

[00:00:01.090] – Dr. Amy Lee

These are some of our goals for the conversation today. And we'll kind of move through. I think people can read me -- but discuss anxiety and nervousness. We're going to talk a lot about practical ideas for how parents and caregivers can support kids. We teach kids and parents together very often about the coping skills that are beneficial for anxiety. So, calming the body -- different strategies for doing that -- we'll kind of play around with that a little bit today. Coping thoughts -- like how to help kids recognize thoughts and change them, and strategies for actually easing into situations that are uncomfortable for kids. And we have some exercises that we'll do to kind of experience that.

We'll try to talk a bit about common traps when we're trying to be helpful as adults and how those can actually be less helpful and some social practice.

So this is me. I'm a pediatric psychologist at the Cleveland Clinic. I have been there a long time and I do a lot of different things and wear a lot of different hats but ended up being a great career and a great privilege to work with kids and families for such a long time.

[00:01:29.910] - Rebekah Bryson, LISW

So, my name is Rebekah Bryson. I'm a licensed independent social worker. As you can see on the bottom, I've kind of been in a few different places, just kind of figuring out where I feel the most comfortable. But I have had the experience of working with lots of individuals. I say I work with kids from two to 20, just really working on all kinds of different backgrounds and supporting families in those decisions. Most recently, I have accepted a position -- I am now currently with the school systems at Avon High School. But I have made wonderful connections throughout my time at different practices, and most of us with the Cleveland Clinic for 13 years. And that's where Doctor Lee and I have worked together.

[00:02:10.090] – Dr. Amy Lee

So, we wanted to just kind of go over “what is anxiety?” And when we talk about anxiety -- when folks talk about someone having anxiety -- I think they're often referring to something that's a little more than nervousness or anxiety that comes and goes. We all experience anxiety and nervousness, but many adults, a third of the population -- and children -- would qualify for a diagnosis of an anxiety disorder. When we think about an anxiety disorder or something that we might be we might be able to diagnose as an anxiety condition, we're talking about nervousness and anxiousness that's sort of outside that kind of passing situational anxiety.

So persistent anxiety can be present in kids and can show up in children in particular. It can look like anger, avoidance, shyness and oppositional behavior. So, it can be confusing when we see it in children because they can't always tell us exactly what's going on. But we have to look at patterns and sort of look for “is this a pattern of certain situations that are creating this pattern of behavior?”

We also like to make it clear that social anxiety is more than shyness. And it can occur at the point where a child is entering a situation, but it also can be coming up hours or days beforehand. Many kids who are anxious are anticipators. They think ahead, and sometimes their ability to think outpaces their coping skills. Sometimes these are kids who can really anticipate and plan and think ahead, but they may not have the skills yet for “what do I do with that information or that expectation?”

Children also have negative thoughts about a situation, and those thoughts may or may not be true. So just like adults, kids experience many of the same symptoms, the same types of experiences. And these are just a few examples of common anxious thoughts that we might hear from kids.

One of the differences that I've often explained to parents and kids together is kids will tell us their thoughts. The younger they are, it's almost like broadcast to us, right? We hear exactly what they're thinking because they just say it. And as kids get a little older, closer to adolescents, we don't hear exactly what they're thinking about. And that's when we need to have a lot more talk therapy because we have to help them even to identify what some of their thoughts are. But with young children, you will often hear, “no, I'm scared,” or “I hate that,” or “It's not fair.” And sometimes those are anxious anticipatory type thoughts that kids are expressing. Anything that you would add?

[00:05:26.120] - Rebekah Bryson

Yeah, “I don't want to,” or “I don't like to go.” And even going back to the persistent anxiety with talking about the oppositional behavior, thinking of the younger children, we don't see a two-year-old who's going to say, “mommy, I'm nervous,” or, “Daddy, I don't want to go.” But we might notice a child who throws themselves on the floor and doesn't want to participate in something or refuses to stand up and wave “hi” to grandma or grandpa or something like that.

[00:05:54.310] – Dr. Amy Lee

I think also when we see that in a two- to three-year-old, we get it. We understand what it is. “Oh, they've never done this before.” “This is a new situation.” “Oh, they're nervous or uncomfortable.” We tend to kind of be able to recognize it. When you have a six-year-old who does the same thing, right? or an eight-year-old who does the same thing, we can sort of make assumptions about what that behavior is about. And part of our goal today would be to help folks recognize, “oh, maybe that's sort of like a can't moment,” not a “won't” moment, and something that we would sort of help kids learn another way.

[00:06:36.530] - Rebekah Bryson

So, some signs that you can look at to recognize anxiety in your child... We often think of just the “worryiness” or the nervousness that we might see on the outside, the shaking or not wanting to do things, but anxiety can go much deeper than that -- just like Doctor Lee was talking about. So, declining invitations to go places, and especially as your children get older, you may not know that they're being invited to go to a friend's house or invited to hang out after school, and they may be declining them and

then you're finding out later from maybe another family, "oh yeah, we invited your child and they didn't want to come."

So declining invitations to go places, staying in their room when family or friends are over. And this can go to younger children hiding out in a playroom, to older children just wanting to be on their phone in another room instead of engaging with any type of family members. Refusing to go places with their friends or family -- so this I hear a lot as far as not wanting to even go to the store, not wanting to go out to eat, not wanting to go out into the community, to a family festival. They much rather just stay at home.

And a lot of that is that social anxiety, that anticipation of, "but what if something happens?" "What if I see somebody?" "What if it's loud?" "What if I don't like something?" "What if something feels funny?"

Hiding behind caregiver's back. You can think of definitely your younger children, those younger stages, the toddler hiding behind your caregiver's legs -- but also we do see that sometimes even in the older children.

Looking to parents to answer. We see this again all the way up into high schoolers. I see that a lot in session. You'll ask a child a question and they look to the parents, waiting for the parent to answer. That's definitely a key sign that maybe some of that social anxiety is occurring.

Irritability and tantrums. So that anger coming out instead of just that anxiety and that worry, but actually seeing some of that anger. That displacement of "I don't know how to respond to this, I don't know what this is, I don't know what I'm feeling right now." And so it comes out as that anger.

And then the somatic or body complaints. So, we hear a lot of stomachaches, lots of stomachaches, lots of my heart hurts, my chest hurts, headaches, some bathroom issues. So all the things in the somatic complaints that can come up with anxiety due to that mind body connection.

So you might have a handout. Some of you, I think, received it. We did run out of a couple. So if you can just take a look at your handout and we are going to be a little interactive today. So in the handout that you have in front of you, the colored one with the dog and the human, you can shout it out if you want, but what do you see? What do you notice in this picture?

I think many of us here are on the left. We're going to get you to try to be on the right? Absolutely. What is the left look like? What is going on in that picture?

Yes. The have dos, the to-do list, overwhelmed, absolute chaos -- I think I heard. Absolutely. So here's a human. He's walking in the park with this dog, and he's just thinking of everything but the trees and the sunshine and what he should be.

And here's the dog. He's with this human, and he's like, living my best life. This is wonderful. I see the trees and I'm sniffing everything. But meanwhile, the human is not present because exactly what you said, there's everything else going on in his mind.

This is parenthood, but this is also anxiety. And this is what some of our children can be feeling, thinking about going on without the ability to be able to share that or be able to discuss that with anyone.

So if you think of school, right? If that is your child sitting there and they're thinking of school, what might be in that bubble, what might be in your child's bubble for school -- if you have a school-age child? What do you think?

Oh, recess. Absolutely. Homework. What else? Talking to teachers. Yeah. Interacting with peers. Tests. Yeah. What's going to happen? Who's going to be my friend today? I was just going to say that one. Yeah, that's a huge one.

The other thing is lunchtime. I work in a high school now, so lunchtime is always a huge one for kids.

[00:10:38.880] – Dr. Amy Lee

One of the biggest things for high schoolers, I think. Who's in my lunch? Yeah.

[00:10:42.230] - Rebekah Bryson

And all those things, everything that you all mentioned. So, if we expect a child to pay attention during math class and understand addition and subtraction and multiplication, but all of this is going on in their minds -- we want them to be the dog, right? We want the dog to be those math facts and listening to their teacher, but they can't because all these other things are going on in their mind.

And that's also where you hear words of "do they have an attention issue?" "Do they have focus difficulties?" "They're just not paying attention." "They're not listening." "They're not doing their hardest." But that can definitely be some of that anxiety.

So a way to help your child calm their mind and calm some of those things that are going on is to work on taking those deep breaths and noticing things in the present. So before you just walk away and say, "deep breaths don't work, my child says deep breaths don't work," we're going to make you all practice it. So when you go home and you talk to your child, you can really teach them how to do it. So what I'd like you all to do is kind of get comfortable in your chair.

So go ahead if you can put your things on the side. You can either put your feet flat on the ground, if you'd like, or just kind of crossed in front of you -- whatever's most comfortable. But try to at least uncross them so they're not crisscrossed.

So, what I'd like you to do is first take one hand, put it on your chest and one hand on your belly. And without any instruction I'd like you all just to take a big deep breath.

Now without a show of hands, think to yourself, did your top hand move or did your bottom hand move? What do you think?

So if you take a deep breath...

Bottom, okay, did anyone have their top hand move? And that's okay, you're not in trouble if you did.

So oftentimes when we talk to children and we ask them to take a deep breath, they do exactly what the doctor tells them to do. They take a deep breath, and they go like this. *(takes sharp, deep breath and breathes out quickly)*

Well I will tell you this, if your child continues to take deep breaths like this *(takes sharp, deep breaths and breathes out quickly)*, two things are going to happen. They're probably going to get really dizzy and likely pass out, which then is going to increase the anxiety that is going on in their brain. So, it's not going to be helpful.

So, when we talk about deep breaths, what we're focusing on is really slow belly breath. So, taking the deep breaths, closing your mouth, which I can't do because I'm talking right now, but what we want to do is push the air up through the nose, push it kind of back through your throat and down into your belly. And so when you take that deep breath *(breathes deeply)*, your bottom hand is actually the one moving.

So, we're actually getting the air all the way down into the diaphragm. So, try doing it again. See if you can. Try to take that deep breath.

Did anyone notice a difference from their top hand to their bottom hand? So, when you actually pay attention to your breathing -- so of course if a child is having a panic attack and we say take a deep breath, going to go *(gasps air)* "I can't!" That might not be the best time to practice some deep breathing exercises because it may actually be physically challenging for them to do that. But if you have a child who is going through some of those worried thoughts or they're starting to kind of do that spiral or rumination, this is a great time. They can lay on their back if they need to -- rumination means those thoughts kind of going and going -- but they can lay on their back if they need to. But really teaching them that slow belly breath. So really working through the nose.

The other thing that you can practice doing and just for sake of time, we won't do it all the way but practicing counting to five or if you have a younger child counting to three. So "in-2-3-4-5" and "out-2-3-4-5." And doing it nice and slow because the other thing that happens when you ask a child to take a deep breath, they go *(fast, deep breathing)* and again, if we do it really fast, it's really just going to continue to increase the heart rate instead of slowing the heart rate down.

So, you can always use your hand as a trick. I always tell kids for the most part, our hands always go with us. So, breathing in-2-3-4-5 down. And then you can use the star for breathing in and up. Not that fast, obviously, but counting to five. So that is a great trick to help your child with calming the mind because it's giving their brain something else to focus on as well as helping the mind body connection of taking that heartbeat or taking that heart rate and bringing it down. Anything you want to add?

[00:15:08.080] – Dr. Amy Lee

Some yes. So, a few other things. I'll just emphasize what Becca was saying. We often recommend practicing belly breath and simple body relaxation at stress free times. Make it a routine, sort of like a bedtime routine. "Let's do our belly breath" as after story or before and after story or something like that. If you've got an older kid, it might be maybe they identify some music they like and encourage them. "Why don't you listen to music for a few minutes and do some of that belly breathing before you go to sleep tonight?" Sort of some ways to practice.

Another great time to practice when there can be a little less going on might be on the way to something where we're in the car. A parent can say, "I'm going to practice some belly breaths. You want to do it?" And then a kid can be doing it and a parent can be doing it. And we can also practice that mindfulness activity of "let's look out the window and see and watch what goes by or see if we can see some interesting trees" or you can choose something -- but it's trying to get in the moment and let's just practice the breathing -- without a goal, there's no goal. We're not trying to calm down. We're not trying to do anything. We're just learning about it.

[00:16:34.830] - Rebekah Bryson

And then another activity kind of to Dr. Lee's point of noticing things in the moment would be some grounding techniques. So, the way we focus on grounding techniques is teaching your children just that, to be in the present to bring them down. Because oftentimes when we're thinking of anxiety, it's what's in their head that's kind of stirring them up. So those thoughts or what might happen or the loud noises or the way something feels or the way something might happen to be. So again, just bringing them down to what's going on right now in the moment.

So I will say to kids, "okay, it's September 20 at 07:00 and I'm going to have you all do this." So right now I want you to look around this room and look at find five things that you can see. *(pause)*

Okay, now I want you to look around and say four things that you can hear. *(pause)*

And three things that you can touch. Go ahead and touch them. *(pause)*

Then two things that you can smell. *(pause)*

And one thing that you can taste. *(pause)*

So, a couple of reasons that that is helpful for children -- for children, adolescents. This is a coping skill I use a lot in my own life is for a couple of different reasons.

One, it's a distraction. So, it's getting you away from whatever's going on in your brain and whatever is going on in your head or your body, and it's bringing you your attention to something else. So if you're paying attention to things that you can see in the room or what you can taste or smell, you're not necessarily paying attention to those forefront thoughts or those thoughts that are coming through.

Another thing that it does is it allows them to just bring themselves back down to maybe have those conversations with you as a parent or a caregiver where they are much more rational or able to discuss, "okay, what's going to happen or what might happen, what might not happen," and help them calm the anxiety without being in a panic state.

So, this is something especially if you have a child who does go kind of spirals or goes anxious very quick into those panicky kind of feelings or social anxiety to practice these things before you're going. And I keep doing it over and over again. "Okay, keep telling me what's something else you can see, what are five more things you can see?" And that's also a great way then to bring them to that mindfulness of what's in their surroundings and what's around them.

And then coming up with thought helpers. So, these can be called a variety of different things. Sometimes you might hear "worry erasers," "thought helpers," or "coping thoughts." People call them different things but helping them change the way that their negative thought is really into something more helpful. It doesn't necessarily -- sometimes you hear "positive thinking," "positive thoughts" -- sometimes that's not always the case or sometimes that's not always helpful. So just a coping thought or a helpful thought. So "I can do this," "I can get used to this." "New things make me uncomfortable, but they usually work out."

So, these are just some few examples. So, as you're looking at this or as you look at this later, thinking about what are some negative thoughts that your child might come up with or nervous thoughts and seeing if you can provide them with some more helpful coping thoughts.

[00:19:48.470] – Dr. Amy Lee

One other -- so a couple of other -- I like to help kids with rewriting because we also might call them "rewrite," "rewriting," those -- sort of -- "automatic tracks" or thoughts. It needs to be something we can believe in, right? So, a child needs to believe. "Yeah, that's true most of the time," right? So, we don't want to say something like "that will never happen" when kids are. We also want to be clear that we're not just trying to make it all better, we're trying to say something we can accept that's also true or something that we can kind of work with.

[00:20:34.630] - Rebekah Bryson

I hear a lot families might say, “well, of course people want to be your friends,” or “everybody would want to be your friend.” And of course, as a parent or as a caregiver, we want to believe that, and we want to say that to our children. But to a child who might be struggling with social anxiety or who might really be struggling to make friends, that's not going to be a helpful thought for them. That's not going to be a good coping thought because they may know that that isn't necessarily true. So, saying something instead of “it might be hard to make friends, but I bet there's one person that you can talk to today.” That's a pretty logical thought. That's a pretty helpful thought.

[00:21:09.430] – Dr. Amy Lee

Okay, this is one of my favorite topics, this idea of how do we then -- all right -- so we're accepting anxiety comes... it can be present. We might even feel comfortable with our kids and being able to say, “yes, we can try to relax through this,” or “we can calm our bodies,” or “we actually know some ways to think about this a different way or to change what we're thinking or to distract.” Then comes like “**the day**” when you have to go do something that's really difficult. And this is, I think, the other reason that we often hear from parents, “well, that's nice, but then we had to go, and it doesn't work.”

What we've do try to teach folks -- and kids too -- so we have visuals like this to help kids understand that the only way through this difficult situation and this discomfort is actually through it. And so, we use the concept of the “worry hill.” So, this is kind of like a fun version or a kid-friendly version, and then you have some other handouts that I'm going to show you in a minute. But I often start with kids in groups or individually by saying what's going on in this picture?

So just like before, shout out some what do you think is happening in this picture?

Okay, so we've got a kid beginning to approach something, climb up a hill of something. It is getting worse. Yes. And we get to the top and that's as bad as it gets. Okay, so just remember that that's as bad as it gets at the top and then what happens?

Yes. Okay. I'll sometimes say to kids, that's the escape hatch, right? And if you take the escape hatch, it seems like the great choice because you feel better quick. Right? But when you get to the bottom, you're stuck back where you started, right? You're back at the beginning.

But if you take the slower decline on the other side -- yeah. I mean, you don't feel better fast, but how do you feel at the end? Yes. And so many times we can talk to kids about that experience of -- and most kids will already know. They already have had experience. “Oh, yeah, that time that I thought I couldn't,” I don't know, “learn how to swim and now I can swim.” Right. “Or the first time I went on a roller coaster.”

So many kids will have experience where their anxiety doesn't touch them as much or they've overcome something and they really understand. “Yeah, that's what happens. You just can do that once you try it.” So, what we try to teach is this idea of then there's ways to get through things that are difficult. And our goal is always to go over the worry hill.

And the other thing that we talk with kids about, so that's what you've got a page that looks like this? So this is kind of the grown up version. I mean, kids can understand this as well, but this has a little bit more of the words -- has the idea of exposure, which is on this side. The climbing up the hill is like, "okay, here we go, we're going to try this out." That's what we call an "exposure." And at the top is what we call -- is sort of what we're thinking about is the "panic peak". And I like for kids -- I'll sometimes do this when I'm showing this to kids too, -- I'll cover up the escape hatch part and say, "look at how much is left. You've already done all that work," right?

And if we can kind of break it down like that and we say "we just got to get over that little tiny bit." And because most of us, adults included, when we're facing something challenging, it feels as if it's going to just go like that forever. Right?

But our nervous systems are not built like that. Our nervous systems fire messages and burn out. It peaks and it just automatically -- if we just stood there and did nothing, it would decline -- gradually. Right? That's why when people have panic attacks, if they're still and they wait, they eventually get better. Okay? So this just happens naturally. We're built this way. It's how we recover.

On the other side of the hill, when I ask kids, "so what's going on? Why does that happen -- that we can do something difficult and then get to the other side and feel like we managed it?" What do you think kids understand and are able to say?

I'll give another central nervous system example. When we jump in a swimming pool and it's the same process -- we jump in a swimming pool, how does it typically feel when you first dip a toe in?

"Cold." Okay.

If you did that and then came back out okay? and you did it again, how would it feel? Cold. If you did that, got in and did this for a few minutes? How would it feel? Swam around a little bit, moved around?

"Acclimated," I heard. What did somebody else say?

"Adjusted."

Kids will say, "you get used to it." Right! Okay. And I'll even be a little ridiculous -- "did somebody turn up the temperature in the pool? Like, what happened?" And they get it. They know you get used to it.

So that's the same thing. When we're asking kids to face challenges, we're asking them to trust us and trust themselves that they can get used to it. Right? We're not telling them they have to do it perfectly. We're not telling them that they have to do all of it. What we're telling them is we want you to agree to go over the worry hill until you get used to that, and then we'll try another time, and you'll get used to that.

And then the other you'll see this one in your handouts. Practice makes it easier. And that's just a graphic to illustrate what happens with repeat practice. And so then we're going to do a little exercise. I'm like, how do you do that with kids around? Something like going to an activity, going to school, taking timed math tests -- not my favorite. So, there are ways to break tasks down so that kids get that experience of practice.

The first time over the hill is tough. The next time over the hill for a similar challenge, not so tough. The time after that, less so -- until we habituate to the point that we don't experience much stress or anxiety for that situation at all. Okay?

How many folks have seen that with their kids or experienced it personally? First time doing something? Lots of challenges with anxiety or behavior, but after repeated exposure, the reaction is smaller, the anticipation is shorter, not so far ahead. And then we seem to sort of gradually be able to do it. Folks seen that, experienced it yourself, right? We've all experienced this. That's the idea of mastery, right? That's how we learn.

[00:29:05.480] - Rebekah Bryson

One thing that is challenging with that, and we're going to get into some exposure in a second -- but for our children -- so think of a child who has to go somewhere once a week, whether, let's say it's a dance class or OT or an appointment or whatever.

[00:29:16.350] – Dr. Amy Lee

Doctors once a year.

[00:29:17.860] - Rebekah Bryson

Once a year, yeah.

[00:29:18.700] – Dr. Amy Lee

Right?

[00:29:19.000] - Rebekah Bryson

So, they're not getting enough practice. Even if it's once a week, even if it's twice a week, it's not enough practice. So, every time they do it, they're right there at the bottom of the hill. So even though they've gotten to the other side after that, they don't have enough memory or enough realization to think, "oh, yeah, last time I did this, a week ago, two weeks ago, a month ago, a year ago, I was, okay," so it's not enough practice. So even though in our mind as a caregiver, we're like, well, "you go to the doctors every year," Or "you go once a month to OT" or, "oh, you're used to Aunt Susie already." Well, in his mind, his

or her mind, they're not seeing them every single day enough to make that pattern to that habituation, to decrease it.

Another thing I did want to point out with this, because this question came up, so I will address it in a little bit. But that school anxiety, right? That school avoidance. Anytime that child is allowed to stay home or ends up staying home or gets taken out of school due to somatic complaints or stomach aches, that's that falling down, that's that avoidance.

So now every time they have to re-attend school, go back to school, that hill is going to feel just as big, if not sometimes bigger, because now you added missed schoolwork, peers questioning them, "well, where were you? Why weren't you here? Why did you go home?" So anytime you have those school avoidance concerns, sometimes that hill can just get bigger and bigger because we're constantly falling down.

[00:30:39.790] – Dr. Amy Lee

Okay, so this idea of how do you prepare -- how do you practice? Start out by just preparing kids ahead of time with information -- just sharing facts. That is, in fact, a trip over the worry hill. So, when we tell kids about something and we review the information, where we're doing sort of imaginal exposure, we're practicing thinking about anticipating and imagining the situation. And then we might say, "sorry, we --" might say, "but we can think about it next week," right? So, we can help them think about it, have that exposure, and then we'll set it aside.

So, when we think about the idea of practice, social stories is another example of that, when we sort of are rehearsing or reviewing what to expect, we are providing an exposure and a practice.

Another thing that we can do before trying a new activity -- as an example -- this wouldn't be what you would have to do -- but this could be a way to provide practice: using the Internet or a brochure or information to see pictures of this place you might be going and what other children look like doing activities there.

When we're providing information and setting the scene ahead of time, it's good to ask kids open ended questions. We don't want to say, "are you scared? Are you nervous?" Right? Because if they're not, we don't want to be suggesting they should be, right? But we could ask open end questions like, "how are you feeling about it? Do you have any questions?" Or "are you having any ideas about all of this that I'm showing you?" Right. So, kind of questions that don't even suggest that worry should be the thoughts, but we just want to learn the nature of the thoughts, the questions, the ideas. Okay?

[00:32:47.270] - Rebekah Bryson

With the idea of using the Internet to see pictures because you had brought up kind of like the fire alarms and those loud noises, it's okay to talk about all those five senses. What's something that they might hear while they're there? What kind of noises might they experience? If we're going to go to a jump zone, you

might hear music, you might hear screeching, what the fire alarm might sound with and practice that at home. Take some instruments and bang loudly. Really all that is, is that desensitization. So really getting them used to what things they might see, what they might hear, what it might feel like. If, you know, you're going to an aunt or uncle or a family member's house who has a certain smell in their house because of food they cook, what is that going to look like, what is that going to feel like or touch? So, any type of things that you could do to help prepare your child for those events. And again, depending on your child's level of anxiety, the more you're doing it, the more they can get used to it.

[00:33:39.430] – Dr. Amy Lee

And you're giving examples that are really nice for like if a child -- we have a pretty clear sense -- they're sensitive to smell or they're anxious about alarms or seeing dogs, right? Sometimes we can do really focused exposures using pictures, sounds on these little devices that we all carry around. There's a lot of good ways to practice with kids, like, "let's look at some of those" or "let's see what some different kinds sound like" so that we're sort of, in a safe way, providing practice with knowing some things about that.

All right, so the next thing we wanted to talk about was taking small steps to ease in. So we started talking about thinking about it, talking about it, but we can also kind of set it up in a way that we're actually practicing to engage in things more actively. So you can practice small parts of the experience, review past -- we've talked about this. And then I want to emphasize -- we want to emphasize **any** type of practice, any type of trying is a success. So, kids don't necessarily have to accomplish the entire experience to have been successful with facing their anxiety. So, the next one, I think, is the latter.

[00:35:06.420] - Rebekah Bryson

So, I would think of when a kid that goes to a doctor's and they do fairly well sitting through -- they walk into the door and then they sit in the waiting room, and then they talk to the nurse or the medical assistant. Then they sit and maybe they even make a little bit of eye contact with the doctor, and then they even maybe get up on the exam table. But then as soon as the doctor walks over and puts the stethoscope on their chest, then they start to freak out.

But they did all of that already. They conquered so many fears by just walking into the medical building, sitting in the waiting room, waiting, experiencing different smells and sounds and sights and then that anticipation of what's the doctor going to do. So by the time they've gotten to that stethoscope, or even worse -- the shot, they've already gotten through so much.

That visit was not a failure by any means. That child did not do poorly. The child actually did really, really well. They just got to the point where that peak hit and they didn't know what else they could do. So treating that as still the doctor was very successful.

[00:35:59.980] - Dr. Amy Lee

"You did it." Yeah, for sure.

So, this is just an option. And I made up an imaginary one. You all have little -- or if you don't, you will be getting some little pieces of paper. We'd like for you to think of a situation or a challenge that you are facing with your child. And we'd like you to think about "what is that challenge?" So, for example, I have a kid who is -- I made up an imaginary set of steps. A child going to an activity for the first time, like a new craft class. Okay. In a new setting. All right. So, this is my imagined activity, and I've got a kid who might be avoidant and unsure about going to this new place, but they love arts and craft. Okay. So, a kid who wants to do it, but the experience of it, I know it's going to be a challenge, and I've got a couple of weeks to get them ready.

Again, you can use a ladder, a picture of a ladder to show a child. Well, we can get ready to get there and we'll try some different things. You also don't need to have that actual picture. We use this a lot in therapy because it helps us to teach. But you can actually do this in different ways at home. Like, "let's think about some steps along the way we can do to get ready."

So, at the top of the ladder is that activity that you're thinking about. In my case, it's an arts and crafts class. Right. So that's step five on my ladder. Go to arts and crafts class. Okay. But then I wrote down other things on these pieces of paper that could be intermediate steps. And with a child, you can just sort of generate those ideas or you can yourself say, "well, I'm going to see if we can bite off this little piece of this experience."

So, I'll give you some examples of things that could go on different places on the steps. "Visit the week before" -- that could be somewhere. I'm not going to put them in order yet. "Use a handoff person," like some safe person that we know who will take them in. "Watch the activity, arrive early to meet and greet the teacher." Okay? And "learn about the program or the class, talk about it."

Okay. So, what do you think is the easiest of the things that I just mentioned? Anybody?

Learning. Right. Learning, most likely. We do this in groups with kids sometimes, and I'm always really interested in what as a consensus they decide is the easiest. So that's another thing to keep in mind. You might think something is easy -- a child might have a different opinion. So, you might brainstorm a few ideas and put them on the pieces of paper and say, "what do you want to try first?" So that's a way up a ladder -- see what a kid is ready to try or what they need.

Okay. And then we're going to say, "learning about it." Then we're going to say, "maybe we'll drive by the building or walk up and look around. Visit the week before." I'll put that at two. Maybe we're going to "arrive early and meet and greet the teacher," right? We'll get there a little early and get acclimated. We're going to habituate. So that might be three. Maybe the first day "we're just watching," right? And that might be something you plan or decide. But if you've got a really hesitant kid, you might say, "let's just go. We'll just go and I'll stay with you and we'll just watch."

And you don't have to change the expectations because if we've done that, that's our success for the day, right? We leave. But we did it. We did what we said we were going to do and then the next time we can change to maybe we use a handoff person and we go to the class. Okay? So, the way to climb up the ladder can be very individualized and it can be something that you're creating as you go with your child too.

[00:40:17.010] - Rebekah Bryson

And one thing that's really neat to ask the kids for -- a number. So, once you've kind of established what that five is going to be going back and saying, what do you think you can do, but might be a little hard. And it's really interesting. I mean, I've done this with the really young children and they're very insightful and they'll say, "well, I know I can do this because I've done it before," or "I think I could do this, it might be kind of hard." We're like, "okay, that's great, let's put that at step one." Because again, we don't want to set step one is something that already feels at the top of the hill because then it's going to be really hard to keep climbing. So you want to have something that is pretty successful for them to get to so they feel like they can do it, so that it's more motivating to keep going.

[00:40:53.900] – Dr. Amy Lee

Another important point from what you just said is -- does anyone have any thoughts about why we don't want it to be too easy?

"They're not practicing that." (*audience response*)

Yes, they're not practicing facing the discomfort, right. So, facing that (scared noise) a little bit is actually sort of key for reducing anxiety, right. We have to jump in the cold pool to habituate, right? So, we don't want to overwhelm because then we can't get used to it. But we do want to feel a little nudge of that and kids are pretty good at telling us "that would be too much," right? Or "that would be easy." Right? And we want to pick something kind of in between. So, it's very individual and it's also like something you might negotiate on the spot. You might have agreed that we're going to do something, and then the child might freeze, and you might say, "well, all right, let's just stay here then and watch for five more minutes." That's a success. Okay?

[00:41:58.410] - Rebekah Bryson

And when you see that anxiety scale, it could be looked -- it's different for everyone, but sometimes I'll have kids who number one will be a nine or ten, because that is the first step that they have to take to the goal. And you would think logically that it would be the four or five, the steps four or five, that would be that higher number of anxiety. But oftentimes, at least in my experience, when working with children, is one or two on the steps of the ladder is a higher anxiety. And then as they work their way up the anxiety, as we're talking about it, or as we've gone through it for a couple of weeks and we review it, the numbers

actually do go down because, again, they're habituating. They're noticing like, "oh, wait a minute, I thought that was going to be really hard. But it actually is getting easier as they get closer."

[00:42:37.550] – Dr. Amy Lee

At the start of your ladder, what's at the top would be a ten, right? Just to be clear, but their overall assessment of how challenging this process would be -- I've had kids line up a series of steps, and after one or two, they jump to five, okay? Because they're, "oh, I can do this now."

So, we kind of went over how to do ladders. So, we gave you some pieces of paper because we want you to be able it's okay if you don't fill them in now, but you could use it to jot down some ideas for brainstorming. But also, like, you have a little something if you had something you were doing with your kid, you have pieces of paper. And the nice thing about -- I use sticky notes, sometimes -- we just brainstorm and we flip them and put them all over the paper and like -- I mean -- all over the table -- and "which one's easiest, which one's hardest?" -- and we start to try to put them in order. And it's a really good way for kids to see, "oh, there are actually things I can do here." So that's why we gave you the paper, too.

[00:43:42.730] - Rebekah Bryson

And the biggest point, I think, too, is that there's no deadlines. Oftentimes we think like, well, "you have to do this in a week," or "you have to do this because we have a party in a month." There's no deadlines. You move on to the next step when the process becomes easier. So, when you're noticing the anxiety for your child gets easier, in that step, then you talk to your child about moving on to the next step. So one step could take two months and one step could take a day. So, there's no deadline.

[00:44:07.580] - Dr. Amy Lee

I think they're going to start playing the Oscar music. *(laughing)*

[00:44:09.130] - Rebekah Bryson

I know. I think so. But we're almost done! *(laughing)*

[00:44:11.250] - Dr. Amy Lee

We're going to just go through a couple more things and then we'll take all the questions.

"What's a handoff person?" *(audience question)*

[00:44:17.790] - Rebekah Bryson

If you're going to an activity or in school, someone who is a safe person that your child can meet with – meet you at the door to drop off to that they know, or that they could be a safe person to connect with.

So, these are just great ways to practice with your child. Some social communication, especially if you have a child who is socially anxious.

So, practicing eye contact. Oftentimes we see head down role playing with them at home. Some of that eye contact, looking people in the eye. It doesn't have to be staring, it could just be glancing.

Talking about empathy. So really talking about “how might somebody else feel if you do that?” or “how might somebody else feel if you don't share with them or you don't include them in that conversation?”

Practice back and forth conversation. This is absolutely something that we have seen falling off with children -- that back and forth, asking questions, making comments, statements. And this is great. Just role playing and utilizing, just observing in the home during dinner time, during family meals, driving in the car instead of just listening to music or letting kids be on devices. Having that back-and-forth conversation, having them ask you about your day, not just you asking about theirs.

Teaching listening skills. I use, that the Two Truths and a Lie. I don't know if you've ever played that before. I do this a lot with kids, and we practice Two Truths and a Lie. And it's a great way to see if they're really listening to you, because not only do they have to hear what you're saying, but then they have to think about it and really dive deep into what I said to decide which one is my lie or which one is my truth. So just a fun way to practice some of those listening skills that they're listening to those conversations.

Practice turn taking. And this isn't just gameplay turn taking. This is also turn taking in everyday situations with conversations, with activities, actual sports games, so that they can really understand that idea of, “okay, I give and I get” in situations.

Social stories like you brought up, those are great ways to practice and get people or get individuals and their children more comfortable with situations. “What does it look like when I talk to a friend? What does it look like if a friend doesn't agree with me? What does it look like if a friend doesn't include me? And what can I do about that?” And social stories are not just for young kids. We use them all the way up into the young teen ages as well.

Teaching personal space, whether you want to use the bubble, whether you want to use a hula hoop, but just teaching those personal boundaries. Again, when we're talking with someone, we don't want to be really up close with them, but we also don't want to be really far away where they can't hear us. So again, just role modeling all of those behaviors for your children.

And then this one is -- I always like this one. I have a six-year-old and I sit and watch TV shows with her and then I pause them. I make her talk about what's going on and “why do you think that person felt that

way? Or why did she say that? Do you think that was appropriate?" Or "wow, that was really disrespectful. Why do you think it's disrespectful?"

Now, of course, that takes time and energy with your child and sometimes screens are just easier to have them do on their own. But again, it's just a great real-life situation to be able to bring that situation into your home and teach your child how to respond if those were happening to them.

So, these are some of those ways that we think as parents and caregivers might be helpful but may not be as helpful. So, answering or talking for your child. So, if your child is looking to you at the doctor's office or with a teacher or with grandma or grandparents or aunts or uncle. Really trying to encourage them. Even if it's just, "no thank you." Even if it's, "I don't know." At least having them try to talk for themselves in any way, shape or form.

[00:47:39.760] – Dr. Amy Lee

I want to say some kids have what we call selective mutism and have trouble actually speaking. That can be a way social anxiety shows up. You don't want to pressure a child with selective mutism to speak. But we do want to treat nods, gestures as successes and as communication.

[00:48:02.070] - Rebekah Bryson

Even if they're saying "no," okay, that's their way of answering. You don't need to answer then on top of it, right?

Preventing or avoiding stressful to reducing anxiety. I don't know why, but I just read there. *(laughs)*

But just any of those "avoidance situations." So if your child is calling you or saying, I don't want to go to school, or no, I don't want to go to that situation, there are ways, just like we taught you, that you can encourage them to go without just always saying, "okay, well, we're just going to stay home," because the more we avoid, the more we know that anxiety gets worse.

Telling them, "don't be nervous" or "it's going to be okay," well, they're nervous. It's going to be hard, and that's okay. They're allowed to have those feelings. So by downplaying, it can just make them feel more nervous because they're feeling like they're not being heard or understood.

Forcing them and hoping for the best. I've had parents before, "well I just dropped them off and figured it would get better." Well, it's probably not. That probably just means it's a little worse. *(laughing)* So there are definitely ways to help them if they're feeling that that's going to be hard versus just saying like, "okay, bye, have a good day."

Assuming they've done it before, so it's going to be okay again, that practice, that exposure. So maybe the doctor's office or the dentist was great last year, so we just assume it's going to be okay this year. It's

a new year, it's a new situation and it's always going to be a little bit different. So that's why that exposure and practicing is really important.

And then just hoping they'll grow out of it. I hear that one a lot. "They're twelve and I just figured they grow out of it." Well absolutely, we all hope for that, but sometimes it actually is just being channeled into other behaviors and so we want to make sure we're addressing it as early as we can.

These are some social skills groups. I did try to contact as many of these people as possible within just like the Northeast Ohio area. But sometimes groups pop up, sometimes they fall off. So, if you are looking for your child to have some resources, these are some great ones.

You could always work with your schools to do lunch bunches where they meet with the school counselor or a speech therapist at school. So those are some options as well if some of these social skill groups don't work out.

Some of these are insurance covered, some of them are not. But you can also reach out to Nicole or Candy, I bet, and I bet -- I actually looked at your website as well (*laughing*). Some of these are straight from Connecting for Kids -- and then just some podcasts. Just because sometimes I think books are hard to read. I mean, books are wonderful and there's lots of wonderful books out there, but sometimes I think life gets ahead of us and it's hard to sit down and read. So, I'm a podcast person. These are some really great podcasts as well.