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Betsy Kindall (00:08):

I'm Betsy Kindall.

Nicole Fairchild (00:10):

I'm Nicole Fairchild.

Stacy Moore (00:11):

And I'm Stacy Moore.

Betsy Kindall (00:12):

And this is Arkansas A.W.A.R.E, a project to advance wellness and resiliency in education.
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Welcome back, everybody. We've been diving into the topic of anxiety and today we're going to talk a little bit more about incorrect conclusions or some of the stuff that we... How our anxiety might be thinking based, how it might be sort of survival brain or a amygdala based and then how we maybe come to incorrect conclusions.

So just so you know, some of the resources we've been looking at is how to rewire your anxious brain by Dr. Catherine Pitman and Elizabeth Carl but then also the book called 'The Anxious Truth' by Drew Linsalata And I'm going to start by reading you a little something out of Drew Linsalata's book.

He says, "When you want watch a scary movie, you can be terrified but you know you're safe. When you ride a roller coaster at an amusement park, you can be afraid but you know you're safe. When you experience anxiety, you are scared but this time your brain has decided you are not safe and that incorrect conclusion is what causes the spread. The incorrect conclusion is what causes the spread. Somehow it was decided you are not safe and because of that, your body reacts."

So it does make me think about my daughter and her fear of needles and the first experience. She was little. She was two. She was two years old. I didn't try to say or wind this up with her in any way at all but that experience made her sure in a deep level of her brain, that this was not safe. Needles are not safe. So there's no talking her out of it because she's is not connected to the thought. The thought is not connected for her. I cannot logic her out of it. She made an incorrect conclusion when she was a toddler.

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Stacy Moore (02:13):

Okay. So can we stay there for a second because it's not like I'm consciously deciding that this is dangerous. In my brain-

Betsy Kindall (02:22):

Right.

Stacy Moore (02:22):

... my brain alone is... I'm making that decision.

Betsy Kindall (02:26):

The decision was made long ago-
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Stacy Moore (<u>02:28</u>):

And it was body based or it was something where it's not like, "Oh, I'm just going to choose this."

Nicole Fairchild (02:34):

The other book we've been digging into also tells us that, that's pretty common.

Stacy Moore (<u>02:40</u>):

Yes.

Nicole Fairchild (02:42):

It says having a protective fear-producing amygdala is nearly universal among humans. Therefore, it's not surprising that anxiety disorders are the most common mental disorder people experience affecting approximately 40 million adults in the United States and that's not even digging into the children.

Betsy Kindall (03:01):

Oh sure. That's right. That's right. So what do we do when we can't fix it with logic? What do we do when we can't... Because I can't logic my kid into getting her shots.

Stacy Moore (<u>03:13</u>):

We have to rewire and reteach our brain that that fear is no founded.

Betsy Kindall (03:19):

And here's the bad news. The bad news for many people is this. In order to relearn the experience, you have to experience it. You have to endure the anxiety. You have to walk your body through that experience and relearn, come to a new conclusion and the only way you do that is by experiencing the anxiety.

Nicole Fairchild (03:44):

Yeah. And I have a great example, I think. My middle child is an animal lover. Our dog, yeah, she might as well be her dog. I mean really. She loves that dog and animals in general. She's an animal lover but what a lot of people don't realize is when she was young, she was terrified of animals, all animals. Stand on top of a hay bale screaming at any animal.

So something there had made her literally terrified but over the course of time we got more of a pet dog and she had to basically relearn that. That this is not terrifying and I do love the dog and the dog does love me and not all animals are dangerous.

Stacy Moore (<u>04:33</u>):

The uncomfortableness of that is that when she was learning it, she had to feel it.

Nicole Fairchild (04:37):

She did. Yeah.

Stacy Moore (<u>04:38</u>):

She had to feel the anxiety. She had to feel the bodily responses. She had to get through it knowing that this is my body's response and it's not necessarily... It's a fear response and I've got to get through it.

Betsy Kindall (04:51):

It does make me think too Stacy, about some of the conversations we've all had together about how discomfort is not the same thing as danger.

Stacy Moore (<u>04:59</u>):

Yeah.

Betsy Kindall (05:00):

And suffering to be expected. I have no assumption that I will not suffer. I will suffer and I can endure discomfort. I can and I will and I do.

Stacy Moore (<u>05:13</u>):

So this reminds me in therapy of exposure therapy.

Betsy Kindall (05:16):

Yeah.

Stacy Moore (05:16):

We've heard of that for a long time in graduate school. They would talk about it in the figuring out your hierarchy kind of what's the less stress inducing, what's a little bit more than that, what's a little bit more than that. So if it was dogs, it would be seeing a dog. It would be standing so close to a dog. It would be... Okay now is that touching a dog? Is that petting a dog? Is that holding a dog? So getting closer and closer where you can still keep that boundary of safe, but is there going to be some fear response and anxiety in that? Yeah

Nicole Fairchild (05:47):

Yes, it's going to be really uncomfortable and it doesn't mean you have to do that all in one sitting.

Stacy Moore (<u>05:51</u>):

No.

Nicole Fairchild (05:52):

You do that in little tiny fragments here and there, build, build, build [crosstalk 00:05:57].

Betsy Kindall (<u>05:57</u>):

It reminds me of... Not to [inaudible 00:05:59] walk, because I don't want to go down this road, but just a quick quip. It reminds me that... The greatest lessons I've ever learned in my life are from the valleys, not from the mountain tops and that we have to travel through our feelings and work through our feelings in order to get to the other side in a successful way.

How can our kids ever learn to cope if they're never in situations where they have to? And it's the same thing in the classroom and I think as a teacher and as a parent, for sure, that is the hardest thing to do is step back and let them work through those things because... And I can just speak for myself. I'm a fixer. I want everybody to be okay and it's painful for me to watch people hurt. But what I've come to understand is that if they can grow from those experiences, then they're going to be better off then not feeling those things at all.

Stacy Moore (06:57):

Okay. So have I said this quote before on here? Betsy, that reminds me of people don't... People are not likely to change unless the pain of change is less than the pain of staying the same. The pain of change is less than the pain of staying the same.

So for you, it's more painful to watch these people experiencing this than it is for you to be like, "Let's have it out." Let's have the conflict/ let's have the anxiety, that's less painful and so let's move that direction.

So anyway, as far as referring back to what we were talking about, it is having to push through, I know this is going to be painful.

Betsy Kindall (<u>07:33</u>):

Yes.

Stacy Moore (<u>07:34</u>):

So it's where my daily functioning is so painful and so hard that I'm willing to do this because I want to get into a better place.

Nicole Fairchild (07:41):

And I've heard people say, I can't drive to such and such. I can't drive outside of the city limits and then all of the sudden... And they're fine with it and they've accepted it and the pain of change would be too much.

Stacy Moore (<u>07:57</u>):

Yeah, yeah.

Nicole Fairchild (07:57):

They were able to accept that until all of a sudden they've got a child that needs to go do this thing and it's going to require them-

Stacy Moore (08:04):

Yes.

Nicole Fairchild (08:04):

... to somehow drive outside the city limits and in that moment, you've got to figure out how can I build up my capacity to do what I need to do for my child?

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Stacy Moore (08:14):
Yeah.
Nicole Fairchild (08:14):
The pain of watching them look at me and say, "Why can't you just drive outside the city limits?"
Betsy Kindall (08:22):
And I think that connects with exactly what we're talking about. The work is going to be hard. There's no
way around it.
Nicole Fairchild (08:30):
No.
Betsy Kindall (08:31):
And I guess too, this goes back to, I've said it three times now, shout out to you for willing to do that
work but in order to work through to a better place with anxiety and fear and panic, it's going to be hard
and it may be painful, but it's going to be a lot of work, probably the hardest work you've ever done to
get through to that other side. But boy it's worth it.
Stacy Moore (<u>08:56</u>):
Yeah. Because your thinking brain is going to be trying to tell you all the reasons to not do it and to get
out and to be safe because... It talks about how the amygdala isn't just faster than our thoughts. Because
it's automatic, right? It's our automatic responses. But it also has the ability to override other brain
processes. So override our thinking.
        So feeling trying to override thinking can be very difficult and it talks about why that is, is that
there's fewer connections from the cortex to the amygdala. I know that's crazy.
Betsy Kindall (09:25):
Yeah.
Stacy Moore (<u>09:25</u>):
I don't know if that makes sense. There's many connections from the amygdala to the cortex so our
feelings highly-
Nicole Fairchild (09:33):
Influence your thoughts.
Stacy Moore (<u>09:34</u>):
... influence our thoughts.
Nicole Fairchild (09:35):
Yeah.
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Stacy Moore (<u>09:35</u>):

Our thoughts, getting those thoughts down to our feelings?

Betsy Kindall (09:38):

Not very effective. The road doesn't really go both ways with that. Yeah.

Nicole Fairchild (09:42):

And I do think it's interesting too. We've constantly kind of referred back to the enneagram a little bit about just sort of how we personally kind of look at things where I'm a little bit more... I'm a little more in my head. It's easy for me to connect with my thoughts. I can be oblivious to my body, where the two of you it's way easier for you to feel it in your body first.

Stacy Moore (<u>10:04</u>):

Oh yeah.

Nicole Fairchild (10:06):

So people are going to have natural sort of ease with one or the other or identifying their feelings or what their body's doing or maybe what's going on in their head.

Stacy Moore (<u>10:15</u>):

Yeah because Nicole, I remember having the conversation with you where we were talking about, I don't know, cognitive behavioral therapy or the answer. Something or maybe it was just identifying emotions when we were talking about permission to feel, and it was really this consideration of how therapy a certain way may not work for everybody as far as if they do CBT because for me, I feel it first. I feel it and then I have to go, okay, where's this coming from or what is this? Or even identifying it.

But thoughts are not my first. It comes from my gut first. So when you think about therapy and you think about... Okay, can CBT be effective in that? Well, maybe but if it is coming from your feelings first, there's a different approach there.

Nicole Fairchild (11:03):

Yeah. And that's probably why I like CBT because I'm like, "Yeah, let's get to those thoughts. I know what my thoughts are. I can tell you my thoughts right now. How many do you want to know? I've got them all lined up."

Stacy Moore (<u>11:10</u>):

Yeah. And mine's, it just feels this way. Okay. Let me go back and see if I can think of thoughts that... But it's just feels.

Nicole Fairchild (11:16):

Yes.

Betsy Kindall (<u>11:17</u>):

And I'm more like that too.

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Stacy Moore (<u>11:18</u>):
Yeah.
Nicole Fairchild (11:19):
Yeah. Yeah. So sometimes that is easier and really the downside for me is I have had... I've probably had
two panic attacks before, although I really hesitated in calling them that, but they were a seizing anxiety.
They hit me out of nowhere. I had no conscious thought about it. I just knew all of a sudden, I wasn't
sure what was going on with my body and I'm much less connected to my body.
        So it wasn't as easy for me to, to say, "Oh, it's just that." Because I don't pay attention a whole
lot. I tune my body out quite a bit.
Betsy Kindall (<u>11:59</u>):
I can't tune my body out or it sends me to the emergency room.
Stacy Moore (<u>12:03</u>):
Yeah.
Nicole Fairchild (12:03):
Really?
Betsy Kindall (<u>12:04</u>):
It has sent me to the emergency room, yeah.
Nicole Fairchild (12:04):
Yeah.
Betsy Kindall (<u>12:06</u>):
It's not something that it will allow me to do anymore.
Stacy Moore (<u>12:09</u>):
I feel like again, putting this out there though that be careful about anxiety and symptoms and what
you're feeling and making sure it's not a medical because hypoglycemia and low blood sugar mimics
what a panic attack might be.
Betsy Kindall (<u>12:24</u>):
Yeah.
Stacy Moore (<u>12:24</u>):
A heart attack mimics what a panic attack might be. So don't be reasoning is this my-
Betsy Kindall (12:30):
Yeah.
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Incorrect Conclusions (Completed 10/14/21)

Transcript by Rev.com

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Stacy Moore (12:31):
... amygdala, is this my cortex?
Betsy Kindall (12:32):
Yeah.
Stacy Moore (<u>12:33</u>):
If you're having some of these symptoms, they really... Being careful about and mindful of taking care of
medical first.
Betsy Kindall (12:40):
Yeah. Yeah.
Nicole Fairchild (12:41):
And I went to the emergency room. I was one of those lame people. That's how it felt to me. It feels so
lame and dumb to go into the emergency room and say, "I don't know what's going on with my body. I
don't know what's going on with my body, my heart. I've got heart disease in my history. I don't know
what's going on." And they're just like, pat, pat, it's just an anxiety.
Stacy Moore (<u>12:59</u>):
Yeah. But then you can also go in and your sugar be like me and be at 40 and 20.
Nicole Fairchild (13:04):
Yes.
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Stacy Moore (<u>13:05</u>):

And oh yeah... Anybody else, if you had given them the symptoms and I hadn't checked my sugar. I didn't go in but I did check my sugar with a blood monitor or a sugar whatever. So I would rather go in and be safe and then be like, "Oh my goodness, it's just anxiety." But to figure that... Because then once you know that... And you can say, "Okay, this isn't physical necessarily. They checked me out." Now we can go on a new path of what do I do now?

Nicole Fairchild (13:32):

That's exactly right. And while I did experience shame. Especially, I'm like, "Good gravy. I'm a therapist and here I am in the emergency room."

Stacy Moore (<u>13:38</u>):

Now, you know what it feels like you can relate to people.

Nicole Fairchild (13:41):

But that's the truth. That is the truth. It did help me to do that but it also helped me to be a little bit more aware. Okay, that's what that feels like.

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Stacy Moore (13:49):
Yeah.
Nicole Fairchild (13:49):
So maybe I can differentiate a little bit better now. Maybe I can pay a little bit more attention to my body.
Paying attention to my body is a learned skill where maybe for other people paying attention to their
thoughts is a learned skill.
Stacy Moore (14:04):
Yes.
Betsy Kindall (<u>14:04</u>):
Agreed.
Nicole Fairchild (14:05):
Yes.
Betsy Kindall (<u>14:05</u>):
Yeah. That makes sense.
Nicole Fairchild (14:07):
Yeah. That can be difficult. And really when it comes to anxiety, kind of like we've said before, they go
hand in hand. It's chicken and egg. It's we know which comes first and sometimes it's going to hit you
sideways but the skills really do still help.
Stacy Moore (14:22):
I love this piece because you're talking about that connection between mind and body and how we talk
about our brain. We talk about neuroplasticity. Betsy has mentioned before about things that we can do
that change the wiring in our brain. And it talks about even imagining performing certain behaviors can
cause changes in circuitry.
        So we talk about this being scary. We talk about this being hard. We talk about different
hierarchies of different levels of nervousness, but even just starting imagining it, imagining good
outcomes can make changes in our bodies-
Betsy Kindall (<u>14:54</u>):
And in our brain.
Stacy Moore (14:54):
And in our brain.
Betsy Kindall (<u>14:55</u>):
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Yes. It gets you ready.

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Stacy Moore (14:56):
Yeah.
Betsy Kindall (<u>14:56</u>):
It gets you ready. Yeah. I think I had read research at some point that imagining yourself shooting the
perfect free throw, prepares that same wiring in your brain to actually do it.
Nicole Fairchild (14:56):
Muscle...
Betsy Kindall (<u>15:09</u>):
Yeah.
Stacy Moore (15:11):
So can we go there? Can we go a little bit to what are some specific things that they talk about? Because
that reminds me of... When we're talking about imagining it kind of reminds me of mindfulness, even
though it's not the same thing. We can talk about imagery and breathing. So what are some of those
things that people may want to look into if they're like, "Okay."
Nicole Fairchild (15:28):
Well, and I think one of the first things you have to do is decide is this thought based-
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Stacy Moore (<u>15:28</u>):

Yes.

Nicole Fairchild (15:33):

... or is this... I've got to take care of my body and really maybe it's both, but maybe your thoughts are bothering you more or maybe your body's bothering you more. So differentiating that because if it's your thoughts, a run might help because you are keyed up, but you got to kind of what do I really need to calm down more?

Stacy Moore (<u>15:55</u>):

Well, to dig in a little bit on the cortex based anxiety, which is really thinking patterns that cause anxiety. I thought some of those were pretty fascinating and I mentioned this last time, but identifying really what pushes that is how you look at yourself. How do you view yourself? And there's even a checklist in here, the optimism versus pessimism in the cortex. Do you always expect the worst or do you do that imagery where you go through seeing the perfect free throw and about how that impacts you?

There's some really interesting exercises in here also that not only will they help you assess those things, but there's also an assessment too for your perfectionistic tendencies. I thought that was pretty fascinating because perfectionistic tendencies, nobody's perfect. She basically goes on to say, you're really setting yourself up there if you have some of these tendencies and then she digs into guilt and shame and how that affects.

And we've talked a lot about a lot of that information on other episodes that we've done but I loved the things that she talked about as far as imagery but I also love the information she shared about coping thoughts and about how we control what we think and choosing what we think intentionally to change an outcome.

Nicole Fairchild (17:37): Yeah. Stacy's dropped it a little bit so I'll just say answer automatic negative thoughts. That's Dr.-Stacy Moore (<u>17:42</u>): Oh, sorry. Nicole Fairchild (17:42): ... Daniel Amen-Stacy Moore (17:43): Yes. Nicole Fairchild (17:44): ... who talks about automatic negative thinking, which are basically cognitive distortions. So being able to sort of do that work of saying that thought isn't entirely true or here's what's more true. So they're always talking about me. No one ever listens to me. Really, no one ever? They're always? They do nothing else but talk about you? You know what I mean? So having a thought that's a little bit more like it feels like people are against me. It's not necessarily a positive thought. It's just more true and it will help you to stabilize. So some of it could be that kind of work. Stacy Moore (<u>18:20</u>): Right. Which is what she says. Replacing the thoughts because you simply can't erase them but you can replace them with a positive thought instead or the truth. Remind yourself what is the truth in this situation or in that thought, which was fascinating. Also, replacing worry with planning. Nicole Fairchild (18:39): Yeah. Stacy Moore (<u>18:39</u>): And she talks quite a bit about worrying and how that feeds anxiety that we experience. Nicole Fairchild (18:47): Right. But once you make a plan, you can set aside and say, I already know what I'm going to do. Betsy Kindall (<u>18:50</u>):

So if we don't know, if this is amygdala, amygdala, cortex, whatever girls. I'm not sure where I'm at. I like how she does the sequence, which Nicole may not like this because it's not giving out tools or magic wands, but in some ways it really does well for my brain.

Nicole Fairchild (19:08): Okay. Everybody's listening now. I know. Betsy Kindall (<u>19:11</u>): Well no, because it's... Well, it's a sequence and it's saying, "Okay, yeah." The process of rewiring your brain is going to be gradual but let's say we don't know what it is. Okay. So first let's talk about those three things that we already know, but that do any of us do well and that's relaxation, sleep and exercise. Because if we're thinking about for anybody, that's going to be healthy. Nicole Fairchild (19:31): Absolutely. Betsy Kindall (<u>19:31</u>): And so making sure that you've got good relaxation-Nicole Fairchild (19:36): Skills, habits. Betsy Kindall (<u>19:37</u>): ... skills in place, habits in place. Stacy Moore (<u>19:39</u>): And I think that's something that has to be... I think, when, particularly in this book, but I think research will tell you when we are talking about relaxation, we're not just talking about taking a break here. We're talking about scheduled time for yourself-Nicole Fairchild (19:55): That's intentional. Stacy Moore (<u>19:56</u>): ... that's intentional. Even scripted, visual imagery-Betsy Kindall (19:59): Absolutely.

Stacy Moore (20:00):

... breathing, mindfulness. Those things could be scripted. Sleep. Sleep is going to affect how you think. It's going to affect how you feel. So its both ways and then so it's exercise.

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Betsy Kindall (20:10):
Yeah.

Stacy Moore (20:10):
Exercise affects us. Nicole was talking about the endorphins last time.

Nicole Fairchild (20:14):
[crosstalk 00:20:14].

Stacy Moore (20:14):
That's right.

Nicole Fairchild (20:15):
Yeah buddy.

Stacy Moore (20:16):
So those are going to monitor... That's going to be both. So then, she go
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So those are going to monitor... That's going to be both. So then, she goes down to go monitor your thinking for any of those anxiety inducing thoughts. So that's where we're talking about the ants and Betsy was talking about those coping skills because maybe they're there. So just monitoring, scanning for that and then replacing those with coping thoughts, which is what they've also talked about.

Then it says... This is interesting. Determining your life [inaudible 00:20:40] interferes with those goals. So to me, that's the motivation, that's the daily functioning, that's the why is this important to me because it's about to get harder.

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Betsy Kindall (20:47):
Yes. Preparing yourself for the-
Stacy Moore (20:51):
Yeah.

Betsy Kindall (20:52):
... for the cost.

Stacy Moore (20:52):
Yeah. This is going to be a plan so what am I... Is this getting in the way of what I want in my life? So then going back to identifying those triggers of fear and anxiety that interfere with those goals.

Betsy Kindall (21:02):
Yeah.
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This transcript was exported on Oct 15, 2021 - view latest version here. Stacy Moore (21:03): Why is it stopping me? Because then you're getting into exposure exercises. Nicole Fairchild (21:07): Yes. Betsy Kindall (21:08): Yeah. And I think at that point you can't... No matter what you're feeling or thinking, you have to act. You have to take action to get through that. Nicole Fairchild (21:19): Yeah. Yeah. There comes a point where you can prepare your mind and then there's a point where you have to do. Stacy Moore (21:26): Absolutely. And I think that can be... That is the place that can be overwhelming to folks. So in that piece of action, I think it's important that you can take baby steps. Baby steps that eventually become ingrained in your life to be bigger steps that lead to the rewiring. Nicole Fairchild (21:44): And it doesn't... It is hard. Betsy Kindall (21:45): It is hard. Nicole Fairchild (21:46): It is hard at first but it doesn't stay that hard. You do adapt and it does get easier. I know people hate to hear that, but it does and to the point that at one point it might be completely natural. Stacy Moore (21:57): And again, to do this with a therapist. Nicole Fairchild (21:59): Oh sure. Stacy Moore (22:00): Don't go it alone. And we're not trying to be your therapist here. So being able to do this with somebody who knows your reactions, who knows your medical condition, who knows-

Nicole Fairchild (22:10):

Yeah.

Stacy Moore (<u>22:11</u>):

... how you're progressing and can be supportive.

Nicole Fairchild (22:13):

Yeah. That's great.

Well, we hope some of this information has been helpful to you about anxiety. We would love to hear from you. We always love to hear from you and as I've said before, Betsy's email address is easy to find.

Betsy Kindall (22:24):

Very funny.

Nicole Fairchild (22:27):

But we want to hear from you and we love interacting with you on social media. So keep in touch.