

[Auto-generated transcript. Edits may have been applied for clarity.]

(music)

Jen: Welcome to the Brown U. Benefits Buzz, the podcast designed to help you maximize your benefits and your wellness program here at Brown. Helping you to live your best life at home and in your career.

April: We're your co-hosts, Benefits Manager April O'Malley and Assistant Director, Wellness and Benefits Programs, Jen McKay. Welcome to the program.

April: Hey, Jen. Welcome back.

Jen: Thank you. April, it is very nice to be back in the booth with you.

April: Yeah, it's been a while.

Jen: It has. We had an extra-long hiatus this season. Very unexpected. And as all of our listeners know, the campus has had to deal with a horrible tragedy in December. And our team, Benefits and University Human Resources, we were called upon to collaborate with the folks at Ever True, and you, I, and our colleagues were very busy in the second half of December, January, and a little bit into February. Um, really all over campus.

April: Yeah, we were busy all over campus. Um, you know, meeting our colleagues and assisting. But I really want to call out you, Jen, and Kim Almeida for all the amazing work you did with that. You guys were really instrumental in, um, getting us all organized.

Jen: Yeah. Thank you. April. Kim does deserve a really big shout-out, um, keeping us all organized and on the same page. Our team was really involved in coordinating the folks at Spring Health, getting them on-site, and, you know, setting up those counseling drop-in sessions for members of the community. And, uh, it kept us out of our offices, and it certainly kept us out of the sound booth. But it's nice to be back. And definitely, you know, we're recognizing that the healing process is going to be a long one, and we're not turning, um, our back on the fact that we need to continue to support campus. But there is some comfort in the normalcy of getting back to our old routines. And it definitely feels good to be back here with you.

April: Yeah, it does, and I am glad that we're getting back to our normal routines. And I'm also, um, very excited about today's episode and our guests.

Jen: I agree, it's a very special episode that hopefully will help meet the moment and help us continue as a community to grow and heal together.

April: So our guests today in the Beehive Buzz segment we're going to have Dr. Darlynn Rojo-Wissar. And Darlynn is an assistant professor of psychiatry and human behavior at the Warren Alpert Medical School of Brown University and a researcher at Bradley Hospital.

Jen: And she's done some really interesting research on sleep and resilience. Uh, and, you know, really topics that I think will resonate with our community right now.

April: Yeah, they really will. And then for our main interview, we're going to have Nicole Roger from Spring Health.

Jen: Yes. And I'm very excited to hear what Nicole has to tell us about ways that we can continue to heal as a community.

April: Me too. Should we welcome her in?

Jen: Let's welcome her.

April: Well, welcome, Nicole. We're so excited to have you.

Nicole: Well, thank you. Thank you both. I'm really happy to be here. Thanks for having me.

April: Nicole, the very visible high-energy support phase has passed. Now, um, how do we keep checking in on each other and what signs point to delayed trauma rather than somebody's just having a tough day?

Nicole: It's pretty common that in the immediate aftermath, after a traumatic event happens, that communities really rally together and in a really visible way, but then after over time, right, that intensity just kind of naturally decreases. But that doesn't mean that the impact goes away. And so now that some time has passed, I think one of the most important things that we can do is normalize checking in with people. And not to underestimate the importance of that, whether that check-in is in person, over the phone, or even a text message. And instead of saying something like, "Are you okay?" Which often gets that reflexive, I'm fine or I'm good, asking something a little bit deeper that helps that person really sit with their feelings and helps them become a little bit more honest. So that check-in could be something like, "How has this semester been feeling for you lately? Or how have you been feeling? Or what's been sitting with you?" Asking those open-ended questions can create that space for that honest reflection. And oftentimes when I say check in, the initial response is, oh, well, that's not enough. But it actually really is. And we can think back to times in our life where we weren't feeling great, and we got a what's the seemingly random text message from a friend asking how we're doing, how much better we immediately felt. So I think really normalizing those check-ins and opening up the line of communication to continue to process and talk about feelings is really, really important. And then with that delayed trauma, I think that's so important to be attuned with. I think it's important to look for patterns rather than just single bad days. And those patterns might include things like somebody mentioned that they haven't been sleeping well for a period of time, or having

increased nightmares. Or I notice a colleague that is seemingly put together most of the time has increased irritability or has even said that they're feeling emotionally numb, or maybe a faculty or staff member is avoiding, um, certain parts of campus or avoiding reminders like certain buildings or conversations. Maybe they're startled more easily. Difficulty concentrating. I often recommend to people that if your gut thinks that something is off, it probably is, because it is. And so, really utilizing those check-ins when you feel like something might be off can be really helpful.

Jen: That's all really great information. And you know while we're talking about, that need for checking in, certainly, our faculty and staff are in a bit of a unique position because they are processing their own grief. They're processing their own responses to this terrible tragedy, but they're also trying to support students in their department. How can our colleagues balance being that pillar of support for their departments without neglecting their own recovery? And along those lines, can you help us further define that line between normal, healthy, professional empathy and then that personal emotional exhaustion or burnout?

Nicole: Yeah, absolutely. I think the key here is to remember that you can't regulate others if you're dysregulated yourself. And so it's really that proverbial, you can't pour from an empty cup and empty pot, like your pot has to be full before you're actually adequately able to help people. And at the same time, supporting students doesn't require self-sacrifice. It doesn't require that we solve all of their problems. If students come to faculty or staff for advice or for a shoulder to lean on, that's really appropriate. And it's also appropriate for the faculty and staff to have an appropriate boundary that we're able to be there for people without actually solving their problems. I think sometimes, especially if someone comes to us and they may be feeling emotional, our immediate job is to jump in and say, " Oh, I want to take away this person's pain." I want to solve it for them as often, not with that person who was in distress is actually looking for. They're actually looking for somebody to just acknowledge how they're feeling and to sit in that space with them, not to solve their problems. And so I think really remembering that's not our job or even what that person is looking for in solving their problems. And we need to do that in order to shift from being able to hold empathy so that we don't get into burnout. And that burnout can often look like that emotional exhaustion, rather than being able to hold space and be compassionate with that person. So I think that really remembering that empathy is I care. I'm here for you. I see you versus burnout, that says I'm just physically here in body, but I have nothing left to give. So really remembering that those protective strategies and setting that boundary, not verbally, just kind of will come naturally, um, actually really helps that person feel seen, heard, and supported. But it has to start with remembering to take care of ourselves and filling and filling our pot so we're able to be in the same space with someone who might be feeling distressed.

April: It's such great information, reminding us to take care of ourselves before we're able to help others. And along those lines now, um, you know, the workplace feels different now. So how can our teams move forward together instead of, um, just trying to get back to how things were?

Nicole: I love how you phrase that question, too, because we often hear after a traumatic event, after we've had the ceremonies and the processing, there's this rush to get back to, quote unquote, normal. And that's actually not realistic or even what the intended outcome should be. The goal isn't to erase the past. It's actually how do we learn to integrate this trauma of the experience of this collective experience together? How do we learn how to move forward in a happier, healthier way while still acknowledging what happened? And so teams really move forward when they continue to acknowledge what happened rather than minimizing it. Create that intentional space for reflection. So, it's kind of going back to what we were talking about earlier, about those check-ins, whether that's on the phone, in person, as a collective campus, and then adjusting expectations when needed. Sometimes we might feel okay, and then we wake up the next morning, and we're not okay. And then the next day we are, and then the next day we are. And that that up and down piece can be really dysregulated. And so, really remembering that all of that, all of those feelings are completely understandable. And it's actually how we learn how to move forward is by acknowledging each and every piece of how we're feeling now, how we are feeling in the present, and being open to the possibility of how we're feeling in the future, whether that's positive feelings, more heavier feelings, and everything in between. Really allowing all of those feelings and all those spaces to coexist with each other.

Jen: Thanks, Nicole. When we think about this tragedy, for many of us, gratefully, there's no past experience to base this on. There's no script for it. So it's really helpful to hear you talk about, you know, ways that we can move forward together. As we're thinking about that, are there predictable moments in the academic year, things like anniversaries or campus events that could reactivate grief or trauma for members of our community? And can we proactively prepare for those instead of just reacting to them in the moment?

Nicole: Yes, absolutely. So trauma often reactivates around anniversaries, the start of new semesters, campus events, holidays, moments of transition, and then it can even happen to more subconscious reminders like changes in the weather. If the weather feels the same as the day of the tragedy. Certain sounds. Media coverage. Unfortunately, given the predictability of trauma in our country, hearing an event at another campus might reignite feelings of trauma and grief from what happened from what happened here at Brown University. And it can all trigger those psychological and physiological responses. And so how we then prepare is by one acknowledging the anniversaries rather than avoiding them, and then communicating available supports ahead of time, which it seems like we have already doing such a really beautiful job, like continuing to talk about what happened, kind of continue to talk about the collective trauma and grief that folks are experiencing. It can also be encouraging supervisors or faculty and staff to then increase those informal check-ins, or even having a campus-wide check-in of how folks might be feeling. And then if there's room, even offering flexible scheduling around those difficult dates, whether it's that on the anniversary offering some kind of flexibility, um, or even offering and then reminding folks about that at the on campus support set that are available to them, so they have a space that they can go to to be able to move through those feelings in a supportive way, rather than not processing them at all.

April: Oh, thanks, Nicole. You know, there might be employees who are hesitant to use Spring Health because they think, well, others have it so much worse than I do. What's your message for them, and what long-term healing resources are available through our partnership that people might not be aware of?

Nicole: Yeah, I love this question because it's such a it can be such a normal reflex for so many of us that, oh, someone has it worse than me. So I'm not worthy of accessing mental health services. And I always like to say, and what I would always tell my clients is pain and grief aren't a competition. You don't get an award because you're feeling the most pain or the most grief. And so one of the most common barriers to seeking support is that it's comparing suffering that someone else experienced more. So I shouldn't take up space. But I think what's important to know is that mental health care isn't limited. It's on a limited resource that if you engage in mental health, that you're taking it away from someone else. What's really great about mental health services is that it's often meant to be preventative and protective. So actually getting into care earlier before it becomes really acute, before it becomes a crisis, um, then creates and prevents more significant distress from occurring later. So you don't need to be in crisis to be able to, quote unquote, deserve care if something is affecting how you feel, if it's affecting your sleep, your focus, your eating habits, your relationships, your sense of safety, your sense of self that in and of itself, even one of those is enough to be able to or to be able to move through and getting the care that you need. So seeking support isn't about severity, it's about understanding what we all collectively need to get and feel better. And what's really amazing about the services at Spring Health is that it's, uh, it's a continuation of care. So we have supports for people that want to engage in confidential therapy sessions with licensed clinicians. So you might be feeling depressed or anxiety or maybe substance use issues, or maybe you're just curious about what mental health care might look like and want to talk to a professional. Our therapist would be available to faculty and staff. And then if therapy doesn't feel like the right fit for you right now, that's also okay because we offer coaching services. So coaching coaches are, um, are there to help with more short term goals. Maybe you want to eat a little bit healthier or have better workplace communication, or maybe work through some lower-level relationship communication strategies, or maybe work on communication, or maybe you're in conflict with a coworker and want to learn some shorter term communication strategies. We have coaches on hand that can help with those workplace stress, as well as, uh, leadership resilience skills that it's it's a little bit lower level than therapy. And it can be a really great gateway to getting into more therapeutic care, if that's part of your mental health journey. And one of my favorite parts of the spring health platform is our our self-guided digital exercises. You can listen to them on the go. They can be there for anxiety. They're there for grief. I personally use them for sleep. Whoever records our sleep digital exercises has the most soothing voice of all time, and I pop it in before I go to bed and I'm out like a light. So really making sure that we have something for everybody, whether you're wanting that therapeutic care that there's more coaching, shorter-term skills or more digital skills, making sure that we have something for everyone, no matter where you fall in that mental health journey.

Jen: There are two things I really loved in what you just said. One is that there's really something for everyone. And thank you for illustrating examples like the Moments and the

coaching. And two, I really liked that reminder that there's enough mental health resources for everyone, right? That if you're using them, you're not taking them away from someone else. Is there anything else before we wrap up today that you would like to share with our faculty and staff here at Brown University as we continue to navigate through this time?

Nicole: I would say that healing after a collective trauma is not going to be linear. There may be stretches where we all feel really steady, and there's moments where we don't. Maybe moments of resurgence of the trauma. And no matter where you fall, you're not doing anything wrong. So what like... what I always say is what sustains community isn't... isn't consistent strength. It's actually remembering that we have this shared humanity. It's a willingness to say this still matters. I thought I was okay, and actually, today I'm not. And I maybe need support. So if you are in that phase where you're feeling more steady, maybe finding it within yourself to continue extending care. So using those times to check in with colleagues that might be struggling. But if you are feeling shaken, allowing yourself to receive care, whether that's from a colleague, a friend, a family member, or resources like Spring Health, and whether you're feeling steady or whether you're feeling more shaken, you're not doing anything wrong. You really are exactly where you're supposed to be. And both of those roles are really essential to making a campus even more resilient.

April: Thank you. Nicole. You've given us so much great information today. And you know, once again, we're so happy that you could join us.

Nicole: Yes. Well, thank you so much. It was wonderful. I really appreciate you both taking the time to think about and talk about the events that happened. It's so important to continue to speak about it, to be able to come together as a community and be able to share those collective resources so folks know where to get help.

April: Well, Nicole had some really great information for us.

Jen: She did, and I like how she really stressed that point, that there's no right or wrong way to be feeling right now.

April: No, everybody's recovery is going to look different.

Jen: It is. And I'm really excited about our next guest for the Beehive Buzz segment because I feel like her work is going to speak to all of us. No matter where we are on this journey.

April: It is; we all could use some information about sleep and resiliency.

Jen: Absolutely. And we're going to welcome Doctor Darlynn Rojo-Wissar who is a psychiatric epidemiologist. And that's exactly what her research focuses on, that really important connection between sleep, health, stress, and resilience.

April: Well, are we ready to welcome, Darlynn?

Jen: Let's get to know Darlynn a little bit better.

Jen: Dr. Darlynn Rojo-Wissar, we are so excited to have you here with us today on the podcast.

Darlynn: I'm excited to be here. Thank you for having me.

Jen: So, to kick us off, we like to learn a little bit about our guests. Can you share with us, what's your favorite thing about Providence?

Darlynn: Honestly, when I first moved here, I felt like I had moved to a fairytale town. It's so beautiful. I love that there's nature all around, and at the same time, there is hustle and bustle and things going on. Something to do every weekend, even if it's just taking a walk. Um, you can always find something beautiful to do and see.

April: Excellent. And then, like after this winter that we've had, you know, we are so excited for the spring weather. Is there anything in particular you're looking forward to doing as the weather warms up?

Darlynn: Well, my husband and I really like taking day trips on the weekends. Um, another great thing about Providence is that it's so close to other fun locations to visit, and so I'm looking forward to seeing new places that I haven't seen yet.

Jen: Fantastic. Any place in particular you have in mind for the summer?

Darlynn: I think we should visit New Hampshire and Connecticut a bit more.

Jen: Nice. So we wanted to transition a little bit to your research, Darlynn. You've explored how sleep health can mitigate the effects of stress and early adversity. As our campus continues its recovery efforts, our faculty and staff are navigating shifting workloads. Why should we all view sleep not just as rest, but as a vital tool for our psychological resilience and our emotional regulation?

Darlynn: Well, sleep is vital for almost every aspect of mental and physical health that you can think of. And to me, resilience is really mind and body. So sleep helps us regulate our emotions and mood, and even our physiological stress response and recovery.

April: Thank you. And, you know, a lot of us treat sleep as a currency. Um, to buy more work hours. But why is sacrificing sleep for productivity actually a losing trade in the long run?

Darlynn: Yeah. You know, they've actually done some studies on sleep and productivity in the workplace, and not getting good quality sleep or enough sleep is associated with bad outcomes in terms of work productivity; so more absenteeism and accidents at work. Your productivity isn't

as good. Um, you might not be as punctual, and you might not be as satisfied with your job either. So, something I like to mention as well in this area is that everyone has probably had the experience of working on something. Maybe it's late at night, and you're tired, and it's taking you hours to just make a little bit of progress, and then you find that if you go to sleep and try the next day again, it is a much quicker and better quality work that comes out. So I think it's important to remember that even if you work more hours, that doesn't mean that the quality is going to be there. And so it's really not worth it in the end to sacrifice sleep.

Jen: I wish I could say that what you just shared didn't resonate with me, but it does. I definitely understand what you're saying there. And that transitions us to our next question as well. You've written about a concept of social jetlag, the discrepancy between our internal clocks and our social and work schedules. Many of us on a university campus may have irregular hours. We may fall into the habit of catching up on sleep over the weekend. What's one micro habit or shift in our routine that can help realign our bodies without requiring a total lifestyle overhaul?

Darlynn: Yeah. So one thing I would recommend is opening the curtains and getting bright light exposure first thing in the morning when you wake up. That is a great way to help realign your internal clocks, um, and even dimming the lights in the evenings. Um, light exposure, especially from the sun, is the biggest regulator of our internal clocks.

April: That is such great advice. Thank you. Thank you for that. Well, self-care. Like, sometimes that just feels like another item on our to-do list. Um, if you could give our listeners permission to change just one thing about their sleep environment or evening wind-down tonight, what would it be and why is it so essential for our collective wellness right now?

Darlynn: Yeah. So I think something that's really important in the wind down is having a wind down, and one that is of sufficient duration. Maybe it can only be 15 or 20 minutes, but really allowing yourself to make that transition from the busyness of the day into setting the stage for a calm shift that will allow you to get into sleep easier. If you're still wound up, really stressed, and on edge when you're trying to fall asleep, you're going to have a harder time. So choosing something calming that you enjoy to wind down your day.

Jen: Excellent advice. I like a nice warm cup of herbal tea at night. That definitely helps me. And as we're talking, you're making me excited for bedtime tonight, I have to say. But before we wrap up, is there anything else that you would like to share with our listeners?

Darlynn: Yeah. One thing that I like to share is that there are professionals that can help with sleep. If you are having trouble with your sleep. Um, there are treatments for insomnia that we know are effective, there are treatments for sleep apnea. So don't hesitate to reach out to your doctor to get a referral if you are having sleep problems that are negatively affecting your life.

April: More great advice. Doctor Rojo-Wissar, thank you so much for joining us today.

Darlynn: Thank you for having me. It was great.

April: We're going to transition now into a segment that's always been a favorite for us. It feels a little bit different today, but in the spirit of finding those light moments and giving ourselves permission to embrace those moments. We wanted to keep the tradition alive.

Jen: Definitely. It is time for the game segment, and our game segment today will reinforce some of those really important sleep concepts that we just discussed. It's going to be a little bit of our normal routine, a little bit of a distraction, and hopefully a reminder that... that we're here for one another.

April: Well, let's welcome in our game, contestants. Well, Jen, we're so excited to welcome Amy and Jeff into the booth for the game segment.

Jen: Welcome back, Jeff, and welcome, Amy.

Jeff: Thanks so much for having us. It's been a while, but I'm glad to be back.

Amy: Yeah, excited to be here for my first podcast.

Jen: Well, we are playing a pretty fun game, similar to a game you played with us before, Jeff, but with a little bit of an unexpected twist today, April, right?

April: Yes, we are.

Jen: We are playing the sleep cycle A to Z. So this is a head-to-head alphabet game. But the twist is, you can name something that either helps or hinders a good night's sleep. April, can you break it down for them a little bit more?

April: Yeah, I'll break it down. So, you know, so each turn you'll either say something that helps or hinders a night of sleep, and it's going to go through the alphabet. So just to get you started off, you know, we'll go with the letter A. And for A, I could say alcohol. Drinking a lot of alcohol would be bad for your sleep.

Jen: All right. Do you guys get it?

Amy: Um hmm

Jeff: Got it

Jen: You ready to get started?

April: We are ready.

Jen: All right, so, April, thank you for giving us A. Why don't we start with Amy giving us B?

April: Okay

Amy: Brushing your teeth.

Jeff: Counting sheep.

April and Jen: Oh, good one, good one.

Amy: Um. Darkness.

Jeff: Espresso coffee.

Jen: Does that help or hinder Jeff?

Jeff: Oh, that definitely hinders.

Jen: Excellent.

Amy: Fluffing your pillows.

April: That's a good one.

Jen: That is a good one.

Jeff: Going to bed.

(laughter)

Jen: I like it.

Amy: Herbal tea.

Jeff: I'll say intrusive thoughts.

April: Well, that's a good one, Jeff.

Amy: Jet lag can hinder sleep.

Jen: Good one.

Jeff: Definitely hinder, kids!

(laughter)

Amy: Loud environments, or noises in the background, could hinder sleep.

Jeff: Music...can help or hinder.

Jen: Very true.

Amy: Nature sounds. I have a sound machine, and that always helps.

Jen: Very good.

Jeff: Well, I turn mine onto ocean noises.

All: Oh, yeah. Good!

Amy: Being on your phone too much before bed.

Jeff: Quiet.

Jen: Love it.

Amy: Reading always helps me before bed.

Jeff: Silence.

Amy: TV. That can also hinder sleep.

Jeff: Unwinding.

Jen: Oooh.

Amy: Video games. Not that I play, but I think that could be hindering.

Jeff: That has kept me up at night before.

Jen: W

Jeff: Say something like a wash-up routine.

Jen: X

Amy: When I take out the E, exfoliating....

Jen: X sound. We'll give you exfoliating.

Amy: Yeah, you can just take out the E. Exfoliating your face, like just having a good routine.

Jeff: Yawn.

Jen: Good.

April: I like yawn.

Jen: like a signal that you need to go to sleep.

Amy: Z. I'm thinking of catching zzzs.

Jen: I think we will allow it.

Jeff: That's a good one.

April: Wow, that was some really great answers.

Jen: Yeah, you guys impressed me, that's for sure.

April: But you know what, Jen? I think that Amy and Jeff did so great that we have a tie.

Jen: We do have a tie. Uh, we couldn't stump them at all.

April: No, no we couldn't.

Jen: You guys are going to get very special prizes today. Uh, instead of the traditional brown, you benefit by the baseball cap, Jeff, you already have one being a previous winner. Uh, you guys are going to get brand new Benefits Buzz long-sleeved t-shirts.

April: Yay! It's so exciting.

Jeff: Thanks so much, Jen and April. It was a lot of fun being here.

Amy: So exciting.

April: Oh, thank you. So excited to have you here.

Jen: We hope to have you both back soon.

Jeff: Definitely.

April: What a fun game segment that was.

Jen: Amy and Jeff really helped reinforce a lot of good concepts about sleep.

April: They really did. I thought I got some good tips, but it seems like it is time for the mailbag segment.

Jen: Wow, the mailbag already. Uh, I have a question for you, April. Are you ready for it? I'm ready. All right. So this employee says, last month, I had bloodwork completed, and I received a bill from the lab. I've never had to pay for this before. And I wanted to know, was I charged incorrectly?

April: Oh, that is a great question. And the answer is you likely were not charged incorrectly because remember, as of January 1st, all of our plans have deductibles this year. And the deductibles apply to things like diagnostic testing, like lab work. `You know, they apply to other things too, like X-rays, surgeries, physical therapy, but definitely the lab work. So the deductible, if you hadn't met it already, would apply. Now, your deductible will depend on which plan that you're in. So if you are in our core PPO plan, you would have an individual deductible of \$750 and a family deductible of \$1,500, and that's the amount they would have to pay out of pocket before the plan begins to pay. And if you were in our premier PPO plan, you would have an individual deductible of \$250 or a family deductible of \$500.

Jen: Fantastic. And if someone wanted to check how much they paid toward their deductible, how would they do that?

April: Oh, another great question. Uh, look at your EOB, your explanation of benefits. And you can find that on the MyHealthToolkit website or on the app.

Jen: Great. Hopefully, we've resolved the issue for this employee.

April: Are you ready for your question?

Jen: I'm ready.

April: I attended a wellness webinar and a financial wellness webinar this month, and neither one has populated on my portal page. Do I need to do something else to see the wellness rewards credit?

Jen: Ah, great question. And most likely, you don't have to do anything else. So what happens is we get participation files for all of our wellness, finance, and fitness programs, and we upload one participation file per month on the last business day of the month. The team at Personify Health then has five business days to process that file. And then you'll see the credit populate on your individual portal pages. So if you go to a program at the beginning of the month, it may seem like it's taking forever for that credit to load, and it may take a full five weeks for you to see it. If you go to a program at the end of the month, it'll probably feel like that credit is loading very, very quickly, but it's always one file going over at the end of each month.

April: Oh, thanks, Jen. That's great information.

Jen: You're very welcome.

April: Remember, if you'd like to have your question read on air, you can submit it on the podcast webpage.

April: Well, Jen, we've come to the end of the episode already.

Jen: We have. I'm sad to see our time in the booth come to an end. Uh, it's a little bit of a different episode. Had a little bit of a different feeling to it.

April: It did. I mean, there were some very light moments and some very serious moments, but I feel like we got a lot of good information.

Jen: Absolutely. And I feel like, you know, that transitioning back and forth between the light, happy moments and the heavier moments is kind of reflective of what we're all going through now on campus.

April: I agree.

Jen: Well, I definitely want to take a moment to thank our guests who are helping us navigate this challenging time. First from Spring Health, Nicole Rodger. We really appreciate her valuable insights today. And then in our Beehive Buzz segment, Dr. Darlynn Rojo-Wissar.

April: And thanks to our game contestants for playing along with us, Amy and Jeff.

Jen: It was a lot of fun to be laughing and back in the booth with our colleagues.

April: It was.

Jen: Well, we will be back in the booth to put together a fantastic summer episode soon.

April: We will. But remember, in the meantime, you can catch up on past episodes on SoundCloud.

Jen: Thanks for listening, everyone.