

What does "peak mental health" look like in practice?

This post is just a description of my own definition/view of excellent mental health, aka "peak mental health" - the kind of mental health I believe is achievable for almost everyone when "brute-forcing your mental health" for 3-18 months.

I'd love to make a fully fleshed-out blog post out of this Google Doc, but it's not high-priority enough for me to do the polishing/final editing/finishing to do so. If you want to do so, we can co-author this post! I'm also willing to contribute 30€ to a service like [Amber Dawn Ace's](#) editing service for EAs to improve the post further.

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Quick overview

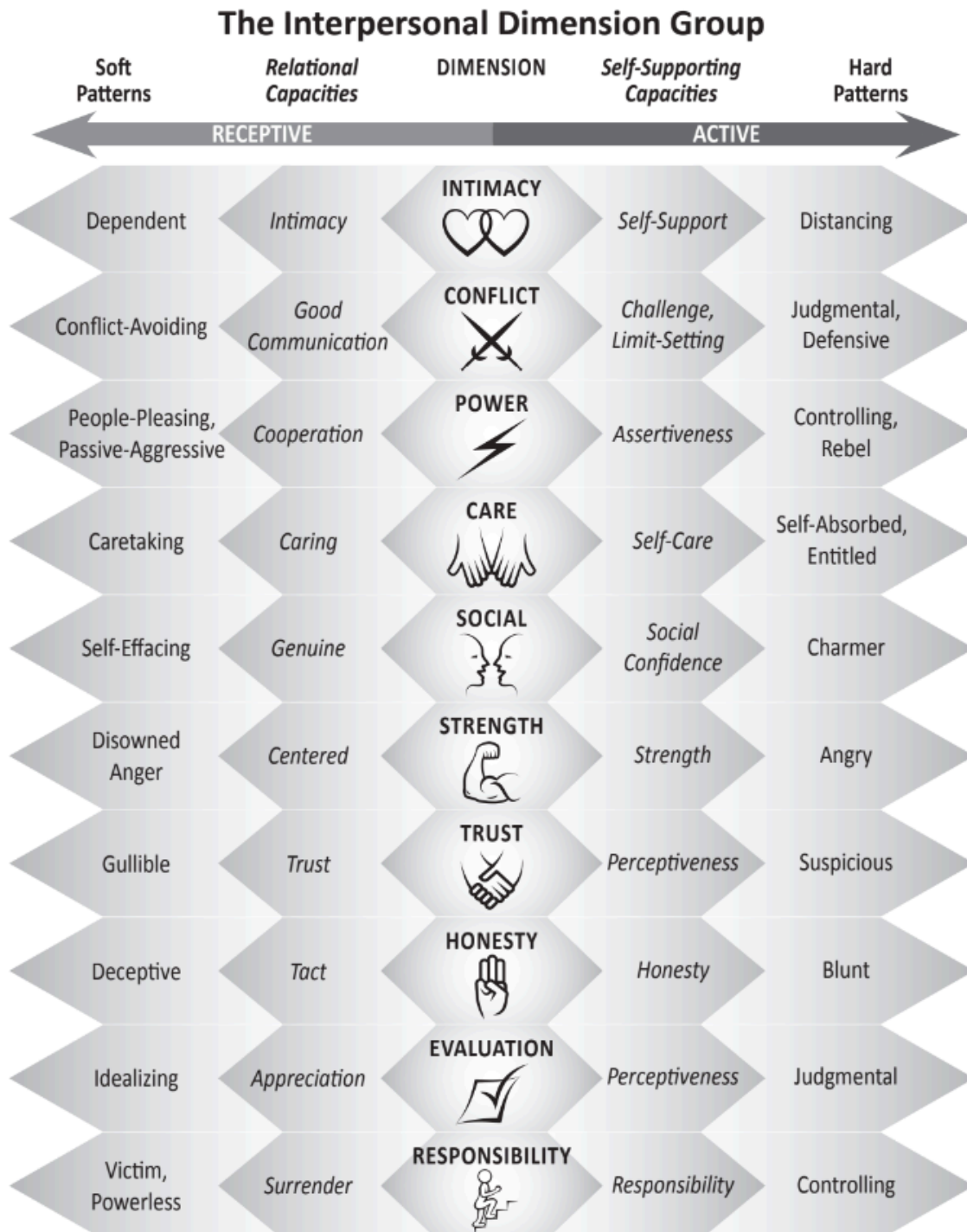
Roughly speaking, by excellent mental health I mean:

- You have pretty **high subjective well-being** - a technical term from psychology used to define happiness in a practical ordinary sense. It includes two things:
 - Your "in this moment right now" happiness. Do you usually feel pretty good, with mostly positive emotions?
 - How satisfied are you with your life in general, very broadly speaking, all things considered?
- You don't have any unhelpful **self-related emotional patterns** like perfectionism, working too long/hard/unsustainable, low agency, self-victimising/pity, feeling powerless, procrastination caused by underlying emotional issues, self-sabotaging, etc.
- You also don't have any unhelpful **emotional patterns when in relation with others**. For example, you are not shy, conflict-avoiding, judgmental, dismissive/arrogant, defensive, people pleasing, passive-aggressive, controlling, rebelling, overly caring/feeling responsible for others too much, self-absorbed/caring too little, performing/acting/unauthentic, unhelpfully suppressing or showing too much anger
- You only have (not necessarily low) "**healthy**" **neuroticism**. No unhelpful worrying, ruminating, no irrational fears. See below.
- perfectly **secure attachment style** in all relationships. Not avoidant, not anxiously dismissive, etc.
- **no inner critics**. Just "inner mentors". No unhelpful guilt tripping either.
- **high & healthy self-esteem**: Fully, deeply belief in yourself while being fully realistic. No (not even subtle) feeling of: having to impress the other, not being good/smart/good looking/etc enough, not being deserving of sth, no imposter syndrome, being unlovable, no overinflated/prideful/entitled self-esteem.

A one-sentence summary of excellent mental health could be **"feeling really good, safe, and at ease with yourself, with others, and with the world."**

The Pattern System

Have a look at these diagrams taken from the book [The Pattern System](#):



The Pattern System works like this: Each row defines one *dimension* of mental health, whose name you can find in the middle column. For example, in the first row you find the "intimacy" dimension:












In order to be mentally healthy with regard to each dimension, you need the two necessary *capacities* in the middle columns. If you lack the left or right one of these capacities, you get the corresponding problematic *emotional pattern(s)*, i.e. emotional problem(s), from the opposite outside column. For example, if you lack the "intimacy" capacity, you have the "distancing" pattern. If you lack the "self-support" capacity, you have the "dependent" pattern.

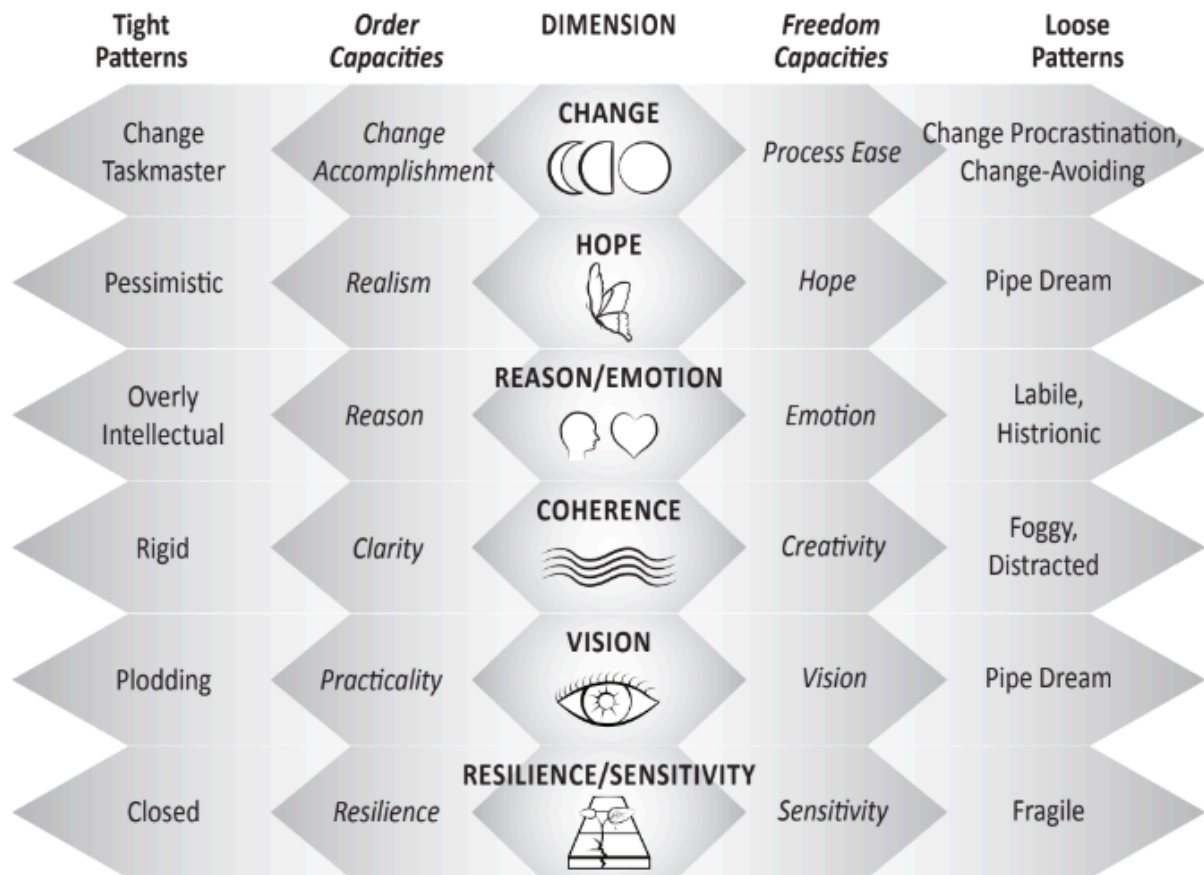
The Pattern System has both a quick overview as well as further detailed descriptions for all capacities and patterns. I highly recommend it to quickly figure out all the emotional problems you have and learn more about those.

Here are two more diagrams of the same kind:

The Inner Critic Dimension Group

Tight Patterns	Order Capacities	DIMENSION	Freedom Capacities	Loose Patterns
Inner Critic	<i>Self-Reflection (Inner Mentor)</i>	SELF-ESTEEM 	<i>Self-Esteem (Inner Champion)</i>	Prideful, Inner Defender
Taskmaster	<i>Work Confidence</i>	ACCOMPLISHMENT 	<i>Ease</i>	Procrastination
Perfectionist	<i>Quality</i>	QUALITY 	<i>Ease</i>	Sloppy
Underminer, Obsessive-Compulsive, Phobic	<i>Prudence</i>	RISK 	<i>Courage</i>	Reckless
Conformist	<i>Cultural Integration</i>	INDIVIDUALITY 	<i>Individuality</i>	Rebel
Inner Controller	<i>Conscious Consumption</i>	PLEASURE 	<i>Pleasure</i>	Indulger
Guilt Tripper	<i>Remorse</i>	CONSCIENCE 	<i>Self-Forgiveness, Self-Acceptance</i>	Callous
Destroyer, Depressed	<i>Peace</i>	ENERGY 	<i>Aliveness</i>	Anxious, Manic
Doubter	<i>Thoughtfulness</i>	DECISION 	<i>Decisiveness</i>	Impulsive

The Personal Dimension Group



The Pattern System also reads as a great manual for **what excellent health looks like: It's what you have when you have all the capacities in the middle and therefore no unhelpful emotional patterns.**

Peak Mental Health definition via schema therapy

Schema therapy talks about emotional schemas. In that frame, my definition of peak mental health is that you don't have any unhelpful emotional schemas.

What follows is a list of the 18 unhelpful emotional schemas from schema therapy, taken from here:

https://drjeffperron.substack.com/p/the-full-list-of-the-18-problematic?utm_source=share&utm_medium=android&r=f9n5q

Unrelenting Standards Schema:

Description: Individuals with this schema have excessively high standards and expectations for themselves and/or others. They may strive for near-perfection (in one or more domains), have a fear of making mistakes, and engage in excessive self-criticism or harsh

self-evaluation. They often feel like “nothing is ever good enough” or that “they have so much to do that they can’t let up.” “Letting up” may be perceived as lazy or irresponsible.

Examples:

- a) Emily sets very high standards for herself in most aspects of her life, whether it's work, relationships, or personal achievements. She is constantly striving for perfection, feeling anxious and self-critical when she falls short of her own expectations.
- b) Alexei, as a perfectionist, expects others to meet the same exacting standards he applies to himself. Although he doesn't usually say anything, he is often highly judgmental of colleagues, friends, and family members when they don't live up to his idealized expectations, causing strain in his relationships.

Statements that might resonate with you if you have this schema:

- "I set extremely high standards for myself that are hard to meet."
- "I'm overly self-critical and rarely feel satisfied with my achievements."
- "I often compare myself to others and feel inadequate."
- "I find it difficult to accept mistakes or imperfections."
- "I'm afraid of being judged or criticized for not meeting expectations."

Self-Sacrifice Schema:

Description: This schema involves consistently placing the needs of others before one's own, often at personal cost. Individuals may neglect their own well-being, feeling a sense of duty or guilt when prioritizing themselves. It may feel “selfish” to take care of one’s own needs, even basic needs.

Examples:

- a) Lisa, who was raised in a family where her mother's needs were always put first, has developed a self-sacrifice schema. She constantly puts others' needs ahead of her own, neglecting her own self-care and feeling guilty when she takes time for herself.
- b) Jose, who grew up in a household where his father required constant care due to a chronic illness, internalized a sense of responsibility for others. He sacrifices his own happiness and dreams to support and care for his family members.

Statements that might resonate with you if you have this schema:

- "I often put others' needs and emotions ahead of my own."
- "I have difficulty asserting myself or expressing my own desires."
- "I feel guilty when I prioritize my own well-being over others."
- "I tend to ignore or suppress my own feelings for the sake of others."
- "I fear being seen as selfish if I prioritize myself."

Negativity/Pessimism Schema:

Description: This schema involves a persistent negative outlook and a tendency to expect the worst in various aspects of life. Individuals may struggle with chronic negativity, find it difficult to see the positive aspects of situations, and anticipate disappointment. Sometimes there may even be pride in “always looking out for the downside” or “being a rational pessimist.”

Examples:

- a) Robert, who experienced some setbacks in school growing up, developed a negativity schema, especially as it relates to his career. He constantly expects failure and disappointment, finding it difficult to recognize and appreciate his own accomplishments.
- b) Aisha, who faced significant challenges in her personal life, has a pessimistic outlook. She always anticipates the worst-case scenario, leading to heightened anxiety and difficulty in taking risks. She feels like no matter how good things are at a given moment, that she “shouldn’t let her guard down” and should “always wait for the other shoe to drop.”

Statements that might resonate with you if you have this schema:

- "I tend to expect the worst in most situations."
- "I often dwell on negative thoughts and possibilities."
- "I have a hard time seeing the positive side of things."
- "I'm always preparing for the worst-case scenario."
- "I feel like things will inevitably go wrong."

Punitiveness Schema:

Description: This schema relates to a tendency to be overly harsh or punitive towards oneself or others. Individuals may have a highly critical inner voice, hold grudges, or engage in self-destructive behaviors as a form of punishment. The punitiveness feels necessary to keep themselves “accountable.”

Examples:

- a) Emma, who was raised in a highly critical and demanding household, internalized a punitive mindset. She constantly berates herself for perceived mistakes and engages in self-sabotaging behaviors.
- b) David, who experienced betrayal in a past relationship, holds grudges and struggles with forgiveness. He sometimes engages in punitive judgments towards others - he scoffs at people (often under his breath) and feels like people need to “be held more accountable.” This sometimes flares up in dangerous ways, like road rage.

Statements that might resonate with you if you have this schema:

- "I'm harsh and critical towards myself when I make mistakes."
- "I often punish myself emotionally or mentally for perceived failures."
- "I have difficulty forgiving myself for past mistakes or shortcomings."
- "I believe that I deserve to suffer as a consequence of my actions."
- "I have a tendency to hold grudges against myself or others."

Subjugation Schema:

Description: This schema arises when individuals prioritize the needs and desires of others over their own, often to avoid conflict or rejection. Growing up, parents may have focused on the crucial importance of being polite and proper. They may struggle with asserting themselves and experience feelings of being controlled or oppressed.

Examples:

- a) Mark, who was raised in a family where his opinions were consistently disregarded, has a strong tendency to subjugate himself. He always defers to others' preferences, sacrificing his

own needs and desires. His resentment is often high in many of his relationships and, at times, has boiled over.

b) Jen, who was in a verbally abusive relationship in the past, continues to subjugate herself to her current partner. She fears asserting her own needs and constantly prioritizes his desires, even at the expense of her well-being.

Statements that might resonate with you if you have this schema:

- "I often sacrifice my own needs and desires to please others."
- "I feel obligated to do what others want, even if it goes against my own wishes."
- "I fear asserting myself because it might upset or disappoint others."
- "I have difficulty saying 'no' and setting boundaries with others."
- "I feel trapped in situations where I have to submit to someone else's control."

Mistrust/Abuse Schema:

Description: This schema develops when individuals experience betrayal or maltreatment in childhood or adolescence. It leads to a belief that others cannot truly be trusted, making it difficult to form and maintain healthy relationships.

Examples:

a) Lisa, who was betrayed by a close friend in the past, finds it challenging to trust others. She constantly doubts their intentions, assumes they have ulterior motives, and keeps them at a distance.

b) Maj, who experienced emotional and verbal abuse growing up, has a deep-seated belief that people are inherently cruel. As a result, he struggles to form close relationships and constantly expects others to betray him.

Statements that might resonate with you if you have this schema:

- "I find it difficult to trust others' intentions."
- "I often question the motives of authority figures."
- "I worry that people will exploit or take advantage of me."
- "I'm skeptical when someone is being nice to me."
- "I have a hard time believing that others have my best interests at heart."

Approval-Seeking/Recognition-Seeking Schema:

Description: Individuals with this schema have a strong need for approval and validation from others. They may excessively seek praise, strive for recognition, or become overly sensitive to criticism. This can manifest in consumerism or striving for social standing, leading to placing undue importance on signs of social status. It may also manifest in an unhealthy need for attention or other forms of recognition.

Examples:

a) Sarah, who grew up in an environment where her achievements were only recognized and praised, has a strong need for approval. She constantly seeks validation from others and feels anxious when she perceives disapproval.

b) Michael, who faced constant criticism and rejection during childhood, developed a relentless need for recognition. He constantly seeks external validation and feels inadequate unless acknowledged by others.

Statements that might resonate with you if you have this schema:

- "I constantly seek validation and approval from others."
- "I feel a strong need to be recognized and praised for my accomplishments."
- "I'm afraid of disappointing others or being criticized."
- "I base my self-worth on the opinions and judgments of others."
- "I often feel anxious if I don't receive validation or recognition."

Emotional Deprivation Schema:

Description: Individuals with this schema feel deprived of love, affection, or emotional support. They may struggle to meet their emotional needs or believe that they are undeserving of love and care. It can lead to assuming that others can't or won't understand or meet their emotional needs.

Examples:

a) Emma grew up in a household where emotional needs were neglected. As an adult, she constantly seeks validation and emotional support from others, feeling chronically deprived of love and affection.

b) Meesh, whose parents were emotionally distant, feels unworthy of love and struggles to express his own emotions. He believes that he is undeserving of emotional intimacy and suppresses his feelings to protect himself from disappointment.

Statements that might resonate with you if you have this schema:

- "I often feel like my emotional needs are unmet."
- "I long for someone to truly understand and empathize with me."
- "I frequently feel empty or emotionally starved."
- "I don't receive the support and affection I need from others."
- "I feel like no one really cares about my emotional well-being."

Vulnerability to Harm/Illness Schema:

Description: This schema involves excessive fear and hypervigilance regarding potential harm or physical illness. Individuals may be excessively cautious, avoid risks, or struggle with health anxiety. Although it can manifest from traumatic experiences or illnesses, it may also develop from having hypervigilant or overly anxious parents.

Examples:

a) Anna, who experienced a traumatic event in the past, is hypervigilant about her safety. She constantly worries about potential harm and engages in excessive precautions to prevent any negative outcomes.

b) Robert, whose parents always monitored him for the slightest sign of illness or risk growing up, has developed health anxiety. He is excessively concerned about his own health, constantly seeking medical reassurance and avoiding situations that he perceives as risky.

Statements that might resonate with you if you have this schema:

- "I'm constantly worried about my health and safety."
- "I feel more susceptible to danger or illness than others."
- "I find it difficult to relax because I'm always anticipating something bad happening."

- "I'm overly cautious and take excessive measures to protect myself."
- "I fear that something terrible will happen to me or my loved ones."

Emotional Inhibition Schema:

Description: Emotional inhibition refers to the tendency to suppress or inhibit the expression of one's emotions, often due to social or cultural norms, fear of judgment, or a desire to avoid conflict. People who exhibit this schema may find it challenging to openly express their feelings (this could include positive ones) and may be more inclined to keep their emotions to themselves.

Examples:

Sarah frequently feels angry or frustrated but rarely shows it to others. She believes that expressing her negative emotions openly will lead to conflict or damage her relationships, so she internalizes them instead.

Mark often experiences anxiety in social situations but tries to hide it by putting on a calm and composed facade. He worries that displaying his anxiety will make others think less of him, so he suppresses his emotional reactions.

Statements that might resonate with you if you have this schema:

- "I find it challenging to express my emotions openly."
- "I tend to suppress or hide my feelings from others."
- "I fear being vulnerable and showing my true emotions."
- "I struggle to connect with my emotions and express them in a healthy way."
- "I feel guarded and restrained when it comes to expressing myself emotionally."

Failure Schema:

Description: People with this schema harbor a deep fear of failure or an inability to meet their own expectations. They may experience perfectionism, procrastination, or a constant need for external validation.

Examples:

a) Abdi, who grew up in a highly competitive household, constantly feels the pressure to achieve extraordinary success. He fears failure and relentlessly pursues perfection, often neglecting self-care and burning himself out.

b) Sam, who faced significant criticism for her achievements during childhood, has developed a fear of not living up to her own standards. She frequently procrastinates and avoids pursuing goals to protect herself from potential disappointment.

Statements that might resonate with you if you have this schema:

- "No matter how hard I try, I always seem to fall short of success."
- "I fear that I will never accomplish anything meaningful in life."
- "I often feel like a failure in many aspects of my life."
- "I doubt my abilities and feel inadequate compared to others."
- "I'm afraid of taking risks because I might fail."

Defectiveness/Shame Schema:

Description: This schema manifests as a pervasive belief of being fundamentally flawed or inadequate. Individuals may feel intense shame, fear rejection, and engage in excessive self-criticism to compensate for their perceived defects.

Examples:

- a) Jamie, who was criticized by her parents during childhood, has a pervasive belief that she is flawed and inadequate. She constantly feels ashamed of herself and seeks external validation to compensate for her perceived defects.
- b) Jonas, who was bullied in school, holds an intense fear of rejection. He constantly criticizes himself, striving for perfection in an attempt to avoid feelings of shame and unworthiness.

Statements that might resonate with you if you have this schema:

- "I constantly feel flawed and inadequate."
- "I believe that I'm fundamentally unlovable."
- "I often feel ashamed of who I am."
- "I have a deep fear of being rejected or abandoned due to my flaws."
- "I compare myself to others and always feel inferior."

Social Isolation/Alienation Schema:

Description: People with this schema feel different, isolated, or disconnected from others. They may struggle to establish meaningful connections and experience a sense of being an outsider or misunderstood. Sometimes despite outward appearances, they believe as though they "never have truly fit in."

Examples:

- a) Rachel, who has always felt like an outsider, struggles to fit in socially. She feels disconnected from others, finds it difficult to establish meaningful connections and frequently experiences loneliness.
- b) Andrew, who grew up in a culturally different environment, feels alienated from his peers. He often experiences a sense of being misunderstood and has difficulty relating to others due to different values and experiences.

Statements that might resonate with you if you have this schema:

- "I often feel like I don't fit in anywhere."
- "I feel like an outsider in social situations."
- "I have difficulty connecting with others on a deep level."
- "I often feel lonely, even when surrounded by people."
- "I feel like no one really understands or accepts me."
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Abandonment/Instability Schema:

Description: Individuals with this schema fear being abandoned or left alone, often due to early experiences of loss or inconsistency. They may have intense emotional reactions, cling to relationships, or struggle with self-reliance.

Examples:

a) Jas, who experienced frequent changes in caregivers during childhood, struggles with an intense fear of being abandoned by her romantic partners. This fear leads her to constantly seek reassurance and cling to her relationships.

b) David, whose father left the family when he was young, has a pervasive belief that people will eventually leave him. He avoids forming deep connections and maintains emotional distance to protect himself from potential abandonment.

Statements that might resonate with you if you have this schema:

- "If someone gets too close to me, they will eventually leave."
- "I fear being alone and abandoned by those I care about."
- "I worry that people I love will betray or reject me."
- "I have a hard time trusting that relationships will last."
- "I feel anxious when someone important to me is not available."

Enmeshment/Undeveloped Self Schema:

Description: This schema emerges when individuals experience blurred boundaries and a lack of individuality in their relationships, often with parents. They may have difficulty asserting their own needs and desires, often sacrificing their own identity for the sake of others. They might feel like their life is inextricably linked with that of one of their parents. Frequently, this schema can involve a parent who is in very frequent contact/involvement with the individual.

Examples:

a) Emily grew up in a family where boundaries were blurred, and individuality was not encouraged. She struggles to assert her own needs and desires, often having her mother make decisions on her behalf. Her mother encourages this pattern, often "inserting" herself into Emily's life, particularly related to general decisions (e.g. leasing a vehicle) as well as in relation to her relationships.

b) Sunil, who has always been overshadowed by a dominant sibling, lacks a clear sense of identity. He constantly adapts to others' expectations, suppressing his own opinions and desires to avoid conflicts.

Statements that might resonate with you if you have this schema:

- "I have difficulty establishing and maintaining boundaries in relationships."
- "I often lose myself in relationships and adapt to others' needs."
- "I feel like I don't have a strong sense of who I am as an individual."
- "I struggle to assert my own preferences and desires."
- "I fear being alone and define myself through my relationships."

Dependence/Incompetence Schema:

Description: This schema arises from a lack of confidence in one's own abilities and a perceived inability to function independently. Individuals may rely excessively on others, fear making decisions, or doubt their own competence. Like with the enmeshment schema, sometimes the dependence schema comes about from overbearing or overly critical parents.

Examples:

a) Simone, due to a lack of confidence in their abilities, relies heavily on others to make decisions for them. They fear making mistakes and doubt their own competence in various areas of their life.

b) Gilles, who was overly protected by his parents, struggles with independence. He feels incompetent and relies on others to take care of basic tasks, believing he cannot function effectively on his own.

Statements that might resonate with you if you have this schema:

- "I doubt my ability to handle things on my own."
- "I often feel helpless and reliant on others."
- "I struggle to make decisions without someone's guidance or approval."
- "I feel inadequate and rely heavily on others to take care of basic tasks."
- "I'm afraid of being independent because I might make mistakes."

Entitlement/Grandiosity Schema:

Description: This schema involves an exaggerated sense of self-importance and entitlement. Individuals may believe they deserve special treatment or privileges, disregarding the needs and boundaries of others. A milder form of this schema often involves an underlying sense of being "special" or superior to others.

Examples:

a) Robert, who grew up in a wealthy family, developed a sense of entitlement. He expects others to cater to his every need and displays a lack of empathy for those less fortunate.

b) Jessica, who achieved significant success in her career, believes she is superior to her colleagues. She disregards their opinions and insists on having her own way, often causing conflicts in the workplace.

Statements that might resonate with you if you have this schema:

- "I believe that I deserve special treatment from others."
- "I often feel superior to those around me."
- "I expect to be recognized and admired for my achievements."
- "I feel entitled to have my needs met without having to reciprocate."
- "I have a sense of superiority that sets me apart from others."

Insufficient Self-Control/Self-Discipline Schema:

Description: This schema refers to a difficulty in regulating emotions, impulses, or behaviors. Individuals may struggle with self-discipline, engage in addictive behaviors, or have trouble managing anger or frustration. In some cases, individuals with, for example, ADHD were given the message that they were difficult or lacked control. This can contribute to a belief that one simply can't discipline themselves in certain domains, even if this is not borne out by real world evidence.

Examples:

a) Adam, who grew up in an environment where boundaries were not enforced, struggles with self-control. He frequently engages in impulsive behaviors, such as overspending or overeating, without considering the consequences. He believes that he is "just wired this way."

b) Karen, who experienced intense emotional outbursts during childhood, has difficulty managing her anger. She often lashes out at others, damaging her relationships and regretting her actions afterward.

Statements that might resonate with you if you have this schema:

- "I have difficulty resisting temptations and impulses."
- "I often feel out of control when it comes to managing my behavior."
- "I struggle to stay focused and disciplined in my actions."
- "I find it challenging to delay gratification or stick to long-term goals."
- "I feel guilty and ashamed when I give in to my impulses."

healthy neuroticism

Even if you have high neuroticism as a trait (AFAIK largely determined by your genes), you can still have excellent mental health. It's just that in that case you only have 'healthy' high neuroticism (according to my own definition).

Healthy high neuroticism just means that you strongly lean towards one side on the spectrum of genuinely equal points/choices with respect to the true trade-offs:

- taking risks vs. playing it safe
- exploring for longer vs. quickly start exploiting
- try new things and stick your neck out vs. stick to tried & tested
- etc.

There's nothing wrong with healthy high neuroticism. It doesn't make you feel bad, and it doesn't necessarily put you at a disadvantage. The happiest person on earth could have very high healthy neuroticism.

Only unhealthy high (or even low) neuroticism is a problem: It's a failure where you misjudge risks for too high. Where you play it unreasonable safe without gaining much. Where you explore too little for no good reason.

Unhealthy neuroticism stems from underlying emotional root causes ("trauma" aka emotional schemas aka Protectors/Exiles (in IFS model)). Healthy neuroticism is just a (AFAIK fairly stable fixed) trait.

Comments & further thoughts

I'm setting an extremely high bar for my definition of excellent mental health. Most people probably don't know anyone who qualifies as having this EMH.

My definition of "perfect psychological health" does not include something like not having ADHD, not having bipolar personality disorder, or not having endogenous depression (i.e. the

kind of depression you get from biological causes rather than something like childhood trauma). This is because as far as I know these things are not curable with ordinary therapeutic therapy, like talk therapy. There is no trauma that you can be cured from that would fix your ADHD.

In short, my definition of psychological health only includes the kind of mental health progress you could actually achieve - the kind of problems you could in theory all get rid of if you did enough of various therapeutic techniques - therapy, meditation, entrospection, emotional work, psychedelic therapy, etc. - for long enough. We all only have a finite number of trauma/Exiles/unhelpful emotional schemas/supressed problematic mind structures - and if you fixed them all one by one eventually you have none left.

I want to emphasize again that while I'm not sure if such a mentally healthy person actually exists, I feel like it absolutely should exist. I think it makes sense to at least put it out there as some aspirational goal. Peak mental health is what we all should strive for in a healthy way - only being satisfied with something less if for some good reasons it right now doesn't make sense to focus on it. This peak mental health really is what we all can get! It would only take a finite amount of various therapeutic interventions done long enough. Indeed I argue elsewhere that getting "peak mental health" is achievable for almost everyone if they did a "full-time mental health sabbatical" the right way.