A Conversation About… Journalism and Mental Health

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Content Warning (00:00):

This podcast discusses content that may be distressing for some listeners, please refer to the episode description for details about the topics covered.

Host (00:09):

Hi there. Welcome to Mental Health Professionals Network podcast series MHPN's aim is to promote and celebrate interdisciplinary collaborative mental health care.

Cait McMahon (00:27):

Welcome to MHPN Presents A Conversation About... working with journos in the field and in the room. My name is Cait McMahon and I'm joined here by Ashlynne McGhee. Welcome, Ash.

Ashlynne McGhee (00:40):

Good morning, Cait.

Cait McMahon (00:41):

Morning, afternoon, evening.

Ashlynne McGhee (00:43):

Let's go. Good day.

Cait McMahon (00:45):

G'day!

Ashlynne McGhee (00:46):

Sounds good.

Cait McMahon (00:47):

So today we're going to talk about two things and we are going to dance and weave between these two things, working with journalists as clients or patients in the room for mental health practitioners, but we're also going to talk about the intersect of journalism and mental health and how mental health practitioners can collaborate with journalists as we're equal professionals.

Ashlynne McGhee (01:11):

Yeah, I love that idea. I think when we first talked about this, I had a couple of things that kind of went pop, pop, pop in my head straight away. And the first is just that as a profession, I think we've been pretty bad at dealing with mental health in the past and working with some of the mental health challenges that come with it. And I wish my profession was better at that, but I also wish that there was a better understanding more broadly of what we do and some of the challenges that come with that. So I think it's a really interesting discussion to have. I think most journals have had an awkward moment to say the least in the room with a mental health professional. And I think that comes from sort of a lack of understanding perhaps on both sides. So anything we can do to bridge the gap is helpful.

Cait McMahon (01:54):

I think it's going to be a really exciting conversation. I know Ash and I have chatted about some of these things before, and I was trying to think the first time I met you.

Ashlynne McGhee (02:03):

I can't come up with it either.

Cait McMahon (02:05):

I can't remember. You asked me to speak on journalism and trauma at a cocktail bar in the city one night many, many years ago. I can't remember if that was the first time or it was when we were working at the ABC, because I was there as a psychologist on seconded there from the Dart Centre for Journalism and Trauma for a couple of years. And so I can't remember if it was either one of those things, but anyway.

Ashlynne McGhee (02:28):

I think it could have been there. So I spent sort of 15 years at the ABC in various roles, and certainly we met there, but then I'm also the president of the Melbourne Press Club, and that was the guise that I got you to a city bar. And this I think actually illustrates quite well, sort of how journalists can operate a little differently. We had, I think 30 people in a room that night in a bar in the city. It was Chatham House rules. You can't say what was said outside of the room. And so you can kind of have those confidential discussions in an intimate space where journos get journos, you can have discussions that are real and that's where you were there. So I think there's been a number of times over the years where our work paths converge and -

Cait McMahon (03:10):

Intersect.

Ashlynne McGhee (03:10):

Exactly. Yeah.

Cait McMahon (03:11):

So it's going to be a great conversation today. We'll talk about those things and we'll also talk about would you have a client that you would encourage to speak to a journalist if they were asked to speak, if a journalist wanted to interview them, would you allow that? And the reason we got here was because a colleague of mine asked me in a situation, he said, I'm sending a young journalist to you. They've been asked to go and interview a distressed mum at a school gate. There's an event happening. Would you encourage that young journalist to ask the person for an interview? Yeah. And I said in response, yes, on the condition, the young journalist was ethical, empathic asked permission for the interview and was sensitive and appropriate. Yes, I think so. As long as there was that proviso that I think it would be completely up to the mum. And he disagreed. So I thought as a psychologist, he disagreed and thought that no one should be approaching distressed people for an interview. And so I thought we need to have a conversation about how journalists can work and the importance of journalism in highly stressful, traumatic situations, publicly, public situations. So that's sort of how I'm here today and how I asked you to come along. So what are your thoughts about that Ash as a journo?

Ashlynne McGhee (04:43):

Yeah, it's a really interesting hypothetical because that hypothetical was between you and another psychologist, but that hypothetical also exists in newsrooms because change the scenario perhaps where someone has died and a journalist is sent out to the home of the loved one. We call that it's a very blunt term, we call it a death knock. And within newsrooms and within journalists, groups and cohorts, there are different opinions as well. So I don't speak for everybody, I don't speak for any employer, I speak for myself. I personally choose not to do that the vast, vast, vast majority of the time. But I think it's a really interesting issue you've brought up because depending on the situation, depending on the person, depending on the journalist, depending on the outlet, depending on what comes of that, the answer is very different. And at the end of the day, take that example of someone going up to a mother to school gate, perhaps assume it's a relatively straightforward one. I think it's okay to ask, it's okay to do your job, to do it in an empathetic way, but at the end of the day, the journo has to be comfortable with that as well, and many journos aren't. That's a really hard thing to do.

(06:00):

So I love it. I love that hypothetical because it gets to the heart of, I think this tension that exists in my profession, but also between my profession, journalism and your profession. Yeah.

Cait McMahon (06:12):

Fascinating. So what makes journos different to work with than say a fiery, an ambo, a cop coming into the room to seek clinical service? What's different about journo is the tribe of Journalists.

Ashlynne McGhee (06:26):

I feel like I should ask you this question. You've worked with enough of us over the years. What makes us, I'm going to throw it straight back to you actually. What makes us a special, difficult, challenging, wonderful lot of people.

Cait McMahon (06:38):

Yeah, fair call. Look, I love working with journalists and that's why I have for the last 30 years, firstly starting up the dart center and now working independently. I just think you're a really smart bunch of people. Really questioning and questioning can be sometimes cynical, can sometimes be just really curious. I love being challenged and having people pushing back just as you've done there, you've pushed back there.

Ashlynne McGhee (07:05):

Guilty.

Cait McMahon (07:06):

No, it's, it's great. I love that journalism is such an important profession and I dunno if we appreciate that as news consumers enough, especially currently where we've got so much misinformation, disinformation just lies being pedalled out in the world that we really need journalists there to clarify things for us as an audience to help us understand what's factual and what's not, to tell really important stories. So I love helping journalists do that in a better way.

(07:36):

And in the room I think there is that pushback that you get, there is that cynicism. You've got to prove yourself as a mental health professional. The first time I dealt with pretty serious old crusty journo and he basically just said, F off, what will you know about journalism? And I said, well actually, I dunno anything, teach me. So you get that pushback, you get that intelligence, you get those smarts. And also the profession itself is quirky. I had a psychiatrist one time ring me, I referred a journo and the psychiatrist rang me and said, oh, this person you've sent me so avoidant. And I said, well, tell me more. And he said, well, I've been trying, he didn't turn up for his appointment, he hasn't called me and cancelled. I said, you do know he is currently working in Syria filming. So there's those quirks about professionals need to understand that when the job calls for journos, that's what they respond to. And so it might be avoidance, but it also might not be, it might be something more pragmatic and that it's a 24 hour job.

Ashlynne McGhee (08:40):

Yeah.

Cait McMahon (08:41):

And to tell a journo to turn off their phone to help their stress levels,

Ashlynne McGhee (08:45):

I've got mine right next to me. Whatcha talking about!

Cait McMahon (08:47):

Course you have. That's my take

Ashlynne McGhee (08:49):

Yeah, interesting. You touch on a lot of things there. I think every journo has gone through this experience. I'm much personally now I'm much better at asking for help when I need it. I'm still not

great, but I'm much better. But certainly in the early days of my career, and particularly when you're a younger journalist, you tend to cover a lot more of the trauma under really tight deadlines. So you're rushing out to a car crash and murder scene, whatever, like horrific stuff. And you're under this immense deadline pressure and you are young and inexperienced. So you can just imagine that that's a bit of a disaster waiting to happen for someone's mental health. Add to that, a lot of young journalists work shift work, so you're already sleep deprived. You are out there to prove yourself on whatever it is, $50,000 a year or something.

(09:32):

So there's a whole lot of factors at play there. So I think one of my early memories of first asking for help was going through one of those workplace support lines that everybody has the EAP services. And I don't think I said the words trauma. I think I said I've had a difficult day at work, I need to talk about it. And getting into the session with the psychologist and they were so interested in my job and what I did and my day, but in a way that felt like it wasn't exploring how it had felt for me or what it had been like for me, it was more just, whoa, you have this amazing job. You've gone here and seen this and you've been on TV three times today with a live cross and this and that. And so it felt like we sort of call it in the industry a bit of trauma porn really, that it was this really exciting thing for the psychologist.

(10:24):

And I think it's difficult when someone approaches that to really open up. And then I'll just put another layer on top of this because I think this is the thing that I've noticed as I've moved further through my career, and I think for all journalists, no matter where you work, and increasingly now, but because I spent so long at the ABC, you are so careful and so guarded about who you are and what you say because of the attacks that come at you. And I've worked as a political reporter in the Parliament House Bureau for a long time. I've worked at 7.30, so I worked in sort of these really high stress environments and very scrutinised huge amount of scrutiny on you. And so you're so used to having these huge wall up that guards you from criticism and that protects you from criticism that it's very hard to then pry that open and talk to someone about how you actually felt about this or that this particular thing made you feel that way because it was this, because you feel like you're exposed when you do that and you're so used to protecting yourself from that kind of exposure.

(11:33):

So it's a really difficult thing. And now I wouldn't, unless I absolutely had to call up an EAP line for an emergency counselling session, I would use a trusted psychologist who I've developed a relationship with, but I would be really hesitant unless it was an absolute crisis. It's a very difficult thing to build that trust as a journalist.

Cait McMahon (11:55):

And you picked up there about protecting yourself because of course what's happening a lot now for journals, and you'd know better than I is just you're so exposed to the public and the attacks that are happening now, especially for women journalists, texting, people just getting bombarded in their emails with really abusive, horrible stuff and very sexualized sorts of harassment that's going on for journos as well. So there's this whole other layer that other professions don't get as well.

Ashlynne McGhee (12:24):

You're right. And it's something that we sort of get used to and it becomes just a normal way of working, but it's not.

Cait McMahon (12:30):

No.

Ashlynne McGhee (12:31):

There's nothing normal about that. And certainly stepping away from a relatively big role at the ABC has been a huge relief not having to deal with that to the same extent anymore. There's a real relief that comes with that. But I think there's a couple of things that I just wanted to pick up on there because I think there are a few different situations where we talk about journalist trauma and I think some of it is fairly straightforward. I'm sure most people watch the coverage of the awful stabbings at Bondi Junction. So I guess I want to talk a little bit about what it's like for journalists turning up to a scene like that, but then also there's this other kind of trauma, the vicarious trauma that actually I feel like is more difficult for many journals. But I guess I want to ask you, you've given advice and worked with so many journals over the years with those kind of big events, those big, bad awful things that happen. What do you see newsrooms doing in the way that they work around those events?

Cait McMahon (13:29):

Newsrooms are a bit slow to support. It sort of goes in ebbs and flows. Years and years ago when I first started in this work, it was a really new conversation, then the conversation picked up and it seemed like all the newsrooms around, no matter where you went to, we're trying to be trauma aware and looking after their staff. And now I think with the cuts in the industry, it's a really lean industry now and it's almost like people have forgotten. And that trauma literacy, if you like in newsrooms is dropping off. What I've said to newsrooms is to prepare before it happens, try and do scenario based thinking, if not practical exercises, because the more you're prepared beforehand these events, because you sort of know when there's going to be the bush fires, you sort of know the steps that are going to happen. There's a stabbing as horrible as it is, but things happen. And so newsrooms know how to sort of roll out coverage around that stuff. But in terms of dealing with the support of the staff, practice that, think about that, be cognizant of that beforehand.

Ashlynne McGhee (14:32):

Can I be blunt?

Cait McMahon (14:33):

You can be very blunt.

Ashlynne McGhee (14:34):

Has any newsroom that you've worked with done that?

Cait McMahon (14:38):

Well, in fact, I know one, a regional newspaper in Victoria was really good at doing that and taking that stuff on board.

Ashlynne McGhee (14:46):

Oh, good on them.

Cait McMahon (14:47):

Yeah, yeah, yeah. Shep News, I'll put it out there. They were with that sort of stuff.

Ashlynne McGhee (14:52):

Yeah, excellent.

Cait McMahon (14:53):

But no, not many others.

Ashlynne McGhee (14:55):

Yeah, that's the thing. It's funny when you say that because of course that's what we do for our kids. I prepared my son for his school excursion tomorrow, here's the steps, here's what you're going to do kind of thing. And yet newsrooms are terrible at that. We don't do that. We don't talk to young journos. So you step through, and I didn't cover the Bondi Junction attacks, but I watched it and every time I see something like that, a big horrific traumatic event that captures the nation like that, I watch it and I'm watching it from the perspective of what it's like covering those events. Because if you can imagine, you are the journalist on shift in a newsroom, in that particular case, it's a weekend. So newsrooms have lean staffing, maybe one, maybe two, maybe three if you're lucky, pretty junior staff.

(15:42):

They're the ones working on the weekend. And suddenly you start hearing that this thing has happened. So you might go from sitting there in the newsroom, eating your, I dunno, I was going to say quinoa salad. No one's that fancy eating your ham and cheese toasty that you've heated up from the night before and suddenly this thing happens and you literally drop everything and just go and you've got no idea what you are walking into. You may have been up since five o'clock that morning doing crosses in another story, and suddenly it's four in the afternoon, but you've got to keep working, so you have no idea. You're exhausted, you're just driving as fast as you can. And on the way there, you're getting car sick from looking at your phone trying to find out any kind of information and your mind's racing through all the possibilities, sort of preparing yourself.

(16:30):

But there's also a part of your brain that's going, okay, so I get there and then the 4.30 news is going to want to hit, and how quickly can we get our live link up? And where do I need to be to meet the, if you're in tv, the camera operator or where will the police cordons be? It's all the logistical things like that. So you're working on this two speed kind of logistics plus what's going to be there, and you actually don't have room in your brain in that moment to process, well, this is what I might see and this is what it's going to be like for me because there is no part of you spare to think about yourself. So then you rock up, you are confronted with whatever it is. And just to be very clear, talking about how hard it is for a journalist rocking up to the scene, I just want to make it abundantly clear, it is harder for anybody who was in the shopping center who witnessed that, who was involved in that, not to diminish that experience in any way.

(17:23):

I'm just trying to illustrate the perspective of covering traumatic events. And so you rock up and suddenly things might be happening. You might see something like it's all happening in front of you and you are not processing that as someone who's just witnessed a traumatic event, like those poor people streaming out of the shopping center. You see their faces and their minds are clearly whirring through that. You're not processing it like that. You're processing it as information to then translate to your audience, what about this matters? Can I get that on tape? Have I got this? Have we got pictures of

that? Can this marry with that? Where is my links truck to get the live cross going? Your entire mode is overdrive. And then again, not to take anything away from that awful experience, but these little things actually make a difference. You might not have gone to the toilet before you left, so suddenly you're standing there doing live cross after live cross after live cross. You've not eaten for six hours, you've not been to the bathroom, you've got your notepad spread out over the ground, you've maybe arranged for your kids to get picked up. This is sort of the realities of that kind of work. I think it takes a real toll, and I think it actually hardens journalists

(18:38):

up because you have to harden up to be able to deal with that. It creates this tough exterior. You asked before what's different, quite a dark sense of humour, quite a pragmatic, you just have to cut and cull and decide what's important and what's not. I'm interested when you work with journalists, do you see the kind of impact of that, particularly when you know that people have been working in that kind of environment? Do you see that that's how it is?

Cait McMahon (19:04):

Oh, absolutely. And I never, as a mental health practitioner, if we are trying to give advice, if you like, to other mental health practitioners, sometimes newsrooms will want psychologists or social workers to come straight in when that sort of stuff is breaking and be there to counsel the journalists as they come back. And I just say, no, let them do their work. Find a way to let them just sort of do their job and come in a week's time or just make yourself available if they want to contact you. It depends, but not to come straight in when the event's unfolding because journos just need to get in and do that work. But there's something you picked up on when you said about the people coming out of the Bondi situation, and I started to think about the importance of journalism in terms of victims or survivors telling their stories. And you told me about a story that you worked on a few years ago because sometimes, again, this question I say to you out there in the field, in the mental health field, if one of your clients came to you and said, I've been asked to tell my story to a journalist, would you encourage them to do it? I'd like to hear your story about the woman you told me about.

Ashlynne McGhee (20:16):

It's an interesting example because I was reflecting on it the other day, Cait. I went for a bike ride. I've got two little kids. My husband and I took the kids for a bike ride, and it's through this beautiful kind of bushland creek area in Melbourne. And it was a weekend, the sun's shining. You can imagine it's pretty idyllic. And we rode past a picnic table by the side of the river, and we stopped there for a cup of tea and the kids were running around having a great time. And all I could think of was, this is the place where I did that interview that was during the Covid lockdowns in Melbourne, and it was with a family whose loved one, her mother had died in a hospital, moved from an aged care facility to a hospital. And it was one of those really horrific traumatic ones really early on where loved ones weren't allowed inside.

(21:06):

And so I remember sitting there at this table with her and my camera operator, and she was sharing with me the story of her mother's death and what that had been like. And for me, it was one of however many stories I've done over my career. But for her, this is this life-defining life-changing thing that had happened to her. And I was so aware in the moment of that interview of the privilege of her sharing that story, but also of being able to hold this space that made it feel as significant as it was and how completely unqualified and unable I felt to do that, even though I can and I can do the best I can, but I just felt anything I do in this situation will not be enough because you've just gone through this horrific

death. And so look, the way I approach it when I do these interviews, the second someone says they don't want to talk, that is completely their prerogative.

(22:12):

I will not ever, ever make any further contact. But in asking if she wanted to talk, she did. Because for her, she wanted others to know that her mother had gone through this traumatic death that she had, had her hand up against the window while her mother's hand was on the inside of the window. And this nurse in full PPE in the middle of the pandemic, in the middle of lockdown before vaccines, had taken her kiss that she'd blown through the window and lent down and hugged her dying mother to plant the kiss. And I feel like bawling my eyes out, sitting here retelling that story. But she wanted, this woman wanted other people to know that that was the experience. And so it was important for her. And I think the way that I approach these interviews is if you can imagine a little dipping into a valley and coming back out.

(23:11):

So I plan my interviews really carefully when someone's talking to me about this stuff, I'll ask a soft question first, but it's something that gets them comfortable and feeling okay in the space it'll be, tell me about your mom, what was she like? And then you dip down into the crux of the story, which is really about this traumatic death in the moments. And I sit back, I nod a lot, I ask, tell me more about that. What did that feel like? What do you wish people knew about this? And then I pull 'em back out of that valley because you can't leave somebody in the depths of that. So I pull them back out with a question that I hope reminds them of why they've chosen to do it. And quite often that question is something about why is it important that you tell this story?

(23:57):

Or what does it mean to you to be able to talk about this? Or what do you wish people knew about this? And what change maybe would you like to see if it's a story like that? So you're bringing them back to why they've chosen to speak and very much putting things in their power the whole time. So for example, I'll give them control. Control, that's a funny word, but where they sit when we start, when we stop. So little things that give them feeling that they are in charge of their story. And that's the way I approach it. So I think should your clients speak to somebody, I can't answer that. But I think for some people it's really important.

Cait McMahon (24:36):

It's really important. And I think if clinicians can collaborate, and if we take the crux of that, I mean as you were speaking, it sounded to me like a counselling session like I would've been doing with a client actually had that arc of coming in and out of it. But I think if clinicians can work with the person who's been maybe asked by a journalist, because when I did ask this question, when I was doing a training once of clinicians, they all just said, no, we wouldn't allow our client to speak to journalists. I think it's important for clinicians to remember, well, it's actually up to the person and how can the clinician help them get ready and feel safe and collaborate then with the journalist together to make sure that that safety is occurring. And I think it's really important as a clinician to also encourage journalists.

(25:28):

Good practice. Again, as you were speaking, I actually sent an email off to a group, I read an article about domestic violence last week, and I sent off an email to the journo saying this was a great story. It was really sensitive. It was really, because a lot of journos don't get that sort of feedback. And if clinicians, we can support good practice, it will only encourage good practice. And I wasn't going to read this out, but last week this brought me to tears because a well-known journalist, all of us sent this to me

just last Thursday. She said, wow, a guy on the plane just said, you won't remember me, but you interviewed me the day after the Paris terrorist attack nine years ago. And I've never forgotten you. This is the journalist. You were very kind. You were the only journalist who acknowledged how traumatised I was. And then the journal said, moments like this, make me feel grateful for the skills you've helped me. And I think as clinicians, we can, you develop these skills as you go along professionally, but if we can collaborate and help encourage and work with journalists to do these sorts of important stories in a sensitive way, I think the world can only be a better place.

Ashlynne McGhee (26:40):

Absolutely. And I think no one wants to be a bad journo. No, no one wants to rush in and cause someone more trauma, more harm, but sometimes younger journos, I've barged into situations. I'll give you the worst of it. Ready? This is one of the, I could have done with a bit of your advice when I did this. I was really young. I was at the scene of a double murder. I'd been there six hours, camped out doing live call, all the rest of it, blah, blah, blah, blah, blah. And I had ducked up the road 50 meters to get some Maccas for lunch. I hate Maccas, does nothing for me. I had Maccas for lunch, coz it's all there was, and instead of sitting in the airtight car, I thought, oh, I'm going to stink out the car with these burgers and chips. So I stood on the outside of the car eating my burgers and chips. It was a little way up the road from a crime scene, but my really experienced camo came back and he said, you can't stand at a crime scene eating burgers and chips like it's a movie. And I went, I'll never do that again. It's such a small thing, but what a dumb move. If you are rocking up as a family member and you see journos standing around eating a burger and chips, what does that say about the amount of respect that we have for your loved ones? So it's little things.

Cait McMahon (27:54):

Little things. Yeah.

Ashlynne McGhee (27:55):

You had this interesting note on our briefing note here, Cait, I love this direct question. Should you be scared of journalists? So I am going to ask you, should you be scared of journalists? Are we scary?

Cait McMahon (28:10):

Look, you can be. I tell you that first big brawny foreign correspondent that told me to go jump in no uncertain terms was pretty scary. But there has to be this respect both ways. And I think if mental health practitioners can go into a situation, whether it's collaborating professionally with journalists or in the clinical room of respecting, and not having an attitude of journalists should not do this work, they shouldn't intervene. They cause harm. I mean, some do. And you've just spoken of a situation where you didn't mean to.

Ashlynne McGhee (28:47):

Absolutely.

Cait McMahon (28:49):

No. I think by and large, you guys are lots of fun.

Ashlynne McGhee (28:54):

Just slipping her in cash as she says this.

Cait McMahon (28:56):

Can be scary. There's no question there. But look, we've covered a lot of stuff in terms of the pressures on journalists, the incredible stresses for mental health practitioners to be cautious of that star power. And honestly, ash, I've heard that so many times from journos where clinicians in the room have got so sort of excited about the sort of work or the person sitting there that it becomes about them wanting to know more about that sort vicarious reporting type of thing. So clinicians need to just calm down and take the person there in the room as an equal person and not have that star power and not make assumptions that what journalists do is bad. We need good journalism in the world, especially now. So finding ways to enable that and encourage that and encourage journalists that are doing good work.

Ashlynne McGhee (29:50):

Yeah, that's a really nice spot to finish, Cait because I think what you allude to there is that journalists are people first, humans first, and journalists second, even though our partners may sometimes disagree, but having a connection with a journo, reaching out, having a conversation, you can talk to any journalist off the record, that means we are not about to use what you say. That's it. And having those honest conversations about, Hey, I think you handled this well, or I wish you could do this. Or What about if my client speaks to you, but we do it in this way, this would make them feel comfortable. None of that ends up in the newspaper, on tv. That's a conversation between two people. That's it. And at the end of the day, if you trust that journo as a person, if you've built a rapport and you trust them and your judgement on them is a okay, then I think we're people too.

Cait McMahon (30:38):

Absolutely. Thanks for that, Ash. So thanks for joining us on this episode of MHPN Presents, A Conversation About all things journalists and trauma, journos in the field, journos in the room. You've been listening to me, Cait McMahon and -

Ashlynne McGhee (30:52):

me Ashlynne McGhee.

Cait McMahon (30:54):

And we hope you've enjoyed this conversation as much as we have. We've sort of gone all over the place. We did warn you that we would weave and duck around the conversation. If you want to learn more about Ashlynne or me, if you want to access the resources, which we've referred to, go to the landing page of MHPN and we value your feedback. So on the landing page, you'll also find a link to the feedback survey. So please fill that out about our session today. If you want more, if you don't want to hear from us ever again, that's completely fine.

Ashlynne McGhee (31:27):

Don't say that.

Cait McMahon (31:29):

But if you would like to add other things that you would like to hear from MHPN, please put that in the survey as well. And we want to thank you for your commitment to and engagement with interdisciplinary person-centered mental health care. So it's goodbye from me, Cait,

Ashlynne McGhee (31:45):

and goodbye from me, Ashlynne.

Cait McMahon (31:47):

And stay tuned for the next MHPN presents podcast, which will be released after a break in August. Thank you.

Host (31:58):

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