

PROJECT FACT SHEET

Treating the Fear of Fear

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Anxiety sensitivity (AS) refers to the fear of anxiety-related sensations. AS is a personality characteristic and a known risk factor for anxiety disorders. AS also has been linked to such serious health issues as depression, substance abuse, and chronic pain. Now, two researchers have gained important insight into how to help people who suffer from what is, essentially, fear of fear.

Margo Watt, Associate Professor of Psychology at St. Francis Xavier University, and Sherry Stewart, Professor of Psychology at Dalhousie University, conducted a study to test the effectiveness of a brief cognitive-behavioural treatment in reducing high levels of AS.

Cognitive behavioural treatment (CBT) is a form of short-term, problem-focused psychotherapy that includes a combination of cognitive therapy (examining problematic thoughts, attitudes, and beliefs) and behavioural therapy, which focuses on behaviour in response to those thoughts. CBT's skills-based approach differs from more traditional psychotherapies that primarily aim to analyze and understand the underlying causes of the illness.

“Common CBT techniques include education about risk factors for anxiety, identifying and challenging maladaptive thoughts and beliefs, practicing relaxation techniques, and directly facing situations that can provoke anxiety,” says Dr. Watt.

More than 200 female undergraduate students, identified as being either high or low in AS, were randomly selected for participation in three one-hour, small-group sessions of either cognitive-behavioural treatment (CBT) or a non-specific treatment. CBT sessions included psychoeducation, cognitive restructuring, and exposure to anxiety-provoking symptoms. The results were impressive: participants with a high level of anxiety sensitivity who had been exposed to the CBT sessions were the only group to experience a significant reduction in AS levels.

Following the CBT session, these participants also reported a significant reduction in depressed mood, were less likely to abuse alcohol, and showed signs of reduced pain-related anxiety. These reductions were maintained at follow-up ten weeks later.

“Interventions such as this brief CBT program, designed to target a risk factor associated with substance abuse and chronic pain, could represent an important step toward developing a time and cost-efficient approach to the prevention and treatment of these disorders,” says Dr. Watt.

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