From Patient to Advocate: Kim Downey's Mission to Stand Up for Doctors Transcript

(Transcripts are generated by AI and may contain errors)

Podcast Introduction and Guest Welcome

Today's episode had a few technical issues with the sound quality. I apologize for that. It's still a great conversation and I hope you enjoy listening to it.

Welcome to Heartline, Changemaking in Healthcare. I'm your host, Dr. Andrea Austin, a board-certified emergency physician, physician development coach, and educator.

After years on the front lines, I've learned that real change in healthcare starts within. Each episode invites you to explore the inner work that unlocks clarity and bold leadership, because healing systems through changemaking begins with following our heartlines.

I am so thrilled today to have a very special guest with me. Her name is Kim Downey and she is a remarkable woman. Just a few highlights from her bio.

She is the community ambassador for Medicine Forward and an ambassador for the Dr. Lorna Breen Heroes Foundation. She brings a unique perspective to healthcare as a physical therapist.

in a three time cancer survivor. She has so many deep insights into what it means to be both a patient and a healthcare professional. And I'm also so honored to share with the audience that she is a author.

She wrote white coats, courageous hearts. Kim, my goodness. I don't know where you find the time and I love your heart and your energy. Welcome to the podcast.

Thank you. And I have to say it's a collaborative effort with 15 physicians and our incredible editor. Awesome. I always say it does take a village to birth a book into this world.

That's for sure. And thank you for having me. I appreciate the opportunity. Well, I wanna start off with what is your change maker origin story? How did Kim come to be the founder of Stand Up for Doctors?

Sure, so I'll share very briefly. As you said, a physical therapist by training and I was working in a local elementary school and I was diagnosed with thyroid cancer in 2020 and I had surgery and three of my parathyroids were inadvertently removed.

And without getting the details, that caused a domino of complications. And the next summer, I blacked out, fell in my head. There were more things wrong.

Lyme disease, it could cause you a thoracic allele syndrome, a whiplash injury, or broke the dough. So I went to four months of physical therapy myself.

It's when the physical therapist needs physical therapy. And it was just kind of constant medical. I kept thinking, one more thing, I'll be done. One more thing, I'll get back to my regular life.

And I was done with PT December 29, 2021. But the next day I was back on the operating table because we'd just found out I had breast cancer. So I had surgery and a month of radiation for that.

Kim Downey's Health Journey and Calling to Support Doctors

And this brings us to the fall of 2022. So now we're like two years into like constant medical issues. So I thought I was finally going to have a routine visit with my radiologist, because now I need a memo and ultrasound every fall to pay for MRIs in the spring because of insurance, because they were getting high findings only.

And I do share the story of my radiologist. My first KevinMD article is a tribute to him. So that's where I share the story. But he was amazing, and I was looking forward to seeing him.

And I showed up that day, and he wasn't there, and I asked where he was. and they said he died a month ago and I couldn't even believe it I actually said are you joking because I thought I was going to see him any minute and they said no and I said what happened and they said the family hasn't shared that and I fell apart I couldn't stop crying I couldn't stop shaking my arms and legs went numb because in that moment I knew he had taken his own life And at some point then I felt a calling to support doctors, though actually that spring, I had found the KevinMD site had showed up on my Facebook page and without knowing why I was reading every article and educating myself.

So I knew the statistics, you know, the 400 over four, and I think now those statistics are outdated. when they save 400 doctors a year, and that's just in the U. S., or dying by suicide.

And I was thinking, okay, there's a million doctors in America. This is really horrible. I think my doctors are okay. I hope my doctors are okay. Like, I made sure they know I appreciated them.

I would rate them thank you notes. So it was kind of like the worst of the worst, like people are walking around worrying about their doctors and I actually was.

So even now I can just sometimes feel like, oh my God, like, I can't believe that really happened. But I felt the calling to support doctors and that's what I do.

So I want to go back. farther into your story because I think a lot of people listening would be how did you even get through all the different health things you're going through or that you've been through and some of these things have long tails on them and I shared before we started recording that I broke my right arm and it's been my first serious injury my first time really experiencing pain, like the type of pain that you can't ignore.

And so I want to just spend some time for the audience because I made it till age 40 without a serious thing, which is, I always say, a huge blessing.

But most of us don't go through this world without something happening. So what's your advice as a triple cancer survivor? You've had your share of orthopedic things.

Yeah, well, it's interesting. And to your point, I never felt like a patient before all of this happened. So some years ago when my kids were really young, I did have an emergency appendectomy, but it was kind of like they took care of it.

And I did go back to my regular life, right? So I didn't feel like it's like, oh, this thing happened to me. You can help me or fix it or take care of it, right?

So then what was a shock and traumatic to me is again, I wasn't really prepared for losing not only my thyroid, but the parathyroid and how that would impact me every day for the rest of my life.

It caused some complications and a lot of additional medications. And now my nephrologist is the doctor I see the most and I have states, it's three T disease and things like that.

So what I'll have to say, you know, we did an episode with you and Stephanie, Dr. Spirely about trauma, trauma coaching. and things that you spotlighted and also Kimia Sarah, if I met her on with Dr.

Michael Hirsch, is being well-resourced. So what I'll share is I've been fortunate through most of my life, I would say, to be well-resourced, meaning that I have a supportive family growing up from my parents to friends and family, to coworkers, to a career in physical therapy where I was helping other people and actively involved in my church.

So going into this, I was well resourced. So I kept trying to dust myself off and pick myself back up. And I kept doing that. So even though it got, I'd say more and more challenging and difficult, I kept doing it.

But when I thought I was finally going to be able to move forward. And then it was the worst blow of all. Like I said, I would have gotten cancer again if it could bring my doctor back.

And by then I wasn't as well resourced. And also because I just blame myself for being a healthcare worker, there are certain things I thought I should have known which other people would have made the same decision as me during the pandemic.

But you know how we're harder, we expect more of ourselves, right, being healthcare professionals. And so I was beating myself up. So just all of those things.

And then my doctor, then I was not well resourced at the time and I wasn't doing well. But going back to when I found Kevin MD's site, I found his site because Dr.

Michael Hirsch's site had randomly showed up on my Facebook feed. He had a blog. And I had read it and it's written for physicians, but I really resonated with his writing and I had read every article.

So that December, my doctor died in October and that December, Michael shared that he was celebrating his year of blogging and I reached out to him to congratulate him.

And he wrote me a really nice message back. We started communicating. I had a call with him and then we kept communicating and then he started coaching me.

And that's in the end what really helped me get back to me. Because I know just when doctors have gone through, you know, burnout and depression, and I know some say burnout, some say moral injury, the two are different.

But any of those things, I just think it was like he's really helped me change my brain and get it back. More to the way it was. Wow. I was just on a call with another really wonderful doctor today, Dr.

Chrissy Ott. And Chrissy and I were discussing this injury that I have. I don't think I would be meeting it as well as I am without coaching. If this had happened five years ago, I think I would honestly be in a ball.

My identity was so tightly wound to being a clinician and to have that taken from me for a few months as I'm recovering. There's just so many different things.

And the phrase my coach uses a lot, like hold something lightly. So when you're having like this thing of, attack of pain to hold it lightly and to know that it will pass, which was something I didn't always remember during the pandemic or on deployment that no matter how bad these storms are, when you've been through a fair share of them, does that resonate with you or does that feel kind of hollow to say that the storms pass?

I guess now it's because I had never received coaching before either. And I would say in general that I am learning I guess as you say to hold things more lightly.

So I would say like you like it resonates more with me now than it would have. The one thing that doesn't so much resonate me when people say, or, God doesn't give you more than you can handle, like, I don't believe that because I also don't believe that God is handing these things out.

He likes anything like that. So that's why certain things can seem kind of trite. And Michael shared something today in his post. And I'm trying to remember what it was about how everybody does the best job they can with the resources they have at the time, right?

So that's another thing that in some ways that can feel trite, but he helped me see how in my situation that was really true. And of course I wasn't trying to sabotage myself.

Yeah. So now I want to pivot to stand up for doctors. What is that? So that's a very good question also. And I wanted to give a shout out also to Chrissy because she's had me on her podcast and I record an episode with her, which hasn't been shared yet.

So that will be fun to share. So when I was taking a walk before I started my YouTube channel, Stand Up for Doctors, in the fall of 2023, I was trying to figure out what to call it.

And what came to me when I came up with Stand Up for Doctors, because the four is in parentheses and there's an exclamation mark at the end, And when I was interviewing doctors, I'm saying, stand up, doctors, raise your voice.

And when I'm interviewing other people, I'm letting them know that we need to stand up for doctors.

Patient Perspective, Advocacy, and Standing Up for Doctors

So the four is in parentheses because when I'm interviewing doctors, I'm telling you, I'll stand up, raise your voice, we need to hear from you. And then for the rest of us, the four comes in, you know, that we need to stand up for doctors.

So that became First my YouTube channel and then Dr. Charity Hicks helped me design the logo, which is the last time I talked to my doctor, he called me.

I was at the beach. He called me to thank me for my thank you note. So I go back to that beach and I make sea glass hearts and I send them to my doctors.

And so that's why my logo is a sea, it's like a mosaic heart and it's a patient giving a doctor a hand and the doctor's represented by the cuff sleeve.

So that's also a way that we're standing up for doctors. And I also now have a stand up for doctors, sub stack newsletter, and I'm working on a website, stand up for doctors.org.

Wow. So for the patient that's listening, what can they do? Because I think so many of us feel like we don't have power because of the insurance companies, because of the politicians.

So what can a patient do? So that's another very good question. And in some ways, we're figuring it out. But in some ways, what you can do right now is thank a doctor.

And we can get back to that. But recently, a patient advocate reached out to me and she said, I've been in this space for 20 years, but I haven't really been able to engage with physicians.

And she was wondering how I was able to do that. And I share with her because I really care about the doctors. And like Dr. Amna Shabir will say that physician advocacy equals patient advocacy.

And if you make sure that doctors are well-resourced to take care of patients, we'll get good care. And I truly believe that. So I feel like one huge thing that would help is if we can turn patient advocates to physician advocates.

So people, and that's why I feel like this book is beautiful. because it shares the stories, like real stories of real doctors. And when they're sharing their stories, each doctor reading it will feel less alone because they'll see some of themselves in these stories.

And when patients and other people are reading this book, they'll see what's really happening behind the curtain, behind the white coat, the real struggles that doctors are facing.

It brings out the humanity in physicians. And I think that's how we'll all, because I think some people are home and

they're not. really trying to make a difference because they might be frustrated with their doctor that they have to wait so long to see a doctor.

They have to wait so long when they show up. They're not getting that they want or that they don't realize that lots of times the doctor's hands are tied and it's not the doctors ultimately making these decisions.

So I think a huge thing through my podcast, through yours, through other things is we need to raise awareness because if just doctors care, just doctors show up at the voting booth, we're not going to get anywhere.

So patients need doctors, patients, right? Patients need doctors to get on board to help them help patients. So if we can raise awareness to what's really going on, and then if patients can speak up as well, and also just nice and the doctor I thank you know let them know that you appreciate them understand if you don't have the best experience they might be having a bad day and grant them some grace which doesn't mean if you have like now if I have a few really bad experiences and I know I'm trying my best then I'll switch doctor because like I need doctor then I feel like they care Yeah, I think that's wonderful advice.

Gratitude does go a really way. And I also like the idea of just because something's an explanation doesn't mean it's an excuse. And that's what I mentioned in my book is if I had a nickel for every time somebody told me I'm going to tell you my doctor horror story, I would have a lot of them.

Family members love to call me and tell me how a doctor's messing up. But I always want to know the story behind. What's happening in that doctor's life?

Like you said, what's the resources behind them? So I wonder when I ended my book on this call to action. So I think one part of it is when we look at metrics associated with healthcare, I think we have to start to pull those metrics to be more in line in what would support the wellbeing of the people working in those hospitals.

Like there's the Mayo wellbeing index. I want to know the Mayo Wellbeing Index or its equivalents. There's other scores out there and I don't get any money from Mayo.

I'm just using them as an example. They've published a lot of literature. They have quite a few healthcare organizations, but I want to see that next to the Google review because I want to go to a clinic.

a hospital in which the healthcare professionals working there are treated well. Right. A hundred percent. And like some doctors are saying, and I agree with them, where's the physician satisfaction metrics, right?

So that the hospital systems need to care about, even if they need to realize that it affects their bottom line, because every time a physician leaves, it costs 500,000 to a million dollars to replace a physician, right?

So even if it's for their bottom line, they should care about retaining the physicians that they have, and they're not going to retain them if they're miserable.

But one example I can share that you might want to learn more about, and I connect you to, you know, Gabe Charbonneau? I don't know that name. Okay. All right.

So he co-founded Medicine Forward and he's moving on right now because he's getting involved with Oregon Health. So he lives in rural Montana. And so I'll connect you with him because Oregon Health is a system that is trying to care about the healthcare workers.

And it's in like rural Montana, that area. And I'm eager to see the kind of difference that Orchid Health can make because that's one place that could be a model that could be replicated and that other people could work with.

Yeah. I really love that. Okay, so we've hit the awareness piece that is huge. Let's move more into the organization side of things. At this point, would you say you've interviewed hundreds of doctors?

Yeah, on my YouTube channel, maybe a couple, because now I pair them up. So maybe at least a couple hundred on the YouTube channel and then other private conversations that aren't on the YouTube.

Yeah, so you've talked to a lot of doctors. So what are some top things, themes that you hear that we could be doing on an organizational level to support physicians?

Well, I mean, of course that we touched on is basically so we're both friends now with Dr. Josh Artzell, right? In his book, which is Health Care Leadership.

So I think that is so important. And also another one who wrote a great book about it besides Josh is Dr. Simon Craig, From Hurting to Healing, Delivering Love to Medicine and Health Care.

And things in some ways before the system changes, things could change right now if we were all kind to each other and all cared about each other. And I believe we might've touched on this with our episode with Stephanie is everybody is interacting with everyone else's trauma.

Race of you have healthcare leaders that have trauma and then they may not be sensitive to the physicians rate, not even having that awareness because they're seeing things through a lens.

And then sometimes the physicians don't have the bandwidth or they have compassion fatigue to really care about the patient. And it can all go in reverse where the patients they're in pain.

physically and emotionally, so then they don't grant the physician or the healthcare leaders any grace. So if every single person could be showing up with kindness, saying, and just giving people the benefit of the doubt, or being kind themselves and saying, you know, how can I make things better for other people?

If every single person did that, things could change right now. Yeah. And I think for the person listening out there that says, well, that sounds a bit utopian.

When you take a step back, almost everybody that goes into healthcare wants to be a kind and caring person. And what I've witnessed with my time, I can't say I've always been a kind and caring person.

There's probably people out there that said, Dr. Austin didn't show up for me in the best way on this day at this time. But when I take a step back and think about that, it comes down to resources.

Again, bringing this full circle is there have been places that I've worked that the conditions have been so terrible regarding leadership, how we're getting treated, the culture, the physical space, not conducive to providing care.

And the interesting part is it's not in the places that you would suspect. I've been deployed in a very low resource place and I've worked in a county hospital.

Two places that maybe on paper you would have said, well, those are low resource environments. You're not going to be fulfilled there. And they were great because the culture was good around me.

So what I would say for the person listening is if you're like, well crap, I wasn't great to my last patient and I don't always show up the best. I would really dig deep on that and ask yourself if there are immovable features of where you're currently working.

And if they're truly immovable, then maybe you shouldn't work there because the truth is there is a physician shortage right now. Some healthcare organizations are fantastic at gaslighting you and getting you to think that there really isn't a shortage, but there is.

And so one of the best things for me was to remove the geography piece. So once I took out the geography piece, I could start looking for places that I had value alignment.

And that is not just talk. Honestly, some of the worst places I've worked, I've never heard their mission statement. I've never heard them bring up values.

There's a reason. Nobody believes it. The leaders working there don't believe it. None of your colleagues believe it. So I don't know. I said a lot there.

Pick up any thread you want to. Right. Well, I agree with everything you said. And I agree that the culture of medicine has to change. But one quick thing is as far as like getting, you said, maybe a five star review from every single patient ever.

Like that is literally impossible. And now that doctors are supposed to see people every 15 minutes, all day long, nobody in the universe can show up with their very best self.

Changing Medical Culture and Supporting Physician Well-Being

patient after patient after day after day and showing up because you're human too. Like people, doctors have family members that are sick at home, right?

Struggles and tragedies going on in their own life. Even a pet, right? Sometimes the doctor will even share on LinkedIn their dog died last night. And nobody, you know, when other people like they might be able to take the day off.

Their dog died because they're so upset, right? And doctors that keep showing up. So to give yourself grace knowing that you are doing your best. But what I've learned from all these conversations is the culture of medicine has to change and it has to start in med school and residency is when you all are taught to put the patient first.

and to go hours without meeting your own basic needs, right? Hours without eating, going to the bathroom, working 80 hours, not getting enough sleep. Like all of those things, like when you were in the military, right?

Don't they tell you that sleep is really important and to make sure that you get enough sleep? Yeah, it's kind of funny, isn't it? Yeah, it's weird. The Venn diagram of military and being a physician.

Two groups that have huge suicide rates, by the way. So I've always said that Venn diagram of someone that was in the military and a physician. There's a lot of competing stories and priorities there.

Right. Right. For sure. Yeah. And then so the culture, because I think it's all about, because you use the word culture. And that's, I think it really is the culture of medicine has to change from med school to residency to the healthcare systems.

And they do, they care about the people that are there. So that's what we need to make happen is that we need caring, you know, Josh's book, Caring Leaders.

Yeah, we both read so many books and. I don't want to pick any favorites, but when I take a step back and look at the worst moments and the best parts of my career, you can largely trace it back to leadership.

So I do think Josh's book, which we'll put a link in the show notes, is definitely a really good place to start. And I think what we're talking about here too, is that self leadership.

You know, if you're not finding yourself surrounded by good leaders, then just really focus in on you and what do you need right now to survive that culture you're in and how do you get one step closer to being a place that you can work that's more in line with your values.

Right and I know some physicians feel stuck like say they're in smaller communities or communities without a lot of options and if they have a non-compete but sometimes non-competes from what I heard aren't as solid as you think they are and I've heard doctors that have given ultimatum like I'm either gonna leave now or in three months, you

get to pick or whatever.

And the people that you have more control than you think you do. So some might feel that they're stuck if they don't want to uproot their family and if they have an uncompete.

But if you feel really stuck, if you feel like you're in a job that's not a good fit and you don't see a way out, that's when if you talk to a therapist or a coach, because like Dr.

Michael Hirsch would say, you can't read the label from inside the jar. And there's always a path forward and to be willing to be vulnerable and open because sometimes doctors are keeping all of this inside and they are talking to anybody about it.

So the critical thing is to find a safe person to have a conversation with, whether it's a therapist, a clergy, a friend. a coach, somebody, and there's people, you know, like us, you and me and our friends on LinkedIn, that we have a lot of resources and a lot of doctors that really want to help their colleagues.

So there's always hope and there's always a path forward. And if you don't see it, talk to somebody and we can help you. Yeah, I think one of the most valuable parts about coaching is that questioning of a limiting belief.

We've talked about it a few times on the podcast, limiting belief is I can only be happy working in this small town. And I actually just had a conversation with a physician that was dealing with that geography, limiting belief.

And for many physicians, our careers have an outsized impact and I know there's outsize place in our lives. And I know there's a lot of people that say that you got to remove your identity.

I practice medicine. I'm not a doctor. Hold your identity lightly. At the end of the day, I spent a lot of time and money. to do this thing. So I'm going to do it, at least for the next foreseeable years, 40 hours a week or more, realistically, probably more.

So if I'm going to work that many hours, I have to have some level of fulfillment, which isn't like every moment's a hallmark card, not every moment's like, this is amazing.

Fulfillment's different than happiness. So I guess when I come back to, again, for the physician that's listening, that's having a hard time, is if you're miserable in your place, and you're like, I really hate working here, but I love living here, because I've done that.

Maybe explore, like, do you have to stay there? And if you're not sure, that's where a coach would be great. And even just bouncing some ideas off a friend.

My coach planted the seed about leaving San Diego two or three years ago. And it took that long for me to go, well, let me just start looking around. Right.

Wow. So then that's a great example. And one thing is even where you are now, just start with what you can control because it's easy to make the list of this is out of my control, this is out of my control, but everyone has control of at least 10 or 20% of their things.

Wayne Sotil said that he has a physician resiliency center. And he says resiliency isn't like some people say doctors are most resilient physicians. People on the planet, you know, don't tell us you want us to be more resilient, but that what it really means is getting through a challenging time and coming out stronger.

And in that way, you are resilient. You can be resilient. And he says to start, look at the things that you can control. And even if you think Michael Hirsch has shared like that, he didn't think he could eat lunch at work.

Like they were trying to tell him, no, you have to do procedures. He's a GI doctor through lunch. And he was able to challenge that persistently and over a period of time.

And now not only does he get lunch, but he got a lot of his colleagues now are taking a lunch too. So he had that limiting belief or the other people in the office did.

that we don't get to have lunch and he turned that on his head and so that's again thinking about like if there's things you think you can't control again rethinking that or reframing it trying to turn it on its head well what can I control or what if I could do something about this what could I do and then also remembering your why you know you went into medicine and then some heady times that can give you different opportunities that you might not have thought of.

What is the most important to me? What are the reasons I went into medicine and then explore? Are there other ways that I could still fulfill that purpose?

Yeah, for sure. Well, I know you have some really exciting things coming up. I believe you're putting together a retreat. Could you tell us a little bit about that?

Yes. And so I haven't even like officially announced it yet, but that's okay. Like when it's up, I'll discuss it. So the fall of 2026, Columbus state weekend, I'm hosting a physician retreat at the Edith Macy Conference Center in Briarcliff Manor, New York.

And Dr. Gretchen Rickards was saying it's going to feel like summer camp. And it isn't to build out the whole property. So there's hiking trails, there's fire pits inside and outside.

We're going to work on, so you can use CME credits and also get CMEs for attending. And we'll have topics, everything from trauma, trauma-informed coaching to branding.

Physicians have a brand, whether they think they do or not. So how can you make the most of it? And we're also going to intersperse that with activities.

Dr. Beatriz Olson is going to lead the doctors in a little art session. And also we'll have music and writing and all of the things. And it's great because everything will be optional.

because we want doctors to have a weekend where they can really listen to themselves. So if they think they need a nap, they can go take a nap. But we'll have enough things.

It'll be like a sampler planner. So you can try something and follow it up with an activity or follow it up with more conversation. And Saturday night, we're going to have an epic dance party.

And we'll have an international professional ballroom dancer with us. Our friends are coming and it'll just be really fun in all of the ways. And that's Adrienne Towson.

Do you know Adrienne? No, I don't. Oh, she's planning on coming, so we have a joke with her and Dr. Tomorrow Beckford. Do you know tomorrow? No. Gosh, you know everyone.

Well, that's why you're coming. You'll meet all of these people in person and more. So my own doctors, I'm hoping are going to attend. I'm going to have a gratitude dinner also Saturday night.

And I have a milestone birthday right before then.

Physician Retreat, Hope, and Closing Remarks

and I decided to do it to celebrate I wanted to celebrate my birthday by celebrating doctors that are keeping me alive so I wanted to do it someplace relatively local to me in hopes that my own doctors can come and I can have them come to the dinner and just I can celebrate all of you and so you can all meet each other so you can find out more if you reach out to me however You're gonna share my links on LinkedIn, working on my website.

So I have to book the place because I'm personally responsible to do so. So we will fill it and I want to fill it with doctors that I know. And that's how I started too, is we formed a LinkedIn family, but the doctors are in all different specialties and they normally wouldn't be able to get together.

So I'm like, well, I can do that. And they're gonna come. Dr. Simon Craig planned on coming from Australia to give a keynote. And if Dr. Adam Harrison can sway it, he's going to come from New Zealand.

So doctors are coming from all over to spend a really fun weekend with each other. And you're not going to want to go back home. And following New England is beautiful.

Oh my gosh. I can't wait. Well, I want to move into a few rapid fire things real quick. So what's a quote or a mantra you return to when things get tough?

Because you've had your share of tough times. Well, it's hard to pick just one, but just one thing. I'm in my church in this women's fellowship group and one of the women shared something that her uncle told her.

And I wrote it down and I keep it on my bulletin board. And it says, if your goal is to change the world in one fell swoop, you will fail. But if you brighten the corner where you are, you will succeed.

And I love that. That's great. That's great. And I think helpful if you're going through something big is what's the next best step, what's next little thing I can focus on, which sometimes is literally just taking a breath.

Right. Yeah. And even literally, and I've learned more breathing techniques. So literally and metaphorically speaking. Awesome. Okay. I almost hesitate to ask this question, but I'm going to ask it.

Okay. Who is one healthcare change maker you're admiring right now? Maybe somebody I should reach out to. And you mentioned so many, but anybody else that you think would really resonate with the change making part of this show.

Whoa. So I can list names also, but the two organizations I'm involved with, Medicine Forward and Dr. Todd Iden is working on that documentary, Suck It Up Buttercup.

So that is going to make a huge impact. They're also involved with the Healthcare Reinvention Collaborative, and Dr. Don Ellison is involved with that, and Dr.

Paul Burens and Denise Weissman. And they're trying to connect changemakers. And so I've met people through them and they've met people through me and I've spotlighted them and they've spotlighted me.

So if people want to learn more about we had a support.org, healthcare reinvention collaborative, I think that one's.com. We could put those links in the notes and that's ways.

And again, I've had people on my YouTube that I've met through each of those organizations. And of course the Dr. Lorna Breen Heroes Foundation was really powerful.

And I've had Corey Faison and Dr. Stephanie Simmons and of people, because they've really in such a short period of time, They've changed lives and they've really been able to make an impact.

And they say their campaign now is health workers have the right to, and the health workers have the right to free and confidential mental health support.

And so those are three organizations that you can reach out to and there's individual members within them that are all fantastic to connect. I love that for everyone listening, because I do think that's a big way, especially once you're out of crisis.

It's hard to reach out to any of those organizations when you're really struggling. But as I came out of that really

intense period of struggling, that was then therapeutic, is to have that collective agency piece.

Because the problems we're talking about, they can't be done individually. They can only be done collectively. So the next step when your cup is full enough is to start connecting and linking arms with the other change makers out there.

Okay, one more question. What's giving you hope? I mean, we talked about some pretty negative, scary, frustrating things. So I do think it's important to end on what is giving Kim Downey hope right now.

Sure, well, and we need hope, right? We just need hope. So if you look for it, you can find it. And I would say since the pandemic, that a lot more doctors are talking about these things where you were all tied, put your head down and just keep going.

And many of you were struggling in silence. So with the pandemic, things got so bad and that broke things open. So when I say every time a doctor shares their story, another doctor feels less alone.

And the more doctors, every time I have a doctor or two doctors on my YouTube channel, they're sharing their stories. You know, this is going to be a series because we have a lot more stories to tell.

So as every doctor is, you all are sharing your stories and your experiences. And of course I had to give a plug, you know, your book too is a beautiful, beautiful book.

And you share your story, you're a prime example of this. And when a doctor reads this and they'll feel less alone and like, oh my gosh, me too, or there's somebody else.

And the more stories we share, the greater awareness. And I feel like there's gonna be tipping point where so many of us, because I just see all the people I see on LinkedIn talking about these things.

And there's a group of orthodox and Adrian Towson is one of them that are working on changing things. So I see ripple, as Dr. Tatang would say, ripples of change.

And I think they would say, you know, like, or every time we make a ripple, they'll add up into waves and then a tsunami. And I just feel there's like, I interview a lot of people who are really trying to make a difference.

And if we all amplify each other's voices, we'll get the job done. Amen. And I would totally recommend that listeners read Revenge of the Tipping Point by Malcolm Gladwell.

And he talks about the lead up to that tipping point and that many things that felt like they just suddenly happened didn't just suddenly happen. It's this idea that you're talking about that it feels insurmountable that we're not going to get there.

But there is so much happening right now And it will, and then we'll be like, oh, well, physician well-being just became this thing. Well, no, there was literally decades of work that then pushed it over.

So all right, well, reminder listeners, how can they connect with you? Sure. Well, I'm on LinkedIn a lot. So LinkedIn is one way and I have a sub stack newsletter.

So that's an in that stand up for doctors, my YouTube channel, stand up for doctors. And I'm working on my website isn't quite ready for public consumption.

But that's going to be a stand up for doctors.org. So those are a few ways. And I do have a Facebook business page stand up for doctors. So. If you Google stand up for doctors, you will find me or Kim Downey.

I love it. There's a potpourri of options and I just want to thank you from the bottom of my heart. I think one of the most healing things over the last few years is connecting with patients and I count obviously your healthcare

professional as well, but your ability to really stand up for doctors and the compassion and the energy and the commitment, even knowing that you haven't had, it's not like Kim's had an amazing experience every time, but just like, I don't know if I know anybody as enthusiastic about physician wellbeing and wholeheartedly energetic.

There's lots of advocates out there, but there's something about Kim Downey that is just really special. So I wanna thank you for everything that you're doing.

Well, thank you very much. And I've actually been told that a lot. And then that in turn fills my heart. It energizes me because in the end, like what Michael and me understand is like all that had to happen for all this to happen.

If I had a smooth go of it. Bad things didn't happen. I wouldn't be doing any of this. So then that it's doctors helping me help doctors. A doctor plays the opening music for my podcast.

It's a doctor that helped me design my logo. It's doctors that wrote the chapters of this book. There wouldn't be a book if it wasn't for doctors and their gratitude that they really are so grateful to me.

And I'm like, oh my gosh, like I think every one of you is amazing. And I think that's what we can all do too, right? Is work towards a positive spiral, right?

Cause this is something that just goes to show you if you care about each other, support each other and we're making positive changes. Yeah. Well, that's a great note to end on.

Kim, thank you so much. And I can't wait to have you on the pod again. Thank you again for having me. I love that conversation. I always love chatting with you, Andrea.

So it was great to have another opportunity. So thank you. Thanks for listening to Heartline, changemaking, and healthcare. If you're ready to deepen your own inner work or want to bring these conversations into your organization, visit andreaaustinmd.com.

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