

Social Connection And The Mind – And How We Move About In The World

By Kevin A. Sensenig

Draft 1.01

2019 October 31

It is my view that psychiatrists should be talking about the mind (and not as much focus on brain function – although Sekida talks about physiology in his book Zen Training (but that involves the respiratory function, as well – body-breath-mind – as a requisite for anything we do, from physical action to mental action)).

I was reflecting on this and that, and for the individual who is granted context to work with or realize new social connections, or work-effort:

- The individual recognizes these social connections in mind, and moves about in physical space.
- Value-social. (The Keystone Human Services term.)
- Relational-participant. (My term; a multi-faceted term that indicates the social-relational.)

This makes a difference in mind, and how we move about in the world. Isn't this what psychiatry is (or should be) after?

Perception also is of the mind, and makes a difference in the mind, and how we move about in the world.

Solitude can be cited; and this is not a sense of isolation.

Psychiatrists completely set aside or are not aware of key factors and views. It never makes it into the psych unit psychiatry.

I suggest that these factors and views be looked into, and this should be part of the vocabulary within the mental well-being space. It would also be mvo-p.

See what you think.