



ANXIETY DISORDERS

Generalized Anxiety Disorder
Panic Disorder
Phobias

ANXIETY IS A NORMAL PART OF LIFE

Anxiety, worry, and stress are all a part of most people's life today. But **simply experiencing anxiety or stress in and of itself does not mean you need to get professional help or you have an anxiety disorder.**

In fact, anxiety is a necessary warning signal of a dangerous or difficult situation. Without anxiety, we would have no way of anticipating difficulties ahead and preparing for them.



WHEN DOES ANXIETY BECOME A DISORDER?

Anxiety becomes a disorder *when the symptoms become chronic and interfere with our daily lives and our ability to function.* These feelings of anxiety are **out of proportion to the actual danger** and **can last a long time.**

Symptoms may **start during childhood or the teen years** and continue into adulthood. People suffering from chronic anxiety often report the following symptoms:



SYMPTOMS OF ANXIETY DISORDERS

Muscle tension

Physical weakness

Poor memory

Sweaty hands

Fear or confusion

Inability to relax

Constant worry

Shortness of breath

Palpitations

Upset stomach

Poor concentration

These symptoms are severe and upsetting enough to make individuals feel extremely uncomfortable, out of control and helpless.



WHAT ARE THE DIFFERENT TYPES OF ANXIETY DISORDERS?

Anxiety disorders fall into a set of separate diagnoses, ***depending upon the symptoms and severity*** of the anxiety the person experiences. Some of the anxiety disorders we will be discussing include:

Generalized Anxiety Disorder (GAD)

Panic Disorder/Panic Attacks

Agoraphobia

Social Anxiety Disorder (Social Phobias)

Specific/Simple Phobias

Separation Anxiety Disorder

**Anxiety
Disorders**



GENERALIZED ANXIETY DISORDER (GAD)

Generalized anxiety disorder (GAD) is more than the normal anxiety people experience day to day. It's ***chronic and exaggerated worry and tension, even though nothing seems to provoke it.***

Having this disorder means **always anticipating disaster, often worrying excessively about health, money, family, or work.** Sometimes, though, the source of the worry is hard to pinpoint.

Simply the thought of getting through the day provokes anxiety.



WHAT'S IT FEEL LIKE TO HAVE GAD?

People with GAD can't seem to shake their concerns, even though they usually realize that their anxiety is more intense than the situation warrants — that it's *irrational*.

People with GAD also seem *unable to relax*. They often have trouble falling or staying asleep.



Their worries are accompanied by physical symptoms, especially trembling, twitching, muscle tension, headaches, irritability, sweating, or hot flashes. They may feel lightheaded or out of breath. They may feel nauseated or have to go to the bathroom frequently. Or they might feel as though they have a lump in the throat.

Many individuals with GAD *startle more easily* than other people. They tend to feel tired, have trouble concentrating, and sometimes suffer depression, too.



HOW DOES IT AFFECT DAILY LIFE?

Usually the impairment associated with GAD is *mild* and people with the disorder *don't feel too restricted* in social settings or on the job.

Unlike many other anxiety disorders, people with GAD don't characteristically avoid certain situations as a result of their disorder. However, if severe, GAD can be very debilitating, making it difficult to carry out even the most ordinary daily activities.



WHEN DOES IT START?

GAD comes on gradually and most often hits people in childhood or adolescence, but can begin in adulthood, too.

It's diagnosed when someone spends at least 6 months worried excessively about a number of everyday problems.



WHAT ARE THE CRITERIA TO BE DIAGNOSED?

Excessive *anxiety and worry*, occurring more days than not for at least 6 months, about a number of events or activities (such as work or school performance).

The person finds it *difficult to control the worry*.



SPECIFIC SYMPTOMS OF GENERALIZED ANXIETY DISORDER

The anxiety and worry are associated **with 3 (or more) of the following 6 symptoms** (with at least some symptoms present for more days than not for the past 6 months; children do not need to meet as many criteria—only 1 is needed).

Restlessness or feeling keyed up or on edge

Being easily fatigued

Difficulty concentrating or mind going blank

Irritability

Muscle tension

Sleep disturbance (difficulty falling or staying asleep, or restless unsatisfying sleep)



SYMPTOMS IN CHILDREN AND TEENAGERS

In addition to the symptoms already mentioned, children and teenagers who have generalized anxiety disorder may have **excessive worries** about:

Performance at school or sporting events

Being on time (punctuality)

Earthquakes, nuclear war or other catastrophic events

A child or teen with generalized anxiety disorder may also:

Feel overly anxious to fit in

Be a perfectionist

Redo tasks because they aren't perfect the first time

Spend excessive time doing homework

Lack confidence

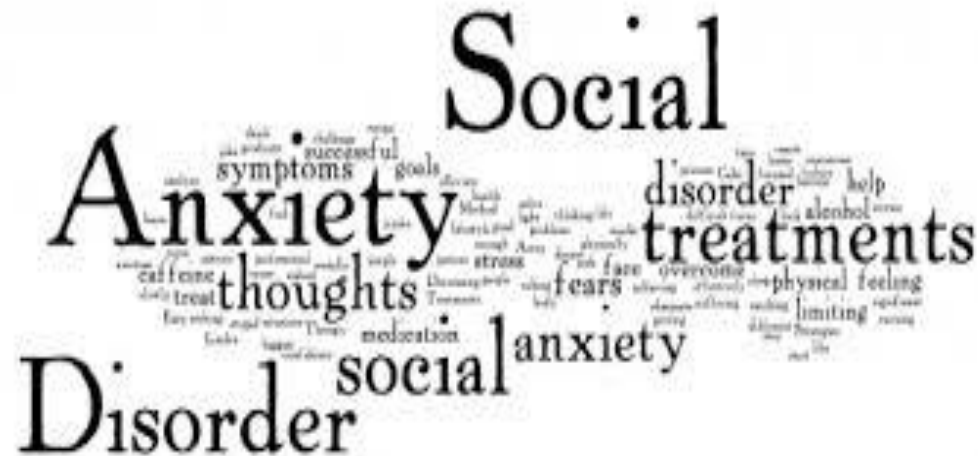
Strive for approval

Require a lot of reassurance about performance



WHAT CAUSES GAD?

As with many mental health conditions, the exact cause of generalized anxiety disorder *isn't fully understood*, but it may include *genetics* as well as *other risk factors*.



WHAT ARE THE RISK FACTORS FOR DEVELOPING GAD?

Personality. A person whose **temperament** is **timid** or **negative** or who **avoids anything dangerous** may be more prone to generalized anxiety disorder than others are.

Genetics. Generalized anxiety disorder may **run in families**.

Being female. **Women** are diagnosed with generalized anxiety disorder somewhat more often than men are.



OTHER MENTAL HEALTH ISSUES?

Generalized anxiety disorder often occurs along with other mental health problems, which can make diagnosis and treatment more challenging. **Some disorders that commonly occur with generalized anxiety disorder include:**

Phobias

Panic disorder

Depression

Substance abuse

PTSD



WHAT IS THE BEST TREATMENT FOR GAD?

The two main treatments for generalized anxiety disorder are *psychotherapy* and *medications*. You may benefit most from a combination of the two.

It may take some **trial and error** to discover which treatments work best for you.



COGNITIVE BEHAVIORAL THERAPY (CBT)



Also known as talk therapy or psychological counseling, **psychotherapy involves working with a therapist to reduce your anxiety symptoms.** It can be an effective treatment for generalized anxiety disorder.

Cognitive behavioral therapy is one of the most effective forms of psychotherapy for generalized anxiety disorder. Generally a short-term treatment, **CBT focuses on teaching you specific skills to gradually return to the activities you've avoided because of anxiety.** Through this process, your symptoms improve as you build on your initial success.

MEDICATION

Several types of medications are used to treat generalized anxiety disorder, including those below. As always you should talk with your doctor about *benefits* **Antidepressants**, *risks* and *possible side effects*.

Antidepressants. , including medications in the selective serotonin reuptake inhibitor (SSRI) and serotonin norepinephrine reuptake inhibitor (SNRI) classes, are the first-line medication treatments. Examples of antidepressants used to treat anxiety disorders include ***Lexapro, Cymbalta, Effexor XR and Paxil.***

Buspirone. An anti-anxiety medication called *buspirone* may be used on an *ongoing basis*. As with most antidepressants, it typically *takes up to several weeks* to become fully effective.



THE DANGER OF ANTI-ANXIETY MEDICATIONS

Benzodiazepines. In limited circumstances, your doctor may prescribe one of these *sedatives* for relief of anxiety symptoms.

Examples include *Xanax, Librium, Valium and Ativan.*

Benzodiazepines are generally used only for relieving acute anxiety on a *short-term basis*. Because they **can be habit-forming**, these medications **aren't a good choice if you've had problems with alcohol or drug abuse.**

Some *people become addicted to benzodiazepines/sedatives* and are **unable to function without them** so it is best not to use them unless your doctor feels it is absolutely necessary.



LIFESTYLE CHANGES THAT HELP

While most people with anxiety disorders need psychotherapy or medications to get anxiety under control, lifestyle changes also can make a difference. Here's what you can do:

Keep physically active. Develop a routine so that you're physically active most days of the week. Exercise is a powerful stress reducer. It may improve your mood and help you stay healthy. Start out slowly and gradually increase the amount and intensity of your activities.

Avoid alcohol and other sedatives. These substances can worsen anxiety.

Quit smoking and cut back or quit drinking coffee. Both nicotine and caffeine can worsen anxiety.

Use relaxation techniques. Visualization techniques, meditation and yoga are examples of relaxation techniques that can ease anxiety.

Make sleep a priority. Do what you can to make sure you're getting enough sleep to feel rested. If you aren't sleeping well, see your doctor.

Eat healthy. Healthy eating — such as focusing on vegetables, fruits, whole grains and fish — may be linked to reduced anxiety, but more research is needed.

COPING AND SUPPORT

To cope with generalized anxiety disorder, here's what you can do:

Stick to your treatment plan. Take medications as directed. Keep therapy appointments. Consistency can make a big difference, especially when it comes to taking your medication.

Join an anxiety support group. Here, you can find compassion, understanding and shared experiences. You may find support groups in your community or on the Internet.

Take action. Work with your mental health provider to figure out what's making you anxious and address it.

Let it go. Don't dwell on past concerns. Change what you can and let the rest take its course.

Break the cycle. When you feel anxious, take a brisk walk or delve into a hobby to refocus your mind away from your worries.

Socialize. Don't let worries isolate you from loved ones or enjoyable activities. Social interaction and caring relationships can lessen your worries.

PANIC ATTACKS

A panic attack is a sudden episode of intense fear that triggers severe physical reactions when there is no real danger or apparent cause.

Panic attacks can be very frightening. When panic attacks occur, you might think you're losing control, having a heart attack or even dying.



WHEN DOES IT BECOME PANIC DISORDER?

Many people have just one or two panic attacks in their lifetimes, and the problem goes away, perhaps when a stressful situation ends.

But if you've had recurrent, unexpected panic attacks and spent long periods in constant fear of another attack, you may have a condition called panic disorder.

**PANIC
ATTACK**

THEY FEEL WORSE THAN THEY ACTUALLY ARE

During a panic attack a person experiences feelings of intense, sudden terror or impending doom.

Although panic attacks themselves aren't life-threatening, they can be frightening and significantly affect your quality of life.

Fortunately, treatment can be very effective.



WHEN DO PANIC ATTACKS OCCUR?

Panic attacks typically begin *suddenly, without warning*. They can *strike at any time* — when you're driving a car, at the mall, sound asleep or in the middle of a math class. You may have occasional panic attacks or they may occur frequently.



Panic attacks have many variations, but symptoms usually reach their *peak within 10 minutes*.

Though they may not last that long, it usually leaves the person feeling *emotionally drained and frightened*.



SYMPTOMS OF A PANIC ATTACK

Sense of impending doom or danger

Fear of loss of control or death

Rapid, pounding heart rate

Sweating

Trembling or shaking

Shortness of breath or tightness in your throat

Feeling like you're "going crazy"

Dizziness, lightheadedness or faintness

Numbness or tingling sensation

Feeling of unreality or detachment

Chills

Hot flashes

Nausea

Abdominal cramping

Chest pain

Headache



FEAR OF HAVING ANOTHER ONE

One of the worst things about panic attacks is the intense fear that you'll have another one.

You may fear having a panic attack so much that you avoid situations where they may occur.



AGORAPHOBIA

Eventually some people stop going out in public at all because there is no way to know when or where one might happen next

This can lead to another anxiety disorder called *Agoraphobia* (discussed later in this powerpoint).



CAUSES OF PANIC DISORDER

It's not known what causes panic attacks or panic disorder, but these factors may play a role:

Genetics

Major stress

Temperament that is more sensitive to stress or prone to negative emotions

Certain changes in the way parts of your brain function

Panic attacks may *start off by coming on suddenly and without warning*, but over time, they're usually *triggered by certain situations*.

FIGHT-OR-FLIGHT

Some research suggests that your body's natural fight-or-flight response to danger is involved in panic attacks.

For example, if a grizzly bear came after you, your body would react instinctively. Your heart rate and breathing would speed up as your body prepared itself for a life-threatening situation.

Many of the same reactions occur in a panic attack. But it's not known why a panic attack occurs when there's no obvious danger present.



WHO IS AT GREATEST RISK OF HAVING A PANIC ATTACK?

Symptoms of panic disorder often start in the *late teens or early adulthood* and affect more women than men.

Factors that may increase the risk of developing panic attacks or panic disorder include:

Family history of panic attacks or panic disorder

Major life stress, such as the death or serious illness of a loved one



OTHER RISK FACTORS

A traumatic event, such as sexual assault or a serious accident

Major changes in your life, such as a divorce or the addition of a baby

Smoking or excessive caffeine intake

History of childhood physical or sexual abuse



WHAT HAPPENS IF LEFT UNTREATED?

Left untreated, panic attacks and panic disorder can affect almost every area of your life. You may be so afraid of having more panic attacks that you live in a constant state of fear, ruining your quality of life.

Complications that panic attacks may cause or be linked to include:

Development of *specific phobias*, such as fear of driving or leaving your home

Frequent medical care for health concerns and other medical conditions

Avoidance of social situations

Problems at work or school

Depression, anxiety disorder and other psychiatric disorders

Increased risk of suicide or suicidal thoughts

Alcohol or other substance misuse

AGORAPHOBIA

For some people, panic disorder may include **agoraphobia** — *avoiding places or situations that cause you anxiety because you fear not being able to escape or get help if you have a panic attack.*

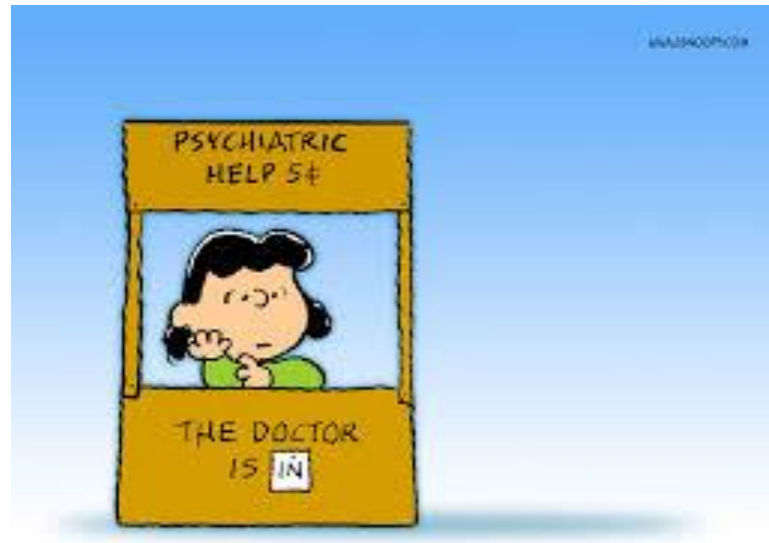
Or you may become reliant on others to be with you in order to leave your home.



WHAT IS THE TREATMENT FOR PANIC DISORDER?

Psychotherapy, also called talk therapy, is considered an effective first choice treatment for panic attacks and panic disorder.

Psychotherapy can help you understand panic attacks and panic disorder and learn how to cope with them.



Medications can also help reduce symptoms associated with panic attacks. *Similar medications to those used for GAD might be prescribed, including SSRIs like Prozac and Zoloft or benzodiazepines like Xanax or Klonopin.* Again, these types of sedatives can become *habit-forming* so they are not always a good choice.



COGNITIVE BEHAVIORAL THERAPY (CBT)

A form of psychotherapy called cognitive behavioral therapy can help you *learn through your own experience that panic symptoms are not dangerous.*

During therapy sessions, your therapist will help you *gradually re-create the symptoms of a panic attack in a safe, repetitive manner.*



Once the physical sensations of panic no longer feel threatening, the attacks begin to resolve. Successful treatment can also help you overcome fears of situations that you've been avoiding because of panic attacks.

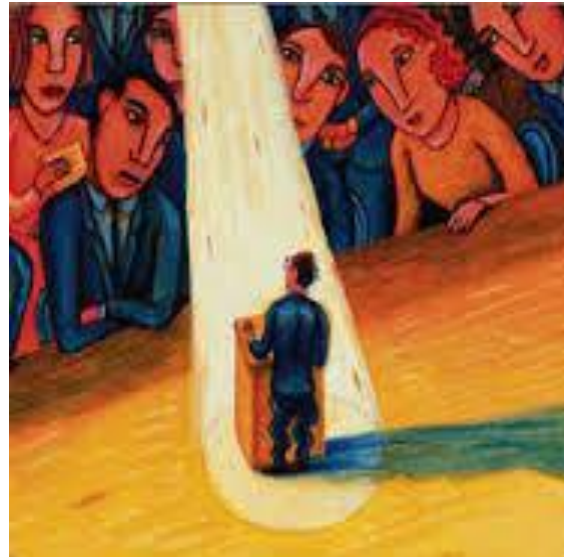
Seeing results from treatment can take time and effort. You may start to see panic attack symptoms reduce within several weeks, and often symptoms decrease significantly or go away within several months.



ISN'T IT NORMAL TO FEAR SPEAKING IN PUBLIC?

It's normal to feel nervous in some social situations. For example, asking someone out or giving a presentation may cause that feeling of butterflies in your stomach.

But in ***social anxiety disorder***, also called ***social phobia***, ***everyday interactions cause significant anxiety, fear, self-consciousness and embarrassment*** because you fear being scrutinized or judged by others.



WHAT IS SOCIAL ANXIETY DISORDER?

People with *social anxiety disorder* suffer from an intense fear of *becoming humiliated in social situations — specifically the fear of embarrassing oneself in front of other people.*

They worry that they will not measure up, or that they will mess up when talking, speaking to, or interacting with others.



SOCIAL PHOBIA



In these feared performance and social situations, individuals with social anxiety experience concerns about embarrassment and are **afraid that others will judge them to be anxious, weak, “crazy,” or stupid.**

They may **fear public speaking because of concern that others will notice their trembling hands or voice** or they may experience extreme anxiety when talking with others because of **fear that they will sound like they don't know what they are talking about.**

AVOIDANCE

A person with social anxiety disorder may **avoid eating, drinking, or writing in public** because of a fear of being embarrassed by having others see their hands shake.



SYMPTOMS OF SOCIAL ANXIETY DISORDER

Individuals with social phobia almost always experience symptoms of anxiety — such as *heart palpitations, dry mouth, tremors, sweating, gastrointestinal discomfort, diarrhea, muscle tension or trembling, a shaky voice, blushing, and even confusion.*

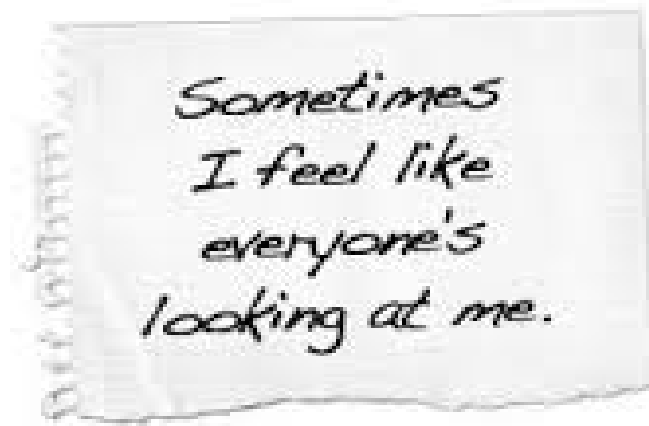
In severe cases, a person **may experience a full-blown panic attack.**



WORRY ABOUT BEING NOTICED

These symptoms can become a source of added concern where a person with social anxiety will **worry that the symptoms they're experiencing will result in unwanted and embarrassing attention.**

People with social phobia **either avoid social or performance situations, or endure them with intense anxiety or stress**



ANTICIPATORY ANXIETY

They can also suffer from ***anticipatory anxiety*** regarding the upcoming event or social situation.

This can set up a ***vicious cycle of anticipatory anxiety leading to poor performance*** (whether real or just perceived) in the situation, which **leads to even more anxiety for future situations**



REALIZE THE FEAR IS NOT REALISTIC

Most people who have social **anxiety** recognize that their fear is **excessive or unreasonable**.

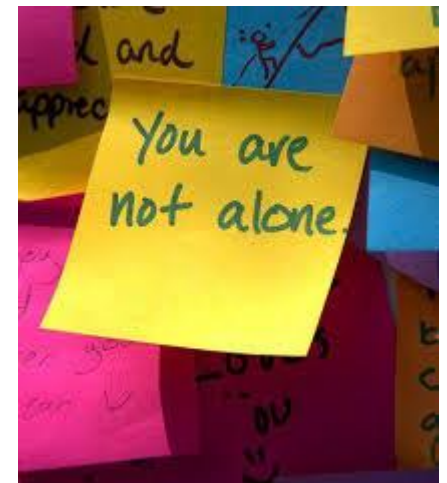


WHO DEVELOPS SOCIAL PHOBIA?

Between *5 and 13 percent* of people will experience social phobia during their lifetime.

Women outnumber men with symptoms of social phobia.

Negative experiences. Children who experience teasing, bullying, rejection, ridicule or humiliation may be more prone to social anxiety disorder. In addition, **other negative events in life, such as family conflict or sexual abuse, may be associated with social anxiety disorder.**



Temperament. Children who are **shy, timid, withdrawn or restrained** when facing new situations or people may be at greater risk.

New social or work demands. **Meeting new people, giving a speech in public or making an important work presentation** may trigger social anxiety disorder symptoms for the first time. These symptoms usually have their roots in adolescence, however.

Having a health condition that draws attention. **Facial disfigurement, stuttering, and other health conditions** can increase **feelings of self-consciousness** and may trigger social anxiety disorder in some people.



WHEN DOES SOCIAL ANXIETY DISORDER BEGIN?

Social phobia is most likely to develop in the *teenage years*, though it can start earlier or later.

Many people *suffer quietly for years*, looking for help only when their fears have become bad enough to lead to a major life crisis.



WHAT CAUSES SOCIAL ANXIETY DISORDER?

Like many other mental health conditions, social anxiety disorder likely arises from a complex interaction of **environment and genes**. Possible causes include:

Inherited traits. Anxiety disorders tend to *run in families*.

Brain structure. A structure in the brain called the **amygdala** may play a role in controlling the fear response. **People who have an overactive amygdala may have a heightened fear response, causing increased anxiety in social situations.**



Environment. Social anxiety disorder **may be a learned behavior.** That is, you may develop the condition **after witnessing the anxious behavior of others.** In addition, there may be an **association between social anxiety disorder and parents who are more controlling or protective of their children.**



WHAT IF IT GOES UNTREATED?

Left untreated, social anxiety disorder **may run your life**. Anxieties can **interfere with work, school, relationships or enjoyment of life**. Social anxiety disorder can cause:

Low self-esteem

Trouble being assertive

Negative self-talk

Hypersensitivity to criticism

Poor social skills

Isolation and difficult social relationships

Low academic and employment achievement

Substance abuse, such as drinking too much alcohol

Other anxiety disorders, Depression or even Suicide or suicide attempts



TREATMENT



Psychotherapy - Counseling improves symptoms in most people with social anxiety disorder. In therapy, ***you learn how to recognize and change negative thoughts about yourself and develop skills to help you gain confidence in social situations.***

Cognitive behavioral therapy is the most common type of counseling for anxiety. ***In exposure-based cognitive behavioral therapy, you gradually work up to facing the situations you fear most.*** This therapy can improve your coping skills ***and help you develop the confidence to deal with anxiety-inducing situations.***

CAN MEDICATION HELP?



Like other anxiety disorders, **antidepressants and/or anti-anxiety medications are often prescribed.**

In addition, **Beta** blockers might be used. They work by *blocking the stimulating effect of epinephrine (adrenaline)*. They may reduce heart rate, **blood pressure, pounding of the heart, and shaking voice and limbs.**

Because of that, they may *work best when used infrequently to control symptoms for a particular situation, such as giving a speech.* They're not recommended for general treatment of social anxiety disorder.

For some people, the **symptoms of social anxiety disorder may fade over time**, and medication can be discontinued. Others **may need to take medication for years to prevent a relapse**

WHAT IS SELECTIVE MUTISM?

Selective Mutism, **a rare anxiety disorder related to social phobia**, most often occurs in children.

It is **a consistent failure to speak in certain situations where speaking is expected, (such as school, or with playmates) despite being able to speak in other situations, such as at home with close family members.**

This can interfere with school, work and social functioning.



ISN'T THIS JUST BEING SHY?

In order for it to be diagnosed, selective mutism must last for *at least 1 month and is not limited to the first month of school* (during which many children may be shy and reluctant to speak).



WHAT IS *NOT* SELECTIVE MUTISM?

Selective mutism should not be diagnosed *if the individual's failure to speak is due solely to a lack of knowledge of, or comfort with, the spoken language required in the social situation.*

It is also not diagnosed if the disturbance is better accounted for by embarrassment related to having a Communication Disorder (like Stuttering) or if it occurs only during Autism Spectrum Disorder, Schizophrenia, or other Psychotic Disorders.



WHAT IS A SPECIFIC/SIMPLE PHOBIA?

Many people experience specific phobias, ***intense, irrational fears of certain things or situations***

Phobias of dogs, spiders, heights, escalators, tunnels, highway driving, water, flying, and injuries involving blood are a few of the more common ones.



CLAUSTROPHOBIA

extreme fear of **confined spaces** or **being closed in**



WHAT IS THE DIFFERENCE BETWEEN A FEAR AND A PHOBIA?

Fear is a normal reaction to a frightening situation. **Phobias aren't just extreme fear; they are irrational fear.** You may be able to ski the world's tallest mountains with ease but panic going above the 10th floor of an office building.

Adults with phobias realize their fears are irrational, but often facing, or **even thinking about facing**, the feared object or situation **brings on a panic attack or severe anxiety.**

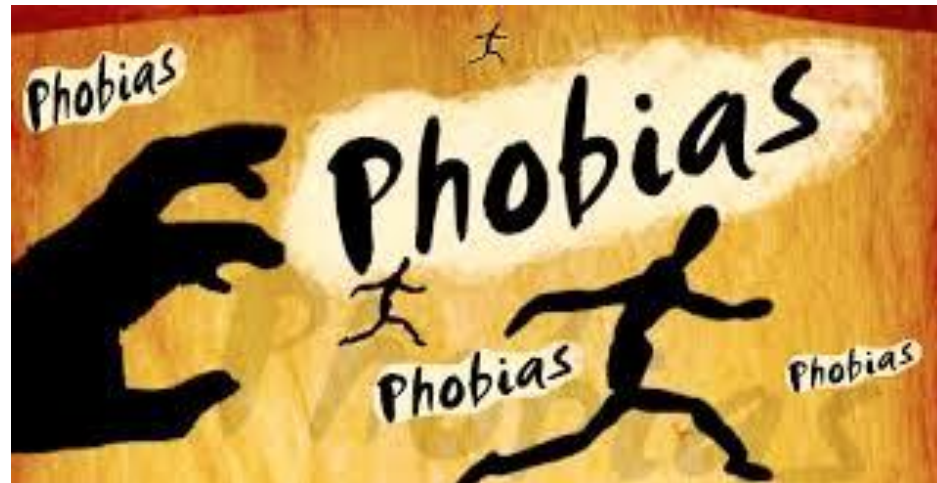


WHEN DO PHOBIAS BEGIN?

Specific phobias strike more than *1 in 10* people.

Phobias usually **first appear in adolescence or adulthood.**

They start suddenly and tend to be **more persistent than childhood phobias**; only about 20 percent of adult phobias vanish on their own. **When children have specific phobias**—for example, a fear of animals—those fears **usually disappear over time**, though they may continue into adulthood.

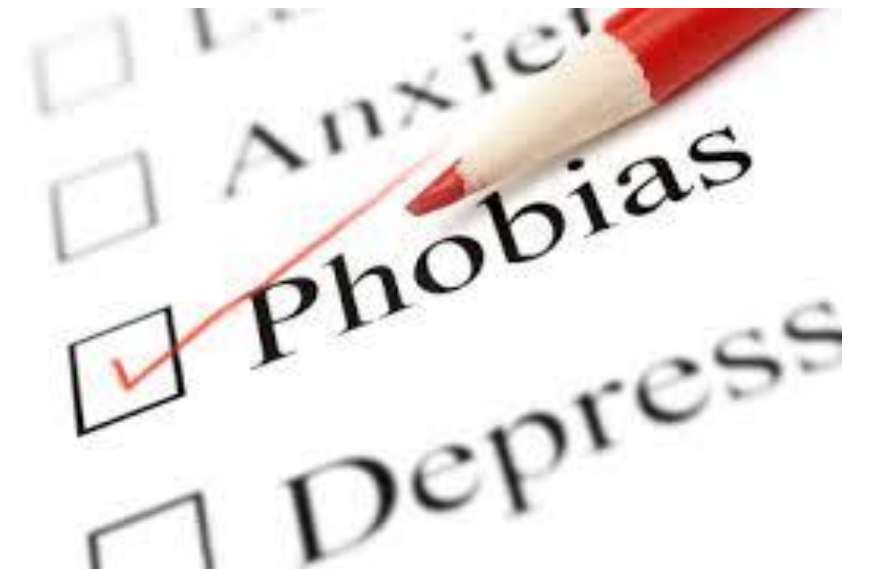


WHAT CAUSES PHOBIAS?

Much is still unknown about the actual cause of phobias.

However, there does appear to be a **link between your own phobias and the *phobias of your parents***.

This could be due to ***genetics*** or ***learned behavior***.



WHAT ARE THE SYMPTOMS OF SPECIFIC PHOBIA?

Symptoms of a phobia are *similar to those of other anxiety disorders*, but **may also include:**

A feeling of **uncontrollable panic, terror or dread** when you're exposed to the source of your fear

The feeling that you must **do everything possible to avoid** what you fear

The **inability to function normally** because of your anxiety



Physical reactions, including sweating, rapid heartbeat, difficulty breathing, and a feeling of panic

The knowledge that your fears are unreasonable or exaggerated but **feeling powerless** to control them

In some cases, **anxiety just thinking about what you fear**

In **children**, possibly **tantrums, clinging or crying**



WHAT FACTORS PUT YOU AT RISK OF DEVELOPING A PHOBIA?

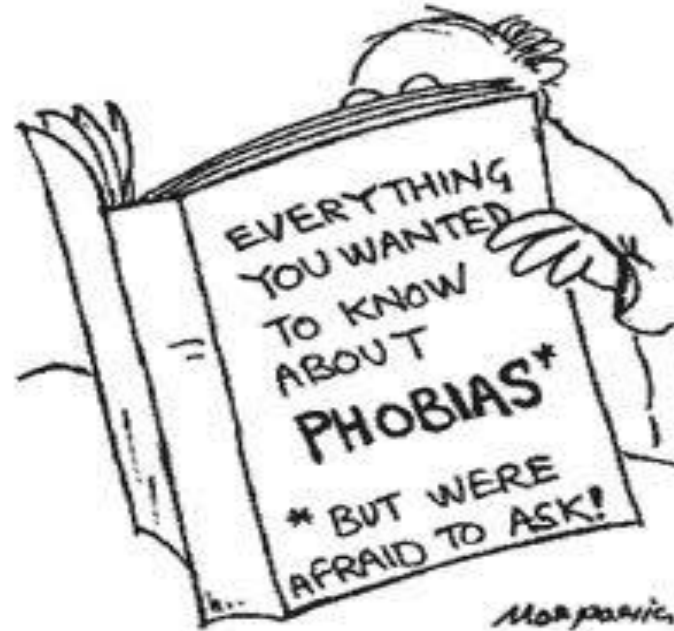
Your Gender. *Women are more likely than men to develop a specific phobia.*

Your relatives. If someone in your family has a specific phobia, such as a fear of spiders or snakes, you're more likely to develop it, too. This could be an **inherited tendency**, or **children may learn phobias by observing a family member's phobic reaction to an object or a situation.**



Your temperament. Your risk may increase if you're more sensitive, more inhibited or more negative than the norm.

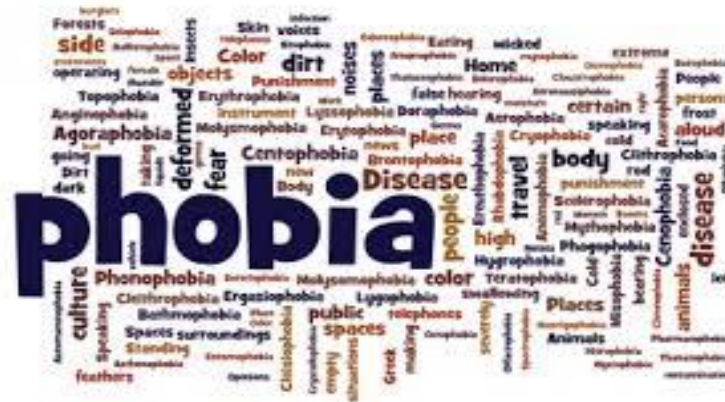
A traumatic event. Experiencing a traumatic event, such as being trapped in an elevator or attacked by an animal, may trigger the development of a phobia.



IF LEFT UNTREATED

Although phobias may seem silly to others, they can be devastating to the people who have them, causing problems that affect many aspects of life.

Social isolation. Avoiding places and things you fear can cause academic, professional and relationship problems. Children with these disorders are at risk of academic problems and loneliness, and they may not develop good social skills.



Feelings of Inferiority and low Self-esteem.

Depression. Many people with phobias have depression as well as other anxiety disorders.

Substance abuse. The stress of living with a severe phobia may lead to substance abuse.



WHAT TREATMENT EXISTS FOR SPECIFIC PHOBIAS?

Most adults don't get better on their own and may require some type of treatment.

The goal of phobia treatment is to *reduce your anxiety and fear* and to help you *better manage your reactions to the object or situation that causes them.*



MEDICATION

Like other anxiety disorders, those with specific phobia may respond to **antidepressants, beta blockers, or sedatives.**

Antidepressants (SSRIs) – acts on **serotonin** which affects mood

Beta blockers - work by **blocking the stimulating effects of adrenaline** on your body (increased heart rate, shaking voice, etc.)

Sedatives/benzodiazepines - help you relax **by reducing the amount of anxiety you feel** (need to be used w/ caution because **addictive**)



PSYCHOTHERAPY

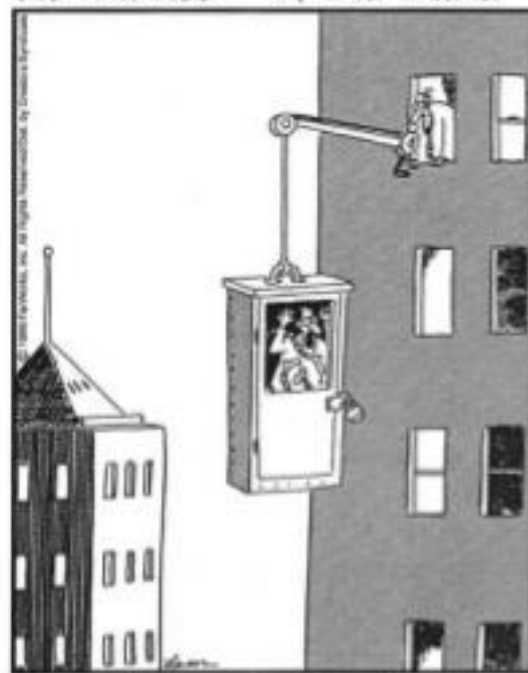
A type of therapy called **Desensitization or exposure therapy** focuses on changing your response to the object or situation that you fear and may be helpful for phobias. ***Gradual, repeated exposure to the cause of your phobia may help you learn to conquer your anxiety.***

For example, if you're afraid of **elevators**, your therapy may progress from simply **thinking about getting into an elevator, to looking at pictures of elevators, to going near an elevator, to stepping into an elevator.** Next, you may take a one-floor ride, then ride several floors and then ride in a crowded elevator.

Exposure Therapy

Expose patients to things they fear and avoid. Through repeated exposures, anxiety lessens because they habituate to the things feared.

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Professor Gallagher and his controversial technique of simultaneously confronting the fear of heights, snakes, and the dark.

STRANGER ANXIETY

Stranger anxiety is a fear that infants commonly display between 8-9 months old in which **they become upset when meeting strangers, particularly when the parent or attachment figure is not within immediate reach.**

Think of all the screaming babies on Santa's lap at the mall.

This is normal development and not a disorder.



SEPARATION ANXIETY DISORDER

However, when a child has gotten older and ***should have outgrown this stage, but still experiences excessive anxiety concerning separation from a parent or the home*** then they may have developed separation anxiety disorder.



Though it is much more common in children, it can also occur in adolescents and adults when they become anxious after being separated from the person to whom they are attached.

The fear, anxiety, or avoidance is persistent, lasting at least 4 weeks in children and adolescents and typically 6 months or more in adults.



WHAT ARE THE SYMPTOMS OF SEPARATION ANXIETY DISORDER?

Recurrent and **excessive distress about being away from home or parents**

Constant, excessive **worry about losing a parent** to an illness or a disaster

Constant **worry that something bad will happen**, such as being lost or kidnapped, causing separation from parents

Refusing to be away from home because of *fear of separation*

Not wanting to be alone and without a parent in the house

Repeated nightmares about separation

Frequent **complaints of headaches, stomachaches** or other symptoms when separation from a parent is anticipated

WHAT FEELINGS DOES A CHILD EXPERIENCE?

Depending on their age, individuals may have fears of animals, monsters, the dark, burglars, kidnappers, car accidents, plane travel, and other situations that are perceived as presenting danger to the integrity of the family or themselves.

Concerns about death and dying are common. School refusal may lead to academic difficulties and social avoidance. Children may complain that no one loves them or cares about them and that they wish they were dead. When extremely upset at the prospect of separation, they may show anger or occasionally hit out at someone who is forcing separation.

When alone, especially in the evening, young children may report unusual perceptual experiences (e.g., seeing people peering into their room, scary creatures reaching for them, feeling eyes staring at them).

WHAT CAUSES IT?

Sometimes, separation anxiety can be triggered by **changes in the child's life**, such as:

A new child care situation

A new sibling

A new home

Family stress or tension



In older children and adults it can be triggered by a traumatic experience or a situation in which someone close to that person is, or nearly is, killed or taken away from them.

TREATMENT/REMEDY



Because most people suffering from separation anxiety disorder are children, medication and even therapy are not usually appropriate.

However, parents can practice techniques to ease their child's separation anxiety such as practicing goodbyes, timing departures carefully, and giving the child something to look forward to upon their return.

Adolescents and adults dealing with separation anxiety disorder may benefit from therapy to deal with the root cause of the anxiety.



SOURCES

MayoClinic.org

PsychCentral.com

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