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**Heather Branscombe** 

Episode 43, Why Befriend Your Nervous System at Work? With Leah Davidson.

Welcome to *Clinicians Creating Impact*, a show for physical therapists, occupational therapists, and speech-language pathologists looking to take the next step in their careers and make a real difference in the lives of their clients. If you're looking to improve the lives of neurodiverse children and families with neurological-based challenges, grow your own business, or simply show up to help clients, this is the show for you.

I'm Heather Branscombe, Therapist, Certified Coach, Clinical Director, and Owner of Abilities Neurological Rehabilitation. I have over 25 years of experience in both the public and private sectors, and I'm here to help you become the therapist you want to be, supporting people to work towards their dreams and live their best lives. You ready to dive in? Let's go.

Hi there, friend. Welcome to our next guest episode. One of the things that I really love about this podcast is to be able to meet and then share some of the smart and passionate clinicians that I come into contact with every day at work. So today I'd like to introduce you to Leah Davidson.

Now, I first found out about Leah earlier this year after I was listening to her be a guest on another podcast. And I instantly knew when I heard her speak, I wanted to reach out and connect with her. Here I was at the time, I was listening to an American podcast episode talk to a Canadian clinician on a non clinical podcast, and then I actually learned that we got our coaching certification at the same coaching school.

Later this year I've had the pleasure to hear Leah speak in person at a conference. And I knew after hearing her in person I wanted to share her and her wisdom with you.

So Leah Davidson is both a speech pathologist in private practice in Toronto, as well as a certified life coach through the Life Coach School. And she's a professional resilience coach and consultant through the Forward-Facing Trauma Institute. As a registered speech language pathologist she's spent over

two decades working in the area of traumatic brain injury and she's also certified in pain reprocessing therapy, EFT and breath work.

Leah focuses on helping people learn to befriend their nervous system, manage their mindset and cultivate resilience. She hosts the *Building Resilience* podcast and is creator of the advanced training for nervous system resilience. She is passionate about teaching others how to resolve and prevent burnout, stress and compassion fatigue. So today I'm super excited to have her as a guest on our podcast.

Heather: All right, welcome, Leah. I'm so excited to have you on the podcast today. Can you tell me a little bit about your journey, about even pursuing coaching after becoming a speech pathologist?

Leah: Sure. Well, thank you for having me, first of all. So I'm happy to be here.

Heather: You're welcome.

Leah: I have been a speech pathologist coming up on 25 years and working in the area of traumatic brain injury. So the whole spectrum of cognitive communication, heavy emphasis on working with high-level people is what I traditionally have done. So a lot of executive function challenges and so forth.

And just in working with them over the years, I started to want to increase the tools that I have in my own toolbox. I started to see where people are getting stuck because I'm trying to teach them cognitive strategies to help them in dealing with some of their challenges. And so that just naturally brought me to do a lot more reading and exploring and coming across what about the power of mindset? And what about the role of the nervous system?

And so just naturally exploring those. I became a coach about 10 years ago, and then eventually got certified through The Life Coach School, which is the place where I think you were certified as well.

Heather: It is, yeah.

Leah: And then the nervous system, the same thing, just doing a deeper dive and a deeper understanding. Because what I was finding was a lot of my clients were wanting to get better, and wanting to use the strategies that I was presenting them with, and weren't able to. And at first I thought, well, maybe they're not able to because of just their injuries, which of course, is going to factor into things. But more I saw their mindset, and then their state of their nervous system being dysregulated.

And as I learned, and now continue to share with people, when you're dysregulated, you really do lose access to your thinking skills. So there I was trying to get people to try these cognitive strategies, when they really don't even have access to their thinking skills from the consideration of the nervous system. And then tacking onto it, okay, well, maybe it's mindset and trying to teach them mindset tools, which again, when they're dysregulated, not going to have access to those mindset tools.

So as I just continued learning, I started to develop more and more tools with the population that I served in traumatic brain injury. And I started to work more and more with people who didn't have injuries, really struggling with stress and burnout and compassion fatigue. So a lot of health care professionals, a lot of clinicians, coaches who were experiencing some burnout. And again, it's all rooted in the nervous system.

So I just began expanding slowly, slowly, slowly, as I was working with more and more people. I guess, I have a framework that I developed while I was working as a speech therapist. My goal is communication, how to make things simple. How are you going to remember? How are you going to pay attention?

And so this framework I created sort of resonated with a lot of my coaching people. And I would share it with people and eventually people would say, I want to learn this framework. And then I went out and created my advanced training in nervous system resilience. And that sort of brings me to where I am now.

Heather: Yeah, I think that's amazing. And we were chatting a little bit before and I think it's important, as clinicians we're often thinking about the nervous

system of our clients, but we aren't always thinking about our own nervous system and how that impacts our clinical reasoning and support. So I love the framework that you shared. So maybe if you could share a little bit about that framework to help us as clinicians to understand how our nervous system can affect our own clinical reasoning.

Leah: Right. So I think just understanding the nervous system in general in really simple forms, because that will help you understand with your clients as well as what's happening with you. But essentially, we all have a nervous system and we're all familiar with our nervous system, but we don't really know how it acts and what's happening with it?

So that nervous system includes the brain and the spinal cord and all the nerves, it's essentially the communication between the body and the brain. And so it's running everything behind the scenes. It's running heartbeat and breathing and it's running your digestive system. But it is also taking in and scanning, I like to just say it's like a radar detector or a smoke detector and it's scanning for safety and danger.

And depending on what it picks up, it is picking up on cues sort of externally, it's picking up on cues that are happening inside you and it's picking up on cues in between us. You will be assigned, your nervous system assigns you what is sort of a state of safety or a state of danger.

And the way I like explaining it is if your nervous system picks up on cues that say you're safe, you get assigned to what I call team resilient. And this is a zone of connection. It is where you're able to think properly. Your thinking skills, your CEO as I call her is on board. You're able to be compassionate and curious. You're able to really be a compassionate witness. You're able to just have a lot of tolerance and resilience. And so that's what happens when we are nice and grounded and regulated, we are in that team.

Now if our nervous system picks up on any type of cues of danger, and the important thing to also recognize with the nervous system is it's not real danger. It's real or perceived danger, real or perceived threat. And that's important to

note, because sometimes we don't even realize that we're perceiving a threat. But something that is unknown, something that is different, something that we've never done before, those are all perceived as threats by the brain.

So when the nervous system picks up on these cues and it senses danger, it will assign you into a protective state because it's like, okay, we've got to take care of you, your survival is at risk. And that's what we want it to do. It's important that it does that. And it usually starts off by getting mobilized. And so getting more activated, so more energy. And so it gets into a state of hyperarousal, and I call it team hyper.

And then on that team "Hyper," you are going to experience either fight, flight or freeze. And you're going to see a lot of the physiology, as well as the thoughts and feelings are all going to have a flavor of this hyperarousal. So you're going to have, your thoughts may be racing, you may be overthinking, you may be worrying. And then you're going to have emotions like anxiety, anger, or defensiveness. Things that are more charged.

So that is when you're in team hyper. It's there as a protective state because your nervous system thinks that you are in danger and you need protecting. Now, if you've stayed in that state for a certain period of time, or if your nervous system has said, okay, it's not just danger, this is a true life threat, it is going to send you into a third state. Also a protective state, but it is a state of conservation, it is a state of shutdown.

So you can think of it like if you've been in that hyper state for so long, the nervous system is like, listen, we've tried and tried. We tried to run. We tried to fight. We're losing steam here and if we don't conserve energy, we're not going to make it, so we're going to shut you down.

And in the shutdown state, what I call team hypo, because you're hypo aroused, you're going to be slower. There's going to be more helplessness, hopelessness, this is where exhaustion lives, this is where burnout lives. And again, it is a protective state.

So really, the nervous system is not making choices to send you to these states. You are being assigned to them on a biological level. This happens preconsciously. It's not like you have a drop down menu where you're able to decide, okay, this is where I want to go. But you will be assigned and your nervous system is doing it because this is how it protects you. And it is only when you are able to identify where you're at, get yourself regulated into that sort of zone of resilience where you'll be able to bring on your CEO and start making those judgments and decisions and so forth.

So that's sort of the framework. Now to answer your question, which can we even remember? But I think that it's important to understand that framework because our clients are going to be playing on one of those teams. So you may be in a session with a client and they may come in looking completely regulated. And then you ask them to do something, they get discouraged, they're not able to do it, or they've had something happen in their life and you can see them getting more and more activated.

Well, that's a signal to you that, okay, if they become dysregulated as we call it, they go into a team hyper or team hypo, they're going to have limited access to things like their thinking skills. So as you're verbally explaining things or trying to get them to do something, they're sort of going offline. And so it's important for us to get them back online.

And by the same token, as a clinician, you're playing on a certain team. And if you come in and maybe you're feeling pretty resilient, but maybe you had a fight earlier with one of your kids, or maybe you really are stuck with what to do with this client. These are messages of danger to our nervous system. So we will be sent into one of those teams. We won't be able to access all the skills and all the tools that we probably want to have available to us in that session.

So it's important that we need to get regulated, and it's important for our clients. And then on our end, if we're not regulated, we are actually at a great risk of developing burnout and compassion fatigue ourselves because we're constantly in a state of dysregulation if we don't know what to do with our own regulation.

Heather: Yeah, that's a beautiful way to explain that, thank you. That was one of the things that as you were mentioning that framework that really stuck with me was that one, it's not just our client. We are trained as clinicians to be client-centered, to be thinking and reacting to what's happening to the client. But we are much less trained or we're just not used to thinking about how what's happening with the client is affecting or not affecting us.

Leah: Yes.

Heather: And when we aren't in a regulated state, which again, what I'm hearing you say is it's not our problem, it's not necessarily our fault. It's a biological thing that's happening.

Leah: Yeah.

Heather: But if we don't regulate what is happening on the inside with us first, we're going to be much less effective in terms of creating a bigger impact for our clients.

Leah: Yeah, and this happens online. Like, as you are working with a client sort of taking stock of what's going on internally for yourself, you could probably feel yourself getting charged up. And it can come from, like I've worked with people who have had a lot of accidents. It's important to recognize that every time a client is telling me about their accident or telling me about their grief or telling me about their pain, obviously, it's normal for me to try to extend compassion and empathy. But it's also activating for me.

This is where secondary traumatic stress comes in. Just witnessing their trauma is activating to me and can cause me to have secondary traumatic stress. And then in addition to that, maybe they're struggling with doing something, maybe they're not understanding what I'm saying, or maybe this is like the 15th session where we've been doing the same thing over and over and over again. Let's be honest, I'm also human. So I can start to feel my activation of like, "Not again," And not because I'm a bad person, but just because this is human, this is what we do.

So for me, in order to be able to identify, "Okay, Leah, you're getting a little bit frustrated. You're getting a little bit irritated or maybe just exhausted and you need a break." What can I do in the moment? I need to recognize I'm getting a little bit dysregulated. What can I do while I'm still online with my client, while I'm still engaging with them, so that I can regulate myself?

Because I don't want it to spill over. It's not their fault. And it's not my fault, either, it's biology. But it is my responsibility to notice that it's happening, and to take care of myself so that I don't push it onto my client and so that I don't finish my day and go home and push it onto my partner or my kids or even just have burnout myself.

So it's something that regulation, the goal is for us to be constantly regulating. Hundreds and thousands of times a day, we need to be bringing ourselves back to that calm state so that we can be effective in our jobs and take care of our own personal health and well being.

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