

# Good psychotherapy on anxiety essay example

[Psychology](#), [Behaviorism](#)



## **Psychotherapy for Anxiety disorders**

Anxiety disorders entail symptoms of extreme nervous conditions causing high levels of distress consequently interfering with a person's normal daily life. People suffering from Anxiety disorders are always in constant fear and worry and later, if left untreated, depression. As the most common of all emotional disorders, Anxiety disorders affect over 25 million Americans according to the American Psychological Association report (2009). In the effort to obtain relief from these symptoms, some patients opt to indulge in drug and alcohol abuse. This indulgence affects their performance both at school and work as well as their social relationships .

Most common symptoms include worry and fear to overwhelming extents, obsessive thoughts that are uncontrollable, constantly recurring nightmares, painful memories and physical symptoms like an uncomfortable stomach, thumping heart and tension in the muscles. In some cases patients experience difficulty in sleeping, nausea, a dry mouth, cold sweaty hands and dizziness (Hyman, & Pedrick, 2012).

Some people mistake normal feelings or nervousness for Anxiety Disorders. Anxiety, at a mild form, is an ordinary human emotions that all individuals experience at different points in their lives depending on the situation they encounter (DiTomasso, 2006). These situations are for instance; before taking an exam, before making a life-time decision that is extremely important to the individual or simply experiencing a problem or pressure in one's place of work. These symptoms are not an evidently, a proof of an Anxiety disorder.

## **Types of Anxiety disorders**

panic disorder:

Patients with this type of disorder experience sudden and often occurrence of panic attacks that brings terror and an overwhelming amount of distress (Hersch, 2003). Without warning, the constant occurrence of such attacks bring both physical and psychological distress. In the event of an attack, patients sweat, experience chest pains and numbness, they tremble and shake and at times choke and lose breath (Eifert, & Forsyth, 2005). These patients feel disconnected from their peers and live in fear of losing complete control of their sanity. In the case of a severe attack, these people think it is a deadly condition such as a heart attack (Norton, 2012).

## **Phobia**

A phobia is a condition in an individual that causes them to fear specific things such as an object, activity, animals or situation. The intense fear causes the person to neglect normal daily situations to avoid the specific objects (Narayana, Chakrabarti, & Grover, 2004). There consists three types of Phobia: social phobia (strong sense of discomfort when embarrassed in public) specific phobia (such as fear of snakes or flying) and Agoraphobia (fear of situations especially in an uncertain and desperate condition) (Gendlin, 2006) .

## **Generalized Anxiety Disorder (GAD)**

Generalized Anxiety Disorder exhibit a constant expression of tension that ultimately interferes with the normal daily routines and duties thereby undermining their expected performance (MacKenzie, 2007). Their

consistent worrying and sense of helplessness affects their sleep and concentration during work or school. The excessive and unrealistic tension is based on imagination and not necessarily something that causes it (Heimberg, Turk & Mennin, 2004).

## **Causes of Anxiety and the Importance of psychotherapy**

Although the real accurate causes are not yet established, it is evident and clear that Anxiety disorders do not expose the weakness of the individual. Like other mental illnesses, these disorders are not a result of poor upbringing or flaw in character rather a shift in brain action and consequential environmental stress. The parts of the brain responsible for controlling responses of fear, are according to the American Psychological Association (2009) research, the main cause of disorders.

A patient enduring long spans of stress is likely to cause an interference in the normal function of nerve cells within the brains circuits regulating fear. Studies also reveal that anxiety is hereditary and runs in families.

Without proper treatment or psychotherapy, Anxiety disorders may be very harmful to peoples relationships, jobs and ordinary activities and responsibilities that are crucial to both the individuals and the society especially those who are closely related or direct beneficiaries. With a distorted weird life, these patients risk loosing their jobs due to under-performance and most importantly, family and friends. These disorders may, if left untreated, advance to depression and patients turning to drugs for consolation.

Although no specific plan and time-frame works for all the patients, both the psychotherapist and patient should work together to obtain the best results.

This personal effort is based on the fact that every patient is in different levels and respond differently to treatment depending on their environment and the extent of the damage the disorder caused.

## **Behavioral therapy**

Behavioral therapy seeks to restore the patients' normal and acceptable habits by enhancing the positive habits necessary to improve the abnormal acquired trend. In seeking to rectify the patients' behavior, this therapy reinforces the aspect of learning new desired and positive behaviors to replace them with the undesirable negative behaviors. The main goal of this therapy is to gradually yet effectively eliminate the disorder by learning new behaviors. This therapy is best suited for Anxiety disorders since they cause undesirable traits in the patients. It is also most effective when accompanied with treatment.

## **Acceptance and commitment therapy**

Acceptance and commitment therapy (ACT) is a type of behavioral therapy. It utilizes acceptance as a strategy to achieve psychological sanity. The developer (Steven Hayes) succeeded in providing the effective solutions for a variety of mental health issues and, specifically, Anxiety disorders (Frankland, 2010).

The ACT therapy basic principle insists on the fact that individuals are able to choose a crucial course of action to create positive changes by accepting negative thoughts and feelings. Consequently, acceptance and commitment therapy does not target to completely replace the undesirable and unwanted problems and experiences (Robertson, 2010). However, it encourages

individuals to create a mindful relationship with those experiences thus creating the crucial psychological stability that restores a healthy contact with their thoughts to realize personal values, and proceed with their efforts in changing their behavior.

## **Cognitive therapy**

Based on Albert Ellis structure of the rational emotive behavior therapy, Cognitive therapy focuses on creating a collaboration between the therapist and the patient to develop the skills necessary for identifying and replacing corrupt thoughts and beliefs. Since the patients lack the ability to recognize the normal reasonable thoughts accurately, the therapist introduces these thoughts for identification and re-evaluation (Butler, Fennell, & Hackmann, 2010).

assumption

The Cognitive therapy is based on on Aaron Beck's Cognitive theory whose model inspires the current therapists in their approach to cognitive therapy. In his study Beck realized that patients suffering from depression experienced negative thoughts constantly. He then grouped the thoughts into: negative ideas about themselves, about the world and about the future (Clark, & Beck 2011). In finalizing his research, he concluded that the longer the patients spent thinking about the automatically acquired negative thoughts the more they treated them as valid. With consistent and constant interventions through therapy, Beck noted, the patients gradually and eventually learned to recognize and notice the error in their negative thoughts and beliefs.

## **Mechanics and process**

### classical conditioning

Classical conditioning depends on various techniques to achieve behavioral change such as flooding. Flooding is the process of for instance, exposing and confining one to a condition they fear such that the longer they can tolerate it the less fearful they eventually become. Another technique is systematic desensitization where the therapist lets the patient mention and write down their fears (Germer and Siegel, 2012). The therapist would then systematically address by confronting all the fears in the least. Finally, the last technique is called Aversion therapy that pairs the unwanted behaviors with aversive stimulus to reduce the undesirable behavior.

## **Operant conditioning**

In order to change behavior, operant conditioning uses the strategies such as the 'token economies' that only focuses on positive reinforcement as a tactic to change behavior. It is mostly used on young children who like to get gifts and prizes in exchange for good behavior. Another strategy is modeling (Hofmann, & Otto, 2008). Modeling requires that learning involves observation and imitation. With emphasis to young children, the strategy encourages them to aim to become like their role models. Contingency management is a formal approach usually a contract between the patient and the therapist explicit with goals, rewards and consequences meant to change behavior. Lastly, extinction is the strategy that singles out and eliminates any threat to good desirable behavior (Klerman, 2004). For instance, punishing an offender of the agreeable contract publicizes the mistake serving as a lesson to others.

## **The psychoanalytical therapy**

The psychoanalytical and the psycho-dynamic therapies focus on an individual's sub-conscious thoughts and perceptions developed in their childhood through to their adult lives and how the thoughts affect both their thoughts and behavior (Pucci, 2006).

## **The Jungian therapy**

Carl Gustav Jung developed the Jungian analysis and therapy in seeking to find more deeper meanings beyond the unconscious. He believed that beyond the unconscious are deeper uncontrollable thoughts common to all humans (Beck, 2011). He used this assumption to explain why people have undesirable habits that they cannot drop such as anxiety among others. He sought to help individuals to see beyond their unconscious by successfully guiding them through their self-awareness, transformation and ultimately; actualization.

## **Assumptions**

The Jungian therapy required a comprehensive understanding of the relationship between the patient and their psyche. The therapist would achieve this understanding by making the elements of unconscious mind into reality and accessible (Levy, 2011). Jung concluded that the unconscious mind could be contacted through archetypes (inward projections that determine how people experience particular things). He asserted that these functions are uniform across all cultures and races regardless of neither regions of origin around the globe nor the level of exposure and differences



in urbanization (Ravitz, Maunder, Fefergrad, Richter, Zaretsky, McMain, Wiebe, Grigoriadis, 2013).

### **The four archetypes according to Jung include;**

- The self (unity of the conscious and unconscious parts of the mind) that is also the main control of other archetypes of the human psyche.
- The shadow (repressed ideas especially weaknesses and things we are ashamed of). This archetypes appears mainly in dreams and visions.
- The persona (the way people present themselves in public). People intend to give good impression to the public to influence the publics' opinion about them. However, they do not represent the real identity of a person.

### **The Animus/Anima**

Animus represents the male as Anima; the female psyche. Junga notes that it is the second most prevalent of the archetypes. Unlike the persona, these archetypes reflect the real people deep to their core.

### **Mechanism for change**

The Jungian therapy focuses mainly on talking as a way of solving the problem among other methods. The discussions are based on truth and trust as the client and their counselor engage in a close professional relationship based on the authenticity of information and honesty. Jung requires in his assertions that the counselor be keen to make the client as comfortable as possible in order to achieve the goal of letting the patient open up their deep-rooted problems (Solanto, 2011).

The therapist is keen on supporting the patient with the necessary security, awareness, self-actualization and ultimately; transformation that is vital in

assisting the patients achieve their goal of breaking from an Anxiety disorder.

## **Techniques in the analysis**

The dream analysis

In the Jungian therapy, dreams are founded on Jung's notion that they are an anticipation in the unconscious part of the mind offering the necessary advice or criticism to boost our ego.

## **The Word associations test**

The Word associations test requires that the therapist records their clients' response time to certain stimulus-words to determine the activated unconscious issues that relate to some of the problems the client mentioned.

## **Creative activities**

The creative activities technique is Jungian's method of self-expression through activities such as art and music. These activities enable both the patient and counselor to engage actively in imagining and relieving some of their inwardly hidden creative qualities in their unconscious by law or ethical standards in their environment (Rama, Ballentine, & Ajaya, 1998).

## **The Critique**

Behavioral therapy allows the patient to monitor their own progress as they strive to change their behavior. In participating in the process, they are able to actively and intentionally put in more effort and self-drive in improving their own lives. This participation is important in keeping the patients informed and ready to deal with future problems on their own to

commendable extents. Psychoanalytical therapies on the other hand seems to trick the client into obtaining sanity. The counselor can monitor the progress and ultimately treat the Anxiety disorder. However, the patient, like a child will complete the session without satisfactory evidence and knowledge of their condition.

## **Conclusion**

Anxiety disorder is a mental condition that obstructs the patient from determining their self worth as they live in fear and worry. Helping them understand their condition and work alongside them consistently to change their seemingly uncontrollable behavior is of more benefit to them than treatment alone. It is there crucial that treatment is accompanied by therapy for good results.

The behavioral approach to therapy is more efficient in the long run as it keeps the patient in full knowledge of the details of their condition. Their awareness is important in maintaining their consistency in their efforts to change their Anxiety issues. It is also easy to monitor the progress they make through the sessions of psychotherapy.

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