

Karuna

Counselling & Psychotherapy

Self Help
for
Anxiety

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Anxiety Management and Treatment

Anxiety

Most people experience heightened anxiety in certain situations. Exam nerves, fears about meeting new people, or anxiety on a first day at school or work. These feelings we all experience from time to time and are the body's way of getting us into a state of preparedness to take on whatever faces us. In our evolutionary past, anxiety played a key role in our ability to fight or flight when confronted with a predator. Therefore, many of the physiological symptoms we experience during heightened anxiety, increase our ability to fight or flee from danger, for example, breathing rapidly, prepares us to run. A further bi-product of the stress response is an improvement in our concentration, whereby we become more focussed. Hence, the symptoms of anxiety, whilst uncomfortable, in the short term may be helpful in so far as they prepare our bodies to face difficult challenges.

Indications and Symptoms of Anxiety

1. Rapid or difficulty breathing
2. Light headedness
3. Increased heart rate
4. Jitteriness
5. Tension
6. Sweaty hands
7. Chest pain or discomfort
8. Numbness or tingling feelings

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However, whilst short term anxiety gets us into peak condition in order that we are better able to face our fears, prolonged anxiety has a detrimental effect on both our well-being and performance. When anxiety becomes chronic or excessive it debilitates us and can prevent us from engaging in activities as we learn to avoid certain situations which we fear. There are also a number of other symptoms which we can experience if anxiety is prolonged.

Symptoms of Long Term Anxiety

1. Muscle ache and Cramps
2. Headaches
3. Trembling or weak legs
4. Pounding heart
5. Light headedness and Dizziness
6. Stomach problems

How we interpret these symptoms, can increase our anxiety still further. For example, if we believe that our pounding heart, increased sweating and rapid breathing is a sign that we are about to have a heart attack, then this will only serve to feed our anxiety and keep it going. Therefore, how we interpret events can make our symptoms worse. In addition, we may also become anxious at the thought of an event, without that event even taking place. Therefore, what we think can play a crucial role in reducing, maintaining, or heightening our level of anxiety.

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Prevalence

Anxiety and panic are common, statistics suggest around 5% of the population are suffering from one of the anxiety disorders at any one time. Anxiety related problems are more common in women than men and usually begin in early adulthood, although can begin at any time.

Why Me?

There is likely to be more than one explanation as to why you are suffering from an anxiety related problem. Although it is true to say that some people experience a very traumatic incident and then have continued bouts of anxiety as a result, as is the case in post traumatic stress disorder, this is not generally the rule. There appears to be some people who are more susceptible to anxiety than others. Whether this is based on their experiences, or whether they have inherited a susceptibility from their parents is matter for debate. Children born of worrying mothers, not only share their genes but also much of their physical environment, making distinctions between the two difficult.

Besides your background, a number of further factors influence the likelihood that you will experience anxiety problems. The experiences you had in childhood may predispose you to heightened anxiety if you're confronted with similar experiences in adulthood. For example, a child who witnessed a car accident, may be more anxious driving her own car, having heard of a friend's recent accident, than someone who had not witnessed anything prior to the adult experience. In this way our past can

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predispose us to anxiety because we fear the distressing event will be repeated.

There are also people who seem more prone to ruminate, to catastrophise and to see the black side of events. These people will find it harder to be calm and not worry, in comparison to those who don't tend to think this way. Further influences relate to the individual's coping strategies, their resilience and their social support network. All this is good news for the sufferer because these are all things that you can do something about.

Types of Anxiety

Anxiety comes in many forms. Although there are differences between these types, the treatments in this booklet will be applicable to all.

Panic attacks: Intense feelings where the person may fear they're going crazy or they may experience a feeling of impending doom or that they're about to die.

Phobias: A fear of specific things, or situations, such as going out (agoraphobia) heights, confined places like lifts, spiders, or flying. In addition some people have social phobia where they fear being with people.

Performance: A fear of talking in public or making a speech.

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Obsessive Compulsive Disorder: A need to think about or do things repeatedly in order to try and stave off anxiety, for example, checking the door is locked over and over again.

Acute Stress Reaction: Sudden anxiety following a traumatic event.

Post Traumatic Stress Disorder (PTSD): Repeated flashbacks of terrifying traumas accompanied by high levels of distress.

Altered consciousness: High levels of anxiety may lead the person to dissociate or partly disconnect from their current situation. The individual may appear distant to others, frequently the person is unaware that there is anything wrong only that they have lost time.

Generalised Anxiety Disorder: The person is in a high state of arousal much of the time.

It isn't really important for you to work out which of these categories of anxiety you're suffering from. However, it is important for you to think about your own experiences of anxiety because then you can tailor your treatment to meet your need more effectively. Later on in this booklet there is information to support you in doing this (see assessing your problem).

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Approaches to Treatment

Drug Treatments

There are several drugs used in the treatment of anxiety. Some of these are also used in the treatment of depression, which can be a bonus as the two problems can go hand in hand. The therapeutic effects of drug treatment may take a while to have an effect but they aim to calm. Depending on the type of treatment and your own individual makeup, the side effects vary, sometimes symptoms return following stopping the drug treatment but if you are having psychological therapy in conjunction with a drug treatment this risk is likely to be lower. One of the main concerns some people have is that of addiction. Whilst there is wide variation in the addictive properties of the treatments, with some being less addictive than others, many are not recommended for long term use for this reason.

These factors can lead people to shy away from them altogether. However, they can be a useful stepping stone to support people who otherwise would be unable to begin psychological treatment. Psychotherapy can feel very threatening, part of the process in therapy is to face the fears you have been avoiding. Sometimes people need drug treatment to support them in this. Drug treatments aim to dampen down the body's physiological response to stress, making things feel less overwhelming to the sufferer. Sometimes drug treatments make it possible to prevent the reinforcement or strengthening of the fear response which has built up through avoidance. The sufferer then can do something

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which they have been avoiding and can see for themselves that what they had feared is not as fearful as they thought after all. Often it is only by facing their fears, people can overcome them. Whether or not you choose to try drug treatment, is very much a personal decision but if you find that psychological treatment alone is insufficient, it may be worth you talking to your GP or a psychiatrist for advice.

Psychological Therapies

Psychotherapists, counsellors, psychologists and some psychiatrists, use talking therapies to support people with anxiety. Which of these people you see will influence the type of approach they adopt in treatment. You can learn more about these on my website (www.karunatherapy.co.uk) by clicking on articles on the menu bar. What follows below are techniques taken from many different psychotherapy approaches. I have tended to focus upon techniques which can easily be taught and readily picked up.

Treatment

There are literally hundreds of different psychotherapeutic approaches to treatment. This booklet outlines methods from some of the most popular. However, if having been through it you are still suffering, don't give up and don't be critical of yourself, this is hard to overcome and particularly so if you are trying to do this alone. There will be help for you, you just may need the support of another person or a different approach.

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Cognitive Behaviour Treatment

Cognitive behaviour treatment is often used to treat anxiety. It has been widely researched and has evidence demonstrating it is effective in the treatment of some psychological problems in some people. It is particularly popular amongst health care practitioners because it offers people a number of accessible techniques or tools to try in order to help them feel better. The basic tenet is that how we think, influences how we feel, which in turn influences how we behave. For example, we are woken in the middle of the night hearing a bang, we can think one of a number of things. If we think....

Example 1.

“Oh my goodness there’s a burglar”. Our heart is likely to start thumping, we may begin to sweat in panic and freeze.

On the other hand if we think..

Example 2.

“That’s Jane (daughter) coming home from a late night out”, we may feel relieved and get up and see her.

Note that in the first example, the *thoughts* we had about the bang caused us to *feel* anxiety, which led us to *behave* by freezing. In the second example, where we *thought* the noise was due to our daughter arriving home, we *felt* relieved and we *behaved* by getting up. Hence, these different responses came about through the same event happening, the bang, it was simply how we thought about

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that event that caused the subsequent reaction. Whilst of course it is important to listen to our fears, there may indeed be a burglar but sometimes our thoughts run away with us, it is on these occasions when we need to consider their likelihood.

There are several thinking patterns which are common to people who suffer from anxiety. Below is an example to demonstrate how some of these thinking patterns can influence anxiety, making symptoms worse. The words in brackets, are the labels cognitive behaviour therapists sometimes use to describe these ways of thinking. Following the example, are explanations for each of these labels. What therapy aims to do is teach you to challenge the things you say to yourself, as often these things are unhelpful.

Our Thoughts and Anxiety

Example 3.

Jenny becomes fearful when in busy places, she particularly hates the supermarket. She shops as seldom as possible (avoidance). She always tries to go when it's quiet, convincing herself that this is the only way she can manage (safety behaviour). Although she needs a full shop, she usually only grabs a few items so she can use the fast queue and be out as quickly as possible (safety behaviour). Before she leaves her home she imagines the worst "It's going to be busy (fortune telling) I'm going to panic (fortune telling and catastrophising) everyone will stare and think I'm stupid" (black and white thinking and exaggeration). By the time Jenny leaves home she's already anxious. Walking into the supermarket, her anxiety is heightened still further. She looks

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around expecting that everyone is watching (Scanning and hyper-vigilance). An elderly woman smiles at her. “She thinks I must look a right head case even the grannies are laughing at me”(negative automatic thought). She realises the tea bags have been moved and doesn't know where to. Deciding to forgo them, she goes to the checkout with half the items she wanted and leaves for home. She arrives home after an uneventful visit and says to herself how relieved she is that it is over (ignoring the positive).

Avoidance

We can see from the example above that Jenny has avoided going to the supermarket until the last minute. She fears going and therefore limits her visits to as few as possible. This is a very common way of trying to cope with anxiety, by avoiding doing or facing the feared thing as much as possible. In the short term this seems sensible. By avoiding the supermarket and going fortnightly or monthly, Jenny will not have to be as anxious on as many occasions as if she went weekly. However, by avoiding the supermarket Jenny sends a powerful message to her brain stating supermarket shopping is something to be scared of doing. This can have the effect of reinforcing or strengthening Jenny's fear, making it harder for her to go next time.

Also, sometimes people avoid the feared situation altogether, in this example, Jenny may have asked someone else to do her shopping. Whilst you may argue that having someone do your shopping may not be such a big deal, what can happen is that the person then transfers their fears onto further events or situations.

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So for example, Jenny may then begin to fear picking the children up from school. Therapists call this process generalisation because the feared behaviour has started to generalise into other situations and therefore becomes more pervasive restricting more aspects of the individuals life.

In addition, by avoiding going to the supermarket Jenny cannot have her fears disconfirmed. That is she cannot test out whether her anxiety about going is reliable. She may be able to say to herself I know that I am safe at the supermarket, supermarkets aren't dangerous places but she is unlikely to believe this whilst ever she continues to behave as if they were.

Avoidance therefore may bring temporary relief, it nonetheless can make the problem much worse in the long run. Whilst it feels scary, facing what your avoiding is likely to bring you the more relief from your anxiety in the long run, than anything else you do. However this neither has to be done all at once or on your own (see information under graded exposure).

Safety Behaviours

Notice that Jenny only goes to the supermarket when it is quiet, she only buys a few items and always goes to the express checkout. By adopting these safety behaviours, Jenny attempts to decrease her level of anxiety. However, she assumes that without doing these things, she will feel worse. Hence she is telling herself that if the supermarket is busy then she will not be okay, or if she needs more food and has to visit the ordinary checkout, then her

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anxiety will increase. Trying to keep safe in this way, keeps you thinking that you're in a risky situation and sends this powerful message to your brain.

Having said this, whilst I would not normally recommend people take on new safety behaviours, if you have been avoiding doing something altogether and for some time, it may be that you will need to introduce the avoided behaviour in a succession of manageable steps. In this case, in order to get you to the supermarket, initially it may be necessary for you to begin by buying only one item and then gradually over a succession of visits, buy more and more items (see graded exposure).

There are several questions you can ask yourself to help you find out what safety behaviours you use.

1. When you thought (feared event) was happening, did you do anything to prevent it? What did you do?
2. If you hadn't done the safety behaviour. How much do you believe that the feared event would have happened?
3. Do you do other things to try and control your symptoms, improve your performance or hide your problem?
4. Do you do anything to avoid drawing attention to yourself?

Fortune Telling

Often what we say to ourselves before facing an anxiety provoking event can make the feared event worse. Jenny told herself it was going to be bad, that it would be busy. In reality she

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couldn't possibly know this beforehand and predicting this would only serve to heighten her anxiety. You may say to yourself things like "It's going to be terrible" "I'll make a fool of myself" "Everyone will stare" Try to stay open minded when facing your fears until you know something for sure. When you have completed a task was it really as bad as you feared? If not remember this next time you start with this type of internal talk. "I said this to myself last time and actually it wasn't as bad as I had imagined".

Catastrophising

Jenny fears that she will panic. It may be that she will, it may be that she won't. She will not know until she arrives but if she does panic will this be a catastrophe? How will her life change if she panics at the supermarket? What will it mean for her as an individual? How important is it really if some people in the supermarket witness her having a panic attack? What would these witnesses think or feel? Jenny most likely fears that by panicking in public she will make herself look silly, or show herself up in some way but who would really criticise someone for looking scared? If someone were to say something unkind would that really matter? It wouldn't be pleasant but what value would you place on the person's opinion who mocked you for being scared? Do you really care what they think? Try challenging your catastrophic thoughts in this way and establish what really matters and what doesn't.

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Black and White Thinking and Exaggeration

Jenny also tells herself that everyone will stare and think she is stupid. How likely is it that this will be true? It is rare that *everyone* does anything, some people may, some people are likely to not. How do you know that people will think you're stupid, are you interpreting peoples thoughts and feelings based on limited information? Would you feel that because someone was anxious or panicked that they were stupid? Would your friend? A colleague? A relative? No? Then how likely would it be that everyone in the supermarket would think this way about you?

Scanning and Hyper-vigilance

When Jenny enters the supermarket she looks around expecting everyone to be watching her. When we feel anxious it is common for us to become more sensitive to things happening in our environment. We look around checking to see that no-one is following us or watching us. If we feel under threat this makes sense, we need reassurance that the environment is safe, reassurance that no-one is observing us and that everyone is minding their own business. The trouble is by constantly looking over her shoulder Jenny draws attention to herself. Her glances at other people make it more likely that other's will notice her and look at her. When they do this only serves to raise her anxiety as she believes everyone is staring at her. Instead Jenny could say to herself, "I'm okay, I'm safe" "Everyone is too busy shopping to be bothered with what I'm doing". By refocusing on the task of choosing groceries she is less likely to draw attention to herself and less likely to be noticed.

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Negative Automatic Thought

When the elderly lady smiles at Jenny, Jenny automatically assumes that this is out of pity or for some negative reason, rather than seeing it for what it is, a smile. Jenny cannot know for sure why the woman smiled and therefore would feel better about herself if she could discount her negative thought and take the smile at face value. Negative thoughts haunt us all from time to time but their constant put downs do little for our self esteem. Pay attention to the things you say to yourself, challenge the negative thoughts which pop into your head. How true are they? Go on a fact finding mission, look at what evidence supports and refutes these beliefs.

Ignoring the Positive

When Jenny leaves the supermarket and arrives home she hasn't had a full blown panic attack. Nothing terrible happened. She didn't like the experience but it could have been a lot worse. Try and look out for events which disconfirm your beliefs, it can be all too easy to ignore the times when things go okay. By seeing the positive bits you can challenge your black and white thinking that **everything** always goes wrong.

We have seen how our thoughts can heighten anxiety, next we need to look at how they can lower it. Before doing this you need to be able to recognise the situations where you become most anxious.

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Detailed Assessment of your Problem

Often people feel that their anxiety comes out of the blue without any warning and they may not be able to tie it into something which is happening in their environment. You can learn more about what makes you anxious by keeping a diary. Often this can be difficult at first but by using your diary and a bit of practice this does get easier. By finding out what causes your anxiety you will be in a better position to treat it.

It is important that you initially pay attention to when precisely you become anxious, this is your cue. At this point you need to ask yourself questions like “What was I just thinking about?”. Sometimes people think like this in sentences whilst others may have pictures or images run through their heads. Keep your diary with you and fill it out as close to the anxiety feeling as possible. Initially it can feel a bit scary just focussing on what’s upsetting you but try and stay with it. If you can, enlist a friend to ask you questions they may be able to do some of the writing if you’re feeling a bit muddled.

Fill out the diary worksheet for a week or two. You need to focus on questions like;

1. Where are you anxious? What are you doing or thinking of doing? Who are you with? Are you better alone or with someone?
2. Where do you feel worst or where do you feel less bad?

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3. How do you cope? Is it a good or bad way of coping based on your rating scales? What works best for you? Is this a short term solution (alcohol) or something you can do anytime, anyplace, anywhere?

Challenging Worrying Thoughts

Once you have identified some of your worrying thoughts, there are a number of further questions you can ask yourself to assess their reliability.

1. Why am I anxious or having this thought?
2. Is there a valid reason based on hard evidence to support me thinking this way?
3. What is the worst that can happen?
4. How likely is that?
5. How would I cope if the worst did happen?
6. If the worst happened is that so important?
7. Is there another way of looking at this?

Example

Jenny became anxious just thinking about an invitation she had accepted to go out to dinner with some friends. Feeling anxious, she had just told herself she cannot go. Running through her list she asks herself..

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- 1. Why am I anxious?** Because I don't want to go. Why don't you want to go? Because I won't have anything to say, they think I'm stupid and I'll make a fool of myself.
- 2. What evidence do you have to support these thoughts?** Well I always get tongue tied, then I blush and then I look stupid. Always get tongue tied? What about times when you haven't? Do you think your friends would invite you out if they didn't want you to come? They obviously aren't bothered / haven't noticed / or don't think you blush or are stupid. Would you invite someone out who was stupid? No but I'm boring! So they only ask boring people out?!
- 3. What would be the worst that could happen** if you went? I wouldn't be able to speak, I may end up crying, leaving in a hurry and making a scene.
- 4. How likely would it be** that you wouldn't speak all evening? Well maybe I would be able to speak some of the time but I would still get tongue tied.
- 5. How would I cope if the worst did happen?** I could leave the table for a few minutes and go to the toilet. I could tell myself that I'm doing okay that my anxiety will pass and that I've done well to date in getting here. I could distract myself by reading the menu. I could think about topics of conversation I could talk about before I go. If everything fails I could make my apologies, say I'm unwell and go home. I know that some of these are safety behaviours but if they get me there, my confidence will grow on succeeding in part.
- 6. If all the worst happened, is that so important?** Would it really matter? Would that be devastating? Not devastating

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but humiliating and shaming. Would I lose my friends over it? No. Does it matter what other people in the restaurant think? Not really, I'm not going to see them again.

- 7. Is there another way of looking at this?** I could see this as a challenge, a way of beginning to conquer my fears. Maybe I should just go and if it works out okay then that's a bonus. If I have to leave well I've made the first step and next time it will be easier.

In the beginning it may be that you cannot go through this check list when you're feeling anxious, it may be that you have to do it afterwards. It will come with practice. Having gone through the list a few times, you will begin to learn the ways in which you have managed to avoid doing things. This is useful information. You will have good and bad days. If you are genuinely ill or overtired don't attempt a new challenge. You wouldn't ask an athlete to race without being in peak condition but be firm and fair don't make excuses either. If you don't complete a task, never say to yourself I've failed. Always see the things that you have managed to complete, if you don't go all the way, congratulate yourself on each step and keep trying, often persistence wins the race.

Distraction

Whilst distractions are safety behaviours, if these are the only way in which you can confront a situation, begin by using them. It is important that eventually you challenge some of these but initially

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they can make the difference between going to an event and staying home.

There are a number of ways you can distract yourself from worrying thoughts wherever you are. This can be useful because whilst your focussing your attention on the distraction you're not thinking about worrying.

A. Thought Distractions

If you find you're becoming anxious and need to distract yourself for a while, you could try one of the following;

- Count and name all the things in the room which begin with the letter "R".
- Describe what you can see, feel, hear in minute detail.
- Perhaps conjure up your favourite walk and go down all the paths in your mind.
- Hear the words to a song in your head and repeat them to yourself.
- Recall a funny moment or one which gave you pleasure.
- Conjure up a memory of a happy time perhaps on holiday.

B. Physical Distractions

If you can do something physical, even if it is just walking, then do so. When we become anxious our body's produce adrenalin, it is useful if we can burn some of this off and if it distracts us from worrying more the better. Try any of these;

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- At a party offer to hand out the food or drinks.
- Can you help in the kitchen with dishing up or washing up?
- What about offering to read to one of the children or play with them whilst parents are busy?
- At the pub can you go to the bar. Visit the toilet.
- Suggest a walk around the garden.
- Don't go all the way to an event in the car, walk the last bit.

If you have to sit still, you will need to distract yourself in other ways.

- Can you draw or doodle?
- Pretend to make notes whilst someone is talking.
- Focus on tensing and relaxing different muscles in your body.

Coping Statements

There are a number of things which you can try saying to yourself when you begin to feel anxious;

- Don't worry because worrying won't help and it will make me less able to cope.
- I need to take a few slow breaths.
- I am safe, nothing dreadful is going to happen.
- I have done this before, so I can do it again.
- If I think clearly, I can overcome this.
- If I do this, I will feel a sense of achievement.
- What is the evidence that I will come to any harm?

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- It is better for me to think about what I can do, rather than what I can't.
- These feelings are telling me I need to use my coping skills.
- This is an opportunity for me to practice coping.
- The more often I cope, the easier it will be for me.
- If I plan what I am going to say or do, then I will feel more confident.
- It will help if I concentrate on slowing down my breathing.
- I am going to look at the positive things that I can do.
- I can do this.

Rescue Remedies

Sometimes telling yourself that there are people who would help you if your worst fear happened can help. For example, if you have a panic attack in the street, knowing that it is highly likely someone would come to your aid can help.

Rehearse Anxiety Provoking Situations

If you are going to embark on something which you know will be anxiety provoking, rehearse succeeding beforehand. Go through the whole event in detail in your mind, image by image, word for word. See and hear yourself succeeding.

Observing and Modelling Others

Watching someone else, who feels or has felt similar to yourself, engage in the behaviour which you want to avoid, can give you the impetus to take the challenge yourself. This is particularly

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effective if you view the person as normally being more vulnerable than you.

Graded Exposure

Much of what we have looked at so far, has involved facing fears, rather than avoiding them. For some people, this in itself can be a scary thought. However, often when faced with a challenge, we feel that we have to do it all at once. When someone has been avoiding doing something for some time, this can be too difficult to face and hence the whole task is avoided.

Example 4.

Jenny works on the eleventh floor of a tower block. She has taken to walking all eleven floors on a morning and evening, rather than take the lift. She has even considered leaving work because her job means that she is walking up and down the stairs all day seeing people on different floors of the tower block. This can make her late for appointments. She no longer goes out with her colleagues at lunchtime because she doesn't want to go in the lift, or want to explain her fears to them. She often eats alone at her desk which makes her feel more isolated. By using graded exposure, Jenny can learn to go in the lift gradually. She can build up her confidence in a succession of steps, learning to feel safe at each stage.

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Assessing the Problem

Before tackling a problem there are a few things you need to do first.

- a. Decide on the fears you wish to tackle. Often people have more than one but some may not matter that much to you. Make a list of the ones that impact on your life most severely, or those that are particularly important to you.
- b. Put them into the sequence in which you want to tackle them. It may be that the thing that is causing you most anxiety, is not the first thing that you face. It may be that you need to begin with something which is less difficult.
- c. Having decided which one to begin with, you need to set about finding out more about the nature of your fears. For the first fear you intend to tackle, ask yourself a series of questions.
 - Does the size (of spider, lift, group) make a difference?
 - Does the number of people involved make a difference?
 - Is there a better or worse time of day (e.g. busy versus quiet)?
 - What makes it easier or harder to cope when doing the task?

Jenny's Assessment

For Jenny this means using the questions above to examine what it is about the lift she doesn't like.

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- Jenny believes that she would be better in larger lifts than smaller ones.
- She feels better when there is at least one other person going all the way with her but when the lift is not jam packed.
- She finds it harder the longer she has to be in the lift, so going only one or two floors would be easier.
- She doesn't like her colleagues to be in the lift with her because she fears they will notice she's scared and she then feels silly. This she fears will push her over the edge and cause her to retreat.
- She thinks she would find it easier to go in the lift when there are less people around therefore not at clocking on or clocking off times.

Goal setting

Next you need to decide precisely what you want to achieve in terms of conquering your fear. How would you know that you had succeeded? It is important to be very specific when setting your goal.

Jenny's Goal

Jenny believes that she will have conquered her fear if she can ride in any lift, large or small, at any time of day (quiet or busy) either alone or with a group of people.

Facing your Fears in Manageable Steps

Next it is important to write down a series of stages from least to most feared in which you can begin to tackle your fear by actively

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doing each task. When devising this list, it is important that each stage is sufficiently difficult to be a challenge but it should be one that you feel you can complete. It is important for you to build up your confidence by succeeding at each stage along the way. Also ensure that what you set yourself to do is feasible and practical. For example, it would be no good setting yourself the target of doing a task with a close friend when you don't know if the close friend will be available.

Jenny's Steps

Step 1. Jenny commits to riding in a large lift, at a quiet time, with a close colleague, up two floors.

Step 2. Jenny commits to repeat stage 1, going up or down two floors, with her colleague but to increase this to two or three times a day for a week.

Step 3. Jenny commits to stay in the large lift all the way up to the 11th floor. She arranges to meet her colleague who will accompany her at the beginning and end of the day for this purpose. Jenny continues to ride in the lift up or down two floors with her colleague in-between.

Step 4. Jenny repeats step 3 for a week. She commits to do two shorter trips a day on her own.

Step 5. Jenny continues using the lift at work riding at the beginning and end of the day with her friend and on her own for shorter rides in-between. In addition, she begins to use different

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lifts to go up or down one or two floors, with her friend, whilst out shopping at quiet times.

Step 6. Jenny continues with step 5 but now she rides four floors at work on her own at lunch time. She commits to do this everyday for a week.

Step 7. Jenny continues to travel in the lift according to her schedule at work. She also rides in small and large lifts whilst out shopping on a busier but not packed day.

Step 8. Jenny tackles using the lift at work on her own whenever she needs to. She also travels in small and large lifts whenever necessary whether it is quiet or busy.

Main Points

1. Each step must feel achievable. Don't try and do too much at once. It is more important that you succeed, than you do it too quickly and be unable to complete a step.
2. Keep some pressure on yourself when designing your tasks and keep practising. Make sure you do the feared thing regularly otherwise you will find it is harder to maintain your position on your ladder.
3. Congratulate yourself on completing each step. Never criticise yourself. If you don't manage to complete a level go back to the previous one and repeat it. Or design a step which is half way in-between.

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4. It is important that you keep repeating the task until you no longer feel anxious.
5. If different situations influence the likelihood of you completing your task, make sure you complete it in all these situations and without feeling anxious. When you can do this you have overcome your fear. Well done. Now you can start on your next one!!

Problem Shooting

There are several ways Jenny could design her schedule, this is only one example. It may be that initially Jenny couldn't begin by going up two floors with her friend. In this case she could have stood in the lift with her friend with the doors open. If lifts were too frightening for a live exposure it may be that initially she performed the task visually imagining each stage of travelling in a lift up one floor. Once she feels confident with this, then she could begin by standing in the lift without it moving.

Sometimes people need to try out a similar experience first. For example, if Jenny found it was being locked in a confined space that she disliked about travelling in the lift she could ask a friend to lock her in a small room for a short period of time.

Sometimes people become extremely anxious whilst facing their fears. If this happens to you it may be that;

- a. You have set yourself too difficult a challenge and you need to put an extra step in-between.

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- b. You may need longer doing the previous step in order to build up your confidence.
- c. You may benefit from practising the feared event in your mind through imagery first. You can also practice your breathing exercises and relaxation techniques before “going live”.
- d. It may be that it would help for you to do this task with a close friend or a professional who can support you in regulating your breathing and stay with you whilst you calm.

Relaxation Exercises

What I’m about to describe is a technique devised by Edmund Jacobson. It is outlined in a book entitled “Overcoming Anxiety” by Helen Kennerley, published by Robinson Publishing Ltd in 1997 (an excellent book which I would strongly recommend). It is a simple technique based on tensing and relaxing muscles throughout the body. For each of the following body parts tense the muscle (without straining) concentrate on the feeling of tension, hold for about 5 seconds and then relax for 10 seconds. Pay attention to how your muscles feel when they are relaxed. Breathe slowly and regularly throughout the exercises.

Feet Pull your toes back, tense the muscles in your feet, repeat and relax.

Legs Straighten your legs, point your toes towards your face. Relax, let your legs go limp and repeat.

Stomach Tense your stomach muscles by pulling them in and up, as if preparing to be punched. Relax and repeat.

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Back Arch your back. Relax and repeat.

Shoulders and Neck Shrug your shoulders as hard as you can bringing them up and in. Press your head back. Relax and repeat.

Arms Stretch your arms and hands. Relax, let your arms hang limp and repeat.

Face Tense your forehead and jaw. Lower your eyebrows and bite hard. Relax and repeat.

Whole Body Tense your entire body, your feet, legs, stomach, back, shoulders and neck, arms and face. Hold the tension for a few seconds. Relax and repeat.

When you have finished the routine repeat if you still feel tense. If only parts of you feel tense, repeat for those parts. Take some time to relax your mind. Conjure up an image or scene which you find peaceful, perhaps a favourite garden, river, or somewhere at the seaside, imagine seeing, hearing and smelling or tasting things which remind you of the scene. Breathe slowly and deeply for a few minutes.

Breathing Techniques

Breathing to aid Relaxation

When you first notice that you are beginning to become tense or anxious think to yourself “now is the time to calm and relax myself”. The following exercise can be done wherever you are without people knowing.

- a. Breath in slowly and deeply counting 6-8 seconds to do this. At the same time slowly clench your fists at your side.

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- b. Hold your breath with your fists clenched counting 4 seconds and focus on the feeling of tension in your fists.
- c. Then slowly breath out and let your fists unclench over a period of about 8 seconds. Focus on the relief from tension and say silently to yourself a long drawn out “relax” as you release the tension and breathe out, allowing your body to become relaxed and loose.
- d. You may repeat the technique as necessary.

Breathing During a Panic Attack

During a panic attack you are likely to breathe very fast this reduces the amount of carbon dioxide in your lungs creating unpleasant body feelings. To stop this you have to raise the amount of carbon dioxide. This can be done in one of three ways;

- 1. Cup your hands over your nose and mouth and breath gently for 2-3 minutes until you calm down.
- 2. Breath in and out slowly, evenly and deeply. To help yourself slow down you could say one thousand slowly to yourself as you breathe in and two thousand as you breathe out. Like this;

In	Out	In	Out	In
1, 000	2, 000	3, 000	4, 000	5, 000

Try to ensure you breathe all the way out.

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3. Sometimes when you're feeling very panicked, remembering what to count and when can be too difficult, you end up muddled. If you can talk to a friend about your difficulty when you're feeling calm ask them if they will help you at these times. Ask them if you can;
 - a. Put your hands on their shoulders.
 - b. Ask them to exaggerate their breathing in and out slowly so that you can feel their shoulders move upwards and downwards.
 - c. Copy their breathing, try and stay in time with them.
 - d. Once your breathing has slowed, you need to return to a normal pattern, at this stage you should revert back to breathing through your tummy see below under long term practice.

4. Place a PAPER bag (never plastic) over your mouth and nose and breath in and out until you feel yourself calm down.

Long term Practice

Over-breathing is a normal reaction to stress, where there is a natural increase in the rate and depth of breathing but if allowed to continue you may develop the habit of over breathing most of the time. The following technique is called the Papworth breathing technique and is specifically designed to be used in the treatment of over breathing.

Continuous over breathing causes a lowering of carbon dioxide level in the bloodstream and because the blood circulates all

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round the body it can cause many different symptoms. The most common ones are shortness of breath, tingling in the hands and feet, muscle tremors and cramps, headaches, dizziness and indigestion.

Treatment aims to correct your breathing pattern and help you relax.

Normal Breathing Pattern

Your normal breathing pattern should be gentle silent diaphragmatic or tummy breathing with very little upper chest movement. The rate should be about 8-10 average size breaths a minute at rest.

Hyperventilation or Over Breathing Pattern

An over-breathing pattern is erratic and sometimes noisy, breathing is mainly from the upper chest. The rate of breathing is fast, often more than 15 breaths a minute and the depth of each breath varies sometimes giving deep sighs.

Breathing Exercises

Become aware of your breathing by placing one hand on your upper chest and one on your tummy. Let your upper chest relax down and with the next breath allow your tummy to swell forward as you breath in and fall back gently as you breath out. Try to get a steady rhythm going taking the same depth of breath each time. Next try to slow your breathing rate down by putting in a short pause after you have breathed out and before you

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breath in again. At first you may feel you are not getting enough air in but with regular practice this slower rate will soon feel comfortable.

Breathing is something you do all the time so check that you have got it right in all positions whether lying, sitting or standing. When exercising there will be a natural increase in your breathing rate but check afterwards to make sure that you go back to a slow steady rhythm. Try to talk slowly, do not say too much with one breath and pause to take a gentle breaths in from your tummy before carrying on.

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Organisations

Alcoholics Anonymous	0113 245 4567
Eating Disorder Association	0845 634 1414
Harrogate Alcohol & Drugs Agency	01423 525 999
*Karuna Psychotherapy & Counselling	01423 502 622
Leeds Samaritans	0113 245 6789
Mind	01423 503 335
The Market Place, Leeds	0113 246 1659
Relate	01423 502 173
Samaritans	01423 525 352
Women's Counselling Service	01423 527 615

*Whilst I cannot guarantee if you telephoned I would be available to talk to you, if you were able to leave a message, I would return your call as soon as I could. I would give you the opportunity to talk and we could sort out a plan together of how and where you can get further support in the future. I would not ask for payment from you for this initial contact and would never feel like you were wasting my time.

Jo. Ringrose

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Anxiety Diary

Date & Time	What Led to the Anxiety	Mood Rating	Automatic Thought	How did you cope?	Re-rate mood
	Who? What? Where? & Why?	Rate each mood as a %	What was in your mind just before feeling anxious?	What did you do to try and feel better?	Since trying to cope mood as a %
04.06.06	<i>At home alone, waiting for friend to go to town</i>	<i>Anxiety 85% Upset 40%</i>	<i>I can't do this, I have to think up an excuse not to go. I must stay home. I'm going to make a fool of myself.</i>	<i>1. I told myself everything was going to be okay. 2. I tried distracting myself by counting backwards from 100 in twos.</i>	<i>Anxiety 75% Upset 40%</i>