

How to Inoculate Yourself against Panic: The Eight Attitudes of Recovery

By Reid Wilson, Ph.D.

Every year that I work with people having panic attacks I become more convinced that you have one primary task. That is to manage your attitude. "Attitude" means your basic view of your relationship with panic and anxiety, your judgment of panic, your belief about how you should act in the face of anxiety. I firmly believe – after talking with thousands of people in treatment sessions, training programs and public lectures – that it is attitude, not technique, that will take you across the finish line.

Here are the eight essential attitudes of recovery. I will describe these attitudes briefly here. For an extended explanation, see Chapter 12 of Don't Panic: Taking Control of Anxiety Attacks, Revised Edition

1. Change "I can't let anyone know." to "I am not ashamed."

When you feel you have to hide your problem, then every time panic arises, you will begin to tighten up inside. You will try to contain it, not let it spill out, not let it be seen. When you attempt to contain panic, it grows. When you respect yourself, you can begin to make decisions based on what will help you heal, not what will protect you from others' scrutiny. When you make that change, you starve panic by supporting yourself and letting others support you through this tough time.

2. Change "Panic is evil, bad, the enemy." to "What can I learn as a student of panic?"

Who wouldn't be angry and rejecting toward something that produces such chaos in your life? Seeing panic as the enemy is a natural response. But we are trained to resist or fight enemies, that stance increases our problems with panic. Taking the stance of a student, who truly wants to learn, is a way to stop taking a resistant stance toward panic. If you are paying attention to how you can learn from panic, then you will stop fighting against panic.

3. Change "I want to avoid the symptoms." to "I want to face the symptoms to gain skills."

The only way to get the best of panic is to face the symptoms directly and practice your skills. The nature of panic is that it produces involuntary symptoms in your body. By voluntarily seeking out those symptoms, you take away its involuntary nature, and start to shift the control over to you.

4. Change "I must relax right now." to "It's OK to be anxious here."

Continuing our theme, once you choose to face your symptoms, then what do you do? When anxiety hits, your instincts tell you to get rid of it. It's the American way: "Don't just stand there, do something!" The more powerful intervention is, "Don't just do something, stand there." Take the permissive attitude of, "It's OK that I'm anxious right now." Accepting your anxiety in the moment when it occurs will reduce the anxiety. It takes away your internal demand to "relax now!" and helps you build your tolerance to times of discomfort.

5. Change "I must stay on guard." to "I won't guard myself against anxiety."

Panic leads people to become vigilant. Unfortunately, all this vigilance only contributes to your distress. You are tensing yourself up in anticipation of a problem. You can't remain anxiously on guard and simultaneously learn to control panic. To come out on top you must let down your guard. You must not pay such close attention to what might happen next. You must clear your head of its constant and frantic analysis.

6. Change "This is a test." to "This is practice."

When you decide to enter a previously difficult situation, do you say, "This will be a test of how well these new skills work?" As soon as you declare it a test, your body is going to secrete adrenaline, because you will be saying to yourself, "Uh oh, I'd better do well," while you simultaneously imagine yourself failing.

Consider any activity you engage in as "practice." Never view a future task as a "test" of your progress or of your ability to overcome panic. Never invest your sense of self-worth in the positive or negative outcome of your plans. When you decide that all your experiences are practice, you are, in effect, saying that you are both willing and able to learn from each of those experiences. You might fail to meet a certain goal by a certain time, but your intentions aren't a failure, and your efforts aren't a failure. They are the successful ways that people learn: setting goals and applying effort.

7. Change "I must be certain (that there is no risk.)" to "I can tolerate uncertainty."

Most problems with anxiety relate to a fear of uncertainty. You must find ways to accept risk and tolerate uncertainty. Whatever outcome you fear, work to find a way to accept that outcome as a possibility. If your panic symptoms mimic a heart attack, make sure your physician has ruled out any physical disorders that might be causing your symptoms. Once that is accomplished, you still can never reassure yourself that you absolutely won't have a heart attack in your life. There's always a chance you will have a heart attack, regardless of your

health. In that same way, there's always a chance you could die in a plane crash, regardless of the relative safety of air travel. There's always a chance you will leave the restaurant and become embarrassed. Your job is to lower your risk of problems as much as makes common sense, then accept the remaining risk that is not under your control.

8. **Change "This had better work." to "It's OK if it doesn't work."**

When you begin feeling uncomfortable anxiety, the attitude to aim for is, "It's OK that I'm anxious right now. I'm also going to fool around with getting rid of this anxiety. I'm going to try every trick and gimmick I know. I'm going to apply all my concentration, my tenacity, and my commitment to the task of getting rid of this anxiety. I'm going to use what I believe is the best combination of skills and attitudes for this specific type of anxiety. If it works, that'll be great. And if it doesn't work – if I'm still anxious – that'll be OK too." While the long-term goal in any self-help program is to diminish your anxiety, the immediate goal is to continually monitor your attitude – to accept exactly what you are experiencing, as you experience it. Freedom comes by saying "yes" to whatever trap life puts you in, then doing something to get yourself out. Any time one of your attempts fails, begin immediately to do the really hard work: accept that you are still stuck in discomfort. Take time to complete that task – of accepting the dissatisfying outcome – first. Then re-double your efforts to change that outcome next time.



These eight attitudes are not simply philosophical underpinnings. They are active workhorses in your healing process. Use them daily, just as you would any other self-help techniques.

THE EIGHT ATTITUDES OF RECOVERY

Expected Attitudes

Healing Attitudes

"I can't let anyone know."	➔	"I am not ashamed."
"Panic is evil, bad, the enemy."	➔	"What can I learn as a student of panic?"
"I want to avoid the symptoms."	➔	"I want to face the symptoms to gain skills."
"I <u>must</u> relax <u>right now</u> ."	➔	"It's OK to be anxious here."
"I must stay on guard."	➔	"I won't guard myself against anxiety."
"This is a test."	➔	"This is practice."
"I must be certain (that there is no risk)."	➔	"I can tolerate uncertainty."
"This had better work."	➔	"It's OK if it doesn't work."

Reid Wilson, Ph.D. was the keynote presenter at *Mental Health in Turbulent Times: Stressors and Solutions*, the Mental Health Association's 14th Annual Conference for Mental Health Professionals. Dr. Wilson's informative presentation attracted over 150 mental health professionals to this annual event. After receiving such tremendous evaluations to his presentation, we look forward to a future return appearance.

Dr. Wilson is author of *Don't Panic: Taking Control of Anxiety Attacks* and co-author of *Stop Obsessing! How to Overcome Your Obsessions and Compulsions*. He is a psychologist in Chapel Hill, North Carolina. He also operates the website www.anxieties.com.

For additional information on this subject visit the Depression and Related Affective Disorders Association online at www.drada.org.