Anxiety 101
Chapter 1 - Introduction

Introduction

• Anxiety is considered to be a basic negative emotion, along with anger, sadness, disgust, and perhaps others

• Anxiety corresponds to a state of uncertainty

• Anxiety is also often future oriented

Introduction

• Anxiety is experienced through both mental and physical symptoms
  – “Fight-or-flight”

• Anxiety may be mild or extreme, transient or long-lasting, and helpful or damaging

• Anxiety is a response to external threats, sometimes realistic, sometimes exaggerated
Anxiety vs Fear

- **Anxiety** refers to a psychological state in which the person's sense of uneasy suspense and worry is triggered by ambiguous circumstances.

- **Fear** refers to an intense biologically adaptive physiological and behavioral response to the occurrence of a specific, identifiable stimulus (e.g., a dangerous animal).

Anxiety vs Fear

- Share similar elements
  - Cognitive appraisals of a threat or danger in the surroundings
  - Have adaptive value for the organism
  - Anxiety often follows fear
  - Repeated experiences of anxiety can generate fear reactions

Trait vs State Anxiety

- **Trait anxiety** refers to being anxiety-prone, that is, a stable personality characteristic.

- **State anxiety** refers to the immediate feelings of being anxious, such as nervousness and bodily tension.
Trait vs State Anxiety

- People high in trait anxiety do not always experience state anxiety, conversely low trait-anxious individuals may feel highly state anxious when confronted by a severe threat.

- State anxiety often has a more direct influence on thinking and behavior than does trait anxiety.

![Diagram](image)

**FIGURE 1.1** Transactional trait-state conceptions of anxiety.

Facets of State Anxiety

- Anxiety may be experienced in a variety of ways:
  - Disturbances of thinking (cognition)
  - Negative emotion (affect)
  - Bodily (somatic) symptoms
  - Behavioral reactions
Normal vs Clinical Anxiety

• Anxiety is a normal part of life, and it is an emotion that is familiar to all of us

• Anxiety which is so strong or disruptive that it interferes with normal living

Anxiety Disorders

• Class of mental disorders characterized by disturbances in level, focus, or consistency of anxiety response to stimuli

• Divided into numerous specific disorders, with several proposed changes from DSM-IV to DSM-V

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<thead>
<tr>
<th>DSM-IV</th>
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<tbody>
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<td>Specific phobia</td>
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<td>Social phobia</td>
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<td>Panic disorder w/ agoraphobia</td>
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<td>Panic disorder w/o agoraphobia</td>
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<td>Generalized anxiety disorder</td>
<td>Generalized worry disorder</td>
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<tr>
<td>Obsessive-compulsive disorder</td>
<td>Obsessive-compulsive disorder</td>
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<td>Posttraumatic stress disorder</td>
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General vs Contextualized Anxiety

- Current personality theory contrasting emotional stability with negative emotionality (aka “neuroticism”)

- Some people tend to show the full range of negative emotions, whatever situation they are in

- Some people may be vulnerable to high anxiety only in specific contexts or settings

But What is it Good For?

1. Orients the individual toward anticipating dangers
2. Motivates the person to act in order to avoid events that might cause bodily harm or psychological distress
3. Prepares the body and mind for action

But What is it Good For?

- Overall, anxiety evolved to promote evolutionary fitness

- A modicum of anxiety is functional and adaptive

- A total lack of anxiety or fear might bring a person to walk straight into a dangerous or life-threatening situation
The Anxiety Paradox

• A person unwittingly brings upon himself or herself what he or she fears or detests the most (failure, inhibited behavior, etc.)

Facets of Anxiety
Cognitive Facet

- The cognitive components of anxiety relate to how information is processed in stressful situations

- Anxiety is accompanied by changes in both
  - Cognitive processes themselves (e.g., heightened attention to threat)
  - Contents of cognition (i.e., the particular threats about which the person is thinking)

Worry

- Currently viewed as the most powerful cognitive component of anxiety

- Refers to distressing concerns about impending or anticipated stressful events, when people feel “out of their depth.”

Possible Benefits of Worry

- Problem-solving function

- Motivational function

- Mastery (control) function
Costs of Worry

• Worry tends to generate negative affect for an extended duration of time in anticipation of the stressful encounter

• Worry may become reinforced

• The extra “cognitive load” of worry frequently serves to reduce task performance and efficiency

Affective/Somatic Facet

• Consists of both objective symptoms of physiological arousal, as well as more subjective perceptions of bodily tension and emotions

• Physiological responses to anxiety are mainly sympathetic, with some parasympathetic manifestations

• “Fight-flight” response increases the vigor of the muscular responses required for escape from danger

Behavioral Facet

• Anxiety may not be rigidly related to any specific behavior

• Anxiety is a product of a separate system, the behavioral inhibition system (BIS), whose operations are more subtle

• The BIS is activated by conflict
Four Indices

1. Motor behaviors: nonverbal indices of tension
2. Facial behaviors: lip licking, swallowing, throat clearing, sighs, and grimaces
3. Verbal anxiety: speech blocks, “ah . . .” sounds during speech, and avoidance comments
4. Social anxiety: measured by the single index of averting one’s gaze while speaking

Anxiety in Modern Society

- Test Anxiety
- Math Anxiety
- Computer Anxiety
- Sports Anxiety
- Social Anxiety
- Terror-Related Anxiety and Trauma

Social Anxiety

- Feelings of tension, apprehension, self consciousness, emotional distress, and increased autonomic arousal triggered in anticipated or actual social situations
- Particularly likely if a person perceives being exposed to negative evaluation by others
Terror/Trauma Anxiety

• A major arena for the study of severe anxiety is research on anxiety and stress responses to traumatic events

• A minority of individuals may continue to experience posttraumatic anxiety for years after the event

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<th>PERCENTAGE OF PEOPLE WHO DEVELOP PTSD</th>
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<tbody>
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<td>Natural disaster</td>
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<td>Bombing</td>
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<td>Mass shooting</td>
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<td>Violent assault</td>
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<td>Vehicle accident</td>
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<td>Assault, severe burns</td>
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