Stress and Anxiety

On a Focus on the Family broadcast, author and psychologist Dr. Archibald (Arch) Hart spoke about common symptoms and treatments for anxiety-related disorders. The following information is excerpted with permission from The Anxiety Cure (©1999 by Dr. Archibald Hart/Word Publishing, Nashville, Tennessee).

Excerpt from Chapter 1: “The Anxiety Revolution”

Samantha is a vice president for a large bank group. I must confess some ignorance about the complexities of banking, but as best I can decipher, Samantha “sells” money. Surprised? I sure was. I always thought you bought things with money. Apparently, she shifts money around so as to get the best return on it. Her work entails quite a bit of travel and takes Samantha away from home regularly. She wrote the following entry in her diary a month before she consulted me:

A strange thing happened to me on a recent plane trip from San Francisco to Los Angeles. It had been a long, hectic week, and I couldn’t wait to get home to my family. I was restless and irritable at the slowness of everything. Finally the plane took off. We had no sooner left the ground when I started to sweat. My heart sped up and felt that it was going to pop out of my mouth. Then my head felt dizzy and I couldn’t get enough air. It was as if someone had shut off the air supply in the plane. I became frightened. What if the plane has no air supply? I thought. I looked around to see if others were struggling to breathe too. No such luck. It was me. I didn’t know whether to be relieved or scared.

Then the pilot announced we were on our way to Los Angeles and gave the usual piffle about how high we were going to fly, etc. Now I couldn’t swallow, let alone breathe. A tight band around my chest seemed to be getting tighter. What is going on here? I thought. My brain was frozen, and my body felt like it had floated off and now belonged to somebody else. I had never, ever felt this weird before. Was I going crazy? Since I couldn’t go anywhere, not even leave my seat because of the stupid seatbelt warning, I closed my eyes and tried to relax. But my breathing became even more difficult as I relaxed.

Then, just when I thought it couldn’t get any worse, I felt a wave of terror sweep over me. Something terrible is going to happen to me, I thought. I had to muster up all of my courage not to jump up and try to leave the plane. I took a deep breath, shuddered, and discovered that if I slowed my breathing I felt a little better. Strange. Here I was, feeling that I wasn’t getting enough air, yet I felt better if I slowed down my breathing. Later, of course, I discovered this was a classic sign of panic attack, but at that moment I had no idea what was happening to me.
Because this all happened on an airplane, I intuitively knew that if I didn’t get to the bottom of my problem and bring it under control, it could develop into a full-blown fear of flying. This could spell disaster for my job. I finally made it home but felt so fearful that I was quite incoherent and nonfunctional for several days. I stayed home and tried to rest. My husband kept pushing me for an explanation. Finally I told him about the whole episode, and it was then that he insisted I get some help.

The Perils of Pursuing Excellence
Samantha is not alone in such an experience of panic. Approximately 10 percent of the population, women more than men, have had such a panic attack. Many have had repeated attacks. But perhaps the most alarming aspect of panic attacks is that they mostly strike the strong. Yes, you read that correctly. Panic anxiety strikes those who seem to be the strongest among us.

The common stereotype is that only “weak” or anxiety-riddled people succumb to anxiety, particularly panic anxiety. This is just not true. Because this notion is so widely believed, many who acquire panic anxiety disorder are totally taken by surprise. They say things like:

“Others, yes, but not me.”
“I have always been the one who leads, the one who gets things done.”
“In high school and college I was the ‘star.’ Everyone looked up to me.”
“This couldn’t possibly be happening to me.”

But anxiety is not a disorder that afflicts the weak, the fragile, and the delicate. Often there is not the slightest hint of previous anxiety. This is the disorder of presidents, chief executive officers, vice presidents, ladder-climbers, powerhouses, dynamos, live wires, and go-getters. Those in leadership positions are more likely to be candidates for panic anxiety. Reason? Anxiety is a disease of stress. High-pressure jobs take their toll more than low-key jobs. People who are caught up in the pursuit of excellence are particularly vulnerable because they can’t see the danger signs early enough.

To put it in a nutshell, if the combination of your personality and work makes you an adrenaline junkie, you are at risk for developing panic anxiety disorder. Anxiety is clearly the consequence of too much stress acting on your highly vulnerable brain chemistry. And if you have inherited a weakness in your brain’s chemistry, you will have a much lower threshold for tolerating anxiety than others.

Can We Escape Being Caught Up in a High-Stress World?
It is unlikely that you can ever escape totally from this high-stress world. We are all on the same train. How can you possibly get off without forfeiting the opportunity to achieve anything meaningful with your life? So the question really becomes: Is a high-pressure life admirable and necessary? To some extent I must say yes. It’s the American way. How else can you achieve the American Dream? Success demands that you pay the price of committing yourself to pursuing excellence. I wouldn’t really want to live any other way.
But this approach to life has its penalties and pitfalls. So if you want to preserve your sanity and achieve a healthy life, you have to make some choices and resolve to live a balanced life. By a “balanced” life, I mean that, like a marathon runner, you must learn how to pace yourself. You give it all you’ve got going uphill and rest as much as you can going downhill. You try to balance the drain on your energy so that you can “go the distance.”

You can’t escape the realities of your high-stress world. You certainly can’t turn back the clock to simpler times — although, I must confess, this is a wonderful fantasy that I occasionally indulge as a form of escape. I frequently reflect on the many happy childhood times I had with my grandparents. They lived a simple, country life. They were totally self-sufficient, tilling a small piece of land and raising their own food. They saved wisely for their retirement and spent little money during the bleak years of the Second World War. With only a short-wave radio to connect them to the rest of the world, life seemed simple yet luxurious to me as a child. There was a sense of unhurriedness and simple pleasures. All the money in the world couldn’t buy such luxury in today’s world. It is not for sale; you have to create it.

But we can’t go backward, only forward. We must make the most of the present realities of our lives. Frankly, though, seeking to live a balanced life is like trying to find your way through a dangerous minefield. The way to survival is narrow and must be charted with care if you are going to come out the other end intact. You need to understand all the dangers and have clearly worked out strategies for avoiding disaster. Likewise, many are falling into stress disease, particularly panic-anxiety disorder, because they do not have a clear strategy to develop the antidotes for the fallout from the pursuit of excellence.

Creating Your Own Tranquility
My message in this book is quite unique and, hopefully, simple and easy to apply. It is about creating a tranquil life in the midst of an anxious world. It is about how you can enhance your brain’s natural tranquilizers and push back the inroads of stress.

What is revolutionary in this book is understanding the connection between anxiety and the stress hormones produced by the adrenal glands. Anxiety is not the presence of some phenomenon in the brain, but the absence of something else.

So what is missing when we are anxious? Important brain chemicals called “neurotransmitters.” I call them our “happy messengers,” and this is an extremely accurate label for them. Our brain is full of these messengers. They help us remember, keep us awake, and in the final analysis, keep us sane. When our brain is robbed of happy messengers, as when our stress is too high and prolonged, it cannot function properly. Anxiety is then the “smoke alarm” alerting us to the chaos. This process is all a very intelligent design of a Master Creator.

Anxiety, therefore, is not the presence of something toxic in the brain; it is the absence of the happy messengers that keep us tranquil. Tranquility is, after all, the goal your brain is trying to achieve. This book will show you how to restore the tranquility that has been destroyed by overstress.
The role of stress in producing anxiety, therefore, is foundational to all I have to say. I first explored the connection between stress and anxiety 13 years ago in my book *Adrenaline and Stress*. Since then, the evidence for a link between the overproduction of adrenaline and emergence of disorders like panic anxiety has expanded immensely.

Indisputably, there is a strong connection between the overuse of our adrenal system and stress disease. But just as living high on adrenaline causes stress disease, it also causes anxiety problems. The mechanism is very simple. To put it simply, stress depletes our natural brain tranquilizers. Panic is the main product of this heightened anxiety. In its milder form, this anxiety is simply called a “panic attack.” In its more severe form, it becomes an affliction called “panic anxiety disorder,” one of the most frightening and debilitating of all the anxiety disorders.

**We Are All Anxiety Prone**

Before you jump to the conclusion that you don’t have a problem with anxiety, let me ask you to continue reading. Many hardworking, driven people (like you and me) don’t realize just how close they walk to the precipice of anxiety until one day, out of the blue, a panic attack strikes. Herein lies our greatest danger: Because adrenaline overuse feels so exhilarating and invigorating, we don’t consider some of the things that give us an adrenaline rush to be stressful. The purpose of adrenaline is to make us feel excited during a state of emergency, so it is easy to misread that excitement as safe. We don’t realize how close we are to the edge of anxiety until we lose our footing and tumble down into the dark abyss of panic.

In this sense, one’s first panic attack is really a blessing in disguise. It warns the sufferer that he or she is living too fast, too hassled, and too stressed-out. Losing tranquility happens because a person’s happy messengers are being invaded and destroyed by stress hormones. While they are normally allies, these hormones become enemies in the face of danger and stress.

The early stages of a panic anxiety disorder, then, are really warning signals. If you heed these warning signals and change your ways, as Samantha did, you will be able to overcome your anxiety. But if you ignore these warning signals, you run the risk of creating more suffering than you are bargaining for. Worse yet, you could well end up with an anxiety problem for the rest of your life.

**Anxiety Symptom Checklist**

Anxiety symptoms fall into three categories: physiological symptoms, cognitive symptoms, and emotional symptoms. Count the following symptoms that apply to you:

**Physiological Symptoms** — Do you feel:
- Weak all over?
- Rapid, pounding heartbeat or palpitations?
- Tightness around your chest?
- Hyperventilation (a feeling that you cannot get enough air)?
- Periodic dizziness and sweating?
- Muscle tension, aches, or tremors?
- Chronic fatigue?
**Cognitive Symptoms** — Do you think to yourself:
- I can’t carry on. I’ve got to get out of here.
- What if I make a fool of myself?
- People are looking at me all the time.
- I’m having a heart attack.
- I’m going to faint.
- I’m going crazy.
- I can’t go on alone; no one will help me.
- I can’t go out; I will lose control.
- I feel confused and can’t remember things.

**Emotional Symptoms** — Do you think to yourself:
- I’m full of fears that I can’t get out of my mind.
- I feel like something terrible is going to happen.
- I worry excessively.
- I feel uneasy and alone a lot of the time.
- I often feel isolated, lonely, down in the dumps, and depressed.
- I feel I have no control over what happens to me.
- I feel embarrassed, rejected, and criticized.
- I often feel like screaming with anger.

**Scoring**
This checklist is not designed to be a diagnostic tool so much as it is intended to communicate the variety of symptoms experienced by people with high anxiety. However, if you are experiencing at least three symptoms in each category, then your anxiety level is starting to be a problem, especially if you experience the symptoms often. If you are experiencing more than three symptoms in each category and are not in treatment for an anxiety-related problem, then I would suggest that you consult a professional right away. It is better to be safe than to regret your failure to take action at a later point. If taking this inventory causes you anxiety, you probably need to get some help.

**How Common Are Anxiety Problems?**
Since overstress is so common today, you can pretty well predict that anxiety problems are also common. According to the National Institute of Mental Health (NIMH), more than 23 million Americans suffer from some form of anxiety disorder, including panic anxiety disorder, obsessive-compulsive disorder, posttraumatic stress disorder, phobias, and generalized anxiety disorder. To quote NIMH’s website on this matter:

[Anxiety sufferers] suffer from symptoms that are chronic, unremitting, and usually grow progressively worse if left untreated. Tormented by panic attacks, irrational thoughts and fears, compulsive behaviors or rituals, flashbacks, nightmares, or countless frightening physical symptoms, people with anxiety disorders are heavy utilizers of emergency rooms and other medical services.
Because of widespread lack of understanding and the stigma associated with such disorders, many people with anxiety problems are not diagnosed and do not receive the treatments that have been proven effective through research. They continue to suffer unnecessarily, and their work, family, and social lives are disrupted. Many become imprisoned in their homes.

**Doesn’t Everyone Have Some Anxiety?**

Some anxiety goes with being human. It has always been with us and will remain until the end of time. Anxiety can be normal and even necessary in certain circumstances. Normal anxiety keeps us busy, reminds us to pay our bills, and pushes us forward to succeed. Its presence in human experience throughout history would suggest that in its pure form it serves some useful purpose. And for a long time, psychologists, and philosophers before them, saw anxiety as a necessary and normal aspect of life. It was, they thought, the mental equivalent of physical pain that served as a “warning” system to alert us to danger.

But like so many good ideas, they can be taken too far. Anxiety is only normal up to a point. Our happy messengers are designed to fluctuate. We cannot expect to stay in the perpetual state of tranquility. We all need some anxiety to make our lives meaningful and productive. My concern in this book is the anxiety that is beyond the bounds of normality.

**Types of Anxiety Problems**

Let’s look at a brief overview of anxiety problems. Following are the most common types of anxiety:

*Panic Anxiety Disorder:* This is probably the best studied and understood of all the anxiety disorders. Panic anxiety disorder is characterized by repeated, unprovoked attacks of terror, accompanied by physical symptoms, including chest pain, heart palpitations, shortness of breath, dizziness, weakness, and sweating. A panic attack can resemble a heart attack, and often the first indication of the disorder is when you are rushed to the emergency room with chest pains. It is called a “disorder” when the problem persists for more than a month.

*Generalized Anxiety Disorder (GAD):* This is a free-floating, pervasive anxiety or a constant, unrealistic worry. It impacts your ability to complete your daily activities. GAD is often associated with physical anxiety symptoms such as muscle aches, fatigue, sleep disturbances, sweating, dizziness, and nausea.

*Specific Phobia:* This is a persistent, marked irrational fear of an object or situation that leads to avoidance of the object or situation. Exposure to the stimulus provokes an immediate and extreme response, even a panic attack. To be considered a phobia, the fear has to be excessive and incapacitating.

*Social Phobia:* Also called, “social anxiety disorder,” this is a persistent fear of one or more social situations in which you are exposed to possible scrutiny by others and fear that you may do something or act in a way that will be humiliating. Social phobias can also include extreme shyness.
Agoraphobia: This can occur with or without panic attacks and literally means “fear of the marketplace.” It is a fear of public places where your panic or anxiety might bring embarrassment. You come to fear leaving home or being trapped in a room or church pew because you could lose control.

Obsessive-Compulsive Disorder (OCD): This disorder is characterized by repeated, intrusive, and unwanted thoughts (obsessions) that cause anxiety, often accompanied by ritualized behaviors (compulsions) that relieve this anxiety. Common obsessions include fear of contamination or fear of harming someone. Persistent worries, like worrying about whether you turned off the stove and making repeated trips back to check, are also obsessions. Common compulsions are excessive cleaning, counting, double-checking, and hoarding.

Posttraumatic Stress Disorder (PTSD): This is a very special form of anxiety caused when someone experiences a severely distressing or traumatic event; individuals become so preoccupied with the experience that they are unable to lead a normal life. PTSD must involve extreme fear. Generally, it takes repeated traumatic events, not just a single event, to cause this disorder.

Acute Stress Disorder: This is less serious than PTSD and occurs when severe anxiety symptoms follow exposure to a specific, extreme trauma such as experiencing or observing an accident in which someone was killed. The symptoms of acute stress disorder include detachment, numbing, repeated dreams, and marked symptoms of anxiety including inability to sleep, poor concentration, and an exaggerated startle response. The problem usually doesn’t last longer than a month.

Separation Anxiety Disorder: Usually associated with childhood or adolescence (although some cases occur in adulthood), this is the feeling of extreme anxiety when you are separated from home or loved ones. In its severe forms, separation anxiety can be quite incapacitating.

How Are Anxiety Disorders Treated?
The most common stereotype in most people’s minds is that tranquilizers are the only treatment for anxiety disorders. Since many people fear that tranquilizers are addictive and can “control” your mind, they intentionally fail to get treatment that could help them.

While it is true that artificial tranquilizers are sometimes used in anxiety treatment, they play a temporary and minor role overall. Other medications that are not addictive play a more important role in the long term. Furthermore, artificial tranquilizers only work because your brain has its own tranquilizers. Since your brain’s tranquilizers, or “happy messengers,” are being systematically destroyed by stress, it only stands to reason that the artificial equivalent must be supplied in treatment under some conditions.

Seldom, however, are medications used on their own. Usually, professional treatment of anxiety disorders requires a combination of medication and cognitive-behavioral therapy. Treatment is usually individualized for each patient, depending on the severity of the symptoms and level of function. I will discuss these treatments in more detail in chapter four.
Is Medication Always Necessary?
One of the difficult tasks I have in this book is to present the right balance between when to use anti-anxiety medication and when to avoid it. Obviously, some medications must be taken to provide an effective result. But anxiety sufferers have many questions about these medications. Here are just a few short answers to the more important questions I get asked by patients whom I recommend for medication treatment. (More detailed answers will come later.)

Are Anti-Anxiety Medications Absolutely Necessary? Is it possible, for instance, to cure repeated anxiety attacks without them?

Answer: If you are determined and self-reliant and the attacks are in their early stages, you may be able to overcome them without medications. Some anxiety problems definitely need medication; others don’t. However, you will need to make some urgent and lifelong changes. In the long term, curing your anxiety is a matter of changing your susceptibility to stress. Without medication, it will take longer for you to achieve a cure, and you will run a greater risk of relapsing.

Are Some Medications Safer Than Others? Many are rightly concerned about the safety of medications. And this should be so for all medications, not just those used to treat anxiety.

Answer: If you avoid alcohol and stick closely to the recommended dosages, all anti-anxiety medications are safe. Your doctor will see to it.

Are Some Medications Less Addictive Than Others? The matter of addiction should always be a concern.

Answer: Absolutely. Not all medications are equally addictive, and sometimes it is the person who is prone to addiction, not the medications, that causes addiction. In any event, not everyone is susceptible to developing a dependence on a tranquilizer. (I prefer to call it “dependence” rather than addiction because the word dependence more accurately describes what happens.) Furthermore, if your clinician is competent, you will have no trouble coming off your medication when you are ready to do so. I will tell you how to do this in chapter six.

Do Anti-Anxiety Medications Have to Be Taken Forever? Many are concerned about how long they have to take the medication, especially if it has to be for the rest of their lives.

Answer: Absolutely not. They are taken for a limited period of time only. Provided you are addressing the other changes that must also be made, notably learning stress management, a time will come when you can taper off all medications. It may take longer than you would like, but that is up to you and the diligence with which you follow the larger treatment plan. But you are not the best judge of how and when to stop. Your clinician will know how long you will need the medication for your particular problem.

The bottom line boils down to deciding which forms of anxiety should be treated with medications and which should only be treated with good counseling. In any case, you should always be getting some form of counseling even when you are taking anti-anxiety medication.
The Ten Most Ridiculous Things You Can Say to a Person with Anxiety
(or to yourself, for that matter)

1. “We all get anxious, so just pull yourself together.”
2. “If you would just relax more, your anxiety will go away.”
3. “Have you committed some sin that God is punishing you for?”
4. “You worry too much, and worry never changes anything.”
5. “If you just try harder, you wouldn’t feel so stressed out.”
6. “Just ignore your problems, and they will go away.”
7. “Anxiety can’t kill you, so just snap out of it.”
8. “If you had more faith, you would stop worrying.”
9. “Take a holiday, and all your problems will go away.”
10. “If I can cope with my life, you should be able to cope with yours.”

Self-Talk
The following information was excerpted with permission from Dr. Archibald Hart’s book, Overcoming Anxiety (©1989, Word Publishing, Nashville, Tennessee). It examines the subject of self-talk and its relationship to anxiety.

Self-Talk: Good and Bad
There are a number of different ways in which we think; for instance, we can reason, imagine, or evaluate. The way we think is mostly determined by what we say to ourselves — the conversations we carry on within our minds. In beginning to explore the principles of disciplined thinking, we must start at the point of this “self-talk.”

We talk to ourselves all the time — not necessarily out loud, but mentally. This self-talk generates ideas and reactions that ultimately become translated into emotions. Often, however, we are totally oblivious to the inner conversations that precede our emotional states. Unless we attend to our self-talk, we can be controlled by an unconscious force that often works to sabotage our tranquility.

Self-talk is usually more irrational and illogical than conversations we have with others. Anyone who has ever had the experience of “talking out” a problem with a friend knows that we usually think more clearly when we talk to someone else than when we talk to ourselves. Often, sharing our feelings and thinking with another gives us a better understanding of what is happening to us. Suddenly everything makes sense, and we realize how ridiculous our reasoning has been — or perhaps we validate our thinking and realize we are on the right track after all. It is difficult to achieve this when we just talk to ourselves.

Let us suppose you have just had a telephone conversation with a girlfriend. She tells you that she cannot go to dinner with you next week. She is sorry she has had to cancel this engagement, but something else has come up. As you go back to your office desk you begin to converse with yourself. The conversation may go something like this:
I wonder why she doesn’t want to go to dinner with me? She knows I planned this weeks ago. She knows how much I have looked forward to it. I wonder if her mother has been talking to her? I know her mother doesn’t like me. What could her mother have said? Perhaps I didn’t show enough enthusiasm over her garden when she showed it to me. But why would she hold this against me? Maybe I shouldn’t have called so late the other evening. Nothing ever goes right for me. Ever since I can remember, things have gone wrong. I must be jinxed or something. . .

Very soon you are deeply depressed or anxious, although quite possibly none of your thoughts are true; they are all products of your imagination.

Does the previous self-conversation sound ridiculous as you read it? Why don’t you try writing down every conversation you have with yourself over your spouse, kids, boss, employees, pastor, or friends? You might be surprised at the sort of things you say to yourself when you see them on paper. It isn’t until we see it written down that the irrationality of our self-talk becomes obvious.

Self-talk that produces anxiety tends to have the following characteristics:

- It tends to be emotionally charged because it comes from hurts (real or supposed) and is fed by other feelings.
- It is fed by a vivid imagination. Rather than keeping in touch with reality, it tends to exaggerate and be oversensitive.
- It over generalizes, taking one little event and trying to prove that every other event is like it.
- It is irrational and illogical most of the time. It feeds off doubts and uncertainties and is seldom satisfied with reality.
- It usually tends to “catastrophize” everything — finishing up, as my fictitious example does, with statements like “I am jinxed,” “I am terrible,” or “Nobody cares for me.”
- It is usually self-pitying and selfish. “I” am the center of the conversation and the focus of all offense, and “I” just want to wallow in the mire and lick my wounds.

To be free of the anxiety induced by self-talk, we must be able to recognize and stop our negative self-talk. The way to do this is to keep a record of typical self-conversations and then honestly and courageously challenge them when they are ridiculous, untruthful, and destructive.

Here is an exercise that can improve your recognition of negative Self-talk:

1. Set an alarm or use some event to signal you at least once every hour. You can use class breaks, coffee breaks, or any other natural break in your day to signal the time for the exercise.

2. At the moment you are signaled, stop what you are doing and carefully review the conversation you have been having with yourself during the previous five minutes. Write it down as sentences, trying to recall as many ideas or self-statements as possible. Pay particular attention to the conversation you were having with yourself at the moment the signal occurred.
3. **Review your list of self-talk sentences.** Ask yourself the following questions about each one:
   - Is it true?
   - How do I know it is true?
   - Is it realistic — am I being realistic?
   - Am I overreacting or catastrophizing?
   - Will it be different tomorrow or is it going to be the same?
   - Am I being sensible and mature?
   - What is the real issue behind this self-statement?
   - Am I facing up to the real issue?
   - Where will this idea take me?

4. **Share your responses with someone (a friend or spouse).** Irrational self-talk is best challenged in open conversation with another person who can help you remain objective. If no one is immediately available, share your responses with God. After all, this is part of the purpose of prayer.

Here are some healthier self-statements that can be practiced:

- I must focus on what I must do — not on what I feel.
- I am as capable as others, so I can expect to do my job as well as anyone else.
- I must focus on the present and not imagine what might happen tomorrow.
- I need not be afraid of what might happen to me — because God is in control.

**The Stream of Thought**

Another way to understand your thinking is to imagine that it is like a stream that flows through your mind. It starts somewhere out of consciousness, passes the “window of your awareness” for a brief moment, then moves on again out of consciousness, possibly to influence some other part of your being. Sometimes your thought is a small stream; your mind is quiet and there is little activity. At such times, your whole being is peaceful and non-aroused.

At other times, the stream of your thought can become a raging torrent or multiple streams that disturb your tranquility. Thoughts flood into your head, tumbling over each other, eroding everything in their Path, and making you feel very unsettled. It seems that even in sleep this stream or streams continue to flow, feeding dreams and sometimes robbing one of much-needed rest.

A significant key to controlling anxiety lies in being able to control and influence these streams of thought. But how? There is much about thought that you can’t control. It is involuntary; its tributaries start by themselves, deep within the mind, and it continues to flow whether you like it or not. You do have control, however, at the point where the stream passes your “window of awareness.” At this point you can reach in and remove what you don’t want. Although you can’t stop thoughts from springing up at their source, you do not need to dwell on all the thoughts that flow by. You can set aside certain thoughts and even ignore them. If you do this, the source of that particular stream will begin to dry up.
You can also choose to inject pleasant thoughts into your mind. For instance, if I choose, I can begin to think about a happy childhood event. Let’s say I want to think about the first time I ever went to the beach. I can recall it clearly. I was four or five years old. My parents gave me a small brightly colored tin bucket and a wooden spade (they use plastic buckets and spades these days). I remember filling my bucket with wet sand, then turning it over to deposit a neatly shaped cone of sand on the beach. I repeated this many times all over until it seemed as though the whole beach was covered with my sand castles.

What am I feeling as I think about this period of my childhood? Happiness! I love this memory. I can even recall the smells of the salt water, of canvas chairs, milkshakes, and seashells.

Deliberately choosing to think about this event brought me pleasant feelings. But I can also stop this stream of thought at any point and intentionally start another. If this is true of pleasant thoughts, it is also true of unpleasant ones.

Does this sound simple? Yes, it certainly does, but this truth is so liberating that it needs to be sounded again and again: I can choose to change my thoughts and therefore determine what I am feeling.

The importance of all of this is that we can control much of what causes us anxiety by deliberately changing the stream of our thought any time we choose. We simply have to begin thinking about another pleasant or happy event. We have the power to originate thought. Most unhappy people neglect to do it.

**Thought Stopping, Thought Redirecting, and Thought Initiation**

These are three important strategies that follow from my comments in the previous section. I believe I have strong biblical support for the value of intentionally determining what we think about. Paul, in the closing chapter of his Epistle to the Philippians, reminds us that we are to think on things that are true, honest, just, pure, lovely and of good report (Phil. 4:8, KJV). His point is clear: If we think on these things, we will both protect ourselves from unhealthy thoughts and develop the habit of right thinking.

But what happens when thoughts are overwhelming you like a raging torrent and you cannot control what you are thinking? Two strategies are valuable: “thought stopping” and “thought redirecting.” These two techniques can be used together or separately or combined with a third technique — “thought initiation” — in reducing anxiety levels:

1. **Thought stopping.** This technique has been in clinical use for many years. It is learned first with minor and only mildly bothersome thoughts. After the technique is mastered, it can be tried on more troublesome thoughts.

To practice thought stopping, lie on your bed in a comfortable position. Select a thought that sometimes bothers you. Take a deep breath and let the air out slowly, relaxing every part of your body.
Think for a moment about the troublesome thought. Then take the flat of one hand, hit it against your thigh with a sharp and quick slap (but don’t hurt yourself), and either shout out loud or think, “stop.” Immediately change the thought.

Relax again. Concentrate on your breathing and the tension in your body. Try to relax every part of the body that feels tense. If the thought comes back again, repeat the slap and shout the word stop.

Later, when you have conditioned the word stop to the thigh slap, just thinking the word will have the same effect. You may find it helpful to tape-record these instructions, along with appropriate additional suggestions to yourself. You can then play the tape while relaxing and learn the technique more effectively.

Having practiced the slap-and-stop method on minor troublesome thoughts, make a list of more bothersome thoughts that you find frightening. Practice the technique with each of these thoughts in turn. Then try the technique while going about your regular daily routine. You can do it while driving, counting change, or changing diapers. No one else need be aware that you are doing it. Every time a thought bothers you, say stop to yourself and change your thought.

While you may have to repeat the exercise eight or ten times on each thought before it goes away, with practice you will find that thoughts actually do stop when you tell them to. Later you should be able to catch troublesome thoughts the moment they occur and nip them in the bud.

You may say to yourself, This thought is not going to be helpful. I choose not to let it remain, and then proceed to stop the thought.

2. **Thought redirecting.** This is a variation of the thought-stopping method and can be a useful follow-up. Its purpose is to help you re-channel your stream of thought. After you have discovered a thought you don’t want and told yourself to stop it, you may find that the thought returns after awhile because nothing else has taken its place. This technique helps to fill the empty stream bed with an alternative pleasant thought.

For instance, let us suppose a colleague at work says something that hurts you. An hour later, you catch yourself dwelling on your colleague’s words; you can’t stop them from playing in your head.

When this happens, relax wherever you are, standing or sitting, and think for a moment about the words that are bothering you. Say stop silently to yourself as in the previous exercise, then immediately begin to think positive things about your colleague. Envision his office, his desk; recall the good things you know about him. Think about the nice things he has said to you in the past. Think of your friendship. Think about how human he is — no better than you, but also no worse. And so on, and so on.

The idea here is to immediately substitute a chain of thoughts that originates with the bothersome one but which slowly takes you away from it to something more positive and pleasant. You don’t have to force yourself to think nice things about someone you dislike. You can move on to other thoughts.
With practice, this technique can become a habit so that you need never allow troublesome thoughts to dominate you again. By redirecting your thinking away from the original negative thought, you occupy your mind with wholesome, healthy, and healing thoughts. The Christian can focus this redirection ultimately on Christ, His love for us, and His glorious salvation. There is always a lot to think about here!

3. **Thought initiation.** Keeping unwanted thoughts out of your mind is only part of the battle against anxiety. One further step is needed: learning to initiate pleasant thoughts whenever you choose. Not only do these help to displace unpleasant thoughts; they also help to reduce anxiety by building a more tranquil atmosphere in your mind.

Here is an exercise to help you initiate pleasant thoughts: First, take a card and write down five or six events you know will give you pleasure. These can be events from your past (memories of happy childhood outings) or present (your last visit to a friend), or they may be events you anticipate with pleasure in the near future (such as an upcoming vacation).

Next to each pleasant event, write down two or three specific ideas or aspects of the event that interest or captivate you. For instance, if you are planning a vacation you may wish to write down “planning vacation wardrobe” or “examining travel brochure for places to visit,” as specific ideas. If you are recalling games you used to play with your grandfather, write down the names of the games or recall the rules. (I have many such memories of my own grandfather.)

Keep this card with you at all times. Every hour or two, take it out, select one of the pleasant events you specified, and deliberately begin to think about one of the specific ideas associated with it. Take a moment to savor the pleasant feelings it generates. Try to think about the pleasant idea for four or five minutes. Then return the card to its place and go about your business.

In time, learning to initiate pleasant thoughts will become a habit that can dramatically turn your anxiety around.

**Correcting Errors in Your Thinking**

Even when you are able to capture your irrational or negative thoughts and either stop them or redirect them to more tranquil and positive ideas, you may still have a tendency to engage in illogical thinking or be susceptible to certain “thinking errors.” These thinking errors need to be recognized so they can be corrected at the earliest possible moment.

Here are some **major thinking errors** to examine and avoid:

1. **Catastrophizing.** This is a tendency, often learned in early childhood, to react to every danger or difficulty with an exaggerated response and to perceive total disaster as the outcome.

Say, for instance, that your child comes home from school with a report card that says he is not concentrating in class and is easily distracted by other children. This has never happened before, and you have no real reason to suspect a serious problem, but immediately you start thinking panicky thoughts: *What does this mean? Is Johnny going to pieces? Perhaps there’s...*
something wrong with his brain. I better take him to the doctor. When you finally have a conference with the teacher, you discover it is not a big issue. Johnny is merely “testing the limits” of the system and is basically a good student. You feel stupid because you overreacted.

Or perhaps you are due for an annual physical checkup. You’ve felt a little under the weather lately, so you start wondering, Could I have something seriously wrong with me? Perhaps I’ve got cancer! Before you know it, your anxiety is through the roof and you are catastrophizing every ache and pain.

Now, we all catastrophize to some extent. But the more anxiety-prone we are, the more we will tend to do it — and catastrophizing in turn feeds our anxiety. Often we are not aware of this tendency, so we may have to depend on feedback from others to alert us to it. Careful analysis of our self-talk can also help.

2. **Exaggeration.** Exaggerating is a little different from catastrophizing. When you exaggerate, you don’t necessarily imagine the worst, but you do emphasize the negative. You look in the mirror, see a few gray hairs, and begin to think of yourself as old. (I suppose for some this could be a catastrophe!) A colleague gets a promotion; you realize other people are as good, if not better than you; and you begin to see yourself as a failure.

Because exaggeration is not as dramatic as catastrophizing, it is more elusive. You don’t know you’re doing it, but it slowly shapes your beliefs and attitudes and raises your anxiety when you least expect it.

3. **Overgeneralizing.** I remember vividly the first time I ever failed significantly at anything. I was twenty-six years of age, a young civil engineer doing well in my job. I had taken an advanced mathematics class at our university to help me in my work. After a year of study (I did not try too hard because I felt fairly confident), I took the examination and totally “bombed out.”

I was devastated. First I did some catastrophizing: This is the end of my life! Then I did some exaggerate: If I can’t master this math, my friends will think I’m stupid. Then I began to overgeneralize: Since I’ve failed this examination in mathematics, perhaps I am just a failure at everything. I’ll never get anywhere in life because of this failure. It will haunt me the rest of my life. Overgeneralizing is, therefore, a tendency to think that everything is a disaster when only one thing is.

It was this failure that caused me to rethink whether I wanted to go on being an engineer. The next year I began my studies in psychology, so the failure turned out to be God’s gentle nudge redirecting me to another form of service. In retrospect my experience with that examination was hardly a failure at all, and God meant it “for my good.”

The failures and other negative experiences in our lives can bring us wisdom or direct us to better pathways. Too often, however, that doesn’t happen. Through generalization, we let our failures immobilize us — we just give up and stop trying.
Changing Your Thinking
How does one avoid making these errors of thinking? I have several suggestions:

1. **First**, work at increasing your awareness of when these thinking errors tend to occur in you. Anxiety always increases when you think incorrectly, so a feeling of anxiety is often the best clue.

2. **Question your thinking.** For example, if you are catastrophizing a failure, ask yourself: *Does it really mean that this is the end? Does it really mean I am incompetent? Will there be other opportunities? Am I catastrophizing?* You’ll discover that you can live through just about every life crisis. Try to avoid increasing your anxiety by distorting your thinking.

3. **Gather whatever facts you can to counter the negative beliefs at the root of your thinking pattern.** Knowledge is the best antidote for irrational fears. If you fear trains, gather as much information about them as possible. If you are afraid of snakes, then study them and become an expert on them. By increasing your interest in these sources of fear, you will gradually feel more in control, and this will help you to lower your anxiety.

4. **Constantly try to avoid taking the “worm’s eye view” of your situation.** Pull back and enlarge your perspective. Soar high and try to see the larger picture of your life — try to see it from God’s perspective. This will help keep you from exaggerating your misfortunes.

5. **Develop clear and specific plans for coping.** Every problem in life, no matter how small, should be countered with a plan of action for coping. Such a plan helps to avoid the feeling of helplessness that only feeds anxiety. The plan should emphasize coping in your circumstances, not mastering them. It is enough to ask yourself, *How can I get through this day? What can I do right now just to cope with this problem?* Emphasize to yourself the value of dealing with each problem one at a time. Don’t try to solve all your problems at once. Take each one singly and forget about the others.