended up working in special education with a mentor of mine, Howard Eaton and another mentor of mine lesson cool, working to implement programs across the United States and Canada, that helps kids. So it was great one mark speaking, to better understand how they learned in their own way, and discovering walk through it themselves. And I thought it was a beautiful gift to the world. So that was a lot of fun. And then got exposed to the work of Barbara Aerosmith young through Howard Eaton. And this woman was somehow saying that the brain could change. And surely she's wrong, because the brain is clearly hardwired, like a computer. And if you're a visual learner, just learn visually, right. And if you're, you know, if you have dysgraphia, just accept it and use a typewriter. Well, no, this, this woman was was was thinking differently. She was thinking that the brain could change, he knew the brain could change. And she had a lot of top doctors on her side. And what she ended up doing was creating this amazing program rooted in very strong neuroscience research and literature. And our first patient was himself, girl ready, and she changed her own brain. And I mean, she's unreal. She's a horseman, and she's just humble. She's a certain leader. He's just a good human being. So she was in Toronto getting trained, Howard even started a school in Vancouver that was really innovative. And that faced its own resistance. And I thought maybe I'll be the PE teacher, right? Like, maybe I'll do that I finished my, you know, degree in physical education recreation at U of A. And, you know, I just thought to myself, I was cautiously optimistic, like, if the brain can really change for these people. What does that mean? Right? Like, if that's if that's true, then a lot of the things I thought were true may not be true. So then that began in 2005. And then, so I became a teacher there, sorry, yes, no, no, please carry on. So that began, began in oh five, and then ultimately ended up being the vice principal, and then the principal of the school, and really enjoyed it. It was fascinating. And then over the very challenging, but remarkable families, remarkable students, remarkable leaders, remarkable mentors all the way through that journey. But over the years, we got some medical legal referrals for people with brain injury, that were struggling with these cognitive functions. And I pulled up Google and like we surely you don't know how to work Google. Let me let me find you a hospital near you that you

could go to where they could give you cognitive rehab. And what I learned was that that term cognitive rehab is used generally. But a lot of the restorative cognitive rehab or neuro plastic cognitive rehab, is oftentimes not deployed in a way that's very well organized. Therefore, a lot of people actually don't get that opportunity earlier on. And therefore, in many cases, they're left with these persisting symptoms, and then the comorbidities stack up.

J James Geering 39:37

So going back to your educational journey, as you've been exposed to this, you've got some of these children and obviously having, you know, challenges in their own way. We when we were younger, we're told that, you know, for example, brain injury, once the neurons are gone, that's it. They're done. You know, once you're paralyzed, that you'll never walk again. What was what was the kind of journey that you took what was some of the things Things that you were seeing as you were parallel learning that you realize with your own eyes, okay? This neuroplasticity plasticity is a thing.

M Mark Watson 40:08

I'm still learning, learning every day. What I learned, here's something that blew my mind. So one of the students that came to the school was from California. And his family called and said, My son had a brain injury of birth. And his right prefrontal cortex, that's where a lot of kind of emotional controls sort of housed in there a little bit and, and some of the visual stuff, visual recognition, sort of stuff that those were slightly damaged at birth. So this, this individual, this child was given a very good report by the biomedical professional That stated, this part of the brain has been damaged, which is problematic, this was done with good intentions, I believe, okay, I'd like but I believe it's based on the data they had, this is going to be problematic for this individual. So we're gonna want to make sure he has support for most of the rest of his time because of these injuries. So that was very early on in his life. He worked with a speech pathologist, they're remarkable humans, these are front line neuroplasticity, this individual provided programming to him that helped him to function at a higher level than his reports would have indicated. So he came to the school and they this family said, No, we need kind of this sort of a program. And I said, Well, it's not really designed for that, you know, we're designed for learning disabilities. So when I go to my managers, and I ask them like, well, let's see if you can engage and long story short, the kid ended up engaging, and I mean, to the best of my knowledge he's employed, he's living independently and living his life. You know, another, you know, example was a study that that we did in collaboration with a great university up here, University of British Columbia. And I remember sitting across the side from some very bright doctors, and those doctors kind of, I was curious, because I'd seen in the schools, these kids seemingly do better. But I also liked science. And Howard, even founder of the schools and co founder of the company I work with, it's a big into science. And he's like, if we're going to do anything around this, let's do some trials first, and see what happens that they'd let the data speak, they see what's real, and what's not. Because we're all biased in this work, we're married to this work, we're biased, in some way, shape, or form. So what we ended up doing is approaching this group, I had just gone through a serious medical thing myself. So I'm like one of those moments of Yamo. I've got to think. So I'm in there talking to these doctors about the research question. And the research question was, can people with persisting cognitive symptoms, following traumatic brain injury? At that point, it was 24 months, two years, improve their higher order cognitive functions, is that possible? And a lot of these great

Doc's super inquisitive, that like these people struggle with attention, memory planning, and organizing, these are executive function type things. And then people with brain injuries, these things don't don't don't change. And then you know, what I thought? Are we what are we doing about it? Like, what if it made me go back to thinking not just me like Howard was instrumental in all this and Barbara instant they were the lead, they were amazing on all this. I was just the messenger. And what I said was, you know, well, how do we know that? Like, isn't just building built on inquiry? And I'm like, oh, maybe the meetings over right? Isn't the meeting, built on inquiry? These are wonderful human beings. I love them all. They're amazing and so inquisitive. They're like, Absolutely, let's see if they show up. Because one of the questions was, these people have brain injuries, they're not going to make it on the west side of Vancouver to show up and do this dosing of a cognitive rehab program. But I think we all have to be very, very, very careful. And this is a reminder for myself, this came up just this morning, we have to be very careful of putting our own perspective on what the value of another opportunity might mean to another person. I think we all have to be very careful with that concept. Because for one person, it might be for a grandmother to have the capacity to play a game of chess with her son, for her might be worth a million dollars. But we don't know that. We're placing our own biases on now, when we do that, and I think we have to be very, that's one thing this work has taught me is that we have to be very careful of our own biases. When we go into into these sorts of conversations and meetings, for someone to walk again, after returning from deployment, that might mean everything. And we have to be very careful, all of us in this work to assume to associate our own biases towards that. And so I was armed with that, and a lot of conviction in that meeting. Because I'd seen these families transform. And I was just lucky to witness it. And I, we put so many obstacles up like that schools, Howard started with Barbara 150 families moved from Australia. Now they love Vancouver anyways, because what's next right here? But But 150 families moved from Australia at Hope for neuroplastic change. And there's no promises either. It's like, there's no promises. It's like, if you can engage in it, then maybe you can, you can change your brain. Everything was always extremely ethical with above, like, completely. But I think we just have to be very careful. With that. I think it's very, very sorry, it's a tangent. But I think it's, I think we all have to be very careful with that. Because when I was not well, when I was ill, I was in a clinical trial. And that the the outcomes that that that that I saw, didn't look right, and there was an opportunity to potentially get a better outcome. But also, maybe change the way things are done. For the next people that had that, and maybe inside of me, it was some level of control. I'm a control freak. It's some little control that I wanted to have, in terms of doing something about it. So I thought about brain injury, I thought about that sort of care was, you know, seemingly providing these options. But in brain injury and brain health, there was just the standard of care was was nowhere near where that was. But I'm optimistic. I'm super optimistic about the future of brain health and brain injury and mental health, because there's that many more assessments coming up now.

J

James Geering 46:42

Well, you touched on the veteran that comes home and all they want to do is be able to walk again, that community obviously has a huge amount of, you know, micro traumas, concussions, TBI is etc. Because people are trying to kill them. And they're trying to, you know, explode things that are in the way to get to the bad guys as well. The only thing that I've heard from a lot of these voices so far that is encouraging is some of the the impact psilocybin is having supposedly on neurogenesis. So through your rise to the veteran community, law enforcement, community, combat athletes, people are listening that actually have structural damage to their brain. What are some of the optimistic innovations that and and tools that are actually there available for them if they find the right practitioners?

M

Mark Watson 47:36

Yeah. So when we think about sort of the psychedelics, it's an emerging area of research, I don't know very much about it. So I can't even comment on it. All I can say is, I think it's for some of the researchers, I know, it's interesting. There's, there's some interesting things there. But I think we have to be very careful when you're when you're doing anything like that, and have supervision and I'm not a doctor, I just have a master's in education. That's all I do. But what what I think is really helpful is, you know, Drucker, right? The classic management guy, what gets measured gets managed. So when I talked to some of the clinics, when we were first looking at doing some of this work, is said you do concussion rehab, I'm like, cool. That's awesome. You do cognitive rehab, awesome. You do aerobic exercise programming, radical, you do mindfulness, meditation, you do all of this under one roof, you're on your rockstar, man. Show me how you do it. How do you measure it all. We call in the OT, when we need the OT. If, if James needs an appointment, he comes in and sees them on a Tuesday. And then if he needs the other one, depending on the CPT code, and it's Medicare, Medicaid, then he can maybe get access to the psychologist maybe. But we got to do that assessment. First, all the while the clock ticking. The left isn't talking to the right. And so what I'm excited about super excited about is the opportunity for agency for the individual to track and change to some of the behaviors. So everyone should just listen to atomic habits. If you don't want to read or just listen to that book. It's great book. And, you know, simple book. So the simplest book out there. It all makes sense. And it's stuff I think we all know, it's just a different voice telling you it and we've done the research, but you are what you do. Right, so, so setting up your environment for a better outcome is smart. So David Goggins talks about arguing with his shoes before going for a run. And I think it's really funny, but it's also really true. Because we're all naturally human. We're literally lazy. We don't want to do the hard thing. But if we want to get better, if we want to improve our brain health, we know that aerobic exercise is very good for that. That is a fact. Now, what's not not included in that is starting a practice of aerobic exercise is really hard for me it sucked, I hated. But it's a fact. So doing that getting some movement in everyday is really good for you, as long as it's safe, right for you within what you can do, some people we've worked with who have spinal cord injury and bikes. But what you need to understand for the listeners, is that Dr. John Ratey wrote a really awesome book, he's another person that should be on your show, may if he hasn't, maybe it's already been on. He's awesome. So he's, to my mind, one of the first psychiatrist to write a prescription for an attention disorder of aerobic exercise. Oh, really? Think about that, right. So that's pretty cool. That's pretty innovative. And he's like, he's a rock star. He's really cool. So that's, that's one thing is is movable, right? Build it into your day. And it dosing that that can that can release this brain derived neurotrophic factor, which is like a Miracle Gro for the brain, which could get you that earned dopamine, dopamine, okay, not free. So you earn that you get the feel good feeling because you earn it. And then serotonin as well all good for the brain, okay, then, you know, do some cognitive training, cognitive training. I'm biased, though, right. But I like this sort of brain X program. But there's, there's, there's other programs out there that are also really good that can help you shape and change your own brain. That's pretty exciting. That's a pretty optimistic opportunity. And what's interesting about that, is that that's also earned. There's a James Jerome is a brain injury survivor, he does a lot of work, he runs a podcast as well as a really neat guy. And his whole thing, one of his slides that I loved, it's everywhere. But there's there's no elevator to success. And I would say there's no elevator to habitual change, either, you have to take the stairs. And and I think that's very true. Because if you're looking to be that more, if you want to be the better contributor to society, you've got to do the work and make the mistakes along the way to learn how to do it a little bit better. And you learn that it's

inside of you. That's the other thing that's really empowering. And that would be my only sort of concern around that. Some of the other sort of silver bullet type. options is that that's may not be reinforcing the behavior that leads to that grit and resilience that leads to the improved quality of life.

J James Geering 52:26

That makes perfect sense. I mean, it really does. And if that ends up being a tool, that's something you can supplement as you're doing things then phenomenal, but it's you know, it's like the other psychiatric meds that are just covering the actual thing beneath the thing, the thing that's actually the trauma, you know, if you just layering all these, these medications over it, you're never getting to the root cause that kind of the pee under the mattress, as they say,

M Mark Watson 52:50

right. But in some cases, we're enabling the person just to function through the day, right? And sometimes that's what needs to be done right sometimes. So I'm not beating them up on that. I'm just saying that maybe if you dug a little bit deeper to what the issue was, then if the person the exciting part is that the person was some guidance, consult that themselves, then one might think, well, if I could do that, maybe I could do this. Right. And that's the work of Carol Dweck that I think it's so exciting, right? The growth mindset work. I think it's fascinating. It's really cool. And it's not easy. It's hard. But it's cool.

J James Geering 53:25

Yeah, well, we'll get into why heart is good as well. You know, I mean, there's, there's a reason, the things take work, just touching on that brain X for a second. When we look at the physicality or lack thereof, of a lot of older people in the US, for example, there's clearly going to be a parallel journey with the brain health as well. And I've heard people talk about, you know, still playing an instrument learning another language, all these things that keep the brain expanding. And even in my profession, you know, we take some of these exams, but the shifts are, you know, unending, and there's absolutely a critical thinking element to some of these calls. But these men or women are so exhausted, we're having a study, you know, textbooks once in a while, we lose the capacity to learn, I tell people, like when I was on shift, I found it hard to read, because I was just so tired. I know, reading is good for you, but I can't like I start reading the page, and my mind would go off somewhere else. So talk to me about that, you know, for people, whether they're first responders or civilians, what should people be doing, you know, on a kind of daily type business to maintain that cognitive health as well.

M Mark Watson 54:36

While so, I mean, there's some really, really good resources out there. And there's some really again, I hate to do it, but there's some good books out there on it, too. You know, what, and I'm biased again on this, but this is why we've created this bears platform is to try to align some of what's best in class and backed by research to help you to become the best view and when I think about the first responder community, this is a group, this is a pretty unique group of

people, right, you have to realize that you're kind of anomalies. So that just acknowledged that a bit, in a lot of really good ways. But also maybe some not as good ways. Because it's hard to have a level of balance sometimes when you just need to be so on and so focused when you're at that call. And so, you know, I think sleep is really, really important for you, it did for this population, maybe you need to revisit how they're planning some of these shifts, one of my family members is a fireman. And we were just talking about this. Because the brain needs sleep. A requires it's not like a want, it's a need. That's when the brain heals, right? It's restoring itself while we're sleeping. You know, I think, you know, you're again, the movement, the body needs that what's the know, hey, number one cause of death? Like I say this all the time, but what is it?

J James Geering 55:58

Number one cause of death? Yeah, in my profession, supposedly, according statistics is actually suicide. But outside of that it's cancer and heart disease.

M Mark Watson 56:08

Yeah, yeah. And I asked a really unfair question. You're right. But it's lack of oxygen. So you've been specific? It's super unfair question. But me, but I heard that said once, and I really thought about it. And I'm like, wow. So if you're exercising, and if you're getting the blood, through your lymphatic system into your brain, you're oxygenating. And that's really interesting. Like, I found that really interesting. And when I had the opportunity to tour around and see some really smart people and all I've always tried to stay in my lane to not ask a stupid question, because they steal my mind on the old football guy. So I'm kind of like, what's that board up there? Like it because then all these different sort of neuro labs at the universities, it tended to be these boards and like, what is it, like everything else kind of scattered? And these are really hard working people. Most of them had running boards. I'm like, Well, why are you guys all runners? Like, what's that about? And then I looked at some of the research, I'm like, oh, I should probably start running. Like, like, it's a pretty good ROI for half an hour of getting your blood moving. So I think movement and exercise and hit training is very good. It's very good as a mental health strategy as well. So I think that's, that's something and I, and I think I mean, I could be totally wrong here. But I think in your community, many are quite active, right? Yeah,

J James Geering 57:25

no, they are. And this is, the problem is that all of them, I would argue, are active when we first walked through the front door of a first responder profession. Some maintain their activity and stay in great shape. There's a middle ground the struggle a little bit, there's there's a small percentage that don't care. And you know, we're probably barely fit when they walk through the door. But that middle ground, it's that tug of war between wanting to be the same shape that they were when they entered the profession, but the environment is set us satis does set us up excuse me for for failure. So when you look at the impact of the lack of sleep, we'll talk about the you know, the the impact on the mind in a second, but hormonally, it destroys your home hormones. As you know, you, you are not having the same level of testosterone and estrogen and same as other ones. So you're getting more fatigued, you're craving some of the shittier foods and caffeine, you've probably taken alcohol and your days off to wind down. So

then you can try and get some sleep and then come back even though your sleep is shit when you drink. So they're stuck in this vicious circle. So the most motivated train, despite that the middle people tend to see a kind of decline. And there's this kind of again, that almost uncle Rico thing like oh, man in Fire Academy days, I was in great shape, you know. So to be fair to my brothers and sisters in uniform, it's not a solely ownership thing. You can't just suddenly get up at 430 in the morning and eat salad and everything will be great. The way that you touched on the way we do our shifts at the moment. Why you

M

Mark Watson 59:00

cancel the play? Can't Okay, no, no, keep going. You're so right. You're so right.

J

James Geering 59:06

Well, I was just gonna say so the way we're doing it is beaten them down. So you know. Yeah, I mean, I've went on a monologue. Have you forgotten what the original question was? Apologize? No, no.

M

Mark Watson 59:17

It's about the what I had asked is in your community, you were relatively active, but some in the middle may start that way and then start to cascade down the other way. Because of the realities of the job and, and and life. So here's what I say that again, another individual I met who would be cool in your show. Martin Parnell. Okay, this guy I met him I was speaking at a conference in Kelowna, BC beautiful, beautiful place right on the lake. Okay, really nice. And I'm speaking at this conference and I'm just talking about some of the research that's been done about some of the hope for neuroplasticity and brain in three and after the my talk, discuss comes up to me another big bald man like me, got this British accent mark, you did a really wonderful job when a great, okay, and he's up next. And and the first slide is is him in like a coma? I'm like, this is like this took a turn. And, and he's like, that was me. You know, I had a massive stroke, multiple heart attacks, you know. And I was doing my rehabilitation, I was a former executive that was retired. And I started it just started to run. And I'm like, Well, why were these like I just, it was part of the cardiac rehab program, do a little bit of running. But he said it's like late 50s. Right. So not a young guy. And, and he's just starts this practice of running. And you start to feel a little bit better and doing it and then he gets a bit of a name gets, runs his first marathons is starts running last week, feels better, feels healthier, feels relatively balanced. And then he hears about this work ties into some of the the community, he hears about the story of this of this girl in Afghanistan, getting in trouble from the Taliban for wanting to run. And he's like, Well, that's wrong. So he tells his wife, website, oh, God, here we go. He's like, we're gonna do the first women's marathon in Afghanistan. We're gonna film it. And we're going to call it the secret marathon. And we're going to show that it's possible. We're going to do this. And his wife's like, Oh, God, I think Martin Maxi wanna, I want to do this. It sounds crazy. But Martin is that guy. Because at this point, he's a damn good shape. He's running all the time. And he's inspiring people like crazy is a huge inspiration in my life. Huge. He we've got a documentary out there called the ages of ages of athlete, he's still running all the time. And you can sign up for the secret three K's I do it every year. It's really cool. It's super inspiring, because it's a reminder of the agency to have an action bias. Here's Martin he

just reads his paper and says, I'm gonna run it. And he did it. And they filmed it. And there's so much risk, but but he's like, the fact that that girl is not allowed to run it wrong. Why shouldn't that girl get the chance to run? Running is beautiful. He's just like, I learned it too late. So wouldn't that be cool if more people could understand the beauty of this and how it could bring community together. So this guy aerobic exercise, building that in can give you a totally different perspective. Because I didn't think I could run 5k Let alone a half marathon. But all that was a thought. That wasn't reality because I didn't really try. So you know, like doing that as a really the way I look at it. Another guy, really brilliant guy, Mark Stevenson, and I think he's at Brigham and Women's in Boston. He's a trainer and he's if there's a lot of work in the first responder communities, a really great man. And his whole thing is about the bank account. It's about this debits and credits and debits, right deposits, withdrawals. And he's like, the way I look at running for me, I'm no stellar runner, I just do it as a practice is investment. So if I ate pizza last night, and you know, was an idiot, I didn't do an ice cream or whatever. I better bring it because I owe it to myself. If I actually believe in myself, I could say I'm gonna do it. But I gotta look myself in the frickin mirror and say, did I do? Did I do what I thought was right, did I do my best, and I gotta try. And I'm gonna make mistakes, and I gotta forgive myself. But I'm gonna try. So that aerobic or hit exercise, you can do this in a way that works for you don't compare yourself to the Instagram stuff. That's not real. Right? Those are filters. It's fake. But you can compare yourself to yourself yesterday. You can do that. And you can measure it. They for people who actually bought in and really stuck to their Fitbit, I bet you they're living pretty good lives right now. If he actually started, I bet you're doing pretty good. But for the people, we're all human, and we're gonna scrap like the first few times I put left in the dirt tape. But like, if you're gonna stick with it, if you're really serious about it, there's ways to do it. And if you become a part of the community, oh man, like talk about a good social media platform. Try Strava. My one buddy who's like a monster on the bike. Now he started riding his bike and during the pandemic because of the stress, he figured he try it. I mean, he calls Strava Facebook for people who do stuff. Right? Like, you know, and I think that's pretty cool. And I think you'd find this is one of the things that I would love to do with the first responder community because I I feel a sense of responsibility. You're taking care of buddy else. You're constantly taking care of everyone. And oftentimes, it's completely thankless. You know, people won't get out of the way of you and your ambulance when you're coming to go save a life. But, you know, building in what our, what our group has done is we just built in a sequence of, you know, being able to measure this for yourself, and giving the agency back over to departments, to first responders, to whomever, so that they can just have a system, should you choose to engage with it, it's possible, you can just compare yourself to yourself yesterday, pre shift, do a little bit of cognitive work, you're gonna have to do some decision making, when you show up to that call, you're gonna have especially the captains, they're going to have to make a decision really fast, they're gonna have to process all the visual Intel, they're gonna have to reason through it quickly. You have to deploy the appropriate resources, do a risk analysis, delegate, you know, and you're gonna have to do that in seconds. So I want the first responder that has that cognitive capacity. And I think the individual wants that opportunity as well.

 J James Geering 1:05:59

So let's expand on that I want to get to the detrimental side of sleep deprivation and decision making and long term, you know, issues as well. But before we do expand on the tools that you have for people out there listening,

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Mark Watson 1:06:12

yeah, yeah. So I mean, our organization, we're Vancouver based organization. And what we did is we learned that people who have cognitive impairment, cognitive dysfunction, oftentimes have persisting cognitive challenges. For some people, when we learn early on, those are people with learning disabilities, for some people they just have may have slower processing speed. For other people, they may not be able to conduct abstract reasoning very well. Well, these all of these things can be trained can be trained up, we just assume many of us to kind of given up saying, well, that's not something we can train out. That's not true, it's fundamentally not true. So, you know, we can, one of the things I think about is like cognitive priming. So I thought it'd be pretty interesting, like pre shift, you do a little bit of cognitive stimulation pre shift. So you're more prepared cognitively for that call. And you also have the agency internally, knowing that it's not some sort of nootropic pill that one had to take to enable them to to be ready for it not that that's totally bad. But if you do something behaviorally on top of that, that's surely going to be better. So that's one thing that's computer based that people could just, you know, log into pre shift, do some of this work and whatever dosing half an hour would be perfect. But for some men, they may not have that time. I think that's really, really exciting, or very exciting. In fact, this was something I'm working with right now, one of the people working in the department right now, is this looking at that technology, because he sees his unmet need. So I think that's a cool opportunity. I think tracking your movement throughout the day, you can just, I mean, if you're wearing the watch, you know, you can they do a really good job measuring that. And remember, it's not about it being the best consumer or commercial grade, necessarily. Remember, it's it's comparing your activity to yourself yesterday, in relation to what your goals might be for the month. That's it, it's an n of one as it would call in science. And then on the sleep side, I defer to the really smart people that I know. But yeah, lack of sleep will impact decision making. Like it's just, it's just true. So you, you, you need to account for that you need to try to account for that. You know, and that's where I think, you know, one of the individuals that I think I may have introduced you to and Pat Byrne, wonderful guy, he knows this inside and out, from top performers, to industrial health and everything in between. And I think for me, where I stand is the integration of these domains. I think it's very important. I go back to the clinic where I saw advertised all these different services thinking wonderful person could go in and get these services and quickly, in a way that's integrated, blended into Vitamix, give me what I need. Nope. In most cases, that's not the case. Well, what happens is the individual is left to try to figure out what they're going to be able to do in those four hours that they have in between work and picking up the kids and preparing lunches and trying to do some working out. How do I do that? It I see why people give up?



James Geering 1:09:13

Well, firstly, it's very, very, very encouraging that there are tools that we can affect our cognition the same way as you talked about, you know, putting on sneakers and running for 30 minutes is going to affect your cardiovascular system. One example I just had a guy an amazing guy can correct Liano he was a challenge for us because we he struggled when he was young academically. He joined the Air Force ended up deploying when he came back, he was in the ROTC program. He actually failed the PT test, and got the basis was threatened to be thrown out. There was a lawsuit to recoup the money. I mean, it was a it was terrible, but he then shifted his mindset. And I think his PT record still stands to this day, so he went from failing to Setting the record is unbeaten after. I mean, I think 10 years or something crazy like that. Then he becomes such an amazing athlete. He becomes a triathlete. He gets nailed on his bike, massive TBI, I mean a long road to recovery, but he ends up with synesthesia. So now he

can smell and taste, you know, numbers and you know, an equation will either make sense and it will taste good or it won't and it doesn't and he'll question it. Now he's the the Air Force's AI guy like one of the absolute boffins. So you talk about, firstly, belief, self belief, you know, what you're told as a child coupled with all these things have been he takes, you know, he's dove into neuroscience. So he's probably using a lot of tools that we're talking about. Not only did he change the way he thinks, and now he, you know, he lectures on quantum physics and all kinds of stuff is crazy. But then applying that mentality to his physicality as well. So I mean, I thought that was such an amazing episode to really see the massive shift that you can make not just mindset like, you know, a mantra in the morning, but actually putting in the work to initially overcome a TBI. And then far surpass upon performance that you ever had prior.

M

Mark Watson 1:11:16

Wonderful. Like, that's the guy right there. And there's many cans out there. That's the thing that those are our teachers, everybody, those are our teachers, the lived experience, the grind, the focused, but also the internal understanding of the Northstar, where am I trying to get to, and then also understanding that you know what, you know, what I've learned, and this is a big thing for your audience, this is where I need help. A lot of people want to help. A lot of people want to be part of something that can really change the way things are done. And then sometimes I forget that, I don't want to I'm possibly Canadian, right? Like, oh, sorry, like, you know, this totally that way. But you know, a lot of people want to be a part of changing things, especially if it's impacted them or is currently impacting them. And they can be a part of somehow potentially changing the way things are done. There's a lot of power in that. And I think that, I think that would be my sort of my ask of any listeners here, if you wanted to be a part of change the way some of these things are being though you and I are connected, right? Like I don't want to see people do that. I don't want to see that. I want to see people understand that you know, what you can get 5000 steps into, you could actually probably do it. Maybe you could get 3000 Maybe you could get 2000. And maybe in a week, you could get 1500 Holy crap. And how do you feel when you do that? You go damn, then like, I walked that far. I did that. And you know what, I felt damn good about it, too. And I'm not going to apologize. And, and I think and then and then you start thinking, holy smokes, maybe you know, maybe right now I do need some help. Holy smokes, I'm becoming you know what I need to talk about that thing. I gotta talk about that thing. Because you know what, I could walk, I have a guy who could walk. I'm actually a guy who could walk now. I'm not the guy. I'm not this fitness I was when I was 22 and enrolled. But I'm, I'm 48. And I'm doing my best. And I'm starting to walk again. And I'm starting to do it for me. And I'm not even going to apologize about it. I think that's awesome. Like, I think that's exciting. And, and the kids of the world, that's the message we need people hearing. But the problem that I see out there is we're lacking the system. because not everybody's can can just superstar, right that like that's a rockstar, I'm more than average guy. So, you know, like, I would need a little bit of a system to help me to engage in it, and then measure my track my progress and understand that the first little bit is going to be really hard. Because changing behavior, atomic habits is going to be extremely hard. But step by step, we'll get there and get clear on your goals. And you can do this and that's where I need help. Like, like with our organization, we want to help more people, you know, whether they're in hospital systems, whether they're, you know, first responders when they're there. People that are aging, you know, we've worked with people with the aging brain, and they're saying, you know, what they you know, they say, what do they say, Right? Where do you go your aging, take it slow, sleep lots, right? Take it slow. Okay, well, what what accelerates aging? Everything we're doing, right, so what is Martin part? What's more important? I'll say, Nope, I'm gonna do this. And I'm gonna run with purpose. And I'm gonna run

as a servant leader. And with each step, I'm helping girls in Afghanistan, I'm helping the quality. That that's cool. And it's possible for our own little for our own little Afghanistan for our own little whatever it might be. To play with the kid again. I play on the ground with our grandkids again, you know, like that maybe that's our step. And you know, I have some regret in my life with family members who struggled with some of these things. And I tried to push to get them to move a little bit more, and I couldn't, I couldn't do forgive myself, because ultimately, it's inside of us. But if we can help people by telling the stories of the cans by telling the stories of the Martins by telling the stories of the of the of the industrial athlete, that face to face the challenges and got through it, and then sharing that Matt Johnston is one person I want to connect you with to he's I don't know if I've talked with you about him, but he's unreal. He's a first responder, fireman, but a trained psychologist. And so he left his clinical psychology practice to join the fire department. And then he realized the challenge that you've uncovered so incredibly well. The mental health challenges inside of some of these departments and the opportunity to help more people. And he's educating like crazy right now. And I'm so proud of what he's doing. Because he's he's, he's helping me, this is the important part that you do so well, is you're helping people to change their own lives, and narratives, the agency, that's the agency right there, you're you're providing the the testimony and the resources to help people to understand where they might be at so that they can then change their own lives. And I think that's a beautiful, beautiful thing.

J

James Geering 1:16:25

Well, I mean, thank you. But this is this, you're part of this, you know, this is amazing community. And I think the world of the storytelling element that has clearly been passed down for generations, in pretty much every ancient civilization, since the dawn of man that we lost a little bit is what's happening here. I mean, we've, you know, we, you and I are talking, and we're getting into neuroscience a little bit, but you're also telling these anecdotes, you know, and it's in a miton story, and some of these other people that you talked about, that is what resonates with people, and then you add the tools that people are bringing the solutions to the problems, like for example, some of the things that you're offering to improve our cognition. This is what I love about this whole thing, you know, this, this this community, because it is a community is all these minds coming together all these guests coming on for free, you know, I've been asked for for money on a few and they haven't come on the show, because I'm not a wealthy man. So everyone else has come on, you know, is donating their knowledge, their their life story, whatever it is, to bring solutions to the problem. So, you know, being the conduit being the person that connect the person who needs the help with the person who has that the solution to that, it's been amazing watching this over the last seven years.

M

Mark Watson 1:17:44

It's so cool. And you're doing what you're supposed to be doing. You know, I can tell, and, and your purpose is so pure, so it's an excellent thing. And, and I've learned, I've been fortunate to be surrounded by some really interesting people, and I just want to lift them up so that their impact can go and help more people that really need it. You know, and ultimately, for me, it's, it's, you know, it's, it's helping people to understand that change is always possible. And your thoughts will direct your actions oftentimes, right. So, you know, I really like, you know, the, the work of Steven Pressfield. Right, that, you know, we unbelievable, you know, that the whole concept of the resistance being self imposed, was really a mind blower for me. I had heard

about his work for years. And I was like, wow, this is so true. And so prevalent for me, and for I'm sure all of us, you know, that the resistance can be self imposed. And, and it's something I have to come back to and remind myself, right, because if we, if we don't believe it's possible, then of course, it's not. Yeah, exact, but in some cases that, you know, right. There's some cases that might be you know,

J James Geering 1:18:57

absolutely. Well, that's how I feel even with with the shift. So you touched on this, you know, to me, the gold standard in the fire service should be at least 24/7, meaning you work a full 24. Because I don't think there's a way of getting around that, particularly in the fire service, we have so much to check out. We have so much training all these things, I just don't think you could do it easily in a 12 hour shift. So you have a 24 hour you have a place to sleep between calls, you know, you're you're getting some rest, but then you give them enough time in between these shifts to actually recover. But we believe our own lie, you know, and we will Oh, that'll never happen. Well, no, it won't, because you just said it will never happen. Like you said, you have to ask the question. Why is the person bagging my groceries working 40 hours a week and the person who wakes up at three in the morning driver's license sirens to a fire crawl through a bedroom window, pulls out a child and then works a pediatric code on that child working 56 hours plus a week you know what I mean? We we've we've told ourselves this myth for so long we believe our own lives so if we as a profession have to take a step back and advocate for ourselves and the people we serve, because not only will changing the shifts positively affects our longevity, it will actually, as you touched on earlier, it will improve our cognition, therefore, our ability to serve the people that we protect in our communities.

M Mark Watson 1:20:19

Yes. And they're like, so I'm sure in your, your audience, you have many people that want to help make that happen. So let's just do it. I love it. That's how things change. Just do it. Like, the I don't know, if you saw the new air movie that Michael Jordan to movie, it's really, I mean, it's very Hollywood. But the whole thing is really interesting. You know, the way it was, it's a story of true innovation. That, you know, this Jordan guy was seemingly different and quite interesting. And, but he didn't fit in with that how they do business doesn't work. It doesn't fit the model. And the one guy, Matt Damon's character, had to have the courage to say, we just have to do this. Like, this is what we're otherwise I'm not here. This character's name was Sonny. And then Jordans mom said, yeah, we'll, we'll work with you guys, but no percentage of revenue for every shoe. And then he's like, Well, now there's no way this this can't work. You know, so the Matt Damon characters like we almost did it. He's gonna have a great career and almost going to work. It's almost almost there. And Matt Damon, the resistance go in that moment. And then Matt Damon goes to Phil Knight, played by Ben Aflac. And Phil Knight goes. We built this company taking risks. Just to go close a deal. Without that, when you think about those, it's silly things. It's a shoe. But like it, I think, I think it translates, you know, have we not had Barbara Aerosmith yoga not created this remarkable program. A lot of kids, a lot of adults today wouldn't have been employed, wouldn't have been parents, maybe some of them wouldn't have been alive, because she decided to treat her own cognition with her own program. So when we think about the shift thing, I'm sure you have so many people out there that have that that want to make this change happen. This is that first mover thing that's hard, right? It's taking that first step because you feel so alone naked. But I think you'd be alarmed at

how many people are in that line right beside you. And then you could the beauty of this is you can study it, that's the that's the exciting part is you can really look at the data, dig deep into the data and not be married to what you believe the results should be. That's the hard part. For all of us. I want to control things, you have to just let that be clear on what you're the question you're asking. And then be clear on the protocols of measurement. And be clear on the dosing, and then let the data speak. Because it will likely not be what you think that's the hard part. You know, but it's good, it will move the field forward, it will ultimately help those amazing humans that are doing this work, live a better life. And that's that's the point, right?

J

James Geering 1:23:13

Absolutely. Well, for people listening, I'm sure they're fascinated now, where can they find access to the tools that you offer?

M

Mark Watson 1:23:22

Yeah, I mean, you can just go to our website, I mean, we're just a small organization we're looking to grow. It's [www dot Avi wellness.com](http://www.aviwellness.com), as an acquired brain injury, wellness, we kind of we work with, you know, everything from kind of private clinics, to we're working towards getting into the performance athlete and industrial athletes face. So if there are, you know, organizations that are interested in that sort of thing, and providing this sort of a service to, to their employees and staff, you know, you know, no promises, it may work, it may not, but give us a call, we want to help. Even if there's resources we can pass along, you know, we can do that. And, you know, James, you always know how to get ahold of me. So we're getting but you can get you can find us online there. And, you know, there's a toll free number you can call to if you're more of a phone person, that's 1-833-414-8958. And then you can just reach out to us through the website.

J

James Geering 1:24:16

Beautiful. And then what about the brain mastery podcast? Where can people can find that?

M

Mark Watson 1:24:21

Yeah, just Google it and you see my smiling, smiling mug there with it with a coffee mug this go to this day, go to Spotify. You can go wherever you get your podcasts that we're on pretty much all of them. Just type in brain mastery podcast, you did an amazing episode on the work you're doing. So thank you for that. We had a remarkable TBI survivor on a recent episode named Rob that told the absolute remarkable story of recovery is certainly leadership and you know anyone interested in that kind of space of brain health you know, do check out the podcast subscribe and download again. I do it just labor love, wanting to help you At least amazing stories of people that are changing the world in their own way.

J

James Geering 1:25:03

Beautiful love to listen to. Debra one answer, thank you. It says it's easy, where would you be?

Beautiful love to listen to Rob's one answer, thank you. It says it's scary, where we're having seemingly a high prevalence of strokes with, you know, men, our age men is specifically that I know. And so now there's probably some people listening that are, you know, recovering from that, that are probably looking to improve cognition and try and work on some of the neuroplasticity on that side, too.

M

Mark Watson 1:25:26

So, here's the thing, if that's the person hearing this message right now, don't give up. So you made like the remember that I choose to believe we're in a world where people are doing the best with what they've got. Right? But but there's a good Brene Brown says it's not Brene Brown originally, but she recently used it is choose to listen to the person that's been in the arena. Okay, so they're working in the same service as you if they have lived experience, that opinion may be more meaningful than the other one. So don't you give up? You know, those are the people I want to hear from that they're struggling now. Not that we can necessarily help. But we'll work tirelessly to connect you with people that might be able to help you somewhat, right. Don't you give up if you have a goal, there's a Canadian hero out here. Here on my life, he's given so much to the world, this kid Terry Fox, I don't you've ever heard the name for American listeners. This guy's a beauty that that's a Canadian term for awesome. And this kid was diagnosed with cancer at like, 19, I believe something like that, us at Simon Fraser University, and he was a basketball player. And he's like, he's mad, right? Pissed about this whole thing. And he's like, we need to change this man. Like, there wasn't a lot of resources. It wasn't like, he's like, we're just gonna, you know, we're gonna raise awareness for childhood cancer. I'm just gonna run across Canada. Brother gets in the car, but he gets into this van. They just start Greg. He starts running across Canada. Oh, by the way, on one leg. Yeah, he had his leg amputated. And that's this the story of, you know, resilience and what he's done since sadly, we lost him. But he's an absolute hero. And he's in it totally. He was a totally introverted guy quiet. He's just pissed about cancer. He's like, this needs to change in my lifetime. I'm gonna do what I can with the time I have to do this to do something about this. This run happens annually around Canada, he's raised hundreds of millions of dollars. And he's helped to cure it funded cures for for tons of cancer. So you know, the agencies, there are a lot of us in our own way. Terry's a very extreme example. But you know, there's ways around it because it builds a team, right? That's the thing. So

J

James Geering 1:27:49

Yeah, actually, Terry's name came up, I've got a friend Sachi. Lottie, who is Canadian law enforcement officer, and he is going to be running across Canada. And I can actually see Terry statue in my mind. So I know exactly who you're talking about.

M

Mark Watson 1:28:04

Oh, 100, that guy's that sent me his information, if you don't mind, I want to support. Like, it's awesome. And I mean, that's the thing I really want to help, you know, the police, the fire department's happy, even though my mind goes to helping the insurers find access for this, because it's gonna make sense for them. But if there's a way that, that we can play a small role in helping them I'm in because there ever was, everybody's running their own little race, right.

And it's your race. So you get to pick and, you know, just do the best you can with what you got, and utilize the resources that you've got, you've got an amazing community with James here, reach out to him, he's the kind of guy that will get back to you too. Oh, I hope I didn't.

J James Geering 1:28:51

I just ignore everyone's messages. I delete them. You have a horrible process.

M Mark Watson 1:28:54

Here, kind of guy, man. Like they're rare. But you know, we can all start to start to strive more towards that you inspired me if I first met you, man, I'm like, your mission, you left this this job, because you were tired of seeing what you saw. So you had to be the change you wanted to see. So you started this thing out of your house, probably in your own way. And I think it's awesome. And I think we can all learn from that.

J James Geering 1:29:18

Well, thank you. I mean, this is the thing I'm this network is now other people that want to, you know, want to be the change, you know, so all I did was, you know, again, definitely a brief a brief kind of move to go away from the safety and security of the benefits of the fire service. But ultimately, you know, it wasn't a decision that was in my hands. It was, you know, after X amount of funerals, it was kind of like Terry, I'm like, I'm sick and tired of this. So, and I think a lot of a lot of people that have come on the show at the same in their own realm, you know, you are with your realm. So I'm sure people listening would love to kind of connect with you specifically. So are there any places on social media that you'd like to interact?

M Mark Watson 1:29:58

LinkedIn? Probably you can just find me They're Mark Watson ABI wellness, that's probably the best place to find me. I don't do Twitter. And, but that that would be the best place to find me and then honestly emailing me is easiest way, just m Watson Navi wellness.com. And I'll respond within 24 hours. You know, if it's a referral you need someone needs help. Or if we can help with some of your kind of health programs or wanting to look at that, we'd love to hear from you.

J James Geering 1:30:28

Beautiful. Well, Mark, I want to say thank you, we could talk for hours more, but we'll have to do a part two down the road and revisit some of the other areas. But again, firstly, thank you for connecting with me and bringing me on the podcast and I'm so glad we got to kind of turn the microphones around, you know, that you've, you've given us hope, you know, hope whether it's someone who has a TBI or a stroke and is actually trying to change the the anatomy and physiology of some of the damage within their in their brain and or simply cognition. So many of us have the brain fog and you know, some of the diminished cognition

through our service yet we are the ones that people are hoping we're going to be on our absolute a game when the when the tones go off. So I want to thank you so much for being so generous with your time and bringing some of these amazing resources to the conversation.



Mark Watson 1:31:19

That's my pleasure. And yeah, this guy, keep keep listening. Keep doing the work you're doing. Everybody, just do the best you can with what you got. And don't be afraid to ask for help.