

## Transcript for Lynn Lyons | Playing with Anxiety (Episode 642)

Full show notes found here: <https://theartofcharm.com/642/>

LYNN: You know when I watch the way therapy is portrayed on television, God it just -- to me I think, "No wonder people find therapists annoying."

JORDAN: Welcome to The Art of Charm, I'm Jordan Harbinger. Today we're talking with Lynn Lyons. She's a therapist for the past three decades, also author of [\*Anxious Kids, Anxious Parents: Seven Ways to Stop the Worry Cycle and Raise Courageous and Independent Children\*](#). What? No, this is not about kids, it's not just for parents, but lately it seems the whole country is overwhelmed by this apparent epidemic in anxiety and worry and yet, what most people are doing to help is actually supporting and even strengthening the problem.

Today we'll understand why we are not emotionally equipping ourselves very well and how people are losing their ability to manage themselves socially and emotionally, we'll discover why the content of what people worry about -- what we worry about -- is far less important than the process of how worry actually operates and we'll explore the idea that anxiety, worry, and depression all have some predictable and redundant processes that fuel them. Last but not least, we will learn why and how it's important to practice uncertainty as well as some concrete ways to shift out of avoidance and into action. Now, let's hear from Lynn Lyons.

One of the topics that is -- I don't want to say trendy because it's medical stuff, right?

LYNN: Yeah.

JORDAN: But, it seems it be more prevalent than ever -- is anxiety, Lynn. Why is this the case? Are people more anxious now or is it just one of those things like first world problems, now that we're not starving to death, we notice that people have anxiety?

LYNN: Well it could be that. I mean I think that the sense right now is that there is more anxiety. When we talk about anxiety, there's also worry, and I like to differentiate between the two because worry is the cognitive process, worry is the thinking that we do and the what if-ing and wondering about the future and then anxiety is actual the physical symptoms that we feel in our body. So right now, the impression, certainly with adults and with teens and kids as well, is that anxiety in this epidemic in the United States. I don't know that that's particularly true.

The numbers in terms of how many people are dealing with diagnosable anxiety disorders are hard to find, actually. But, if you look at people's sense of their cognitive state, their emotional state, sort of their sense of worry, people themselves would say, "Yes, we're much more worried. We're much more stressed out." Parents are much more involved and worried about what's going to happen with their kids than ever before, so that causes a lot. Politically people are freaking out about stuff. You know, if you could take the temperature of the anxiety and the worry in this country, it's certainly up. That's for sure.

JORDAN: And I understand that worry is up but does that mean anxiety is up? Are these two things the same? Because I know some people worry a lot and other people have anxiety and some people have both but I feel like there's a difference between, "Gee I hope my business succeeds in the future. I do worry about the state of the economy," and then there's anxiety where you're up biting your nails at 2 o'clock in the morning because, I don't know, no reason.

LYNN: Well, it's really more the degree of worry. So, everybody has some worry. Anxiety is the physical response. So, a lot of things can cause anxiety. If you drank 20 cups of coffee, you would technically have anxiety because your body would be cranked up -- your system would be on high alert. Worry is actually what gets a lot of anxiety going. Some people worry, like you say, "Oh, gosh, I'm worried that I'm going to get this done," or, "I'm worried that my business is going to be successful." The

problematic worry is that when you worry to such a degree that you trigger that you trigger responses in your body that cause, you know, heart palpitations or vomiting or diarrhea or sleeplessness. So, people should worry, worry sort of gets you off the mark sometimes. But when worry turns into those physical symptoms, that's when it becomes a problem.

JORDAN: So anxiety is a physiological response whereas worry is kind of, what -- a mindset or something like that? What's the difference here?

LYNN: Yeah, like a cognitive response, yeah. But we use the terms interchangeably. But you've got it right. So worry is the cognitive process of what you're thinking and what you're imagining, and anxiety is technically a description that says, "This is the physical response in my body based on the fact that my fight or flight system got fired off." But human beings can fire off their fight or flight system by imagining things.

So you can fire off your fight or flight system if you're getting chased by a grizzly bear, but you can also fire off your fight or flight system if you're lying in bed at night wondering whether or not you're going to make your mortgage payment or whether or not you're kid's cancer is going to come back. And smaller things too. You can fire off your fight or flight system by wondering whether or not when you give a speech you're going to miss a word or say something stupid or trip over your feet. The brain is really responsive to the messages we give it and depending on the messages it's getting from us, that often determines whether or not somebody is experiencing anxiety or not.

JORDAN: Okay, but this must have evolved for a reason, right?

LYNN: Yeah.

JORDAN: So we have this process that we got here, now maybe it's a little out of control --

LYNN: Right.

JORDAN: -- but it's been good for other things and we don't have to get too into like, evolutionary psychology but I would like to point out --

LYNN: Yeah.

JORDAN: Because I think in this sort of woo-woo self-help stuff, there's a lot of people who go, "Oh, I never worry about anything." It's like, well, I'm not so sure you're telling the truth and also, if you are, you basically -- it's like saying, "Oh, I don't need to eat anymore." Well, I don't know about that either, right?

LYNN: Yeah.

JORDAN: There's a lot of reason that you might want to have this process work for you --

LYNN: Right.

JORDAN: -- not just because you're being chased by a grizzly but there's other things in modern day life where this would come in handy, correct?

LYNN: Right. So, say you've got a book due, say you're driving to the airport and you realize you forgot your passport, say you're lying in bed and you smell a little bit of smoke, say you're just thinking about the things you need to get done so that you can get out of the house on time -- if you have no worry, then that little bit of distress that you feel that says, "Hey pay attention to this," that's a problem. Worry is there because we need to pay attention to our surroundings in order to survive. So when people have anxiety disorders, that's just sort of worry run amuck. We're not getting rid of it and everybody's got it and if somebody tells you that they don't worry about anything, they're just sort of making something up.

JORDAN: Blowing smoke, yeah, exactly.

LYNN: Yeah.

JORDAN: So now that this is running amuck, there's lots of people out there from parents to entrepreneurs who are thinking, "Okay I need to figure out how to get rid of this. I want to be the zen guy who has a meditation app and says, 'I never worried about anything.'" Is that even healthy? Is that a healthy goal? Not only is it of course impossible, but should we always be seeking to minimize worry, if not eliminate it?

LYNN: Well as soon as you start to try and eliminate worry -- the way that worry paradoxically works and the way our brains work, is that if the goal is to eliminate worry, you're actually going to make it worse. So if I say to you, "Okay Jordan, under no circumstances in the next three seconds are you to think about -- and I mean it -- do not think about a blue camel," right? So, boom, here comes that image into your mind of a blue camel. When we say to people, "Look, there's nothing to worry about," or, "Don't worry about that," or when we say to ourselves, "Oh, my gosh, why am I worrying about that? I shouldn't be worrying about that," the minute that you start resisting the process, then worry paradoxically starts to get stronger.

And one of the things that's a little frustrating for me right now in the anxiety treatment world is that there seems to be such an over focus on this idea of like, calming down and relaxation and breathing. Not that those aren't great things, but if you're a worrier and your goal is to eliminate your worry, rather than sort of have a relationship with it, then you're pretty much going to make the problem worse. When you're treating with somebody with an anxiety disorder, their goal is to get rid of their anxious thoughts, the sensations in their body, things that make them feel uncomfortable, and all of that just continues to escalate despite the fact your efforts to get rid of it.

JORDAN: Yeah.

LYNN: So you're right, trying to get rid of it is a bad idea.

JORDAN: And of course I thought of a blue rhinoceros because I'm bad at animals apparently but I get the idea, right? You can't eliminate it because the more you focus on trying to eliminate it, the more you actually focus on just the issue that's making you worried in the first place.

LYNN: Right.

JORDAN: And so why is it important to not try to shift out of these worried mindsets. I mean, yes we focus on it more, but surely there's another way to do it. Or is it actually just something that we're working as a society, theoretically, on managing this and really we're doing it wrong? What's going on here?

LYNN: I think in some ways we're doing it wrong. It's funny because there's two ends of the spectrum. On the one hand you have people that really feel like the more we pay attention to things and the more we focus and analyze, and the more we worry about our kids and the more we talk about this and we ruminate about stuff, then the more that we're solving problems. And then on the other hand, you've got this idea that we're supposed to eliminate all negativity from our lives.

JORDAN: Right.

LYNN: Those two things are not very compatible and it seems to be that we're doing both at the same time. So not only are we freaking out about the fact that our kid or our dog or our partner isn't doing this exact thing correct and, What's going to happen? And what if I don't do this? And what if I don't do that?" Then on the same hand then there's all this sort of like, "You know we need to go to yoga and calm down and practice our therapeutic breathing." The thing in the middle that we're missing is that brains are really busy, they're going to have all sorts of thoughts, most of them -- there's this woman named Sally Winston who does a lot with obsessive compulsive disorder and anxiety and she has this great phrase where she says basically, "Much of what we think is passing mental

detritus." You have to change the relationship with all of these thoughts in order to differentiate what's really important to pay attention to and what's really my brain just making noise?

JORDAN: Right, yeah. And this, of course, is a potentially life long pursuit, especially if you have kids, which I do not --

LYNN: Yeah.

JORDAN: -- but I know I drove my parents crazy. We know also that untreated anxiety in children or teens or whatever is one of the top predictors of developing depression by early adulthood and that seems like a big problem so I understand why we give ourselves anxiety worrying about the anxiety levels of our kids.

LYNN: Mm-hmm.

JORDAN: However, it seems also -- and just ask anybody who uses the term regressive left or watches kids on college campuses having collective tantrums over things they don't want to hear -- maybe we're not equipping our kids or just ourselves very well to handle things socially or emotionally. Is this true?

LYNN: Yeah.

JORDAN: How is this happening?

LYNN: You're exactly correct because from what I see, having done this job for going on 28 years now, we've done a pretty good job of creating this generation of young people that really have a very low tolerance for discomfort and uncertainty. So whenever they feel challenged, right, whenever they feel triggered -- they love the word triggered --

JORDAN: Yeah.

LYNN: -- they want to get rid of that. So they have said to themselves and to the world at large, "We don't want to be triggered. If you challenge us, if we feel uncomfortable, if we feel uncertain, then

you need to go about fixing that." And so what I see is kids right now, college kids -- college and universities -- if you talk to the mental health centers at colleges and universities, they are absolutely overwhelmed with kids -- young adults -- who are emotionally ill-equipped.

While we're sort of focusing on, you know, calming down and relaxing and making everything okay, the result of that is we've got these kids who are not really very good at managing challenges, managing disagreements, managing a roommate that you don't get along with -- young adults moving into the world have an expectation and it's the grownups' fault that taught them this, to a large extent. But they have this expectation that things are supposed to go smoothly and instead of focusing on changing the outside world, my goal is always to change the relationship with your expectations or your thoughts, so when things don't go well -- which by the way they won't all of the time -- you actually feel like you have the resources inside to deal with it. Anxiety management and mood management -- so if we talk about depression prevention and anxiety prevention, it's really about when things don't go your way, what are the resources you have internally in order to cope with that?

JORDAN:

I like that you mentioned internal resources and figuring out how to manage this on our own. Because of course, yes our parents unknowingly supported us or them or whoever we're talking about with these issues, however, we can't just blame our parents and go, "Well, you know, parenting. So, I'm going to be a dysfunctional human being forever because wah." You know? I don't know, it's not going to work. And I know that schools and institutions -- especially institutions of higher learning -- are doing a lot of anxiety management, you know? "We have to have a community meeting where everyone gets to cuss out the university president because they're triggered." It's weird, it's like anxiety is like this slave driver that is -- as speaking of terms you can't use in institutions of higher learning -- that make demands of us as adults.



LYNN: Yes.

JORDAN: I mean if you're over 17, I'm sorry, you have adult responsibilities.

LYNN: Right.

JORDAN: Even younger than that, frankly.

LYNN: Right.

JORDAN: As soon as you can drive, you've got some level of responsibility, in my opinion, and it ramps up as you get older. But it's like we've just been programmed to get furious when the rules aren't followed and the problem is the rules are whatever we decide makes us comfortable.

LYNN: Right and when you talk about the ability to manage when things don't go the way you want them to go, management of that -- emotional management doesn't mean that I'm going to flip out and that I'm going to stop the conversation and I'm going to demand that you remove whatever it is that is upsetting me. What we've got right now, in terms of if we look at it through anxiety and depression, is we've got all these young people that unfortunately are really -- they're too into their diagnoses, if I may say that as a mental health professional.

They really are wearing those as sort of a badge of armor and one of the things that has been really interesting these last few years is when I'm talking to young adults and talking to teenagers, and I talk to them about either prevention of anxiety and depression or I talk to them about, "If you've been diagnosed," -- because they're real things, for sure, "If you've been diagnosed, what can you do now to manage yourself in a way that either helps your recovery or prevents relapse?" they get really mad at me.

I've been boo'd, I've been hissed -- what they're telling me when I have conversations with them about this is that they're

diagnosis validates who they are and that they resent me or anybody else telling them that there's something that they can do to improve their emotional management, to improve the ability to manage their moods, to improve the way that they handle challenges. And so it has become -- unfortunately it's become this permission, almost, to say, "I have depression," or, "I have anxiety and thus I must be accommodated for that." It's not moving in a good direction, in my opinion.

JORDAN: Yeah, we do see a lot of resistance. I suppose you're seeing the same kind of resistance when you talk about neuroplasticity, the malleability of the brain --

LYNN: Right.

JORDAN: -- to learn or -- I was talking with Doctor Drew Pinsky yesterday --

LYNN: Yeah. Yep.

JORDAN: -- and he mentioned something very similar, that when he says things like, "Hey, you know, you can go through treatment for addiction and recovery," 90 percent of the people say, "Great, thank you. You're saving everybody's butt," and then there's a certain percentage of people that say, "How dare you? You're just profiting off of this. It's a big lie. You can't do anything about it."

LYNN: Right.

JORDAN: It's like, well, you haven't been able to do anything about it because you kind of really don't want to do the work or you know --

LYNN: Right.

JORDAN: But it doesn't mean nobody else can. So I can understand why people are getting angry because, "Yeah, if I can't take my therapy cat on the plane for free, I'm going to have a tantrum

because I decided I need that to function as a stable human," and that's not always the case.

LYNN: Right. The thing about the brain that we've really discovered in the last 10 or 15 years, that the brain is so much more malleable than we believed. So on the one hand we've got all this stuff about neuroplasticity and epigenetics, which is really cool stuff, and then on the flip side, we've got this whole campaign that talks about, "This is who you are. You've got a chemical imbalance. You're wired this way. You should embrace your diagnosis because it helps you understand who you are." And I think probably Drew Pinsky sees it a lot with the disease model of addiction that some people will take to say, "Well this means I can't do anything about this because I have the disease."

The depression biomedical model has co opted that language in a way that now is saying to people, very blatantly, "This is who you are," which is the exact opposite of what you need to say to somebody who's anxious or depressed because it's the positive expectancy that you're going to change and that you can change that actually leads to recovery. There are many overlaps with addiction treatment in this as well.

(COMMERCIAL BREAK)

JORDAN: I can see why identification with a diagnosis is rampant. I can see the temptation to take that road as well and I think a lot of people want to be victims because it's easier that way. And I just want to be very clear here, that on the other hand, we should definitely not disregard medical diagnoses because we want to be tough or because, "I don't want to look like a victim." So maybe acknowledge the diagnosis but don't let it consume your entire identity?

LYNN: Here's the tricky thing, is that depression is a real thing. It is debilitating. The World Health Organization said in 2016 that depression is the leading cause of illness and disability in the world and in 2014 they deemed it the leading cause of illness and disability in children. So, this is a real thing. Depression

isn't -- you know, when you see the ads that say, "Depression isn't just feeling sad," that is exactly correct. But where they go too far is to say that depression is a permanent disease. And when you talk to a lot of young people, I've had kids tell me -- you know, freshman in college or juniors in high school -- and what they say is, "I was diagnosed with depression, I have depression, and I'm going to have to deal with this for the rest of my life because I have this chemical imbalance in my brain," and that's just not accurate.

Most people who get treatment for depression recover. And people who get treatment for anxiety recover. Anxiety is the most treatable thing we have. But then it becomes, all right, so if you know that you're at risk for this, if you know that certain things that happened in your life or certain ways that you think has set you up for this vulnerability, what are you going to do so that you are optimizing your internal resources and learning how to manage your thoughts and your feelings? But unfortunately, it goes one way or the other -- that this idea that you have a disease so, "Ugh, gosh I've got this disease called depression," when really what we want to say is, "Things have happened, they have created depression -- which is real -- now let's actively treat it and then let's actively help you prevent relapse," but that's being lost somewhere in a lot of advertising, in a lot of public health campaigns. It's being -- you know, pharmaceutical advertising is not down that message, unfortunately.

JORDAN: Yeah, why would they? Because you can do work and maybe get rid of this and learn how to cope or you can just take this pill that you're going to need forever.

LYNN: Which doesn't really work all that well, actually.

JORDAN: Which doesn't work all the time, yeah exactly. Or, has side effects that are worse than the actual disease. The other element to this that I thought was very interesting was that theory or statement -- I don't know if it's a theory. It may be something proven that I just never heard -- that the more you

adhere to the demands of anxiety, in other words, the more you demand others to accommodate, is that the demand for comfort and certainty in other words, that actually increases the anxiety, which can of course then lead to depression. So tell us how that works? How does us demanding to be accommodated, comfortable, have that level of certainty actually make this worse and not better?

LYNN:

Think of anxiety as a cult leader. C-U-L-T. So anxiety shows up and it says, "Okay so here are my demands," and as you said, the demands are for certainty and comfort. "I have to know how everything is going to go and I have to feel comfortable while I'm moving through my life." So the anxiety -- so the person has the anxiety and they say, "In order for me to function, I need to make sure that you people in my family or you people at my job or you people at my university -- you meet the demands of the cult leader." Now when you don't follow the demands of a cult leader, we all know the cult leader gets pissed off.

So people begin to bargain with the cult leader. They go, "All right, all right, all right. Okay, so I understand this makes you anxious, so we won't do this," or, "I know you don't want to sleep in your own bed so you can sleep with me," or, "I know that you don't like dogs, so we'll make sure that we remove all dogs from the area." Every time you give the cult leader what it demands, you are solidifying that behavioral and cognitive pattern.

So what we want to do instead -- which sounds paradoxical but when you think about it then it really makes perfect sense -- is if you are lousy at tolerating uncertainty and if you cannot tolerate discomfort, the way you learn how to get better at that is to step into uncertainty, to step into discomfort, and then actually have the experience of being able to manage it. So when we follow the anxiety's demands, it gets stronger just like the cult leader, and when we confront it -- when we go on offense with it -- when we step in and say, "All right, you know what? Give me a little discomfort here. Let me manage it, let me learn that I can get through it," then the cult leader gets less

powerful and a person begins to feel more confident and more capable.

JORDAN: So in other words, the more we ignore this or accommodate this certain behavior, like you said, it reinforces that cognitive pattern. So, just to put this in layman's terms, it's like, "Well you can't have dogs around because dogs scare me," so then every day you go to work and there's no dogs and then when you do encounter a dog, you have no experience figuring out how to handle yourself with a canine around and you just lose it.

LYNN: Exactly. People who are anxious -- say about dogs, because that's a good concrete example, but it can be anything -- they're very catastrophic in their thinking. So, you don't have the experience that helps you sort of learn how to manage your responses to dogs because it's really not about dogs, it's how you think about dogs and how you imagine about dogs. If you don't have any experience stepping into that situation and then your worry shows up -- so say every time you see a dog you go, "Oh, my god the dog is going to rip my face off," so you stay away from dogs, but then what you do learn is that you can actually differentiate between friendly dogs and mean dogs, that's a good skill to have, and you can step toward a dog and if a dog actually jumps up and puts its paws on you, it's not going to be a fatal injury.

And little by little, the brain starts to relearn that perhaps this catastrophic scenario that you've created isn't actually true. Worry is about believing your own catastrophic scenarios. It's called experiential learning and that's how the brain learns. And so, the amygdala which is the fight or flight system in our brain, has to be retrained by stepping into the situation, having the experience, and maybe it doesn't go perfectly but it's okay, right? You have to do a public speech and you're terrible nervous and you go up, your face does get blotchy or maybe you do trip over your words a little bit, but you survive.

This primitive part of your brain says like, "Hey wait a second, you've been telling me that public speaking is like a terrorist

attack and actually it felt uncomfortable but I survived." So it's about stepping in, stepping in, stepping in, and having the attitude of, "It is okay for me to have these sensations. In fact, it's important for me to have these sensations because this is how I learn. This is how I manage." The more we keep you away from those triggers, the less opportunity you have to actually develop confidence in that situation.

JORDAN: That's interesting. Right, that makes sense. So it's like exposure therapy except we can think about this for ourselves on a daily basis, if something makes us uncomfortable. It's sort of a self-helpy maxim that you should try to face it. But now we see there's actual brain science behind, well yeah it's not just the process of growing as a human, it's just, look, your brain is going to figure out that going up on stage in front of people isn't going to kill you.

LYNN: Right.

JORDAN: That's a good thing for your career. Do it.

LYNN: Exactly. It is exposure therapy, but when you have that little attitudinal shift that basically says, "Oh, this is really important or this is really good for me," then the learning happens more quickly because when you're doing exposure therapy, but you're saying to yourself, "Oh, my God, I hope I survive. I hope I survive," that's like driving your car with the gas and the brake on at the same time. But if you're doing exposure therapy and you say, "You know what? I'm going to step in. This is the way I learn. Bring it on. Here we go," then things happen a lot quicker. It's really pretty fascinating.

JORDAN: That is fascinating and I like the idea that you have here in [\*Anxious Kids, Anxious Parents\*](#) -- the book title of course -- which is that the content of what people worry about is far less important than the process of how worry operates. I'd love for you to go into that a little bit because yes, most treatment focuses on the content. A lot of us -- we focus on the content. "Oh, I shouldn't worry about this because," and then we start to

rationalize something and talk to ourselves about it. But really when we're fighting an emotion, that might not be the most effective strategy.

LYNN:

Right, the reason is is that the content changes and people have different content. And so, if you focus on changing what I call a "Content based intervention," is when we try and change the content out there in order to appease the cult leader. A process based intervention is when we understand how worry works and we change our relationship with our worry. So personifying the worry -- you know, giving it a name -- I'll say to people like, "Who's a person in your life that when they talk, you really find them annoying and you just really -- you might nod and smile but you really wish that they should shut up?" That's what you should name your worry. So that when your worry shows up and basically gives you some version of, "Oh, my God, you can't handle this," that you can say, "Oh, God, there's my worry again trying to convince me that I can't move forward. Whatever the content is doesn't matter to me, and the more we discuss the content, the more we go over the content, we're just doing what anxiety likes to do."

So one of the phrases that I use all the time, when I'm training clinicians and talking to my clients, is "Don't do the disorder." Do you know who really likes to talk about the content? The worry. Because it wants to go over it, it wants to figure it out, it wants to ruminate it, it wants to masticate it -- what we really want to do is say, "Worry says the same thing all the time about -- fill in the blank -- your job is to change your relationship with your thinking, rather than try and change your relationship with the content."

That can be a tricky concept for people to get. It takes a little while because many people who go to therapy for anxiety, for example, just go in and talk about what they're anxious about it and then the therapist says, "Well what's the likelihood of that happening?" and tries to convince them that maybe it's not so bad. But the problem is, what if what you're worried about really is bad? Or what if it's already happened? What if you can come



up with every possible scenario where that horrible thing could happen? Then you're just getting in an argument with a very persistent worry. I'm not going to pick up that rope.

JORDAN: Right, and of course an argument with somebody you're paying \$200 an hour. And I understand this, right, people try to change or avoid the content. "Oh, I don't like crowds so I avoid crowds." All right, fine, it works in the short term -- recipe for long term problems. It reminds me, we had Dean Karnazes on the show. He's run, you know, 50 marathons in 50 days in 50 states and he's an incredible athlete. And one of his points on the show was we're so obsessed with being comfortable all the time.

LYNN: Mm-hmm.

JORDAN: We've lost our ability to actually manage discomfort.

LYNN: Right.

JORDAN: And it sounds like what you're saying is when we work to change the content, we miss the opportunity to teach the effective processes that actually diminish anxiety for us.

LYNN: Right, and it's that very process of being able to reframe or tolerate or step back from your discomfort and from your uncertainty that -- you know, you talk to a lot of successful people -- they aren't comfortable all the time and they didn't get successful by doing things that were certain. They were taking risks. They knew they were going to fail, they can tolerate failing, they can tolerate screwing up -- if you're going to run a marathon and your belief is that you're going to feel comfortable the whole time, you're not going to run a marathon.

And so, as we're promoting the mindset of stepping in, and it's in the context of anxiety -- but when we're talking about prevention of anxiety, we're talking about prevention of depression, it's really about promoting the idea that if you're uncertain and uncomfortable, you're probably on a good path to some sort of discovery or success or meeting some challenge

that's in front of you. You know, you hear that from successful people all the time.

(COMMERCIAL BREAK)

JORDAN: You've discussed that anxiety, worry, depression all have these predictable and redundant processes that fuel them -- so global, catastrophic, and permanent thinking. Can you take us through this? I'd love to learn these different thought processes and maybe recognizing and changing them rather than following the demands of our cult leader, anxiety.

LYNN: Okay, and you know, I didn't come up with these cognitive patterns. These are, you know, the cognitive theorists like Beck and other ones have come up with. And these are the ones -- global, catastrophic, and permanent are the three that I see most consistently in anxiety and depression in the families that I treat. So global thinking is when you paint things with too broad a brush and so you say, you know, "All dogs are dangerous," or, "All women are controlling," or, "I'll never get that done," or, "I always have bad luck," or, "Nobody ever gives me the time of day." So, we have these big huge words that sort of get in the way of us problem solving. The opposite of global thinking, if you can think about a, you know, a depressed person, right? So like, "Nothing ever goes my way," or --

JORDAN: Yeah, Eeyore, right?

LYNN: Right, Eeyore, exactly. When we want to teach somebody to recognize their global thinking, we want to listen for those big statements that people make. You know, I remember I was talking to a mentor of mine and he was having trouble with his computer. And I should have known better, and I said to him, "Oh, God, there's nothing worse than computer problems," and he said to me, "Oh, no actually, there's a lot of things that are worse than computer problems." So, what we want to do is challenge our global thinking.

The opposite of global thinking is breaking things down into parts. When you think globally, you get overwhelmed, you back off, you give up, right? "I'll never get this project done." Somebody says, "Here write a book," -- feels pretty overwhelming. So, you break it down into chapters, you've got a deadline, you make a schedule -- so global thinking is a huge contributor and predictor of anxiety and depression. So you recognize your global thinking.

Sequencing is the opposite of global thinking. I'm going to know that there's a beginning, a middle, and an end. Catastrophic thinking -- this is sort of the hallmark of the anxious, worried mind -- is going to the worst case scenario. So, you think about going on a trip. I had this family once that was meeting with me and they were really nice and they had a great sense of humor.

And the mom goes, "Oh, my God, we are doing this in spades. When we go on a vacation, we don't pack for like sun and fun and adventure, we pack for like diarrhea and sunburn and lyme disease." Always thinking about the worst thing that could happen. So that's catastrophic thinking. Catastrophic parenting is when you're giving your kids information about -- you know, safety information, but you back it up with scary stuff about what will happen if they don't listen to you.

So you know, you can say to a kid, "Hey when you're here alone, don't open the door. Keep the door shut. Don't open the door for strangers," right? That's a very good piece of safety information. But then the catastrophic parent says, "Because, you know, I'll just explain to you, there are people that will steal you. So I could come back from the grocery store and you'll be gone and I'll never see you again, got it?" Right? So then that kid is like, "Geez," -- doesn't want to stay alone. "Why is my kid so anxious?" Well, you've given him catastrophic scenarios.

JORDAN:

Right, yeah. He thinks he's going to get chopped up into little pieces if he can't see you at the grocery store.

LYNN: Right. And so, catastrophic thinking is jumping to the worst case scenario. One of the things that's interesting for me is that we say, "What's the worst that could happen?" and the anxiety goes, "Oh, my gosh, I love talking about that. Pull up a chair."

JORDAN: Yeah, "I have so many ideas!"

LYNN: "I have so many ideas. That's what kept up all last night. We talked about what's the worst that could happen. I'm so psyched you're going to have a discussion with me about this!" So, I don't say that to people that I treat. What's the worst that could happen? You know, "Oh, the dog could rip your face off. Yeah, that's the worst that could happen."

So the opposite of catastrophic thinking is really sort of backing off from that danger view of the world and problem solving. Thinking, "Okay so what am I going to do in order to solve this problem. And bad things do happen. That's just something that we just need to accept and if I do get diagnosed with cancer or if a dog does bite me or if my house does catch on fire, how am I going to problem solve?" So that's catastrophic.

And then the last one is permanent. This is the one sort of I was referencing before when I was talking about the kids getting so angry at me. Permanent is the idea that things won't change. And if you are anxious and depressed, it is really not helpful to have a permanent mindset about you or your thinking or your body or your health or your world. We really want to support this idea that things change all the time and that's where that positive expectancy comes in.

JORDAN: So now that we know what those are, we can focus on recognizing those processes, may be changing those processes instead of following the cult leader, right? Avoidance, comfort, certainty -- that cause anxiety. So what do you do instead? Now that we see those, half of us are going, "Oh, crap, I do this all the time," or, "I catastrophize all the time. You're right, I do think everything is going to last forever and then it doesn't," or, "I do

apply it to every negative thing that's going to happen in my life." What can we do about this once we spot these patterns? Of course, spotting the patterns -- great, huge advantage. What do we do now?

LYNN:

The main thing to do is after you spot the pattern and recognize it, don't work so hard to get rid of it. Just allow it to be there. Just notice it and you and to diminish its importance. So we're going to expect worry to show up. You know, the brain creates all sorts of crazy thoughts. Like, when I was at the Grand Canyon, my brain said like, "Wow you could just jump right now. You could jump into the canyon." So of course, your brain is going to create these thought patterns, create these images, create these ideas, expect them to show up, particularly if you're in a situation that's stressful, if you're in situation where you are going to be judged.

And human beings, by the way, are incredibly judgy. That's not going away either. So, expect it to show up. You're going to externalize it by just sort of taking it outside and noticing it. That's why giving it sort of a personification can be kind of a fun thing to do. Like, "Oh, here's Gladys again, you know, talking about people that are going to kill me," so you get some distance from it, and then you want to just keep moving in, moving in, moving into those experiences that actually create some discomfort and some uncertainty.

But all of us need to be doing that on a regular basis. Stepping toward the uncertainty with this attitude of, you know, "Let me see what I can learn from this," noticing the thought patterns -- so expecting them to show up, looking at them from a distance, and then stepping in and seeing what you can do. If we taught that to kids in school, we would not have kids freaking out on college campuses, I'm pretty convinced.

JORDAN:

Yeah, it seems like these are useful skills for kids and adults. How do we practice this? Is there a -- I mean do you write it on your forehead? I mean, what's going on here?

LYNN: Yeah.

JORDAN: Yes?

LYNN: I tend to like people to have just sort of simple mantras like something -- that's why I -- you know I talk about things. You know I say the three Xs, I talk to people about the GCPs -- the global, catastrophic, and permanent. But being able to have just a simple phrase that you say to yourself -- so, "If I'm feeling unsure and uncomfortable, I'm on the right track," or something as simple as, "Bring it on," or something as concrete -- you know, as a marathon runner would say, "I'm going to feel the discomfort and I'm going to keep moving."

So coming up with some sort of phrase or mantra. I have index cards in my office -- I just always have this stack of index cards -- and on one side of the index card I write down, "Well let's come up with the three phrases that your worry really loves to throw at you, and on the flipside, let's come up with the three phrases that you're going to say back to your worry when it shows up." And just being able to rehearse that, just being able to know that when the worry shows up, it's going to be there and then how are you going to do the opposite of what it's demanding of you? If it's problematic worry. If your worry says, you know, "Hey, don't step in front of that train," then by all means, listen. But when we're talking about problematic worry, sort of the gnawing, ruminating, perseverating thought process that we get stuck in.

JORDAN: I like the idea also of practicing uncertainty. I just published an article on the AoC blog and a toolbox episode about this recently as well. Uncertainty is one of these words and concepts that now -- again, people seem to be allergic to right now, it's not good, you've got to have certainty, there's got to be clarity, you've got to strategize everything, but uncertainty is not just part of the game, it really, in many ways, is the game. Especially if you're in a position of risk like you're an entrepreneur or you're trying to make a living with art or you're trying to move up in your career. You don't just have to get

comfortable with it, you really have to thrive in it. It's not just a matter of like, "Oh, I can sort of sweep this to the side for now and grin and bare it." You really have to really be able to do well with this and almost seek it out. And your concept of practicing uncertainty -- I'd love for you take us through this.

LYNN:

If I'm teaching somebody how to manage uncertainty -- now remember, I'm seeing people that are coming to me for anxiety. So their cult leader is alive and well. But, I'm going to come up with them -- "What are some situations that you can guarantee will trigger your anxiety?" So, maybe it's speaking in public, maybe it's signing up for a triathlon, maybe it's simply leaving your house, maybe it's driving on the highway, maybe it's calling and asking somebody out on a date or something. We want to find the goto activities that are going to -- on purpose -- trigger your anxiety, trigger your uncertainty, you're going to rehearse in your head, you're going to predict what is your worry going to say, and then you're going to move into it. And as you were just saying, it's not about just sort of moving in gently and kind of, "Oh, I'm just going to put my toe in the pool." You're going to move in it with volition. You're going to bring energy into it. You've got to have this sort of, "Bring it on," offensive stance that leads you into the situation with energy. When you step into uncertainty and you are changing your attitude about it, even if you're faking it at first, it makes a difference. So you can say these things to yourself as if you mean it and it actually gives you enough momentum to move forward. So when I'm talking to people about practicing uncertainty -- you know, I had a kid who hadn't left his bedroom in eight months, and one of the homework assignments was he's going to go into the grocery store and he's just going to up to the deli and order some sliced cheese. It wasn't about going in carefully and doing his calming exercises and relaxing and feeling calm and confident, which is what I hear a lot in the anxiety world, right? We have to create calm confidence. No, we don't! We have to feel uncomfortable and sort of charge ahead, into this situation, with a different dialogue going on in your head, and faking it is okay at first. It truly makes a difference.

JORDAN: So, did he get the cheese?

LYNN: Yeah, he got the cheese. He got the cheese and he got the girl. He got the girl. Yeah, he just sent me his prom pictures. He's going off to college. He has kicked it.

JORDAN: That's amazing. How do you end up as a kid who can't leave their bedroom?

LYNN: Yeah, for him it was just debilitating social anxiety. It was like the world and people in it were just -- everything was a potential minefield because if he went out into the world and had a conversation or, you know, tried to order cheese, after would go through that interaction -- that encounter -- he would then go back to his house and go over it and over it and over it and think about what he had done wrong, think about what other people were probably thinking about him, and it became so painful for him to just be stuck in this absolutely harsh internal environment that he decided he would just eliminate all of the triggers. So basically, you know when people get agoraphobia and when people get depressed because of anxiety, a lot of it has to do with -- they say, "This is too painful for me and my anxiety to go out in the world, so I give up." He was pretty depressed when I met him, but it was all based on being terrified of what other people thought of him.

JORDAN: Yeah, I can identify with that. I understand that. How old was he when he had that?

LYNN: Well he'd had it all through his childhood and then it really sort of blossomed when he entered high school because of course the social interactions of high school are that much more complex and nuanced and risky and that's when it sort of exploded for him. I met him when he was supposed to be starting his sophomore year in high school. He hadn't gone to school in months.

JORDAN: Right, so he was -- yeah, he had to start over. I can imagine.



LYNN: Yeah.

JORDAN: How do we help other people get through this stuff? There's a lot of people listening right now who are like, "Yeah, this is all great. I wish that my brother, sister, father, son, would take a page out of this," because a lot of the folks that have been listening to this show -- they have been working on themselves moving forward. They're interested in this stuff or they've just never had to experience it but they might know somebody else who could really use this. How do you ease people into these things?

LYNN: This is sort of a backdoor answer to your question. But, I think that one of the things that turns people off from getting help for these things is that they feel like it's going to be complicated, they feel like it's going to take forever -- maybe they're just turned off by the whole touchy, feely, psychotherapy like, "Oh, so let's talk about the way you feel." And I think the seed you want to plant with somebody who's struggling is that when you get expert help for things like anxiety or depression from people who really know how to treat it, it is really concrete, it is really not that complicated, it's a very active process -- it's not as touchy, feely, mushy bleh as people imagine it.

You know, when I watch the way that therapy is portrayed on television, God, it just -- to me I think, "No wonder people find therapists annoying." And I think that what I want people to know is, you can go at this in a very concrete, strategic, energized way, that is really different, I think, than what a lot of people perceive the process to be like. You know, my goal is to make therapy fun. The biggest compliment I get is when I say to a kid, "When do you want to come back," and they all say like, "Well what are you doing tomorrow?" So it's really -- that would be the seed that I would want to plant with people, is really a seed of optimism and hope and that this really is treatable and it's really energizing to figure it out. I see it all the time.

JORDAN: Well Lynn, thank you so much for this -- super useful to be able to identify the patterns that are happening in ourselves, in

others, and then obviously having the strategy of the three Xs and generating some autonomy to be able to get through it.

LYNN: Yeah.

JORDAN: Because even if you don't think, "I'm an anxious person," everybody's got a little bit of fear towards something. I mean, I routinely spot things that I didn't even know I was afraid of and go, "Oh, that's why I haven't done that yet," or, "Oh, yeah, you know, I have neglected that and the real reason is because ugh, it just seems a little overwhelming."

LYNN: Yeah.

JORDAN: It's not -- you don't have to be stuck in your room for eight months to be able to use these tools.

LYNN: Exactly. Yeah, because we all need to keep moving and I think that right now in our culture that message is really important because we've got a lot of young people that are shutting down and it's not going to get them where they want to be.

JORDAN: Thank you so much.

LYNN: Thank you.

JORDAN: Great big thank you to Lynn Lyons. That book is [Anxious Kids](#), [Anxious Parents](#). It's a great book for parents, of course. It's a great book if you're interested in the topic of anxiety in general. And if you enjoyed this one, don't forget to thank Lynn on Twitter. We'll have that linked in the show notes as well. Tweet at me your number one takeaway from Lynn. I'm @theartofcharm on Twitter. I also want to encourage you to join us in the AoC challenge at [theartofcharm.com/challenge](http://theartofcharm.com/challenge) or text 'AoC' -- at a red light hopefully -- A-O-C to 38470.

The challenge is about improving your networking and connection skills, it's about inspiring those around you to develop a relationship with you -- personally or professionally.

It's free and it's a great way to get the ball rolling and get some forward momentum. And it's for both guys and gals, so don't lose track of that. We'll also email you our fundamentals Toolbox that I mentioned earlier in the show. That includes some great practical stuff, ready to apply, right out of the box on reading body language, charismatic nonverbal communication, the science of attraction, negotiation techniques, networking and influence strategies, persuasion tactics, and everything else that we teach here at The Art of Charm. It'll make you a better networker, a better connector, and of course, a better thinker. That's [theartofcharm.com/challenge](http://theartofcharm.com/challenge) or text 'AoC' to 38470. For full show notes for this and all previous episodes, head on over to [theartofcharm.com/podcast](http://theartofcharm.com/podcast).

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