



## THE GROWING BRAIN

EPISODE 18: Helping Parents Manage Anxiety in Children, Part 2

Guest: Gaby Satarino, M.A, LPC-S

Release Date: May 11, 2020

This episode features therapist Gaby Satarino who dives into the mental health aspect of anxiety. What does social anxiety look like in children and teens, what is behind the behavior, and what can we do about it?

**Welcome to The Growing Brain, a social emotional health podcast. I am Maureen Fernandez with Momentous Institute, a nonprofit in Dallas, Texas, dedicated to all things, social emotional health. Welcome to Season Two, where we're diving deeper into some of the most challenging aspects of parenting - dating, sleep, ADHD, anxiety, and so much more on this season of The Growing Brain. Thank you for joining us.**

Maureen *Welcome back to The Growing Brain podcast. Our guest today is Gaby Satarino. Gaby is a bilingual therapist with us at Momentous Institute, and she has spent the last 20 years working in individual, couples and family therapy, specializing a lot in depression and anxiety, which is of course all we're talking about today.*

*This episode is part two on an episode about parenting children with anxiety. So in our last episode, we spoke with a pediatrician about the medical aspects of anxiety. We talked about medication, what to pay attention to, prevention techniques. If you haven't listened to that episode, I highly recommend you go back and listen to it. You can listen to them in any order, but I would recommend listening to both to get really holistic view of this important conversation. And we talked a lot in that episode about how there's an important role for the pediatrician and, and there's an important role for the mental health side of this conversation. And so that's what we're diving into today with Gaby. Thank you so much for being here, Gaby.*

Gaby *Hi everyone. Thank you so much for having us.*

Maureen *And I'm really excited to dive into this because in the last episode, we talked a lot about how there are things that your pediatrician can help with, there are screeners they can do. There are conversations you can have about sleep and about some of the important aspects that feed into anxiety. And he mentioned several times that... that there's more to it than just the physiological and the medical side of it that so much of the anxiety conversation is something that you should talk to with a mental health professional. So I'm excited to sort of dive into what that looks like.*

Gaby *Yeah. Thank you.*

Maureen *So I want to start with the same kind of question I asked in the last episode, which is what are you seeing in your work as it relates to anxiety?*

Gaby I think one of the things that's close to my heart is social anxiety also known as social phobia. And one of the reasons why it's so close to my heart is because it often gets overlooked. Uh, it often gets overlooked in an undiagnosed or underdiagnosed by both mental health providers and pediatricians and mental and medical providers. And so it's so important to, my hope for today is to increase our awareness of what is social anxiety disorder. How can we identify it? And most importantly, how can we get our adolescents, our family members connected with the right help that they need, because the good news is that social anxiety, the prognosis for it is, is that it's very treatable. Um, and a lot of people think that they're just born this way or they have just always been this way and they just have to suffer with it. But the truth is, is that the good news is that they, once it gets diagnosed correctly, they can take treatment and we've seen very positive outcomes.

Maureen *Nice. So let's talk a little bit about social anxiety. Can you describe what it is? And I'm curious what the difference is between social anxiety and shyness, for example.*

Gaby That's a great question. And social anxiety disorder can have a characteristic of shyness, but it's not necessarily the same thing. So social anxiety disorder is also called social phobia and it's a medical condition. And here are the big categories. It's intense. It's persistent fear of being watched or judged by other people. And this fear is so intense that it can affect the work, the work, school and the day-to-day activities that the individual wants to carry out. It can make it difficult for the person to make or keep friends and social anxiety doesn't have to stop from them reaching their potential, obviously, but this is something that prevents them significantly from living the kind of life they want to live.

Maureen *So it's when it's, it's sort of when it starts getting in the way that, uh, when the symptoms are intense and sort of get in the way that we would call that a diagnosable, social anxiety.*

Gaby And I think that one of the reasons why it's often under diagnosed or misdiagnosed is because the person, when we think of social anxiety, we think of people who aren't able to be in social places, people who are not able to make friends, people who are not able to speak in public, right. We kind of think that those, they fall into those large categories, but the reality of things is that social anxiety looks very, it comes in different colors and flavors and people who are in social settings can still have social anxiety. Social anxiety has three subtypes. The fear of being judged, the fear of being embarrassed and the, the fear of being criticized and rejected.

- Maureen *That's a helpful way to frame it. That makes that is a distinguisher between shyness or introversion.*
- Gaby Correct. And because they have those three sub sets, they tend to create a world of protection and keeps them from being their maximum potential. So, for example, I've worked, and of course the, the stories are not specifically to one person to protect the confidentiality, but in working with a teenager, you know, I remember sitting across from her and we had been working for several weeks and all of a sudden I hear that she has like this very loud and, and bold voice. And I kind of was taken a little aback by it and I commented and I said, whoa, look at this great big voice you have. And she said, well, this is my voice and it's always been my voice, but I would always try to be quiet and speak soft because I want it to be invisible. So a lot of the times when I'm working with families or with teens, specifically with teens, They create these habits to protect themselves too, as a way to kind of manage their anxiety without realizing what it is. They just kind of see themselves as different as everyone else they get on social media and they say, what's wrong with you when they see pictures of... being posted of having likes of having tons of friends, of traveling, of being part of clubs or activities. They begin to ask themselves what's wrong with me? Why can't I begin or sustain these kinds of friendships or be involved in social activities. And so one of the common threads that we see is that someone who truly has social anxiety will develop these habits of isolation as a way of them kind of coping and managing social anxiety.
- Maureen *Yeah. And that makes sense to me. So we're talking about social anxiety and I know we can spend some more time talking about that, but I'm curious, are there other types of diagnosable anxiety disorders that, that children and teens present with?*
- Gaby Sure. So when we think about anxiety, kind of think of the word anxiety, like an umbrella and underneath that umbrella, there's different specific times kind of like post-traumatic stress, obsessive compulsive, which are some of the ones that are the most common, and social anxiety. So they do share similar characteristics. But the biggest one that differentiates between social anxiety between the other ones is that there's this persistent fear of being judged, rejected, and criticized or embarrassed. And that over time it gets worse.
- Maureen *Yeah, that makes a lot of sense. So let's go back to social anxiety. You're talking about things that I think all of us can relate to on some level, you know, that feeling of being left out or that fear of being criticized, those are things we've all experienced in our lives. And I'm curious what differentiates my experience of maybe fear of public speaking one time versus a child who might have this social anxiety.*
- Gaby Right. So the biggest difference is some of the signs and symptoms of social anxiety is the persistence. It also is accompanied by some physical reactions, for example, blushing, sweating, rapid heartbeat, and when your mind going blank. And most of us, we all fear, so at some level, some public speaking. But

the thing is, is that we are able to confront it. There's a beginning, a middle and an end of these emotions and these feelings and these physical reactions. With somebody who has social anxiety, they continue to have these even after, because they replay it in their mind, the event that caused them, um, anxiety and how they looked in front of the eyes of other people. Um, also they feel nauseous or sick. They have rigid body postures, make low, poor eye contact or speak in a soft voice. Like I was saying, one of my patients, she just wanted to be invisible. Wouldn't speak up in class, would go along with whatever her friends or her, um, peers would say, didn't want to draw any attention to her. Wouldn't wear makeup, in the summer would wear a big jacket to kind of not be seen. And again, all these kinds of things that create barriers to manage their anxiety without realizing that that's what they had. Um, they also find it scary or difficult to be with other people, especially people that they don't know. And they have a hard time talking, even though they wish they knew what they could say. So in adolescents we see that, um, an adolescent with social anxiety can have difficulty even going through the drive-thru or going to a restaurant to order their food. They can have difficulty speaking up for themselves or even making a phone call to a stranger.

And a lot of the times it goes underdiagnosed because as parents or as society, we think, oh, it's just they're adolescents. That's just the way they are. And unfortunately, social anxiety within time not treated it will get worse.

Maureen *So for parents listening who think some of those sound familiar, how do you... I think the big thing you said about the difference being persistent versus temporary, when there's a moment of stress versus kind of ongoing, um, is helpful for parents to think about, but if you're listening and you think that sounds like my child, they're experiencing some of those symptoms, then what, what's the first step that you should...?*

Gaby Yeah. So this is something that they're not growing out of, right. And so I think one of the things is just to understand that, is it, is it a persistent fear? Is it something that over time is getting worse and that you notice that your child's potential isn't being fulfilled because there's something inside of them that is keeping them from moving forward out of the fear of being judged, criticized, rejected, or embarrassed.

Maureen *And while we're talking adolescents here, and I'm wondering, is that really when this peaks or do parents start to see signs in their younger children?*

Gaby Okay. So we know that the onset, there's two groups, about half of the people who aren't shy when they were children, but some time during their adolescent, they became more, self-conscious more self-aware as most of us understand that's what happens during an adolescent it's and it's very appropriate. But for this subset of individuals, this is when social anxiety really wakes up in them. That they weren't shy, shy as children, but during adolescence is when they really start to take on some of these characteristic

and begin to really be afraid, being afraid. And the fear is more persistent of being judged, criticized, rejected, or embarrassed.

And then about the other half, they have always seen themselves as very shy. Right? They talk about the stories that their parents would tell them that when somebody would come visit, they'd run, hide under the bed. They would cry when there were around, cry hysterically or weren't able to handle big crowds. And so these are the children who kind of had this most of it during most of their time. And this is a subset of individuals that will be, what that will have more of the severe social anxiety. So how, how common is it? You know, there's different studies that say different percentages, but the conservative ones say about 5%, which means one in 20. So we think about our children in elementary school, middle school and high school, in any given classroom we could walk in and we can expect that one of those children is getting one of those children is going to have social anxiety.

Maureen *So, you know, those two ways of thinking about it are helpful. I think in the first group, it's really hard, I imagine as a parent to see your child, who didn't used to be shy and who has this big personality then become this way through adolescence. That's I know challenging and the second group feels like it'd be harder to, harder to catch a little bit, because it seems a little more consistent with their personality since adolescent, since childhood.*

Gaby And we know there is a strong genetic component to social anxiety. We know that typically a social anxiety sometimes run in families. You know, nobody really knows why some family members have it and while some others don't, but researchers have found that several parts of the brain are involved with fear and anxiety, right. And some researchers think that the person who has social anxiety is misreading, um, the other's behaviors and that might be playing a role in what causes or make social anxiety worse. So there's been twin studies where they will take identical twins and, who are separated at birth and are raised in different environments and they get studied. Um, they follow these, these twin studies for many, many years, and they realized that both twins, even though there were raised in different environments with different people end up having both social anxiety. So we know that there's a strong genetic component. It's very common that if a child has social anxiety, one of the parents also has some type of anxiety as well.

Maureen *That's so interesting. Um, that, that makes me think about the work that parents have to do to manage their own anxiety. If they have anxiety and then they're raising a child with anxiety. So what thoughts do you have around that aspect of parenting?*

Gaby Yeah, so given that there's a very strong genetic component to it, and we know that an anxious child typically, biologically speaking, will have an anxious parent because of the genetic component. I find that they overcompensate because them as parents remember how hard it was for them to have dealt with their anxiety, that they tend to overprotect. And unfortunately, the

message that is given to the child is it just creates even more anxiety that the world, that people and that themselves can't be trusted. And so these things have to be done for them or with them.

Maureen *So can you give any, can you expand on that? Give us a little bit of an example of what you mean by that.*

Gaby For example, when a child has to, uh, work on a project with a group or has to do, um, present a project in front of the, of the group, in front of the class, the parents will often call or email the teacher and say, please, excuse my child. This is so hard for him. And we really need to take some special considerations. Can you allow my son or my daughter to not participate in this? Or how can they make up this study or this grade in a different way?

Maureen *Mm, so they're protecting them from the experience of having anxiety in the first place.*

Gaby Right. Because they remember how hard it was for them. But unfortunately, the message that gets sent, good intention parents, but the, unfortunately the message that gets sent is that it's a scary place. You're going to be judged. You're going to fail and you can't handle it. So, unfortunately, unintentionally the parents create an environment that accommodates the anxiety.

As you mentioned at Momentous, we do family therapy and because there's such a strong genetic component to it, I, I see very often parents blaming themselves by saying, did I create this anxious-filled child. And now this adolescent, that's almost crippling to the point where they don't want to go to school, to the point where they don't have friends or can't date or live, live a normal quote, unquote teenage life. And often they blame themselves.

The way I respond is by saying. It's nobody's fault. There is a strong genetic component and the good news is that you're in treatment and the sooner we can get treatment, the sooner we can help this person get the help and the relief and become the kind of person that they know they can be inside.

Maureen *I want to kind of lead parents through the journey of receiving mental health support with a child with anxiety. So say you're listening. This sounds familiar. My child, you know, has maybe social anxiety or I'm curious if my child has social anxiety, what's the first step?*

Gaby Yeah. So the first step is at Momentous, we work a lot with, um, family, the family system, and we include as many members of the family as we can, because know, we know that that is as effective. Um, and so when somebody comes into, into therapy, once we, we do our assessment and our evaluation of what's going on, we collaborate with the parents and we explain it.

The first step is to give is to empower them with some information, to teach the child and the parent, what is going on in the brain. A lot of parents come in

with misconception of, my child just isn't motivated. My child is not intelligent. My child is just rebelling. My child just doesn't listen to me. I, they don't trust me. And once we start to unpack these things, we realize that it's just the social anxiety that's popping up, that's presenting itself. And that, uh, they really want to connect with their peers. They really want to connect with their parents. They really want to connect in social activities, but it's just this social anxiety that is the obstacle to get to that connection. So one, parents leave there feeling very relieved.

Maureen *I imagine, yeah.*

Gaby And two, um, the individual, the adolescent in this case. So many times Maureen, um, an adolescent has says, thank you so much for letting me know that it's my brain not knowing how to put on the brakes.

Maureen *Oh, wow. Okay. Tell us a little more about, let's talk about the brain then.*

Gaby Yeah. Let's talk a little bit about the brain. So in terms of what we see in the brain, what we see as that social anxiety disorder and some other anxiety disorders is that the brain looks a little different in regarding of how it's processing involving the emotional processing and the emotional regulation. And so we'll concentrate on the limbic system and that part includes the amygdala and the insula. And so what happens is that with people who have social anxiety, this part of the brain gets over active.

So I'll give you an example. So let's just say we walk in this room and there's a rat. We both would scream, I think. And then would take, so that's our amygdala that would pop up, but our prefrontal cortex would put the break and say, no, it's just a stuffed animal. And so it would calm the amygdala down. With people who have social anxiety, the breaks don't take the first time. So when they see somebody staring at them, they could automatically say, I'm being judged. I'm being rejected. I'm going to be embarrassed. I'm being criticized. And the part of the brain that says no, they're just, they just happen to be looking in your direction, doesn't take the first time. That means the brakes, to stopping the limbic system from being over-activated, it takes them a little bit longer for that to set, to set in.

Maureen *That's so good. That makes so much sense. And I imagine as a teenager suffering with this, that that would be a huge relief to hear that explanation. Nothing wrong with me. It's just the way my brain is.*

Gaby Yeah. So sometimes in my office, I get a, uh, a soda can and I get, um, uh, a cup and we talk about how the limbic system gets over-activated. And then I just start to pour the soda in the, in, in the cup and I don't stop and they're like stop - stop - stop - stop! And it gets overflowed. It overflows. And we talk about how, when we over activate the limbic system, it's very similar to this overflow of emotions and thoughts and racing heart and difficulty

concentrating that once it hits a certain point, it just can't stop, but take control of how you feel, how you think and how you behave.

So, therapy is a lot about that, about helping, helping the individual with anxiety reshape the way they think, the way they feel and the way they act. So they could be more empowered and utilize the prefrontal cortex and, and strengthen that muscle to be able to put the brakes and prevent them from over activating. So then they can give themselves permission to have the connection that they're so wanting to have.

So many times I have heard people say, adolescents say, you know, um, I get criticized. People say I'm snobby. People will say I'm stuck up because I don't speak to anybody in class. But if they only knew that I spent those, those 45 minutes in class thinking about how can I connect with him. How can I connect with her? What could I say? Um, how am I going to sound? And the bell rings, they get up and that person wasn't able to make the connection. So, adolescents who have social anxiety have such a great desire to connect. It's just that their brain is over-activated and creates the psychological stress.

Maureen *Yeah. Yeah.*

Gaby So when we think about the limbic system it's made to protect us, right? Our brain has two big functions - to protect and preserve you. So I'm going to ask you a question, Maureen, can you think of a restaurant? That you used to like, and you used to like, because one day you went there and you got sick.

Maureen *Yeah.*

Gaby Okay. Well, we won't say the name of the restaurant, but have you been back since?

Maureen *No.*

Gaby And so even when you drive by there, you get an emotional and a physical reaction to protect you. So your brain is creating the sensation, that that place is a dangerous place and keeps you from going back there again. So very similar happens with social anxiety that the adolescent is, is reading these cues. That saying that club is potentially dangerous for me. Talking to that person, connecting, um, putting myself in front of a class, it's dangerous that they do everything they can. That's why they have emotional and physical reactions because the brain is trying to connect to, uh, protect them. So the, uh, amygdala is very good because it's, we need for it to activate in times of danger and that's called a physical threat. But what ends up happening is that the mind and the brain have two different functions. The mind will create these thoughts and the brain is like a loyal soldier that would just take orders. So sometimes in therapy, I'll ask somebody to just imagine what it would be like for a snake to kind of be on your cheek or, or a bee, right. And you just have this physical reaction. Now there's no bee, there's no snake, but there's

something called a psychological threat and your mind will send orders to your brain and your brain will react the way it needs to, to protect you.

Maureen *I, you probably saw me just then I tensed up when you were describing that.*

Gaby So did I.

Maureen *The, the stuff about the brain, I think is so powerful and important. And I just think we don't know enough about it. The average person doesn't really understand enough about the brain, but it really depersonalizes this stuff. It really makes it, it's not a character flaw that you have social anxiety, your brain is functioning in this way to protect you. And I imagine just hearing this and understanding it really shifts the way you think about the behavior and the actions and the, even just the child as a person in general.*

Gaby That's right. And I think that's why treatment is so important. And the earlier we can receive treatment the better. So there are different types of treatments out there for social anxiety. We know that the first one is a psychotherapy or what we call this talk therapy and it's called cognitive behavior therapy. And it is especially useful to treat social anxiety disorders. So cognitive behavior therapy teaches you to kind of think and behave and react to situations that help you feel less anxious and fearful.

It can also help you learn and practice social skills. And so when social anxiety, we have a lot of the times we have, um, individual therapy and we also have social anxiety groups. It's amazing. It's so it's so great. It's so fun. So for example, I can have an adolescent kind of practice and say, I'd like for you to call Target and ask them, um, write these questions down. We're going to call three different Targets, and I want you to ask them what their return policy is. And then we call the second one, what's their return policy and are they hiring? And the third one is what's the return policy, are they hiring, and do you like working there? And so they're able to practice in a safe place, but little by little, they start to confront and reprogram their brain, their memories to understand that the psychological threat isn't really a threat.

Maureen *Um, I love that. That's really cool.*

Gaby And then there's also social anxiety groups where as a group, members will work on work on some of these skills. And then together, as part of their therapy is they'll go out to a restaurant and they'll order or together, they will go out to meet new people or participate in a group and there as a way of supporting each other because they get each other.

Maureen *Yeah, yeah, yeah. That's really cool. This is all super helpful. I know for the, those early kind of diving into this. And then when it becomes really crippling, I know there's a place for medication. We talked about it on the last episode as well, but I'm just curious on your end, where, how does medication come into play here?*

Gaby

Yeah. So once we began with psychotherapy, we see if it is appropriate to have some medication. And medication is, um, the idea is that medication will serve its purpose for some time. And as the brain is able to, um, not over activate, the individual is learning those skills so they are able to prevent anxiety from, from triggering, right? So anxiety will never go away. Sometimes I have patients that say, can you make my child non anxious? And I say, sorry, we need a little bit of that anxiety to keep us safe. But what we can do is teach your child or teach you how to manage that, to prevent it, kind of going back to the, to the cup illustration when we pour the Coke is to understand the brain is kind of like that Coke is to slow it down, so it doesn't overflow. And then our behaviors and thoughts and emotions is to dump out the Coke so it doesn't overflow. So we're, we're, we're monitoring it. Or we're also preventing an anxiety reaction, uh, an intense anxiety reaction with fear.

So there are three types of medications that are typically used to help treat social anxiety, anti-anxiety medication, antidepressants, and beta blockers.

So anti-anxiety medications are really powerful because they begin to work right away. They reduce anxious feelings. However, these medications are not usually taken for a long period of time because people tend to, in my experience, also, when I, with my clients, they tend to develop a tolerance for them if they're taking for a long time. And so what ends up happening is that the psychiatrist and their doctor needs to keep increasing the dose to keep getting the same effect. And they do run the risk of having some dependency. So from my experience, doctors tend to not prescribe anti-anxiety medication for a long time. And if they do, it's usually very well monitored and for a short amount of time.

The next one are antidepressants. And you're thinking well, aren't antidepressants for depression and not for anxiety, we tend to see that anxiety and depression, um, usually present themselves, for a couple of reasons. There's a neurological reason. And then there's also a psychosocial reason. The neurological reason is that we have trillions of neuro-transmitters in our brains, but we know that just a handful are involved when it comes to mood. And we know that the neuro-transmitters related to mood also affect your triggered anxiety and depression. So it's not common, it's very common for someone who has depression to also have anxiety and somebody who has anxiety to also have depression. So there's a neural and biological reason for that.

But also if you think about anxiety, if you have social anxiety, you're isolating yourself. You're not connecting with people. You're feeling like there's something wrong with you. And you begin to develop some depression, anxiety related symptoms. So another way to treat is antidepressants are mostly used to treat depression like I was saying, but they're also helpful for treating social anxiety.

And then the last one are beta blockers, and these are medications that kind of help with some of the physical symptoms of anxiety on the body. So for example, when somebody has an increased heart rate or sweating, or they're shaking, beta blockers are used to kind of relax the body, a lot of people who have public speaking or stage fright take beta blockers, um, to give them that reduction of, of the physical reaction at that time.

Maureen *And beta blockers are just things you take as needed?*

Gaby So typically it is just as needed. So, um, sometimes physicians will, will give some beta blockers and some anti-anxiety or, or do a combination, but depends. It really is case by case.

Maureen *Okay. Let's take a quick break and then we'll continue this conversation.*

### **Commercial**

**Thank you so much for listening to our podcast. I'm so excited to let you know that our conference is coming up. It's my favorite two days of the year, the Momentous Institute's Changing the Odds conference, and we have an incredible lineup this year. We have two days of inspiring, thought-provoking speakers. Kicking us off this year is Cheryl Strayed, the author of Wild, which was also turned into a movie starring Reese Witherspoon. The theme of the conference this year is flourishing. We'll be talking about creating systems and families and communities that can help children flourish. I cannot wait to be inspired by the incredible lineup. Tickets open on May 1st. We hope you'll check it out. It's [momentousinstitute.org/changingtheodds](https://momentousinstitute.org/changingtheodds).**

Maureen *Okay, so we're back. And I've been thinking, as you're talking, you're, you're calling this social anxiety, social anxiety disorder. And I'm really thinking about that word disorder, which to me is a diagnosis. That means they've received an official diagnosis. And I'm curious from you, how important is it to receive that diagnosis? If you're, if you're identifying with some of these warning signs, what do you, who do you talk to first, a pediatrician or, or a mental health professional? And, and what's the process of receiving that diagnosis?*

Gaby Yeah, that's a great question. As, and lots of parents want to know, does my child have social anxiety or is it just the adolescence? Is this something that they'll grow out of? So a couple of questions to ask, or to ponder on are, is my child extremely afraid of being judged by others, is my child very self-conscience in every day, social situations? Or does my child avoid meeting new people? And so if you say yes to these questions, the next step would be to begin to have this conversation with your pediatrician. They're so good about saying let's just keep an eye on it, let's just keep watching it. Is it developmentally appropriate that this would occur? And pediatricians, I think is the first step. So even, even when families come to talk to me, um, I always have them go back and have a physical and have this conversation with their,

with their pediatrician to make sure that there's nothing related to something medical that we may be missing.

Maureen *Mm mm. Because, uh, we talked about this in the last episode as well, sometimes anxiety does manifest in the body and so it could be medical. It could be anxiety.*

Gaby Yeah. So that's the first step is just to have this conversation with our pediatricians and pediatricians are great about saying let's just keep an eye on it or no, I think we should start having this conversation with a mental health provider.

Maureen *Okay, great. And so I want to come back to the conversation we were having earlier about parents managing their own anxiety. And you talked about how often you see that as sort of overcompensation and you gave us some examples of what not to do, you know, about calling the school and, you know, kind of overprotecting them. What is the healthy way for parents, especially anxious parents who are really doing the work on their own anxiety to parent these children with anxiety. What do you have? What tips do you have there?*

Gaby So sometimes with parents, I talk about that eye in the storm, you need to control that eye, that I am to be, to control the storm that's coming around you. And so a lot of the times I think parents definitely understand, and have the awareness that they, they may be transmitting some of this anxiety and then themselves come and have a consult and talk about how, what is it about this certain situation that's triggering their anxiety because they have the awareness and the insight that it's creating or triggering, um, a reaction that's more reactive rather than responding.

So we always say, are you reacting to your child? Are you responding to it? And when we react, we come from most of the time we come from a place of fear. And so we know that fear is very related to anxiety. The fear that something terrible is going to happen. The fear that something is bad is going to occur, then I'm going to lose something or that something's going to be lost. But when we stop and we see, okay, I got to work on my stuff. So then that way, when I'm in front of my child, I'm being responsive, comes from a place of really problem solving. Which is a lot of what we do in therapy is teaching our teaching our, our adolescents, how to look at anxiety in a different way to look for solution where, you know, if the adolescent says, I'm so scared of people judging me. Well, where's the evidence in that and what could be some possible solutions and, and just kind of giving them the tools that they need to kind of put the brakes.

Maureen *And in therapy, you mentioned that a lot of times at Momentous, especially we, we treat the whole family. And so I assume in that therapy process, parents are also learning some of the skills to do the processing with their children.*

Gaby Absolutely. And they're so happy to receive that and to kind of have that relief to say, oh, I mean, just the awareness of I'm being reactive or seeing versus just responding.

Maureen *Yeah. That makes a lot of sense. I mean, even, you know, you and I are both parents and you know, I'm sure I do that too. Even with small things, like there are times and there... I'm thinking a lot about, there are times when my, just my mood, I'm stressed or I'm worried about something. And I know I don't show up in the healthiest way for my kids. So when they're having this anxiety, it's just that times, you know, it's just that escalate, right?*

Gaby Absolutely. I'm the same way I do this for a living.

Maureen *So I know you've mentioned that in a lot of these adolescents, they're really trying to connect with their peers and they're having a hard time and that's also the time when, you know, kids are starting dating and forming these relationships. So how do these kids with social anxiety navigate some of that, right?*

Gaby Or even date, right? How did they do that? Well, we know that, um, a lot of the time social anxiety, um, teens learn how to manage it. Um, and unfortunately they start to drink or have marijuana use because they know that it's kind of like the social lubricant to reduce their social anxiety to some extent.

And so this is kind of the way that people have, have coped. And unfortunately it also can lead into addiction, um, because they begin to rely or self-medicate. Again, the adolescents have such a desire to connect with their peers, to connect with their parents, to connect with their family members to their community. But it's this psychological threat that keeps them. So when they're drinking or when they're getting high and they are able to kind of do that more freely and unfortunately through the self-medication, it can open the door for some individuals to addiction. And we also know that people who have social anxiety have a very small circle friends and they don't date very much. And they typically will marry the first person that literally will ask them out because the fear of having to meet new a new person is so large that they will, um, stay in a relationship. Usually at a very young age, they'll cling to that person and just stay in that relationship.

And, you know, it works out for some, but for some others it does.

Maureen *Yeah, exactly. I was just thinking sometimes that's fine. Sometimes probably not as healthy. So it sounds to me like the sooner, I mean, this is true for everything, the sooner you can get them in, uh, to receive some of these treatments, work through this with a mental health professional, the way better long-term outcomes they're going to have.*

Gaby That's right. And my hope today is just to bring this bigger awareness that social anxiety is a real thing that in any given classroom that we walk in, we

know that one child or one adolescent is struggling or will develop social anxiety. But the good news is that there is incredible treatment and help, and this is something that nobody should have to suffer through.

Maureen *Thank you so much, Gaby. This has been really thought provoking, given me a lot to think about, and I know lots of parents listening will get a lot out of it. So thank you so much for being here today.*

Gaby Thank you so much.

**Thank you for listening to The Growing Brain, a social emotional health podcast. We hope you have enjoyed this conversation. Don't miss an episode, be sure to subscribe so that you're notified when new episodes are released. And for more content, including articles, videos, and much more, please visit us online at [momentousinstitute.org](https://momentousinstitute.org).**