



The Everyday Art of Feeling Well

A grounded guide to building health habits, making informed care choices, and spending with confidence

Make care count.

SHAD EDDIE MONGRUE

Free preview · Introduction and Chapter 1
shadeddiemongruebooksgallery.com

SHELF 05 OF 32 · HEALTH · CORE BOOK

The Everyday Art of Feeling Well

A grounded guide to building health habits, making informed care choices, and spending with confidence

SHAD EDDIE MONGRUE

Shad Eddie Mongrue Books Gallery · shadeddiemongruebooksgallery.com

The Everyday Art of Feeling Well. Free preview edition: Introduction and Chapter 1. © 2026 Shad Eddie Mongrue. All rights reserved. Published by the Shad Eddie Mongrue Books Gallery, shadeddiemongruebooksgallery.com.

This book is for education and general information. It is not personal financial, legal, tax, medical, mental-health, nursing, investment or other professional advice. Talk with a qualified professional about your situation.

Every statistic, study finding and documented example is numbered and listed in the Sources, with a link to the page it came from. Each was checked word for word against its source in October 2026. Stories marked "composite example" are illustrations drawn from common situations; their names and details are not real people. Stories marked "documented example" come from the cited sources.

Research credits: see "Research Credits" at the back of the book. Cover and design: Shad Eddie Mongrue Books Gallery.

Contents

INTRO	An Invitation
CH. 1	The Quiet Value of Feeling Well
CH. 2	Get to Know Your Starting Point
CH. 3	Make Change Fit Your Life
CH. 4	Let Your Surroundings Help
CH. 5	Ask Better Questions About Health Advice
CH. 6	Make Prevention a Conversation
CH. 7	Get More from a Health Visit
CH. 8	Spend With Care, Not Fear
CH. 9	Avoid the Traps of All-or-Nothing Health
CH. 10	Keep Building a Life of Care
RESEARCH	What the Evidence Says
PRACTICE	Your 30-Day Practice Plan
REFERENCE	Glossary
LETTER	Keep Going
BACK	Sources and Research Credits
BACK	About the Author

An Invitation

Most days, health does not arrive as a dramatic question. It shows up in whether you have the energy to make dinner, how you feel when you wake, whether an appointment leaves you with a clear next step, and how much room your budget has for care. These ordinary details are easy to overlook because they rarely announce themselves as a grand project. But they are part of a life. Paying attention to them can be an act of respect for yourself, not a verdict on how well you are doing.

That attention does not require you to become a full-time health manager. You do not need to measure every bite, turn every walk into a performance, or treat a tired Tuesday as evidence that you have failed. You can start with curiosity: What is helping? What is getting in the way? What would make one useful action easier to repeat? A kind question often opens more doors than a stern command. The aim is not to perfect yourself. It is to make choices with a little more understanding and a little less guesswork.

There is good reason to take everyday health seriously, without turning that seriousness into alarm. In 2023, 76.4% of US adults—more than 194 million people—reported at least one of 12 selected chronic conditions¹. That figure describes a broad population, not your personal future, and it does not tell you what your health will be. It does remind us that caring for health is not a niche hobby for unusually disciplined people. It belongs in ordinary life, alongside work, family, errands, rest, and all the plans that rarely fit neatly into a calendar.

Health is also more than a list of diagnoses. The way people assess their own health is a global assessment of well-being and can predict outcomes including mortality, morbidity, and functional status². That makes your experience worth noticing, even though self-assessment is not the same as a medical evaluation. You can pay attention to what feels difficult or different, and bring those observations to a care professional when appropriate. Your perspective is useful information; it is not a demand that you diagnose yourself.

A helpful habit can be modest. It might mean putting a medicine list where you can find it, asking one more question at an appointment, choosing a walk that fits the day, or pausing before you trust a confident claim online. Healthy behaviors such as not smoking, eating healthy, being active, and limiting

drinking can reduce the likelihood of chronic disease and improve the odds of staying well and living longer². That is an invitation, not a promise. People have different circumstances, and a sound plan leaves room for access, preferences, setbacks, and professional guidance.

This book is for the real-life version of you: the person with competing responsibilities, limited time, questions about costs, and sometimes a plan that works beautifully until Thursday. You do not have to feel inspired every day to take a useful next step. You can learn to make routines easier to return to, ask clearer questions, and evaluate advice without handing your judgment to the loudest voice in the room. Everyday care can be a source of curiosity, connection, and agency. It is worth loving not because it makes life perfect, but because it helps you meet life with more choice.

Reasons to fall in love with this subject

- **It starts with your actual life** Health advice can sound as if everyone has the same schedule, kitchen, body, budget, and support system. Real life is less tidy. This subject becomes more welcoming when you begin with what is already working and what is genuinely hard, then choose a next step that fits. You are allowed to adapt the plan. The most useful routine is not the most impressive one on paper; it is one you can make your own and revisit when circumstances change.
- **Small actions can become familiar** A routine does not need a dramatic beginning to matter. Research reviews have examined techniques such as cues, goal setting, and self-monitoring, and findings on habit formation also emphasize practice and consistent context^{3,4}. Those findings do not mean there is a magic number of days or a guaranteed formula. They offer a practical idea: make a chosen action easier to notice and repeat. If your first attempt is clumsy, congratulations—you have joined the very large club of people learning something.
- **It makes room for other people** Caring for your health does not have to be a solitary contest against your own motivation. Support can come through a conversation, shared activity, a helpful care team, or a group that makes a new skill less mysterious. Research on behavior-change interventions has evaluated social influence, including sharing, teamwork, and social support³. What works for you may be different from what works for someone else. The point is to notice whether connection makes a valued action easier, kinder, or more enjoyable.

- **It gives your questions a place** You are allowed to ask how strong the evidence is, who a recommendation is meant for, and what a choice might mean in your circumstances. You are also allowed to say that you are unsure. These questions are not obstacles to good care; they can help turn a confusing decision into a conversation. Learning to pause and check a claim can protect you from treating confidence as proof. It can also help you recognize when a question belongs with a clinician or another qualified professional.
- **It can make care feel more understandable** A health visit is easier to use when you can explain what matters to you and leave with a sense of what happens next. Preparing a short question list, keeping a medicine record, and asking for an explanation in plain language are practical ways to take part. If instructions are unclear, checking your understanding is sensible—not embarrassing. You do not need to arrive with a perfect script. A few notes and one honest question can give the conversation a helpful starting point.
- **It helps you spend with more confidence** Health care decisions can include financial questions as well as medical ones. Learning to review a bill, ask about expected charges, and inquire about assistance gives you tools for a clearer conversation. It will not make every cost predictable or every bill disappear. It can help you notice when something needs clarification and find out what options may be available. Confidence here does not mean having all the answers; it means knowing a few reasonable questions to ask before you make a decision.

BY THE END OF THIS BOOK, YOU WILL BE ABLE TO

- Notice what is going well, what feels difficult, and which small change could be a useful first priority.
- Shape a routine around cues, your preferences, and the conditions of your everyday life.
- Adjust a plan after a setback without deciding that one difficult day cancels all your effort.
- Consider how relationships, time, access, and surroundings affect the choices available to you.
- Pause over health claims and ask who is making them, what evidence supports them, and whether they apply to you.
- Use preventive-care guidance as a starting point for a conversation about your own circumstances.
- Prepare for appointments, keep useful medication information, and check that you understand the next steps.
- Review health-related costs and ask about estimates, billing questions, or financial assistance when relevant.

How to use this book

You can read this book in order, or begin with the chapter that matches the question currently taking up space in your mind. If you are trying to build a routine, start with the chapters on your starting point, change, and surroundings. If an appointment or bill is on your calendar, go directly to the chapters that help you prepare. The chapters connect, but they are not a test you must pass before moving on.

As you read, choose one idea to try rather than collecting a dozen new obligations. Write down what you want to test, what might make it easier, and what could get in the way. Then give yourself permission to revise the plan. A missed day can be information: perhaps the cue was easy to miss, the timing was poor, or the action was too large for that week. Adjusting is part of practice, not evidence that you lack character.

Use the book's questions and exercises as prompts for your own thinking, and bring medical questions to a qualified care professional when you need personal advice. You may find it helpful to keep a running list of questions for an appointment or a note about what you want to understand next. You do not

have to make every decision at once. A useful next step is still useful when it is small.

HOW THIS BOOK HANDLES EVIDENCE

This book is educational, not personal medical, mental-health, financial, or other professional advice. Recommendations and options may depend on your health, history, location, coverage, and circumstances, so consult an appropriate professional about decisions specific to you. Numbered citations identify the sources behind research claims and guidance; they do not mean that every finding applies to every reader. Any composite example is an illustration, not a report about a real person, and documented examples will be limited to the details supported by the cited facts. Evidence has limits, outcomes vary, and no routine or spending strategy can promise a particular result.

The Quiet Value of Feeling Well

A COMPOSITE EXAMPLE • NAMES AND DETAILS ARE ILLUSTRATIVE

At the end of a long day, Maya stands in the kitchen with one hand on the counter and the other holding a grocery bag. The kettle is beginning to hiss. Her phone buzzes with a reminder she meant to follow up on, and a friend has sent a message asking if she wants to take a walk. Nothing dramatic has happened. Still, she pauses to notice: her shoulders are tight, she is hungry, and the thought of fresh air sounds better than another hour scrolling on the couch.

Maya is not trying to earn a perfect-health badge. She is not measuring her worth by whether she goes for a walk or makes dinner from scratch. She is simply noticing what her body and mood are telling her, then choosing a small next step that might help her feel more like herself.

That kind of attention is easy to overlook. Health often gets discussed as a problem to solve or a goal to reach. But it also has a quieter value: it affects the ordinary things you can take part in, from making plans to concentrating at work to enjoying an unhurried cup of tea. Paying attention can be an act of curiosity, not a search for something wrong.

Health is part of how you live

It is tempting to think of health as a line separating illness from wellness. On one side, everything is fine; on the other, something needs fixing. Real life is less tidy. You can have a diagnosis and still find ways to enjoy your day, and you can have no known diagnosis while feeling exhausted, worried, or unable to do the things that matter to you. Health is not a single switch.

Try thinking of health as part of your ability to participate in your own life. Can you focus on a conversation? Do you have enough energy for the parts of the day you care about? Can you recover after a busy stretch, ask for help, or make room for pleasure? These questions do not replace medical evaluation. They help you notice what well-being means in the context of your actual day.

The Centers for Disease Control and Prevention describes self-rated health as a global assessment of well-being and says it can predict outcomes such as mortality, morbidity, and functional status². That makes your own perception worth listening to. It does not make your perception a diagnosis or a verdict. A useful check-in might be, “What feels easier lately?” alongside, “What feels harder?” Both questions belong.

This wider view matters because daily life is not a waiting room between medical appointments. The way you feel can shape how you work, care for others, rest, connect, and make choices. Noticing those effects gives you a more personal reason to care for your health than chasing an abstract ideal. You are not trying to become a flawless person. You are trying to support a life you want to be present for.

Notice without turning yourself into a project

Curiosity starts with observation. Judgment starts with a sentence like, “I’m terrible at taking care of myself.” Observation sounds different: “I’ve been skipping lunch on busy days,” or, “I feel more settled after I get outside.” One sentence condemns the whole person. The other offers information you can use.

You might notice energy, sleep, appetite, mood, pain, movement, or how easily you keep up with ordinary responsibilities. You do not need to track every detail. Choose the parts that matter to you, and keep the record simple enough that you will not dread seeing it. A note in your phone, a mark on a calendar, or a quiet check-in at the end of the day can be enough.

Self-rated health has limits: the CDC measure of fair or poor self-reported health is based on self-assessment and does not include an objective health component². That is a reason to use self-observation thoughtfully, not a reason to ignore it. Your impressions can help you describe what is happening and decide what questions to raise with a health professional. They cannot, by themselves, tell you what condition you have or what treatment you need.

Your starting point is also shaped by circumstances. Fair or poor self-reported health varies by age, race, education, urbanization, and poverty status, and monitoring it can help inform interventions and show change over time². That finding is a reminder not to treat a comparison with someone else as a fair scorecard. People have different bodies, histories, responsibilities, and access to support. Your useful question is not, “Am I doing as well as everyone else?” It is, “What would make my own day a little more workable?”

Make room for the whole picture

A health check-in can include good things as well as difficulties. Maybe you have a routine that is serving you, a person you can call, or a task that feels easier than it did last month. If you only scan for problems, you can miss the resources already in your life. Naming what is going well is not pretending everything is fine; it is getting a fuller picture.

The picture can include emotional well-being, too. In 2022, 15.9% of U.S. adults reported frequent mental distress, defined as 14 or more mentally unhealthy days in the past 30 days related to stress, depression, or problems with emotions². That statistic describes a population, not your individual experience. But it helps make clear that emotional strain is part of health, not a personal failure or a side issue you have to hide.

If you have a difficult stretch, try describing it without rushing to explain it. “I’ve been tense most evenings” is a useful starting point. “I must be doing everything wrong” is a conclusion, and conclusions made when you feel worn down are not always reliable. You can be compassionate with yourself and still take a concern seriously. Kindness is not the same as brushing something off.

There is no requirement to find a bright side in every hard moment. Some things are simply hard. The point is to let your attention be broad enough to notice both strain and support, and to choose a response that fits the situation. Sometimes that means resting or asking someone to share a task. Sometimes it means making an appointment or bringing a concern to a clinician. This book offers education, not personal medical advice; when you need care, a qualified professional can help you consider your circumstances.

Choose care over perfection

Perfectionism can disguise itself as motivation. It says you must fix everything at once, follow the ideal routine every day, and never lose momentum. Then real life arrives: a deadline, a sick child, a tight budget, a poor night’s sleep. The routine slips, and the perfectionist voice declares the whole effort ruined. That is a lot of drama for one missed walk.

A more useful approach is to ask what kind of care is possible today. You might choose a smaller version of a routine, try again tomorrow, or decide that rest is the sensible choice. These are not loopholes. They are ways to keep health connected to the life you actually have, rather than to a plan designed for a person with unlimited time and no interruptions.

The CDC says that not smoking, eating healthy, being active, and limiting drinking can reduce the likelihood of chronic disease and improve the odds of staying well and living longer². This is guidance about possibilities, not a promise that any person can control every health outcome. It also does not mean there is one perfect way to eat, move, or arrange your life. Your circumstances and needs matter.

Think of attention as a small act of agency. You notice something; you decide whether it needs action; you take one manageable step or seek help. The step may be modest, but it can still express care. Health is worth loving not because it can be perfected, but because caring for it can help you meet your own life with more presence, connection, and choice.

RESEARCH SPOTLIGHT

Research spotlight

Self-rated health is more than a casual mood check. The CDC describes it as a broad assessment of well-being and a predictor of outcomes that include mortality, morbidity, and functional status². That makes it worth paying attention to what you think and feel about your health. But the measure is based on self-assessment alone and does not include an objective health component². In other words, your sense of how you are doing can offer valuable information without giving you a complete medical picture. A rough week does not automatically mean something is medically wrong, and a positive feeling does not rule out a health concern. Use your observations to put words to your experience, notice changes, and prepare questions. If something concerns you, bring it to a qualified professional who can consider more than a self-rating.

A life example

A COMPOSITE EXAMPLE · NAMES AND DETAILS ARE ILLUSTRATIVE

A small change in the question

Darren has been feeling worn out after work. His first thought is that he needs to get more disciplined: cook every meal, exercise regularly, and stop wasting evenings. The list grows until it feels like another job. After a few days, he avoids thinking about it at all.

Then he tries a smaller question: “What have I noticed?” He realizes that he tends to feel most drained on days when he rushes through lunch and never steps away from his desk. He also notices that a short call with his sister usually lifts his mood. These observations do not explain everything, and Darren does not treat them as a diagnosis. They give him a place to begin.

He decides to keep a snack in his work bag and take a brief pause when his schedule allows. Some days he remembers; some days he does not. When the tiredness continues to concern him, he makes a note to bring it up at a health visit rather than trying to solve it with guesses from the internet.

Darren has not transformed his life in a week. He has replaced a sweeping self-criticism with a few useful clues. That is progress of a quieter, more durable kind: he is paying attention without demanding that he become a different person overnight.

TRY THIS

A kind check-in

Take a few minutes to notice what your health is making easier or harder, without grading yourself.

1. Choose one ordinary part of your day to think about, such as waking up, getting through work, preparing food, or settling down at night.
2. Write down one thing that has been going well in that part of the day.
3. Write down one thing that has felt difficult, using a plain description rather than a judgment about yourself.
4. Ask what might be contributing: timing, stress, sleep, responsibilities, surroundings, or something else you have noticed.
5. Choose one small next step, or decide that your next step is to ask someone you trust or a health professional for help.
6. Check back later and notice what you learned. You are collecting clues, not trying to pass a test.

Myths and honest truths

- **Myth:** If I feel okay, there is nothing to pay attention to. **Truth:** Feeling okay is worth appreciating, but self-perception alone does not provide a complete

medical picture. Notice your experience and use appropriate care when you have questions or concerns.

- **Myth:** If I have a health condition, I cannot really be well. **Truth:** A diagnosis is one part of a person's life, not a complete description of their well-being, relationships, or ability to take part in meaningful activities.
- **Myth:** Being kind to myself means making excuses. **Truth:** Kindness can help you look honestly at what is happening without turning a difficulty into a verdict about your character. You can accept a setback and still choose a next step.

KEY TAKEAWAYS

- Health affects how you participate in ordinary life, not just what appears on a medical record.
- Your observations matter, but they are not a diagnosis or a substitute for professional care.
- A useful check-in notices what is going well as well as what feels difficult.
- Your circumstances are part of your health story; comparison is not a fair measure of your worth.
- Care does not require perfection: notice, choose a manageable step, and adjust as needed.

REFLECT

1. *What part of an ordinary day feels most important to your sense of well-being?*
2. *What is one thing your body, mood, or routine may be telling you lately?*
3. *What would paying attention with curiosity, rather than judgment, look like for you?*

Nine more chapters are waiting

You've read the Introduction and Chapter 1. The full 92-page book continues with:

- CH. 2 Get to Know Your Starting Point
- CH. 3 Make Change Fit Your Life
- CH. 4 Let Your Surroundings Help
- CH. 5 Ask Better Questions About Health Advice
- CH. 6 Make Prevention a Conversation
- CH. 7 Get More from a Health Visit
- CH. 8 Spend With Care, Not Fear
- CH. 9 Avoid the Traps of All-or-Nothing Health
- CH. 10 Keep Building a Life of Care

Plus the research analysis "What the Evidence Says", a 30-day practice plan, a glossary, and every source with full research credits.

JOIN FREE OR GO INSIDER

Join the free Reader's Circle at shadeddiemongruebooksgallery.com to read the full book online, listen with AI reading mode in a man's or a woman's voice, and download the PDF. Want every shelf? Reserve an Insider membership.

Sources for these chapters

Numbers in the text (like ³) point to these sources. Every statistic, finding and documented example was copied from its source page, checked word for word against that page in October 2026, and is restated here in plain English. Figures can change as sources update. This book is for education and is not personal financial, legal, medical, mental-health, nursing, investment or other professional advice.

- 1 **Preventing Chronic Disease.** *Trends in Multiple Chronic Conditions Among US Adults, By Life Stage, Behavioral Risk Factor Surveillance System, 2013–2023.* 2023. https://www.cdc.gov/pod/issues/2025/24_0539.htm
- 2 **Centers for Disease Control and Prevention (CDC).** *Health Status | PLACES | CDC.* October 29, 2024. <https://www.cdc.gov/places/measure-definitions/health-status.html>
- 3 **JMIR Publications.** Yujie Zhu; Yonghao Long; Hailiang Wang; Kun Pyo Lee; Lie Zhang; Stephen Jia Wang. *Digital Behavior Change Intervention Designs for Habit Formation: Systematic Review.* 2024 May 24. <https://pmc.ncbi.nlm.nih.gov/articles/PMC11161714/?ref=everyday.app>
- 4 **MDPI.** Ben Singh, Andrew Murphy, Carol Maher, Ashleigh E Smith. *Time to Form a Habit: A Systematic Review and Meta-Analysis of Health Behaviour Habit Formation and Its Determinants.* 2024 Dec 9. https://pmc.ncbi.nlm.nih.gov/articles/PMC11641623/?trk=article-ssr-frontend-pulse_little-text-block