



TEFOS 2019

The Executive Function Online Summit

Hosted by SethPerler.com

Turning Worriers into Warriors! Teaching coping, problem-solving, and resiliency.

Seth Perler: Hey everybody, what's going on? This is Seth Perler of sethperler.com And the executive function online summit. And I'm here today with Dr Dan Peters. He's an author and he's a cofounder and executive director of the summit center. And his career is all about assessment and treatment of children and adolescents and families and he specializes in overcoming worry and fear, learning differences, um, and issues related to giftedness into he and he has a parenting podcast, uh, called parent footprint or that's part of the name, um, and a parent and online parenting community and has done many, many other things. So, uh, without further ado, I want to introduce Dr Dan and how you doing today?

Dr. Dan Peters: Hey Seth, happy to be talking.

Seth Perler: Awesome. I'm super excited. What are parents gonna Learn today?

Dr. Dan Peters: All right. Today you are going to learn about the way the brain and body connection exists with the fight and light response, which actually explains a lot of the ways our kids act and feel and behave. We're going to learn specific strategies for identifying and working on what we're going to call the worry monster. Different levels of anxiety and fear. We will learn about thinking strategies, mindfulness strategies and behavior strategies to come up with a targeted approach to taking down worry and fear.

Seth Perler: Awesome. Uh, one of the most popular blogs on my site is the one about anxiety. So I know that this is a super big topic for people to hear about. Um, the ta topic, the name of your talk today is turning worriers into warriors, teaching, coping, problem solving and resiliency. So we've, before we get into, um, the bulk of it, let's do a little intro about you. So Dan, tell us about who you are outside of work. What, what's, what are you interested in? Who are you as a typical human being as a human?

Dr. Dan Peters: Okay, so as a human being, I really enjoy nature and the outdoors. I find that things make a ton of sense when we are connected to the natural world. And particularly with what I do. I spent a lot of time in this office and then the chair across the way there. And so getting outside is really important to me. Um, I love to build, I love to make things and I love to uh, create and vision, ideas, programs, just stuff. And then of course I like connecting with people who are important to me.

Seth Perler: Awesome. Awesome. And then as far as professional background, what do we need to know about you today or what do you want to share?

Dr. Dan Peters: Um, I'm a licensed psychologist by training and I've always worked throughout my training and career with children, adolescents and families and um, really the core of helping children and adolescents and parents understand those people in a way that maximizes, uh, growth and potential. I always had a problem in graduate school and beyond with the medical pathologizing view of human nature and human behavior and always struggled with how are we trying to help people be better versions of themselves when we give them labels that only focus on their deficits and their problems. So something that's just been important to me in my work over the years has been how to create a strength based and realistic understanding of oneself, accepting, understanding what is your strength profile is accepting what the challenges is, which is I know a lot of what this summit is about. And then finding ways to build skills so you could still reach your goal, feeling good about who you are.

Seth Perler: Okay. That just opened like 700 Pandora's boxes that I want to do followup questions with. But we are not going to get into all this followup questions, but I do want to ask, how did you get into this

Dr. Dan Peters: important to you? Well, so you know, like most things, things ultimately become personal. Uh, the drive becomes personal and, um, I think, you know, like you knowing how much, how wonderfully you share your story, it took me a while to realize how much worry and perfectionism actually impacted my life growing up. And it didn't all come to a head probably until towards the end of graduate school when or even beyond early in my career when I realized and resonated with so many of my clients who were experiencing worry, perfectionism and fear that wow, this is something that I experience. And then having young children and seeing my children experienced these things, it all coalesced into this mission to help people overcome, understand first, and then learn how to overcome and manage worrying anxiety. Because I know firsthand how much it limits us, paralyzes us, and keeps us from living fully.

Dr. Dan Peters: So it ended up being a three 60 with myself, my clients, my kids and, and then the other thing being a perfectionist and recovery I like to call it is, um, I like, I like to see things get done. I like to see, I need to see progress. And so as a psychologist sitting day in and day out with people, I need to see change because that's what I feel my job is. Help people realize that their goals and what I found was helping people learn about anxiety, what it is, give them, give them skills, help them develop a toolbox. There was a meet, you know, in many cases almost immediate and incremental change. And so I just became passionate about, hey, this is information that works and if you have this information you're going to be able to move. Because I know that I, I wish I didn't have to wait till age 25, 26, 27 to get this information myself.

Seth Perler: Yeah. Yeah. We really seem to put ourselves in these situations and then it's a mirror and it's mirrored back to us who we are and then we can really dive, we can run from it or we can really dive into it and really learn some amazing things to become the wounded healer. Have you heard of that before?

Dr. Dan Peters: Definitely.

Seth Perler: Yeah. Healer. This idea that um, we, we help people with what we need help with often times.

Dr. Dan Peters: Right. And then the goal ultimately is to just what was a, what we learned a lot in the graduate school was, um, the goal is also to heal those wounds. So when you're out there healing, you're your own person in a wounds experience is not being projected onto others.

Seth Perler: [inaudible] awesome. Um, I want to ask you about one more thing, even though I could ask you about 50 from the little intro here because I think it's really relevant before we dive in deeper. And that was that you used the word pathologizing and for parents who have never heard that word and you're, you're referencing how that really was a turnoff to you and you, uh, wanted to go a different direction. Can you unpack that a whole concept of pathologizing the other direction you were going? Just a little bit more.

Dr. Dan Peters: Sure. So if we just take a step back, psychiatry and then psychology coming out of psychiatry, psychiatry, coming out of medicine. Um, everything within the medical community historically has been you need to identify the pathology or the disease and then you treat the disease, which of course makes sense with cancer or diabetes and all the other various annual physical ailments that we humans get where there seem to be over time. A disconnect is when we're dealing with challenges with behavior challenges with emotion regulation, emotional regulation, which I know we'll be talking about challenges with let's say executive functioning and everything is put into a label which denotes only that you have a problem that needs to be fixed. What happens is there is a heavy dose like in the medic in medicine, a heavy dose of this is what's wrong with you and we need to fix what's wrong with you and within the human development, the world of psychology, it leaves out the whole other part of a person, which is all of the strengths and all of the drive and all of all the other stuff that we can build.

Dr. Dan Peters: When we're, instead of being over-focused on a problem and telling a person or a child, they have a, which is, does not create I think a positive foundation for um, self efficacy, for self confidence and for growth. So we've tried to get away from you have this problem, we want to identify weaknesses and challenges and sorry, let me say one more thing. Labels and diagnoses are very useful. For example, ADHD of course, is going to be a very common diagnostic category for people who have executive functioning issues. That's not to say that those things don't matter. It's how do we use those labels to describe behavior but then really think differently about how we focus on supporting growth and development.

Seth Perler: So do we misuse labels?

Dr. Dan Peters: I think what we do is they get overused and then over simple that the label then it's like that, that, that saying, um, to define as to destroy, um, it all of a sudden,

so if you tell a teacher this child has ADHD, each teacher has an absolute snapshot of what that means and could mean very little for that individual,

Seth Perler: right through their lens. Everybody has. Yeah.

Dr. Dan Peters: Right. So I think it does get overused and I do think it gets over-simplified [inaudible]

Seth Perler: one of the coolest things about these interviews so far is the recurring themes that are coming in. And one is that labels have a purpose, but we need to really use them for the purpose that they're intended for and not overuse them and read too much into them, but actually use it to help us figure out useful information to help a human being. And then, uh, another one about the pathologizing and how, and then also what you're about to talk about, about how we're sort of neglecting to look at this whole other aspect of a human being. Um, and thinking that, yeah, we can find some quick fixes and stuff, but there's some real depth going on here that we want to dive into. Sorry, I hope I didn't interrupt you too much there. Um, so can you give us your definition of executive function? Do you have a one sentence definition and can you unpack that?

Dr. Dan Peters: Um, I've been, I've been thinking about that question and what I, what I've come up with is, um, for me, executive functioning is emotional. The ability to regulate one's emotions and behaviors.

Seth Perler: And what does that mean? That

Dr. Dan Peters: means it's the ability to have metacognition, be able to think about your thinking. So you have the ability to pause and plan a behavior or manage an emotion. So I think about it in terms of a, a tool and again, there's always exceptions to this and life, which we know this, we'll talk about why we have the fear responses to not be able to do that, to keep us alive from being eaten by Saber tooth tiger. Um, however, outside of that, my experiences, those who have executive functions that are developed and continue to grow, are able to think about a response and plan a response as opposed to just doing something without giving it to some pre-thought.

Seth Perler: Okay, awesome. So along those lines, if you're working with one of your clients and they come in and, and in your mind you're saying, wow, that kid's really struggling with x, y, and Z. And one of the things they're struggling with is executive function. What do they look like when they start working with you? Maybe you can even think of one year clients or one of your people. What do they look like when they start working with you and they're really struggling, I guess, what does it look like when they're struggling with executive function and then you've worked with them and taken them to point B where you can breathe a sigh of relief and go, okay, this kid is going to be okay. We've really helped them turn a corner. What sort of that journey like in your work?

Dr. Dan Peters: Well, so what I, what I often find is when a child adolescent Neh comes in and of course the older the individual, the more ability for the metacognition they'll

have, the more reflection ability day they'll generally have, um, is there's problems and things feel out of control and chaotic and bad things are happening with teachers and parents, but they don't know why fully and they don't know what to do about it. So the first process is trying to unpack what are the things that are going wrong and is there a pattern. Um, I never know when my assignments are. Um, I'm blurting out when I'm upset. Um, I'm barging in on friends, I, um, procrastinate and I just stay on my electronics and I don't do any work. So it's starting to develop what are the things that are happening and what are the patterns and then this is a key point.

Dr. Dan Peters: Is there any desire to change those things? Cause I know that's like in your experience too, like if we often get kids who, um, parents bring them in parents and you need help, but we're not going to get anywhere if there is not that connection with the individual that I do want something to be a little different and I'm open to trying some things differently even if they're not going to work. So first step is what are the patterns and awareness about the patterns? The next two, do you want to do anything about them? And then a lot of kids do, you know, they can't always do it, but they, they want to. And then so then the next step is what are these one, two or three things that you're going to try and report back and see if there's any change. And what we find is from those one, two or three things, one thing might work, um, they might forget, but then the question is, do you want to try something again differently?

Dr. Dan Peters: And I find that you have to be very prescribed and um, concrete because it's when something is prescribed in concrete, a child or adolescent can actually see how writing in my planner or checking my planner or putting my clothes out the night before, before I go to bed actually creates a response that feels good and then is, um, you know, it, um, it builds. So, um, I would say then the question is, you have an active participant in the work and you then have parents who are then supporting that plan with a child who is on board versus one that's being dragged into a situation.

Seth Perler: Yeah. There has to be that buy in. I talk about the reason I use the word resistance a lot and the resistance will still be there even with buy-in, but you have to have some buy-in here, professional or a parent or a teacher that doesn't start there, you know, then then adults resort to shame and punishment and things that really don't work. And they certainly don't work in the longterm if they appear to in the short term. So, um, let's see. I guess before we get into, I want to start talking about um, some of the bullet points that you wanted to cover, but before we get into that, can I ask you, Dan, what are some of the biggest blind spots or myths or misunderstandings that the adults come in with?

Dr. Dan Peters: And um, would you say related to executive functioning or related to the topic of our worry and worry monster?

Seth Perler: Let's, let's do one of each. What's a big one that people come in with? Executive function and one about worry and why?

Dr. Dan Peters: Think in my experience, the biggest one about executive functioning is if a person just tr there, if they just tried, then everything would be fine. And it's

really just a lack of effort. It's willfulness, lack of willfulness effort. Um, and I think that's, that's the most painful one to experience. And it's the most common. And it's the only time where I see it pivot is when you have a parent who had the same, has or had the same experiences and there's a ton of empathy in the situation. But most of the time it's just a lack of will, a lack of effort and they don't care. And I think that's the most painful one that kids experiences when they hear adults tell them you don't even care. And you have these kids that say, I do care. But caring is different than engaging in behaviors. Beautiful.

Dr. Dan Peters:

And then, um, okay for worry, I think. Hmm. That's, that's a tough one I think because, so here's what, it's hard for people who have not experienced worry and anxiety to, and empathize about the impact of an, that anxiety is having on their child or their spouse and to, and so it usually gets minimized and you hear that just do it. It's not a big deal. Stop worrying. And unless you've been that person, you don't know how crazy that, that, that, that statement is. And I'm thinking about this college student that I've been seeing who he's went through a terrible bout of anxiety out of nowhere, terrible six months. And the other day he said, I said, so, and he's coming out of it and he's really doing well. And I said, so what have you, what have you learned from this experience? And he said, well, the amount of empathy I have for people experience anxiety, I'm going to call this old friend of mine who in high school had so much anxiety and I was just kept telling her to stop worrying and just fuck up. So anyway. So I think that just having the, there needs to be a ton of empathy for people who worry and have anxiety and fear because it's not anything anyone wants. And it can be, it can be totally debilitating,

Seth Perler:

it can be debilitating. I think that's a really important statement because as you said, we'll say just stop boring, just get over it, you know? And that reminds me of what you said about executive function, that it's just a matter of willfulness. If you just try hard enough you can stop. And I was in a coma and then I, um, my lungs stopped and then I started having panic attacks. I don't know if you know the story, but uh, for three years with, um, W and I couldn't believe it, talk about debilitating, like it was, I mean, I could be in a grocery store and having a full on anxiety attack and nobody even knows. And that's really scary with a lot of these kids sitting in a classroom and nobody can visibly see it. Or, I guess if you're more in tune with it and attuned to the students, you can start to, but a lot of times you've got 50 minutes, you've got 30 kids and there's multiple kids that are really suffering. So should we get into the components of the brain and body responsible for the fear response? Yes. What's the fear response?

Dr. Dan Peters:

Okay, so fair response. So here, so everything I talk about today, I just wanted to quickly say how I stumbled upon this approach, which again is not necessarily anything that I created a psychoeducational approach with a very bright client that I've been seeing for years about his anxiety and very little seem to be working. And one day after a session, um, so at this particular session I was, I just was running out of ideas. So I pulled down a, the brain and I told them how the fight and flight response worked was like last 15 minutes of the session. Again, I've known him for years and his mom emails me and says, I don't know what you did in the session, but he said it was by far the most helpful meeting

he has ever had with you. And I realize, oh my gosh, like when I'm not giving, we're not giving kids this information about how things work and our human body.

Dr. Dan Peters: So this is where part of the process came from. So I've got the brain, this is what I usually bring out. Um, and what we teach kids is that there's a difference between fear and anxiety. So fear is what we need to stay alive. Fear. We have fear built into our brain and our body so we can react immediately without thought, you know, without executive functioning. Um, to jump when there's a snake runaway from a saber tooth tiger and fight another tribe who's trying to take our family and our stuff. That's why we have it. And what we want to tell kids is that this thing in our brain, which I'm trying to take off right now, okay, we do this thing in our brain. This little thing right there is called the Amygdala. It's tiny, tiny. I had one client who say, oh my gosh, I must have a really big Amygdala, right?

Dr. Dan Peters: But it's tiny compared to this giant frontal lobe where we have a house, most of our executive functioning and our frontal of functions and our captain of our ship, this thing is way bigger, which is why we want to really use this frontal lobe to override this Amygdala. So what happens is our Amygdala is always sensing [inaudible]. It's always sensing for danger with one job to keep us alive. Now when it gets triggered of quickly, something happens, it sends a message to our adrenal glands to start producing massive amounts of adrenaline, massive amounts. So we can be super human fighting or running machines just to survive. So when this happens, our heart starts beating way out of our chest. Blood is pumping to get our blood with the adrenaline to our extremities to fight. And to run, but yet it needs blood from our largest organs.

Dr. Dan Peters: So what happens? It takes blood from our stomach and shuts down our stomach because we say, do we need to Di Digest to Nachos while we're running for our life? No. So, but when the blood leaves our stomach, what happens is we get physiological symptoms of cramping, stomach aches, tangling, having to go to the bathroom and all and this. Or think about the things you hear your kids say, I have a stomachache. I don't feel well, I'm, I'm nauseous. Okay? Then what happens is the most, the most amount of blood is in our brain. We don't need to solve complex math problems. When we're running for our life, brain shuts down to the most minimum amount of blood supply that it needs. And all the blood goes through our heart, into arms in our legs. Now, so what symptoms do we get in our, in our brain, we get headaches, we get lightheaded, we get dizzy.

Dr. Dan Peters: This is like the math, uh, math things. I test anxiety. Um, I'm afraid I'm going to fail a test. And then of course all the blood leaves your brain and then you can't remember anything. So it's a self fulfilling prophecy. Um, so then the, so that's, so that's, that's the head responses that we usually see with the symptoms of headache, all that stuff. Now here's the other thing which is interesting for kids to know is, um, and I put this on the kid video, that it goes to our arms and our legs. So what happens on the blood goes to our arms and our legs, but then we get this tingling sensation in our arms and our legs and sometimes sweatiness. And this is so the blood goes two arms and our legs, but it leaves the surface of

our skin. So we can be wounded in battle and not bleed to death, which is really cool.

Dr. Dan Peters: And like a Viking movie, right? And so what we tell kids, do you need this superhuman and ability? Wow. Your triad hang out for the play while you're taking a test while you're going to a new situation. So what happens again is that we have these active, active amygdalas. Now, here's where the most important information I think comes in. What triggers the Amygdala? A large majority of the time, it is our worry. Some thoughts, right? So where fear is fear is the physical response to a stimulus. Just survive. Anxiety and worry is generally what we say in era. Irrational fear. Um, you're gonna leave and never pick me up. I'm gonna fail this test and never get into college. No one's going to talk to me at the birthday party. I'm never going to get on the good team, right? So when we have this trigger, this, we call this the cognitive model of psychology that triggers the Amygdala.

Dr. Dan Peters: So I can be sitting here and talking to Seth and all of a sudden I can't find a word which happens to me quite a bit. I could roll with it. Try to find it, make a joke, be real. Or I can start to think, I don't know what I'm talking about. I'm blowing it Sasquatch. I'm supposed to know stuff. Seth's going to push this out to all these people and I don't even know what I'm talking about. That would start to produce the fear response in me, which then produces the shutdown. So what we have to help kids be aware of is there is thinking that a large majority of the time produces that thought. And we want to help. The kids were talked about earlier with executive function, with metacognition. We want to help a child and adolescent think about their thinking. Ask the question, what am I thinking right now? Then I realized how you cut me off anytime. Here. I'm on a roll though. Um, no, and you're speaking my language, so, okay. Okay.

Speaker 3: So I'm, I'm really resisting saying anything because everything you say, I want to say, Oh yeah. And

Dr. Dan Peters: I see it in this way to this. Perfect. Okay. So, so what happens is if we can think about our thinking and ask ourself the question, what am I thinking? Oh, I'm thinking that I'm never going to camp that showed up on my reports

Speaker 4: and I, everyone's gonna be upset with me.

Dr. Dan Peters: I could take a deep breath and say, is that true?

Dr. Dan Peters: Am I never gonna pick up? Okay. No, I actually have three reports to do. Okay. How much time do I have left? Well, I have three hours in the day. What if I don't finish it? Well, I can do it later tonight. Or I could wake up early in the morning. Okay, will people really be mad at me? No, they won't be mad at me. The ones that I don't finish, I can email. They told me that it'd be okay if I was running behind. So what this becomes is resiliency and self-talk skills, which is an executive functioning technique to talk yourself through a situation which then will turn down your amend Dilla when you don't need it. Now again, we need it on when we see a stick that looks like a snake or a car drives by real fast or someone jumps scares us. We need our Magilla to help us freak out so we can

survive the rest of the time. We really need to do our best to think through what we're thinking that is often producing our internalized experience.

Seth Perler:

Awesome. Awesome. So I guess to reiterate in slightly different words for the audience, so parents of your child makes mountains out of mole hills or if they have a perception that the thing is bigger than it really is and it feels like a to them. But you know, from an outsider's perspective, it's only a two. Uh, what happens is, is that our brain tells us, oh, there's this threat. There were the Amygdala says, oh, there's a threat. And our story just believes it and goes with it and doesn't question it. But stopping to be metacognitive or self-reflective or self aware or mindful or conscious of what's going on in the mind, pausing to do that allows us to say, Whoa, is that really true? And then we can start to tell the Amygdala, dude, that's actually not the way it is. There are other ways to look at it. And we can start to have tools to reregulate the nervous system, um, and to stop signaling the heart to be set or the adrenals to be sending adrenaline to the heart and be prepping for fight or flight.

Dr. Dan Peters:

And yes. Beautiful. Beautiful. The other thing that you hit on, which was the is the next thing I was thinking about is you said mindful. So the, the three main approaches, um, cognitive, the thinking part that we just talked about. And self-talk is another one of those like the little engine that could, I think I can, I think I can see him. So influential. So influential. The second one is mindful and the third one is behavioral. So mindfulness, this is something that I also would have loved to have this information when I was young, particularly middle school. I remember this. We've been very helpful. All worry and fear exist in the future.

Speaker 4:

Cool.

Dr. Dan Peters:

All worry and fear and anxiety exist in the future. It on something that has not yet happened. What if there's an earthquake? What if you leave me? What if I fail the test? What if I don't get [inaudible] and what if? What if? Right. So I just should have said that. And so that, so for the cognitive part, it's always the what if thoughts. Thank you. So if everything is in the future, the antidote to worry and fear anxiety is living in the present. Very well put. And if there's one thing, if you're going to ask me that question, I don't know what I'm saying now, there's one thing that I tell clients is if you can ground yourself in the present moment, take a deep breath and say, yeah, everything's fine right now. I know I'm worrying about what's going to happen this weekend, but I'm going to wait for this weekend.

Dr. Dan Peters:

I'm going to, I'm just going to think about right now, everything's fine. And that is the ultimate mindfulness. You do that. That's mindfulness. People think you have to meditate for hours. It's really grounding yourself and taking some breaths and just being present right now. The other thing that's a very helpful mindful strategy is letting thoughts pass. This is like a Mather meditative technique technique that you can do informally. So I always think of us Westerners. We're like King Kong on the building with airplanes like so if those are our thoughts, we're fighting those airplanes, all these anxious, worrisome thoughts. The mindful approach is letting the thoughts pass, like the Toyota Saletru on plane or the county fair, you know, Ziff flies by, you notice it, and

then this is, it flies by again, you notice it by the third time, you don't even notice it anymore. So what I was taught by a mentor of mine when I was having worrisome thoughts was to say, hmm, interesting. I'm thinking that right now and let it go instead of tackling it. So I think my teaching kids and adolescence and practicing in ourselves as adults is so huge to stay grounded in the moment. And that is another again, executive function. Because what you're able to do is shift your attention for something you're worried about out there to something right here and now. Okay.

Seth Perler:

And it's really hard because we've practiced and the, the worry, we've worked very hard to make neural connections about the stories and the narratives that were, that were the what ifs, that we're sort of catastrophizing here. Right? So to get into the moment is a practice. It's, but one of the things you said at the very, very beginning is, I forget how you worded it, but you said something about how I think you said two things at the same time. It takes a lot to change, but on the other hand, it takes very little to change. Like it's remarkable how taking little time. Can you tell us a little bit about that in this situation? Because it does fit, you know, like I had anticipatory anxiety. I didn't even know what that was after the coma where I would think about, um, my fear and become afraid, I'd be like, oh, I wonder if I'll be anxious today. Oh, I just found a reason to start being anxious today. Let's go down that rabbit hole and it would just overtake me. So,

Dr. Dan Peters:

yeah, exactly. An anticipatory anxiety is such a common form of anxiety that as you point out, people don't even know what that is. Right. It's like, if the word is the fear about the fear or worry about the worry. Um, okay. So small things go a far a long ways. When you get what I call victories, like what we're trying to do is help kids have little victories, priests. So a little victory could be, I'm worrying about, I'm worried about the tryouts on Thursday. [inaudible] okay. What is going on right now? Nothing. Is there anything you can do about the tryouts on Thursday right now? No. Is there anything you can do about the tryouts after school? Yeah, I think if I practice my free throws I'll feel better. Okay. So when you can take a tangible action, whether it's take a, take a belief and change a belief or alter, alter a current moment, worry by putting it somewhere, you actually start to build this foundation of success and confidence that you believe, okay, I haven't solved this yet, but you know what, I was able to concentrate in school this hour or I was able to forget about it and not be stressing and obsessing over it.

Dr. Dan Peters:

So that's just one example of [inaudible] building block. But I think I want to give that next example, which leads to the beach behavioral, um, interventions. Cause I think this is where the, it's the, it's the most tangible concrete and observable is when you identify a worry or a fear and then you break it down into little bite sized pieces and then you take an action against the worry or against the worry monster. Oh, you know what I realized, I haven't even introduced the word monster. Hold on. [inaudible]

Seth Perler:

so as he's getting the worry monster, I will reiterate this concept too. Like for me, I always say that baby steps are everything. I want kids to have micro successes and it's hard because it on the one hand it takes a semester or two to see a big

shift with kids when I, in my work, but when I'm doing that, everything that gets us there are so tiny. And sometimes we miss those. But those are everything. So anyhow,

Dr. Dan Peters: yes. Yeah, absolutely. And so that fits perfectly with behavioral baby-steps and you know, we all remember that movie. What about Bob with Bill Murray, like classic movie where he was taking these actual behave, you know, one step at a time and it's so true. So if you identify being afraid of dogs, I just was used to being afraid of dogs. So a lot of people are afraid of dogs. A lot of kids are afraid of dogs and it actually be can, can become a pervasive family changing fear when all of a sudden you cannot go to a park, to a friend's house anywhere where there might be a dog. So when you're taking on this fear, you can do what's called a success ladder. And a success ladder is where you break down the fears within that one fear of let's say petting a dog would be at the top, the most fearful and the bottom like number 10 on the rung might be, I'm looking at a picture of a dog. And what you do is you start at the bottom and you often have to use an incentive program with the kids because how many of us really choose to overcome fear? It's terrible, right? So you need to have something that's little carrot that out there. That's the way that we humans work to say, if you can look at this picture, um, this book of dogs for two minutes, you know what, we'll go get a yogurt. And again, it start with something that they don't really want to do but they can do and

Seth Perler: all of a sudden to be attainable, something that they can,

Dr. Dan Peters: we're not pushing them into the pool, right? That's called flooding. That technique is considered unethical, right? Like tiny, tiny bites anyways, so you work your way up and you get the success and what you're doing with your neurochemistry is you can't be afraid and bored at the same time. And what happens? Kids go, okay, I'm done. This is stupid. Right? Okay. I've looked at a picture of a book. Now what? But they weren't able to do that before. And then it's the next one is, hey, we're going to go, what would you like to do? Would you like to go to a pet store that has dogs and we'll stand outside the window? Do you want to go in the car to a park that has dogs and we'll stay in the car? And you just keep working your way up. And I can't tell you how many people have been so fearful of this. And at the end of it are petting dogs and getting one as a pet. So it's all these building confidence and baby victories and baby steps.

Seth Perler: Can I, uh, point out something also a technique that you also just did, whether you know it or not, but something that I call a false choice. So parents watching you can also take this idea of this false choice where he gave two choices. Would you rather do this or this? There are many, many, many choices and they have a choice of saying none of them, but he didn't present it that way and he gave two very small chunks. So, so much of what we do, what all of us professionals do is chunk things down into bite sized pieces that kids are willing to take an emotional risk. This is an emotional experience for them. We have to understand that that's going on underneath the surface. So we have to make them feel safe to take

Dr. Dan Peters: the risk. Yes, safe. Like to take the risks. So they can have a success if they can, you know? Right. These are kids who are used to not feeling in many ways successful, um, and feeling of frayed, of failing again. So we do have to set that up as you're saying. So there can be a success, a high five, a smile and then all of a sudden there's a willingness to take another risk.

Seth Perler: I ain't anybody watching. I just want you to know this is so how I operate. This is how I often say that my job is, is to lead a horse to water and get them to drink. We are trying to help them, um, bus through their own resistances for their own future wellbeing so that they can have this resilience that this is fantastic. And, um, you had mentioned, um, so that they can feel success. Can you, uh, um, speak a little bit to feeling success in the body? Like you talked about feeling anxiety in the body. I just want to connect that dot for people to know that when you said that, I don't want that to just drift by. Like that's a really important statement to me that it, that's a feeling too that you and I and parents can capitalize on and make bigger like that high five is so important. It's not just we need to help them connect the dot and the metacognition. Can you speak to that?

Dr. Dan Peters: Yeah, so to see, to see the success is one thing, to have to have a child feel it is a whole nother thing and I'm going to, I'm just going to give you an example with my oldest who's a well-represented in the first warrior to warrior book because it exemplifies this and I think it rarely obviously impacted me in my work with my clients. So for, she had a lot of different anxieties, a terrible anxiety walking into school by herself, preschool, kindergarten, first grade we, I was working, I was doing baby steps with her for probably three years, like working the baby steps. I'll walk you to here. I want you to hear what your finally get to this point in the school where there's this loop and you have to have the kids get out by themselves. You can't clog it up. And so we practiced with baby steps.

Dr. Dan Peters: We practice with baby steps in the summer. Then we practiced with um, her cousin who went to school with her. And then the first week of school they would allow you to have a little budget. So then we had a friend and a cousin and it got to the point after all this practice, right? This we call the systematic desensitization is baby steps, is building muscle. And she was her friend and her cousin said they're going with their mom on the first day that she had to do it by herself. Now we're in line and it's packed and I'm thinking looking in the back and the through the rear view mirror and I see her there with her glasses and her backpack next year. And I'm like, you got this honey. She's like [inaudible]. And then I'm like, this is going to work. I turn into the point of no return where there's cars in front of you and behind you there's nowhere to go.

Dr. Dan Peters: And I see the look in her eyes, right? The fight and flight is on and she says, I'm not doing it. So now I get my fight and flight. I'm like, what do you mean you're not doing it? She's like, I'm not, I'm not getting out. Like you have to get out. So now and now, my frontal lobe is not fully working here. Um, so we pull, we get close and she's, we're three cars away. She's like, I'm not getting out. And she's a very strong willed individual. And so I pull out my last stop, which was not, w not, I don't know, not a psychologist thing to say. I said, I saw the principal and

she tended to be kind of scary. So I said, sweetie, if you don't get out, I'm going to get in trouble with the principal. I just like, it just came out.

Dr. Dan Peters: So we pull up, she yells, fine. She grabs her backpack, she takes off her seatbelt and she walks in and I'm sitting there like sweating, like breathing hard. But here's the moral of the story. My wife said, oh, mind you, she kept saying for months, it's stupid. Why do you care about me? Walking to school, it doesn't make a difference. Right. Stupid, boring. She came home, she called everyone in the family and told them what she did, and from that moment on she was ready and willing to engage in all of her other worries, like talking to people and looking them in the eye. She started to practicing all of the other things she was resistant to because my wife said she walked, she would like came out of school a foot taller. So I'm using that as an example, this feeling of I did it, I can do it. It builds such internal confidence and fortitude that it's, I can do the next one too, and I don't know how else to describe it, but sort of that like this feeling, I don't know if you can expound on that set, but I just, the thing that the image and vision that comes to me,

Seth Perler: yeah. The, the sort of clinical term that comes to mind is generalization, right? Yeah. It's that something happens and you can start to apply it to other areas. And we'll also, as you're talking, what I'm thinking about is how much people wouldn't have seen how many tiny steps that got to get to that one step. Right. And it, and I love that you didn't do it right. Yeah. Because I think parents need to know that you and I, and all, all of us are human too. And it's messy and it's okay. And sometimes when you don't do it right, it even works. Yes. Um, it's not what you're going for, but who cares if it works. It works. And I'll also her, um, feeling that and sharing it with everybody, that really helped, again, on a semantic level. Her excitement. Yeah. So important for her nervous system and her physiology and to retrain the brain or the Miguel. I'm not good at describing that, but to at least retrain it to start to say, oh, this world isn't as scary as my story was telling you directly. And that's, I guess, resilience.

Dr. Dan Peters: Yeah, exactly. It's resilience. And that, that, thank you for making that connection. So while I spent a lot of time talking about anxiety over the years and were working with anxiety and the the bridge that I've been making is exactly what you just said. All the literature on resilience and the skills that one needs to be resilient are virtually the same techniques from overcoming anxiety and fear. Metacognition, think about your thinking, identify what the problem is, come up with solutions and then engage in a behavior to figure out what that problem is and if it doesn't work, try a different one. Like that's resilience and that is that is anxiety. Each anti-anxiety training and it goes so hand in hand and these are the skills that we feel so strongly that kids should be learning. This is far more important than knowing the capitals of all the states in America for life success.

Seth Perler: Yeah. Yeah. Again, you're saying things that other speakers have said in that statement. There's so much reputation which is so good for parents to hear. You've got five minutes. I've got some questions for you. One, which I think will be good because for anything that you missed, you hopefully can answer it with this question. And then, so I maybe take three minutes on this and two on the

last one. So the first question is what actions, based on your knowledge and everything you've learned in your career, what actions can parents take this week to start implementing some of your, um, your theories and practices? And is there books or websites or your work or where should parents start? What action should they take?

Dr. Dan Peters: Um, well I think, so the first thing is really to understand the situation that your child is really trying to work to understand that the situation your child is in. Um, of course this sounds self-serving. This is why I wrote the books. Uh, the, the main book is, um, from warrior to warrior. And what it does is it's a guide to help overcome your child's fears. There is a companion book called from warrior to warrior, which is written to older youth and teens. And then there's a workbook, the warrior workbook for younger kids. All of that is laid out to explain, explain this and normalize this process for it. This is how the brain and body works. Identify what are the physical indicators that your child has? Is it headache? Is it stomachache? Is it avoidance? Is it fight, right? Like usually this oppositionality it's anxiety.

Dr. Dan Peters: That's what's underneath it. So understanding what your child's indicators are and then helping. We're telling them, Hey, I've learned some really valuable information. I want to talk to you. Something that I didn't even fully know. It's about how our brain and body works and you sit down and you've talked to them and then you help them get on board for, is there something that you would like to do to help make this fictional worrying monster? And if are older kids and adolescents, they can name it other things that are funnier and more crass, um, whatever resonates so they can get on board and buy into, I want this to go away. I want to have a sleepover. I don't want to be afraid when you're gone and say we can work on this together. Cause the whole point is you need a team. And then in in the book, in the resources in the parent, um, the template that I forded and for the kids, there's, are there other resources that really are just totally aligned with what I'm talking about as a step by step way to work through it with their kids.

Seth Perler: Awesome. Awesome. Thank you. That's great. And then the last, last question is from your heart to there. So there are people watching, right? This second parent concern, parents who are really trying to uh, understand that these struggles from your heart to there is what's the most important thing you hope that they walk away with right now?

Dr. Dan Peters: The most important thing is hope and that this worry and anxiety and fear is treatable, actionable and um, one can live with it, manage it and overcome it. Right? The reason I'm saying that in that way everyone has a different dose for different reasons. You have to have hope that these strategies and addressing it with your child to give them these life skills, you can see growth and change and you can all gang up together to keep worrying. The worrying monster. We're down low, small out of your child's life. So it's not keeping him or her from living. And I also want to say to your parents as a parent and as a human, um, all this stuff applies to us too. And one of the most important things we can do is work on our own anxieties and fears, even in concert with our kids because they love to know that we're human too.

Seth Perler: Awesome. That was amazing. Thank you so much Dan, and for all your parents out there, go take action and thanks again for sharing your time and expertise with us.

Dr. Dan Peters: My pleasure. Thanks for putting this on.

Seth Perler: All right, Dan, take care. Hey everybody. I just got done speaking with Dr Dan Peters from the summit center and I realized that in this talk, so he had a hard stop. He had to get off the call. But I realized that I did leave something perhaps that you want me to complete the story. And that is the coma story. So I'm not gonna go too into depth and I don't talk about a lot, but it was such an important event in my life. So I was in a coma for nine days. I come out of it. I had lost the most of my body weight and my buddy had eaten most of itself. I lost 35 pounds in the nine days. I was just skinny as twigs and I couldn't walk. I had to relearn how to walk again. Uh, I couldn't speak for the first day cause I was intubated, Yada Yada.

Seth Perler: So I go through this experience. I start having these um, uh, afterwards anxiety and panic attacks during the coma, I couldn't breathe. So my panic attacks and anxiety attacks had everything to do with, I can't breathe. So I might be on a bicycle. I feel like I'm getting out of breath. I would start having a panic attack and say, oh my gosh, I'm getting out of breath. My lungs haven't healed completely. Am I going to die? And I would have all of this anxiety and panic around around this. So I'm, I got a counselor or a therapist that couldn't prescribe medicine because what the doctors had told me was to get on this medication and I didn't want to get on medication. I wanted to see if I could learn to work with it without it. And I'm so glad I did. Now I'm not saying medication isn't right for some people think anxiety, but I think it's very important question to look at very deeply.

Seth Perler: I didn't want to do it. I wanted to see if there's another way. I got a therapist who couldn't prescribe. I had no idea what she was going to do. But what ended up happening is she taught me about mindfulness meditation. And the first book that she introduced me to was by Thich Nhat Hahn. And I can't even remember what the name of it is. Um, but the miracle of mindfulness I think is what it was. And, but, um, I started learning to meditate and I didn't even do it. Well, I legitimately have add. I'm somebody who thought, oh, I can't meditate because I can't stop thinking. I had the biggest misunderstanding about meditation and I started meditating sometimes a minute, three minutes, five minutes, just a little bit. And it was my best effort. It was not 20 or 30 minutes or hours or anything like that.

Seth Perler: Um, but it was enough to start to change my brain. Now I also went to my therapist about the anxiety and panic. I also did a lot of journaling and reading books about it and, um, reaching out for all kinds of help to deal with it. But I will say that the mindfulness meditation was the number one thing that I believe helped me change my brain, where my amygdala didn't live in this place where it just thought that we were being threatened all the time. And where I could hear the story, the narrative, the cognitive piece that Dr Dan was talking about, where I could start to hear these stories that I had and I could start to say, yeah, I am

not buying it. I, you know, I, I don't think I'm going to die today because I can't get enough oxygen. I, I bet I'll be okay.

Seth Perler:

You know, I started having a different inner inner dialogue. The worry monster as he calls it, started shrinking. And, um, so I just wanted to conclude with this. That's been many years ago. I have no anxiety today. Um, I probably have anxiety three or four times a year for about a minute and it's gone. And this was something that was daily in my life. It was debilitating. I wouldn't go places or do certain things because of it. Um, and I was a school teacher at the time and when my brain was engaged and I was in school and I'm working with kids I didn't have, when I'm hanging with friends and doing fun things, I, it was when I was in my own head that I would have these anxieties and I do not live with that today. So I'm telling you three solid years of anxiety and panic.

Seth Perler:

And it started to finally fade after that to a point today where I again attribute, um, meditation to 90 or 95% of my solution. Mindfulness. Um, and techniques like what Dr Dan was talking about. The reason I'm telling you this a is because we didn't finish this in and I realize you're probably wondering, and I don't talk about it very much and B because I, like he said, I want you to have hope. This is something where we can change the brain and change the body and change the response to understand that, you know, we're not being chased by a bear and that we are safe and that our fear can come in when it needs to, but it doesn't have to be anxiety all the time ruling us and determining, uh, what we do or don't do, do in life cause we want for our kids is for them to be able to have strong executive function where they can execute and go for their goals and dreams and the things that matter to them where they can build on their strengths and their interests in their passions and their talents. And they can build a life with those types of things and feel good in life and not walk around with that worry and anxiety all the time. So anyhow, I just wanted to wrap up with that and I will see it in the next one.