

Betsy Kindall:

I'm Betsy Kindall.

Nicole Fairchild:

I'm Nicole Fairchild.

Stacy Moore:

And I'm Stacy Moore. And this is Arkansas aware, a project to advance wellness and resiliency and education.

Stacy Moore:

Okay. Welcome back to our podcast. My name is Stacy Moore. I'm sitting around here with Nicole and Betsy, and we are talking about some of the resources that we mentioned on the last podcast. And I've just got questions guys. So one of my questions to you is how long has Better Health been around?

Betsy Kindall:

Yeah. And I don't really know the answer to that, but I do know that in the last little bit with, and I'm assuming maybe with some COVID money, I don't know that.

Stacy Moore:

And maybe we should recap Better Help is one of the resources that we talked about at the beginning, as far as connecting educators or Betsy tell me more specifically state school employees, public school employees.

Betsy Kindall:

Yeah. Arkansas school employees. It offers services to them. And I don't know that they were around before. I think what has happened is there has been a spotlight I don't know, and I don't know that for sure. So I do think that there has been a spotlight on, every time I talk, I say this, but in my world, in the world where we work many times it takes a tragedy to bring focus to mental health, and a pandemic it's right up there with tragedy. And so definitely the way we view mental health has shifted.

Nicole Fairchild:

In the doors wide open for technology-based opportunities.

Nicole Fairchild:

Yes. So as far as how long they've been around, I'm not sure, but I know I get invitations to become a part of their team all the time on LinkedIn. Sign on bonus for therapists.

Stacy Moore:

Yeah. Because we've talked about EAP quite a bit. When we go and do trainings or we try to get the word out about EAP, which is more like a six to eight kind of session thing that goes through your state insurance right? But this is open to anybody despite your insurance. And so it's awesome that these

resources are out there. But then my next question, my next wondering, I'm curious, are people taking advantage of it?

Betsy Kindall:

I think that's a really good question. And it makes me think about the last year or a little bit before that when we got a ton of people reached out and said, we want to, we want you to do a course on trauma informed practices. We want blah-blah-blah around trauma informed practices. And we're, okay, well we did it. And then nobody signed up. So it's like, okay. So to answer your question, I don't know. But I do think that there's data being collected as far as the utilization rate, and we've had schools reach out with serious tragedy and we sent a team or a group of folks to provide, a grief group or something and nobody shows up. And so I don't know the answer to that.

Stacy Moore:

It's awesome that we have this resource in, that it opens up accessibility to anybody in our public schools or our workers there, so teachers, administrators. But then I think that's not an obstacle because it's available. What are the obstacles?

Nicole Fairchild:

I was just going to say, what are the obstacles? And I think that these different kind of treatment modalities are really trying to navigate around the obstacles and make it easier for people. And as a clinician, there's a part of me. That's don't make it too easy because then you don't value it. There's a part of me that's you need to invest something or this isn't going to work very well. But at the same time, I really can appreciate that. It seems everybody's looking at how they can maneuver past the obstacles, but we're somehow missing. I think what the real obstacles are.

Stacy Moore:

So okay. What you just said was fascinating to me because I'm wondering how other people are perceiving that. Because as a therapist you do want somebody, I shouldn't even say this, as a therapist I felt like I made greater gains with people who wanted to be there. If they're invested, if they were in the right place where they wanted to make change and they wanted to see, and they were open to exploring that. So is that kind of where you're coming from...

Betsy Kindall:

And they are willing to do the work.

Stacy Moore:

They're willing to do the work because it's not easy, right? It's not a band-aid

Nicole Fairchild:

I can't do it for them. I mean, over and over again, I would say to people, percentage wise, how much of this you think is about me and how much is about you in terms of who's putting in the most work and people would say 50/50, and I would shake my head, no it's not 50/50. I could put in 50% of the work and it's not going to do you any good. You go home with that story every night. You go home with those

obstacles, you engage in those relationships. I can be here for 50 minutes, one time a week to help coach and guide and cheerlead and offer insight and help you toward insight, but you have to do that work.

Nicole Fairchild:

And what we know is when people lay money on the table, when they put blood and treasure out there and say, I am willing to do this, they get better results. And so, if I were to look back over how many people no showed, what percentage of my populations no showed my no-show were almost always people who had no investment in some way. They didn't have a copay. They didn't have an accountability. There was something that was, this was optional. This was whimsical. this was somebody else's idea.

Stacy Moore:

Okay. So could that be one of the first obstacles that we have with this? So we've got this information out. Now, anybody can take advantage of this. And so could this be an obstacle that people are, I'm not ready to do that work yet. I don't know if I want to dig deep.

Betsy Kindall:

I think that's fair to say. I think that, I mean, I think it's fair to say that there's people who feel that way.

Nicole Fairchild:

And it is an absolutely valid point. I mean, I remember being pregnant. You guys probably do too. And there may come a time in your seventh month that you're, ah, this baby's got to get out of my body right now. I cannot sleep. And so I'm seven months pregnant. I cannot just bear down and give birth. The process has not come to that place yet. And labor will come and it's due time. And I think that sometimes people engaging in therapy, it is waiting for the labor pains.

Stacy Moore:

So maybe they're not ready yet. But then that also makes me think of behavior work. And so Betsy, I look at you because you know we're always, please come to us before it is two or three before it is extreme. We have so much more success if we can catch it early.

Betsy Kindall:

I think also a really important thing that Nicole just said is it's a process. It's not something, it's not a fix. I've actually had folks say that to me before, I work in schools. Like you take them and you're supposed to fix it. Well, that's not something that, we don't fix. Number one, I don't really like that word, but no matter what the process is, it's going to be something that is a moving protocol. It's not something that you just it's going to happen overnight. We have a conversation and the child is going to come back. Okay. That's not how it typically works.

Nicole Fairchild:

So is the obstacle then our expectations, I mean, is the obstacle really our ideas about what this should be like, because I would also say as a therapist, I don't want it to be at stage five. I want to see you at stage one. So how does that relate to the [inaudible 00:08:03] ? Well, the deal is this. It is my own personal health. If I'm going to my preventative medicine appointments and I'm doing healthy living

kinds of things. And I am talking with my healthcare provider about early symptoms. That's what I'm talking about, but we don't do that with mental health.

Stacy Moore:

Okay. So this makes me think, Dani, I feel like I need a sound here. We got to demystify. Can we demystify what counseling is? It couldn't be that some people don't even know what that is or they're going to ask me tons of questions.

Nicole Fairchild:

More like, am I going to go in and come out a different person? I mean, I really do feel people think it is a quick fix situation. I'm going to go in, you're going to fix me. I'm going to be better. A lot of people think that.

Nicole Fairchild:

It's like going to the gym for the first time. I don't like to go to the gym. I don't know what kind of machines they're going to have in there. And I don't know who's going to be in there. And how many mirrors really? How many mirrors do we need? I don't need a mirror.

Betsy Kindall:

But I think the difference it is when you go to the gym, you're going to work your buns off. I am not sure that people realize when they go to therapy, they're going, and it's going to be a lot of work.

Stacy Moore:

But I was much more willing, people can laugh at me all you want, I was much more willing to go to Curves than I was to go to others. When I was trying to work out, because I knew it was women, I knew you went in a rotation. I knew, like as a control person, I knew it. I knew this is what it looks like. So do we have that for therapists?

Nicole Fairchild:

We do. I do think clinicians, it's a double-edged sword where if you look at somebody's informed consent, it seems they're getting longer and longer and longer and longer and longer. It is intimidating. But they're trying, I think in some cases to do their very best to say, here's what you can expect. You might need to know that things could get worse before they get better. That's a part of the journey. You might need to know that going in. You might need to know that we're going to ask you questions about your past. You might need to know that I do a particular kind of therapy where I don't ask about your past, unless it becomes, and I think therapists do really try to put more of that information out there, but it's not universal. I don't think there's a universal answer to what therapies are like.

Stacy Moore:

No. And also, I wonder if people are, oh, it's not bad enough for me to do that. You know? So what could the range look like? So we obviously know, if you're suffering from anxiety, if you're suffering depression, you're probably at that stage where you're, okay, this is impacting my life. Then some people are more likely to pick up the phone, right? Because it's, to that point where it's impacting their life. So we know

that those major diagnoses, but what if it said school is stressing me out right now? Is that acceptable to make a phone call?

Nicole Fairchild:

Yes. I mean, so it makes me think about, do you remember seeing, I don't remember what the name of it is, but it's that stress scale where you get so many points for every life stressor. And I think it asks you in the last six months, and of course, top of the list is death of a spouse, divorce, those kinds of things. And the point of that scale is really to say it doesn't have to be any one thing. It can be the load.

Betsy Kindall:

Yeah. That makes sense.

Nicole Fairchild:

It can be the load. And that's enough. That's enough to pick up the phone and say, I've got a giant load right now.

Betsy Kindall:

And I think it's fair to say that most of the teachers you ask right now would respond I have a giant load right now.

Stacy Moore:

And it's perception too right? Because it's not what I perceive your load is because number one, I have no idea, really what you have, what you've got on your plate, but it's also like you perceive. So it doesn't matter if somebody else thinks?

Betsy Kindall:

Because I as a teacher might think I can kind of handle it right now. I'm good. But in two weeks, I'm going to be waving my white flag. Like I need some help.

Nicole Fairchild:

You feel like you can't wave your white flag because two weeks ago you said you were good and now you're backtracking on that?

Betsy Kindall:

No, I don't. But I think that there are times, honestly, I think there are times in our life, our work life, every day when I come to work, there's days where I feel I can handle this today. I'm making my to do list. I got this covered, but other things impact how we handle that.

Nicole Fairchild:

And that's so true Betsy resiliency, waxes, and wanes. And you do your bandwidth changes. You may have more today than you have tomorrow. And we've got to be compassionate with ourselves in that.

Betsy Kindall:

Yeah.

Stacy Moore:

And also the significance, Nicole, I'm curious what you would say about this, about not saying this is across this one and done, I'm going to get a call, right? Therapists understand that things get, may get better before you even had their first session. Right? Or right after you sign up. So, being able to have that constant there, that you can rely on, that you can draw from rather than, oh, I'm going to cross this. I need to pick up the phone right now, but I may not call again for six months. What would you do as a therapist? How do you see that? Do you know what I'm getting at?

Nicole Fairchild:

Yes, but I guess I always just have an expectation that the situation's fluid, but I guess maybe other people think differently about that. Because it got a little better now I should cancel, or I really shouldn't show up. There are long term or maybe a longer benefits to therapy than just the immediate. I really think people undervalue just how powerful it can be to talk with somebody who does not know your mama, who does not know the drama details, who, you know what I'm saying? Objective third person.

Stacy Moore:

Oh my Goodness.

Nicole Fairchild:

Who can give you that unconditional positive regard, who can walk beside you and listen with nonjudgmental curiosity. And we don't, that's not normal. You need that. And it's not a part of normal relationships. And so there is nothing wrong with paying somebody to do that for you

Stacy Moore:

And bringing insight to, right? Non-judgment on bringing insight that maybe that you haven't thought of her seeing things in a different way. Because I think of when I think of obstacles, I think there are two major ones. Most of the time are time and money. We've taken the money out of the equation.

Nicole Fairchild:

Yeah.

Stacy Moore:

I think, I mean, with this possibility. Time still could be a factor.

Nicole Fairchild:

You got to invest something.

Stacy Moore:

You got to invest something so time is something that you are going to have to invest. But beyond that, it makes me wonder, all these, what other obstacles are out there. And so maybe we should flip it. Maybe we should think of it as this. So what's the situation where people do seek help? What do we know

about that? Would they either go through the obstacles? They don't, they're like, nope. What are the characteristics of those who do seek help? What's the spin on the negative here? Maybe some positivity.

Nicole Fairchild:

I see. Oh, okay. So you're saying, characteristics of people who say, I don't care, I'm going to go get some help.

Stacy Moore:

Yeah.

Nicole Fairchild:

Is that what you said? I'm going to pick up the phone and call. I think this is a free resource. I'm going to use it.

Stacy Moore:

Yeah. Yeah.

Nicole Fairchild:

They have, there's a level of comfort

Betsy Kindall:

There is. And I think, how should I say this? I think you have to be pretty self-aware.

Nicole Fairchild:

I was going to say comfort with yourself

Betsy Kindall:

And to realize, for me to be able to move forward or even for my family, for me to be okay. I think first you need to know yourself to recognize, okay, I'm not good.

Stacy Moore:

Yeah. What are the signs? What are these triggers? What are these things that I can tell about myself?

Betsy Kindall:

But I think for a lot of people, I just think about a lot of people that I know that have been successful in that. A lot of them realize that if they're, they have the realization first and foremost, if they are not good, then they can't be there for those that they love.

Nicole Fairchild:

It reminds me of Christmas Eve services where somebody has the candle and you light somebody else's candle and the whole room lights up. It's so beautiful. Right? Do you know how many times I've got my candle in my hand and it's burning with take care of yourself first, really seriously. Get some help. Seriously. It's going to be good for you. Can I light your candle? Can I put a little fire inside of you? Can I?

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Can I put the little fire inside of you that says, who cares what they say? Who cares? Let them talk. I don't care. Go get some help. Can I light your candle?

Betsy Kindall:

Yeah.

Nicole Fairchild:

Please let me.

Betsy Kindall:

Yeah. But I think first and foremost, you have to be self-aware and honest with yourself and that's not always the easy place to be. That's hard.

Stacy Moore:

No. So I wonder for those of you listening, what is it? Maybe there's things that we've not touched on that, that's really an obstacle, or maybe there's something that's made you decide, no, this is worth it. Or my kids are worth it or I'm worth it. Or whatever that point is, because this is something that I feel like this resource is available. I'm curious, will it be used?

Nicole Fairchild:

And I would say this too, don't underestimate what your courage and getting some resources, getting some assistance, what that can say to those around you. You may, you don't have to share it. It is absolutely private and confidential, and you certainly don't need to feel any pressure from me to share it. But if you can, or when you do with whomever, you do, you might need to know you could be lighting their candle with a little bit of courage to address some of the stigma and the taboo that we've got to push back. We've got to push that back.

Stacy Moore:

Yeah. Yeah.

Nicole Fairchild:

Stacy, good topic.

Stacy Moore:

I agree.

Nicole Fairchild:

Now I'm light your candle and let somebody else...

Stacy Moore:

[inaudible 00:18:16] Let's just open up ourselves before

Betsy Kindall:



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I love it. Thanks for joining us today. And I think Stacy posed the question best, if there's a reason what might that be?

Nicole Fairchild:

Yeah. Figure it out.

Betsy Kindall:

Yeah.

Nicole Fairchild:

We'll see you next week.