



## Conscious Life presents

### Wellness Through Sovereignty and Stillness

Guest - Dr Darryl Tonemah

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#### **[00:00:09] Meagen Gibson**

Welcome to this interview. I'm Meagen Gibson, your conference co-host. Today I'm speaking with Dr Darryl Tonemah, a counseling psychologist of Kiowa, Comanche and Tuscarora heritage.

He has three bachelor's degrees in psychology, sociology and gerontology, a master's degree in community counseling, and a PhD in counseling psychology and cultural studies.

Dr Tonemah is a trauma-informed counselor who works with native groups across the United States and Canada. Dr Tonemah, thank you so much for being with us today. Thank you for having me.

#### **Dr Darryl Tonemah**

It's good to be back. It's been a couple of years, I think.

#### **Meagen Gibson**

It has. Too long.

#### **Dr Darryl Tonemah**

I know.

#### **Meagen Gibson**

So you and I were actually just talking recently, and you said something that reminded me of how generous living well can be, that the work of healing ourselves serves other people. And I love this framing. So could you start by telling us what living well means to you?

## **[00:01:02] Dr Darryl Tonemah**

Well, probably like yourself and a lot of folks that would tune into a program like this, we are givers. We give to the community. We're probably the folks in our circle that people come to for help or assistance or guidance, or just to feel a sense of comfort.

I talk to a lot of people about what is the case in their lives. And probably we're all maybe drawn to each other for that same purpose, that we can borrow from each other. And the more... I don't...

Maybe this has been going on my whole life. I don't know, maybe it's going on your whole life. But I became more aware of it as an adult that other adults... Even beyond children. Other adults need safety and connection and warmth and nurturing from other adults.

And I started to see that more and more and more, and I became more involved in that. But then I realized, wow, I feel tired a lot. That I felt it was almost limiting to my own wellness.

And so in the past 15, 20 years or so, I've really made a conscious effort to make sure that my cup is full on a daily basis so I can loan it out to folks. I can't walk around with an empty cup because you don't know when it's coming.

I don't know when my phone's going to ring or somebody's going to call, or I'm going to get an email that says, can we... Can I talk to you for a little bit? I don't know when that's coming. So every day I make sure that I am... Prepared is a strong word, but I am nurtured.

I self-nurture in my nutrition, in my movement, in my prayer life, in my connectedness and all these things. So when that does come, I'm already there. So for me, personal wellness is important because we're going to... Whether we're conscious of it or not, we're going to affect several degrees of separation away from us.

So when you ask, what is that and why is that? That's why it's important to me. And you know what? I have a wife and three kidlets that need that from me. I can't walk around them, be around them empty. I need to be very cognizant of who I am and what I am in their world.

## **Meagen Gibson**

I love that, and how much of that for you is understanding your limitations? And allowing yourself to have some? Because I think that when you first become aware that maybe you're... A lot of people that have trauma histories are constantly in a state of overwhelm or constantly overhelping, like you said.

And that first stage where you become aware of it, then the next foreboding thought that you have is that like, "Oh no, I have to have some limitations." And then that's the discomfort. So how do you become aware of that and allow for it?

## **Dr Darryl Tonemah**

And that's a tough process, Meagen, because you don't have the habit of saying no. And people don't... They don't have the habit of hearing no from you. Who wants to be the one that is said no to? So that's part of the arc, the process, the growth and development into it.

**[00:04:38]**

I think for me, it started with... My little phrase, somatic literacy. What was I calling... Like, tired, beat down? What did that feel like in me? And then kind of using context clues to say, well, what's going on that I'm starting to feel like this?

And so for me, I would feel just an edge. I would be more sarcastic. I don't want to be, but I would be. And I'd feel compelled to movement. I mean, I think that's always been kind of a rejuvenating thing for me, which has been physical movement.

I feel compelled to movement. To get to the gym, to go for a run, to ride a bike. All these things like this that, that I know rejuvenates me. So I thought... Well, let me qualify that as well. I can feel compelled to movement or pizza.

**Meagen Gibson**

I like that it swings in both extreme directions. Yes.

**Dr Darryl Tonemah**

But you know this, in the work you operate at extremes. You're either totally shut down or you're hyperactive. You're starving yourself. You're eating constantly. When this starts to settle in, you start to operate at extremes.

And maybe that's the cue, why am I seeking extremes? Because I can't function for any duration at any extreme. And my family doesn't want me to be at any extreme. So for me, the arc of that is knowing where it is and what is it doing?

And then having a little patience and grace for myself to sit back and say, "Well, this has been going on. This is going on, and this hasn't been going on. This... I haven't slept. I haven't prayed. I haven't moved. I haven't done these things that I should be doing."

And that kind of grew into, "Oh, this is all interconnected that once I do this better, I do this better. So I need to make sure that I'm doing this regularly."

**Meagen Gibson**

Absolutely. Yeah. I call it... In my life, I call it a coping cruise where I can tell that I'm seeking out cookies instead of connection, right?

**Dr Darryl Tonemah**

I'm bogarting that. Cookies and connection.

**Meagen Gibson**

Right? And because those are the cheap, easy, accessible ways of... You know, I'll do anything to avoid meditation, I'll tell you.

**[00:07:10] Dr Darryl Tonemah**

I'd just rather not be still.

**Meagen Gibson**

Yeah.

**Dr Darryl Tonemah**

And, you know, that has been in the past ten years probably one of the bigger factors in wellness for me. And I do this when I say wellness because you understand that we're a system. There's so many aspects. And it's not just thinking. It's not my thought-processing. That's part of it. But if I focus on just that, I'm missing a big chunk of other things.

So when I say wellness, I'm talking about how I am making sure the system, including the spiritual life and the thinking life, and the family and all that stuff, is connected. So part of me is leaning into that just in the past...

We're starting ten years ago and then really slowing things down just to be still purposefully in the past ten years or so, by taking 30 minutes a day just to do nothing.

And me being Mr Hyperactive, my... I remember the day I came home and I was looking at some research on stillness and just doing breathwork, which... Before that I thought, "Breathwork, what?" But you know. It's so, oh my goodness. It's so healing. It's so good.

I came home from the office and walked in the house and my kids were littler then. And I said, "I think I'm going to go upstairs and do nothing." And they were like, "Mom, is dad dying? What's wrong with dad? He's not bouncing off the walls." And so I have tried to make it a daily habit since then.

**Meagen Gibson**

And this is coming from somebody with five advanced degrees, I think. At last count. I might have lost track. And I think people either relate really hard to that or they relate to the other part of it, which is maybe the pizza metaphor you're making.

We're either on one of two extremes. We're either like go, go, go, go, can't rest. Or don't know how to get up and go. Because we're in such extreme kinds of fatigue and stillness, and would love to have more get up and go.

So I know both of those kinds of extremes run the gamut for people and that it just depends on all the different factors that apply to you specifically and what makes you, you. And as you were talking too... Oh, sorry. Go ahead.

**[00:09:31] Dr Darryl Tonemah**

You say that and I think I have probably pendulated between those two and probably felt super uncomfortable on this side of it rather than the hyperactivity side of it. I probably picked on myself a lot for not being go, go, go.

**Meagen Gibson**

Oh, yeah.

**Dr Darryl Tonemah**

But, you know, if you do that, you're going to crash. You can't stay at one or the other for any duration. So we need to have grace for ourselves and be kind to ourselves.

**Meagen Gibson**

Absolutely. Yeah. And as you were talking about wellness and all these different systems and things. And I kept thinking of, like, all the things that we have and take care of more than ourselves.

Like my house is going to need... Just literally a week ago, we had to glue down some shingles because we've been through some hurricanes this year. Or I've got to pull weeds or I just had an oil change yesterday in my car.

Like we don't get a thing, and then assume it never needs any care or maintenance again. And so why would we as biological beings be any different than that? And... Yeah.

**Dr Darryl Tonemah**

Well, you say that. And to me I mean, it's accurate. It sounds probably initially stressful because okay, it's not... I just can't because... Being product oriented rather than process oriented. Well, I've got this done. I've knocked this out. It's on to the next thing.

But we can't do that with wellness. You don't get there. You have to understand that this is an ongoing process. It's a daily process. It's sometimes a moment to moment process of, where is this in me and what is it doing? And how can I be in charge of it instead of it being a bully to me?

**Meagen Gibson**

Yeah, absolutely. And at the beginning of your somatic literacy, I'm so glad that you named moment to moment, because that's exactly how I remember it being. There were...

I feel like it was a whole full year where I was just in a moment to moment negotiation with my nervous system of being okay with discomfort, or doing what was available to me to manage discomfort.

And so I love that you named that because I think it gets overlooked a lot, that we... There's so much somatic education now available, and breathing practices and body work and all of these things. And integrations and lines of inquiry that we can go.

**[00:12:03]**

So it... Even though it's very accessible, I think that makes people think it might be easy when I don't think anything could be further from the truth at the beginning.

**Dr Darryl Tonemah**

Thank you for saying that. I'm going to pound my desk on that one. Because that's a good one, because it's the... I have discovered kids are great at it. It's something like this, "Urgh!" They do that and they can express it physically, or they can point right to where this is.

But we get so up in our heads, we get to... We want to sound smart and be smart, and we don't want to say my heart's thumping. We want to say, "Well, it's uncomfortable." And so we try to use all these words that get us away from this. Just being literate on... It's right here and it... I don't like it, and it hurts. I have had much more...

But let me say that once people can flip that switch... Man, they do the work and it... Things change. Fast. Because they've never, ever... Part of what trauma wants us to do...

Trauma is kind of a jerk. And so it tries to separate all this information that should be integrated. And so once it starts to... Once you start to integrate, there's a sense of relief.

I was working with a guy just the other day and doing pretty intense PTSD. And had done just thought work, thought work, thought work for... Since Vietnam. And then I asked him about this, and I asked him, "How's that gone for you?"

Because, I mean, if that's going great for him, let me... I'm not gonna fix what's not broken. He said, "It's been awful." And I said, "Well, that would be unkind for me to drag you through all these things over and over and over again to have the same end. So let's not do that."

And so we just did some, let's introduce yourself to your body. Just what do things feel like? And it was... That work is fascinating to me, because there's got to be a certain level of connection and safety. Because the system wants to wrestle you on...

Trauma is a jerk. It doesn't want you to be... It doesn't want you to be integrated. And so it pushes back and you get these stomach stuff, and these pains and... But just being present and consistent, and with him in calm knowing that this is part of the process. And it's going to end okay. It's going to be okay.

And after, at the end of our time together, he said, "I have never felt so connected or heard." But it wasn't about being heard. And what his story was verbally. Was heard in the narrative that his body had been stored for 50 years. I tell you, that is... Moments like that in this work. That's why we do it.

**Meagen Gibson**

Absolutely. Yeah. And to be heard in the way that your body is communicating to you and... Yeah, I can understand exactly what he meant. And it really, that story brings up this idea of sovereignty

that runs through so much of your work. And so I'd love it if you could tell us what sovereignty is and why it's such a huge part of your healing work that you do with others.

**[00:15:29] Dr Darryl Tonemah**

Man, that's a timely question. I love that you asked that question connected to that story, because sovereignty is... Like in a sociocultural context, we're in charge of our language and finances and government.

But sovereignty, just in my own skin. Can I feel present in my own skin right now? Can I control my heart rate right now? Can I feel like I'm not going to crawl out of myself right now?

To have a moment like that, after having 50 years of that? By simply... I say simply, but it's work. But the idea... The simple idea of connecting with your body again. And he became sovereign at that moment.

And thank you for bringing that up right now, because that's what I said. I let him know that, "You are different now than you were 15 minutes ago. You claimed something right now that you didn't have 15 minutes ago." And he's sitting there. Affect is totally different. He's not this anymore.

He's present, and with me. Reclaiming... Or maybe claiming for the first time, because he had tough stuff before that. His sovereignty and understanding that in these moments, I can still be me and I can still have autonomy in these moments, because that's what...

Trauma doesn't want us to have that autonomy. It just wants to run roughshod. And we're just hanging on. You've probably heard this from a lot of folks. Some people just hang on waiting for it to end. Waiting for this episode or this overwhelm to end. So they're just hanging on, hanging on. And that's not sovereign.

And I would want everybody to feel that way. I raise my kids that way. I want them to leave this house with a big, fat, thick toolbox. Whatever comes along today, they have the tools to handle whatever comes along. And that's where... This gentleman is going to get there. He'll get there.

**Meagen Gibson**

And you mentioned sovereign moments. I want to come back to that because sovereignty... Having agency over your own behavior and body and choices, seems like such a big concept. And might sound like a big ask to restore, when so many systems and circumstances are out of our control and are in play.

But I've heard you mention sovereign moments which are more attainable and lead to greater sovereignty overall. So can you explain what you mean by a sovereign moment, exactly?

**Dr Darryl Tonemah**

Yeah, that's that foot in the door moment. There's a crack. And we want to find out where that is. And so when we're doing this somatic literacy... And I call it toes to nose, only because it rhymes. I have no other reason. But it's, what... I want to introduce the different parts of themselves.

**[00:18:27]**

Squeeze that and loosen that. What does that feel like? And honestly, Meagen. Probably half the time when I have somebody just do this with their toes. Because I want to see, well, do you feel anything? They do this with their toes.

Probably half the time, people get nauseous by squeezing their toes. Because all of a sudden they're attending to something south of the neck. They're attending to something that's in their body.

And then this gentleman, "Oh, my stomach feels funny." I said, "Well, let's just breathe that down." Prosody. I want to use the tempo and pace and tone of my voice. You're not scaring me. We're in this together.

And I'll say, "Let's just breathe that down. That's interesting. And that's..."

And I let him know, "And that's just information that's been there for a long time. That's just... Your body's holding that information."

And then... There's no rush. I mean. This isn't a game that has a clock on it. There's no rush. "Let's just do... Let's go at the tempo that your body is willing to go right now."

And then we'll breathe it down. I'll say, "Well, how's it now?"

Let's say it's feeling better, and maybe scale the discomfort just to see where it is. And if he's at a nine, then we breathe it down to three.

"So let's just do it again, just to... I don't have anywhere to be. So let's just hang out together and do this work."

And then we do it again. And then he'll say, "Well, it feels good now."

And that's the foot in the door. That moment is a sovereign moment because there was something that he would have just run away from previously, or just collapsed under or given into previously.

But leaning into it and then saying, "I have agency over this that I never knew I had." And there it is, right there.

So when you talk about the sovereign moment, that's your building block right there. You say, "Remember when you did this with your... We did this with your foot, and then you thought it was going to get ahold of you. And then you told it to sit. You can do that with so many other things in your life."

And then you just start stacking these things and blessedly, people change. They... A motivated person, can... And willing to do some of that work. And I always tell them that, I get to see you for one hour out of... I think there's 148 or 168 hours in a week. Don't quote me, or don't make me do the math. There's a lot of hours in the week, and I only get them for one.



**[00:20:53]**

And I tell them to just practice this all the time. Just get to know it. Just get to know your body. If you need a partner, maybe to remind you that that's just information. But practice this. Slowing things down.

This ties into the wellness work we were talking about earlier if things get too fast, and we lose control when things get too fast. So if we can start having agency over tempo. It's very empowering for people to have that experience.

### **Meagen Gibson**

Absolutely. Yeah. I can think of so many examples of when things get too fast. Like, say you go to the doctor's office and they're like, "Oh, I think I want to have you... I want you to have a little blood work." And then you're off to the races in your mind for the next 12 to 36 hours. You're writing a will and...

For me, a big one used to be when my kids would have some behavior that I didn't value. We'll just say. That was out of alignment with our family values. And then I'm down a rabbit hole of things I got to fix because of my discomfort around their behavior.

There's so many ways in which we start. We get faster instead of slowing down when we're uncomfortable. And just being able to sit in the discomfort and be like, wow, that thing, whatever that was, made me really uncomfortable and that it will pass.

And not only that, but I think a lot of people with trauma histories have lost track of the evidence of their resilience they already have. Of how many things that they've survived or withstood. Or even more than that, because that all sounds like very heavy work.

But just endured. I am here. Look at all the things I've overcome and these moments of stacking sovereignty as you describe it, become this big box of evidence that we can go to when we have something really upsetting or really triggering.

We're like, okay, I know I can withstand this because I've been practicing curling my toes and I have a bunch of practice in withstanding discomfort. And I know that it will pass because I've been practicing for this.

### **Dr Darryl Tonemah**

Oh my goodness. Box of evidence. I'm going to Bogart that. Hold on. Box of evidence. All right. Let me get that tattooed somewhere. No, I love what you're saying. And I think one of the things that we do initially is have them recognize that they've made it through the day.

You've got this far. You're 70 years old. You made it. You got here. Maybe it wasn't comfortable, but you got here. You're 40 years old. You've got here, you're 25. You've made it this far. There's evidence that you can do these things.

**[00:24:03]**

So part of the first couple of meetings is looking at our internal and external tools. What's gotten you this far? And they're not all healthy. Some of them are vodka and sarcasm. But some are...

There's something in there. And you got that foot in the door. Give me something to build on here. Because not everything you've done your whole life has been awful and unhealthy and horrible.

But we paint ourselves that way. And so part of that list that we make is, what have you done? What are the things inside of you that get you through? You survived somehow with all the stuff that's happened to you. You're here today.

And the fact that you're here today, you didn't have to come. There's something inside of you that is saying, "I want something more, different, other for myself." Those are internal things.

Then there's the external things. What are things outside of you? Unfortunately, there's a list of unhealthy things. But we want to see... Sometimes they'll say my family. Sometimes they'll say the exercise. Music.

There's things outside of them that get them through the day. They've used these tools their whole lives, but maybe never sat and thought about it.

So the question then is, which one do you use? How do you know you need to use one of these tools? What pushes you or compels you? Which one do you use most often?

Is it working for you? How does it work for you? We're always looking for something to build on, build on, build on. And that's another foot in the door thing there.

### **Meagen Gibson**

Absolutely. And as you said earlier, kids know how to do this. And I think we've talked about this before. But I live with three drummers, a lot of drumming. And my youngest can sometimes struggle to do homework and focus on schoolwork and things.

And so he's developed this habit of every time I ask him to do it, he suddenly has the compulsion to go drum. But I'm not going to discourage that because I know secretly somatically what that's doing for him.

He's not just avoiding discomfort. He's also regulating. Think about beating on things, how awesome that feels in your body. And how much more capable you are of handling discomfort after you've dispensed some rage against math homework.

### **Dr Darryl Tonemah**

You know, my kids are the same way. But theirs is... When I say come help with the yard, they all have to go to the bathroom.

**[00:26:42] Meagen Gibson**

We get a lot of that in our house, too. Yeah.

**Dr Darryl Tonemah**

Avoiding... But maybe that's it.

**Meagen Gibson**

Yeah, something about the dishwasher always requires a bathroom trip. Uh, I love this conversation. How did we get here? You talked about something that I want to touch on. In one of your podcasts, and it's not... It's a hard left turn. I'll warn everybody. But it's within the realm of what we're talking about.

You've talked a lot about grief and loss lately, and one of the things that really struck me about this was all of the factors that you named in contributing to how people grieve and handle loss. And I'm putting this kind of spur of the moment on you.

But do you remember what you said all those factors are? Because it isn't just things like how much you love the person or how you related to them. There are so many factors that I don't think people really consider when they're thinking about grieving and loss.

**Dr Darryl Tonemah**

Well, I had... There was like a series. I don't think it was purposeful. For our podcast, The Singing Psychologist. Shameless plug. I had gotten several emails of people asking if I would do a podcast on grief. And coming out of Covid and how people couldn't grieve or mourn...

Maybe the way that was appropriate for them, or even culturally appropriate or familiarly appropriate. And so there was a lot of hurt sitting in so many people. And so it ended up... Not until somebody pointed it out after the third podcast, did I realize, well, that was a... What's the word? A tr, tr...

**Meagen Gibson**

Trilogy.

**Dr Darryl Tonemah**

It ended up being a trilogy. But there's... The things that go into grieving. It's so complex. And I think a lot of folks were beating themselves up that they were doing it wrong in some way. And they weren't following the roadmap. They hadn't read the book.

And I just let them off the hook. There ain't one. It's like you said, there's so many factors that go into it. Even genetic factors. Things that... How you were raised. The type of relationship you had with the person. The duration. The understanding of the person. The understanding of the spiritual aspects of grieving.

**[00:29:36]**

All these things make an amalgamation of who you are and how this affects you at this moment. Was it sudden? Was it drawn out? Were there comforting last words? There's so many things that contribute to it and there's not the right words. And as a psychologist, maybe being... Is heretic the word?

I don't have the exact right words. But what is most comforting I have found is just the presence. We thrive in connection. And loss or trauma. Or maybe they have a lot of trauma history, and I don't know how to handle loss. Or it's just been loss, loss, loss. And that feels very common. And so, I don't know. I've never developed the tools around what this is.

But we do know that... Going way back to the beginning, coming full circle, Meagen, is I can't give from an empty cup.

And just disclosure, I had three super close people to me... My cousin who is a week older than me. We grew up together. My sister and my father all died within a year of each other. Not Covid, just seemingly random deaths in their life.

And strangely I had been preparing for their deaths for a while. I had thought, well, I'm probably going to get a call about dad at some point, because he had diabetes and had a bad heart.

And at some point, I'm gonna get a call about dad. And I was in Nashville and that call came. At some point I'm gonna get a call about my sister. At some point... So I was very philosophical about it. I mean, it was sad. I miss hearing their voices, and the knock on the door when they come over for dinner.

I miss those things, but we can't live forever. And the... It's impossible. Knowing that... The gift that they leave me then is, I take the appreciation of that and put it on the other relationships in my life. That I miss those, but I have these still. And so let me hear what those voices are.

Let me hear what that laughter sounds like. Let me feel good when I open the door for dinner. And that's where the juice comes from. The people who... You never know when you get that text or the phone call. People who maybe need to borrow some of your safety.

Because that's all about this human experience of connectedness, and the gifts that the people who leave us. That's what I get to pass on to my kids now. And so I... But there's so many factors that go into that as well. Because what if that was a child?

Then I'd probably have a whole different experience. So it's very complex. There's not a right or wrong, but being in it and... Keep breathing through it. Keep letting your heartbeat through it. And like I said in one of the podcasts, they ran out of heartbeats, and I still have some left.

So what am I going to do with the ones that I have left? And who am I gonna connect with, with the ones that I have left? And how am I gonna help my community heal? How am I going to engage in that with the people that I care about? That's basically what that trilogy was about.

**[00:33:31] Meagen Gibson**

Taking those relationships, allowing the grief, and then sharing the safety that you've built in yourself and the wellness that you've built for yourself, with others and with your community. If I hear you right?

**Dr Darryl Tonemah**

Yes. Instead of having it limit you, have it grow you in some way. And that's, mhm... And it's okay to sit there and feel bad about it. I felt bad about it, but I can't stay that way. There's more to do.

**Meagen Gibson**

And I just... I have to give thanks and appreciate you publicly for naming the sensation of... Well, that might be the last time I see them or things like that. I actually just had a visit with my family last week and had that exact thought in the airport. I was like, well, that might be the last time.

I think it's a normal kind of pre-grieving, anticipatory grief, somatic process to just really allow ourselves to appreciate the time that we just have and know that it might be our last.

Because with so many relationships, we don't know. And even innocuous things like... You don't know when the last time you're going to pick up and hold your child is.

**Dr Darryl Tonemah**

Right.

**Meagen Gibson**

Either because they grow out of it or because something happens to them. You don't know when the last time a lot of things are going to be.

So when someone has had the privilege of living a long life and you've had a trauma history. I think we're more prone to be like, well, that might be the last time. Because there's a sweetness and an appreciation and a nostalgia in it for me, that is one of the gifts of how those of us with trauma histories relate to the world, I think.

**Dr Darryl Tonemah**

Well I think what you said there is important to park on it for a second. That that might be the last time can be two very different experiences. It could be overwhelm or it could be appreciation, depending on if you've done some of the work.

And I think part of the healing process is appreciating the relationships and... They aren't forever here on Earth. I'm not going to see Dad again here. So appreciating the things that I can carry forward of him, from him, to my children. And my son took all his clothes. So he dresses like an 80 year old man, and he's 16.

**[00:36:19] Meagen Gibson**

I love that.

**Dr Darryl Tonemah**

It's kind of cool.

**Meagen Gibson**

I love that. This has been a great conversation. How can people find out more about you and your work, and what you do in the world?

**Dr Darryl Tonemah**

The Singing Psychologist is our podcast. It's on all sites where you download podcasts. We have a website [tonemah.com](http://tonemah.com) which is more of a music one because... We probably should say something. I do sing for...

**Meagen Gibson**

I know I was just going to say. We should slow... In speaking of slowing down The Singing Psychologist, because Dr Tonemah does, in fact sing. But the podcast is not necessarily about music. I mean, it's about all kinds of things, too.

**Dr Darryl Tonemah**

Yeah, we're all... So we do... How I try to set it up was, the first section is about a psychology topic. And then... Or maybe we do an interview with someone. And then I play music from myself and some of the people that I know. We just play a couple songs from each of us, and that's the podcast.

So I've recorded... I just finished my 12th album. And with the hyperactivity stuff. While I was finishing the 12th album, I was starting the 13th album which will probably be done next summer. As I sit here looking at my guitars right there, they're calling to me.

**Meagen Gibson**

Speaking of grounding somatic practices.

**Dr Darryl Tonemah**

Yes.

**Meagen Gibson**

Singing for real. Yeah, absolutely. And also remind me and everybody at home also about your counseling practice?

**[00:38:02] Dr Darryl Tonemah**

First Nations Telehealth Solutions. We do a lot of telehealth work all over, wherever. We try not to limit ourselves. We just say wherever. We want to stand in the gap is how we approach it.

**Meagen Gibson**

The best thing to come out of Covid was telehealth, I believe.

**Dr Darryl Tonemah**

I agree. Access to care just boomed. And I'm all about it, so that's great.

**Meagen Gibson**

Fantastic. All right, so we can find Dr Tonemah at First Nations Telehealth. We can find him on the Singing Psychologist podcast and [tonemah.com](http://tonemah.com).

**Dr Darryl Tonemah**

Yes.

**Meagen Gibson**

Dr Darryl Tonemah, thank you so much for being with us today.

**Dr Darryl Tonemah**

Thank you for having me. Thank you everyone.