

TABLE OF CONTENTS

Mental Health Marathon

Presented by LifeSpeak Inc.

The following is the transcript of the October 6th, 2021 all day Ask the Expert web chat event with LifeSpeak experts. To find the session you are looking for in this transcript, please click on the icon below:

Managing Your Mental Health in the Workplace with Michelle McQuaid

Supporting Your Kids with Their Mental Health Struggles with Dr. Deanne Simms and Dr. Annie Garner

Dealing with Anxiety, Depression, and Other Mental Health Issues with Janna Comrie and Dr. Deborah Ledley

Improving Your Mental Health in Your Partner Relationships with Dr. Colleen Mullen

Please note that this is a verbatim transcript, so all questions and answers appear exactly as they did during the event. We have not edited for typos or grammar.

Managing Your Mental Health in the Workplace with Michelle McQuaid

Welcome everyone! We are so pleased to have MAPP, Michelle McQuaid, with us today.

We will begin taking questions promptly at 8:30 AM ET. LifeSpeak will mediate this discussion and will allow or reject questions as they come in. Questions may be edited for length or for clarity. We will not accept questions that include personal attacks, unsubstantiated allegations, vulgar language or libelous statements

Please note that Michelle's answers are purely informational and should in no way replace consultation with a professional. We will do our best to pose all allowable questions today.

MICHELLE MCQUAID: Good morning Dr. Michelle McQuaid here ready to answer questions.

JANE: What options do we have when dealing with a lack of psychological safety at work? I cannot discuss the anxiety its causing me with my leader, as they are causing a large majority of my angst. Continuously being told they think I'm going to fail, but go ahead and try. This is not a good base for a healthy environment. When I attempt to call them out on their behavior, they laugh and say yes, you did a good job, I was very surprised. I cannot tell if they think they are inspiring me by tearing me down, or if they are really waiting for an excuse to let me go. Do I have any options or just keep trying to ignore it?

MICHELLE MCQUAID: Hey Jane, it sounds like your leader doesn't yet understand how to bring out the best in their people. Clearly, they are still working through some of their own learning and growth.

The good news is that psychological safety starts inside of us. Nature wired every one of us to be perfectly imperfect so we can learn and grow and evolve as the world around us changes. This means we will make mistakes, bump up against our limitations, fall short of our ideals, and outright fail sometimes. It doesn't mean that we are "not good enough", just that we are human.

Unfortunately, when it comes to our work often we expect – and are expected – to have all the answers and all the skills we need to deliver perfect results. Not only is this unrealistic, studies show that this belief actually undermines our success, wellbeing, and resilience.

So how can we feel safe to learn and grow when our boss or workplace isn't always supportive of this process due to their own fears? We like to use a simple tool we call the Learning Loop (you can do this yourself or

prompt your boss and/or team, colleagues, or clients through these questions as well):

- What went well? (This allows you to build on your strengths.)
- Where did struggle? (This allows you to identify your opportunities for growth.)
- What did I/we learn? (This allows you to identify what you've learned so you can keep getting better.)
- What can I/we try next? (This allows you to apply what you've learned to improve your skills.)

This is what Dr. Carol Dweck calls a Growth Mindset and it is essential for psychological safety. For more, you can hear her talk about this and grab a cheat sheet here: <https://www.michellemcquaid.com/podcast/mppw42-carol-dweck/>.

HELEN: Hi Michelle, I have been working from home since the start of the pandemic and was good at staying motivated, but I find it more and more difficult. Do you have tips and tricks to share?

MICHELLE MCQUAID: Hey Helen, motivation is fickle and ebbs and flows for most of us so just know that there is nothing wrong with what you are experiencing. Generally, when our motivation is low it is our body's way of letting us know that we need to:

- Mix It Up – our brains love novelty so if you find you've gotten into a bit of a lockdown rut try mixing up the way you are approaching your routines. Think about how you could make the way you're working more joyful by where, when, how, and with whom (virtually) you do different tasks.
- Make It Meaningful – remind yourself why the work

you're doing matters. If you're not sure it can help to ask as you tackle each day or each task: Who did this help? What positive difference does it make for them? You may need to repeat these questions (think of it like peeling back an onion) several times before you find the a-ha.

- Find The Want-To – try to keep a healthy sprinkling of “want-to” rather than “have-to”, “should-do” or “expected-to-do” moments sprinkled throughout your day.

Hope this help!

ANNE: My employer appears to be open to hybrid/on-going remote work for office staff, but a firm plan has yet to be communicated. They have also indicated that our health/well-being is a priority, which is encouraging. I have thrived in the remote work environment, as I am better able to manage my anxiety and focus on tasks uninterrupted to produce quality work. Working from home has also enabled me to eat better and to make time for exercise. I feel completely panicked when thinking about returning to the office and having to deal with the commute, with my social anxiety and with my discomfort generally at being in an office environment. If I am at my best working from home, both professionally and personally, how can I advocate for permanent remote work? I understand that some people value the social aspects of work, and they may thrive more in the office environment. For those of us that suffered for years in the office, how do we protect our vastly improved remote work environment while others are eager for a return to the office?

MICHELLE MCQUAID: Hey Anne, as someone with social anxiety myself I completely understand the joys and freedom working from home offers and the fear returning to the office may bring. It is great your employer appears to be open to hybrid/ongoing remote work and that they are prioritizing employee wellbeing as part of these changes.

I would recommend a conversation with your leader in which you explain the benefits you've been experiencing, ask them how they see your team may work best together in the future, and clearly ask for the option to continue working from home if possible. Depending on your leader, team, and the work you do this may be

possible, but you will never know if you don't ask. The worst that they will say is “no”, but then at least you know where you stand to make your next decisions.

By chance, your leader indicates they will want you back at least some of the time in the office for team meetings and connection, try to be open to this experiment at least to start with. Even those of us with social anxiety are still wired to be social creatures and need connection with others. You may find that one or two days a week or even just the occasional day in the office is not as bad as being back every day of the week and that there are ways you can make this work for you.

JOSEPH: I work with someone who treats me as though I am an inconvenience, and I'm often the target of their moods. I am not sure how to not “absorb” it, and have spoken with them twice about it, but there is no room for anything but how they are feeling. I know that this is a difficult time for everyone, but I have started to dread being at work. Thank you

MICHELLE MCQUAID: Hey Joseph, I'm sorry to hear that this is your experience and am so proud of you for speaking to them not once – but twice – about what is happening and the impact it is having on you and the understanding and compassion you've expressed for this difficult time they may be navigating. It is also completely okay to be feeling and owning that this does not make the behavior acceptable.

To figure out the next steps, it helps to monitor if this is just something happening between you or this person or if you see their behavior also showing up with others.

If it is just between the two of you, I recommend experimenting with small ways you can change your interactions – be it with humor, diversions, or respectfully naming what is not acceptable in the moment – and your responses that you can keep working on. I appreciate this may not sound fair for you to have to do more of the work but unfortunately when it comes to our relationships the only person's behavior, we can really change is our own.

If you see this unpleasant behavior happening with others however it can be worth documenting and then raising up with a leader to see what additional support can be provided for this person. If your leaders won't

act and this is causing ongoing dread and negatively impacting your well-being, then seeking options to no longer work closely with this person may be the best final step.

SID: Hi Michelle, In the last 6 months, I have been waking up at night and can't get back to sleep. I find myself thinking about work and work issues and this just prolongs it...Sometimes I wake up at 3AM and never get back to sleep. Should I just get up and work (I work from home)? Any tips other than medication?

MICHELLE MCQUAID: Hey Sid, oh the joys of a good night's sleep and the fatigue when it is missing! A couple of non-meditation tips that may help from the research:

- Bedtime routine – winding down about 20 – 30 minutes before you go to bed can help you get deeper and longer sleep. This means no blue light screens, try to make your bedroom a few degrees cooler than the rest of the house, and it can be helpful to journal or jot down anything swirling around your head.
- 3am wakings – it appears that waking in the middle night is perfectly natural, given we've evolved to have what researchers call segregated sleeping, a first sleep and a second sleep with a short waking period in between. Rather than lying there anxiously watching the minutes tick by, try some slow breathing or there is a reason as kids we were told to count sheep jumping over a fence! If you need to sit up for twenty minutes, keep the lights low and read or listen to some relaxing music before heading back to bed. Studies have found this time can be the most relaxing time of your day, provided you're not worried about sleeping.

NIKKI: I just started a new job and am a bit nervous and excited at the same time. I'm also balancing between two different jobs right now as there was a lot I left behind in my previous job and I'm still working to transition everything to the new employee. It is causing a bit of burnout for me because I have to basically train 3 years' worth of work in 1 week to my other colleague. What's the best way to help me manage my anxiety and fear of setting up my colleague for failure and continuity of what I've accomplished? The fear stems from my gut feeling that many of the projects I've helped built will be torn down and not used, and it'll feel like 3 years of my life have been for nothing.

MICHELLE MCQUAID: Hey Nikki it's clear how much pride you take in your work, both your previous job and new job are lucky to have your support. Often anxiety is triggered when we become aware of all the factors beyond our control that stand between us and our goals. There are a couple of helpful steps we can take to navigate these fears:

- Firstly, remember that you are doing the best you can with what you have in this moment. But just like every other person, nature has wired you to be perfectly imperfect so sometimes your best efforts will be magical and other times they will be messy. This is how we learn and grow. When this reality feels hard try to reach for self-compassion to remind yourself that you are doing the best you can. There is a great podcast and cheat sheet here from Dr. Kristen Neff on this <https://www.michellemcquaid.com/podcast/mppw55-kristin-neff/>
- Secondly, make a list of the actions you can take towards your goal that are WITHIN of your control. Make sure the list only contains actions that can reasonably be achieved with the resources you have – time, energy, knowledge, influence, etc.
- Finally, make a list of the factors that may impact your goal being achieved that are OUTSIDE of your control and acknowledge these and let them go. The truth is that organizations are always changing and projects that made perfect sense for you to work so hard at making happen a month ago, may not retain the same relevance even a month later. This is not a reflection on the quality of the idea, the work that was done, or even the organization's commitment. It is simply part of how the world around us keeps changing.

This approach is often called "Controlling The Controllables" and you will find lots more resources on it with a quick Google search if you'd like more.

ROGER: I'm feeling anxiety every time I'm in meetings with my team. I realized I don't share the same views as they do. So, I keep silent and would prefer not to have to be present at all. I'm not sure what to do?

MICHELLE MCQUAID: Hey Roger, anxiety is our body's way of letting us know that something important to us needs our attention and action. It tries to ring our body's internal alarm system and make us so uncomfortable

that we can't ignore what is happening. It sounds like in meetings with your team this alarm is ringing loudly for you.

Having different views from your team in itself should not be a problem. In fact, studies suggest that the most diverse teams in terms of experiences and viewpoints are generally the most creative, productive, and resilient teams.

The catch, however, is that this is only true if people feel safe to voice their differences and resolve these through constructive and healthy conversations. It sounds like this may not be the case for you in your team. But by chance, you're not 100% sure how they'd really respond to your different views I would suggest starting with some small experiments of speaking up and seeing whether there are opportunities for healthy conversation to unfold.

If you've already tried this and really feel your views would not be welcome, then you need to consider if your values are aligned with this team when it comes to the ways they are working. Being out of alignment with our values is a very hard place to sustain day after day, and so that anxiety alarm that is ringing may be trying to tell you that it is time to find a team that is more aligned with what is important to you.

ANNABELLE: I have recently done 2 and 3 jobs at the same time (replacing absent colleagues) and my boss does not understand how I am now burnout and depressed. I tried to make her understand that I have reached my limits, but she still treats me like a slacker or under performing employee. What could I tell her to make her more sensitive to mental health issues in the workplace?

MICHELLE MCQUAID: Hey Annabelle, I'm so sorry to hear all that you've been juggling and completely understand that the consequence is you have reached a point of burnout and depression. Please know that there is nothing wrong with you. Burnout and depression are simply our body's way of letting us know that it is time for a rest and a reset to find a better way of navigating our world. Please be sure you are getting the support and help you need – even if your boss does not understand the importance of this yet. You know

that you are neither a slacker nor under-performing but being asked to do impossible tasks. Your wellbeing is too important to wait for your boss to catch up.

In terms of helping to enlighten your boss there is a lot of great research and content on burnout and the role bosses and teams play in helping to create work environments where we can all be more resilient. I highly recommend Dr. Paula Davis' book *Beating Burnout At Work* (you can find a podcast and two page cheat sheet from her here: <https://www.michellemcquaid.com/podcast/how-can-your-team-protect-each-other-from-burnout-podcast-with-paula-davis/>)

At the end of the day your boss' success depends on having great people like you be able to do great work. Opening a conversation through the lens of how we can work smarter together given the resourcing challenges we're facing so none of burnout may make your boss more curious about the options (often bosses have no idea what to do around this) of how you can tackle this together to improve engagement, performance and resilience in your whole team.

MJ: Hi there. Question and it's a big one, how do we manage our workplace mental health/livelihood when we are being forced to disclose our vaccine status and if we do not comply, we could face termination. How is this good for our mental health with the risk of losing our job? I'm sure this question will be rejected, but I wanted to ask as it is taking a toll on many individuals.

MICHELLE MCQUAID: Hey MJ, I'm sure this is also a question many of us are struggling with presently. If we put the issue of vaccines aside for a moment and look at this question more broadly of our workplaces mandating a requirement of their employees that may not feel aligned to the values of employees there are two elements that may help us.

Firstly, when employers and employees agree to work together, they sign a contract. This contract contains explicit terms on what is required of each other to make their relationship work. Over time these contracts are updated with new requirements. At all times both the employer and employee have options to terminate the contract if they are no longer in agreement over these terms.

Secondly, when employers and employees agree to work together there are implicit terms shaped by the culture, they co-create of what is acceptable and what is not. When we are aligned in this culture together, we thrive, when we are not aligned our wellbeing tends to suffer. If you are feeling out of alignment with your employer's culture, we have generally have two choices: to either find ways to accept this misalignment (for example a colleague of mine is a keen environmentalist but works in a big oil company believing he can influence more from the inside) or to move on and find an employer who shares our values.

I appreciate none of this easy. But acknowledge what is within our control and are our choices to make can help to ease our anxiety and overwhelm.

MODGIRL93: Hi Michelle, what steps can I take when my workplace promotes mental health but does not change our environment to make it easier on us, especially during Covid-19. My organization provides resources, but it took me 3 months to ask for an accommodation. It was only granted when I sent an email to the Director. How can I advocate for myself in this situation?

MICHELLE MCQUAID: Hey there, it's great that your workplace understands that helping you to care for your mental health should be a priority and that they are providing you with resources. Well done on taking them at their word and not just asking for what you need when it comes to this support but persisting and escalating when needed. It sounds like you're already doing a wonderful job advocating for yourself.

Just like you, your organization will still be learning about the best ways to support their people's mental wellbeing. This is new ground for most workplaces and there is no one blueprint every company can follow, the answers need to be co-created between organizations, leaders, teams, and you. So, keep asking for what you need. Try to share what's working well about your organization's mental health approach, where you can see the approach struggling, what you're learning and what you can see the organization learning, and how this could be applied in the future. Many workplaces are setting up mental health and wellbeing committees to help them do just

this so voices like yours can be more easily heard to shape better outcomes for everyone.

OLLIE: Hello, I try very hard to set some hard boundaries between work and personal life, but my colleagues are the type to work all the time. I turn off all notifications on my phone when I'm off work or on vacation but coming back to dozens and dozens of messages asking me to do stuff when they know I'm off if so stressful. Is there anything I can do to make them stop?

MICHELLE MCQUAID: Ollie, this is a hard one, that I know you will not be alone in struggling with. Firstly, congratulations on setting the hard boundaries – many of us never get past this first step of defining our boundaries. Secondly, being aware that these boundaries are being crossed and that it is negatively impacting your wellbeing is the important second step. You are more than halfway there!

While I appreciate this next step may feel challenging (and you may have to do it again and again) you need to clearly communicate your boundaries to others so they can try to respect them. This can mean conversations with your boss and/or colleagues about how you each work at your best (for you having time offline and perhaps for them messaging the moment a need strikes) and how you can honor these needs to bring out the best in each other. Also, it can help to reinforce this message on out-of-office messages, so people know you are offline and why (there are some great and funny examples of these messages if you hit a quick Google search).

Finally, having taken these steps to clearly communicate your boundaries you have to honor in yourself that it is okay to come back to a full inbox – you were clear with people you would not be answering before you returned – and then slowly work your way through what is important and let go what is not. I find it can help me to have a little mantra reminding me I am doing the best I can to respond as fast as I can and I can't do more than that!

I'm not suggesting this is easy. But you are already halfway there. Now it is just the communicating and honoring for yourself that comes next.

ELLIE: Hi, we're back in the office and every time someone needs something from me, they just hover behind me and watch until I'm done with whatever I'm working on. It stresses me so much because I feel obligated to stop what I'm working on to answer them and then I lose my focus. What should I do?

MICHELLE MCQUAID: Hey Ellie, oh the joys of working back in the office together! Our research has recently found that "dealing with others" has become our biggest wellbeing challenge at work so please know you are not alone! I like Dr. Brene Brown's reminder that when it comes to our relationships that "Clear is kind."

There are a couple of ways you could be clear and kind around this challenge:

- Quickly turning around to let them know you're in the middle of something right now but you'll come and find them when you're done or asking them to shoot through a note you can respond to.
- A visual cue that lets people know when you're open for a chat and when you're doing what Cal Newport calls "deep work" and need to stay focused. One leader I know uses a red or green card above their desk to indicate when they are open for a chat.
- Some teams agree on times/days for non-interrupted work – like meeting-free Mondays – and times when spontaneous conversations are more welcome.

Again, Cal Newport's book *Deep Work* has lots of other great suggestions on approaches you could try. In my experience, a little of everything above tends to be required.

MICHELLE MCQUAID: Thank you so much for your wonderful questions. I hope you'll find some useful tips, tools and resources in the responses. Until next time keep playfully experimenting with ways to care for your wellbeing and take care. Thanks Michelle

LIFESPEAK: *Thank you, Michelle McQuaid, for sharing your time with us today. We are sorry that we did not have time to take all of the excellent questions that came in. Thanks to all of you for participating!*

Please join us for our next Ask the Expert webchat, Supporting your kids with their mental health struggles with Dr. Deanne Simms and Dr. Annie Garner, at 11 AM ET!

Supporting Your Kids with Their Mental Health Struggles with Dr. Deanne Simms and Dr. Annie Garner

Welcome everyone! We are so pleased to have children's mental health experts, Dr. Deanne Simms and Dr. Annie Garner, with us today.

We will begin taking questions promptly at 11:00 AM ET. LifeSpeak will mediate this discussion and will allow or reject questions as they come in. Questions may be edited for length or for clarity. We will not accept questions that include personal attacks, unsubstantiated allegations, vulgar language or libelous statements.

Please note that Dr. Deanne Simms and Dr. Annie Garner's answers are purely informational and should in no way replace consultation with a professional. We will do our best to pose all allowable questions today.

DR. ANNIE GARNER: Hello, my name is Dr. Annie Garner. I am a clinical child psychologist who works with children, adolescents, and families.

DR. DEANNE SIMMS: Hi everyone! I'm Dr. Simms, a child and adolescent psychologist. I'm happy to be here to chat with you all today about supporting your kids with their mental health struggles.

Looking forward to the discussion!

CHRISTINE: My son gets really mad because he's 17 and still has cell phone screen time restrictions- he has recently been diagnosed with anxiety and ADHD- am I doing the right thing? I've talked to another doctor who told me to let him have it overnight because he will have to learn on his own. Where do we draw the line? He tells me none of his friends has ever had screen time restrictions.

DR. ANNIE GARNER: Great job with setting boundaries, Christine! I am very impressed both with your stick-to-it-ness and with your child's self-advocacy and negotiation skills. It sounds like you are threading the needle of setting boundaries and being flexible.

I do think it is time to start thinking about what is developmentally appropriate for your 17-year-old son. This decision is made even more complex by the fact that your son has ADHD and anxiety. A few things about both. Research indicates that as a group, adolescents with ADHD exhibit a developmental lag in their brain development, particularly in the parts of the brain responsible for decision making. This means that most likely, your 17-year-old with ADHD's ability to make sound decisions is not comparable to his peers who do not have ADHD. So you'll need to think about what is developmentally appropriate for your teen. Second, you may have recently heard in the news the research that

a certain social media site has conducted showing the negative impact of their apps on teens' self-esteem. Teens with anxiety are likely at greater risk for their self-esteem to be negatively impacted by social media use. You'll also want to factor that into your decision.

Finally, what is developmentally appropriate, regardless of your son's diagnosis, is to start to engage in negotiation with them so that they can start to take some responsibility for themselves. Have an open dialogue. Ask him about what he wants and share with him your concerns. Then start to problem solve how you might meet somewhere in the middle. Create a contract about the agreement you come to. Perhaps you agree to let him have his phone overnight but if he wakes up late 2 or more times, then you will take it back for 2 weeks. If you find that having these negotiation sessions is too contentious, then seek a family therapist to help you and your son learn communication skills to help you get through them.

Good luck!

JN: My daughter has been in grade 5/6 during this pandemic. She has received the school curricula on gender identify, LGBTQ, relationships etc. virtually and from her homeroom teacher, as opposed to an expert in the field. Her middle school has noted that there are significantly more students this year in middle school who identify under the transgender, LGBTQ umbrella, for more than any prior school years. These years are when kids are finding their identity. Do you recommend that school boards perhaps repeat these topics in-person in their curriculum for kids who had it virtually and by experts in the field? Do you think the significant increase in children this age identifying with the LGBTQ community is due to kids being more comfortable in expressing their true identity, or if they are struggling to discover their identity in the midst of the lockdowns of the pandemic?

DR. DEANNE SIMMS: Hi JN. Thank you for this great question. This is certainly a topic that is at the forefront of the minds of many parents, so I'm sure that others in this space share some of your curiosity and are interested in this question, also.

First off, I'm glad to hear that your kiddo's school provided curricula on gender identity. We know that this content has not always been integrated into curriculum, but we certainly know that, to your point, our teens are exploring, learning and making sense of many facets of their identity and so providing them with this information helps to normalize and better understand their experiences -- no matter what they may be. We know that basic gender literacy is of fundamental importance to our kiddos as they begin to understand their own gender, and sense of selves, and helps to form the building blocks of healthy relationships with themselves and others.

We also know that, compared to generations past, even prior to the pandemic, today's youth have significantly different understandings of gender than previous generations including seeing gender as a spectrum instead of binary, having increased exposure to individuals who use gender-neutral or non-conforming pronouns, and have an increased prevalence of youth self-identifying as gender non-conforming. The sources of these changes are complex and difficult to clearly classify, but they include things like societal changes, increased openness and awareness, and changes to our language and structures around gender. It is unclear presently (data currently being collected) about the impact of the pandemic on teen's gender identification or expression, but it will be interesting to keep an eye on this space in the future.

We know that supporting teens in development and expression of their gender identity is very important and is protective from a mental health standpoint. So, in answer to your question, I think that dialogues or curricula covering the topic of sexual health, gender and identity should be repeated year over year (to ensure developmental appropriateness) and ideally, would provide both virtual and in-person format.

I hope this helps, JN.

AGNES: If a therapist diagnoses your child with a mental illness are they required to discuss with the diagnosis with the parents?

DR. ANNIE GARNER: Great question Agnes! I am going to start by stating that the requirements may differ depending on the state, province, or country.

In U.S. schools, the school is not allowed to conduct an assessment of your child without your consent. In addition, the school is required to share the results of the evaluation with you. U.S. schools can provide what is known as an 'educational diagnosis' of certain disorders such as Autism Spectrum Disorder and Specific Learning Disorder. The difference between an education diagnosis and a medical diagnosis is complex but the main issue is that an educational diagnosis cannot be used to access resources from insurance providers or the state (in the U.S.).

If the evaluation was done by a mental health provider as part of an assessment that you initiated, then yes the assessor should disclose the diagnosis to you. The diagnosis should be included and explained in a report. The report should summarize all the data they gathered and explain how that data supports their conclusions regarding the diagnosis. You should also get a set of recommendations for the next steps based on your child's diagnosis and presenting concerns.

If your child is seeing a mental health provider for therapy in the U.S. and the therapist is billing insurance, then they have to provide a diagnosis based on the child's presenting problems for billing purposes. Sometimes the child does not meet full criteria for the disorder, but the therapist is only using the diagnosis to justify why the child would benefit from treatment and to get reimbursement for the treatment.

Hopefully, this helps!

JO: My son does not make friends easily because as an only child he has had adults around him all the time, he will gravitate to the adults in the room. He finally met a friend and is very quickly getting attached to this friend. How can I support him in making more friends? Or do I just need to let go a little and let life happen as it will?

DR. ANNIE GARNER: Jo, this is a great question! First, the research supports that when it comes to friendships, it is all about the quality of quantity. It is great to hear that your son has developed a friendship. I would start by helping your son learn what it means to be a good friend,

both so that he is a good friend and so that he picks good friends. Ask him questions about what makes a good friend and gently guide him in making those observations. I'm not sure how old your son is, but if you are still reading together, then read books about good and not good friendships together. Ask him questions that help him notice those qualities in the books you read. If he is older, then you could do the same thing with TV shows.

As to your question about letting life happen, I think it depends on your child. Some children pick up on social skills and expectations quickly and others do not. Learning about friendships is more complex than we think, so I would not necessarily assume that he'll figure it out.

I recommend the following books for you to help you learn how to foster friendships for your child:

1) Younger kids: [*Good Friends Are Hard to Find*](#), by Fred Frankel

2) Older kids: [*The Science of Making Friends: Helping Socially Challenged Teens and Young Adults*](#), by Elizabeth Laugeson

ELLIE: My pre-teen daughter seems to focus on negativity so much so, that she will find the flaws in the most joyous of occasions. I'm worried for her as her "cup half empty" attitude makes her quite unpleasant to be around. I'm worried that she will lose friends and feel distanced from others if this continues. I've been reading that it's human nature to focus on negative aspects versus positive aspects of things, but how do I know whether this is something that needs intervention? thanks!

DR. ANNIE GARNER: I am going to start off by answering your question about how you know when this requires intervention. First, I am a major proponent of therapy (obviously I am biased). Your daughter seems to have a way of cognitively interpreting situations that puts her at higher risk for developing an internalizing disorder like depression. Thus, initiating therapy is a method of preventing the development of something more serious. Also, as you noted, if she learns to interpret situations differently this could also have a positive impact on her social relationships which would also buffer her against the development of something more serious.

The "cup half empty" way of looking at the world is something that cognitive-behavioral therapists (CBT) call a cognitive distortion. Cognitive distortions are rigid ways

of thinking that are neither realistic nor are they helpful. The good news is that even if we have a tendency to have cognitive distortions we can learn to catch ourselves experiencing cognitive distortions and then challenge our thoughts by asking how realistic, likely, or helpful these thoughts are. Finding a CBT-based therapist for your child who can help them become more aware of these thoughts could be helpful. It is also important that therapists have sessions and check-ins with parents so that parents learn what their child is learning in therapy. The therapist can help you figure out how to best support your child when they experience cognitive distortions outside of session.

Finally, great job noticing this pattern! Your daughter is fortunate to have a parent that is so in-tune with their mental health needs.

AGNES: My child requested a therapist a few years after our family breakup at the age of 13. She has remote appointments every other week and seems to be remarkably improved in her attitude, motivation, independence and individuality. She marks the start of therapy as a moment in her life that has had huge impact on the person she is today. The relationship with her therapist seems quite close and she feels dependant on those visits to get her through life at this point. Is the goal with childhood therapy to help them gradually grow to a point of independence or to continuously support throughout life?

DR. DEANNE SIMMS: Hi Agnes,

Wow. What a great question. Very interesting for me as a child and adolescent psychologist to hear this insight from the parental perspective. Thank you for posting it.

First, I'm so glad that your teen was able to find a therapist who they like, trust, and have a relationship with. Especially through difficult times or times of transition, therapeutic supports can make a profound impact on children and youth in terms of their life trajectory and health and wellness.

I know that in my work, I am typically very transparent with youth (and their parents) about our work, our goals, and our relationship over the course of our treatment. This helps define boundaries and helps with transparency to set expectations. Nevertheless, especially at times of great change, it is typical to see increased need, contact, or

dependence on therapy to help as a stabilizing force. As a therapist, this is my job to keep an eye on, and to process in my work with my clients. As a parent of a teen who has the “real world” view of your teen and is the “expert” in their reality, it is important for you to be able to connect with your teen’s provider to share information you think pertinent.

On balance, the goals of therapy are complex and very individualized, and different forms of treatment have different foci and durations. Nevertheless, when I hear you say your teen feels dependent on her therapy to get her through life, I’d want to be sure to have transparent discussions with your teen, and her treater about your concerns in this regard. Certainly, the goal of therapy is not to be in therapy indefinitely, but rather to meet specific goals and to live life outside of therapy in a functioning and adaptive manner.

I hope this helps!

I: Our youngest has asked us to set up counselling for him, which we are happy to do (our oldest is also seeing someone, and our youngest has seen someone before). Our current challenge is that there is extremely long waitlist for all services in our community. While we have someone in place for our oldest, their counsellor will not see two members from the same family. Is there still value in pursuing short-term counselling (available through our workplace for approx. 4 sessions) and/or online counselling (which is currently the only option available through our workplace program)? Our son has done the short-term/online option before and didn’t find it very helpful.

DR. ANNIE GARNER: Great question. Finding services for youth is so challenging. I am going to make a few suggestions. First, I would reach out to your son’s school to find out if the school has any resources that might be available to him. Some schools have services for children at different levels of need. For kids who are experiencing at-risk levels of mental health concerns, some schools will provide group counseling sessions or time-limited skills-based therapy. If your child has a mental health diagnosis or is neurodiverse, then they may qualify for additional services. In the US a child might qualify for an IEP or a 504 Plan, and if the school has the resources, time with an individual therapist who comes to the school.

In terms of whether to try short-term counseling or online counseling, I think those are viable options to try out. I would have a discussion with your child about the waitlist and share that in the meantime you are going to get him short-term help. I would discuss these options as temporary and as an experiment (e.g., “We will try it out for X sessions and if it isn’t a good fit, then we will stop.”).

Finally, keep in mind that each therapeutic relationship is unique. The last time your son tried online therapy, the problem could have been the format or it could have been due to a client-therapist mismatch.

WORRIED MOM: My daughter 16 suffers from anxiety and is now taking medication after a 6-week period of these thoughts.....she goes days not being able to turn off thoughts of death/dying. We have tried to get her to take to counselors but she hasn’t seemed to connect with any of them to give their suggestions a chance. She is very shy and not social at all. Meditation doesn’t seem to be her thing. When these thoughts come on because of something on TV or topic in school etc. it becomes all consuming and she can’t focus on anything else. I don’t know what to say or do to help her work through the thoughts as she always tells me it just makes it worse to talk about it. To be clear it isn’t thoughts of her harming herself but of death in general. Any guidance on how I can help her?

DR. DEANNE SIMMS: Hi Worried Mom. Happy to respond to your question.

Sorry to hear that your daughter is suffering. I’m glad you’ve got her engaged with a care team, and that you’ve reached out for more help today.

First off, it sounds like her anxiety is certainly heightened and that these thoughts of death and dying, in general are distressing to her. Also, it seems like they are triggered by something in her environment (like tv or a discussion) and that, when the topic is brought up, it is hard for her to detach from, or disconnect with the thoughts. Thank you for clarifying that the thoughts are not about harming herself and are not met with a lack of distress (which would be a different clinical presentation and would require a different assessment or means of support).

So, although your daughter hasn’t connected with the therapists she’s engaged with, it may be important for

her to give you a sense of what is missing. Is it because she has to talk about what is disturbing/scaring her? Is it because it wasn't a good fit? I always say that finding a therapist can be like finding a good set of heels; sometimes you have to try a few on before you can find the right pair with the right fit;-). Once you normalize this and let her know that therapy is effortful and sometimes awkward but deeply effective in battling anxiety, she may be open to re-engaging. I'm glad to hear that she has started medication and, even though you note that medication doesn't seem to be her thing, it is important that she continue to give this a chance, follow the instructions set out by her prescriber, and not stop abruptly. Another skill that she is building is communicating about her likes and dislikes of medication and treatment, so it will be important to help her relay her experiences to her care team.

Back to your question: how you can support your daughter when she is distressed by these thoughts. When I work with teens, I let them know that thoughts are just by-products of our brain functioning. They come, they go, and they are not facts. For some of us, particular thoughts or images show up, and get "stuck", or they cause us distress. The above helps teens to "diffuse" their thoughts, to help them get unstuck. It is important for your daughter to gain a sense of control over her thinking and to know that, although some topics cause her distress, she has control over her thoughts, and her thoughts don't have control over her.

Then, as her parent, the primary role for you, is not to spend too much time on her thoughts or their content, but rather to help her to calm herself down in the face of those thoughts. This is where you step in as her "calming coach". It is hard for us as parents because we hate seeing our kiddos distressed, however, it is important to realize that we can't remove distress from our kiddo's lives, we can help them to cope with it. It would be important for you and your daughter to review calming activities (belly breathing, experimenting with temperatures like hot and cold, physical movement and mindfulness practice) to get a sense of what tools she needs in her tool kit. Then, when she becomes distressed, as her calmness coach, you coach her through using her tools to see what works best. Again, labeling her anxiety as anxiety, and being clear that you are coaching her towards calmness. You are both aligned in battling her anxiety and helping her to regain

control, but, as her coach, you have to help from the sidelines while she increasingly does this herself.

Finally, as I noted before, one of the supports available to you may be participating in therapeutic sessions with a mental health practitioner who can help to support you in parenting your daughter through these difficult times.

Thanks so much for reaching out, Worried Mom. I hope the above is helpful in your continued efforts to help your kiddo navigate this trying time in her life.

BEE: My youngest daughter has recently been asking several times why my husband and I do not consider divorcing or separating. Yes, we have been having some misunderstanding lately, but nothing that we believe should cause us to separate. How can we give our child better reassurance and what can we do better in order for her to not feel insecure about our family?

DR. ANNIE GARNER: Hi, Bee. This is a tough and delicate situation. Kids only see a part of our marriages and not the big picture. They are also highly sensitive to discord or even typical disagreements. Still, this doesn't mean that our marital misunderstandings do not have an impact on them.

This is going to sound counter intuitive but I would recommend that you not try to reassure your daughter about the state of your marriage. I would instead recommend asking more open-ended questions when your child asks these questions so that you can better understand what is at the root of her questions. Perhaps this is her way of letting you know that what feels like minor misunderstandings to you, feels like a source of stress for her. Hear her out and let her tell you how she feels when she overhears the misunderstandings. Validate her feelings even if you do not agree with her interpretation of the situation. Validation does not mean that you agree with her. It means that you hear her. Finally, thank her for being open with you.

Regardless of whether you agree with your daughter's assessment of your marriage, starting family therapy might be a good idea. A family therapist could help you and your husband become more aware of how your interactions impact your daughter and help your daughter find the language and tools to better articulate the impact of these interactions on them. A family therapist could also

help you and your husband find more effective ways of handling misunderstandings.

ALEX: I am struggling with my daughter getting her ready. In particular, she likes us to take her socks/shoes on/off every morning. We have checked the shoes/socks and no apparent issues. Is this a sign of OCD?

DR. ANNIE GARNER: Hi, Alex. It is difficult to answer this question without knowing your child's age. Young children (preschool and early elementary school) love routines including routines that do not make much sense to adults. If your child is on the younger side, then I would think this is most likely a developmentally appropriate behavior. Another issue to keep in mind is that kids love adult attention and will do just about anything to get it. This could be an attempt by your daughter to spend time with you in the morning before the start of the day. Consider building in some 'special time' in the morning before school so that she can feel like she's gotten that time with you. Building in special time during regular routines might make sense. For example, she could help get breakfast ready with you. When spending special time together it is important to use the PRIDE (Praise, Reflect, Imitate, and Enjoy) skills as much as you can.

- Praise: Her hard work, her helpfulness; be specific "Thank you for helping me make breakfast. This is so much fun!"
- Reflect: Repeat what she said so she knows that you heard her "You want to have strawberries for breakfast."
- Imitate: Do what she does to show her that you think she's pretty cool "I'm going to have strawberries too! What a good idea."
- Enjoy: Have fun

L: You mention suicide contagion - does this kind of contagion extend to eating disorders and mental illness? My teenager is best friends with someone who struggles with an eating disorder in addition to depression and suicidal ideations. At the same time, my teen has increasingly struggled with connection to all the things that previously brought her joy. We have commenced therapy to help support her through this, but I'm wondering how much is environment vs. her own. She is a very empathetic person.

DR. ANNIE GARNER: Great question. I think what you are highlighting here is something that mental health experts are starting to find is true across the range of mental health difficulties: most mental health disorders are the result of a complex interaction of biological/genetic factors and environmental factors. This is known as the diathesis-stress model.

For some people with a high biological/genetic risk, it takes few environmental risks to increase the likelihood of a mental health disorder developing. For others with lower biological/genetic risk, it takes a lot more environmental risk. A key part of a teen's environment is their peer group. Having a peer group who is experiencing mental health concerns can increase the likelihood of your child also experiencing similar issues, especially if they have a biological/genetic predisposition such as being highly empathetic temperament.

Also, teens, especially girls, are known to engage in something called co-rumination. This is when teens discuss a problem, focus on the negative aspects of it, and engage in little to no active coping. They kind of 'spiral' in a negative manner together. I caution against forbidding your teen from hanging out with their peers, even if they engage in this type of co-rumination because taking away social isolation is likely to be just as damaging. Instead, I would encourage your teen to think about how they feel after they talk to different friends and ask them why? What was it about that conversation that helped and what was it about that conversation that left you feeling the same or worse? Ask questions in a non-judgemental way so that they can make their own decision. However, if your teen is at risk for self-harm or injury due to hanging out with certain peers, then it may be appropriate to set limits around those interactions.

LEE: How do you help a high-functioning teen on the autism spectrum manage anxiety, binge eating and also hypersexual? How can you guide them to practice safety and not put themselves in a dangerous situation where they can be taken advantage of?

DR. ANNIE GARNER: Hi, Lee. This is a complex question. I am going to address the mental health concerns separate from the sexuality concerns.

In terms of mental health (anxiety and binge eating), I recommend working with a therapist that has experience

with Autism and anxiety, and binge eating. The same therapies that work for anxiety and binge eating in neurotypical teens likely work for teens with Autism. The trick will be breaking down ambiguous concepts into more concrete concepts. Using scripts, social stories, and visual supports to help the teen with Autism learn strategies and implement strategies.

In terms of sexuality, I think it is important to make the distinction between sexuality and hypersexuality. When working with neurodiverse teens we can over-pathologize normative sexual development. Remember that all teens are learning and exploring their sexuality and body. Teens with Autism may do this in a less socially acceptable manner because they struggle with social skills and cues. For example, it is normative for teens to masturbate in private. A teen with Autism, however, may lack the social skills to know that it is not appropriate to do this in front of others. We run the risk of pathologizing this teen by calling them hypersexual when in fact they need support to learn socially appropriate times to engage in self-exploration that many teens engage in. Also, I want to caution folks about viewing the spectrum of sexuality through the lens of hypersexuality. We know from research that there is a link between Autism and LGBTQ+ identity and talking about these identities through a deviancy or hypersexuality lens causes harm to teens-- Lee, I am not implying that this is what you are doing. I just want to make sure that I make that disclaimer as an affirming therapist.

Your concern about safety is real, though, and I do not want to dismiss this. Having open and direct conversations with your teen about safety is important. In fact, it's important that we do this with all teens, neurodivergent or not. The following website has great tips for our to discuss sexuality and safety with your teen: <https://raisingchildren.net.au/autism/development/sexual-development/sexuality-teens-with-asd>

Here's a link on the relationship between Autism and LGBTQ+ identity: <https://www.aane.org/sexual-orientation-gender-identity-aspergerautism/>

CM: My six-year-old son talks about how he wants to do certain extra curriculars, for example karate. But once we go to sign up or participate, he vehemently refuses and says he doesn't want to. We've taken him to observe, to help reduce the "unknown," but how do we help him cope

with what might be holding him back from participating?

DR. ANNIE GARNER: Oh, I can relate to this question as I have an 8-year-old boy that did the same thing at that age. What I hear many parents struggle with is two competing concerns. On the one hand, you want to empower your child to make choices and to engage in activities that they find intrinsically motivating. On the other hand, you are concerned that if you 'let them' that they will never learn how to commit and that they will quite all things in life. First, I think it is important to find the middle ground and to give yourself some slack. You are doing a great job!

Now to your question, I think flexibility within boundaries is a critical parenting skill to develop. What I mean by this is that you can be flexible in letting your child choose which activities they will try and then you can set a boundary for how long they must try it for before deciding to move on (not quitting). Some negotiation around how long to keep trying can be done. This would be another example of being flexible. This kind of approach to parenting helps your child be accountable but also exercise an appropriate level of control and autonomy.

SANDRA: I have a son who just turned 14. Diagnosed with severe ADHD and ODD when he was very young. He just started high school and has zero interest in studying. Already skipping classes. Talks back, insults everyone. Horrible attitude. Tried medication but side effects outweighed the benefits, although he became a straight A student as result. I know he has potential; how do I motivate him to at least try at school and be kind to people? He's headed down a dark path.

DR. ANNIE GARNER: Great question Sandra. I would recommend taking a multifaceted approach, meaning you are going to do many things at once.

1. Help your child find a connection within their school. What does he enjoy and how can we leverage that interest to keep him engaged in other aspects of school that are less than interesting for him. For some kids, that's band, a sport, or theatre.

2. Help him build a positive relationship with at least one adult at school. This adult does not have to be an academic teacher. It could be the art teacher, the librarian, the coach, or even a staff person. Knowing that an adult

at school cares about him, believes in him, and is there for him will help him establish a more positive relationship with school.

3. Reconsider medication. Medication can be very effective in managing ADHD symptoms. Many parents who report that side effects from medications were too much also report that the process of finding a medication was haphazard. This experience is common because we do not yet have a method of finding out which medication would be best for an individual child. A medication titration trial helps make the process of finding the right medication at the right dose smoother. Medication titration means that your child would be put on one medication (usually a stimulant) at the lowest dose and then the dose gradually increases until maximum symptom management with minimum side effects is reached. If side effects outweigh the benefits, then the doctor moves on to a new medication. The thing to keep in mind about medications for ADHD is that as kids get older their response to medications can change. For some, a medication that did not work before suddenly starts working after puberty. We don't know why this happens, but it does happen. Consider revisiting this conversation with your provider.

4. Individual and family therapy. I would recommend seeking out individual therapy for your son so that he can think about his long-term goals and whether his actions in school are in line with those goals. A therapist should also work with you as the parent to help you set clear expectations in a developmentally appropriate way. The use of contracts is an appropriate intervention for setting expectations and consequences for teens with ADHD. This book is a great example of this type of therapy for teens with ADHD and their parents
<http://www.margaretsibley.com/books/>

ELLY: How to do you discipline a teen who is struggling with depression/anxiety. My son is not going to school and I feel I should take away his phone for not going, but I also feel like he is struggling, and it is not that he is choosing not to go, it's that he can't (due to depression/anxiety). I should add also that he is not willing to get help for his mental health. He refuses to speak to a counsellor or doctor.

DR. DEANNE SIMMS: Hi Elly,

Thank you for your question. It certainly sounds like your son (and, also you!) are both struggling. I'm glad you were able to reach out to chat and get some support about your situation today.

First, I can imagine how hard it must be for you to see your son struggling, yet not being open to going to counseling. Is he in contact with your GP or Pediatrician? Even though he isn't open to counseling, specifically, it would be important for members of his health care team to be in touch with him regularly, to help to monitor his status and to start opening the door on discussions about his over all health and his mental health, specifically. Especially if he is at the point that he isn't willing or able to attend school, I would take this as a marker that he needs to be seen by a member of his care team in the near future. This is one of the areas that we keep an eye on in terms of our teen's functioning. So to me, this is the equivalent of a person not being willing or able to show up to work, and I would really want to be sure that they had some support around their health at this point.

Next, I wonder what his hesitation to counseling is? Has he tried it before and not liked it? Is he worried about his privacy? Does he not like the idea of meeting in person, but may be more open to meeting by video or phone? It may be helpful to know more about his specific concerns so that you can address his fears. For example, I work with teens to ensure that they understand how I maintain their privacy, what ways their parents will or will not be involved in our work and help to make them feel safe and comfortable by enabling them to exercise as much control as possible about when and how we meet. I even try to offer pre-treatment phone conversations with families and teens to answer any questions they may have before we start actual treatment. If you have a sense of providers in your area, you can reach out to ask them specific questions that have to do with your son's identified hesitations to see if they can help with engaging him.

So, to the crux of your question. How do you impose limits or expectations in the context of a son who is really struggling with his health? This is certainly not an easy balance, Elly and it is not one that I think you can manage, alone. One suggestion I have is that you consider reaching out for supports in the event that your

son continues not to want to engage in therapy. I work with parents individually, to help them specifically in their parenting journey. I help them to problem-solve or adapt to the changing needs of their children and teens, even if their kiddos don't come in for work, directly. This helps to ensure that whatever rules, expectations, rewards, or responses are enacted, meet the specific needs of the individual kids and teens in question.

Finally, as with any rules of the family, these are best made collaboratively (in discussion with your son) and are rolled out in a predictable and consistent way. For example, leading a discussion with your son about your concern for his health, and how you can work together to ensure that his basic needs are being met. Something like, "Sam, I've noticed over the last little while that you're really struggling. I know you've been feeling sad and overwhelmed, and it's started to get in the way of you getting to school. It makes sense that you're struggling with doing those things because of the level of your sadness. While I still want you to consider going to therapy to help you manage your sadness, in the meantime, how can we work together to ensure that you're getting what you need to feel as healthy as possible? How can we make sure that you're getting sleep, eating nutritious food, and doing things together with me/the family even if you aren't able to face going into school? What are some ideas you have about how I can support you, and how you can support yourself in these goals? What are things we can do together, and what are things you'd like to carve out on your own?"

You can then make some collaborative limits or rules for the house which may be different for the times that he would otherwise be in school, versus the evenings and weekends. Finally, reward and collaborative engagement typically works better than punishment (which can drive behaviors underground) and when it comes to setting limits with technology (a particular hotspot with teens!) collaborative planning tends to work best as opposed to taking away tech.

Hopefully the above gives you some ideas of starting places, Elly. I wish you the best in your continued efforts to support your son!

DD: How do I open or start a conversation with my daughter in grade 12? My husband and I have seen some

behavioral changes in the last year during COVID-19, but I am having difficulty encouraging us to talk to us.

DR. ANNIE GARNER: I would recommend doing a few things:

Spend time with your child, doing things together that are kind of mindless and open up space for communication. Teens do not like to feel pressured into talking, so when it happens naturally, they are more likely to open up. Activities such as driving somewhere together, cooking, putting together puzzles, or walking the dog are great examples. Next, ask how they are doing and then listen. Do not ask too many follow-up questions. Just let them talk. Use reflective listening, that is restating what they shared. Reflective listening shows that you heard them and this typically gets them to tell you more or elaborate on their experience. Validate their emotions without judgment (e.g., that sounds hard) and then thank them for sharing.

GL: How can we differentiate between anxiety and other disorders that may be co-existing in children with ADHD for example

DR. DEANNE SIMMS: Hi GL,

Thanks so much for this great, and complex question.

As a clinical psychologist, there are many questionnaires and instruments that I use, in addition to a thorough clinical interview, to get a good sense of a kiddo's behavior and brain functioning. This can be a long and complex process, but it is important to be thorough in this space, as diagnoses made in children and adolescents can have large impacts on their health care, treatment, and their understanding of themselves.

The reason that these processes can be so complex, is because we know that signs and symptoms of clinical disorders can be difficult to interpret, and humans rarely fit neatly into discreet categories -- for example, there are symptoms of anxiety that are similar to or can be confused for symptoms of inattention seen in ADHD. In addition, we know that for children and teens experiencing ADHD, they often experience co-existing struggles with anxiety and depression, and social functioning.

So, the short and "easy" part of my answer is to be in

touch with your GP, pediatrician and mental health clinician to help you answer the question of any other disorders or experiences that your child or teen with ADHD may also be struggling with. This will help you to get a clear picture of what is going on, and how best to help.

The more difficult part of my answer, is for you to be on the look out for signs and symptoms that show up and cause your kiddo frustration and distress, stick around for a number of weeks and don't seem to go away, or get in the way of them functioning in any life area (social, family life, recreationally). These can include changes to their sleep or eating, changes in the way they talk to or about themselves (I'm so stupid, I can never do anything right"), or increases in their withdrawal from the family. These would be signs that wouldn't clearly point to a specific disorder, per se, but would help you to clue into their potential needs for support.

Hope this helps!

BART: How do you help a teen with eating disorder, specifically bulimia? He's open about when he does it and how binge eating is what leads to it. He so skinny, i don't know how to help him see himself in a different light.

DR. ANNIE GARNER: Hi, Bart. First of all, it is a great sign that your son has shared his eating struggles with you. You have clearly done a great job fostering a relationship of trust and communication!

Distorted body image is a symptom of eating disorders and it is a tricky symptom to address. I would recommend seeking family therapy to help your son with his disordered eating and his issues related to body image. Family therapy is an evidence-based approach that can teach the whole family how to support your son in his recovery. Below is a link to more information on evidence-based therapies for eating disorders.

<https://effectivechildtherapy.org/concerns-symptoms-disorders/disorders/eating-body-image-problems/>

One more point, it may be difficult to find providers who have experience and competence in working with males with eating disorders. I would ask questions and make sure that the therapist you work with is knowledgeable about the unique experiences of males with eating

disorders.

MEL: I have teens who are struggling and want to see a therapist with social anxiety and feeling overwhelmed, but there are no therapist appts available after school or in the evenings through our insurance due to so many people seeking help and therapist hours. What is available in the evenings? How to find a good virtual therapist?

DR. DEANNE SIMMS: Hi Mel,

Thank you for your question. Sorry to hear that your teens are struggling. I'm happy that you are supporting them and asking questions about how to get them connected to care. This is an important step.

Sorry also to hear about limited resources in your region. Access to resources is something that we continue to struggle with, but I'm hopeful that through some of the suggestions below, you'll be able to find the right supports for your kiddos.

How to find the right fit for a virtual therapist:

In regard to "goodness of fit", it is important to:

i) Consider the needs of your kiddos. You note that your teens are struggling with social anxiety, so you want to be sure that the practitioners you are reaching out to have training or experience in treating teens with these specific difficulties. No two struggles are the same, so just as you'd want to make sure that the eye specialist you'd go see if you are struggling with cataracts has experience treating them, so too would you want to ensure that your teens' provider knows how best to treat your kiddo's social anxiety.

ii) Credentials. Be sure to be mindful of the training and registration of the providers you are considering. Ensuring your kids are being cared for by trained, licensed, and regulated professionals ensure a high level of care and mindful attention to the health and safety of your children (insurance providers also typically have rules or limitations around which providers they will cover). Most providers clearly state their titles, degrees or designations to help in your decision-making.

iii) Availability. To your point, it is important to ensure that availabilities align between your teens and the providers you are considering. While some providers are restricted

to daytime hours, others do provide evening and weekend times as well. If this is not the case, it may be important to consider the pros and cons of having your teen attend a therapy session during a planned time in their school day. While not ideal, these medical appointments may be integral in your teens health and wellness and having a structured approach to treatment (in consultation with your teen and administrators/teachers) may be a potential way forward. In addition, some schools will support teens to attend these sessions by providing quiet and confidential spaces (e.g., guidance office) for them to use to attend their session virtually while physically at school). Others will excuse these absences as being due to medical reasons.

iv) Resources. In your consideration of a therapist may also have the ability to be directed to, or to engage with resources outside of therapy sessions (to decrease time spent out of school getting treatment). Some providers integrate apps, platforms, and other virtual resources into their work, and you may include this into your consideration of a virtual therapist.

Finally, many professional associations (e.g., your local association of social workers or psychologists) have resources (search engines) that allow the public to enter search criteria to find virtual therapists that suit their particular needs. Be sure to talk with other members of your health care team or school team to see if they may have ideas or recommendations for providers who may be a good fit for your teen.

Thanks for your question, Mel. And all the best in the next steps on your journey to find supports for your teens!

KAY: I don't have kids myself (yet), but I wanted to put this out there. Growing up, I didn't feel super comfortable talking to my parents about my mental health concerns. I didn't feel like they would understand what I was feeling. What would you recommend to parents (and future parents) as steppingstones to discussing mental health with their children?

DR. DEANNE SIMMS: Hi Kay,

Great question. I love that you're getting out ahead of this and thinking of ways in which you may be able to support your own, or other kiddos around this in the future.

We know in the scientific, research and clinical community that there have certainly been shifts in the way that we as societies talk about and support mental health over the past 2-3 generations. Many of these shifts have been positive and have included an increased awareness that there is no health without mental health, and that by decreasing stigma and shame about this area of health, it increases access to much needed health care which can make a real and meaningful change in our lives.

In regard to steppingstones to discussing mental health with children, this is a journey that begins early and continues through their lives. Being mindful of the way we are acting as models is a great place to start. Being careful of the way in which we speak about our own mental health, and that of others helps our kiddos make sense of their own experiences. For example, being transparent about times you are feeling sad, angry, nervous can help your kids understand that these feelings are a normal and expected part of the human experience. Then, being gentle with yourself and being explicit with your kiddos about the ways you are managing your mental health is important; telling them about how you are calming your body, challenging unhelpful thoughts, or facing your fears can help them to deal with their own experiences. Finally, having an open and transparent line of communication where they learn over time that you will check in about how their brains and bodies are feeling will give them the sense that their mental health is just as important (an inextricably linked!) to their physical health.

These are some ideas to get the ball rolling, Kay. Hopefully they are useful to you currently and into the future!

A: What is the best way to deal with kids' anxieties - specifically, my middle-schooler struggles with intense fear and anxiety around schoolwork and tests. She is a great student but always assumes she will fail. Not sure how to deal with our daily schoolwork meltdowns.

DR. DEANNE SIMMS: Hi A,

Thanks for your question.

These kinds of struggles are very common for school aged kids and can be a source of strain and frustration for the whole family.

It sounds like your kiddo may have high expectations for

herself (in terms of her school performance) and, even though she ends up doing well, it seems like her worries about meeting her expectations persist and cause her to feel overwhelmed which leads to her “meltdowns”.

One way to support your kiddo through this is to let her know that her concern about her marks and school grades makes sense (i.e., to validate her emotions). If possible, perhaps you can share with her times you were concerned about school grades, or any adult examples of times at work or in your life that you were worried about how you’d perform. After normalizing her worries (and I’d encourage you to label them as such), you can then start talking to her about ways to manage her worries. This can include things she can do in her body to calm herself down before starting her work (deep, calming breathing, moving her body by going for a walk, or shaking her stresses out by doing a silly dance). You can then help her to be a detective about her worry thoughts: she can help to gather clues that either support her worries (Have I ever failed before?) or are against her worries (I am the top of the class. I’ve never failed before). Once she is able to challenge her thoughts and to calm her body, she may be more able to engage in her schoolwork in a calm manner.

If this continues to get in her way on a daily basis and is causing a lot of stress in your family, don’t hesitate to reach out to your GP or a mental health practitioner to get specific support for her worries.

Hope this helps!

LILIANA: How do you help your child when her friends have mental issues? Two of her high school friends have committed suicide? As a mother I am worried too.

DR. ANNIE GARNER: Great question Liliana. Teens are very social and highly influenced by their peers. Also, losing a friend to suicide is deeply traumatic and this also supports your concern. Finally, there is a phenomenon known as suicide contagion in which suicides among teens in high schools tend to cluster. All this to say, you have a very valid concern.

My recommendation would be to create a space for open communication with your child. Ask them how they are doing and listen. Don’t make suggestions, don’t try to fix the problem, and don’t try to make them feel better. Listen. Reflect on what your child has shared with you and

validate their feelings. Tell them that you love them and that you are always here to listen and if they need it, to find support and help.

ABBY: Communication with my teenage daughter is tough. She doesn’t want to talk to me because she thinks I don’t understand her (which I don’t, but maybe I would if she were to actually tell me about her problems). Do you have tips on how to get teens to open up?

DR. DEANNE SIMMS: Thanks for your question, Abby.

I can certainly understand your frustration: we want to stay connected to our kiddos through their teenage years, but it is at this time that they begin spending more time with their peers and at times, struggle to talk to us.

As parents, it is important to try as much as possible to keep an “open door” dynamic in your relationship and to encourage open lines of communication. To do this, it is important to make sure that our kids feel safe, feel heard, and feel a sense of trust when they talk to us. Being sure that our kids know that they can reach out to use (in any way, in person, by phone, by text) at any time, and that we will try our best to listen and not judge them but support them and their needs. It is important to make sure that when our kids talk to us, we do more listening than talking, and we validate how they are feeling. Letting them know that their thoughts and emotions make sense (maybe sharing stories about our own lives that are similar to some of the struggles or challenges they are experiencing) and holding off on “fixing” or “solving” their problems until they’ve asked, or until they’ve tried to figure things out (with your support) on their own.

Remembering that the relationship you are continuing to build with your teens may be tricky at times but will help to ensure that you are able to support them, and comfort them currently and into the future.

DR. DEANNE SIMMS: Thanks everyone for your wonderful questions today. It was great to be able to provide answers to help support you in caring for your kids and teens.

Take good care.

DR. ANNIE GARNER: Thanks for all of your thoughtful questions! I hope that you found my responses were

helpful.

LIFESPEAK: *Thank you, Dr. Deanne Simms and Dr. Annie Garner, for sharing your time with us today. We are sorry that we did not have time to take all of the excellent questions that came in. Thanks to all of you for participating!*

Please join us for our next Ask the Expert webchat, Dealing with anxiety, depression, and other mental health issues with Dr. Deborah Ledley and Janna Comrie, at 1:30PM ET!

Dealing with Anxiety, Depression, and Other Mental Health Issues with Janna Comrie and Dr. Deborah Ledley

Welcome everyone! We are so pleased to have Mental health experts, Janna Comrie and Dr. Deborah Ledley, with us today.

We will begin taking questions promptly at 1:30 PM ET. LifeSpeak will mediate this discussion and will allow or reject questions as they come in. Questions may be edited for length or for clarity. We will not accept questions that include personal attacks, unsubstantiated allegations, vulgar language or libelous statements.

Please note that Janna Comrie's and Dr. Deborah Ledley's answers are purely informational and should in no way replace consultation with a professional. We will do our best to pose all allowable questions today.

JANNA COMRIE: Hi Everyone,

I'm Janna Comrie, a Registered Psychotherapist in Whitby, Ontario. I've been working with people with a variety of mental health issues for over 15 years. I'm very much looking forward to answering your questions today.

DR. DEBORAH LEDLEY: Welcome all! I am looking forward to answering your questions!

MARY: I have GAD and over the last year and a half, my son also has developed anxiety symptoms, including excessive worry, belly aches, troubles sleeping. He has been seeing a therapist and has learned some cognitive strategies to help him cope. That said, I feel guilty about this, as I know it is genetic and that I might have passed this on to him. This is making me feel guilty and anxiety ridden.

DR. DEBORAH LEDLEY: Hi Mary, and thanks for your sharing your struggles with generalized anxiety disorder (GAD - which is a disorder of excessive worry). Anxiety disorders are heritable, and yes, our kids do learn how to view and cope with the world from us. However, please don't feel guilty! You are not only getting him therapy, but you are getting him cognitive behavioral therapy - the gold standard treatment for anxiety, so kudos to you! While we can't change his biology, we can teach him how to live a great life even if he has worries from time to time. Have you had CBT for your anxiety? If not, I might pursue that. At the very least, I hope your son's therapist includes parents in the treatment and gets everyone on the same page about how to talk about and manage anxiety. I find that anxious parents get so much out of their kids' anxiety therapy :) I am not sure how

old your son is, but you can help each other - point out when anxiety is creeping in, offer different ways to think and behave in anxiety provoking situations, etc. Kind of be each other's CBT coach! I am not suggesting pouring all your worries on your son - but it is okay to model that you have worries and show him that you can cope with them effectively and have him practice his therapy skills by doing a little coaching with you too!

BK: I have started the path to retire next spring after 41yrs of a career that I truly love. The isolation and loneliness feelings since COVID has me very concerned about retirement. Despite a great circle of friends/family and I am very social, I am struggling with what will life be like as my feelings of loneliness is overwhelming at times. I do plan to volunteer as well, yet I am truly struggling with letting go. Thank you for any suggestions.

JANNA COMRIE: Hi BK,

Leaving a career that you love is tough! It's first important that you recognize that the covid situation is not "normal". It has left many of my clients who are retiring concerned that that is what retired life is. And the good news is, that it absolutely is not. It's really important that you have some ideas of things that you will try and do that are new. Often people will go back to old faithful hobbies but having something new allows you to see yourself grow and develop as you learn something. This also encourages you to reach out to new people and new social circles. Having a daily routine also helps. Not necessarily one that is written in stone but a general daily practice of waking times, exercise, social time, meals, sleep times etc. The trick with combatting the loneliness is to have time for yourself, social time with friends as

well as time doing an activity that you feel good about doing. Good luck!

OVERWHELMED: In the last year I almost lost my mom to a rare blood condition. By the grace of God and my dad's dedication as her caretaker, she is alive today. But it has been difficult. During the pandemic she had to stay at the hospital for a while, where we were not allowed to visit. I called minimum 8 times a day to check on her and try to speak with her when possible. Despite our attempts to assure her this was not the case, she thought we had left her there to die. Since she has come home, she rarely speaks to any of us. It's hard to know what she is thinking. Unfortunately, she did not receive any hygiene care at the hospital so her teeth are rotted and she feels ugly. The stress of looking after mom has taken a toll on my family, particularly my dad who was recently diagnosed with rheumatoid arthritis. My husband and I try to help with doctors' appointments, picking up groceries and medications, being present for my dad in terms of providing company and a sounding board and someone to vent to. Due to my mom being immune compromised we have to be careful about who she is exposed to. I feel like I don't know what else I can do to help. I am concerned: - my dad will one day is not able to look after my mom in the same way - about how my dad will manage if/when something happens to my mom, after being her caretaker for 10 years - my husband and children's resentment towards this situation where we need to dedicate a lot of time to my parents, we are pretty much homebound, unable to have friends over, etc. We love to travel but I don't see how we can with having to look after my parents. I worry that with all the time I need to spend helping my parents that my bond with my kids is not as close as it used to be. My parents are very clear they do not want to go to a home and want to continue living with us for however long they have.

JANNA COMRIE: Hi Overwhelmed,

You and your family have been through a lot in the last year! In order to care for the others in your life, you first have to take care of yourself. And I understand in this situation how incredibly difficult this can be. While I completely appreciate your dedication to your parents, the reality is that you need help! You and your dad

cannot do all the caregiving here. You may want to speak with mom and dad's doctors about the options available to have someone come into your home even once or twice per week to help with things so that you and dad can get a break. Yes, that means potentially exposing your home to one more person, but like at the hospital, these people are professionals. Having someone in the home that you can trust will give you time for you and for your family. It is so important that you make time for yourself, your family and your parents in this. Looking for ways to create balance while remaining as safe as possible is key. Your mom and dad's physicians should be able to help with resources to help create this balance in as safe a manner as possible.

DADDY'S GIRL: Hi, I know a lot of mental health disorders are hereditary. Are panic attacks and severe anxiety disorder (diagnosed) part of the hereditary disorders? My father has such severe panic attacks he has to take Ativan. I already take after my father in many ways. I do not want to have to suffer from these if I can nip it in the bud. PS. I already take meds for depression and GAD.

JANNA COMRIE: Hi Daddy's Girl,

The exact causes of panic attacks are not known. There is some evidence that there is a genetic component at times, but it growing up in a house where parents have panic attacks may also lead to a learned behaviour. If you're concerned there are a number of strategies that you can learn to manage panic attacks and others to help manage overall anxiety and reduce the likelihood of panic attacks. Speak with your mental health professional for some guidance about what these are.

DR. DEBORAH LEDLEY: Hi, Daddy's Girl. Yes, anxiety disorders are hereditary. We don't inherit a specific anxiety disorder per se, but rather we seem to inherit the propensity to experience the world in an anxious way. Also, anxiety can run in families through social learning - our beliefs about the safety of the world and our ability to cope come from our families of origin and early experiences. We are lucky in this generation to know how to treat anxiety. Biology is not destiny!

Although you might be "hard-wired" to experience the world in an anxious way, treatment can help you learn to

engage with scary situations despite feeling anxious. We know that the more we expose ourselves to frightening situations, the easier it becomes (in other words we feel less anxious). Meds are of course useful for depression and GAD but the powerful learning comes from cognitive behavioral therapy. The risk of relapse is much higher after discontinuing meds than after ending therapy - because we LEARN skills to deal with anxiety. Definitely give it a try!

CAN'T ACCOMPLISH ANYTHING & NOW FAT: I have a good job, healthy kids, a decent husband and I have health issues but I am still alive. I am still grateful but I feel like I am failing at all of that but mostly my job. I have chronic pain for about 25% of the day which means I only have 75% of the day to accomplish what I need to. Plus, I have trouble focussing and keep putting off the parts of the job I find difficult. I cope with food, even procrastinate errands by taking time to eat food when not hungry. I don't use drugs or alcohol to cope, however if food is not available, then chew my nails even though it is gross. the more I get behind the more anxiety I feel and repeat and repeat. Any advice?

DR. DEBORAH LEDLEY: The first thing that pops out for me here is that you sound very critical of yourself! I wonder if you are setting excessively high standards for what you should get done in a day and perhaps that is not realistic for anyone - let alone someone with chronic pain. So, one place to start is to begin listening to how you speak to yourself - I recommend journaling but in a very specific way. Open up a journal and on the left side, vent. Let everything out that you are upset about. And then, on the right side of the page, respond to your vent as if your best friend had written it. What would you say to her? Can you start treating yourself as you would treat a loved one?

I'd be curious also about your self-care (I know, such an overused phrase these days). Do you get outside each day? Get a little exercise (not a marathon, just a walk outside or some yoga on your patio). When you do eat a meal, are you feeding yourself good, nutritious, real foods? Do you take time to do things that are fun/pleasurable and things that give you a sense of competence/accomplishment? These little tweaks to the day could be very helpful for your anxiety, focus, and

eating difficulties. With respect to eating, there is a great little book called *50 Ways to Soothe Yourself with Food* by Susan Albers. This might also be a helpful resource.

ANXIOUS WORKER: A new colleague of mine consistently goes on the attack when something is not as it should be. She always seems to blame me even if it is not my fault. If it does happen to be my fault and I ask for help as to how I should approach the situation in the future she does not respond. I am younger than her as I just graduated however, I have been working at this company for longer than she has. I am anxious that her constant blaming of me will lead others on the team to think that I am a bad teammate. This is very difficult for me to deal with because I know that I am qualified, am doing the best I can, and I am not afraid to ask for help. What do I do?

DR. DEBORAH LEDLEY: This sounds so challenging. It sounds like you haven't really had difficulties with co-workers at this job before?? If this is a totally new experience for you, it is worth considering that this isn't about you - but rather about this other person. Do you have a sense of how others feel about her? Are you sensing that her temperament is negatively impacting other people too? If so, I would seek help from your HR department or a higher up. Often, when a complaint is launched about a co-worker, it isn't the first - and sometimes an HR department just needs enough evidence to suggest that a new employee is not working out. In the meantime, when this person is behaving badly, you could try reminding yourself - "This isn't about me". Perhaps you could try to start understanding what is going on for her that makes her behave this way as a way to get away from self-blame. Sometimes, thinking about the problem from this other point of view helps an individual gain a different perspective on how to respond.

ANGST: Hi there, I find I suffer from anxiety in my work and home life to a point where it prevents me from either enjoying my work or enjoying my life. I would not say I'm depressed but I don't look forward to things anymore. I just sort of do and exist. Is this common and is there a way to get past this mindset?

JANNA COMRIE: Hi Angst,

This unfortunately is very common with anxiety. When people are worried about the outcomes of events or worried about what might happen, they start to dread day-to-day events and activities. Getting past this mindset often involves a combination approach. You will need to learn to deal with/manage anxiety in the moment as well as learn what is underlying the anxiety so that it doesn't keep happening. There are many ways to do this and many books and resources help with this as well. There are [anxiety workbooks such as one written by Edmund J. Bourne](#). There is the Mindfulness approach. And then there are a number of more traditional CBT (cognitive-behavioural therapy) and DBT (dialectical behaviour therapy) based approaches. You may want to reach out to a mental health professional for some guidance about which approach is right for you. The important thing to know is that you can get back to looking forward to things again. You just need some strategies to manage this.

MATT: My partner has anxiety and often becomes extremely overwhelmed and sometimes suffers from anxiety attacks. She recognizes this and is getting help, but how can I be a better partner for her?

JANNA COMRIE: Hi Matt,

First, you just asking that question makes you a good partner! If she is getting help, her therapist will be giving her strategies to use during anxiety attacks as well as to manage anxiety on a day-to-day basis. Have your partner walk you through what her therapist has taught her so that if the anxiety gets overwhelming, you know what her therapist has recommended, and you might be able to guide her. Practice it a few times when the anxiety attack isn't present. Another thing to remember as a partner is that anxiety is the body's way of telling you that a threat is happening. When she is anxious, you want to understand that to her the threat is real. You may not agree, or it may not be something you see as threatening, but to her it's a big deal. Using language that conveys that you understand to her it's a big deal is helpful. "I get that it's scary. I understand that you're feeling overwhelmed." You want to validate her experience - it doesn't mean you agree but often by acknowledging her feelings, it helps the anxiety to settle.

Good luck!

SB: Can post partum depression and/or post partum anxiety show up months after birth? I had support the month after delivery of my youngest child earlier this year while she was in NICU and I was there with her and after discharge felt "ok". However now 5+ mths pp it is becoming a larger struggle daily. I do also wonder if perhaps post-traumatic stress could be a factor with either of those as well?

DR. DEBORAH LEDLEY: It makes perfect sense to me that you are experiencing postpartum depression and anxiety now rather than immediately following the birth of your baby. When you have a baby in the NICU, you are kind of in emergency mode doing everything you need to do to make everything go well and you also mentioned having help/support at that time. It sounds like reality has hit now! You mentioned this is your youngest, so I assume you are balancing this new baby with other kids and whatever else your life demands (your home, job, etc.). It is so hard! You might find it useful to look up some of Karen Kleiman's books - she is an expert on PPD and writes so eloquently on surviving early parenthood. Also, can you identify what would make life easier for you? Could you hire a local student to help around the house or find a gym that has babysitting so that you can take some time for yourself? Do you need to be clearer with your partner (if you have one) about what you need help with? Also, try to pay attention to what you are saying to yourself. Are you holding yourself to unreasonably high expectations given the load of having little kids/babies? I always recommend that new parents set ONE NON-KID related goal a day for yourself - clean ONE room, not the whole house, for example. Maybe you can work on adjusting your own expectations. I cover all of these issues in my book *Becoming a Calm Mom* - that could be helpful too!

OLI: How to overcome the feeling of being "frozen"? I feel like I have a ton of ideas that I would love to pursue but always get overwhelmed with the steps that lie ahead and instead just find myself sticking to the status quo.

DR. DEBORAH LEDLEY: I would love to know more information about this struggle. But in the absence of that, I will try to offer you a few tips! In this tech-driven

world, sometimes an old-fashioned piece of paper and a pencil are our best friends. Set aside some time to really think about this. First, set a clear goal - for example, "Find a new job". Next, brainstorm. Scribble down all of your ideas - even ones that seem outlandish or impossible. Always include as an option - stick with the status quo (because sometimes that actually ends up being a good choice at the current moment in time). Then, take a new piece of paper and make yourself a chart - a column for ideas, a column for pros, and a column for cons. At this point, you might be pretty tired so take a break and return to your pros and cons chart the next day. Taking into account the pros and cons of each choice, pick a possible option. For this option, make an action list - what you need to do to meet your goal (getting a new job) and for each action item, set yourself dates by which to get that step done (update resume, take continuing education class that I would need to get this new job, call contacts in the field, etc). THEN, put the plan into action. Set yourself a date by which you will evaluate whether the plan is working or not. Put that date on your calendar. On that date, you might find you met your goal, you need more time, or you have reached a dead end - in which case, you can return to your initial idea list and try another option. I hope this helps give you some structure and break out of that status quo.

PAULINA: I have adhd and I suffer from migraines everyday. I also have depression and anxiety. I am on a triptan for my migraines, of which my neurologist only allows 9 pills a month. My psychiatrist tried lisdexamphetamine on me, which exacerbated my anxiety a lot. Now I am on nothing for my adhd, and he will not prescribe me anything because he says you need to get rid of your migraines first, as they seem to be your biggest problem. I am very frustrated, as my adhd is affecting my relationship with my husband.

DR. DEBORAH LEDLEY: Hi Paulina,

I am not an MD (psychiatrist or neurologist) so I can't advise on meds per se. But, I can recommend that you find a new psychiatrist!!! Let's keep in mind that migraine, ADHD, and anxiety all reside in the brain. A skilled psychiatrist, psychopharmacologist, or neurologist should be able to sort this out (ideally one person can cope with all these symptoms - which are actually not that unusual

or complex).

Here are some thoughts. If you are taking more than 9 triptans a month, your neurologist should consider preventative medication for migraines (not just rescue meds which is what the triptans are). Daily medication can prevent migraines and there are many options now. ADHD meds often exacerbate anxiety. Skilled prescribers will try you on different ADHD meds, and/or add an antidepressant to combat the anxiety. Interestingly, antidepressants can help in migraine prevention. It might be that you end up on a few medications - and while that is frustrating, the important thing is to get relief from migraine and ADHD without increasing anxiety. There is absolutely no reason why the psychiatrist should deny you ADHD meds until your migraine is cleared up.

USED: I am dealing with a person who is going through depression and anxiety. I have been helping for many years but now for the last 3 years refuses any help, medication and wants me to stop doing anything except "babysit" him. I am finding this is that I am isolating myself and going through motions without any results to improve my and his life.

JANNA COMRIE: Hi Used,

Unfortunately, if someone is dealing with a mental health issue, they have to help themselves. You can't make things better for them. You can be empathetic and sympathetic, but they have to do the work. And it sounds like you've been doing it. One of the best ways to help someone with depression and anxiety is to model for them the behaviors that you know would be helpful to them. These include eating well, good sleep habits, exercise, social time with friends, hobbies etc. While initially, they may see you as leaving them behind, sometimes, they will actually step forward and join you in these. You cannot change him, but by modeling the behaviors that are healthy, you'll feel better about you. You may also need to establish some boundaries so that you're not enabling the behavior to continue. If you are unsure how to go about doing that effectively, speak to a mental health professional.

S: My mom has been struggling with anxiety for several years now which mostly tie back to her mom's alcoholism when she was a child. She will openly talk about the past,

but she tries to hide from me when she's struggling in order to not burden me with her problems. How can I show her my support while still encouraging her to focus on the future as opposed to dwelling on the past?

JANNA COMRIE: Hi S,

It can be very hard to watch a loved one struggle with issues from their past. One thing that you could try is being open about it when you notice that she is struggling. You could simply say "It seems like you're having a rough go of it again" and then simply remind her that you love her today. You can try to get her talking about the present and sometimes that is helpful. The most important thing though if she is still dealing with things from her childhood is that she gets some professional support. You might be able to help with this by researching some mental health care providers. It's important that you recognize other than being your empathetic, sympathetic, loving self, there isn't much more you can do to fix this for her. She needs some tools and strategies.

TIRED: I have sought therapy for previous anxiety issues and I am taught tools to cope, this then manifests into other areas and the anxiety ramps up again but with different subject matter or circumstances triggering it. There has been past abuse but I am wondering if the coping tools are the same for all forms and causes of anxiety or maybe it is more distant and initial traumas haven't been dealt with although I feel they have been?

JANNA COMRIE: Hi Tired,

Anxiety coping strategies can vary depending on the issue, how the anxiety is presenting and the individual themselves. If your tools aren't working, have faith! There are so many tools out there. It's just a matter of finding you the right ones! You may also need some time to process as well. The fact that it is creeping up in other places suggests an underlying issue that hasn't been dealt with. Sometimes these issues are sneaky and don't have anything to do with initial traumas. Sometimes they are sort of hidden fears or worries. Speak to a mental health professional. They can help not only with new strategies specifically for the new issues but may also be able to help you uncover and deal with whatever is driving the anxiety beneath the surface.

B: I am a health care provider who has been sick (physically) and is currently undergoing treatment. I am having a hard time being a patient. I find that I am constantly judging myself for not being on top of things as I would be as a healthcare professional. I also worry that the healthcare providers, under whose care I am, are judging me as a healthcare provider for not knowing things. And I worry that this is also affecting my confidence at work. I have been trying to meditate and spend time in gratitude and try to separate fact from what my anxious mind is telling me but I am just spiraling. I am trying to be kind to myself but am just failing miserably. I cannot manage to quell the anxiety and the constant self-doubt and judgment.

JANNA COMRIE: Hi B,

I think as a rule, health care providers are generally not very good patients for all the reasons that you outlined! It sounds like you're really trying and that's awesome! As health care providers, we all have very specific knowledge that is relevant to what we do.... not about every possible health issue. Recognize that you are an expert in your area and your treating health care providers are experts in their areas. If we took them outside of their expertise, they wouldn't know it all either!

I think you want to acknowledge your feelings. You're dealing with something that is real and it has you physically ill. Therefore, you're allowed to be anxious. It is normal to feeling anxious when your body is not cooperating with you health wise. It sounds like you're trying to get rid of the anxiety. Perhaps learning to accept it and relax into it would help. Anxiety after all is a feeling and all feelings are transient - no feeling lasts forever. We don't laugh forever or cry forever. It can feel like it sometimes and then the feeling passes. Perhaps try allowing the anxiety while acknowledging that it doesn't feel very good. Acknowledge that it is just a feeling and will pass as all others. Don't try so hard to force it away. Observe and acknowledge. If that doesn't work for you, speak to a mental health professional. There is a myriad of techniques you could use and I'm sure you'll find the right one for you!

ANXIETY HELP: Hello, I suffered a lot of PTSD from a near death experience flying in an airplane. Since then,

I've developed a generalized anxiety disorder that I cannot turn off. I've developed health anxiety that gets triggered automatically. I feel like I could get a heart attack and die on the spot when I'm in these anxious moments. I've gotten better at calming myself down but I want to get rid of this all together. How can I gain the confidence to not fall into these anxiety traps?

DR. DEBORAH LEDLEY: Oh goodness - I am so sorry that you had such a terrible experience. I wish I could ask you some follow-up questions - you say you have GAD (generalized anxiety disorder) and health anxiety but I actually wonder if you are having panic attacks, possibly triggered by thoughts, images, or memories associated with your trauma. This would be very a normal reaction to trauma - for example, experiencing a panic attack if you hear an airplane overhead or see people in a plane on tv/movies. When people have panic attacks, they experience an abrupt onset of the physical symptoms of anxiety and worry that as a consequence of them, they will have a heart attack, go crazy, or do something out of control. Because the physical symptoms are so uncomfortable and the thoughts are so scary, people then tend to start avoiding situations where they had panic attacks (even if had nothing to do with the initial trauma). This can lead to an increasingly limited life. I would strongly recommend you seek out a cognitive behavioral therapist who specializes in the treatment of trauma. They could help you work through all of the pieces of this puzzle and get back to living a calmer life.

PRINCESS: Hi there, my boyfriend sometimes has anger issues and anxiety. He would NEVER hurt me physically, but his bad moods affect me and his tone of voice towards me when he is angry or frustrated. It really upsets me and the situation escalates. He has been to therapy a few times, but he stopped and I asked him to go again, he said he would but during our last argument he said "You always want me to change and go to therapy, then don't be with me". How can I address the situation when this isn't the case but I know he needs some mental help.

JANNA COMRIE: Hi Princess,

This is such a tough one! The reality is that we can see all the potential in someone but unless they are doing something to actualize that potential, they aren't likely

going to get there. He has to see the problem with his behavior and genuinely want to address it for it to change. You can suggest, but at the end of the day, he has to want it. All you can do is what is right for you. That may mean that you decide that it is not right to be with a person who isn't getting help for their anger. You will need to figure out where your boundaries lie. What are you okay with and not okay with? You can't change him, but you do get to make your own choices for you.

KATE: Hello, Sometimes I find myself zoning out and worrying about my future constantly in every sort, of work, family, relationships. I try to bring myself back to the present and have a motto going of "living in the moment as it is", but after I snap out of it, my mood turns sour and I can't seem to focus without contemplating of the future again. Are there any tips you suggest to help reduce my overthinking and focus more on the present? Thank you.

JANNA COMRIE: Hi Kate,

Overthinking typically happens because we really care about something and we're afraid that it isn't going to happen for us. I would suggest establishing two or three goals for yourself. Perhaps one personal, one work related and one relationship related. For each of the goals, make a list of the steps required to obtain/ achieve those goals. Break the steps into small, concrete, measurable steps. For example, if my goal is to meet new friends, maybe my step 1 is to go online and research activities that I might like where I have the potential to meet a new friend. Once you have your steps broken down, each week work towards a step or two. Keep a journal of what you have done towards the steps. This give you concrete evidence that you are getting there and working on it. Remind yourself that life is a journey and as much as you want to live in the moment, it's okay to work toward the future as well. You want balance here.

WORRIED SPOUSE: My spouse often catastrophizes things and goes from zero to sixty at random events. She seems to play the what if game a lot and has become pessimistic I don't know how to support her right now.

JANNA COMRIE: Hi Worried Spouse,

It sounds like she is really struggling. I'm wondering if

you have talked to her about what you've noticed in a moment when she is calm and relaxed? If you haven't you may want to try expressing it and your concern for her. Covid has exacerbated the 'what ifs' for a lot of people. We've not had to deal with a global pandemic in our lifetime and all of the sudden for many, bad things can happen and have a huge impact. If she recognizes the issue, you may want to encourage her to speak to a professional. If she doesn't see it initially, give it some time. It will happen again and then you can bring it to her attention again. People aren't always aware of what they are doing. Most importantly, be patient and direct. I'm sure that she isn't feeling great if this is what she is doing.

CONCERNED: A friend of mine is the "black sheep" of their family, where their family members are often catty and belittling to them for years. I am concerned for their well-being as I'm seeing a lot of self-doubt and generalized anxiety surface, and they have been cutting ties with friends and becoming more reserved. How can I help them?

DR. DEBORAH LEDLEY: This is a great situation for a family therapist. When patterns become so ingrained over time, people no longer even realize how harmful their behavior is. And the "black sheep" might also do things that inadvertently maintain the belief within the family that they are "less than" (such as not sharing an accomplishment, putting themselves down, etc.). It sounds like work needs to be done on both sides.

As a friend, you could help your friend explore why they are cutting ties with other friends. Is it that they have friends who kind of mirror the behavior of the family - making your friend feel less than? Or are the friends supportive but depression and anxiety make them feel like they don't have enough energy to socialize? Depending on the answer, you could help your friend see how surrounding themselves with supportive peers (either existing ones or new ones) can be a very effective balm for an unsupportive family. As the old saying goes - friends are the family we choose!

GAB: My husband cheated on me almost 10 years ago and I think I am suffering from PTSD. Certain triggers like a smell, song/s, words, places, events bring me back - like it happened just yesterday. All the pain that comes with

it. How do I help myself get past this so I can move on and be better?

JANNA COMRIE: Hi Gab,

It's amazing how much the body remembers experiences from the past and it sounds like your body is definitely remembering. Often when people are being triggered, it's because their body is trying to protect them from it happening again. So, again your body remembers. Learning about how you might go about things differently in your relationship and how you might process what happened differently can help the body to stop remembering what did happen. Your mind/body learns that you will do things differently to protect yourself going forward so it doesn't keep reminding you about the past. You want to speak to a trauma informed therapist to help you through this. You can get to a point where you're not still carrying this.

KATE: I have family living in Europe that I haven't seen in three years (mostly due to the pandemic). I have vacation to use this year and I feel guilty using it for anything other than traveling to see them. I do want to see them; however, I sometimes feel anxious about traveling by plane and the anxiety is increased by the unpredictability around the pandemic we are in. Do you have any tips for dealing with traveling by plane anxiety, during a pandemic? Thank you.

JANNA COMRIE: Hi Kate,

Plane anxiety is very common and the pandemic isn't making it any easier! First, start working on coping strategies as far ahead of traveling as you can. Some good things to practice are box breathing and visualizing yourself in a calm state. I often have clients visualize their favourite place. While in the visualization, I'll have them focus on all five senses - what do they hear, see, smell, feel on their skin, and taste. This helps them to get calm prior to getting on the plane. Also, looking for the spaces above the seats if you're claustrophobic. There are many strategies that one can use - the trick is to practice them as much as possible prior to your flight. Give yourself time and space to take breaks going through the airport. It may mean arriving early but this may allow you to practice your visualization and get calmed down before you even get on the plane. You may want to seek

professional help (even 2-3 sessions) to just review some strategies that you can practice.

A DARK PLACE: Recently I am afraid to drive. When I'm driving, I just wanted to crash the car and end my life. When I walk on the street I just want to jump into the traffic and get hit by a car. So I just stay home. Not sure what to do next...

DR. DEBORAH LEDLEY: I am so sorry you are feeling this way. I truly hope you can share this "dark place" you are in with a family member or your family doctor and get some help - which you so deserve. Before I address suicidality, I just want to say that some people with obsessive compulsive disorder (OCD) experience intrusive thoughts about harming themselves. They might FEAR they are going to crash the car or jump into traffic - but are terrified of doing so. If this is what you are dealing with, finding a therapist who really knows OCD treatment would be amazing for you.

You do say that you want to end your life, so I am assuming your thoughts are more expressive of suicidal thoughts than OCD. Please know that there is help for you. There is a wonderful new book out called *The Suicidal Thoughts Workbook* - by Katie Gordon. It is really clear and helpful and I think you would get a lot out of working through it. Seeing a cognitive behavioral therapist who specializes in depression would be super helpful too. And, you might need to take some medication - it sounds like these thoughts are really sticking around and a psychiatrist could help you find some relief with an antidepressant or other class of medication. Please know you are not wasting anyone's time by asking for help. People with this kind of thought often feel like they are a burden to others. **YOU ARE NOT!** Every human being is of value - please take care of yourself.

For immediate support, I would suggest these resources:

- <https://www.crisisservicescanada.ca/en/>

- <https://suicidepreventionlifeline.org/>

FAZA: Hi, I never spoke to specialists about this topic, and I am not sure if I really need assistance but? My wife lost her mother suddenly in August 2018, here in Canada. She is the only child, and they were best friends.

It was Lung cancer, very aggressive, in 5 weeks since diagnosed she passed away. Our life is in completely in different spot like never before. Is already over 1 year but for my wife and me too is still feels like yesterday Is hard to find out enjoyment in everyday life I don't really have a question but maybe some different point of view?

DR. DEBORAH LEDLEY: Hi, Faza. I am so sorry to hear this. There is no timeline for grief and it takes some people longer than others to feel okay after such a profound loss. I have two thoughts for you and your wife. One is to seek some help from a clinician who specializes in grief or to join a support group of others who are dealing with similar losses. This is a completely normal and understandable difficulty to seek help about.

Second, this pandemic has made it so hard for any of us to engage in the activities that bring us joy and meaning in our lives. I wonder if you and your wife have been so focused on your loss over the past year and a half because there hasn't been much else to put our attention on and there is so much attention to loss being spoken of in the news every day. Maybe you and your wife can think back on things that used to create feelings of joy, fulfillment, contributing to others, etc. pre-pandemic and see if you can safely re-integrate any of these into your lives. Doing so won't cure your sadness but might remind you that life can still be pleasurable and meaningful.

NEEDS HELP: Hi, I really want to get help with my anxiety and depression and I don't know where to start. There are so many different kinds of experts and don't know which kind of therapist would best address my issues. How should I go about finding someone and what kind of qualifications should I look for?

JANNA COMRIE: Hi Needs Help,

This is such a great question! You want to look for someone who has a personality that is a good fit with you as well as practices a type of therapy that intuitively makes sense to you. You can read about different types of therapy for anxiety and depression and many sites will outline similarities and differences. Fit here is really important! Most commonly CBT, DBT, ACT and mindfulness therapies are used for these issues but there are other types of therapy that are very effective too!

As far as credentials go, you want a Psychiatrist,

Psychologist, Psychotherapist or Social Worker generally speaking. Some areas also have counselors and mental health professional designations. If you search for mental health professional licensing in your area, you will see what is required in order to be licensed where you are. I would suggest sticking with a licensed professional.

ALLIE: I was sexually assaulted back in 2018 and after watching a tv episode where something similar happened to one of the characters I have found myself feeling extremely anxious about the event. I don't think I ever really dealt with it as I was still in school and told myself that I didn't have time to focus on the negative. What can I do now?

JANNA COMRIE: Hi Allie,

Often everyday triggers can cause the mind to remember traumatic events. At this point, your best approach to is contact a therapist who is specifically trained in trauma to help you through the process. They can often provide strategies and techniques for processing the traumatic incident as well as any unwanted residual feelings.

SAM: I constantly compare my life to more successful people, which in turn makes me even more anxious and depressed. Not sure how to stop comparing when I feel like such a failure?

DR. DEBORAH LEDLEY: Hi, Sam. Social comparison is a really interesting thing we do to ourselves - we tend to only compare ourselves to others who are better off and rarely compare ourselves to those not doing as well as us (which might give us a little self-esteem boost). I would love to be able to spend some time with you fleshing out what makes you feel unsuccessful/like a failure. Are you stuck in a job that offers little advancement or a relationship that isn't satisfying? Or are you objectively doing quite well but are so hard on yourself you can't enjoy the fruits of your labors? A good cognitive-behavioral therapist who works with anxiety and depression would be able to work on this with you and hopefully get you to a place where you can make some valuable changes and/or learn to feel more satisfied with your current state of affairs.

A WORRIER: In the last year, I was hired knowing I had limited previous experience in my role. When I talk to people with many years of experience, I get intimidated

by them, even if they want to help my career growth. How can I reduce this anxiousness/lack of confidence?

DR. DEBORAH LEDLEY: Kudos for you on your job. The people who hired you must have believed you to have potential or they would have hired someone with more experience! It is a wonderful quality to be able to admit what you don't know (check out Adam Grant's latest book, *Think Again: The Power of Knowing What You Don't Know*, he discusses this). It sounds like when you speak to more experienced people, you worry about being judged badly.

Treat this as a prediction - and check it out EVEN IF YOU ARE ANXIOUS. Your anxiety is telling you to run away, but the only way to get experience is to put yourself into those scary situations. So, set up some phone calls, meetings, etc., and assess (to the best of your ability given that we can't read minds!) whether the people you meet with are dismissive or glad to be mentoring you. Although we might come across a rude, dismissive or critical person from time to time, the vast majority of people want to help others. And perhaps the mentorship of rude, dismissive or critical people is not valuable to you anyway!

AMFRIESEN: As getting older (45 this year) husband and myself noticing that my mental capacity is reduced, anxiety increased and general outlook on life change (anger, forgetfulness, sluggishness, etc.) prior to my menstrual cycle but does not seem to fade as much as it use to after cycle done - is there a specialist, doctor or other medical help for this type of situation? - prior experience revealed very low iron levels and then I got stabilized but situation has come back with iron levels low to normal.

JANNA COMRIE: Hi Amfriesen,

Hormonal and physiological changes with aging are really common. Couple that with the iron issues and it can lead to many of the symptoms that you have outlined. First and foremost, it's important that you speak with your doctor about these things as physiological issues have to be ruled out. As far as psychologically what you can do, there are a number of things. First, be patient with yourself and be very careful not to be constantly comparing yourself to your younger self. You have grown

and changed - with that comes experience, maturity and a certain level of self confidence often not seen in younger individuals. Use reminders - use your phone, calendars etc. to help you remember things. Make lists and write things down. Often when we write things down we help ourselves to remember them because we are not just encoding them auditorily but also visually. Also, you want to show yourself some grace - every day we spend on this planet is another day of things to remember and we can't possibly remember it all! Your brain isn't designed to recall everything, so when you forget, recognize that that is okay and be patient with yourself.

SHANNON: Nearly every morning as I am laying in bed and just waking up, my first thought is something to do with work. My body reacts by breaking out into a sweat and feeling fear in the pit of my stomach. The thing is I'm doing really well at my job, but I'm still afraid that I'm going to mess something up. I do healthy things to combat this like healthy self talk and exercising almost every morning. Acknowledging this is basically irrational fear-based thinking helps but I'm still going through it literally every day. Can you suggest what more I can do?

DR. DEBORAH LEDLEY: Hi Shannon. If I were meeting you, I would have lots of questions - but without that ability, I will throw out a few ideas! First, I find that the longer people lay in bed in the mornings with anxiety, the worse off they are in terms of how the rest of their day feels. I strongly encourage putting your feet on the floor as soon as your alarm goes off. If you are very pulled to thinking about work as you are getting ready and getting in to work, try changing the channel in your brain. You are currently on the work anxiety channel - but could you switch to listening to some music in the mornings, listening to an audiobook, watching one of the morning news shows?

Second, I might try writing down your worries (you could do that right when you wake up before "changing the channel" :) Be very specific about what you fear will happen during the day. For example - I am worried that I will forget everything I need to say during my presentation; I am scared my boss will send back yesterday's report and say it is totally wrong; etc. At the end of your workday when you get home, evaluate your

worries - did they come true? Yes or No? If a worry did come to pass, were you able to cope? Basically, we want to learn that most of our worries never come to pass and that if one does occur from time to time, we are usually much more able to cope than we had expected.

Finally, I am curious to know if you are a perfectionist? You mention fear of messing up which led me to wonder about exceptionally high standards? If so, there are great books available to help with perfectionism like *When Perfect Isn't Good Enough* (Antony and Swinson) and *Cognitive-Behavioral Treatment of Perfectionism* (Egan, Wade, Shafran and Antony).

JOHN: Often, I wake up in middle of night and can't fall asleep again because my mind starts racing and worrying about stuff like work, family, etc. What advice do you suggest to calm the mind & go to sleep?

JANNA COMRIE: Hi John,

It's funny how our minds can hijack our sleep in the middle of the night at times! There are a number of strategies that you can try. First, try keeping a pen and paper by your bed. Often, when the mind is racing it's a sign that your brain thinks that it's really important that you remember something. If you write down exactly what's going on in your head, it's a handy way of tricking the mind into thinking that it can stop rehearsing what it doesn't want you to forget. Think about a shopping list - if you were to go to the grocery with 8 things to buy and no list, you'd rehearse those 8 things the whole way. If you write them down, you don't rehearse them at all. That's because there is a chemical reaction that goes off in the brain when something is adequately recorded that tells us we can stop rehearsing.

Another strategy is to focus on relaxing - the feel of the bed, the sheets, the pillow. Often people will focus on sleeping and then get anxious that they are not sleeping. Focus on relaxing and sleep will typically come.

BOB: Everyone is so angry and confrontational these days. Brings you down and find them dragging me in. Any tips on how to deal with these people?

DR. DEBORAH LEDLEY: Hi, Bob. These are tough times. There do seem to be so many divisions in our society, causing angry exchanges. And, when people are stressed

about life, some do tend to drive more aggressively, get snappy when waiting in lines, etc. For a week, try monitoring the situations where you are finding that people bring you down/drag you in. At the end of the week, identify which situations you have control over and which you don't. As a silly example, I was noticing that my favorite grocery store was very busy on Sunday afternoons and there were many people not wearing masks which made me uncomfortable. This is a situation I can change. I have been trying to shop during the week when my work schedule allows and when the store has fewer people.

Of course, there are situations we can't change - can we figure out ways to manage our own discomfort at those times? For example, if you must drive during rush hour and are agitated by jerky drivers, try finding a podcast or audiobook that you can enjoy on the ride home. We do have the ability to shift our attention from things that bug us to more pleasant thoughts/activities!

With respect to people - ah, that one is more difficult. Again, with control, think about whether a change can occur in a difficult situation. If you are always getting into debates about vaccines with an unvaccinated relative, it might be time to step out of that situation rather than continuing to get agitated about someone else's behavior.

ANXIOUS IN ALBERTA: Hi, I was in a car accident almost one year ago. I find as I approach the anniversary of the accident date, my anxiety is more heightened. I've been taking medication for 6 months for anxiety and depression, but it doesn't seem to be helping with this increased "anniversary" anxiety. What are some other strategies I can use to lessen this?

DR. DEBORAH LEDLEY: I am so sorry about your accident. Anniversary reactions are common after experiencing a trauma. I would really recommend that you find a therapist who specialized in cognitive behavioral therapy (CBT) for trauma. There are various kinds of CBT for trauma, like prolonged exposure therapy. In this therapy, a therapist helps you to process your trauma experience. An important part of this is recognizing if you are avoiding thinking about the trauma - we know that the more we try not to think about things, the more they tend to pop up at unwanted

times. This can cause a lot of distress! Exposure therapy involves repeatedly recounting your trauma story and making sense of what happened so that you can file it away in your memory in a more organized way. The memory will always be there but won't keep popping up and feeling intrusive. Also, the therapist can help you to recognize if you are avoiding anything after your accident - like driving in general; driving in that same spot; etc. Doing exposure to these situations and seeing that you can be safe and cope would also be very helpful. The Association for Behavioral and Cognitive Therapies (ABCT.org) has a great "find a therapist" function. Try to find someone in your area who really specializes in this kind of treatment. Good luck!

SHYGUY: Hi, I was in a car accident almost one year ago. I find as I approach the anniversary of the accident date, my anxiety is more heightened. I've been taking medication for 6 months for anxiety and depression, but it doesn't seem to be helping with this increased "anniversary" anxiety. What are some other strategies I can use to lessen this?

JANNA COMRIE: Hi ShyGuy,

First, I'm very sorry for your loss. That's a lot to be going through! Getting out of the funk involves a lot of little things - taking good care of yourself (diet, exercise, sleep), social time with friends, involvement in your hobbies and allowing yourself time to grieve to name just a few. If the first things that I mentioned here are proving to be too much of a challenge, you may want to reach out to a grief counsellor to discuss strategies for how to implement these things after two close, significant losses. They will be able to help you figure out what order to do these things in as well as how to allow, honor and process your grief in an effective way. Wishing you all the best going forward!

ANTHONY: I feel stressed and unable to concentrate, my memory got bad where should I go and who should I talk to I don't have family doctor. Are those kinds of services free?

DR. DEBORAH LEDLEY: Hi Anthony,

You are describing a common experience these days. Between the overload of technology and the stress of living through a pandemic, many people are describing

high levels of stress and difficulties concentrating. I recommend that people practice doing ONE THING AT A TIME. It is so challenging, but when you are working, switch off alerts on your phone and put measures on your computer that don't allow you to check social media, etc.

When you are having leisure time, really be in it - don't try to do five other things at the same time. This experience of being fully present in the moment brings mindfulness to mind. You might find it helpful to try a mindfulness app like Headspace or Calm. There are many free or low-cost resources available for learning about mindfulness.

JANNA COMRIE: I want to thank you all for your fantastic questions! Mental health issues can be exceedingly challenging at times - especially in a global pandemic. The most important tips are to take good care of yourself and if in doubt, contact a professional. Be well!

DR. DEBORAH LEDLEY: Thanks so much for sharing your questions with me. I hope I have been of some help. Best wishes to all of you and stay well!

LIFESPEAK: *Thank you, Janna Comrie and Dr. Deborah Ledley, for sharing your time with us today. We are sorry that we did not have time to take all of the excellent questions that came in. Thanks to all of you for participating!*

Please join us for our next Ask the Expert webchat, Improving your mental health in your partner relationships with Dr. Colleen Mullen, at 4PM ET!

Improving Your Mental Health in Your Partner Relationships with Dr. Colleen Mullen

Welcome everyone! We are so pleased to have PsyD, LMFT, Licensed Marriage and Family Therapist, Dr. Colleen Mullen, with us today.

We will begin taking questions promptly at 4:00 PM ET. LifeSpeak will mediate this discussion and will allow or reject questions as they come in. Questions may be edited for length or for clarity. We will not accept questions that include personal attacks, unsubstantiated allegations, vulgar language or libelous statements.

Please note that Dr. Colleen Mullen's answers are purely informational and should in no way replace consultation with a professional. We will do our best to pose all allowable questions today.

DR. COLLEEN MULLEN: Hi Everyone! I'm a Licensed Marriage and Family Therapist in San Diego. I've been practicing for 20 years. I love working with couples or individuals who are seeking to change/improve their relationship patterns. I'm also a blogger and have been hosting the Coaching Through Chaos Podcast since 2015. I'm happy to be here to today and excited to see how I can help you.

S: Hello, I'm in a relationship with a wonderful boyfriend, after not being in any relationship for over 9 years. He is 5 months younger than me, which I do not have an issue with. I feel incredibly happy and comfortable with him, however, at the same time, I have questions of self-doubt and constant worry over my future with him. I do not understand why I'm feeling like this, and I'm worried it has potential to disrupt my relationship. Do you have any tips on how I can trust myself and in our relationship? I don't want to lose him but I keep thinking, is there someone where I won't feel like this around? If I'm thinking like this, does this mean I should move on or stay to make it work?

DR. COLLEEN MULLEN: Hi S - It's so wonderful to feel loved again after such a break. Without knowing why there was such a break in your love life, I will go with what you have presented regarding your self-doubt. It sounds like this is something you have experienced before. When you have self-doubt, doing a quick check-in with yourself for evidence that your doubt is true or not in that moment can be enough to get you refocused on what is going on in the present.

I am concerned that it sounds like this is something your feel is a pattern, or you are destined to keep feeling. This is a great time for getting yourself into individual

therapy with someone who can help you explore your ideas around relationships security, trust, self-esteem and emotional safety. That feeling has been around long before your partner has and, as you suspect, it will cause harm in the relationship if your partner gets put in a position to reassure you of his love when he is not doing things to cause you to doubt it. Best wishes to you.

BEL: How can we improve connection in this digital times. Both my husband and I are always in front of a screen (laptop, mobile phone, tv). If I sum up the meaningful conversations (just revolving on us) we have on a daily basis, I would be lucky if that adds up to even an hour.

DR. COLLEEN MULLEN: Hi Bel - You and your husband have fallen into the screen trap that so many of us have also. One of the things other couples tell me when they present with this problem is that they have misconstrued quality time together with the quantity of time together. Just because your home together every night for hours in the same room, if you are not actually connecting with each other, there is no quality to that time.

1. This will sound very basic, but an easy move is to decide with your husband that at a certain time every night (or a certain number of nights), when you will put the screens down. Sounds simple but many people don't know what to do anymore, or they are used to the little dopamine rushes that social media can bring, that just being without the screen can feel boring. During the no-screen time, talk about what happened in your day- what's good/what's not good? Plan an activity over the weekend. Say something you appreciate about each other - kind words go far for increasing a feeling of emotional connection. It will take some practice,

but even 60 mins an evening can vastly improve your feelings of being connected.

2. If you get stuck for conversation ideas, you can Google “conversations for couples” or “questions for couples”. Those can help you discover just a little more about each other. You can also share about books you are reading or things you are working on. Some couples even like to take up an activity: a board game, a puzzle, listen to some music out on your patio, change up the expectations (that its boring without the screen) and you will change up the resulting feelings.

If you want to connect more without the screens, then the screen needs to be turned off. It's simple, but so complicated too. I hope you have fun exploring ideas for connecting with your husband.

LORI: I was previously in a physically and mentally abusive relationship. My current partner is nothing like my previous partner and we have a great relationship. We trust each other, we communicate well, all these good things. However, there are times when I feel like I let my past experiences shape how I act in my current relationship (i.e., is what I'm doing going to make my partner upset even when I know I'm doing nothing wrong). There are times I feel like I make decisions based on how my previous partner would react instead of my current one. Any tips on how to separate the two relationship and get over what happened in the past?

DR. COLLEEN MULLEN: Hi Lori - I'm always happy to hear about people who have gotten themselves out of abusive relationships in to loving ones. Good for you! Now, let's attend to the things that go on in your mind that are based on the past. What's going on for you is relatively common. It's really tough to avoid having the past relationship cloud the present when it was wrought with the emotions that show up in an abusive relationship.

1. When you notice the thoughts, remind yourself that you are in this new relationship and you trust the love you feel. This conscious thought intervention can help strengthen a new idea in your mind that this relationship is safe and loving, which can help the intrusive thoughts get minimized or extinguished over time.

2. When your partner asks something of you and you

find yourself reacting out of what you think they want (past behavior), rather than what you truly want, it's time to change that too. In this relationship, always authentically state what your response is. YOU have no reason to fear your partner and you can have a difference of opinion. You know truly how different this partner loves you. It is not anything like the past. You can be yourself. Do that/say that.

3. Between the intrusive thoughts and the decision-making dilemmas you presented, working through the past abuse and learning about how to withstand a healthy relationship (trust/vulnerability/emotional safety) can be so helpful. I definitely recommend seeking out therapy with a licensed mental health professional who has experience helping people who have been in abusive relationships.

SM: When there is a conflict and I want to start a conversation about it, my partner does not want to talk or engage when I raise it. This is a recurring response of his. He says it is to allow me to blow off some steam without interjecting but it comes off that he does not care. How can I have a constructive conversation with my partner and ensure he engages in the discussion? Or how can I encourage him to start these discussions?

DR. COLLEEN MULLEN: Hi SM - It sounds like your partner engages in what's called “stonewalling”. He says he'll listen, but he does it in a way where you are not feeling heard because he chooses to not respond. I definitely want to help you get the communication door opened so that you can actually converse him, rather than do what equates to venting and leave frustrated. There are lots of reasons that play into how a person becomes a stonewaller, but they usually were developed long before you came along.

To start the conversation, especially if it's about something that is bothering you between the two of you, that may be a subject that shuts your partner down, here's a different way to do this: Many people will just either start talking about what's bothering them or they will say, “I want to talk about.... (last night, that thing that happened, etc.) This is considered a type of opening that can shut down someone who is conflict avoidant or doesn't feel it's helpful to talk about how they are feeling. ----- Try this instead: “I am still feeling like what

happened yesterday (or whenever) is unfinished. I'd like to talk about it. Is now a good time?" Here, you engage your partner in a choice about whether they want to have that chat right now. If he doesn't, then you say, "When can we make some time to do this?"

An alternate to that is to also start by saying, "I know we have difficulty talking about (\$\$, kids, our work, family, etc.), but I'd really like to find some time to talk about _____." It's just another way to engage him. Again, this request would come with a question of choice about when he wants to talk about it.

To address your request about engaging him more once you get the conversation going, be mindful that he may feel overwhelmed/anxious/concerned about how you might react, so pace yourself in what you tell him. Any change you get, ask him Questions that are just meant to keep him engaged. "What's it like for you to hear me tell you I don't like this?", "What do you think?", "I'm wondering if you knew I felt that way? How do you feel about it?"

Without knowing your partner's emotional makeup, I don't know that you'll get him coming to you to open difficult conversations but practicing the above can help the process feel less confrontational and more collaborative. That alone, may help him realize he can come to you as well.

JUST MOVED IN: I just moved in with my partner and I'm struggling with feeling overwhelmed by the commitment. It's a small one-bedroom space, and I am used to living alone. Wondering if there are any strategies to cope with my new situation.

DR. COLLEEN MULLEN: Hi Just Moved In - Congrats on the move! I'm sure you were excited, but now the overwhelm kicks in. This can happen for lots of reasons. It sounds like there's a piece of you that feels you lost your independence. I get it. It's tough to share a space when you are used to living alone. Here's some things you can do:

1. Communicate your need for time to yourself with your partner BEFORE it's a problem. If you are already feeling cooped up, it may come out in frustration. Saying something like, "I really love that we are living together. It feels really nice for the most part. I think I'm discovering

that alone time is really important to me, no matter how good we are doing together. I'd like to find some time for myself, preferably at home, on a weekly basis where I am just chill out for an hour or 2 without having to think about anything else". This let's your partner know its not about them. What can they do during that time? They can run a couple of errands on Tuesdays after work. They can get together for dinner with a friend of theirs. The can go to the gym, or maybe there's even a quiet space in your apartment building. Many places have reading rooms or communicate spaces that are rarely used. If nothing else, maybe they can go hang out there for an hour or two one night a week.

In reciprocity to them for the accommodation, ask them what they need in adjusting to your new living arrangement. Maybe you're expressing your need will help them feel more comfortable if they've been shy about communicating how they are feeling in the move.

VN: I had an affair almost 3 years ago and after years of therapy, my partner is still struggling. We've done individual and couple's therapy. How long do I allow them to use it and throw it in my face during every argument? What more can I do to help them and our relationship heal and move forward?

DR. COLLEEN MULLEN: Hi VN - First off, I want to say kudos to you and your partner for doing the complicated work that's involved in recovering from an affair. It's so tough and there are so many things that factor into a person's response to it.

My main recommendation for you is to continue working with a Licensed Marriage and Family therapist who sees couples (some don't). Also, I'd recommend seeking out that therapist who has special training in either The Gottman Method or Emotionally Focused Therapy. These are 2 evidence-based models of therapy that train the therapist to better help the couple access their emotions, rather than coming in from week to week processing the current pain.

One of the things I can recommend to you is that, when your partner brings up the affair, you do your best to not attend to defending yourself or arguing back. Try to hear what they are feeling in that moment- Are they scared to trust you? Did something happened to trigger them?

You are correct in feeling like it's been 3 years and you want to be done getting punished about it. At some point, your partner does need to decide that this is something that happened in the past, that they have chosen to rebuild this relationship with you, and how to manage their own triggers when they show up. It's often most difficult to a partner to admit that they chose to stay and work on their relationships post-affair because we live in a society that generally condemns the partner who had the affair and gives messages that it's weak for the other partner to stay. I want to be clear in that no one understands what it's like to live in your relationship, and they have no idea what they would do when presented with the same occurrence in their relationship. There are a lot of opinions that need to be filtered out.

When at all possible, remind your partner that you love them, want to be with them, and try to understand the things that trigger them so you can best work through them and start leaving that pain buried in the past part of your relationship. Your relationship is re-built - like a reconstructed house. It might have the same framework, but it is definitely changed.

A strong therapist who specialized in couples who have had an affair can get this process going in the right direction.

If you haven't already, it can be helpful to understand how people in love affairs have by watching/reading some of [Esther Perel's work](#) on the subject.

SP: In my relationship, we are in a "funk" when it comes to being physically intimate. We are both busy and a lot of time, I'm just not in the mood. I know this is affecting the relationship in a negative way. How can we overcome this?

DR. COLLEEN MULLEN: Hi SP - It's so tough when you both want more intimacy, but energy and time seem to get in the way. Here are some suggestions:

1. Literally schedule "alone time" with each other. It's not the most exciting way to think about having sex (by scheduling time to at least be present so it could happen), but it is a way to at least carve out time for it. The "it" is not necessarily sex, but its time that is just for connecting with each other. I can recommend Googling

"date box ideas" or "sexy questions for couples". Which may get you talking about your sexual behavior/desires, and possibly leading to physical intimacy.

The important part about the appointment time is that if alone time is not prioritized, it just will not happen. Too much of life gets in the way and you risk both of you just feeling lonely and/or resentful.

2. Add in a novel experience - one that has nothing to do with sex - go for a bike ride, art exhibit, wine tasting, beach volleyball - literally anything that you don't normally do to throw a little novelty in your life. The novelty of the experience can often help a couple feel more emotionally bonded, which can lead to some physical connection as well.

3. Make sure that if you want to be in the mood, but it just doesn't happen for you that you explore if anything can be changed about what's going on with you. Are you overscheduled and can that be changed? Are you depressed? Is there any hormonal imbalance going on? Lots of factors can play into your desire level.

That should at least get you at least both thinking about how you can connect more, have some fun together, and then possibly more intimacy.

CONFUSED: I am with a wonderful man who treats me well, but I find our conversations lacking and I struggle to relate to him. He's 9 years younger than me, and people are constantly making small and snide remarks about the age difference. I feel like there's some level of incompatibility between us due to different levels of life experience. He is the nicest and most compassionate partner I've ever had, but something feels off and I don't know how to move forward. Not sure if I should wait for him to grow up a bit and focus on myself or leave in search of greener pastures (with no promise that I'll ever find someone as good as him). Any insight would be much appreciated.

DR. COLLEEN MULLEN: Hi Confused! It's so amazing to feel loved, and so complicated when there may be life factors that are getting in the way. I will address some of what you mention, but also feel this would be a great time to seek out therapy with a licensed professional so you can process through your emotions.

A primary factor in a couple living out a happy and healthy life together is that they vibe on the same values and want a similar life. That can affect compatibility, no matter how good it feels to be loved by him. The age difference MAY be a factor, but it also MAY NOT be. It all depends on what you both are seeking at this stage in both of your lives.

Regarding the people who are making snide comments, well, you deserve better. I can recommend that if it's someone close (a family member or a good friend), you look them in the eye and say, "I know your saying things that are making light of my relationship and I don't think you are intending to be hurtful, but you need to know that your words do hurt me. This relationship means a lot to me and it hurts me that you can't support it. If you really just can't do that, then I need to ask you not to comment at all on it. Thank you". They will either abide by that, or they won't. If they won't, then you won't be seeing much of them.

Should you wait for him to "grow up a bit"? This is also something to work through in therapy. I often recommend that when someone is questioning if the relationship is sustainable to ask themselves this: "If they stay exactly as I know them to be for the rest of our lives, is this the person I want to be with?" You can't hope that they "grow up" or that they change in anyway. They are who they are, just right now he is 9 years younger, so he is quite possible in a different life stage than you.

As for the worry about you being loved in such a way again should you end this relationship, this is, again, where therapy is recommended. The love and bond sound strong, but it's not outweighing your doubts and there are probably reasons that pertain to your self-esteem and expectations of life that are leaving you scared of him being the only one who could love you. I hope no matter what you choose, you learn to understand yourself in a way that allows you to choose your partner with confidence and stay with him out of that confidence, rather than fear of being alone. Good for you for weathering the emotional storm thus far, between the questions you are asking yourself and the comments from others. You don't owe anyone an explanation for your choice of partner.

ANXIOUS PARTNER: Hi, I have been with my

partner for over a year now and we are in a very loving relationship. I have anxiety and depression and consistently find myself being anxious over our relationship ending. This makes it very difficult for me to understand if something is a deal breaker or red flag or if it is just my anxiety. I think it also makes it difficult for my partner to tell me how they are feeling as they fear that they will only heighten my anxiety. Do you have any suggestions?

DR. COLLEEN MULLEN: Hi Anxious Partner - It's really tough when you know that your anxiety just shows up to cause problems in your relationship, but great that you have that awareness. To counterbalance the emotional upheavals that come when anxiety shows up, my best tip is to pull yourself back into the present moment. Often, the closer we get to someone, or the longer we stay with someone, the more vulnerable we feel. That vulnerability can show up instead as anxiety/suspiciousness/self-doubt. Pulling yourself back into the present moment prevents you from attending to any anxious thoughts that may pop up because you can be in the present moment and in your head at the same time. This is not just for when you are in the moment with your partner. It's for the times, also, when you are alone and your thoughts start getting the better of you.

When you get back into the moment with yourself, do a little self-check of the relationship: "Do I think my love wanted me to feel hurt by what they said." "Do I believe they love me?" "Do I have ANY EVIDENCE that my thoughts that are doubting this relationship are true?" Often when we do that, we can calm ourselves down and then resume what we are doing. It takes trusting yourself once you ask yourself those questions.

How to pull yourself into the present moment - Engage your senses: Touch something and notice how it feels, smell the air around you, notice what your body feels like (any aches/tense muscles?), drink a glass of water - and whenever possible - say something! Re-engage in the moment with whoever you are with. This can be saying "hello" to strangers as you take a walk or wander a store, but if you are with your partner and you notice the thoughts, just focus in on re-engaging verbally. It can be something mundane that you say, it doesn't have to be much, just enough to break the connection you are sitting with in your mind where your anxiety is

distracting you. If you are in a tough moment with your partner and the self-doubt shows up, it's also OK to say, "I really want to finish this conversation, and I'll make sure we do, but right now, I'm feeling overwhelmed". This lets your partner know that your reaction is more about what's going on with you, while also letting them know it's important to you to resume the uncomfortable conversation.

Lastly, I will recommend that if this remains a struggle, to seek out a licensed therapist who can help you better understand where the anxiety/depression may come from in the relationship and help you learn to cope with it easier.

WIFEY: I'm struggling lately to feel an emotional connection with my husband. I feel we get into the same routine and sometimes feel lonely. Do you have any tips on how to strengthen an emotional connection?

DR. COLLEEN MULLEN: Hi Wifey - Our emotional connection to our partner ebbs and flows over time. It is definitely something that can be worked on. I would also guess that if you are feeling lonely, he may be too. One thing that can be very powerful is to carve out time that is strictly for you and your husband to focus on each other. A daily check-in type meeting can be a good start for a couple who feel they haven't connected in awhile. This would mean that once you both settle in after the workday, without phone in hand, or tv on, you would just talk about what happened during your day - anything funny? Anything tough to deal with? That little meeting can start with a nice greeting, "It's good to just sit here with you and connect".

Other things you can do is to get to know your partner better. The Gottman Institute has some great resources including an app call the Gottman Card Decks. This is a free app where you can take 20-30 mins over lunch or dinner with your partner and choose questions to ask/answer for each other. If you've been together any length of time, there's always more to learn about each other as you change and grow through the years. This exercise is meant not to discover differences, but to get you more curious about your partner. They can be fun for a couple that feels like they don't know how to connect with each other anymore.

The last thing I'll recommend is to find some dedicated time every week/every 2 weeks where just you & husband can do something just for the sake of connecting with each other (go for a long walk somewhere, go do an activity you've wanted to try, try a new restaurant). It's quality time that you probably are not getting currently.

I hope those suggestions help and that you check out the Gottman Card Deck app to try out the fun questions with each other, helping you rediscover each other.

AD: I am currently living with a verbally abusive person and can't get out of it until early January. It is causing me extreme distress and anxiety. Are there any resources for this you can show me? Or any coping skills to help offset this negative person in my life?

DR. COLLEEN MULLEN: Hi AD - It's so tough when you are stuck in a situation where you are getting verbally abused. I'm glad you have a set date to get out. I definitely would recommend you seek out a licensed mental health professional to help support you through this time, but I do want to give you a couple of suggestions for coping with the situation and the emotional distress right now. To lower the situational stress, I definitely would encourage you to not engage back verbally with this person. They can think/say whatever they want. It is not something you need to argue back about. At those times, just remove yourself from the room or the home (step out for some air) as soon as you can. If you must respond, respond only to things that are factual and/or need to be tended to - this means there is no need to try to defend yourself. For your general anxiety - 1. make sure you are getting in some daily body movement as you are able (20-30 min walk), find other places to spend some time (take a class/ have coffee with a friend) to minimize your interaction. What I'm suggesting here is very basic as I'm keeping your safety in mind. It's really important to be able to connect with a licensed professional who can help you on a deeper level - I hope your move-out goes smoothly.

DR. COLLEEN MULLEN: I do hope this was a helpful process for you. If you have questions about how to find mental health resources in your community, I'd be happy to help. You can reach me through my website at CoachingThroughChaos.com. Take care!

LIFESPEAK: *Thank you, Dr. Colleen Mullen, for sharing your time with us today. We are sorry that we did not have time to take all of the excellent questions that came in. This concludes our marathon.*

Thanks to all of you for participating!