

NAME

The Rehabilitation Collaborative Episode 1: Dr .David N. Grimshaw On Coping With Family Stressors

DATE

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DURATION

40m 45s

2 SPEAKERS

Chris Sovey

David Grimshaw

START OF TRANSCRIPT

[00:00:00] Chris Sovey

Welcome to the Rehabilitation Collaborative podcast, where we help our listeners build resiliency despite adversity. I'm your host, Dr. Chris Sovey, owner of Healthy Consumer Physical Therapy in Lansing, Michigan.

[00:00:11] Chris Sovey

In this podcast, we connect individuals and communities with resources and exceptional practitioners so they can transform their well-being and become happier, healthier, more mobile, and strong. After listening, if you found the show valuable, be sure to follow our podcast so you never miss another episode again at anchor.fm/rehabcollab. That's anchor.fm/rehabcollab. And with that said, let's get on with the show.

[00:00:47] Chris Sovey

Welcome to the Rehabilitation Collaborative podcast, where we help our listeners and community build resiliency despite adversity. And I want to just introduce myself first. I'm Chris Sovey of healthy consumer PT and I am a physical therapist and my guest tonight hardly needs an introduction. He's really well known here in the community is Dr. David Grimshaw. Dr. David Grimshaw owns a private practice in Old Town, Lansing. And how long have you been doing that now?

[00:01:16] David Grimshaw

I've been here in oldtown since 2015.

[00:01:20] Chris Sovey

Right. Yeah. And before that, you were over in Okemos?

[00:01:22] David Grimshaw

Right.Yeah.

[00:01:23] Chris Sovey

And there's quite a little bit of a history. What I want to actually frame this around is more around a talk that I heard online that you gave at Leslie Congregation in 2019. I happened to find this and you had some great points on dealing with family stressors at that time.

[00:01:43] David Grimshaw

Oh yeah.

[00:01:43] Chris Sovey

So I took some notes on that because I thought now more than ever, especially during the times of the pandemic and what people are going through, that a lot of people are dealing with even more stressors than ever before. But I did want to get just a little bit of background for our listeners about you. And particularly my first question would be why did you decide to become a physician?

[00:02:08] David Grimshaw

Oh, it was a little bit under duress. I wasn't- I didn't grow up thinking I would ever be a doctor. I studied environmental studies and I got really interested in just the integrative way of seeing ecology and ecosystems. And I studied how chemicals get into the environment. It was just an honors project that I picked the subject of how paradigms change in science.

[00:02:45] David Grimshaw

And I picked looking at the traditional Western medical model and a more holistic model- integrative model- of how medicine could be practiced. I started getting really interested in the whole idea of what it would be like to be that person in relationship with the patient and help them get better and encourage them.

[00:03:07] David Grimshaw

And, you know, just be part of the process of them getting better- and that won me over. And even though I didn't really have- I had kind of a negative opinion about medicine- and my family didn't- I didn't- know doctors, you know, we didn't know I didn't have friends that were like kids of doctors and things like that.

[00:03:31] David Grimshaw

So I just didn't really have much exposure. So when I first went, I was looking both at M.D. and D.O., and the D.O. just was obviously more fitting with what I was looking for: a more holistic philosophy- it has a philosophy. And it really engages the sort of healing powers of the patient. So I went into it with a little bit of trepidation, but once I was- once I got to start seeing patients, and into my third year of medical school I was good and I was like, I'm glad I did this, you know?

[00:04:07] Chris Sovey

Yeah, you read my mind because I'm sure that some people I've had many patients that have come in and asked, Well, what's the difference between a D.O. and an MD? And there we go.

[00:04:20] David Grimshaw

Yeah. And it was interesting in the interview process. You write this, you know, secondary application form and you put in there why you want to be a doctor. And when I went to the MD schools- which were willing to accept me- but I got really hostile interviews. Like what do you have against technology?

[00:04:39] David Grimshaw

You know, it felt like they were challenging my- and I had to kind of defend- my philosophy. But in the D.O. schools I interviewed, it was accepting it was- this is consistent with the D.O. Philosophy. So at that point I knew. OK, I'm going to be a D.O..

[00:05:00] Chris Sovey

Did you find over the years that your philosophy and what you just said slowly led you into private practice because you had more of a traditional kind of pathway before being in private practice?

[00:05:14] David Grimshaw

Yeah.

[00:05:14] Chris Sovey

And and what would you say to that?

[00:05:18] David Grimshaw

I think the circumstances at the university where I decided to leave and go. I started in private practice as a family doctor. Then I worked for other people while my wife went back to school and then when I came back, I got a job at the university teaching, and I really loved the teaching part.

[00:05:39] David Grimshaw

But the politics, and the environment- the work environment at the university wasn't very healthy. And it was at the point when the dean changed- I had a dean that was really supportive of me- then he passed away. Unfortunately, he had a sudden heart attack, and the new dean that came in- it was completely, the environment- became very, in my opinion, toxic. And so I had been offered the practice by Dr. Breiner- her practice- because she wanted to move a couple of years before. And I said, thanks, I'm I'm going to stay at the university.

[00:06:19] David Grimshaw

So I called her back up when that happened- the new dean came- and she said, yes, she would, she'd be thrilled if I would take over the practice. So we made arrangements, and I purchased her practice and she moved. And I'd say once I was in private practice in that setting, it was like I was allowed to be myself. And I gradually grew into my more authentic self and way of being as a doctor.

[00:06:49] Chris Sovey

Yeah.

[00:06:50] David Grimshaw

My kids- I asked them after I'd been in practice a couple of years. I said, 'So what do you think it was a good idea for me to, you know?' And their answer was, you know, they said, 'Duh! Duh, dad!'

[00:07:05] Chris Sovey

They could see the changes in you.

[00:07:06] David Grimshaw

They could see. I was much happier and I saw them more and was part of their lives more. Yeah.

[00:07:12] Chris Sovey

Yeah.

[00:07:12] David Grimshaw

That was very reinforcing.

[00:07:14] Chris Sovey

So your family dynamics changed in a positive way?

[00:07:17] David Grimshaw

Yeah.

[00:07:19] Chris Sovey

Which is the perfect segue way into my questions. So the main things that I wanted to ask you tonight, like I had said, are based around the speech; Well, an open forum that you gave at Leslie Congregational Church back in 2019. I don't know if you remember that?

[00:07:37] David Grimshaw

I do.

[00:07:38] Chris Sovey

And the main topic of your discussion was dealing with family stressors. It was one of those talks that was so good that I started watching it, and then thirty-seven minutes had gone by and I was like, "What just happened?" I thought everybody in the audience brought up some excellent questions and and I wanted to expand.

[00:07:55] Chris Sovey

I think that this kind of information needs to get out there, especially now more than ever, when people are dealing with a whole slew of different stressors, especially when and I'm sure you've seen this too, that more people are isolating and that's bringing out all kinds of different mental health problems as well that I'm sure you're seeing in your patients as well.

[00:08:18] David Grimshaw

Right.

[00:08:18] David Grimshaw

And I think that people have a really difficult time- you had even said this yourself- articulating or being a good historian, and as an adult, we're not necessarily any better than a child doing this. So I'm going to start you off with a two part question. When someone comes to see you- again, you're in your office- how do you view your role as a physician to help them sort through some of those family stressors? You know, both in the psychological, spiritual and physical. So let's start with part one.

[00:08:55] David Grimshaw

OK. Yeah, in my intake form I do break out stressors and look- I'm looking for their perception of which aspects of their life do they feel or find the most stressful? You know, having to do with money, having to do with family, having to do with work, having to do with their health or kind of, you know, like the main categories. And and then I have a pretty long questionnaire, and then I use it in that first visit.

[00:09:24] David Grimshaw

I just literally go through it with them and ask them questions about their answers they've already given. So we just kind of take it- So I get to go get to kind of dial in to and read the non-verbals. The way they're sitting, the way they're acting, their voice sounds- to delve into it. I feel really careful at first with the patient.

[00:09:50] David Grimshaw

I want them to feel like they're in a non-judgmental environment that that gives them the space to negotiate the way they want to negotiate because I'm looking for what they're needing, and I am trying to help them say it, and be able to articulate what they are needing. So I, ask those kinds of leading and open questions that don't- that are not the kind of questions that you can say yes or no to, Right?

[00:10:21] Chris Sovey

Right.

[00:10:21] David Grimshaw

And then I let them talk. And I really focus on not interrupting. I focus on giving them the space to talk.

[00:10:30] Chris Sovey

Hmm.

[00:10:32] David Grimshaw

So that first visit, it's long. And one of my mentors did that in a chronic pain program, Dr. Stanton, and I watched him do that when I was in my fellowship and I saw how powerful it was to just wait, and let people express themselves. And then I follow them, I don't like dictate how that interview is going to go. I follow them. So that's I guess my method. Is that answering?

[00:11:05] Chris Sovey

Yeah, yeah. I think you'd also mentioned in that talk that sometimes somebody might come in and they think that it's just like a a psychological stressor, but you're also a great gateway to help people connect to different resources, and also make sure that there isn't something physical going on because stressors can cause physical illness as well.

[00:11:29] David Grimshaw

Right. Right. And just giving them a sort of space they'll usually take the lead. Sometimes they really- that's what they want to talk about first is the physical stuff. And so I'm not going to press them, and I don't want to ask, you know, questions like abuse- if they've experienced abuse- rather than making them a deer in the headlights by point blank, asking them, I work around those sorts of things and just try to cultivate the relationship that maybe someday that might be revealed, but it doesn't have to be today.

[00:12:03] Chris Sovey

Right.

[00:12:05] David Grimshaw

So they start to trust me and know that I'm listening, and I'm paying attention but I'm not going to push them into something they're not ready to talk about.

[00:12:16] Chris Sovey

Your whole practice and philosophy is based around creating space, and that's becoming a pretty- in my opinion rare- or rare opportunity in health care. It's a rare resource. A lot of your colleagues, and my colleagues, are forced to do an incredible amount in a short time, and how could you ever uncover some of those things if you don't have that time?

[00:12:46] David Grimshaw

Right.

[00:12:48] David Grimshaw

I just think that's essential for healing. And I think it's partly the focus of what like, 'what do we think we're doing here?' You know, the healing is something that happens within a person and within a family, within a community. And it's an organic thing. And I don't heal people. I try to create environments where people can heal.

[00:13:12] Chris Sovey

Mm-hmm.

[00:13:12] David Grimshaw

And so that's how I think about it is that we're building a garden here. You know where the person has the opportunity to find their way, the way they're going to heal. And I don't- I don't try to tell them the way I think they should heal. I try to help them find the way for them to heal,

[00:13:33] Chris Sovey

Do you feel that if given space, people are able to come to those conclusions more often than not? Or does it vary a lot? Or you know, what's your sense of that?

[00:13:47] David Grimshaw

Yeah, I think part of what I- the way I set this practice up is that I'm setting it up in such a way that I'm inviting people. They have to take initiative to come to see me.

[00:14:00] Chris Sovey

Yeah.

[00:14:01] David Grimshaw

They're not- it's not court ordered right? And it's not and it's not necessarily their family doctor or their internist, but oftentimes by the time they get to me, several people have said, Why don't you go see David Grimshaw? And so they're there finally out of their own initiative. And I think that's really key that without that, you might just like trying to pull teeth to get people to engage.

[00:14:31] David Grimshaw

But I try to welcome the engagement. And so part of it is the way I've created the kind of practice I have- it already invites that kind of engagement. And if people are really wanting to be engaged, I don't- I don't try to sell them in, you know, in being engaged. So I give what I am able to give and I let it be.

[00:15:03] Chris Sovey

Yeah. If someone feels some type of stressor, how can they become better able to identify what's going on and communicate their needs? Both in the scope of the individual, and in the family dynamic? And then once they've identified that, what can someone do to better address those needs?

[00:15:30] Chris Sovey

Do you feel like a physician is always the place to start with that? I know that you have quite an extensive background in yoga. So you know, if someone is feeling maybe just like- they're not quite sure- they feel like something's off? Maybe they feel some irritability, or they just feel a general sense of feeling unwell. How can someone better identify what's going on and learn what the first step to take is?

[00:15:55] David Grimshaw

Ok? I think- I think I'm understanding.

[00:15:59] Chris Sovey

I can rephrase it.

[00:16:00] David Grimshaw

The key, I think, is awareness. And so to to make- to be aware of your body- to listen- to learn the tools to listen to your body, to learn the tools to develop a more emotional awareness intelligence, to understand your feelings and your thoughts, and learn to quiet your mind enough to get ideas come to you like inspiration and intuition?

[00:16:34] David Grimshaw

You have to have a pretty quiet mind for those things to have a place to come. So I think the key is awareness. So say maybe we're talking about food. So I usually start with what's your relationship to food? You know, how- how is it that you feel, you know, in relationship to food? And a lot of people have pretty negative relationships to food, but it's- the question is intended to open up awareness and that we start with maybe a food diary, or just start talking about how they're- what their patterns of living are.

[00:17:15] David Grimshaw

So that I'm always just trying to think, 'how can I help this person become more aware of how they work?' How their body works, how their mind works, how their emotions work? And how that influences the dynamics of their life? So if I were to pick one word, it would be awareness.

[00:17:36] Chris Sovey

That's great because I do think that a lot of, you know, mindfulness is kind of thrown around and I think there's still a lot of people that don't fully understand what that is. Do you think they're one and the same? Mindfulness and awareness?

[00:17:55] David Grimshaw

They're similar. I think cultivating awareness is maybe how I would define mindfulness. That you are- because it's a practice- so I have this card in my office that I like to remind myself with, and it says 'no one ever got good at yoga by believing in it.' You have to do it. You have to practice it. Even when it's hard. Especially when it's hard.

[00:18:25] Chris Sovey

Hmm.

[00:18:26] David Grimshaw

And cultivating awareness is a practice, and it's a continuously re-refocusing yourself to be aware of where you are and what you're doing, what's going on. And so you can get better at it by practicing it. And it's not automatic. It's like, a weekend class might inspire you, but then you have to practice it on a regular basis for it to become the way you operate.

[00:19:02] Chris Sovey

I have a lot of patients that say things like I've tried meditation before, or I've tried deep breathing before as a form of being mindful. And I know you say you don't really try and push them or lead them, but have you found some things that have been more successful? Let's say someone is- they've said to you something along those lines- I'm sure you've heard that before. 'I've tried meditation before', or 'I've tried this before', but maybe you got a sense that they were somewhat interested. What would you say to that person if they're open to the idea?

[00:19:37] David Grimshaw

Yeah, I kind of try to jump on those clues and cues. And I try to match it to them, so I try to get to know them, right? And then I try to help them use things that are going to work for them. So, there's a lot of ways to cultivate those things. And if they're an outdoor person going for walks, you know, walking meditation, or- because I think a lot of people that say that sort of thing, they don't really have much experience- And it's like I said about believing in yoga- it's the same with, say, a religious group.

[00:20:18] David Grimshaw

You know, "if you do believe in this, do you believe in that?" It's not about believing, it's about experience. You know, what is it like to experience something and really feel it? To think it? Be in it? That's what I go for, for people. And so part of what I do when I'm treating people is I'm focused. And I'm showing them awareness.

[00:20:47] David Grimshaw

I'm showing them that I'm paying attention, you know, to them- the whole time. I'm not distracted. I'm really, I guess modeling, it's like a parent, you know, trying to model for their kids. You can tell your kids what you want them to do, but that doesn't do any good. You know you can. The best you can do is do the best you can to be the person- the best person you can, and hope. And hope they notice. And so that is, I guess that's the task I give myself, is to model it, and then to encourage people to follow the way that, you know- give them permission. You know that you don't have to do it a certain way. You know what's going to work for you? But the goal is to experience it. And then once you do and you practice it, you get better at it.

[00:21:50] Chris Sovey

Hmm. Absolutely. That's really great. I can say personally, I've experienced that because anyone listening, I've seen Dr. Grimshaw as a patient, and it's such a different energy when you come into the room because you can feel- and I've seen the complete opposite too- providers that, you know, they're so focused- and it's just unfortunately the reality- that they have to check so many boxes in an electronic medical record somewhere that they're so distracted.

[00:22:20] Chris Sovey

So I think that they're missing a lot of cues and things. When we had talked about doing this, this podcast, we we talked about, do we want to do this in person or do we want to do this online? And despite the mask situation here, you had said very much that you like to be able to see people's eyes and I feel the same way too. I feel like it tells you so much, you know. Whether it's, I don't know- I've heard gateway to the soul. I don't know. There must be something in yoga that talks about that as well?

[00:22:53] David Grimshaw

Right? You know, my teacher, looking into his eyes is like you're looking into the ocean. You know, he's- he's a really advanced human being and someone I emulate. And so, yeah- there- you see a lot, in people who have who have dealt, you know,

[00:23:20] Chris Sovey

Yeah, I have to imagine it's had an immense- I mean, your yoga practice has had an immense impact on the way that you practice medicine as well.

[00:23:32] David Grimshaw

Yes.

[00:23:32]

Because that's cultivated awareness. It's- I imagine it's even hard to believe if you hadn't had that pathway, would you be practicing the same way?

[00:23:42] David Grimshaw

I'm sure not.

[00:23:43] Chris Sovey

Yeah.

[00:23:44] David Grimshaw

Because it kind of led me. I started really regularly, practicing yoga at around the time when I was leaving the university. And it was like discovering a whole new world, like realizing, feeling things within my body- that I could recognize it more in other people's bodies- and I could, like, invent on the spot, a way to treat something or a way to show somebody an exercise because I knew what it felt like inside me.

[00:24:17] David Grimshaw

And so, yes, it opened up a whole new way for me to share my own experience of understanding my body, my thoughts, my feelings and help other people do that. So yeah, it changed the way I do things, and it continues to do that.

[00:24:41] Chris Sovey

Yeah. In your experience, what are some of the most common stressors created by external societal expectations? And how do those impact the belief systems or actions that someone might take, such as, 'I'm a bad parent or husband', and they may end up isolating more? I believe one of the things you mentioned in your talk was vulnerability and connecting more with people that can help with this.

[00:25:09] David Grimshaw

Yeah. Right. But people... Vulnerability is really- being willing to be vulnerable is brave.

[00:25:20] Chris Sovey

Mm-hmm.

[00:25:21] David Grimshaw

And I think people- there's a lot of fear- fear is a big factor today. And what's behind anger, shame? What's behind also isolating and not connecting is fear, and the fear can be that they feel like they don't want to- or can't- it's not safe to be vulnerable, or to be authentically themselves, right? I have to be this for my spouse. I have to be this way for my boss. I have to- for my company I have to act like this- this is the the procedure I have to follow to sell widgets or whatever the company does. And so people are outside of themselves a lot in society because our society is very materialistic.

[00:26:15] David Grimshaw

And I think that's one of the core issues is that money is driving the system and that makes all of us feel devalued, like in so many different- just take different examples of like, unions, and the unions going on strike, or the different examples of what's happening right now in the kind of way we're polarized. It has to do with people I think feeling like they're not of value, they're not being valued by the system.

[00:26:57] David Grimshaw

And the system isn't running based on the valuing of people as important community resources- that the resource is money and making money. So I think that's one of the big driving factors is the materialistic society. That is really driving a lot of the other patterns.

[00:27:24] Chris Sovey

What can someone do? I know it's a difficult balance, but because obviously there are actual things that need to be met. You have to have a roof over your head and that kind of thing. But once you get past that point, how can people find maybe not a balance point, but a point where they don't succumb to that so deeply that that guides all their decisions?

[00:27:48] David Grimshaw

Yeah. Well to value ourselves and to value and connect with each other is the starting point. Yes. This is really- this is a really deep question.

[00:28:08] Chris Sovey

You seem like the man to answer it, though.

[00:28:13] David Grimshaw

I think we treat each other with respect, we value each other and do authentic work for the money we make. You know, that's my advice to people is try to have a job that you feel like makes a difference in the world and is, you know, worthy of your time. And if you- if you don't feel like you're being valued at all and you're in a, you know, kind of work that is not serving you or the world, change your vocation. I like the- Parker Palmer defines vocation as 'your deepest love meeting the needs of the world.'

[00:28:59] David Grimshaw

And what what do you love to do that meets needs in the world? Do that. You know, be brave enough to actually feel you're worthy of having a vocation. You know, not just a yes person to whatever is going to put money in your pocket and food on the table. And it sounds really idealistic, but it's really foundational, I think, to a society that has a half a chance at living peacefully and in harmony with each other and not destroying the Earth.

[00:29:42] Chris Sovey

Mm hmm. Yeah.

[00:29:45] David Grimshaw

And each other in the process.

[00:29:47] Chris Sovey

Yeah, along those lines, when something happens that maybe rubs you the wrong way, how do you recommend someone listening to this can use that as a learning opportunity or a chance to further connect instead of being quick to anger?

[00:30:07] David Grimshaw

Oh, that's great. So that's that space between your perception of what's happening and how you're going to react to it, and that- that's really important. That's a key- a tool to learn, because so often we assume why we think that person's doing something to us. They're not doing something to us, really. Who knows what they're thinking? Who knows where they've been, what happened to them that day, where they're coming from.

[00:30:40] David Grimshaw

So to make any assumption when someone says something to you that feels hurtful, is you got a really good chance of being wrong. And so to recognize that you're perceiving, say, anger or insult to recognize that that may or may not be what's happening. But rather than reacting immediately, if you develop the practice of not immediately reacting, of taking just that very- that split second- that moment of checking in with yourself, and not judging.

[00:31:23] David Grimshaw

You know, learning how to not judge and to take whatever is happening in front of you as it is what it is. It's not good or bad. It's not right or wrong. You don't have to judge it, just be in that moment. And then when you respond, you don't have to feed the flames of the fire that might be getting started. And it's a really hard thing to do. But it is, it's like a- it's a key skill.

[00:31:57] Chris Sovey

Yeah. I find I've struggled with that a lot. Personally, I've made a rule of not responding to an email in particular because I try and do exactly what you're saying, but I don't know if I'm sometimes emotionally mature enough to be able in that moment. So I try and create even more space than if it's possible.

[00:32:24] David Grimshaw

Yeah, right? Yeah. Emails or texts where you don't even- you're not getting the nonverbal- you're not getting the emotional, the tone of it at all. So, yeah,

[00:32:39] Chris Sovey

That's particularly challenging with texts and emails.

[00:32:43] David Grimshaw

Right?

[00:32:43] Chris Sovey

I think it compounds what you're saying even further.

[00:32:47] David Grimshaw

Yeah.

[00:32:51] Chris Sovey

If you also talked about alternative ways to communicate and connect instead of running away from a problem in that speech, and I believe you were, you're talking about asking questions, but I wasn't sure exactly. That was one thing I was hoping maybe you could expand upon a little bit because you said, you know, instead of running away or going to fear, ask questions. Do you have any examples of what those might be?

[00:33:20] David Grimshaw

Well, rather than reacting, try to be curious. And rather than coming back with a retort, you can ask a question. And so you can say, like, "I don't really understand," or "What's going on here, what what's just happened?" You know, like with kids for instance, when they do something, you're like, OK, what just happened here? You know, that's a good way to treat kids that are coming from difficult and, you know, trauma, and environments that are not very safe.

[00:33:56] David Grimshaw

And so because you- it may appear that they're being aggressive towards another kid, but they may be just reacting and they might feel afraid, and they're just trying to protect themselves or defend themselves. So instead of saying, "why did you do that?", they may not even know why they did them. They're just reacting, you know, in a way that they've seen in their environment. So to tell change that that way of communicating, you know, they call it non-violent communication. You're asking "what's going on?" and there may be a blank stare coming back at you because they may not even realize they're in this loop or that they're on a rage.

[00:34:46] Chris Sovey

Hmm.

[00:34:49] David Grimshaw

But it helps you change the course of the potential course of that interaction. So Brene Brown talks about that, getting curious and then asking more to try to understand better what's going on rather than just starting to participate in a duel?

[00:35:16] Chris Sovey

Yeah, absolutely. How has the pandemic changed the way you view health care? And more particularly, the patients you see coping with stressors?

[00:35:31] David Grimshaw

Hmm.

[00:35:34] Chris Sovey

Or maybe it hasn't?

[00:35:35] David Grimshaw

You know, I haven't- not a lot. I feel like I'm just doing a lot more work helping people get through and find ways to cope. So I have seen a lot of more, like physical discomfort, pain, stiffness, loss of function because people kind of froze. And when the pandemic started they got isolated. They maybe stopped moving, stopped exercising, started eating differently and maybe drinking more alcohol. Apparently that's been a big thing during the pandemic- a lot more purchasing of alcohol.

[00:36:17] David Grimshaw

And so just helping people like see where they are, and what's driving it, and helping them walk their way back out. But the question you said, how has it changed? It might-it's kind of maybe changed the the nature of the kinds of things I'm working on with people.

[00:36:38] Chris Sovey

Particularly with people that you see.

[00:36:40] David Grimshaw

Yeah, it's sort of different. Different themes.

[00:36:43] Chris Sovey

Yeah.

[00:36:44] David Grimshaw

Now and different- because the- it's almost everybody these days that- that the emotional stress and the psychological stress is- most of my patients are becoming- are pretty aware that that's impacting them physically and they, you know, see the connection. And so we work on that.

[00:37:08] Chris Sovey

Hmm. What have you experienced in the past that-- because I think this is really relevant now too... Someone, maybe they have been isolating a lot over these last two years and they just feel so much inertia from doing that for so long. And they know they need to get help with something like maybe they they know that they're feeling depressed or anxious. Do you have any ideas on how someone- to help them motivate? To take the first step to go see someone? Because there's- I feel like more than ever, people are waiting longer and longer to get help.

[00:37:52] David Grimshaw

Well, sometimes I share my own experience. I try to put them at ease, like if they if they're not really comfortable with the idea of maybe going to counseling.

[00:37:59] Chris Sovey

Mm hmm.

[00:38:00] David Grimshaw

You know, I've gone to counseling ever since I was about 18 years old on and off in different periods of my life. And I keep going back as I need to because it helps me cope and deal with my life.

[00:38:15] Chris Sovey

Mm-hmm.

[00:38:16] David Grimshaw

So sometimes I just share about myself like, you know, when I was in a situation like this, I went to a counselor and it really helped, and I might give an example or two. Then it's just from my own life. So I'm not really afraid to share a bit about myself, and it's a way of, you know, modeling vulnerability since it's been a big help in my life. I just sometimes will share that.

[00:38:47] Chris Sovey

Yeah. Modeling vulnerability. That's really good. Wrapping up, you know, how- if if someone likes some of the stuff that they heard tonight in our interview here- how can someone find out more about you and your practice?

[00:39:04] David Grimshaw

Well, my website is oldtowndoc.com, and that's the easiest way to get the information, or contact information and learn more about the way the practice works. And I have blogs in there about ideas and things that come to me. So that's a good way to learn more about me through email or calling the office.

[00:39:35] Chris Sovey

Perfect. Thank you very much for being with us tonight and sharing your knowledge, your expertise and your wisdom.

[00:39:42] David Grimshaw

Thanks, Chris. Thanks for the opportunity. I really value you and your practice as well.

[00:39:49] Chris Sovey

Oh, thank you. So this has been the rehabilitation collaborative with Dr. David Grimshaw. Be sure to check out future episodes. We're going to post on every Thursday. The first and third Thursday at anchor.fm/rehabcollab. That's our rehabcollab, or you can also find future episodes on Spotify.

[00:40:12] Chris Sovey

Thanks so much for listening today. And before you go be sure to follow our podcast so you never miss out on another episode again at anchor.fm/rehabcollab. You can also find us on Spotify. We currently post on the first and third Thursday of each month, so be sure to check back then if you'd like to learn more about what the Rehabilitation Collaborative is up to, you can also find us on [Facebook.com/rehabcollab](https://facebook.com/rehabcollab).

END OF TRANSCRIPT



