

From The Gridiron to Addiction Recovery With Randy Grimes

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KRISTIN: Hello everyone. This is Kristin Sunanta-Walker, host of Mental Health News Radio. I’m here with Randy Grimes, who I met at the Navigating the World of Addiction conference in Colorado this past weekend. Randy, thanks so much for coming on the show.

RANDY: Well, thank you for having me, and it was a pleasure meeting you and working with you this last weekend. Hopefully we planted a lot of seeds.

KRISTIN: Yeah, you flew in from Florida?

RANDY: Well, yeah, I was at a conference a week before in Alabama; so technically it was actually LA - lower Alabama. I came straight to Denver from there; but the facility that I work for, Behavioral Health of the Palm Beaches, Inc., is actually in West Palm Beach, FL, so that’s where I live.

KRISTIN: Well, Randy, why don’t you tell our listeners a little bit about your background in terms of your career, and then we’ll get into more stuff later.

RANDY: Well, I had a ten year career in the NFL with the Tampa Bay Buccaneers after playing four years at Baylor University. I was very fortunate to have that career. I played with a lot of great guys and a lot of great coaches. Tampa was a great place to start my family and to raise my family. It was a great opportunity. Little did I know that’s where my addiction was going to start as well.

KRISTIN: So you played football for fourteen years, essentially that’s how long it ended up being. I know, because you and I talked at the conference, I understand more personally how pain and how the field of athletics can lead you into the addiction world to manage your pain, your beginnings from pain medication. I know that because my own ex-husband had the same thing with football. He said, “Kris, they were throwing pills in my mouth in high school. So what was your experience with that, leading into it, did it start with the NFL or was it before that?”

RANDY: It really didn’t start at college. I really didn’t have that experience at that level; but then again, I didn’t have the injuries that I had (from the NFL) when I was in college. Injuries was the reason that this addiction started, but believe me, I soon crossed over into full blown addiction. At one point, the medication really quit working for the injuries and it was all about being addicted and not getting sick and the insanity that goes along with that. I justified it so well because I wanted to stay out on the field. If I wasn’t in my position, somebody else would be. That’s the warrior mentality that we were raised in and that young men are still being raised in today – you shake it off, keep going, and do whatever you have to do to stay out there. It was a gradual thing. I had team trainers, team mates, team doctors, fans – I had so many

people that were enabling me while I played, that all I had to do was play well on Sunday and everybody looked the other way and threw more and more pills at me. Injuries were the reason that it started, but it soon crossed over into full blown addiction.

KRISTIN: Did you ever have those moments of clarity where you thought, “Does anybody see me? Does anybody see what’s happening to me?”

RANDY: Back then, no. Like I said, it was a necessary evil of the occupation. I didn’t even look at it like an addiction. It was just part of my pre-practice and pre-game ritual. I would get taped up; I would get my equipment on; I would take a handful of pills and I would run out on the field, whether it was the practice field or the game field. I never gave it two thoughts because I was doing what I had to do to stay out there. It was part of the job. That was the mentality back then. But I also had access to as many pills as I wanted, so I didn’t have to worry about all the chaos that went along with an addiction and finding more and more and more.

KRISTIN: Right, because you had easy access to it. That’s a long time to put your head down and keep plowing through life, which is what it sounds like you were doing then, while you were carrying the weight of everybody’s expectations, a drug addiction, and injuries.

RANDY: Right. The insanity of all that didn’t really kick in until after I retired and moved back to Houston where I didn’t have all the team doctors, team trainers, and team mates to enable me. That’s when all the craziness of the doctor shopping, multiple pharmacies, and the chaos of trying to keep a prescription opiate addiction alive revealed how much work that is and what a full time job it is. That went on for twenty plus years.

KRISTIN: Yes, I remember wondering, “Where is all of our money going?” I keep making it and it keeps going out the door. Michael was asleep most of the time, and if he wasn’t asleep he was angry because he was in pain and in his addiction. So yeah, it’s not fun to be the spouse or the person in it.

RANDY: We create a lot of destruction and we leave a huge wake of destruction behind us, whether it’s money, missing stuff that’s been pawned, lost jobs or houses, repossessed cars. The insanity never stops. I’ve said before, as crazy as it got and as much pain as I was causing, I just couldn’t stop doing it. I could not stop. That fear – the fear of getting sick, the fear of not having that crutch that’s always been there, the fear of not feeling normal when really everyone else sees us as nodding off, slurring words or definitely not ourselves. We think we’re normal but that fear that we in addiction have just drives us to do really insane things and hurt a lot of people.

KRISTIN: We saw what you talked about at the conference and have seen your videos on the website. What’s interesting to me now after meeting you and your wife, is that there’s such a humility there. When you were sharing your story about picking up cigarettes at the behavioral health center that you were at, that’s the place people miss when they don’t really get out of the addiction because they don’t get to that place where they are really on their knees. They don’t have anything left and they make a choice then to get help. That’s who I all felt we were sitting and listening to on Saturday when you talked.

RANDY: I guess they call that the gift of desperation. What made this time different than all the other times than all the other times that I tried to clean up, I think you hit the nail right on the head. I finally was granted that gift of desperation. When I went into treatment I was desperate. I crawled in on all fours – literally – I fell out of the car and crawled on all fours. I was so grateful for one more opportunity to do this. Kristin, I was finally desperate. I hit so many bottoms and there were so many trap doors in every bottom that I hit, and I always went further and further down than I ever thought was possible.

KRISTIN: You think, “Oh this is my bottom. No, wait a minute. There’s more?”

RANDY: Right! I'm on the bottom, but my legs are hanging down, so it goes deeper.

KRISTIN: Yes, exactly. Then you think, "Please, no! This is enough!"

RANDY: Yes! But I finally had that desperation and I was granted one more opportunity, and I was certainly going to take advantage of that. You talked about picking up cigarette butts, that was after I spent ninety days in treatment and I had a couple of surgeries while I was in treatment. I came in with a plan. There was a plan in place this time to help me with my pain issues, to help me get off the opiates; but the biggest devil of all was the benzos that I was addicted to. The multiple seizures that I was having every time I'd try to come off of them or every time I'd run out of them – that was the biggest fear. I came in with a plan and when it was all over, when the door hit me in the rear end on day ninety, I was scared to death. I needed to stay as close to those people, that safe zone, as I could. So I got in a halfway house that was close to the treatment center and I would come back on the treatment center grounds every day and pick up cigarette butts, anything to keep me in that safe environment. I needed people to hear my voice and see my eyes every day.

KRISTIN: The accountability and the people who saw you on your knees and they still accepted you.

RANDY: That's the beautiful part of this; it's that we broken people get to help broken people.

KRISTIN: That's the amazing part to me. It's been hard for a lot of people with addiction, but people that are trying to help or some people coming to treatment centers will have a little bit of status in some way or another, whether it's through athletics or acting or what have you. I asked you asked a pointed question during the conference, and we won't go deep into it, but it's been difficult for us as a show to meet some people that are in the industry, but they really aren't clean. They may not be on drugs or alcohol, but they've switched addictions to a porn addiction or sex addiction or whatever; but they're representing themselves as someone who's this upstanding individual, and you see that they're not. One of the things that I asked you was, "How do you deal with that?" because if I know you can see it, I know you can see it faster than we can. So you had answered that question during the talk, do you remember what you said to me? You looked right at me and you sat up in your chair and you said, "I know exactly what you're saying; and I try not to judge, but I know exactly what you're saying."

RANDY: And I do know exactly what you're saying. I see it all the time. I work with a lot of former professional athletes that are looking to get sober. I see a lot of people that could easily fit that description. Like I told you that night, who am I to judge? I just know how I do it; I know what works for me. What works for me is what's worked for a lot of other people, so I just have to assume that that's the way to go. All I can do is to continue to pray for those people; make sure that I do my part and keep my side of the street clean; and that's all I can do – that's all any of us can do.

KRISTIN: Now that I hear you talk, I think that they haven't hit their bottom yet, which is sad, but I think that's really what it is. They haven't hit their bottom yet.

RANDY: Well, I agree, and also are there other underlying issues that were never really dealt with? So I think maybe there's more stuff, and maybe more will be revealed in their step work and their work with their sponsor. Maybe more will be brought to light so that they can continue to work on the other things that make us better one day at a time. There's stuff that you can only accomplish through step work.

KRISTIN: Can you explain to our listeners how your helping other athletes, and other families in general, helps keep you on this path and continuing to do your step work?

RANDY: That's one of the first things I heard when I got into this field or this industry - in order to keep what you've got you have to give it away. I do believe that. I believe that with anything not just my recovery or anything that I have. I've got to give it away in order to keep it. It's a tough industry to be in because you spend so much time working with

others, and luckily I have the right people in my life – the right sponsors and people in recovery that are quick to call me out on this – but you spend so much time working with others, hearing their stories, and dealing with their pain that you forget about yourself sometimes. You need to do what’s necessary for your recovery on a daily basis. That’s what I have to always keep in check and call myself out on as well. But my passion is, of course, working with people in addiction and working with those that are still sick and suffering; but also working with their families, because it’s been my experience when families get well, addicts get well. I think once families learn good healthy boundaries, and start to reclaim their lives, then I think we as addicts follow suit and are soon to get sober after them.

KRISTIN: Your wife plays a critical role in doing this with you. Was that ever hard for you to have her step into the spotlight so to speak and talk about this with you? Did you ever have any concern around that?

RANDY: Well, obviously it’s hard to hear all the pain and destruction that I put her and my family through. I need to hear it, but it’s hard to hear it. I think it’s a healing process for her to be able to talk about it as well. I think she does a good job of relaying not only what she did but what she didn’t do. I think that’s the kind of stuff that families need to know. Sometimes I think addictions go on way too long – they all go on way too long – before families quit burying their heads in the sand and stop living in denial and finally acknowledge that there’s a problem that’s not going to get better on its own. There have to be changes made. What does the saying say? Nothing changes if nothing changes. I think once families get to that point, unfortunately families are like addicts, and it usually takes a medical event or a legal event or something like that to motivate them to finally start making some changes. But once they get to that point then everybody gets well.

KRISTIN: Yeah it’s so true. First, I’ll say I have carte blanche to talk about whatever I want from my ex-husband, who I talked to you about, who’s my closest friend. He says, “Whatever you need to talk about, Kris, talk about it, because you went through it too.” I think about the years and different things that happened, like he fell asleep in front of a fireplace and getting third degree burns on his feet but he didn’t feel it because he was taking so much pain medication, and I didn’t do anything about it because I was focused on making money and keeping us in a house and food on the table. There were things like that and it would happen again and again and I did not know. I didn’t grow up with it, I grew up with other kinds of things going on, but there wasn’t substance abuse. That’s not a justification, but what it took was his getting arrested and then I took it seriously. It doesn’t have to go that far, which is why education and you doing what you’re doing and why I do this show because if we can catch someone at an earlier stage and say, “Is this what’s happening in your home? This is addiction. You need to do something about this.” You know what I mean?

RANDY: I do, and we tell people all the time the purpose of an intervention is to motivate someone to change before they hit those bottoms that we hit, because a lot of times we don’t recover from the bottom we hit. Whether we commit a felony, or God forbid we overdose and die, or we kill someone else – those are the kinds of bottoms that we don’t recover from. Nine out of ten intervention calls that I get I cannot get the families to pull the trigger because A) they don’t want to be confrontational, B) they think it will get better on its own or that they can love them back to health, or C) let’s just wait and see what happens or try another route like out-patient therapy first. Meanwhile, things don’t get addressed and we hit bottoms that we don’t recovery from. Unfortunately, that is the path that some people choose and that’s why there is the big push for educating families and getting them on board before it’s too late.

KRISTIN: Starting younger and having programs within athletics and everywhere – look for the signs, this isn’t healthy behavior and here are some resources. There’s no shame – that’s the biggest thing I think is the shame around admitting for the addict and also for the family too. There is so much shame that comes with it, and that’s the blanket of shame that you have to cast off in order to actually hit your bottom and get to that place of humility.

RANDY: Yeah and that just blows my mind that there is so much shame and stigma associated with this disease. Think of all the diseases that people would bend over backwards: they send people to the greatest doctors that they can afford;

they research the disease; they know as much as they can about it; unless it's addiction – and then they bury their head in the sand. They suffer in silence. I don't understand it because this disease will kill you just as quick as anything else. Even the way we describe and talk about relapses – we don't talk about relapses of diabetes or anything else with the same tone, or the same disgrace, or the same shame. It is a disease – we know that. We know that you die from this disease. I have a hard time with the stigma and the shame that's placed on this; and that's also our job, the people in this industry, to do whatever we can to erase that stigma.

KRISTIN: That's why we even created this show. You'll find this interesting. When I first named this show Mental Health News Radio, mental health, to me, is anything to do with your mental state. Well, addiction affects your mental state, so that's part of mental health to me. I've had addiction counselors come on the show and say, "We don't want to be associated with a show called Mental Health because there is such a stigma. My thought was, "Isn't that the point to talk about it so that there isn't a stigma?" I'm always shocked at that.

RANDY: That's the shallowness and the lack of an open mind that some people in this industry have. I know with me there were so many underlying issues. The addiction was just the way to self-medicate and not feel the underlying issues that were going on with me. I had so many problems with identity, self-worth, and self-esteem when I left football. Those were all things that fueled my addiction. I had to go somewhere and work on that.

KRISTIN: That's where you did the counseling part where you take a look at yourself and take inventory. I think a lot of treatment centers or programs miss that mental component which is really your self-talk and you childhood or career trauma. They miss that piece. They are treating the addictive behavior, but like you said, they are not getting to those underlying issues. Your brain is in a groove. This is how you talk to yourself every day. This is how the world is colored through your eyes, and it's not a pretty picture. That's underneath your addiction and they don't ever get that, like we talked about before, to that bottom. "You think this is the bottom? No, now this is the bottom." It's the same thing in working on your personal and mental issues. You have to keep going deeper and deeper and deeper to get to the root cause, otherwise you're just going to run back, in a weak moment when someone says something to trigger you or a tragedy happens near you, and you don't have a strong enough foundation to not go back to the addiction. Does that make sense?

RANDY: It does. That's why I preach all the time about people finding a facility that has good dual diagnosis therapists, because we know that addiction is just a symptom of something that is going on underneath – and that has to be dealt with. We have to deal with what makes us do what we do. Usually it's trauma based and fear based. That's the kind of stuff we have to dive into. There are so many things going on with us in addiction. Unfortunately, insurance kind of drives this, but thirty to forty-five days is usually what we've got and that's only an opportunity to just start barely chipping away at that stuff. You have to continue with out-patient therapy. You have to continue with the rooms and with the steps and with your sponsor. Those are all plans that are in place that have been successful for millions of people. It still kind of blows my mind that people come into treatment and say, "Well, the twelve steps are not for me. Going to meetings is not for me." Well how do you know? You haven't even given it a chance; you haven't opened your mind enough to know that there is something out there better that might work for you that's worked for millions of others. I'm not close-minded enough to say that the twelve steps are the only way, that going to meetings is the only way, or that Smart Recovery or Celebrate Recovery might work better for some people. I know that it does – but you have to do something. You can't just sit at home and not pick up and think that things are going to get better in your head.

KRISTIN: Exactly! That's why I loved it when you were at the conference and I saw the sign for Behavioral Health of the Palm Beaches and you've got different boxes on that sign and one that talks about mental health. There are not a lot of treatment centers out there that will state that that is what they work on, and when I saw that I thought, "Yes! There's

one that's talking about every component, every aspect of this. So hat's off to that organization." How did you find them? How did you know to go there?

RANDY: Actually, I didn't. My wife had reached out to the NFL, and the NFL had a connection here. I was the first NFL player that came through here. It was all a God thing. Little did I know that eight months later I would start reaching out to some of the guys that I played with and against whom I knew were out there doing the same thing that I was doing – self-medicating because of injuries and had the same self-esteem and self-worth issues that I did. I started this program down here for former athletes. It started off as former NFL players, but has now branched out to former MLB guys who have the same issues we do. They leave the game with injuries, chronic pain issues and they self-medicate with either opiates or alcohol. But since then, in the last seven and a half years, we've helped hundreds and hundreds of former NFL guys and former MLB guys not only get clean and sober but get their lives back, get their sense of self back, and realize that they are not the sport that they play – that's just something that they did for a while, and that they have more to contribute.

KRISTIN: Yes, and that's what's interesting to watch someone chasing a glory from their past, which is great and wonderful. We have trophies of Michael's from when he played ball in college, but something that I admire about him, even with everything that he's been through, is that he doesn't chase past glory. He looks for, "What am I doing today that's glorious? What am I doing to help you, Kris, with what you're doing with the show? How can I contribute today? That's a part of my past and I am proud of it, but I don't want to chase that." That's what I see happen to some of these people that did get a taste of kind of fame or stature in a way, even loosely. They can't let go of that lifestyle or what they thought it was about, and when they come out of the drugs or alcohol piece they are still chasing that celebrity but they are using addiction treatment recovery – open up a treatment center or what have you – to get that glory back. Those are the people that are doing it for the wrong reason and they won't be able to help anybody coming at it with that as your end goal.

RANDY: You know, Kris, after I retired from football I kept searching for that job that would replace running out on that field, be under those lights, be in between those bleachers, and listening to all those people. I never found it – of course I didn't ever find it. I went from job to job to job looking to replace that part of my life because that was, or I thought that was, my identity – that's who I was; that's who I was destined to be. But that wasn't the case at all! That's just something that I did for a while, and as a matter of fact, it wasn't until I got into this field that I realized that doing all of that was just preparing me for something so much greater; and that's what I do now. I'm grateful for that now. It took me a while to realize that, but I am so grateful now for what I get to do, and it is ten times, a hundred times more rewarding than anything I ever accomplished on the football field.

KRISTIN: That's what's so interesting is that the two of you up there, you and your wife – so humble. Like you said, you were looking for people in the center to look you in the eyes and that whole Freedom from Addiction Conference was filled with people at their most authentic self. That's what I felt when I was there. My hat is off to Rob Lohman for pulling that off. Even though it was a very intimate conference, and I've been to ones where I can't even think straight because there are so many people coming at me, but that one is always going to be special to me because of the intimacy of the connection. At the end of the day we all chipped in to clean the whole place up. When you can get to that place of humility where you are just people and you can look each other in the eyes and you are there together in your most basic self not a persona – really you – that's the place you have to come from in order to really help facilitate healing in others.

RANDY: I thought it was a beautiful thing too. Of course, it's about planting seeds and helping as many people as we can, but it's also about the relationships that we form. The fact that I got to know you and what you do and how passionate you are about this and everybody that was there – it was all about relationships. Through those relationships we will accomplish even more. And those are God things.

KRISTIN: Yes, those are God things, absolutely. It was a God weekend for me, not that every moment isn't a God thing, but I really it that weekend. And you are passionate about what you do, and when you see someone else who is super passionate you either scare them half to death or they say, "I dig you!" Well, Randy, tell our listeners what is on the plate for you next, other than just waking up and trying to get through the day every day?

RANDY: Yeah, that's accomplishment enough right there. I've got a big summer planned. I've got my son coming in from Africa. He lives and works in Tanzania, Africa. He'll be coming in. I've got more traveling to do, more interventions to do, and that's what keeps me sober and keeps me going – working with families and with people suffering from this disease. I will just continue to keep planting seeds. That's what keeps me sober every day.

KRISTIN: Exactly. That's what keeps me mentally at my best so that I can do this show and the network of podcasts that we're putting out there. Now we're getting requests for interviews three and four times a day, people from every walk of life that want to come on the show because they feel safe being interviewed by me – and there's only one of me.

RANDY: Well thank goodness that you're there and that you're doing what you do. You are good at what you do. I value our new relationship and what a great a vehicle to get the word out there to as many people as possible and as many places as possible. Thank you for what you do and I hope for you continued success.

KRISTIN: Yes, you too. I hope to do whatever we can to help you with what you're doing. The more that we can shine a light on this the better it is for everybody. If I didn't do this show and talk to everybody and their brother, from my mailman who has bipolar disorder to you, I wouldn't be mentally well. This is something that I need to do, this kind of advocacy, so I understand that drive to work with families. It is just something that you have to do even if people don't understand why we don't spend our time elsewhere. No, I can't, this is what me well.

RANDY: Hopefully I can get you down to Behavioral Health of the Palm Beaches here in West Palm Beach soon. Hopefully you can do a podcast from here as well with some of the athletes that are living here and are in recovery. I want you to talk to come of our clinicians and see what we've got going on down here and see what a wonderful place it is. Of course, it's holy ground for me, so it's easy for me to say that. But there are some beautiful things and some miracles that are happening here every day. I'm grateful to be a part of that in some small way.

KRISTIN: Well I definitely want to support that because I'm in and out of treatment centers and outpatient mental health and psych hospitals all the time assessing them from a business and technology perspective, and I see a lot of good stuff and a lot of shady stuff. I feel like it's hard in the treatment center world, especially in south Florida, so the fact that you guys are there and doing good work, I want to support that like nobody's business with my show! So we're there.

RANDY: Well thanks, and yeah, there's been a bad rap on some of the things going on in south Florida and rightfully so; but not enough good things are being said about all the many people that are doing the right thing. And there's a ton of them. This industry down here, it is what it is, and as big as it is there are a lot of people doing the right thing and helping a lot of people.

KRISTIN: Yes, and you can't do it all – one agency or one organization cannot do it all. It's so much more gracious to be collaborative with other good treatment centers because you can't do it all. A program here may not work for one person but you know another place that will. When competition comes into play from a business perspective, and I understand that – I'm in the business field – but when we're talking about saving lives, for me, that goes out the window because competition has no place in saving lives.

RANDY: That's why I love you, Kris.

KRISTIN: Well, Randy, I want our listeners to know the website is www.bhpalmbeach.com if you want to reach out to Randy or anyone on their staff. If you go to the website it will pop up a chat or you can call 855-647-HOPE. Randy I want

to thank you for coming on and doing not your typical interview that we do here, but I appreciate you winging it with me.

RANDY: Well thank you for the opportunity. I really am grateful!

KRISTIN: And thanks to our listeners.

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