MY STOMACH HURTS

Why Anxious Kids Get Stomachaches, and What Actually Works

The Behavioral Science of School Refusal and Avoidance

For Parents of Kids 5–12

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Introduction

Daniel is standing outside the bathroom door with his hand pressed flat against his stomach, and he is telling you, again, that he cannot go to school today.

You already know how this morning goes. You knew it last night, when he asked at bedtime whether the substitute would be there again, and asked it again five minutes later in a slightly different form, as if a different answer might arrive the second time. You knew it this morning when he came downstairs already holding his middle, moving carefully, the way a person moves when they are protecting an injury. The pain is real. He is not making it up, and he is not performing it for you. His stomach genuinely hurts, the way a stomach can hurt from a knot of dread that has nowhere else to go. You crouch down, you ask him to rate it, you press gently below his ribs and watch his face, running through the quiet checklist you have run through a dozen times before. Nothing is swollen. His color is fine once he stops crying. And you are about to do what you did last week, and the week before that, because it is the only thing that has ever worked in the moment: you are going to let him stay home.

On the mornings Daniel has stayed home before, the pain has usually eased within an hour. He ends up on the couch with color back in his face, asking what is for lunch, maybe asking if he can play a game on the tablet, the crisis already receding. You feel the relief of an emergency that seems to have resolved itself. Underneath it, though, there may be something closer to dread, because you have watched this pattern become easier to enter over the past month. It used to take him fifteen minutes to work up to saying he couldn't go. Now it takes him three.

This book is about that pattern, and about the part you can influence. Parents often become part of an avoidance loop because they are the people trying hardest to relieve a child's distress. That does not make you the cause of the problem. It does mean your responses can become one important place to start changing what happens next.

What is actually happening

Avoidance is not simply a symptom sitting on top of anxiety. It can become part of the process that keeps anxiety powerful. When Daniel stays home and the feared school day is removed, his distress may fall quickly. That relief is not weakness, manipulation, or proof that school was actually unsafe. It is a normal learning process: actions that reduce distress can become more likely to be used again when similar distress returns.

Parents can get caught in the same loop. When you let him stay home, his distress may drop and yours may drop with it. Watching your child hurt is difficult, and ending the immediate crisis can feel like the most responsible thing available. Repeated over time, though, both of you may get less practice discovering what happens when the feeling is present and the day still continues. The task in this book is not to stop caring about distress. It is to respond in ways that take the distress seriously without making escape the only reliable route to relief.

The basic pattern is simple: something feels threatening, the child avoids or seeks reassurance, and relief follows. When that sequence repeats, avoidance can become easier to reach for. That pattern is not the whole story of childhood anxiety, but it is a useful part of the story because it gives families something concrete to observe and change.

Why this matters more than it looks like it does

One difficult school morning does not determine a child's future. The concern is the pattern across time. Repeated avoidance can sometimes

spread into other situations or make a child's world gradually smaller, while supported approach can build the opposite kind of experience. None of those trajectories is inevitable. The reason to notice the pattern early is practical: it is usually easier to change a small, flexible habit than one that has become woven into school, sleep, friendships, and family routines.

Three families, one pattern

You will meet Daniel throughout this book, along with two other children whose difficulties look different on the surface but share an important process: distress is followed by some form of avoidance, checking, reassurance, or escape that brings short-term relief.

Elsie is six, and her version does not look like avoidance from the outside so much as it looks like clinginess. Most nights she asks the same question about the babysitter, whether she knows where the snacks are, whether she has your number, whether she will call if anything happens, and she asks it four times in ten minutes, not because she forgot the answer, but because asking it and hearing it again has become one of the few things that reliably settles her. You answer patiently the first time. By the fourth, you are answering through your teeth, and neither of you notices that the questions never actually stop; they just change subject until bedtime arrives and the babysitter question is replaced by one about the smoke detector, the lock on the door, or whether you will still be there in the morning.

Nadia is twelve, old enough to keep most of it invisible. She used to raise her hand. She used to sign up for things, text people first, ask a friend to sit with her at lunch without agonizing over the wording. Over the past year she has quietly stopped doing any of that, and if you did not know what you were looking for, you would call it a personality rather than a pattern, a shy kid finding her footing, nothing to worry about. What you would not see, unless she told you, which she mostly does not, is the version of every sentence she

rehearses and discards before she is willing to say it out loud, and how much of her day gets spent avoiding the moments where she might have to.

The three children are not meant to suggest that separation anxiety, social anxiety, somatic symptoms, school refusal, bedtime rituals, and selective mutism are the same problem. They are not. Different diagnoses, developmental needs, learning difficulties, school conditions, medical issues, and family circumstances can produce very different clinical pictures. What the stories share is narrower: avoidance and accommodation can sometimes help explain why a difficulty keeps repeating even after everyone involved is trying hard to help.

The shared pattern is useful, but it is not the whole diagnosis. School avoidance can also be shaped by bullying or peer exclusion, learning difficulty, ADHD or autism, sensory overload, obsessive-compulsive symptoms, depression, trauma, family stress, medical illness, or something about the school environment that genuinely is not working for the child. Those possibilities do not sit outside the behavioral lens; they change the hypothesis. Throughout this book, treat the pattern as something to test against repeated observation and new information, not as a shortcut to deciding why a particular child is struggling.

What this book is not going to do

It is not going to tell you that if you just stay calm enough, or say the right sentence at the right moment, his anxiety will lift. Anxiety is not a mood you can talk a child out of, and a book that promised that would be lying to you before you finished the introduction.

It will also not ask you to stop comforting a frightened child or to push through every fear on principle. The target is willingness: the growing ability to take an appropriate next step while anxiety, uncertainty, or physical discomfort is still present. Sometimes that step is walking into class. Sometimes it is sending a text without

another check. Sometimes it is asking for professional help because the situation is too impairing or too unclear to manage from a book. Willingness is built through supported practice, and the amount and kind of support should fit the child and the problem.

That changes what success looks like. A calm morning is not proof that the pattern has changed, and a hard morning is not proof that it has not. More useful questions are whether the child can participate with less accommodation, recover from setbacks more flexibly, and use a wider range of responses when anxiety shows up.

The age range in the subtitle, five to twelve, also contains enormous developmental differences. A six year old may need an adult to structure nearly every step of separation, while a twelve year old may need more privacy, collaboration, and control over what is shared with school. The principles can travel across ages; the delivery should not. Throughout the book, younger-child examples are not scripts for preteens, and Nadia's level of autonomy is not the standard for Elsie.

What this book will not pretend

You will also see setbacks. Daniel has a later morning that looks uncomfortably similar to the one in this introduction. Elsie reaches a step she is not ready to complete. Nadia makes a choice her parents cannot confidently classify as preference or avoidance. Progress in real families is often uneven, and the book should be useful on the weeks when nobody can tell whether anything is improving.

That broader scope matters because two children can arrive at the same sentence - 'I can't go' - for very different reasons. One may be trying to escape a panic response, another may be anticipating humiliation in a subject that is genuinely too difficult, and another may be reacting to a peer or adult who has made school unsafe. The response that helps one child could miss the point entirely for another. The work in these pages is therefore less about labeling the behavior and more about learning to ask a better question: what

seems to happen before the avoidance, what changes afterward, and what other information would make us revise our first explanation?

How the book is built

The next four chapters lay out the mechanism itself: what maintains avoidance, why reassurance works in the moment and costs you later, how to see your own part in the pattern without turning it into blame, and what willingness actually looks like in practice, as opposed to the version people usually mean when they say it. From there, the book moves into the specific places this shows up most often for families like yours: the body itself, since so much of this arrives disguised as a stomachache or a headache before it ever gets called anxiety out loud; bedtime; the school morning; and the harder territory of a child who has stopped going, stopped speaking, or stopped trying altogether. The final chapter is about the long stretch after the acute crisis passes, when the work becomes holding steady through the ordinary backslides rather than solving one dramatic morning.

Rather than ending every chapter with the same checklist, the book returns in different ways to the question parents actually have: what would progress look like here? Sometimes that means a shorter conversation, sometimes more attendance, sometimes a child attempting something while still anxious, and sometimes simply better information about what is driving the pattern. The aim is not to promise a smooth disappearance of symptoms. It is to help you recognize meaningful change even when the week still feels hard.

Daniel is still standing at the bathroom door. What happens next, in this book and in your house, does not depend on making his stomach stop hurting today. It depends on what you do while it still does.

CHAPTER 1
The relief that makes it worse

Elsie is buckled into her booster seat outside the school, and she has not moved toward the door in four minutes.

You have already tried the easy things: reminding her that her teacher will be right inside, pointing out the friend walking a few steps ahead, and using the bright, unbothered voice that sometimes helps a small problem feel smaller. None of it lands. Elsie's hands stay locked around the strap of her backpack, her knuckles pale, and when you reach for the door handle she starts to cry in a rising, frightened way that feels closer to panic than negotiation. Some part of you recognizes immediately that this is not going to resolve itself in the next thirty seconds.

Other cars are moving past you toward the drop-off line. Someone behind you taps their horn, not unkindly, just a reminder that the line is backing up. You look at your daughter's face, small and wet and genuinely frightened of something you cannot see, and you make the call you have made before. You pull back out of the line, and you drive home.

The moment the car turns away from the school, something happens in both of your bodies that is worth slowing down and looking at closely, because it is the engine behind almost everything in this book.

What relief actually teaches

Elsie's crying stops within a block. By the time you pull into the driveway, she is describing what she wants to do instead of school, already planning her morning, the whole ordeal behind her like weather that has passed. You feel the shift too, a loosening in your

chest that you did not notice was tight until it eased. The fight is over, nobody is crying, and both of you can breathe again.

When something feels threatening and leaving is followed by relief, leaving can become more likely the next time a similar feeling appears. Nobody has to plan that learning, and the child does not have to be consciously trying to get a reward. The important point is simply that relief can reinforce the action that immediately preceded it.

Behavior analysts call this negative reinforcement: a behavior becomes more likely because it removes or reduces something unpleasant. Stepping away from a wasp and loosening a seatbelt that is digging into your neck are ordinary examples. In anxiety, the same learning process can attach to leaving a classroom, asking for reassurance, or avoiding a social situation. The process says nothing about whether the feared situation was objectively dangerous; it only describes what happened to the behavior after relief followed.

There is a useful distinction here between reinforcement and reward. In ordinary language, a reward is something pleasant that an adult gives on purpose. Reinforcement is broader: it describes what happens to behavior after a consequence, whether anyone intended it or not. Relief can reinforce leaving even when nobody offers a prize, and it can reinforce a parent's rescue even when the parent feels miserable about the whole morning. That language is useful because it moves the conversation away from motives. Daniel does not have to be trying to 'get' a day at home, and his parent does not have to be permissive, for the sequence to become easier to repeat. The question is simply whether the action is followed often enough by relief that the action becomes a more available response next time. In family life, of course, many other things are happening at the same time: temperament, illness, school demands, relationships, sleep, learning, and previous experience all shape which response is available in the first place.

A repeated sequence of dread, avoidance, and relief can become easier and faster to reach for over time. That helps explain why school mornings may begin to feel increasingly automatic, not because Elsie is choosing to escalate, but because she has had repeated practice with the same route out of distress. With enough repetition, a standoff that once began in the car may start earlier in the morning, before anyone has consciously decided what to do.

A quieter piece of learning may be happening in that same car, and it involves you. When the crying stops and Elsie starts talking about her morning plans, your own body gets relief from the end of the crisis. You are not choosing that reaction any more than she is choosing hers. After enough mornings like this, turning the car around can begin to feel less like a decision and more like the obvious way to stop a situation that is painful for both of you. Understanding that pull is not an indictment of your judgment. It simply explains why changing the pattern can be hard for the adult as well as the child.

The part that is easy to miss

What Elsie does not get on this morning is a chance to learn anything new about being afraid at school. Leaving teaches her, accurately, that leaving reduces the distress. Staying with support might have created other learning: that the feeling can change without escape, that she can function while anxious, that the teacher can help, or simply that a hard drop-off does not predict a hard day. Exposure-based treatment is built around creating this kind of new learning rather than waiting for fear to disappear first.

The useful target is therefore not forcing a child to endure distress until it drops on schedule. Anxiety does not always decline neatly during a single exposure, and a difficult attempt is not a failed one. What matters is repeated contact with safe, meaningful situations in ways that allow the child to discover that more than one outcome is possible.

How the fear spreads on its own

Another property of the pattern helps explain something that can otherwise look mysterious: why the list of things a child avoids tends to grow over time, even without anything new and frightening actually happening to them.

Fear can also generalize. A child who becomes alarmed by one kind of separation may begin reacting to other situations that share some of the same features: an unfamiliar adult, a new building, a different drop-off. Generalization is a normal feature of learning, not a defect, and it is one reason a narrow avoidance pattern can sometimes broaden if nothing interrupts it.

With Elsie, the first difficulty is the classroom door. Later, her parents notice a similar hesitation at a playdate and then at a birthday party in an unfamiliar place. That does not mean every new setting will become a problem or that her future is predictable from this season. It means the family has a pattern worth watching across situations rather than treating each difficult event as unrelated.

Fear that makes sense, and fear that doesn't

None of this means a child's fear should automatically be treated as excessive or inaccurate. A child who is being bullied, mistreated, overwhelmed by a learning demand, or frightened by something specific needs adults to investigate the situation rather than coach more endurance. The behavioral question comes after the safety and context question, not before it. When a refusal appears suddenly, is tied to a particular person or event, or simply feels different from the child's usual pattern, slow down and gather information from the child and the adults around the setting.

There is no reliable parent checklist that cleanly separates 'real danger' from 'anxiety.' Anxiety can begin suddenly. Bullying can be subtle or chronic. Neurodevelopmental differences, sensory demands, learning problems, depression, trauma, and medical conditions can all shape school avoidance. The useful question is not whether the

fear looks like the right kind of anxiety. It is whether you have enough information to understand what the child is trying to get away from, and whether that understanding still fits as new information arrives.

The framework in this book is most useful when the feared situation is reasonably safe, the child's distress has become broader or more persistent than the circumstances alone explain, and avoidance or reassurance appears to be narrowing participation. Even then, the formulation stays provisional. A family may begin by thinking separation anxiety is the main problem and later discover bullying, a reading disorder, OCD, migraine, or sensory overload. Good behavioral thinking changes when the facts change.

The same pattern in a different room

A few towns over, on a morning that has nothing to do with Elsie, Daniel is sitting at the kitchen table with a bowl of cereal going soft in front of him, one hand pressed against his stomach.

There is a spelling test today, the kind that has been on the refrigerator calendar for a week, and Daniel has been quietly dreading it since Sunday night without ever using the word dread out loud. What he says instead, as he has on other test mornings, is that his stomach hurts. You ask him to rate it, ask whether he needs the bathroom, and watch for anything that would make this episode medically different from the familiar pattern. Nothing obvious suggests an acute illness, but the pain on his face is real, and you are not willing to dismiss a child who looks this uncomfortable.

He stays home. By midmorning he looks more comfortable and begins asking about the rest of the day. That change is useful information, but it is not proof that nothing physical was wrong and it is not proof that the spelling test caused the pain. What the family can observe is a repeated association: on several school mornings, abdominal pain has appeared around a feared demand and has eased when the demand was removed. A pattern like that belongs in the

conversation with the pediatrician and, if medical concerns have been addressed, in the family's understanding of the school problem.

Daniel's morning shares part of Elsie's pattern: a difficult situation is removed and relief follows. The stomachache, however, should not be reduced to 'anxiety in the body' as though that were a diagnosis. Anxiety can produce or amplify genuine gastrointestinal symptoms, and disorders of gut-brain interaction are real medical conditions. The useful clinical question is how physical symptoms, anxiety, attention to the symptoms, and the demands of the day are interacting for this particular child.

That distinction protects against two common errors. The first is telling a child that pain is imaginary because anxiety may be involved. The second is treating every familiar symptom as automatically psychological because it has followed a pattern before. Daniel's body and his school week can influence one another without either side of that relationship becoming a complete diagnosis. The useful stance is curious rather than suspicious: believe the report, follow the medical plan, and notice the context in which the symptom appears.

And a third room, quieter than either

Nadia's version of this morning does not involve a car, or a stomach, or even a conversation you are part of.

There is a birthday party this weekend, for a girl in her class she used to be close to and has grown less certain of over the past year, the kind of friendship that has drifted into something neither warm nor finished. Nadia has been turning the invitation over for days, imagining who else will be there, what she would say if the conversation stalled, whether people would notice if she left early or arrived late. By Friday she tells you she doesn't really want to go, that she's tired, that it's not a big deal. You believe her, mostly, and you text a gentle excuse to the girl's mother, and that is the entire visible

transaction. No tears, no car, no stomach. Just a small, reasonable-sounding decision that quietly closes a door.

What you don't see is the relief that arrives the moment the text is sent, real and immediate, the knot in Nadia's chest loosening the instant the possibility is off the table. It is the same relief Elsie felt turning out of the drop-off line, the same relief that let Daniel's stomach settle once the test was no longer his to take. And it teaches Nadia the same lesson, delivered so quietly that neither of you would ever call it a lesson at all: uncertain social situations feel unbearable, and opting out is how the feeling ends.

At twelve, Nadia's version can be especially easy to miss from the outside. A six year old crying in a car seat and a nine year old holding his stomach announce that something is wrong. A twelve year old who gradually stops raising her hand, signing up, or texting first can look merely quiet, independent, or as though she is going through a phase. There may be no single dramatic morning to point to, only a slow narrowing made up of choices that seem reasonable one at a time.

Escape does not always look like leaving

It would be simpler if avoidance only ever looked like Elsie's car or Daniel's empty desk, a body physically removed from the source of the fear. Often it does not. Sometimes the escape is smaller than that, and harder to spot, because nobody actually leaves the room. Nadia does not leave any room at all to skip the party. She sends a two-line text from her bed, and the entire escape happens inside a house nobody else even knows is holding its breath.

Reassurance can function similarly. A worried question creates uncertainty and an answer reduces it for a while. When the same question returns repeatedly without new information, the exchange may be serving less as information gathering and more as a way to regulate distress.

That is easy to miss because answering a worried child is also ordinary, attentive parenting. The first answer may be exactly what is needed. The pattern becomes more relevant when the same concern keeps returning in slightly altered forms and the answers provide only brief relief. At that point the literal question may also be carrying a larger concern - something like 'Will I be okay?' - without that being the only possible interpretation.

The next chapter looks at this quieter form of avoidance more closely. For now, the useful idea is simply that escape is not always a body leaving a room. Sometimes it is a repeated attempt to make uncertainty disappear.

Why this trap is so hard to see from inside it

None of these three mornings looked like a crisis. Each one looked like a reasonable, even compassionate response to a child in real distress, because that is exactly what it was. This is what makes the pattern so difficult to catch. There is no single decision in any of these scenes that looks wrong in isolation. A parent turning the car around rather than forcing a screaming child into a classroom looks like good judgment. A parent keeping a child with real stomach pain home from school looks like basic care. A parent letting a preteen skip an uncomfortable party looks like respecting her autonomy. Each choice, taken alone, is defensible, and most of them are choices any thoughtful parent would make without a second thought.

The concern is not any single morning but what repeated mornings like these can add up to. The car standoff may begin earlier, the stomachache may appear sooner in the week, and Nadia's list of quiet opt-outs may grow one reasonable exception at a time. No single change proves anything. The direction of the pattern across weeks and months is what matters.

A second reason this is hard to see has little to do with how reasonable any single choice looks. Watching a child in genuine distress activates something in a parent that has very little patience

for abstraction. In the actual moment, with an actual child crying in an actual car seat, the idea that this response might be reinforcing a pattern can feel almost beside the point, even cruel, next to the plain fact of a frightened child in front of you. This book is not asking you to override that instinct in the heat of the moment, and the chapters ahead are not going to ask you to either. What they will offer instead are ways to respond to the real distress without the response always taking the shape of full escape, so that the instinct to help and the goal of not reinforcing the pattern stop being at odds with each other.

A third reason has less to do with your child than with you. Most parents carry their own history with avoidance, learned in childhoods that had nothing to do with the children in front of them now. If leaving hard situations early, or being rescued from them, was how you learned to manage your own difficult feelings growing up, then turning the car around will not just feel reasonable to you, it will feel like the obviously correct thing to do, the thing any good parent would do, because it matches a lesson your own body learned a long time ago and never had reason to question. None of this is a diagnosis of you, and this book has no interest in relitigating your own childhood. It matters because a pattern that matches your own instincts this closely is far harder to see clearly than one that runs against them, and it helps to know, going in, why this particular trap might feel less like a trap to you than it would to someone else standing outside it.

Practical constraints matter too. Some mornings you genuinely do not have the time or capacity to hold a longer plan at the school door. There may be another child who needs to be somewhere, a shift you cannot miss, or a parent who is sick, exhausted, or alone that week. A book can describe the clean version of a response; families live the version with traffic and work and somebody else's missing shoe. The goal is not perfect implementation. It is a gradual change in the overall pattern, with enough flexibility that the plan can survive ordinary life.

What this chapter is not saying

This chapter is not asking you to force a screaming child through a classroom door or send a child with unexplained pain to school as a matter of principle. It is asking you to notice a repeated sequence: distress, a response that removes the distressing situation, and short-term relief. Once the sequence is visible, you can begin asking whether it is still helping over the longer term.

Nothing in this chapter asks you to feel guilty about the mornings that came before this one. You responded to your child's distress the way caring parents often do, by trying to end it. You did not have the benefit of seeing the pattern laid out across weeks while you were standing inside a single hard morning. The useful direction is forward: notice the next moment when your child is at a door, holding a stomach, or quietly opting out, and ask what response makes sense now that you can see the larger pattern more clearly.

Seeing the mechanism often creates an understandable urge to fix everything at once. Resist that. Patterns built across months are rarely best changed through a dramatic overnight withdrawal of every reassurance, bedtime support, and school accommodation. Pick the places where the pattern is clearest, decide what you are actually trying to teach, and change one or two things deliberately. That slower pace also gives you time to discover when an 'anxiety behavior' was carrying information you had not yet understood.

Relief is not the enemy. It is one of the ways bodies learn, and there will be many moments in family life when helping a child feel better is exactly the right thing to do. The question is narrower: has relief become so consistently tied to escape, repeated certainty, or adult rescue that the child is getting less practice with ordinary uncertainty and participation? If so, the work ahead is not to remove comfort. It is to widen the child's options.

What to watch for

You will know this chapter has landed, not because the stomachaches or the standoffs stop right away, but because you start noticing the pattern while it is happening instead of only in hindsight. You will catch yourself mid-decision, aware for the first time that what feels like the compassionate choice in the moment might also be the thing teaching the pattern to run faster next time. That awareness is not going to feel like progress. It might feel like the opposite, like you've been handed a harder problem than the one you had yesterday.

It may also show up in smaller ways than a full recognition in the middle of a crisis. You might pause a little longer before answering a reassurance question, even if you go ahead and answer it. You might notice how quickly a familiar stomachache changes after a plan changes and wonder whether the symptom and the situation are more connected than you had assumed. None of that requires you to have a better response ready yet. Noticing the pattern while you are standing inside it is what creates the possibility of changing it later.

The next chapter stays inside this same mechanism and looks closely at its most common disguise: the question asked and answered, over and over, that looks nothing like avoidance and functions exactly like it. If Elsie, Daniel, and Nadia's mornings in this chapter felt at all familiar, the reassurance loop in the next one almost certainly will too, because it is very often the very first place this whole pattern begins.

CHAPTER 2
One more question

It is nine minutes past the time Elsie is supposed to be asleep, and she is asking you, for the fourth time tonight, whether the babysitter knows where the snacks are kept. Her voice has the particular urgency of a question that has been rehearsed while lying still in the dark, not casual, not sleepy, aimed straight at you the moment you crack the door open to check on her.

The first time, you answer gently, the way you answer most things at bedtime, patient and a little sleepy yourself. The second answer sounds much the same, though you notice yourself glancing at the clock. By the third, something has tightened in your chest: not quite frustration, more the fatigue of giving a true answer and watching it hold for only a moment. Now she is asking for the fourth time, and not answering a clearly anxious child at bedtime feels uncomfortably close to withholding comfort. So you answer again. Yes, the babysitter knows exactly where everything is. Elsie nods and settles for a moment. Then the same worry returns in different words: does the babysitter have your phone number, though? What if she can't find it?

If you had asked Elsie an hour ago what was actually worrying her, she likely could not have told you. It is not really about the snacks, or the phone number, or any of the specific facts she keeps requesting. It is about a feeling in her body that has not yet found a way to settle, and asking a question is the only tool she currently has for making that feeling drop, even for a moment. This chapter is about that tool, and about what happens when it becomes the only one a child, or a parent, ever reaches for.

The question that is never really about the question

Avoidance does not always require leaving. Repeated reassurance can serve a similar short-term function when the distress is uncertainty itself: a question is asked, an answer briefly settles the feeling, and another version of the question appears later.

For some anxious children, not knowing is unusually difficult. A question can reduce that difficulty quickly because an answer supplies certainty, at least for the moment. That does not mean every anxious question is secretly an avoidance behavior or that the child is consciously using the parent to regulate anxiety. It means repeated questioning can become part of a relief loop when the same information has already been provided and the next answer mainly produces another short-lived settling.

When reassurance is functioning this way, the answer often has a short shelf life. The facts have not changed, but the feeling has. That is why a parent can give a completely accurate answer at eight forty and hear almost the same question at eight forty-five.

Why the loop needs more each time

Many parents notice that reassurance seems to expand over time: one answer becomes several, or one topic is replaced by another. That pattern is not universal, but when it appears it is useful information.

The issue is not that reassurance is inherently harmful. It is that a child who relies on repeated external certainty gets fewer opportunities to practice making decisions, tolerating ambiguity, or noticing that a worried thought can remain unanswered without becoming an emergency. The practical goal is therefore not 'never reassure.' It is to keep reassurance as one tool among several rather than the only route back to feeling safe enough.

It can also help to separate reassurance from ordinary information. A child deserves an answer when the information is genuinely new: who is picking her up, what time the appointment is, whether the teacher

knows about the allergy, what the actual plan is if she feels sick. Reassurance seeking becomes a different problem when the facts have already been supplied and the child needs the same certainty recreated repeatedly before she can move on. Even then, the response does not have to become a cold refusal. Parents can answer the information once, write down a plan, invite the child to check the plan rather than ask again, or simply name that the question has returned because uncertainty feels hard. The useful boundary is not 'I never reassure.' It is 'I will give you information and support, but I cannot make every uncertain outcome certain.' That is a much more realistic skill for both sides of the conversation.

Why this one is so easy to miss

Of everything in this book, the reassurance loop may be the hardest pattern for a caring parent to recognize as a form of avoidance, because answering a child's worried question looks like attentiveness—and, in isolation, it usually is. The concern is not the first answer. It is what happens when the same question, or a slightly reworded version of it, keeps returning and each answer provides only a brief pause before the loop begins again.

Most parents can point to a moment when the ratio stopped making sense: the amount of reassurance being requested had grown far beyond the amount of new information available. Elsie has heard the answer three times already tonight. She is asking again because asking and being answered has become one of the few reliable ways she currently knows to settle. When a strategy works that quickly, it is understandable that a child reaches for it often.

A different room, a different question

Across town, Daniel is sitting in the nurse's office holding his phone, and he has just sent you a text asking whether the pain in his stomach could be something serious.

He is not being dramatic. This is a genuine question, arriving from a genuine place of fear, and the fact that his stomach has hurt like this before, always around a test or a presentation, does not make the fear in this particular moment feel any less real to him. You text back quickly, the way you always do, telling him it's probably nothing, that his stomach has done this before and been fine, that he should try to relax. Within a few minutes, according to the nurse, he says he feels a little better. He goes back to class an hour later, once the pain has eased enough, and by that point the test he was originally worried about has already been rescheduled around him, the whole morning quietly resolved.

A phone can make this version of the loop especially hard to interrupt. An in-person question requires your presence, which places some natural limit on how often it can happen during a day. A text does not. It can arrive from a bathroom stall, a nurse's office, or a hallway between classes, and the reply can come just as quickly. That low friction makes repeated checking easier, so a pattern that was already difficult to interrupt in person can become much more available once it moves onto a phone.

Notice what that text exchange accomplished, and what it did not. Daniel got relief, but he did not necessarily learn much that he could use the next time the same sensation appeared. If his first move is repeatedly to text you for certainty, asking can become his most available response before he considers what he already knows or tries another way of coping. The concern is not about his motives. It is that repeated checking may leave him with less practice making sense of a familiar feeling and deciding what to do before seeking another answer.

The version with no words at all

Nadia's question does not arrive by text and does not sound anything like a question. She hands you her phone, open to a message she is about to send to a friend, and asks, does this sound weird.

You read it. It is three sentences long and entirely ordinary, the kind of message any twelve year old might send without a second thought. You tell her it sounds fine, and she changes one small thing anyway before asking you to read it again. You do. When she finally sends the message, some of the tension in her shoulders eases, though not enough to make the evening effortless.

Nadia's version is quieter. She asks for a read on a message, changes a word, and asks again. A single exchange like this is ordinary family life. The pattern becomes more interesting only when the same need for a second opinion appears across texts, outfits, plans, assignments, and social decisions, and when Nadia increasingly seems unable to make those decisions without someone else's confirmation. That is the level at which checking may be reducing opportunities to build confidence in her own judgment.

Perfectionism may be part of the picture, but the book should not pretend to know Nadia's private fear. She may be worried about sounding awkward, being misunderstood, making a mistake, or something she has not named. What the family can observe is simpler: uncertainty about social judgment leads to checking, checking brings temporary relief, and the need to check has begun to spread across ordinary choices.

How this usually starts

One early version of this pattern can be repeated questioning that initially looks like nothing more than a naturally cautious child wanting extra information. Reassurance seeking does not always announce itself as anxiety, and plenty of careful children never develop a larger problem. What matters is whether the questions are becoming repetitive, increasingly necessary for settling, or difficult for the child to move past without an outside answer.

Recognizing this early changes how you read a cautious child's repeated questions. Reassurance seeking often looks like diligence or a preference for double-checking, and many careful children never

develop a larger problem. The signal is not caution itself. It is increasing rigidity: the same kinds of questions returning, settling the child only briefly, and becoming harder to move past without another answer. That pattern is easier to address while it is still mild than after it has become woven into bedtime, school, health worries, or social decisions.

Daniel and Nadia both have their own version of this earlier history, even though by the time you meet them in this book the pattern has already found its more developed shape. Daniel's stomach did not start hurting before tests. It started, years earlier, as a habit of asking whether he had done things right, homework, chores, the small daily tasks of being a kid, checked and rechecked before he could feel settled about them. Nadia's proofreading of her own texts has a history that reaches back to a much younger child who wanted a parent to check her drawings, her block towers, her handwriting, anything she had made, before she could feel finished with it. Neither of those earlier versions looked like anything worth worrying about at the time, and in most households, most of the time, they still wouldn't. What makes them worth mentioning here is only that the shape was already present, long before either child had a stomach that hurt or a hand holding out a phone, and a parent who knows to look for that shape early has a genuine head start that most parents never get.

One of the more useful habits this book will keep coming back to is learning to hear what a repeated question is actually asking, underneath the specific words being used, because the surface question is almost never the real one.

Elsie's question about the babysitter may contain a broader worry about separation or safety. Daniel's medical question may be carrying uncertainty about whether he can trust a familiar body sensation. Nadia's 'Does this sound weird?' may be partly about social evaluation. Those are hypotheses, not translations the author can know for certain. The reason to consider them is practical: if the literal

question has already been answered repeatedly, another factual answer may not reach the larger uncertainty that keeps bringing the question back.

If the literal question has already been answered, a larger uncertainty may be keeping the conversation alive. Facts about a babysitter cannot guarantee that nothing difficult will happen while a parent is away, just as a second reading of a text cannot guarantee how a friend will respond. Recognizing that gap does not hand you a perfect sentence. It shifts what you are listening for, so the next response can address the uncertainty itself rather than supplying the same fact again.

Age changes how these patterns can look, but not in a simple developmental sequence. Younger children may ask concrete questions because concrete language is what they have. Older children may check through texts, schoolwork, or decisions. Some children of any age will describe their anxiety directly; others will not. The point is to follow the observed pattern rather than assume the child's age tells you the hidden meaning.

Comfort and reassurance are not the same thing

Start by separating two things that feel identical from the inside of a hard moment but are not the same, because the difference between them is going to matter for the rest of this book.

Comfort is your presence, your attention, your willingness to stay close to a child who is struggling, without necessarily resolving the thing they are struggling with. Sitting next to Elsie in the dark, acknowledging that bedtime feels hard for her right now, is comfort. Reassurance is narrower and more specific. It is a direct answer to the worried question itself, one that closes the uncertainty the question was trying to resolve. The babysitter knows where the snacks are is reassurance. It's probably nothing, you'll be fine is reassurance. Both are offered in good faith, and both feel, from the outside, like exactly the same warm, attentive parenting. But only one of them teaches the

nervous system that this particular uncertainty gets resolved by asking someone else to resolve it.

You can offer comfort without offering reassurance, and learning to tell the two apart, in the moment, before you have decided what to say, is one of the more useful skills this book is going to help you build. It does not mean withdrawing warmth. It means noticing when what you are about to say is actually an answer to the unspoken question underneath the spoken one, and asking yourself whether that particular question is one that actually needs answering again, or one that has already been answered enough times that answering it once more will only teach the same lesson a little more deeply.

At bedtime, for example, Elsie asks again whether the babysitter has the phone number. Her parent could answer a fifth time, which may settle her briefly, or could stay close without supplying new certainty: 'I know you really want to check again. I've told you what I know, and I'm here while you get ready for sleep.' The second response is not automatically better in every situation. It is useful when the information is already complete and the repeated answer has become part of the routine. Comfort remains; the repeated verification changes.

What the loop costs beyond tonight

Look beyond a single bedtime or text exchange, because the daily cost is small enough to be easy to accept and the cumulative cost is not.

If reassurance is always required before a decision or action, a child may get less practice trusting their own judgment. Over time that can show up as more checking, more requests for approval, or hesitation around ordinary choices. It does not mean reassurance damages a child or determines adulthood. Everyone borrows confidence from other people sometimes. The concern is rigidity: whether outside certainty has become a requirement rather than one source of support among several.

Everyone needs reassurance sometimes. Adults ask partners whether a decision makes sense; children ask whether a new situation will be okay. The useful distinction is not between healthy people who never ask and anxious people who ask too much. It is whether outside reassurance has become the child's main route forward, and whether the answer has to be repeated because relief fades before the uncertainty changes.

Why answering feels like the responsible thing to do

Parents answer because answering feels caring, and often it is. When a child looks frightened, refusing to answer can feel like deliberately withholding comfort. The shift in this book is not from responsiveness to detachment. It is from automatically resolving the same uncertainty every time toward noticing when the answer has already been given and a different kind of support may help more. That distinction is particularly important for parents who have spent months being told simply to 'stop reassuring,' advice that can sound both cold and impossible without an alternative.

There is a social layer to this as well, one that has little to do with your child and everything to do with the audience around you. A parent who answers a worried child's question at a birthday party, in front of other adults, looks warm and responsive. A parent who pauses, or gently declines to answer the fourth version of the same question in the same setting, risks looking cold, or worse, risks the child's distress escalating in public in a way that feels far more uncomfortable to manage than simply answering would be. This pressure is real, and it is not something to feel embarrassed about weighing. It only helps to name it clearly, because it means the pull toward reassurance in front of other people is often stronger than the pull toward it at home, even though the underlying pattern is identical in both settings.

The pull is stronger still when the other adult watching is a partner, a grandparent, or a teacher who does not share your read on what is

happening. Answering the question, in that moment, is also a way of avoiding a harder conversation, the one where you would have to explain to someone else why you are choosing not to answer a child who is visibly upset, and defend a decision that sounds, out loud, almost unkind. Knowing that this pressure exists, separate from anything your child is doing, helps ensure that it does not get mistaken later for evidence that the different approach in the next chapter was wrong.

The opposite overcorrection is not useful either. A parent who turns 'stop reassuring' into coldness, silence, or irritation has changed the wrong thing. The goal is less compulsive certainty, not less warmth. Chapter 4 will make that distinction practical.

What changes first

You will start to hear the questions differently before you start responding to them differently, and that is the right order for this to happen in. You will notice, mid-answer, that you have said some version of this same reassurance before, tonight or last week, and that the noticing itself does not require you to have a better response ready on the spot. You might catch the shape of a question shifting, the same worry arriving in new language because the old language stopped landing, and recognize it now as the same loop wearing a new outfit rather than a brand new concern. Some evenings this recognition will arrive early enough to change nothing about what you actually say, and that is still worth counting as progress, because seeing the pattern clearly, even once, makes it a little easier to see the next time.

You might also start to hear the deeper question underneath the surface one without meaning to, the will I be okay hiding inside does the babysitter know where the snacks are, the am I safe to trust my own body hiding inside could this be serious, the will I be acceptable hiding inside does this sound weird. Hearing it will not yet change what you say back. It changes what you understand yourself to be

responding to, and that shift, small as it sounds, is what makes the next two chapters usable rather than theoretical.

Another sign is a growing reluctance in you, not your child, to say 'I don't know.' If you notice yourself reaching for a confident answer even when the honest answer is uncertainty, the loop may be shaping your response too. A child who has had some practice hearing 'I'm not sure' alongside steady support is often better prepared to tolerate uncertainty than a child who has come to expect a definite answer every time worry appears. Noticing your own urge to resolve the uncertainty is part of the foundation for the next two chapters.

END OF SAMPLE

You have seen the pattern.

The rest of the book shows you what to do about it.

STILL AHEAD

Chapter 3: Your side of the loop
Chapter 4: Willingness, not calm
Chapter 5: Stomachaches and the body's exit ramp
Chapter 6: Bedtime and the long goodbye
Chapter 7: The school morning
Chapter 8: The child who will not go, will not speak, will not try
Chapter 9: Ladders, backslides, and the year after

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