How Mental Health Impacts Fertility Transcript

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Introduction to Dr. Christina Bjorndal

Welcome back to the Super Fertility Summit. I'm so excited to introduce you to today's speaker, Dr. Christina Bjorndal. Dr. Chris, as we call her, brings her lived experience with depression and as a suicide survivor and also with anxiety, bulimia and bipolar disorder type one, as well as her clinical training as a naturopathic doctor along with her training in mind body medicine when striving to address patients mental health concerns.

She also has a practitioner program to help practitioners in the mental, emotional, and spiritual side of their work and helping others and and also managing themselves as they are helping others.

Having overcome many mental health challenges. Dr. Chris is a gifted speaker and bestselling author who has shared her wellness philosophy with platforms such as Mariel Hemingway's Out Comes the Sun Show, The Jenny MacArthur show, the International Bipolar Foundation, and many summits and docu series.

Welcome, Dr. Chris, I'm so excited to have you here today. Thank you for joining us for the Super Fertility Summit. Well, thank you for hosting it. It's so important, such an important topic.

It really is. And more important than ever today and every year growing in importance. So thank you for that and for being a part of it and for bringing your unique life experience, your very unique and important experiences in your own postpartum period, which I hope and believe that you'll share with us today, that the kinds of experiences that we don't talk about enough.

And thank you for bringing your unique professional background, really specializing in mental health and the mental and emotional and spiritual aspects of helping patients, clients and students.

And one of the things that we're going to dive into together today, that I think is so critically important is intergenerational trauma. And before we get into the topics that I really want to cover with you today, Dr. Chris, I always love to start from the end.

You Are Love and Healing Is Possible

And so my question, my first question for you is if there was one thing that you hope that the mama, dada, human of any gender, listening to our voices right now will take away from the conversation that we're about to have.

What's that one thing? That one thing is that you are love. Yeah, you're here and you have a reason and a purpose and a and a sole intention as to your beingness on the planet at this point in time.

And even if you're struggling, even if you might be listening to this and you've been trying to conceive for years, please don't lose hope. There's there's an opportunity for every single one of us.

We know the human body knows what to do. We just have to get the blocks out of the way and, and, and those blocks can lie. And the physical, mental, emotional or spiritual realm that you can heal and you are whole and you are love.

I love that so much. You are in love. I think. How world would that how different would the world be if each one of us were told that and reminded of that every single day of our lives, starting from in the semester before we were conceived and all the days, and in the valley and beyond.

Right. It's so beautiful and that even when there are moments of feeling hopeless, whether it's specifically because of the fertility journey or some other obstacle in life, to remember that your soul's, your soul has a purpose here and is in the perfect time and place.

Thank you for that gorgeous reminder that all of us need to hear at one time or another. So thank you so much for that. Thank you. And you said something else which I love and I want to underscore, and it's actually a really common through line in the conversations that we're having in this summit, which is that the body knows what to do.

Your body wants to be healthy and wants to be fertile, and your body knows how to be healthy and how to be fertile. You're also your brain, and your mind and your spirit know how to be healthy and know how to be fertile.

And reconnecting with that knowing inside of ourselves and that trust in ourselves in our bodies. So thank you also for that beautiful reminder, Dr. Chris, I really appreciate that.

Dr. Chris, you have had a really incredible journey in your own life and a really incredible experience in your postpartum period. Would you share a little bit and maybe, maybe it goes back to how you started your life even, right?

Yeah, actually, let's start it. Let's start with that, because I think it all flow through the whole conversation. So so basically I'm adopted. And one of the things so I printed this I'll just show it to you.

Hopefully you can see it I don't hopefully you can see. Yes. We. Yeah. Yeah. So what this is is basically you see that heart. Yeah. That heart is you as a, as an egg in your mother's ovary when she was in your grandmother.

Yeah. We teach that 20 week old fetus. Yeah. There you go. So this is where it's, this is that's from the this quote that I'm going to read you is from Mark Walden's book.

So it's it's his book is called It Didn't Start With you. So basically the emotional history you share with your family began even before you were conceived, when your grandmother was five months pregnant with your mother, you were there as an egg in that ovary of her.

So whatever your grandmother experienced, her sadness, her traumas, her grief can become your emotional inheritance. So I opened my book with a discussion about the in utero experience of the biologic mother and the impacts that can have on the developing fetus.

And we know now that if a mother is having to make a decision about keeping a child or not, that's a stressful situation, stressful time.

Adoption, Early Stress, and Mental Health

So that fetus is being bathed in cortisol and hormones that are connected more to stress. And research shows that children who are adopted have greater, mental health issues, addiction, depression, anxiety and higher suicide rates. So.

So I came into the world a little bit wired for anxiety and stress and really on high alert, on high alert. And I go through the world and, I, you know, I am adopted at three weeks old.

And an interesting little side note was that I, I, I don't know one. Well, I'm sure I was in care. Obviously I was cared for. I wasn't, you know, I was cared for, but my parents don't actually know where I was for that time frame, which I think when you think of the critical time of that first three weeks of an infant's life.

My goodness. Right. So nevertheless, I go through the world and then I get diagnosed with a lot of mental health conditions. And so, you know, as you mentioned, I a I've had three suicide attempts.

I had I've had six psychotic events, I've had cancer, I've had a lot of lot of curveballs thrown at me, if you will. And the, the really, you know, interesting thing is that when you get those diagnoses, you, you get the message that something's wrong with you and that, you know, you've got this deep, dark stain and that healing is not possible for you.

And I really want to share that message that that's just not true. This is absolutely not true. But the organism that is you has to it can heal. When we put the right environmental context in place, and we look at all the pieces of the puzzle physical, mental, emotional and spiritual.

So when I became pregnant, what came up for me, which, you know, again, I didn't I didn't expect this. But what came up for me was a lot of emotional angst and stress about the connection with my biological mother and my goodness, like sort of how could she, you know, like, how could she? Yes.

So yes. And at this point I'd already met her. Like, this is, you know, this is 2006 when my son was born and I met my biological mother in 1992. So I had met her.

But anyways, the point is that things will come up when you're pregnant. That you don't. You can't. You've never been in that position before. So how do you know how you're going to be?

You don't know. So that's a process. You know, do a little bit of emotional processing, around. And still, you know, I'd already done a lot of work on my on my, trauma, wound of abandonment.

So, and then postpartum, what happened for me and and as somebody with the diagnosis of bipolar disorder type one, you get told. And I have this chapter in my book called The Myths of Mental Illness.

And there was 23 myths that I things that I was told that I've busted, if you will. And one of them was, you should not have children if you have bipolar disorder.

Oh, you were told not because you are. You're likely to pass it on is that way. Is that I think that yes. Because they believe that bipolar disorder is genetic.

So yes. And also the trauma, not the trauma, but the, the stresses that can come with a pregnancy and the delivery. I mean, it's an, you know, it's an intense yet beautiful, glorious time.

Can set off either a very a high or a low. Okay. And then the model changes subsequent to that. And. Exactly right. Yeah. That's like so my pregnancy was lovely and my, my, my delivery and birth you know does everything doesn't didn't go perfectly as we plan.

And that's an important message for women. This usually doesn't. Usually doesn't end up. Perfectly as you. Yeah. Yeah. Do not get attached to that. The only outcome that matters is at the end of the day, you have your child in your arms and you're and you're fine.

Those that's how you get there, you know, of course we all want the perfect natural water birth, right with with any AI playing in the background. But that's just not what happens for all of us, right?

So, but what I did not expect was a psychotic event. I did not expect a psychotic event, because I felt that I was healed from bipolar disorder up until that point.

And this is where you know, it. It's it's stress is a really big piece of the puzzle. And sleep and those two things get extremely compromised postpartum.

If you do not have support in place. That's right. I mean, even when you do have support, there's some amount of sleep deprivation that comes with having a newborn, especially if you're going to be breastfeeding.

Because even if you have someone who can wake up with the baby, you still have to pump milk to maintain your milk supply. Or most people do so there is some element of it that is, I think, unavoidable, but it's definitely a million times harder without the right supports in place.

And we really lack those in our modern world. Yeah we do. We really do. Yeah. It's so crucial. And and there's a lovely documentary called When the Bough Breaks.

Have you, have you seen it? I haven't seen it. Yeah. It's it's lovely. I'm not sure you know where it's available at this point in time, but it does talk a lot about postpartum psychosis.

And you have bipolar disorder to have postpartum. So no you don't. That's right. Yeah. So so my, my first, two years postpartum are very rocky and rough.

but you know, now I'm 16 years beyond that. My son is going to be 18, next month, so happy birthday. You know, he's an adult, you know? Yeah. So I just want people to know that the journey to to conception, you know, it's possible for you.

Like we said earlier, it's just a matter of really unveiling and working through all of the pieces of of the health puzzle and not just you, the women, the men too.

It's not this is not just you're not 100% responsible here. Women, it's men have a part to play in this too. But we tend to bear the brunt of of most of the fertility challenges like it's on the women and it's both people.

Absolutely.

Pregnancy, Postpartum, and Bipolar Disorder

And I, I, I'm glad you bring this up because I do think that we're getting better at talking, recognizing and talking about it. But I still think that we have a long way to go when a couple is having difficulty getting and or staying pregnant.

I think that the most knee jerk reaction is to look at the woman first. When the fertility challenges are equally likely to originate in, assuming it's a heterosexual couple and someone providing egg and sperm in the male and in the female.

And then what people don't know is also a third of fertility challenges originate at the couple level, which means how the couple combines with one another.

So it might be that either individual alone looks fine, but for some reason, the way that they come together and usually that a situation of, both people creating a condition of sub fertility that they can't, can't get over the hump, but maybe in another partnership they'd never experience that sub fertility.

So and then there are the 10% unexplained fertility challenges, which likely fall to some degree at the couple level as well. So that's a huge contribution of the male, right?

I mean, at least 65, if not 70% have some contribution of the male in that equation. So thank you for that because that's very, very important. You you have alluded already to intergenerational trauma in the sense of talking about what it's like to be an adopted person who was clearly in a stressful in utero environment because there has to be inner turmoil if a pregnancy is isn't planned or if someone's contemplated whether they can keep, they're going to be able to keep the baby or not.

And then, of course, you have the first three weeks of your life or you don't know who's caring for you. And that really, like, makes me want to cry just thinking of a newborn, like, kind of floundering out there.

And I too was a newborn floundering out there because I lost my mother at birth and we went into foster care, for a period. But, This is this is something that we don't talk about enough, and we don't talk about its role and difficulty getting and or staying pregnant and having a healthy baby enough.

And at the heart of it is the family of origin. Right. And you've already also alluded to that. And in the Prime Minister protocol, which is the system that we use to AP genetically help people overcome fertility challenges and have their super babies.

We do something called the Prime Minister genealogy. And we we do this excavation of these familial maternal paternal line patterns of fertility and pregnancy and motherhood experiences and beliefs and it's like the messaging, the cultural messaging, the the familial messaging.

But I would love for you to talk to us more about the the hard side of what gets passed down within families. There are good sides to we call that intergenerational bliss.

And thankfully we have a lot of power to to to be this domino for good in our lineage. But talk to us about intergenerational trauma. We. Yeah. So it's it's really important to understand that at least going back three generations, it is important because the so say there was a trauma so trauma could be could be losing a child.

It could be, war suicide, those big, big T things. If that happens in someone's life and they don't resolve it and process it 100 100% to completion. And many people didn't have the the, the tools, the knowledge, the bandwidth, the financial means to do that.

30, 20, 30, 40, 50, 100 years ago. So what happens is the emotional residue goes somewhere. It gets fragmented into the tissues of of the body. And this is what can get passed down.

And so you know that a clue that perhaps it didn't start with you is when you are triggered or have extreme emotional reactions to something in the present moment, it can mean that there is this unresolved emotional residue that hasn't been processed completely yet.

There's a line that that I don't know who the quotes attributed to, but it's that, you know, if it's hysterical, it's historical. Right. So so in my case, for example, or you and in your case too, which is so powerful, we, we got disconnected from the connection.

The only connection we knew was that heartbeat and rhythm and movement and voice and and everything of that in utero experience. That's our only experience as, as fetuses, as developing humans.

That's that's our only experience. And then when we come through that birth canal and exit into the world to be disconnected from the only connection we know that's powerful on that develop still developing.

So. Yeah. Right. Yeah. That's powerful on an almost 50 year old. So let's be honest, I know. So so the emotions so so I I'm very, very, very blessed to have spent some, one on one clinical time with Gabor Matei, who's a, who's a physician who's written, many books.

One, one is called When the Body Says No, the Cause of Hidden stress. The other is most recent, is called the Myth of Normal finding sanity in an insane culture.

Intergenerational Trauma and Family Patterns

he's written in the realms of hungry ghosts, close encounters with addictions. I should be getting a kick back by promoting all his work. When I sat with him, he asked me how Chris, why so much suffering?

Why so much suffering? Oh you know. Yeah. Motion have you disowned. And I'm like, oh, you know, I said, well I said I no I'm comfortable with all my emotions. Right.

And he says, what about anger? And I said, what about Edgar Wright? And he's like, well how are you with that? And I'm like, I don't do anger. He goes, let's go there.

Right. So then he said to me, what do you think the emotion would have been in your implicit memory as a newborn? anger. Okay. Not anger. Will that rage and anger?

I mean, you know, I don't obviously I don't have a memory of this, you know, this at this as I'm talking to you now, but but you can imagine that experience for that newborn, right?

You can put yourself in that place as a newborn. You were crying and calling your cry as a call for your love, right? I was going to call my book A call for love.

And I love that so much, by the way. Yeah. And thank you. And so that's this thing that cry was a call but the call didn't get answered. So then what do you do as a, as an organism.

You kind of you get defeated. Right. You're not going to I mean I'm sure eventually somebody must have come when I cried. Right. Eventually it must have come.

But it wasn't the same person that I was connected to. So it's really powerful to put yourself in that position. And then how do you heal from that? This is where you.

I've done, compassionate inquiry, psychotherapeutic training. And it's where we, we, basically bring compassion to that younger self. You could call it inner child work for a simpler, you know, explanation.

If we look at ourselves as, as, you know, trees, right. We've all cut open a, we've all seen a tree in nature. That's that's cutting. And all the rings represent a year of that tree's life.

Yeah, we are like that. We are like that as as humans on the outside shell. You see me at 57. This is my outer shell. But when there are all those 57 rings that compose me as a as a human that can, that have comprised me and anything that I have suppressed or repressed is still in me.

And it comes up in the present moment right as that trigger of that trauma. Right. And that's where we go back and ask, when was the first time you, you might have experienced that?

It's it's really powerful and and beautiful work. And I encourage everyone to work with someone on the mental, emotional, spiritual side. Doesn't have to be a compassion inquiry practitioner.

It can be a family assistance practice practitioner and I at best, or Family constellations or eMDR. I mean, there's so many beautiful, you know, Peter Levine's work.

I mean, there's Tara Brock. I mean, I could I could sit here and spend our whole time together listing practitioners that have helped me, you know. Yeah.

And that's the point is that there is people who can help you there are out there. And we just have to be open to it all. And and this is why I love what I do as a public doctor, because we work in a realm of medicine called homeopathy, which really looks at, we call it Maya isms, which is this intergenerational piece of the puzzle.

And, and once you, you know, things that are lying in your unconscious mind, your subconscious, in the recesses of your mind, they are they're part of you, but they're kind of running the show until you unconscious, till you bring them into your conscious awareness.

And it's from that place of conscious awareness that you can then bring the light of healing to these parts of yourself that have been fragmented off.

So, so beautiful. I'm wondering how the woman who's listening to your voice right now and having a moment of recognition, reckoning and recognition that perhaps some of what she's facing in her path to having the baby that she's yearning for is her history within her family and an intergenerational pattern or trauma.

What what would you encourage her to do right now? If she's having this moment of recognition like, oh, this is really relevant to me. And if if you're resonating with what I'm saying and you acknowledge within yourself that that there even if you have a history of depression or anxiety or bipolar disorder or whatever, the label an eating disorder, these are clues that there's a psychological component to your health that may not have been addressed yet.

So my, my, my encouragement would be and my, like applauding you forward on your path to healing would be to work with a skilled practitioner in this area that you resonate with.

Super important that you resonate with them. Absolutely. Thank you so much. That's so beautiful. And one more question about that one thing that I get a front row seat to lots of relationships in the course of my work, I don't think of myself as a relationship expert, but it comes with the territory of helping people overcome fertility challenges, or even just people who want to optimize to have their super babies.

That if someone's having their super baby in the context of a relationship, that their relationship requires work and attention. And one thing that I've observed is that there's often a lack of safety in the relationship or some somewhere in the home, and that often that can originate in differences or disconnections in the family of origin experience.

So maybe one person comes with their own experience of intergenerational trauma, and the other person comes with a different type of experience. And when they come together and as you say, humans are operating subconsciously from those those experiences of trauma or those places of trauma until it comes into conscious awareness and we can process these things and counteract them.

And so what what do you recommend for a couple who is struggling to connect and find a common ground, because they're coming from these different subconscious places that are in able to line up? Well.

Yeah. Well, we want to understand that we attract and are attracted to, people that we that sometimes might mirror our, our trauma environment that we grew up in.

And one of my teachers, she, she talks about how, subconsciously she met her husband and he was displaying some sort of woundedness, if you will. Now her her way, she walks through the world was, hey, I'm a I've got it all together.

I'm a superwoman. Perfect. You are wounded. I can fix you, right? They ended up getting divorced because it was his woundedness. And her, her her also her the subconscious woundedness in her as well.

It wasn't actually the perfect match, because at the end of the day, no one can heal anyone. You got to heal yourself. Yes. So your partner, right, your partner if you're triggered and if you're if you.

Because show me a couple that has not had a little tiff here over the toothpaste cap. Right. So these little things end up being big things, especially with that oxy toasting wears off in the relationship, right?

When that love hormone starts to fade down. Boy, that's that's a surprise for you. All right. When that happens. But now we're two years into a marriage.

What are we going to do? We gotta slug this out. No, right. There shouldn't be any slugging it out. So here's the thing.

Relationships as Mirrors for Healing

Your partner is a mirror. And you know what? There is no other in the room. We are all one. We are all one. Now, this might sound totally bizarre for some, but at the end of the day, there's only one person here on the planet and we all share the same complexities.

We all have the same makeup. It's not the same. Obviously, I didn't come from the same womb that you came from, but we've just shared that we both have very similar biological trauma. Right.

So what I mean by we're all the same, I mean that we all share the same range of emotions, right? That what's happening within me is not any different, that what could happen within you.

And so when you see another soul and you're with another soul and they're showing you a part of you that you don't want to look at. That's what you need to look at.

Just like how Gabor said to me, how are you with anger. And I said I don't do anger. Yeah we know that. That's something I've disowned in myself and I've disowned it because it's so painful.

It was so painful to be birthed in that manner. It's hard to look at that. But we must. We must what we don't face you. You're going to suppress it and repress it, and then it's going to come out in other ways, like cancer, like mental illness, like infertility.

It's going to show up until you face it and your partner is your mirror for what you're not facing. I may have gone off on a little bit of a tangent there.

I'm sorry. No you didn't go off on a tangent at all. I think that I think that sometimes it's easy to forget that while we're intimately aware of our own histories and traumas and experiences, we we forget that the people around us come with their own version of those things as well.

And, there's something called the frontal attribution error in the social psychological sciences, which is, you know, when I behave a certain way, it's because of circumstances.

And when you behave a certain way, it's because that's who you are, right? And we, we we forget. So I think that it's really powerful to not only recognize this in ourselves, but also to be able to recognize this in the the people around us, especially the people closest to us.

Now, that doesn't mean, you know, accepting bad behavior and making excuses for for people and not holding them accountable for who they say they will be in, who they say they want to be, etc.

but it's just having a deeper awareness that, most of us are really, doing the best we can with the knowledge and resources that we have available to us in the moment.

Just like you were saying, that 40, 50, 60 years ago, many people didn't have the understanding, the bandwidth, the financial resources to be able to process and deal with the things that they were experiencing.

And I want to say that even today that describes the majority of the population and the even the majority of the Western population, which we think of, you know, as being so affluent, but people are so busy.

surviving, working to live and, just scrolling, you know, being in busyness, even outside of being so busy and that people have very little disposable income on average in the world, that people still don't have a lot of opportunities for deeply, truly and deeply processing what they've been through.

And then I think another piece of that is like, how do you ever know you're 100% at completion? The other day, I was, I was I've been dealing with something really difficult in my professional life.

It's it's turning out to be such a beautiful blessing as these things often go. But man, it's been horrible. And, and I was thinking like, oh my God, I'm.

I really wish I could see my mom right now. And I was at my, my older son's, soccer game and, the, the mom and I thought that this white butterfly came by, which is how I think of my mom.

This is like how I see her. And I was like, as if she was like, I'm here. Don't worry. You know, you're not alone. And I thought to myself, like, yes, you still need your mom, even when you're the mom of three super babies, even when you're approaching 50 years old, even when you're having to birth all of these thousands of mamas in the world.

Right? And you never. You never stop. You never stop needing your mom, at any age. And it's just really, really important to recognize that even those of us who have had the luxury of doing a lot of work and processing the

things that we've been through.

These things still stay with you, right? They're still part of your human experience. And then how do you ever know that you're 100% at completion, you know, and what does that mean?

100% completion will not mean that there will never be a day when I don't mean my mom. You know. That's right. Yeah. I mean, it's so beautiful. So what you're bringing into this conversation is a spiritual piece.

So when you align yourself vertically, not horizontally. So horizontally is the ego playing with man, right. That's the success. And material driven world that we live in.

But we also have a vertical world or a spiritual world that we also live in if we're attuned to it. So the butterfly coming by is your mom. And so she's you've never lost her.

That's right. Right. We told ourselves the story. The story I told myself was I was abandoned at birth. I was discarded like a piece of trash. Right? I wasn't wanted, right?

That's the core belief that fueled me. And it served me well to think that because of what did I do, I became a super overachiever. The only problem with that was I had no boundaries.

And if you said jump, I would say how high, right. So, it's it's so that's sort of me. But until it didn't. Right. Yeah. Mask in the world that I'm okay.

You know, I've got it all together. But meanwhile, you know, I don't And so when I came out of my first suicide attempt, I was in a coma. I was it was.

I was in rough shape. I was on dialysis. I was told, I need a kidney transplant. Oh, my God, it was. I was so sick, and I was not. I was even more depressed that I was still here.

So, reconcile. Why am I still here? And the answer that has come to that I've come to through my studies is I've learned. I first learned about it in a book called Radical Forgiveness by Colin Dubin.

And then there's a beautiful children's book called Little Soul in the Sun by Neil Donald. Was that explains this concept of soul contracts. So, It sounds.

To you for the answer your question about completion that's so complete in it. Really, it's it might not be in this lifetime. Right. if you if you believe in the spiritual realm or even, you know, I heard permission, who's a beautiful Buddhist nun who's written many beautiful books, like, one living beautifully in uncertainty and start where you are.

And anyway, she, she said, you know, when she was sitting with someone who was passing, she said that the that the words that came out of their mouth, their last breath was emerging.

Wow. Yeah. That's Peter or Anita Moore.

Self-Love, Fertility, and Closing Reflections

Jenny, you know, people who have had these, these near-death experiences. Right? You you you need Anita Moore. Jenny's book called Dying to Be me. It's lovely.

And so in my own, my own piece of the puzzle, finally, I'm trying to answer your the question. Not that you posed it, but really to me, but I'm asking from my perspective is that, you know, we really, we make these contracts of what we're going to learn in this lifetime.

And some of us, you know, we we all forget on incarnation what that contract is. And then we go through life and we wonder, good goodness me, why is life?

Why is it so hard until we have that awakening and can work with perhaps skilled people that can help guide us to safety? And there's many books like I didn't start in the psychological, spiritual, mental, emotional realm really until I was, gosh, you know, I mid maybe 40, 35.

So I'd already had two suicide attempts at that point. You know, you would have thought that that would have been the first thing I would have done or somebody would have suggested to me.

But no, it was just take more medication. Right. So it's just not as commonly sought out, but it really should be first line therapy, which is working with your beliefs, your limiting beliefs, your shadow beliefs.

All of this comes to the forefront. And so I will just say this, that the goal isn't completion. The goal is peace and healing and love in this lifetime as best you can.

And it might be that we are still an alcoholic in this lifetime and that so for me, the reason I'm still here on the planet with with everybody is because I have this belief, which I don't know if it's true or not, is that my soul is not going to succumb to suicide in this lifetime.

Okay. And I have tried three times, you know, I have a good baseball. Oh, three strikes and you're out. Right? So I'm so glad that your soul will not succumb.

And it's probably succumbed in the past. You know, there's past life. People who do past life work, right? So so for me, I have that this belief. And that's what's keeping me here.

Not only that, but because I'm a mom and I have to. And I do want to, I do not. It stops with me. I do not fun to go through what? How horrible would that be?

I would be doing the same thing to him that happened to me. I would be a that. I'm not going to do that having. Yeah. having our super babies. I was just reflecting on what you were saying about your son having our super babies.

Just changes everything. The level of commitment. I love this saying. Commitment is the ultimatum, the level of commitment just reaches a level that we didn't even know we had in us.

You know, even when we are very dedicated, committed people as as I am. And so, that's beautiful and powerful to say I'm, I'm going to be the point at which this line changes course for the better.

And I, your son, is so blessed for that. And the world is so blessed for that one. When we as women, we as the mama bears, get to be that stand that we wish we had, had our selves.

When you, Dr. Chris, when you think of the one thing that someone could do or that you wish everyone knew to do to take care of their fertility and their future super baby, what would that one thing be?

to take care of their fertility. It would really be to look at all of these, these pieces that we are talking about. So the physical, the mental, the emotional, the spiritual.

But where I would go, the one thing would be where are you not loving yourself. where are you not loving yourself? Because wherever that is, that's what you need to heal.

That's amazing. Look at where, look honestly at where are you. Not loving yourself. That's really really powerful Dr. Chris I have one more question for you.

And I can't thank you enough for this really heartfelt conversation that we've gotten to have today. Thank you so much. when you hear the term super fertility, what is it feel like to you?

What do you feel? For me I just feel like I feel charged. I feel like, yes, this is like I feel, you know, I feel possibility, I

feel powerful, I feel like, yeah, like that's mine.

And I going to I'm going to own that. That's sort of what comes through my veins that are so good. Yeah. Now, I'd say if you were going to say more. If you say, I mean we, I would talk we I could talk with you for days, hours, weeks, years. Yeah, yeah.

You know, mental health and fertility go hand in hand. They are not separate. So if you're working on your fertility, you need to be working on your mental health.

And then the other thing is that mental health conditions are on the rise, like, goodness me, I've been speaking for 20 years, and every year I get on the stage and I say that mental health conditions are on the rise.

And I feel like after 20 years, I would love to be able to get on a stage and say, hey guys, we've been doing a great job. Mental health conditions are on the decline. Amen.

The same is true for fertility. Yeah, and that's not a not a coincidence. And that's right Dr. Chris, this has been so incredible. Thank you so much for being part of the Super Fertility Summit and bringing an ingredient that we hadn't had yet here.

Thank you so much for that. Thank you. And mama, Dada, parents of all genders listening. Thank you for being here with us for this amazing event. I hope that you are having as incredible an experience as I am, even though it can feel like a hard and heavy topic we are tapping into.

So, so much critical information, expansive perspective, taking so much possibility, so much hope and very practical, concrete tools that you can start using right now, today.

So be sure to join me for the next talk here at the Super Fertility Summit. Thank you from the bottom of my heart for being here.