

Karen Vandiver of New Healthworks

Speaker1: [00:00:04] This is the Investor Connect podcast program. I'm Hall Martin and the host of the show in which we interview Angel Investors, venture capital, family offices, private equity, many other investors for early stage and growth companies. I hope you enjoy this episode. Interested in learning more about investing in startups, launching a new startup need to raise funding, the startup Funding Espresso is a daily podcast and a short, concise format delivered to your inbox every day Monday through Friday, the time it takes to drink an espresso and learn about startup funding. To subscribe, go to invest, connect again through email to the US.

Speaker2: [00:00:43] Hello. This is Hall Martin with Investor Connect . We're here with Karen Vandiver, owner of New Healthworks and founder of Mindful Meditation Training Institute. New Healthworks services include corporate and Executive Coaching, Professional Telehealth Services and Mindful Meditation. Training provides an office therapy in Austin, Texas. Karen, thank you for joining us. Thank you. So tell us about your background. What did you do before founding new Healthworks?

Speaker3: [00:01:10] I did a lot of hospital work as individual therapist, along with a family therapist, and I did group therapy. I had a lot of really good clinical training from some of the best that I've heard of in that area and just fell in love with therapy. So it was just like I said, I have really good, really good teachers. And I saw results. I saw results and was just amazed at what could happen. I started programs also for hospitals, so I started an inpatient co-dependency treatment program when that was a big thing for a while. And then I started a 12 step co-dependency group for the hospital and an outpatient group. So I had created all of those programs for one hospital and I've done that for other hospitals as well, creating programs. Then I went into individual therapy, private practice. And so my private practice grew in Austin and I loved it. And that's what I did before New Healthworks moved to the area when my mom was dying and started that practice and it began to overflow. So I hired four therapists and that that was gave birth to new health works.

Speaker2: [00:02:23] Right. So what led you to start work in this space to begin with?

Speaker3: [00:02:27] Well, that's an interesting question. Well, the first thing that happened is after I gave birth to my daughter, had trouble going to sleep, and so I was in Waldenbooks and I looked at these recordings, these cassette tapes and saw one that said sleep hypnosis. So I bought it, took it home, and it worked. Great thing that happened. Oh, I'm sorry, go ahead. The other thing that happened was started because of the sleep hypnosis thing. I was just really excited about working with the brain and all the possibilities, which we didn't have research at that time to support it, but now we do. So I was gone to a four day workshop on hypnosis in Houston, and Ernest Rosen had recordings there called Listening to Your Symptoms. And at that time I had worked on my face during graduate school, which was not a lot of fun. And I've had them for a year and a half and had gone to a dermatologist for that year and a half and nothing had changed. So I thought his record and listening to your symptom brought it home. Did the protocol was able to identify a situation that was symbolic. And I resolved the situation. And in four days my words were gone. So I became just delighted and wanted to know more.

Speaker2: [00:03:53] Great. So what's your advice for people investing in this space? What do you tell them to do before they write that check?

Speaker3: [00:04:00] There better be somebody clinical on board or you can have a lot of litigation against you.

Speaker2: [00:04:07] Well, let's talk about the industry in general. Where do you see it going from here?

Speaker3: [00:04:11] Telehealth, which I know that that's the new thing now and it's going hugely all over the world, not just here in America. So I've seen it in India and all kinds of places and. I see people getting on board from different states when we weren't allowed to do that, but now you can have an LLC and you can be a counseling center and you can hire therapists in other states now. So that's one way of addressing the issue of not being able to hire people except in your state, which is how we're kind of limited now. Therapists. In terms of that, unless you have an LLC,

Speaker2: [00:04:54] You recommend that for people in your situation is to go ahead and put their business inside an LLC company or.

Speaker3: [00:05:01] Yes, I would like that.

Speaker2: [00:05:04] And if there's telehealth is of course, as you said, a big thing is going everywhere you see it gaining more traction in some applications over others and you see it not gaining traction in certain spaces.

Speaker3: [00:05:17] Like I said, I haven't really looked into that seriously because I feel comfortable in my own skin and I feel like what I offer is unique and very well documented. But yeah, I don't know if I could answer that question. I just know I have just heard things and I've never really gone into to see it. But we have had things in the past like that where this growing idea that someone has without it being clinically explored has led to a lot of litigation. And that was back in the 90s, I believe, and a lot of litigation back then because hypnosis was being used inaccurately and led to all this litigation. So you do have to be careful. And a lot of people lost their licenses who were not paying attention to the rules. So it was really people who didn't know how to do hypnosis. And in hypnosis, you're in a vulnerable state because you activated the alpha state, which is a state of consciousness where you're open to ideas, to seeing things in a different way. So if someone plants an idea that something happened, which is why you have the symptoms you have, then the person will take it in is the truth. And that was what happened back in the 90s. So it was in because I value clinical training so much, I stayed away from it, but I saw other people really get hurt by that movement.

Speaker2: [00:06:50] Aside from litigation, where the other challenges in the space

Speaker3: [00:06:54] Staying up to staying on par with the research that's being done like the National Institutes of Health, have all these different studies on meditation, which we didn't have before. And I started meditation because of hypnosis. So I was using hypnosis as a way to meditate. And then I met a neurologist from India in Austin and he was very well trained and he understood the science behind it, even though we didn't have access to research it. He understood what was going on in the brain, and he is the person that might take it seriously and start doing meditation back in the 90s. All this research showing what happens to the brain when you meditate and that you're making new neurons which become new brain cells and you're making you're increasing your melatonin for sleep, your serotonin for motivation and

interest. So you're not depressed, your dopamine is increased. And so that's the bliss hormone and you don't have anxiety.

Speaker2: [00:08:00] I say, OK, so quite a bit is happening there. And they seem like they have a lot more clinical data on it now. And so it seems like that's that could be quite useful in your work. Yes.

Speaker3: [00:08:11] And I like to find out that kind of stuff so people know it's real and I.

Speaker2: [00:08:15] That's right. Well, tell us more about new Healthworks and how do you fit into the overall landscape there?

Speaker3: [00:08:22] Well, if we have a lot of it, because I started it in Harker Heights, where the military is in and the bulk of the clients there are military, the bulk of my clients in Austin or not. But there's a lot of PTSD and trauma. And so we deal with a lot of really serious things. And sometimes there's hospitalization involved based on the level of severity. I see a lot of families because of deployments and that sort of thing. And so it's if you're coming into that my practice, you would want somebody. I would want to train them so that I know they have the clinical skills to deal with severe cases.

Speaker2: [00:09:06] And so aside from the severe cases, what else do you tend to see in your practice?

Speaker3: [00:09:11] Well, it's really some really exciting things happen, like I've seen people that you wouldn't think would heal at all. Now, this was a case in Austin that a psychiatrist sent to me, but the person had been in and out of hospitals multiple times a year for five years. And in working with me in the very first session, we were able to uncover the trauma that had been very long ago. And in six months, she was off her medication. She never went back to the hospital and she got a degree and has a professional career.

Speaker2: [00:09:44] Well, that's great. Like a big win there as well. So where are you plan to take your practice going forward? Where do you think the technology or the research is going to move at this point?

Speaker3: [00:09:54] I really don't know. I think more clinical trials are being done to see what other parts of the brain are involved and what other kind of body chemistry is involved. So these are about five studies that I was sharing with you that started in about two thousand and five, because I think the universities just got all of this brain scan stuff that would allow them to do the research. So I think that's going to be expand and go into other areas. So universities are going to be doing more of that than just the hospitals.

Speaker2: [00:10:28] And what did you see during the covid pandemic? How did that impact your work?

Speaker3: [00:10:33] Well, it didn't really, but I thought it would and I was scared, so but I was grateful because it didn't really impact my work,

Speaker2: [00:10:43] Ok, but it didn't really have a psychological impact on your patients. It was just a flu like symptoms and it had a physiological impact, but not a psychological one. Is that right?

Speaker3: [00:10:55] Well, some people it had a psychological impact and others it didn't. I mean, I can't say that it categorically was. One went one like.

Speaker2: [00:11:06] It seemed that people being sequestered at home for a long period of time weighed on some people. Did you see any impact of that in your area?

Speaker3: [00:11:15] I did see that because when it finally lifted and people had their vaccinations, people cried because they they were free again and we were back to normal. And so there was this relief and they and then they had anxiety they didn't know that they had. So I saw more of that than people struggling during the pandemic.

Speaker2: [00:11:37] People came out stronger for that experience. We can we can survive this. We know how to do this now. I think some cultures are have gone through these kind of pandemics before, mostly in Asia. But we we have not gone through one in a long, long time.

And so I think most people were quite prepared for it. But I think next next time we go around, I think we'll be a lot better prepared for it. What's your take on that?

Speaker3: [00:12:00] No, I agree with you. I think if it happened again, those of us who've been through it in will will know that we can make it. We'll know that adjustments need to be made. And and there may be lessons we learn, like the Ice Age in Texas that we give ice and lives that were lost. So it was really tragic.

Speaker2: [00:12:22] We did have a tough week there in February when everything froze over for a full week at single digit temperatures, froze our power grid and natural gas. Everything was frozen. And so it was that was quite the scene there to see the state in such a place because we've never been there before, hopefully won't be there again. But did you have any fallout from that week of experience in your your area?

Speaker3: [00:12:46] Yes, I did. From clients that it was really scary for them. And some of them were without heat for days. And so. Yeah, and other people died. I don't know about people that died during that time.

Speaker2: [00:13:04] From lack of power and lack of heat,

Speaker3: [00:13:06] Yeah, they froze to death.

Speaker2: [00:13:07] Oh, well, so I guess what else should we cover that we haven't at this point?

Speaker3: [00:13:12] I just hope that people take it seriously. Some people think you're just sitting there talking and you're just having a conversation, which is not true. You're you're sitting there talking and you're connecting with the person that you're also paying attention to the symptoms and you're also paying attention to what direction to go with it and how and how severe it is. And if you don't know how to deal with the severity and I've run into this with clinicians who didn't have any clinical training, I would call my friends would call me if they didn't have clinical training. And this is the diagnosis I'm looking at. What do you think? And sometimes it was right that sometimes it was too severe or sometimes it was too mobile. So

they would call to make sure they were getting the diagnosis right and whether they had the skills to treat that person.

Speaker2: [00:14:01] Great. Well, how best to get back in touch with you?

Speaker3: [00:14:04] Oh, well, I can call I have a one 800 number on my website so they can call that number.

Speaker2: [00:14:11] And your website is vandiver dot com.

Speaker3: [00:14:13] That's true.

Speaker2: [00:14:14] That's great. I'll put that in the show notes. And I want to thank you for joining us today and hope to have you back for a follow up soon.

Speaker3: [00:14:21] Ok, thank you so much. Appreciate being on the show.

Speaker1: [00:14:28] Investor Cadec helps investors interested in startup funding. In this podcast series Experience, investors share their experience and advice. You can learn more at Investor Connect. Doug Alti Martin is the director of Investor Connect, which is a five C3 nonprofit dedicated to the education of investors for early stage funding. All opinions expressed by Hall and podcast guests are solely their own opinions and do not reflect the opinion of Investor Connect. This podcast is for informational purposes only and should not be relied upon as a basis for investment decisions.