

COGNITIVE & BEHAVIORAL THERAPY

CBT is a brief treatment approach, which targets the link between thoughts, feelings and behavior as a springboard for intervention.

CBT methods rely on clear problem definition and goals to provide skills-based interventions to treat anxiety.

CBT is, thus, more solution-focused than traditional psychotherapy, and consequently, does require *motivation* and a *firm commitment* to the treatment process.

Through, a *psycho-educational model* of anxiety treatment and the process of *guided discovery* participants:

- Become familiar with their particular anxiety problem and the therapy model to be used.
- Identify, monitor, and ultimately *restructure*, automatic thoughts, self-narratives and core beliefs that trigger symptoms and maintain anxiety.
- Define specific goals for *desensitization* and *response prevention* exercises.
- Learn methods to target and short-circuit *safety behaviors*, *chains of worry* and so-called *cognitive neutralization*, which are repetitive and highly frustrating.
- Acquire relaxation and self-soothing techniques to reduce and prevent anxious arousal.

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Most insurances accepted.

ANXIETY AND WORRY

*A Cognitive and Behavioral
Therapy Approach*

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Anxiety can be viewed as the "fight or flight" reaction gone wrong. While fear is a reaction to perceived threat; anxiety is an exaggeration of threat triggered by uncertainty and unpredictability.

Modern society has witnessed an unparalleled spike in the intensity and velocity of daily life: our real-time, multitasked, sensationalized world has likely increased the anxiety and worry affecting children, teens and adults. Now, in the post-September 11th ripple of troubling daily news and economic impact our sense of what is predictable has been further eroded presenting unique challenges for those who both experience and treat anxiety.

Fortunately, in the past ten years, some excellent treatments have been introduced into the clinical management of anxiety: Specifically, Cognitive and Behavioral Therapy (CBT) and medications - offered either alone or in combination - have been shown to be particularly effective, giving relief and hope to those who suffer from these disorders.

The program of treatment presented in this brochure will focus on five types of anxiety disorders, which can occur any time from childhood through mature adulthood. A description of these disorders and a brief introduction to selected CBT principals and methods will follow.

GENERALIZED ANXIETY

"The worry wart". *Generalized Anxiety Disorder* or GAD is characterized by concerns, fears and worries about such matters as work, finances, school, health, family and children. These concerns pop into the mind frequently, and repetitively, triggering "chains of worry". Worry can paradoxically allow you to feel more in control and secure, becoming a "safety behavior" that perpetuates anxiety as the person becomes "trapped" in a cycle of being driven to worry in order to feel in control.

With generalized worry, there can also be multiple physical complaints; and often there is a feeling of being anxious, keyed-up or on edge. Symptoms can interfere with one's ability to focus and problem solve; and untreated, can wear the person down and lead to depression.

OBSESSIVE COMPULSIVE DISORDER

OCD is characterized by obsessions and compulsions. Obsessions are recurrent, intrusive thoughts, images or impulses, which are difficult to suppress; while compulsions are characterized by repetitive behaviors (hand washing, checking or ordering) or mental acts (counting or repeating words to oneself). Moreover, compulsions can be ritualized and serve to relieve the distress caused by the obsessions.

A hallmark of OCD, is fearing that negative and even horrible things will happen if one does not act on the compulsion. This belief that thoughts might predict events has been termed *thought-action fusion*. Without treatment sufferers can find themselves trapped in an exhausting web of compulsions and fears, leading to depression and in some cases a profoundly compromised quality of life.

PANIC

Panic sufferers experience recurring sudden rushes of intense fear. These episodes are characterized by a cluster of acute physical and cognitive symptoms, which include dizziness, trembling, pounding heart, sweating, sensation of shortness of breath as well as fears of "going crazy" or dying. People with panic, worry about the next "attack" and develop a "fear of fear" cycle.

Panic can include "Agoraphobia"- fear of places where escape might be difficult or help not available, if a panic attack were to occur. Agoraphobics, thus, fear and actively avoid crowds and specific public places such as, stadiums, trains, malls, and supermarkets.

PHOBIAS

Specific Phobias are unreasonable fears triggered by the presence or anticipation of a certain object or situation (animals, flying, heights, driving, injections, etc.) In all phobias, anticipatory fear can be intense, resulting in panic-type symptoms; and the extensive avoidance behaviors, which often develop, can interfere with the person's ability to function.

SOCIAL ANXIETY

Social Phobia is a fear of one or multiple social or performance situations, usually involving unfamiliar people. Individuals anticipate negative evaluation by others and fear that their behavior or performance will be deficient or incompetent. Social isolation is a common maladaptive coping response that often leads to depression and substance abuse.