THE BREATHTAKING WORLD OF ANXIETY

by Trevor Huskey, LCSW

Anxiety is the number one behavioral health issue in the US:
- Approximately 40 million adults/19.1% of adults had an anxiety disorder in the past year
- 31.1% will have an anxiety disorder in their lifetime
- 31.9% of adolescents between the ages of 13-18 had an anxiety disorder with the average age of onset being age 11

(NIMH, 2017)

THE TWO MAIN WAYS PEOPLE ORIENT IS EXTERNALLY AND INTERNALLY
- Externally, brains constantly scan for for 2 things - Threats and Opportunities
- Threats capture ones attention more than opportunities
- Internally, we have to contend most with our Thoughts and Feelings

WE ARE FULLY INTEGRATED CREATURES, per Dan Siegel's Interpersonal Neurobiology
- Physically
- Mentally
- Emotionally
- Socially

CONSCIOUSNESS
Human brains are comprised of over 100 billion neurons and process between 7-11 million bits of information per second, most of which is done by the subconscious mind.
- Conscious mind is 5%
- Subconscious mind is 50-60%
- Unconscious mind is 30-40%

BRAINS ARE ASSOCIATION MACHINES

COGNITIVE TRIANGLE

DEMOLITION DERBY
- External vs Internal
- Thoughts vs Feelings
- Feelings vs Facts
- Wants vs Needs
- Selfishness vs Altruism
- Expectations vs Associations
- Past vs present vs Future
- Short-term vs Long-term Goals
- Primal Drives vs Self-Control

6 BASIC EMOTIONS:
- FEAR is triggered by imminent physical danger
- ANGER is, in it's most pure form, about fairness
- SADNESS is typically about lose
- JOY
- SURPRISE
- DISGUST

"**EMOTIONS** serve a valuable purpose; they help us make sense of the world around us, other people and ourselves, and react accordingly. Emotions are immediate physiological chemical responses and continuously regulate every living cell to adapt to emerging threats and opportunities. It takes our brains about 1/4 second to identify a threat or an opportunity, and another 1/4 second to produce chemicals which are released throughout our bodies, not just in our brains. These chemical responses last for about six seconds."
- Six Seconds, The Emotional Intelligence Network

FEAR IS OUR MOST POWERFUL AND DYNAMIC EMOTION
Fear triggers the sympathetic nervous system which consists of:
- Constricts arteries to increase blood pressure
- Directs blood flow to the muscles and away from other body part
- Tenses muscles in order to be better prepared for action
- Converts glycogen to glucose for muscle energy
- Opens lungs to take in more oxygen
- Releases adrenaline, which boosts energy and strength and is designed to be burned off intensely and quickly
- Releases cortisol, which shuts down the immune system
- Overrides pain, allowing for fight or run when injured
- Reduces blood to the skin to limit bleeding in case of injury (people go pale when scared)
- Reactions are instinctually/immediately as opposed to consciously/thoughtfully
- Focusing attention on the threat instead of primal drives
- Dilating the eyes
- Stopping saliva production
- Stimulating sweat production
- Heightening senses
- Temporarily enhancing memory so that the life-threatening incident is etched and encoded into one's memory bank much more vividly

II ANXIETY

FEAR IS AN EMOTION AND MORE STANDARD
ANXIETY IS A FEELING AND MORE INDIVIDUAL

"**FEELINGS** happen as we begin to integrate the emotion, to think about it, to "let it soak in." In English, we use "feel" for both physical and emotional sensation - we can say we physically feel cold, but we can also emotionally feel cold. This is a clue to the meaning of "feeling," it's something we sense. Feelings are more "cognitively saturated," fueled by a mix of emotions, and last longer than emotions. They are also filtered through our unconscious and subconscious minds, influencing reactions."
- *Six Seconds, The Emotional Intelligence Network*

BRAINS ARE PRONE TO HIGHLIGHT THREATS AND DANGER IN ALL FORMS

FEAR is an emotional response to a definitive and present danger like a jaguar

Anxiety: is a feeling characterized by a significantly stressful state of doubt, vague apprehension or dread to an undefined (unclear) or ill-defined (mistaken) threat/problem, or "fear un-personified" as I refer to it; like you sense there is a jaguar right next to you but you're enveloped in fog and can't see the jaguar.

Imminent (actual)
Potential (possible)
Perceived (believed)
Probable (likely)

RANGE OF COGNITIVE REACTIONS

THINK: the action of using your mind to produce ideas, decisions, memories, etc.

PONDER: to think about or consider something carefully.

CONCERN: to relate to something or someone.

WORRY: to think about problems; feel concern that something bad has happened or could

STRESS: a state of mental tension due to too many responsibilities and not enough resources.

ANGST: lower level anxiety, usually typical anxiety

ANXIETY: fear or nervousness about what might happen: a feeling of wanting to do something very much.

PANIC: a state or feeling of extreme fear that makes someone unable to act or think normally.

TYPES OF ANXIETY DISORDERS

SEPARATION ANXIETY
SELECTIVE MUTISM
SOCIAL ANXIETY DISORDER
PANIC ATTACKS
PANIC DISORDER
AGORAPHOBIA
GENERALIZED ANXIETY
OCD
PTSD (Trauma)
PHOBIAS
HYPOCHONDRIA
ADJUSTMENT DISORDER WITH ANXIETY

Eating Disorders, Borderline Personality Disorders, Perfectionism, and other compulsive behaviors are usually the result of trauma and result in major anxiety. Bipolar and ADHD are biological in origin, although both can be misdiagnosed when the issue or main issue is trauma.

TRAUMA

Emotional trauma is a very common source for anxiety, but it is often overlooked, dismissed, minimized or denied by patients, so much so that, "Trauma is the public health crisis of our time" - Bruce Perry

ANXIETY VS WORRY

1. We tend to experience worry in our heads and anxiety in our bodies.
2. Worry tends to be specific while anxiety is more general.

3. Worry is verbally focused while anxiety includes verbal thoughts and mental imagery.
4. Worry often triggers problem solving but anxiety does not.
5. Worry creates mild emotional distress, anxiety can create severe emotional distress.
6. Worry is caused by more realistic concerns than anxiety.
7. Worry tends to be controllable; anxiety much less so due to its racing thoughts or ANTS.
8. Worry tends to be a temporary state but anxiety can linger, especially about the past.
9. Worry doesn't impact our professional and personal functioning; anxiety does.
10. Worry is considered a normal psychological state while anxiety is not. (I disagree with this as there is always a reason anxiety manifests.)

- A 2016 Psychology Today article by Guy Winch, "10 Crucial Differences Between Worry and Anxiety…and why you need to know the difference."

ANXIETY VS STRESS

In general, the differences between anxiety and stress are similar to the differences between worry and anxiety. Other factors include:

- Stress is external and related to insufficient resources to meet obligations
- Both trigger the sympathetic nervous system to varying degrees
- Both can trigger one another
- Both range in intensity and the severe versions are major problems for people

"Do you feel exhausted or overwhelmed by the pressure of dealing with a school course load, work project, or a parent's expectations? That's probably stress. Do you feel a more general sense of fear or unease? Are you more worried about the future rather than the present? Are you worried about something not too closely related to your life, or even nothing specific at all? That's more likely anxiety…You can't alleviate an anxiety disorder with a vacation or a trip to the spa."

- Gabrielle Moss " *4 Ways To Tell The Difference Between Stress & Anxiety"*

SIGNIFICANT STRESS AND ANXIETY ARE HEIGHTENED STATES THAT WHEN EXCESSIVE OVER THE LONG TERM CAN CAUSE SERIOUS HEALTH PROBLEMS

ANXIETY VS DEPRESSION

85% comorbid
Anxiety #1 and depression #2
Vague vs specific
Runaway thoughts vs focused
Thought patterns can be illogical vs reasonable
past/future vs present/past
Insomnia vs excessive sleep
Active vs passive - sympathetic vs parasympathetic

Differentiating depression vs burnout is important; depression is about loss and relatively easy to identify, whereas burnout is often driven by anxiety.

PRIMARY SOURCES OF ANXIETY

PHYSIOLOGICAL - heart problems, anemia, inner ear conditions, breathing disorders, hormonal conditions, dehydration, hypo-amygdala
EXPERIENTIAL - trauma (physical, emotional, developmental, complex, institutional trauma), familial and cultural influences

LIFESTYLE - sleep, exercise, caffeine, alcohol/drug use, violent/aggressive games, problematic beliefs/ expectations/priorities, excessive stressors, poor organization
INSECURITY - self-doubt, vulnerability and poor self-esteem, lack of honesty with oneself, insufficient use of strengths, lack of sense of agency and self-advocacy
COGNITIVE DISSONANCE - ambivalence is conscious competing thoughts or beliefs; cognitive dissonance is subconscious competing thoughts or beliefs

NORMAL STAGES OF ANXIETY:
- Infants are usually afraid of strangers and loud noises.
- Toddlers often times experience separation anxiety.
- Children are afraid of the dark and imagined fears.
- Teenagers fret about social/body issues and the future

RANGE OF SELF-CONSCIOUSNESS *I feel stupid and contagious" - Nirvana "Teen Spirit"*
CONSCIOUSNESS: the normal state of being awake and able to understand what is happening around you. : a person's mind and thoughts.
SELF-CONSCIOUS: 1 a: conscious of one's own acts or states as belonging to or originating in oneself : aware of oneself as an individual. 2 uncomfortably conscious of oneself as an object of the observation of others; ill at ease.
SELF-DOUBT: lack of confidence in the reliability of one's own motives, personality, thought, etc.
GUILT: a feeling of responsibility or remorse for some offense, crime, wrong, etc., whether real or imagined.
SHAME: 1 A painful feeling of humiliation or distress caused by the consciousness of wrong/foolish behavior.
Guilt is, "I did something wrong." Shame is, "I'm a bad person."

TYPICAL ANXIETY	ATYPICAL ANXIETY
Public speaking	Unable to order food at a restaurant
A stranger yelling at you	Friend calling from across a room
Getting fired	Quitting because you believe you aren't completely successful despite good reviews

GENERAL MANIFESTATIONS
AMYGDALA HIJACK is an immediate and powerful or overwhelming emotional overreaction that is out of proportion to the circumstances, and is one definition for what happens when someone experiences atypical anxiety.
FREE-FLOATING ANXIETY is when you are unsure why you're anxious; there is always a reason someone is anxious, and that reason is valid, it's just a matter of figuring out why.
DIRTY ANXIEY is when you become anxious about being anxious and exemplifies the runaway train aspect of automatic negative thoughts so characteristic of anxiety.

4 MAIN TYPES OF SYMPTOMS
PHYSICAL - HBP, teeth grinding, headaches, ulcers, vertigo, ear ringing, seizures
COGNITIVE - self doubt, marginalized rationality, excessive speculation, intrusive thoughts
EMOTIONAL - inhibited, judged, neglected, guarded, sensitive
BEHAVIORAL - self-doubt, apprehension, pressure, controlling

SECONDARY EFFECTS
- Developmental
- Social
- Academic
- Vocational
- Spiritual

ROLLING MANIFESTATIONS
Symptoms resulting in other problems, making it even more complicated to contend with:
- Insomnia due to racing thoughts
- Self-doubt impairs the ability to concentrate on the task at hand, hence work suffers
- Social anxiety may lead to isolation which only exacerbates feelings of interpersonal incompetence that contribute to social awkwardness
- Physically the various ailments associated with anxiety are very hard on the body and can lead to serious conditions requiring major medical intervention.
- People feed into their anxiety so much it becomes their dominant emotional state and restricts cultivating the ability to contend effectively with other emotionality

ANXIOUS MINDSETS
- Worrier
- Critic
- Victim
- Perfectionist
- Edmund Bourne

III COPING SKILLS

Anxiety is the overestimation of a threat and the underestimation of your ability to cope.

HEALTHY LIFESTYLE
- SLEEP
  Hours based on age, 7-8 is most typical
  Consistent schedule and routine - no TV, computer, cell phones at least 30 minutes prior
  No food 5-6 hours prior, instead reading, stretching, deep breathing, 3 positives
- EXERCISE
  Exercise is amazing for anxiety - mood/energy booster, stress/anxiety/depression reliever, physically, mentally creates new brain cells (Alzheimer's), look better/feel better about self
- FOOD
  Drink enough water, healthy whole foods, limit caffeine and other substances
- SOCIALIZING
  In my practice as a therapist, the three most consistent problems patients present with are:
  How they relate to themselves / How they relate to others / How others relate to them.
  These issues are always interdependent as our brains are constantly reevaluating them throughout each day, which is why our interactions with people are so principal to our being.

RESIST FEEDING INTO COMPULSIVE BEHAVIORS

AWARENESS, ACCEPTANCE & OWNERSHIP

- How aware are you of external events and internal reactions of thoughts and feelings
- Are you able to accept both, process them without overreacting/feeding into them
- Can you take ownership of your circumstances, role in events and do what you can, or do you respond as if a puppet, blame others instead of looking at yourself, and try to find some way to weasel out of things?

OWNING YOUR ANXIETY BEFORE IT OWNS YOU

There is a big difference between owning your life and being owned by circumstances and reflexive reactivity. Cultivating a mindset of embracing your anxiety, being curious about its origins, and conscious attending to it are the benchmarks for a healthy reaction.

TEMPORARY COPING SKILLS

- Grounding Techniques
- Desensitization
- Acupressure

EFFECTIVE ORIENTATION

- Structure
- Task Orientation
- The Arts
- Advice Columns
- Mindfulness
- Meditation
- Stretching
- Nature

DEEP BREATHING

- Practice when calm
- Good posture by sitting up straight or lying down
- Abdominal breathing - place hand on belly button, on inhale abdomen should expand, then fill upper lungs
- Find your rhythm, start with 3 second in and 7 seconds out and find your sweet spot - 4/8? 3/9? 4/10?
- I prefer patients breathe in and breathe out through their nose to avoid too quick exhales
- Close eyes to minimize stimuli
- Maintain focus, mantras such as "Calming air in, stress out" can help
- Practice acceptance: "I'm anxious. As long as I don't feed into my anxiety it will pass sooner than later," or "This state of mind is just a phase; I can't stay in the same emotional state forever."
- Visualize stress leaving your bodies throughout the top of your heads like white smoke gently billowing out of a chimney.
- Self-massage People hold a majority of their stress from the shoulders up. Massaging these areas gets more blood flow to that part of the body, relieves tension, and is usually very relaxing physically and mentally.

SELF-TALK

10,000-40,000 thoughts per day

- Reflexive vs Reflective
- Negative vs Factual vs Positive
- Feelings vs Facts
- Ambivalence vs Flexibility

- Motivational vs Instructive
- Preemptive vs Present vs Post Facto
- Perseveration vs Integration

REFLEXIVE VS REFLECTIVE

- REFLEXIVE:
  "SOMEONE STEPPED ON MY FOOT!I BET THEY ARE MAD AT ME!THEY'RE PROBABLY GOING TO TRY TO BEAT ME UP!THE WORLD IS A HORRIBLE, AWFUL, DANGEROUS PLACE!I'M GOING TO RUN AND HIDE!"
- REFLECTIVE:
  "Someone stepped on my foot. They're casually walking away like nothing happened. They probably did it on accident. I've stepped on other people's feet before by accident. No big."

NEGATIVE / POSITIVE / NEUTRAL

NEGATIVE

- Our brains scanning for threats
- Experiences/memories/associations holding more weight than positive
- Acculturation from an early age
- The domino effect to avoid problematic outcomes - imagination

Negative thoughts are best to help one anticipate and avoid negative outcomes.

Allow yourself to sit with thoughts or emotions for a minimum of 2-5 minutes at a time - you never know when an insightful perspective is going to arrive. This also helps people develop Emotional Fortitude, which is the ability to withstand their own emotional reactions. Until one has developed Emotional Fortitude the problem isn't the problem, initial emotionality isn't the problem, feeding into one's initial emotionality is the problem.

POSITIVE

"You just have to think positive." / "It will be all right."

Self-talk Dissonance:

Toxic positivity / Cruel optimism / "I'm the best"

POSITIVE REFRAME

Putting a positive spin on something you experienced as anxiety-provoking:

- "I am anxious about an upcoming job interview due to thinking, 'If I don't get this job, I'll be a failure.'"
- "At the very least, it's good practice for other important job interviews."

NEUTRAL

"It's all in your head." *Anxiety lives in your head, rearranges furniture and demands a high rent.*

"Just because someone says something doesn't mean it's true."

"Just because you think something doesn't mean it's true."

"Just because you feel a certain doesn't mean you should act out in that way."

Emotional Reasoning is when a person allows their emotions to dictate how they think and react.

FEELINGS VS FACTS

- Feelings are internal, subjective forces that do their best to be reliable and positive helpers but are prone to unruly intensity at times, especially anxiety.
- Facts, on the other hand, are external events that are objective and, therefor, more consistently reliable to everyone who isn't trying to manipulate them for selfish reasons.

AMBIVALENCE VS FLEXIBILITY

AMBIVALENCE is having some type of conscious conflict

There are multiple types of ambivalence:

- Internal vs external
- External vs external
- Internal vs internal

Ambivalence can be about the same thing (e.g., "Frank's a great friend to hang out with, but he never returns my calls.") or different things (e.g., "I have a physics test tomorrow and I should study, or I could go hang out with my friends, drink beer, and shoot pool.").

FLEXIBILITY

Three umpires were interviewed and asked how they decided what was a ball versus a strike.

- The first umpire said, "I call 'em as they are." - factual
- The second umpire said, "I call 'em as I see them." - perception
- The third umpire said, "They ain't nuthin' till I call 'em." - autonomy

PROSECUTOR / DEFENSE ATTORNEY / JUDGE

Each of us is our own:

Prosecuting attorney (negative)

Defense attorney (positive)

Judge (neutral)

What evidence do you have to support this initial thought?

What evidence do you have to negate this initial thought?

NORMALIZING

"How many people out of 100 would struggle with these exact circumstances to this degree?" helps put circumstances in context for yourself. I recommend reading advice columns to gain additional perspectives and insights about different scenarios and what is fair and reasonable.

PREEMPTIVE PRESENT POST FACTO

- PREEMPTIVE - preparing
- PRESENT - in the moment, generally the hardest
- POST FACTO - after the fact, generally the easiest

PSYCHOLOGICAL DISTANCING

Imagining you are counseling another person about this problem

EXPRESSIVE VS MOTIVATIONAL VS INSTRUCTIVE

- Expressive Self-Talk - "I feel lonely, and it's a really tough feeling, especially around the holidays."
- Instructional Self-Talk work best with tasks that involved focus, strategy and technique (e.g., cooking, packing, counting, writing, editing, looking for an object) - "First you need to put the widget into the post, and then connect the backing to the post."
- Motivational Self-Talk work best on tasks based on speed, strength and power (e.g., sports) - "Come on, Trevor, you only have one more lap to go!"

PERSEVERATING

Cyclical learning

- COVERT REHEARSAL - deliberate and similar to the overt rehearsal of practicing one's lines for a play.
- IMPLICATION PROCESSING - helpful when an aspect of our world is turned upside down and we need to "cover our bases" in order to make sense of it and chart a course accordingly.
- SUBCONSCIOUS REPRIMAND - When you did something ill-advised and your subconscious won't stop nagging at you about what poor judgement you exhibited.

THE LIBERATION OF EFFECTIVE SELF-TALK

Consciousness is a true blessing. Self-talk gives us the opportunity to consider a variety of perspectives, like trying on different hats, so that we can make informed decisions as opposed to reflexive emotional reactions driven by anxiety or anger. Self-talk really is, as the saying goes, "where the rubber meets the road."

"We don't so much solve our problems as we outgrow them. We add capacities and experiences that eventually make us bigger than the problems." - Carl Jung

THE BOOKENDS

- APPRECIATION
- GIVING YOURSELF CREDIT

MEDICATIONS

"People are always looking for the single magic bullet that will totally change everything. There is no single magic bullet." - Temple Grandin

- Generally, psychotropic medications treat symptoms but do not address underlying causes.
- People can rely on medications too much and not put in the time and effort to address underlying causes.
- Inconsistency with medications can interfere with proper diagnosis and progress
- Side-effects can result in inconsistency with medications
- Effectiveness of medication can interfere with clarity regarding progress of therapy
- Generally, psychotropic medications are most appropriate for moderate-severe and severe symptoms

TREATMENT

- Consistency with appointments and homework is necessary
- Ownership, investment and active participation is strongly encouraged
- Honestly in treatment is critical
- Willingness to express any frustrations with therapist are an important aspect, most therapists will work with you to resolve the issues

 trevorhuskey.com trevorhuskey@yahoo.com