

## Chapter 6

### PSYCHOEDUCATION

#### PART 2: UNDERSTANDING THE NATURE OF SOCIAL ANXIETY

*Timeline:* Typically up to one session

*Reading:* Chapter 2 in Client Workbook

*Photocopies needed from Client Workbook:*

Figure 2.8 Monitoring the Three Components of Social Anxiety

*Session Outline for Chapter 2 in Client Workbook*

- I. Review
  - A. Answer questions client may have from previous session
  - B. Reiterate the importance of commitment between sessions
    1. Did client complete reading assignment?
    2. Did client complete (attempt) assigned forms?
- II. Developing a common language to understand anxiety: The three components of anxiety
  - A. Physiological Component – feelings in the body when one is anxious
    1. Review Figure 2.1 in Client Workbook for list of physiological symptoms
    2. Symptoms may occur for reasons other than anxiety
      - a) Nausea may be the result of anxiety or a spicy meal
      - b) Symptoms may indicate a medical problem under some circumstances

(1) Chest pain can mean a heart problem, stomach distress can mean an ulcer

(2) If symptoms occur only when frightened or worried about something, then probably part of anxiety, not a physical problem or disease

3. Review panic attack symptoms in Figure 2.2 of Client Workbook

a) One third of the general population and 50% of people with social anxiety disorder have experienced a panic attack

b) Need four of the 13 symptoms that come on quickly and peak within 10-15 minutes

(1) Last two symptoms are cognitive, not physiological, symptoms

(2) Intensity of the symptoms can be frightening, and people often worry they are losing their mind or having a heart attack

c) If client has panic attacks and they occur only in the social situations, then this treatment should be helpful for the attacks

4. Review client's physical symptoms using Figure 2.3 in the Client Workbook.

a) Integrate client's experience in completing this form for homework during the week into this discussion

B. The cognitive component of anxiety

1. “Cognitive” is psychologists’ word for thoughts or thinking
2. Using the worksheet in Figure 2.5 in the Client Workbook, elicit and review client’s thoughts during the same situations used to elicit physiological symptoms
  - a) Integrate client’s experience in completing this form for homework during the week into this discussion
3. Socially anxious people usually just accept thoughts without questioning whether they are true or realistic

C. The behavioral component of anxiety

1. The behavioral component has two parts
  - a) What a person does in the anxiety-provoking situation, for example:
    - (1) Poor eye contact
    - (2) Shuffling feet
    - (3) Nervous gestures
  - b) Avoidance of anxiety-provoking situations
    - (1) Can be complete avoidance (not attending a party) or more subtle avoidance (attending the party but only talking with familiar people)
    - (2) Avoidance decreases anxiety in the short term
      - (a) Ask “Is there anything that you feel you should have done but you did not do because of your anxiety?”

(b) Decrease in anxiety when escaping an anxiety-provoking situation reinforces the avoidance

(c) Becomes more likely that the person will avoid similar situations in the future

(3) Avoidance is a poor long-term solution for coping with anxiety

(a) Guilt, frustration, and other negative feelings typically occur when one avoids an anxiety-provoking situation

(b) Avoidance can greatly interfere with functioning

(c) Avoidance keeps a socially anxious person from getting over his/her anxiety and finding out whether he/she would be able to cope if the situation had not been avoided

(d) Avoidance leads to missed opportunities, activities that the person never started, as well as those that were escaped

III. The interaction of the physiological, cognitive, and behavioral components

A. The three components interact; change in one causes increases or decreases in the others

B. Downward spiral of anxiety – illustrate interaction of components with a case vignette

1. Cathy is a clerical worker who has not received an expected raise despite good evaluations
2. Decides to speak with supervisor about a raise at the end of a meeting about another matter
3. Anticipatory anxiety – follow downward spiral in Figure 2.7 in Client Workbook
  - a) Cognitive: “Something must be wrong with my work, or they would give me a raise”
  - b) Physiological: Tightness in stomach, shoulder and back muscles are tense
  - c) Behavioral: Knocks stack of files off desk due to distraction of anxiety
  - d) Cognitive: “I’m so incompetent! No wonder they won’t give me a raise”
  - e) Physiological: Palpitations, ache in back of neck
  - f) Behavioral: Cannot sit still, keeps jumping out of seat to do something
  - g) Cognitive: “If I deserved a raise, I would have one”  
“Asking for a raise is too ‘pushy’”
4. Anxiety in the meeting with supervisor
  - a) Physiological: Shortness of breath, shaking hands

- b) Cognitive: “She’ll laugh when I ask for a raise because I’ll look ridiculous since I’m so nervous”
- c) Behavioral: Foot tapping
- d) Physiological: Pounding heart
- e) Cognitive: “I’m too nervous to talk with her. I won’t do it right and I’ll get fired.”
- f) Behavioral: Leaves meeting without asking for a raise
- g) Physiological: Heart rate decreases, muscles relax
- h) Cognitive: “I’m such a loser! I don’t deserve a raise anyway.”
- i) Avoidance leads to negative outcome
  - (1) Feel frustrated, angry, sad, depressed, etc.
  - (2) Still does not have the deserved raise

C. Go over client’s first attempt at Figure 2.8. Use this as an illustration of the downward spiral.

D. Goal of treatment:

1. First, learn to recognize downward spiral of anxiety
2. Second, gain tools to learn how to interrupt the downward

IV. Assign Homework:

A. Complete Monitoring the Three Components of Social Anxiety using a new situation (Figure 2.8 in Client Workbook)

1. If necessary, explain how to use form

2. If anxiety-provoking situation does not arise, imagine a recent experience with social anxiety and complete the form

B. Read Chapter 3 of Client Workbook (Tell client he/she should not complete the Worksheet for Reactions to Starting This Treatment Program For Social Anxiety until the end of the next session)