

Chapter 1 : 12 Do's and Don'ts of Helping Someone With Anxiety

The term "anxiety disorder" refers to specific psychiatric disorders that involve extreme fear or worry, and includes generalized anxiety disorder (GAD), panic disorder and panic attacks, agoraphobia, social anxiety disorder, selective mutism, separation anxiety, and specific phobias.

They come as naturally to life as breathing or making a meal. For some, however, relationships are not so easy. But our understanding of how the fear of commitment for some people can be paralyzing has increased. While they still experience love like anyone else, the feelings can be more intense and scary than they are for most people. These feelings drive increased anxiety, which builds upon itself and snowballs as the relationship progresses and the expectation of a commitment looms larger. People with a commitment phobia long and want a long-term connection with another person, but their overwhelming anxiety prevents them from staying in any relationship for too long. If pressed for a commitment, they are far more likely to leave the relationship than to make the commitment. Or they may initially agree to the commitment, then back down days or weeks later, because of their overwhelming anxiety and fears. Some people with relationship anxiety may confuse positive feelings of excitement for another person and the potential of a relationship with the feelings of anxiety. For instance, normal feelings of anticipation or may be misconstrued by the person as a panic reaction, or general negative anxiousness. Some may also just have a difficult time resolving the inherent conflict of romantic relationships – the craving of intimacy while wanting to retain their own individuality and freedom. People with commitment issues come in all shapes and sizes, and their exact dating and relationship behaviors can vary. Some refuse to have any serious or long-term relationships longer than a week or a month, because of their fears. Others may be able to be involved with one person for a few months, but as the relationship becomes more serious and deeper, their old fears again come to the forefront, driving the person away. Both men and women can suffer from relationship anxiety and commitment phobia, although traditionally it was thought primarily to be a male problem. **The Causes of Commitment Phobia** The causes of commitment phobia are as varied as the people who suffer from it. Other common causes of commitment phobia may include: There is help, but a person needs to want to change and find a way to overcome their relationship anxiety. It cannot be done by others. There are many strategies to help someone with commitment phobia, depending on the severity of the anxiety. A person will also learn in therapy that open communication with their partner will reduce the likelihood of there being any future surprises or trust issues. Some people with milder commitment issues may benefit from getting support for their concerns through an online support group for relationship issues. And while self-help books vary in their usefulness and practice advice, these may of particular consideration to check out:

Chapter 2 : 16 Problems Only People With Anxiety Understand | The Mighty

'Understanding the Root Problem of Anxiety and Worry' helps you see why people worry. This is the third of nine sessions on Overcoming Anxiety: Possessing God's Precious Peace which comprise the fifth lesson in the Discipleship Level 2 series: Reaching Beyond Mediocrity.

A colleague, with a background in special ed. I had no idea what she was talking about, but we conducted research and discovered there was no such service being offered. We set up a program where applicants would come for an intake interview with parents before participating in the group. An interesting thing happened. Many of the clients interviewed never showed up for the group. In I started a private practice specializing in biofeedback for stress related disorders. Soon thereafter I integrated therapy for socially challenged individuals as a specialty. This was the beginning of my clinical experience 37 years ago. Since then; I have facilitated treatment for thousands of individuals of all ages with social anxiety and related disorders. Treatment has included individual, family, parenting, and group therapy. The functioning level of patients has varied tremendously. I have worked with many superstars in their professions as well as pervasively challenged individuals. I want to share with you what I have learned regarding treatment efficacy! First; in a private practice setting if you do not help your patients achieve their goals they will not come to therapy. Secondly; given that social anxiety is the quintessential disease of resistance, a creative and productive approach to treatment was necessary for productivity. The result was the Berent Methodology, which has been crafted, developed, and organized for 37 years. The Berent Method has customized a treatment methodology adapted to the specific needs of social anxiety rather than fit the problem into the confines of existing modalities. This is the most important concept of this essay. The starting point of treatment for social anxiety is to understand that while there are many manifestations of social anxiety there are 2 basic types of people with the problem. Initiative does not mean ability it means the motivation to start up. I have not seen this variable factored into any formal research that demonstrates clinical efficacy. For example, there is a substantial difference between the 26 year old who is experiencing relationship challenges and performance anxiety at work who initiates treatment independently vs. The fact that mental health technologies have not differentiated between the 2 basic subgroups initiative vs non-initiative is a major component of the trivializing of social anxiety. The problem is that most evidence for social anxiety treatment success is quite limited. I encourage you to experience real evidence by accessing the free library of clinical interviews at www.berent.com. In fact, I challenge any therapist, hospital, university, or organization to come up with more evidence of clinical success for social anxiety! The biggest confusion that people bring into treatment is a lack of understanding about how ingrained the problem can be. The problem is multi-dimensional. It includes the following domains: The two dynamics that are most absent from treatments in general for social anxiety are an understanding of the relationship of emotion to physiology and the avoidance-dependence syndrome that impacts individuals without initiative. My writing about parents was a sign that I developed a strategy to negotiate the avoidance-dependence pathology. This pathology can run very deep and is often the core of resistance. Avoidance often evolves into a compulsion or addiction. I have been criticized by a few individuals for not having compassion for social anxiety sufferers. These people are incorrect. What they are witnessing is my energy needed to negotiate narcissistic-driven avoidance. I will discuss more on this personality dynamic at another time. At the risk of creating controversy I will tell you that too much compassion is an ingredient for the chemistry of enabling. The philosophy behind the Berent Method is that time is your most valuable asset. Time is not elastic. Social anxiety accrues with time. The negative and painful mind-body response of social anxiety gets worse the more it remains the same. All children and most teenagers with social anxiety do not have initiative. Common examples include selective mutism, school phobia, and teenagers and adults who are pervasively avoidant and dependent. Where initiative is not present treatment is parent focused. The goal is to empower vs enable. Parents are guided into parenting team building and teaching the dependent emotional intelligence. The concept of nurturing, which had been defined as rescuing, is re-architected into providing support and promoting growth. A crucial component of treatment is helping parents negotiate their own

emotions and anxiety through the process. Adolescents and adults are integrated into therapy sessions after parents have learned appropriate skills. In the case of young children treatment is totally parent focused. Treatment is a combination of technique and core work. After a comprehensive orientation and history taking individuals are introduced to the concept of mind states. Based on the psychology of transactional analysis mind states is a productive tool in making concrete the therapeutic process. The primary technique in the Berent model is the paradox of making friends with adrenaline. This requires a historical analysis of how the negative association to adrenaline was learned. This is concurrent with learning to accept and surf the wave of adrenaline. This technique will help to channel and harness the energy of adrenaline. This is where there is potential for immersion as a component of the behavioral strategy Core work is based on The Sarno Method. The basic Sarno dynamic is that repressed anger and rage is the root cause of physical symptoms. This rage is so strong that it inhibits the flow of oxygen into the blood stream. In the reservoir are the root causes of shame, embarrassment, and humiliation. Once the reservoir has been identified the goal is to attach on an emotional vs intellectual level. In mind state transactional analysis language the more that the natural child has not been nurtured, the more repressed rage there will be! The answer depends on ones learning curve. The primary variables to the learning curve include length of the problem, severity of the problem, degree of obsessive energy, motivation, expressive ability, the ability to integrate new concepts, and readiness to face fear. Pharmaceutical intervention is utilized when indicated. When used; the philosophy is to use the medicine as a tool to help facilitate the therapeutic process.

Chapter 3 : What is Commitment Phobia & Relationship Anxiety?

The anxiety is a symptom of the actual problem. As mentioned in a prior post, in future posts I will be writing about my 5 Prong Approach and Solutions & Resources SM to provide help and hope.

Reaching Beyond Mediocrity Paul J. Once we discover worry in our lives, then we can trace its problem to the root cause. This is the third of nine sessions on Overcoming Anxiety: Clearly we should not think that worry is a normal way of life. Since worry is defined by not trusting in God, we see it is missing the faith that each person should possess. Those painful points in our lives that are built around lack of confidence have quite a few common elements. We know how to handle them. They are not so large and daunting. Instead, we understand that they have a common root and solution. When we clarify the root problem of anxiety, we quickly spot the problem that has to be dealt with. Our options will become quite apparent. Anxiety can pop up in many areas of our lives. They do not need to be real. A person only needs to think it is important and he will be anxious that he does not have such and such. Let me enumerate a few. People worry about every kind of thing. People might worry whether they will have a job tomorrow. Others looking for a spouse, worry whether they will ever find one. Some are anxious about their health. They wonder if they will be able to normally function. Ever worry over whether you will ever be able to gain the needed wisdom to serve others? When a person develops worry in one area, it is likely that he or she will become worried in other areas. This is because it is a response mechanism. The response pattern actually a series of things happen becomes routine and easily adapted to other areas. The student who used to worry about getting into school now is worried about grades in school. The emotional, spiritual and physical signs of anxiety and worry are discussed in the next page. The first anxiety exercise can help you detect worry in your life. Check out our exercise page.

Chapter 4 : How do I know if my anxiety is a problem? – Seleni Institute

Everyone is familiar with anxiety; it is a problem of epidemic proportions. Yet as prevalent as it is, anxiety or worry is one of the most counterproductive things we can do. a. Worry is like a rocking chair it will give you something to do, but it won't get you anywhere. b.

The theologian Paul Tillich characterized existential anxiety [23] as "the state in which a being is aware of its possible nonbeing" and he listed three categories for the nonbeing and resulting anxiety: According to Tillich, the last of these three types of existential anxiety, i. Tillich argues that this anxiety can be accepted as part of the human condition or it can be resisted but with negative consequences. In its pathological form, spiritual anxiety may tend to "drive the person toward the creation of certitude in systems of meaning which are supported by tradition and authority " even though such "undoubted certitude is not built on the rock of reality ". Test anxiety , Mathematical anxiety , Stage fright , and Somatic anxiety According to Yerkes-Dodson law , an optimal level of arousal is necessary to best complete a task such as an exam, performance, or competitive event. However, when the anxiety or level of arousal exceeds that optimum, the result is a decline in performance. Students who have test anxiety may experience any of the following: Sweating, dizziness, headaches, racing heartbeats, nausea, fidgeting, uncontrollable crying or laughing and drumming on a desk are all common. Because test anxiety hinges on fear of negative evaluation , [26] debate exists as to whether test anxiety is itself a unique anxiety disorder or whether it is a specific type of social phobia. The fear of failing at a task and being negatively evaluated for failure can have a similarly negative effect on the adult. Stranger anxiety and Social anxiety Humans generally require social acceptance and thus sometimes dread the disapproval of others. Apprehension of being judged by others may cause anxiety in social environments. It may persist into adulthood and become social anxiety or social phobia. In adults, an excessive fear of other people is not a developmentally common stage; it is called social anxiety. According to Cutting, [32] social phobics do not fear the crowd but the fact that they may be judged negatively. Social anxiety varies in degree and severity. For some people, it is characterized by experiencing discomfort or awkwardness during physical social contact e. Those suffering from this condition may restrict their lifestyles to accommodate the anxiety, minimizing social interaction whenever possible. Social anxiety also forms a core aspect of certain personality disorders, including avoidant personality disorder. Depending on the nature of the antecedent relations, cognitions, and situational factors, intergroup contact may be stressful and lead to feelings of anxiety. This apprehension or fear of contact with outgroup members is often called interracial or intergroup anxiety. For instance, increases in schematic processing and simplified information processing can occur when anxiety is high. Indeed, such is consistent with related work on attentional bias in implicit memory. Trait anxiety reflects a stable tendency across the lifespan of responding with acute, state anxiety in the anticipation of threatening situations whether they are actually deemed threatening or not. Through experience many find it difficult to collect themselves due to their own personal nature. The first form refers to a choice in which there are multiple potential outcomes with known or calculable probabilities. The second form refers to the uncertainty and ambiguity related to a decision context in which there are multiple possible outcomes with unknown probabilities. Anxiety disorder Anxiety disorders are a group of mental disorders characterized by exaggerated feelings of anxiety and fear responses. These feelings may cause physical symptoms, such as a fast heart rate and shakiness. There are a number of anxiety disorders: The disorder differs by what results in the symptoms. People often have more than one anxiety disorder. Anxiety disorders often occur with other mental disorders, particularly major depressive disorder , personality disorder , and substance use disorder. Counselling is typically with a type of cognitive behavioural therapy. They affect those between the ages of 15 and 35 the most and become less common after the age of Rates appear to be higher in the United States and Europe. This portrait "conveys an impression of anxiety and weariness, as of a man shouldering heavy [state] responsibilities". The epigenetic signature of at least one of these genes BDNF has also been associated with anxiety and specific patterns of neural activity. This includes conditions that affect the ability to breathe, like COPD and asthma , and the difficulty in breathing that often occurs near death. These include alcohol ,

tobacco , cannabis , sedatives including prescription benzodiazepines , opioids including prescription pain killers and illicit drugs like heroin , stimulants such as caffeine , cocaine and amphetamines , hallucinogens , and inhalants. Acute exposure to toxic levels of benzene may cause euphoria, anxiety, and irritability lasting up to 2 weeks after the exposure. For example, an overgeneralized belief that something bad "always" happens may lead someone to have excessive fears of even minimally risky situations and to avoid benign social situations due to anticipatory anxiety of embarrassment. In addition, those who have high anxiety can also create future stressful life events. Such unhealthy thoughts can be targets for successful treatment with cognitive therapy. Psychodynamic theory posits that anxiety is often the result of opposing unconscious wishes or fears that manifest via maladaptive defense mechanisms such as suppression, repression, anticipation, regression, somatization, passive aggression, dissociation that develop to adapt to problems with early objects e. Such conflicts can be targets for successful treatment with psychodynamic therapy. While psychodynamic therapy tends to explore the underlying roots of anxiety, cognitive behavioral therapy has also been shown to be a successful treatment for anxiety by altering irrational thoughts and unwanted behaviors.

Evolutionary psychology[edit] An evolutionary psychology explanation is that increased anxiety serves the purpose of increased vigilance regarding potential threats in the environment as well as increased tendency to take proactive actions regarding such possible threats. This may cause false positive reactions but an individual suffering from anxiety may also avoid real threats. This may explain why anxious people are less likely to die due to accidents. This might indicate that anxiety is a protective mechanism designed to prevent the organism from engaging in potentially harmful behaviors.

Social[edit] Social risk factors for anxiety include a history of trauma e. In particular, learning mastery the degree to which people perceive their lives to be under their own control and instrumentality, which includes such traits as self-confidence, independence, and competitiveness fully mediate the relation between gender and anxiety. That is, though gender differences in anxiety exist, with higher levels of anxiety in women compared to men, gender socialization and learning mastery explain these gender differences. The difference in these images actually tended to be greater in cultures with greater institutional gender equality. Please help improve this section by adding citations to reliable sources. Unsourced material may be challenged and removed. October Learn how and when to remove this template message

Anxiety disorder appears to be a genetically inherited neurochemical dysfunction that may involve autonomic imbalance; decreased GABA-ergic tone; allelic polymorphism of the catechol-O-methyltransferase COMT gene; increased adenosine receptor function; increased cortisol. In the central nervous system CNS , the major mediators of the symptoms of anxiety disorders appear to be norepinephrine, serotonin, dopamine, and gamma-aminobutyric acid GABA. Other neurotransmitters and peptides, such as corticotropin-releasing factor, may be involved. Peripherally, the autonomic nervous system , especially the sympathetic nervous system, mediates many of the symptoms. Increased flow in the right parahippocampal region and reduced serotonin type 1A receptor binding in the anterior and posterior cingulate and raphe of patients are the diagnostic factors for prevalence of anxiety disorder. The amygdala is central to the processing of fear and anxiety, and its function may be disrupted in anxiety disorders. Anxiety processing in the basolateral amygdala has been implicated with dendritic arborization of the amygdaloid neurons. SK2 potassium channels mediate inhibitory influence on action potentials and reduce arborization.

Chapter 5 : What is Social Anxiety? | The Social Anxiety Institute

Most studies focusing on problem behavior in children have found that promoting low-anxiety environments is a first important step when dealing with problem behavior.

There are many reasons why kids sometimes behave in ways that leave us in despair and one of these reasons is anxiety. One thing we know is that many children will go through anxiety at some stage in their lives. According to the Anxiety and Depression Association of America , few children under 13 suffer from anxiety disorders. In other words, normal anxiety is a part of childhood. It is not uncommon for kids to portray anxiety-related behaviors when they have to leave their parents, meet new people, or participate in specific activities such as swimming or even going to school. Few parents have escaped the stress associated with separation anxiety. Fear is one of the most common feelings children experience and this often leads to anxiety-related behaviors. An anxious child may be a worrier, she might fear messing up, or she might act clingy especially around difficult situations such as attending school for the first time. There are times, however, when anxiety in children leads to problem behavior. The biggest problem when dealing with difficult emotions such as anxiety is that, just like for adults, navigating difficult emotions is not always easy. Your child may not know what emotion he is feeling and what that means, and this may lead him to act in inappropriate ways in an attempt to deal with his difficult emotions. Peter had always been a relatively calm child, but he would frequently throw tantrums that seemed to come out of nowhere. For example, he would be doing a puzzle and all of a sudden, he would be in the middle of a tantrum for no apparent reason. The same pattern continued when he joined school. In the middle of an activity, Peter would suddenly begin to speak or sing loudly and would not leave his classmates in peace. He would throw things around the classroom, clown around, and do almost anything to disrupt the class. Whenever he was asked to do an activity he felt he was unable to do, Peter became anxious. Several researchers are now saying that there is a strong link between anxiety and problem behavior. For instance, one study has found that working to decrease anxiety greatly reduces problem behavior in children. Most studies focusing on problem behavior in children have found that promoting low-anxiety environments is a first important step when dealing with problem behavior. Remember that navigating big emotions is difficult, even for adults. Emotions are a big deal and they can sometimes lead us to behave in ways that surprise even those closest to us. People who have always been taught that emotions should be hidden struggle with difficult emotions all their lives. Helping your child navigate big emotions is an important step toward helping him learn to deal with difficult emotions. This may mean having to learn to deal with your own emotions first. Providing an environment in which emotions are viewed as normal and holding conversations around those emotions is an important phase in helping foster low-anxiety environments. Numerous age-appropriate resources now make it possible to help children learn to identify their emotions, understand what triggers those emotions, and find appropriate strategies to express those emotions. Create emotionally safe environments. Emotional safety refers to environments in which individuals are able to identify their feelings and feel safe enough to experience those feelings. Talk about your personal experiences. A child suffering from anxiety often believes that she alone experiences this emotion. Talking about your personal experiences with anxiety can help her see that anxiety affects everybody. Beyond talking about anxiety, talk about what you do to handle anxious situations. Helping your child see that anxiety affects everybody and can be managed may help give her the tools she needs to deal with her own anxiety. Normal anxiety is rarely excessive. Retrieved on November 12, , from <https://>

Chapter 6 : Understand the Facts | Anxiety and Depression Association of America, ADAA

"We know there is a correlation between anxiety and physiological problems and GI symptoms are tied to it." Understanding symptoms can help people distinguish normal and worrisome anxiety.

To someone without anxiety, these behaviors can seem strange, silly and disproportionate to the situation at hand. That said, we sometimes wish more than anything that others could. If you live with anxiety, then we hope you find comfort in knowing you are never alone in your struggle. Overthinking things that happened months or years ago. Things that may not seem like a big deal to someone without anxiety seem like the end of the world to someone with anxiety. Having to overthink what to say to the person at the cash register. Thinking people are talking about you or looking at you when I think this, I take off my glasses just to ease it. Memorizing the store and the items you use so you can quickly get your checklist taken care of. It can be incredibly hard when the store is rearranged. I also try to be at appointments 15 minutes early and have to plan meeting a friend a week in advance at least. My anxiety always reaches the roof and beyond when a plan has been made to either do something or be somewhere at a specific time or location, and then it changes. Seeing if I have enough time to get there or whatever. Anxiety is hard and everyone has a different story of anxiety, but living with it is like going to war with yourself every day. Every part of me is tense and I scream inside my head with a big fake smile on my face. I can come up with a million different reasons something can go wrong and worry about it for hours. The reality is, we all live busy lives and some people take a little longer to respond. I usually need a few days rest after a panic attack. Then, in moments of clarity: There are nights I keep going until my eyes burn and I still stare at the ceiling for hours. When my anxiety flares up, my appetite goes away even if I was hungry a few minutes ago. What would you add?

Chapter 7 : Understanding Kids with Anxiety | Empowering Parents

Typical anxiety can sometimes reach a tipping point where it becomes too much and turns into an anxiety problem. Frequent and intense feelings of anxiety that can sometimes be a diagnosable medical condition, like generalized anxiety disorder, social anxiety disorder, and separation anxiety disorder.

In the first article, James will discuss how to understand and identify anxiety in children. For many children, riding the school bus, taking a test, or even going to school can trigger some anxiety. Social activities, such as birthday parties, sleepovers, dances and dating, can also make kids feel anxious. Personally, I think severe anxiety is one of the worst feelings in the world. It can be disabling. Fortunately, most adults learn to manage this anxiety in a way that allows them to function effectively and live successfully in society. Survival is probably our strongest primary instinct. And our instincts produce energy in the form of feelings. Survival is the engine, anxiety is the gas—it gives you the energy to actually do the fighting or running. And many times, it ends up feeding on itself and building. You might also see withdrawal: Make no bones about it: All of them are behind schedule and are feeling anxious, which is leading to impatience and frustration. But they deal with it in very different ways. It seems awfully crowded. Our goal for children is for them to learn the skills to manage their anxiety in a way that is effective. We measure effectiveness here by how much they let the anxiety disturb them and how much it affects their functioning. All have anxiety about riding the bus for different reasons. Zachary, the first child in our scenario, resists getting out of bed and getting dressed. He teased me yesterday and my friends all laughed at me. Yesterday you were saying how much you liked your teachers and friends. Her parents find her in her room lying on her bed. Her parents are frustrated and angry with Olivia and embarrassed by her behavior. They yell at her for behaving so poorly and punish her with no TV for a week. Her dad grudgingly takes her to school in the car, lecturing her all the way, while Olivia gives him the silent treatment. In either case, the source of the fear is the same: And that problem is that they have to ride the school bus to school and find a way to keep themselves safe from the bully. Believe me, it will manifest itself in a million different ways. Now imagine a third child named Will. They call me names and tease me. His siblings have learned to stay away from him. Finally, he eats the Pop Tarts and goes back to his room. So Will finally gets on the bus and sits in the same back seat as usual. He becomes the bully. He hides his fear by attacking others, and strikes out at other people to hide that fear. His reaction is part of the fight or flight mechanism we discussed earlier. The first two kids are using flight, by avoiding the source of their anxiety. This boy, Will, is using fight as his strategy. In the end the old saying seems to be true: Bullies, after all, are really just afraid. In all of these cases, the parents were left to wonder why their children were upset, anxious or afraid. Although kids may not know consciously what those looks mean, they learn from a very early age how to associate looks and words with feelings. This kind of learning is completely appropriate, normal and healthy. Believe me, the numbers are astounding. One of the emotions they try to hide is anxiety, and this explains why children will often keep it from their parents. But keep in mind that parents very often need much more training on how to help their child manage their anxiety than is available in these articles. Show Comments 4 You must log in to leave a comment. Create one for free! Responses to questions posted on EmpoweringParents. We cannot diagnose disorders or offer recommendations on which treatment plan is best for your family. Please seek the support of local resources as needed. If you need immediate assistance, or if you and your family are in crisis, please contact a qualified mental health provider in your area, or contact your statewide crisis hotline. We value your opinions and encourage you to add your comments to this discussion. We ask that you refrain from discussing topics of a political or religious nature. Having had severe behavioral problems himself as a child, he was inspired to focus on behavioral management professionally. Together with his wife, Janet Lehman, he developed an approach to managing children and teens that challenges them to solve their own problems without hiding behind disrespectful, obnoxious or abusive behavior. Empowering Parents now brings this insightful and impactful program directly to homes around the globe.

Chapter 8 : Topical Sermons - The Problem Of Anxiety

The starting point of treatment for social anxiety is to understand that while there are many manifestations of social anxiety there are 2 basic types of people with the problem. The 2 types are Individuals with "initiative, and individuals without "initiative".

For friends and family of those living with anxiety, this can represent a serious challenge. Like a disease, anxiety is something that needs special treatment. Living With Anxiety You need to realize that anxiety disorders are not like normal anxiety. Self-Sustaining Nature of Anxiety The first thing to understand is that anxiety itself is self-sustaining. It causes problems with your mind and body that make it more likely to experience further anxiety. For example, anxiety leads to more negative thinking, which then precipitates Anxiety can have physical manifestations, such as hyperventilation, sweating, nausea, etc. Anxiety also creates hypersensitivity, which is a mental response that makes people more prone to noticing those physical symptoms and letting it affect them. If anxiety were just nervousness and sweating, anxiety disorders may not be considered as serious. But anxiety is so much more than that, and the longer you live with anxiety the more prevalent these symptoms can get. Fearing Anxiety Anxiety can also cause people to fear the anxiety itself, which unfortunately affects other areas of their life. So when someone starts to fear their own anxiety and its symptoms, they may also develop new anxieties, or find more situations to provoke anxiety. Did you know that one of the symptoms of a panic attack is a feeling of imminent death or doom, combined with intense physical symptoms that are nearly identical to heart attacks? Note that every person is different and has different needs. There are some people who want to talk about their anxieties, and there are others who may have never mentioned it. However, this can be a helpful guide. DO let this person know that they can talk to you about it openly, without any fear of judgment. DO spend time with them as much as possible. You being around them is a bigger help than you realize. In fact, they may not realize it either. But time spent with others makes it harder to think about their anxieties, and that makes a difference. This is a tricky one - while you want to be there to talk about it, there are some anxieties, like panic attacks, that can be triggered by thinking about it. In other words, if you ask someone "how are your panic attacks? Let them bring it up with you. DO tell them to call you anytime, anywhere. Talking on the phone and knowing someone is there to pick up can actually be incredibly comforting to someone that is trying to control their anxiety. Anxiety can make people feel lost and alone. Knowing that someone is a phone call away reduces that feeling. Make sure that you are working on your own stress and anxiety, because the way you feel can have an effect on the way others feel, especially as you spend more and more time again. Anxiety can make people irritable. Ideally, try your best to be forgiving. Unfortunately, controlling anxiety does take time. Those that try to cure it too fast often find they have setbacks that are sometimes worse than the initial anxiety. Try to be outdoors. Exercise itself is a remedy for anxiety, and creating new memories can help people cope with some of the stresses of life. So try your best to get out and do things together. It can be hard, but you have to remember that those with anxiety often struggle to get out of their own head. They take over their mind and their memories. If you push them too hard to get more attention or get them out of their bubble, they may withdraw further. DO be proud of them when they improve. Thus making sure to highlight your positive emotions and your pride - and actually being happy when you see recovery while avoiding feeling frustrated during setbacks - can be very valuable. Anxiety is a treatable condition. You are close for a reason. Be positive, have fun, and be the person that your friends or family member loves. Dealing with anxiety is an uphill battle, and it does take a toll on others around them. Anxiety can strain relationships, and may even cause significant stress on a loved one. Some people find that they actually start developing anxieties of their own. But a supportive friend is an extremely effective way to treat your own anxiety.

Chapter 9 : Understanding the Link Between Anxiety and Problem Behavior in Young Kids and How You Can

The first thing to understand is that anxiety itself is self-sustaining. It causes problems with your mind and body that make it more likely to experience further anxiety. For example, anxiety leads to more negative thinking, which then precipitates Anxiety can have physical manifestations, such as hyperventilation, sweating, nausea, etc.

If a person usually becomes irrationally anxious in social situations, but seems better when they are alone, then "social anxiety" may be the problem. Millions of people all over the world suffer from this devastating and traumatic condition every day, either from a specific social anxiety or from a more generalized social anxiety. In the United States, epidemiological studies have recently pegged social anxiety disorder as the third largest psychological disorder in the country, after depression and alcoholism. Specific and Generalized Social Anxieties A specific social anxiety would be the fear of speaking in front of groups only, whereas people with generalized social anxiety are anxious, nervous, and uncomfortable in almost all social situations. It is much more common for people with social anxiety to have a generalized type of this disorder. When anticipatory anxiety, worry, indecision, depression, embarrassment, feelings of inferiority, and self-blame are involved across most life situations, a generalized form of social anxiety is at work. Symptoms of Social Anxiety Disorder People with social anxiety disorder usually experience significant emotional distress in the following situations: Constant, intense anxiety that does not go away is the most common feature. People with social anxiety disorder know that their anxiety is irrational and does not make rational sense. Thus, for people with social anxiety, thoughts and feelings of anxiety persist and show no signs of going away -- despite the fact that socially-anxious people "face their fears" every day of their lives. Effective Therapy for Social Anxiety Disorder The good news is that cognitive-behavioral therapy for social anxiety has been markedly successful. Research and clinical evidence alike indicate that cognitive-behavioral therapy, which should be comprehensive in nature, produces permanent changes in the lives of people. Social anxiety disorder can be overcome, although it takes both consistency and persistence. But, barring cognitive problems. At The Social Anxiety Institute, we call cognitive-behavioral therapy for social anxiety disorder "comprehensive" cognitive-behavioral therapy, to differentiate it from the general idea that cognitive concepts are simplistic and can be addressed by using only a few strategies. The brain is continually learning, and irrational thoughts and beliefs can change as a result of this cognitive process. A good therapy program will supply the necessary and specific strategies as well as indicate to people how and why they need to practice, work on, and begin to accept rational thoughts, beliefs, emotions, and perceptions. In seeking support for this problem, search for a specialist -- someone who a understands this problem well and b knows from experience how to treat it. Become an informed client and ask questions. For example, does the therapist understand that you feel very self-conscious and that others are watching and forming a negative evaluation about you? It is true that we who have lived through social anxiety do realize our mind is many times irrational and we over-exaggerate, but it still FEELS like others are watching and judging us. Our self-consciousness is a feeling and it is very real. Under these circumstances, it is very doubtful they will be able to help you. Also, remember that the professional should always welcome your questions. If someone seems unfriendly or too clinical, they should not be your choice of a therapist. Those of us who have or have had social anxiety need support, encouragement, and a relatively stress-free environment while we are in therapy, so that our brain can absorb all the changes that are occurring without being damaged by external factors. If our environment is relatively peaceful when undergoing treatment for social anxiety, then it is easier to learn new habits that will permanently change our thoughts, beliefs, feelings, and our lives. In this case, seek another therapist. Getting over social anxiety disorder is not an easy task, nor is it a difficult one. Many thousands of people have already done it. Life is just one gut-wrenching anxiety problem after another. But this can be stopped, quenched, and killed in a relatively short period of time -- by finding a cognitive-behavioral therapist who understands and specializes in the treatment of social anxiety. The most important elements in overcoming social anxiety 1. An understanding and awareness of the problem, 2. A commitment to carry through with cognitive-behavioral therapy even when it is repetitious and seems difficult, 3. Practice, practice, practice to

get that information i. Participation in a social anxiety therapy group in which you can slowly and gradually work on problems that cause you anxiety in the real world. That is, the person who feels anxious while reading in public uses specific strategies to meet his goal, whereas the person who wants to learn how to make introductions and engage in small talk during social activities slowly works toward her goals. We use role-plays, acting, the tape recorder and video camera, question and answer periods, mock job interviews, and doing foolish things deliberately as part of our behavioral therapy group for people with social anxiety. A ladder or "hierarchy" should be used as a flexible guide in planning. We want to practice, meet our goals, move up our expectations, meet our goals, move up our expectations, until our goal is finally met. Groups Social anxiety behavioral therapy groups should not pressure, push, or cajole people to do things. No negative tactic should be employed because the individual must choose to participate at her own pace. No one should be made to do anything. This has never happened. People in the group understand why they are there and, despite an amount of anxiety that is naturally present, they voluntarily choose to work on their specific anxieties. This is much more practical and real-life than being forced to do something. Therapy groups for social anxiety should always be encouraging, positive, and supportive. If the right atmosphere is set, people can make and continue to make progress up their "hierarchy" of social anxieties. It is impossible to stop a motivated person who refuses to give up. The role of the therapist is to know specifically what to do and how quickly to do it. This sounds easy, but it is not. You must be practicing the right material and you must proceed at the correct pace for your own anxieties. You are more in control of this process than you think. Today, cognitive-behavioral therapy is used to treat both forms of social anxiety. Instead, we focus on present-day problems and symptoms and use many small techniques and methods to eradicate anxiety thinking, feelings, beliefs, and belief systems.