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*Introducing Maria Xenidou 00:59*

I met Maria Xenidou in October 2018 during the Podcast Fellowship’s first video call with twenty-five or more other people!? How could that work? I’ve been on many video calls. Most people don’t use their cameras. They barely pay attention. It’s usually a PowerPoint, screen-share waste of time. Maria co-hosted the call. She immediately established a culture of listening, appreciating, and guiding engagement. Wow! Impressive! I had seen the tip of the force, that is Maria. Let me introduce Maria a bit more formally. After twenty years, in product development, technology, innovation, and marketing roles on three continents, today, Maria advises enterprises on their growth strategy through marketing, innovation, and mergers and acquisitions. She also consults with private investment firms interested in the specialty chemical industry. Maria is a storyteller, a connector and a change maker on a mission to empower people to design their learning journey and build the life and career they want. She posts on [LinkedIn](#) daily, and she is the host of the [Impact Learning podcast](#), where, together with her guests, she explores the future of learning and work.

During the time I was firming up my podcast, I changed my mission statement from ***Empowering people traveling together toward best health*** to ***Learn on the journey toward best health***. That was inspired by working with Maria. During this podcast episode, you will hear us talking about ***60 seconds a day***. Maria introduced 60 seconds a day to the Forward Link podcast community in May of this year. About 20-30 people, world-wide, post a 60-second audio clip every day and comment on some of each other’s postings. It’s a daily practice that supports improving technical audio editing skills, speaking skills, and storytelling, development of ideas, strategy, and tactics - in short: learning, fun, and community.

Here's our conversation.

**Health Hats:** Maria, I'm so excited to be talking to you. You're one of my inspirations.

**Maria Xenidou:** Why is that? Of course, I'm very happy to be here, but why am I your inspiration?

**Health Hats:** I think it's a combination of that you're very thoughtful, and you're a community builder, and you know stuff I don't know.

**Maria Xenidou:** Thank you. That's very good.

**Health Hats:** I feel like I have a lot I can learn from you, and I already have learned a lot from you. You're so positive and encouraging of people and encouraging of me. I like that. Thank you.

**Maria Xenidou:** Thank you for your words. I was looking forward to talking with you today. I enjoy learning from you, learning together, and seeing our work. I'm grateful that we met and that we are talking together.

**Health Hats:** I've been looking forward to picking your brain about learning and about being CEO of my health. And I follow your [Impact Learning podcast](#), your [LinkedIn](#) articles pretty closely. And I have the good fortune of experiencing 60 seconds of you every single day. Just to let everybody know, you began and host an initiative of an international group of people who post an audio clip, a 60-second audio clip every single day, and we've been doing it for months. It's brilliant for a lot of reasons. One, people are testing, they're learning, they're giving. The range of [60 seconds a day](#) is people who are testing, practicing, solving technical problems with their audio. They're telling stories, they're trying out ideas, they're talking about their day, they're offering chair yoga. It's such an interesting experience. I take the idea of [60-seconds a day](#) to many different forums. Whether that's in my music life or my consulting life, or my advocacy, it applies. I find the intro to your Impact Learning podcast so interesting. *Can learning transform your life? In the Impact Learning series, I share reflections, insights, and assertions about the way we learn, work and live today and in the future.* Maria, please introduce yourself.

**Maria Xenidou:** I think you've done that well because I like to introduce myself through my work. I'm a Ph.D. chemist who became a corporate executive in marketing and innovation. A couple of years ago, I decided to become a freelancer. I'm an adviser on marketing and innovation, and I advise corporations, but also investment firms on strategic growth strategies. Along with that, as you know, and as you talked about, I think, write, and speak everything Impact Learning. It is a posture for learning everything we need to learn to do our work, but also have a good life.

Impact Learning 07:37

**Health Hats:** Can you say some more about that? What are some of the principles of Impact Learning?

**Maria Xenidou:** It's self-directed learning. As a person who owns my journey, my learning journey, in this case, I explore the options, the resources that are available to me. Then I direct myself to make the right choices and learn what I need to learn. At the same time, it's learning by doing. That's a very important part because we can learn a lot of things in theory. But can I communicate that knowledge? Does it bring us benefit? It doesn't help us with our life unless we put this knowledge to work. So, I believe in learning by doing and learning and exploration. So, again, we learn from other people. We

learn by doing our work and continuing to explore options so we can improve what we know, and the work we do. And I know, Danny, you asked about the way I think of learning. You think of health, but I think they're almost the same thing. Because when I say I am the CEO of my life, of my work, of my learning, I think of the impact I create for other people and for myself. By the way, health is the core of this because if we're not healthy, we cannot do any of the other things I just talked about. So, self-directed learning, learning by doing the work together with other people, and creating impact are the key principles of impact learning.

**Health Hats:** I think you're right. You're using some different words than I use, but I think it's very similar. I came to this frame of CEO of my health, some through listening to you and listening to what you just said about Impact Learning. Owning our health, given our circumstances, our abilities, our environment, our genetics, this is what we have to work with. This is the life we live so we can have the best health given those circumstances. Taking leadership of our health is key to best health. I define best health as peak performance, given what I just said: circumstances, genetics, medical conditions, environment. For the last ten years, I've known that I have multiple sclerosis. Now that I know that I have it, I'm very mindfully the CEO of my health. For the first time in my life, I'm living at peak performance. Now, I might not have the same abilities as I had before. MS is seriously annoying, and it affects my life in more ways than I'm going to get into here. But it gives me a charge to feel like I'm living at peak performance. That's what best health is. So much of that is experimenting, owning, trying stuff, adjusting, trying something else, taking charge, building a team. The team is the community of health - whether it's medical people, nonmedical, clinicians, family, laypeople, coaches, mentors, whatever. That's the team. That's the community. Both go into best health.

**Maria Xenidou:** Two things apply to health and learning that are independent of our genetics, preferences, experiences or the things that are part of who we are, but also our capabilities. **Own our decisions and be willing to do the work every day.**

**Health Hats:** Yes, every day.

**Maria Xenidou:** I have a lower back problem. Not that severe, but severe enough to have to think about it every day. I proactively manage it, so it doesn't get worse. I take full ownership of my decisions, I am responsible for finding what's available in terms of resources, support, and living healthy lifestyle habits. But also, be willing to do the daily practice. These are the things that I need to do to be able to maintain my lower back health. And try to slow it down from getting worse. It is always getting more severe because we all age. We cannot escape that. So very few things get better with age. Okay, a few things get better, and we're grateful for that, but physically - body strength, memory, ability to learn. All these other things we know that they are slowing down as we become older. So, I think it's important that we own it and we explore it. We never give up. We need to keep learning, keep exploring and figuring out how to do what we need to do. And then commit to doing the work every day. We cannot escape that.

60-seconds a day 14:34

**Health Hats:** A couple of interesting things. One is building habits, which is hard for people. I don't know why, but I can build habits. For example, because of my MS, it is very hard for me to get up off the floor. It's a dangerous situation for me to be on the floor and not be able to get up. And I've learned that I can do stuff that's going to help me. I have a physical therapist and chiropractor who have taught me some

skills and some exercises so I can more likely get up off the floor if I need to. So, in a way, I have immediate gratification from having good habits. When I think about best health, I think there's me owning my health and building habits and living at peak capacity. Plus, I'm a person of privilege. I'm blessed. I'm health hats. I'm a patient. I'm a caregiver. I'm a nurse. I'm an informaticist. I'm a health care leader. I'm a white man. I have a lot going for me. Part of my calling as a person of privilege is to be a catalyst for other people to experience best health. One of the things that I see you doing, which I think is so fascinating is that you seem to create these situations like 60 seconds a day that make it fun to create good habits. That makes the good habits, positive inertia. Sometimes I think what stands in the way of good habits is negative inertia. You're very clever at creating these scenarios where people can develop a habit. You don't go, "Oh, that habit of yours really sucks. Here's a better habit." Like somebody saying, "You're fat. Go on a diet. Have a new diet habit." This is not your style. Your style is to introduce something. You make no comment about anybody's anything. But you introduce a habit and people are quite attracted to those habits. They're sound and solid habits. I think there's something to learn from you about how you do that. You're very good at it.

**Maria Xenidou:** Thank you for that. Let's take the 60-seconds a day because I think it's a very good example. The 60-seconds a day started for me first, because I had a problem. I realized that I was taking a lot of time to record my podcast. I did not like how I was articulating my thoughts. I did not like my voice. I realized this just three weeks after I launched the Impact Learning podcast that I needed to practice. There are the people that love their voices, or they have beautiful ways of articulating their thoughts. That was not me. So, I had a problem. On April 11th, I remember the date, I started recording every day, so I would get as comfortable recording as I am with writing. I want to be comfortable speaking into the mic the way I am writing because I've been writing for a long time. I tried to break down the process. So, I started with a problem. I needed to fix my problem. I already knew that to develop skills I need to do something every day. I did not invent this. I had seen it before with other things, including how I manage my lower back condition. In a couple of weeks, I realized that I was much more comfortable. Then I thought within our podcasting community, let me share with them because I think it can help others. I don't offer it as, "here's what you need to do, and please do this." My approach is more, "here is a practice that has helped me. Could it be useful for you?" Because I don't believe they need to be guaranteed anything, whether it's learning podcasting or health. I don't think if we tell people what to do, they will do it. I think it's showing them what it is, offering this resource or this practice. Make them aware. Perhaps show them the way, so it's not so complicated to do it. But then they need to decide. Because each of us - going back to being the CEO of our health and our learning in our life - each of us needs to own our decisions. Whether I'm a coach in the podcasting fellowship; whether I'm a fellow podcaster, it's the same role I play. Here is one practice that can help you. It helped me. In these two or three ways, maybe it will help you. Would you like to join us? I do love building community because I think it's easier when we share our journey. It's so much more enjoyable. It gives me so much joy to be part of the 60 seconds a day. But I did not start with. "let's do something fun. Oh, I have a great idea. Let's do it." It was not like that. I think each of us can do these things. I think what you talked about. You have been managing your health and MS, which is a challenging situation. By telling your story and sharing what you know, resources you find, and other stories, you are a catalyst. Basically, that's all we can do. If we believe we can create change because we tell others what to do, I think this is not the case. I think being a catalyst is the best we can hope for. That's my posture.

Harangue, lead by example, or plant a seed 21:32

**Health Hats:** It's so true. In my world, the health industrial complex, there's a lot of haranguing. Do this, do that. This is good. This is bad. It's strikingly ineffective. It amazes me that so many bright people think that that's the way to better health is to harangue people about what they ought to do and judge them. What you're describing is leading the way by example, sharing. It's interesting. In my communities, some people have pretty amazing lived experience. They've overcome real challenges, and it's inspiring. But the difference between people who are effective advocates, in my view, are people who don't expect to change anybody. But they're free with their story, and they're amazing examples. Lately, as I've been interviewing people for my podcast, I hear a lot about planting a seed. That sometimes the best you can do is plant a seed. And who knows if it will grow or not? It does or it doesn't. There's no immediate gratification. You planted a seed. Up comes the sprout. It's beautiful. It grows, blah, blah. Often, you'd have no idea whether you'll ever see it sprout.

Starting to be CEO of my health 23:49

**Maria Xenidou:** I want to go back. You said for some people it's very easy or simple to see that they can own their health and they can own their life overall. And for others it's not, because it's all about the experience we've had before. So, let me ask you a question. When you decided to become the CEO of yourself, was that something that you decided the first time you were diagnosed with MS, or do you think you had already decided to own, to be CEO of your life, of your family, of your relationships? When did this start?

**Health Hats:** My parents raised us that way. My parents were Holocaust survivors. They worked very hard to own their lives. Sometimes they were successful, and sometimes they weren't. But they instilled in us that we had choices and to make the choices. They supported us in some pretty bad choices that we made. I think your point is good that there's a smaller proportion of people with that in their DNA or their upbringing or whatever. Then there's a much larger group of people that it isn't. As you and I've talked about in the past, our education system, in and of itself, is not very supportive of self-directed, self-owned learning. Our healthcare system isn't either. So, the challenge is often how to be a catalyst for people who don't know that it's an option.

**Maria Xenidou:** That's beautiful. I could not have said it better. I think being a catalyst because that's the best we can do, is to, first, tell our story, to explain to people that this is feasible, this is possible. Like I was able to overcome this constraint and that constraint and the other one and keep moving my life forward. And then teach them, usually by showing them in a simple way, that they can do it too. I don't think it takes a high IQ to keep learning and leveraging resources. We don't have the same capabilities and intellect, but we can all get better by practicing and learning. We can improve our health if we adopt a healthy lifestyle, if we walk, if we do our exercises, whatever we need to do. I think we can all get better. Not all of us compared to each other. But for each of us, we can improve where we are, and we can continue to improve our lifestyle and ourselves, overall. And I think if we show through our story, and then, in a simple way, teach them how to do it. I'm hopeful that we can at least influence a few people. Well, that's the best I can hope for my work.

Learning to be CEO of your health? Push the big pink button and record the conversation with your healthcare professional. Read the transcript or listen to

clips when you get home. Abridge was created by patients, doctors, and caregivers. Check out the app at [abridge.com](https://abridge.com) or download it on the Apple App Store or Google Play Store. Record your health care conversations. Let me know how it went!"

Old or seasoned 28:29

**Health Hats:** That's one of the nice things for me about being seasoned. I am no longer the young enthusiast who thinks he can change the world. I was at one point, but I'm not now. My goals are more modest. My goals are several people steering the battleship to move it one degree to the left or right. I think that comes from being seasoned and, or as I like to say, old.

**Maria Xenidou:** We're all going down the same path, Danny. We cannot avoid it. Clearly, what you said is one thing, but it's, you know, it's age, it's years of experience. That's what it is, which can come sooner for some people, later for others. It depends on how our life is. But it's also the ability to be down to earth, realistic. So, the best thing that has happened to me over the last 20 years is that I stopped being too visionary about the change I can make with my work or with my leadership. My leadership has not changed. I want to believe that my leadership, my leadership skills, are becoming stronger and more impactful. However, I am more realistic right now about the impact I can do. And I'm sure in 10 years, in 20 years, this a reflection will continue to evolve. Now that I know what I know, which I did not know 20 or 30 years ago, I am aware of what my influence and my impact can be. I'm not going to change the world. I can change myself first, and hopefully, again, through telling my story and teaching others and helping in very small and simple steps, others can also decide to change their lives. That's all we can do. Some of us have more resources. Because if I had a lot of free resources to offer, I would. I'm also offering the resource, so my podcast and your podcast and the other things we do, coaching, consulting, all the other things we do are ways that we can teach, serve, provide the resources that we have at our disposal.

Privilege 31:09

*As you've heard me say in previous podcast episodes, the foundation of my work, my mission, is health equity – everyone has the same opportunity for best health. Best health and impact learning both struggle with equity and privilege. At first, our concepts of privilege seemed different, then not so much.*

**Health Hats:** I used to be ashamed of my privilege. I grew up in all different places, but one of the places I lived in high school was a place called Grosse Pointe, Michigan, an upper middle class, upper class suburb of Detroit. For years, really until five years ago or even less, I wouldn't tell people I lived in Grosse Pointe because I was ashamed of it. But I've realized that, okay, I'm a two-legged cisgender, old white man of privilege, and I'm Health Hats. I am invited or I invite myself to sit at a lot of different tables related to national healthcare initiatives. I feel like, okay, I'm a person of privilege. I have this seat, and I'm one voice. I'm only one voice. I have my experience. I have my knowledge. I have whatever it is I have to offer. Part of my responsibility as a person of privilege is to try to open seats for more people with different experiences than I have. It's been liberating to realize that, hey, I am what I am. This is who I am. What can I say? What can I do with it? So, I feel like part of best health and best health for my community is to leverage the gifts I have.

**Maria Xenidou:** How did you develop the story in your head that you have a privilege? Where does this come from?

**Health Hats:** In my last real job, as vice president of quality management, I hired several people from diverse backgrounds. In my mind, I was hiring the best people present. One day somebody came into the office and congratulated me on my diverse hires. I didn't like that. I said, "I hired the best people. I have a great team." The people I hired sat me down and had a very serious conversation with me. "You do not realize how hard it has been for us to find good work. You hired us. You leveraged your position to hire us. So do not minimize that." I was taken aback. I was talked to. I mean, they literally sat me down, stood, and talk to me, and said those things. And I left that thinking, "Oh my goodness. Okay, I am a person of privilege. Be proud of it and use it and be mindful of using it." It was the first time I thought about what I had. I didn't have that frame before until they sat me down and talked to me and said what they said.

**Maria Xenidou:** But this is what I hear now, Danny. The privilege you have is how you used, how you leveraged your resources and power available to you.

**Health Hats:** Resources aren't just money and materials.

**Maria Xenidou:** Yes, of course. If I have a title and I'm the vice president, people listen to what I say. But I tried to put them in a much broader frame. But I think you're privileged. Being a white man and a vice president would not give you privilege in my eyes unless you can turn constraints upside down and leverage resources to benefit yourself and others. To me, and I may have a different opinion than most people, some people believe they have privilege. But if they don't live it in any way to move themselves and others and society forward, to me, that's wasted. And I don't call it privilege because it's wasted resource.

Leadership 37:11

**Health Hats:** Well, that's interesting. When I was a boss, I felt like the most important job I had is to make sure that the people who were on my team had all the resources that they need to do their jobs, and then I got shit out of their way so that they could do their jobs. I felt like those were the two most important things I did.

**Maria Xenidou:** I can say the same thing. I wanted to become a vice president. Not, because the title sounds good, which it does, but because I had access to resources, and I could influence decisions. I could choose the right human beings to do the right kind of job. I wanted to be in a leadership role. In the corporate system that I was part of, being a vice president gave me access to these two things, decisions, and resources. This is how I use my privilege because I also know others, white, black, women, men, gay, who have the same resources and privilege that you and I had as vice presidents, but they don't use them. So, what is the privilege then? Do you see what I mean?

**Health Hats:** Yes, I do.

**Maria Xenidou:** I connect the privilege with impact. Tell me what you're doing with the privilege, with your title, with your resources, with whatever you have at your disposal. What are you doing if you are not using it? It is an asset that is not growing. Going back to seeds. It's an asset that's not growing. And eventually degrading under the pressure and dies. Is that an asset? Is that a privilege? No.

CEO of my health. Ambivalence. Variation. 39:07

*Maria and I spoke about my ambivalence about using the frame of CEO of my health. Best health comes from taking control, being in control of my life. But sometimes being CEO feels negative, oppressive - a lousy boss perhaps. I love how Maria parsed this for us.*

**Maria Xenidou:** Let's break it down. If I'm a patient and I have a health condition and I have relied on certain experts or doctors to help me, and they have not kept their promise for whatever reason. How do I think about it now? What do I do? What do you see? Am I stuck? Am I waiting for someone else to come and save me? Or do I think, if someone has not kept their promise and someone else is just increasing their cost because that's what they want to do and then they want to make money out of my situation? Should I think about a better way to manage this? Which is I am going to be the CEO of my health so I can own my decisions and make the best decisions for my life and health. I'm asking because you know what I am, right? I am the CEO of money, my life, my work and everything. But do you have experience with patients that I don't? So, what is holding them back from saying, that it's time for me to be a CEO of myself?

**Health Hats:** I think its inertia and experience. It is not something they're familiar with. They want a pill. Give me a pill. I need a silver bullet.

**Maria Xenidou:** Okay. But is it because they don't know how to do it, or they don't trust themselves based on their experience that they can do it? Or is it because they want the pill so they can avoid doing the work themselves?

**Health Hats:** I think it's all of those things. I think it's different for different people.

**Maria Xenidou:** Have you seen one being more important than the other, Danny?

**Health Hats:** No. That's the beauty of this work is that there's such variety - the opportunities and challenges are so different. They're individual. But I think your categorization is sound: Aren't aware of it. Don't know how. And don't want to do the work. Sums it up nicely. And I'm sure it's the same for learning.

Fear. Learning. Doing the work. 42:01

**Maria Xenidou:** It's the same. It's fear and experience. Everything is defined by our experience. So, the fear of learning something new - whether we want to advance our work, or we want to improve ourselves. It's learning. And as soon as we realize and we decide that we can do it, then we commit to doing the work. To me, there are two different buckets, but they are part of the same journey. First, the person needs to overcome their fears and believe they can do it. And this is where experience helps us, but also sometimes prevent us from moving forward. And as soon as they decide, "yes, I can be the CEO of my health," then it's the commitment and the promise. Now, I promise I will do the work. Because nothing matters until we do our daily work. It doesn't matter unless you stretch, and you walk every day and you eat healthy. It doesn't matter how smart you are and how fearless you are for me and everybody else was listening. The reason I say that is because we can help people or you can help people as a catalyst, perhaps in different ways based on the stage of their journey.

Keep going. Fill the reservoir. 43:17

**Health Hats** Yes. I think that's really important. Part of the art of this is reading where people are on the journey and then tailoring. I think this Akimbo community that we're part of is a bubble. It is not a typical community. So, it's important for me because I need to get sustenance myself. You know, I'm a very strong character in all sorts of definitions of that word.

**Maria Xenidou:** I have to laugh out loud.

**Health Hats:** To maintain my strength I need to have a large proportion of my day participating in a nurturing, growth, challenging community whether that's Forward Link or whether that's at home with my wife or with my kids and my grandkids, or my very dear friends. That helps me stay strong, so that I can spend a relatively small proportion of my time in the sorta scary, not so together, challenging world and feel like I can offer myself and have an impact.

**Maria Xenidou:** What you are saying, Danny, tells me that you are the CEO of your health because you understand very well that you have a certain level of energy. You use a lot of this energy when you're trying to create change in the world and in the real-life situations you are dealing with. Then you come back to the places that you mentioned - your family, your friends, your community, the Akimbo community, the 60-seconds a day community - so you can refill these reservoirs. What you just talked about is the fundamental of how we manage ourselves. That's physical health, emotional, mental, spiritual, it's all aspects of health. Everything you said, you basically said for me, as well. That's exactly how I use these communities and our families and our friends that we have privilege to be part of them, to do exactly that. Because creating change is difficult.

**Health Hats:** No kidding.

Apocalyptic thinking with pathological optimism 46:31

**Maria Xenidou:** Let me ask you, do you think it's getting better, the more experienced you are? Does it get better?

**Health Hats:** No, I really don't, actually

**Maria Xenidou:** Me either.

**Health Hats:** I'm fortunate that that doesn't get me down too often. I recharge. I have this energy and the energy keeps coming. No, I'm very pessimistic. I'm pessimistic about the climate. I'm pessimistic about the healthcare system. I'm pessimistic about politics. Being the child of Holocaust survivors, I have a mix of apocalyptic thinking and pathological optimism. But it's no fun. I can't live in that apocalyptic thinking too often. Oh my God, it's paralyzing.

**Maria Xenidou:** When we think of a CEO, as you and I know it in the corporate world, what does a CEO do? He or she does not do all the work, but they make the strategic decisions of where the company is going to go? Which market will we enter? Where will we create the most value? Then together with our teams, we make things happen. So, when we are managing our energy, as you said, and we see a lot of things that politically, economically, and other reasons, that aren't going to help us, that's where the CEO makes the right decisions. Am I going to work on this or on the other thing? Am I going to invest in this organization or conference or community or person? Or the other one? I often think I'm being

realistic and down to earth. I'm very optimistic, but I can tell you that there are very few things that give me hope every day. Most of the things don't. I think it's a good thing, right? I say that being optimistic means that I want to see a way forward. I'm not seeing everything beautiful here - beautiful and pinky. I don't see things better than they are. I see them exactly as they are.

An unanswerable question 49:09

But the question, if it gets Danny to be CEO of his health or as a catalyst to create change, how do we make these decisions? Where do we invest our effort and our time and people that we can create change? I am asking this as a question because I think it's the most difficult question we have to answer.

**Health Hats:** It is. All right. I'm going to leave it at that.

**Maria Xenidou:** I was hoping you would give me an answer, but you didn't.

**Health Hats:** I don't have an answer. I'm at a loss. Maria. That's a very hard question.

What gives you hope? Seeds 49:54

**Maria Xenidou:** Okay. So, what gives you hope? Because we talked about a lot of things that don't give us hope. What gives you hope to keep going?

**Health Hats:** What gives me hope is that every day, I see growth - small pockets of growth. I see people doing good work. I'm inspired as you inspire me. It gives me hope that there are other people out there who are working to move in a good direction. I think life is so mysterious and I cannot predict what is going to be the lever that makes a significant change and a community, the world, the nation, whatever. I just don't know. But I do know that it's going to come from people who are doing the work and who are taking charge of their lives and supporting other people doing the same. And I see evidence of that. I see it in my grandkids. I see it in my kids. I feel like there's hope in that. It's everywhere. It's just like little dots.

**Maria Xenidou:** Yes. Everything you said, you talked about growth, and you talked about earlier in our conversation you talked about seeds. So, your grandson literally, they're your seeds. They came from your children. They are your seeds. But everybody that you influence with your work are also your seeds. If they choose to take action based on what they learned from you or some resource they got from you, if they are choosing to use that to grow, that's all we can do. That's all we can do. And that the choice, the tough choice is, to be able to make these decisions almost every day and every week, to find what I call the promising seeds that they will, no qualifications or standards, just seeds that we think we keep watering so they will grow.

**Health Hats:** Thanks for this conversation.

**Maria Xenidou:** Thank you. I always learn so much from you, and I love talking with you.

**Health Hats:** Oh, thank you. It's mutual. Thanks, Maria.

Reflections 52:42

I'm not sure who interviewed who. I guess we interviewed each other. What have we talked about? We talked about learning. Maria had a problem, she figured out how to develop a habit that worked for her. She shared it with no expectation that anyone would change or adopt it. Yet a whole community did.

She leads by example. She's a catalyst. We talked about owning our decisions, doing the work. We talked about planting seeds and about the responsibility to use our privilege to make a difference. And we talked about taking care of ourselves, recharging, so we have the energy to plant seeds and be a catalyst. Impact Learning.