



Newsletter of Stonebriar Counseling Associates

▣ Negative Response To Fear

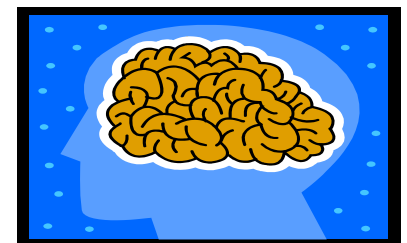
Healthcare professionals use terms like *fear*, *anxiety*, *panic attack*, and *phobia* to illuminate the spectrum of our fears. For our purposes, we will use *fear* and *anxiety* somewhat interchangeably but with the following distinctions. *Fear* is an immediate and intense internal alarm system that alerts us to the presence of danger. It revs up our whole being—body, mind, and emotions—and rivets our focus on one primary goal: protection. It prepares us either to flee from or fight against the perceived danger.

Anxiety is the pervasive feeling of apprehension that lingers long after the danger has subsided. This nagging feeling of dread uses a great deal of emotional energy worrying about future negative events that are both unpredictable and uncontrollable. We must remember that both short-term fear and long-term anxiety are complex, multi-layered responses to danger—whether immediate or anticipated, real or imagined. Fear can empower us for action, or paralyze us and make us more susceptible to the danger at hand.

Almost 50 years ago a young physician, Hans Selye (*Stress without distress*. New York: Signet Books. 1974), noticed

that sick people often had a series of symptoms, no matter what was wrong. He called it "the syndrome of just being sick." It seems to be the body's way of defend-ing itself against attack by disease or stress of any kind. *Three stages* are involved in what is now called the general adaptation syndrome or GAS. First, is the *alarm* stage: the body responds with panic--a "fight or flight" reaction. The hormones flow, the heart beats faster, we breathe harder, we sweat, our senses are more alert, we are ready for protective action--running or attacking. As we experience this defense today in the form of fear, anxiety, panic, anger, sadness, etc., we lose some of our mental alertness and organization. So a frightened speaker, being more prepared to run than talk, loses his/her train of thought or stumbles over their words. The nervous worker being watched by his/her supervisor fumbles with their tools. If the stress continues, our body enters the second stage, called *resistance*. Our body must stop being in a state of alarm; our body can't take it. So, the body attempts to adjust to the stress. We calm down a little, but the body is still working overtime; we may become more accustomed to being stressed but our concentration and decisions continue to be poor. If the stress is long-lasting (days, weeks, and months), our resistance is further worn down and our bodies become *exhausted* in the third stage.

We don't have the energy to continue the adaptation to the stress. The body gives up--parts may have been damaged, particularly the heart, kidneys, and stomach. We may die. Commonly, psychosomatic disorders (psychologically caused physical disorders) occur: fatigue, hysteria, aches and pains, high blood pressure, skin rashes, etc. Often we have trouble getting along with others. Mentally we may experience hopelessness, exhaustion, confusion or perhaps a serious mental disorder. Fear is often accompanied by such involuntary physical symptoms as muscle tension, rapid breathing, tremors, heart palpitations, and increased pulse rate. We don't choose these reactions. They automatically kick in when we sense that danger is close by. So, is fear merely an inherited biochemical, stimulus-response process, or is it acquired through our upbringing and personal experiences? The answer is, "Yes. It's both."



Medical research is unlocking the mysteries of the brain where we now understand that brain cells communicate by sending electrical impulses between the cells via brain chemicals called neurotransmitters. Scientists have

discovered a small almond-shaped cluster of cells called the Amygdala that functions as a control/reward center for our fear response. When alerted to danger, the Amygdala instantaneously activates almost every needed system within the body to deal with the danger at hand. But sometimes the system misfires and medical intervention is needed to restore balance in the brain. Physicians know that diminished levels of serotonin and other neurotransmitters can lead to undue levels of fear, anxiety, panic, and depression.



When an individual's fears are disproportionately resistant to their consistent efforts to take responsible actions to quell them—such as prayer, personal reflection, Bible meditation, journaling, and accountability--medications can be a valid tool to manage the biological component of fear, freeing them to work through the other factors involved in those fears.

▣ The Source of Fear

Fear is the first human emotion referred to after Adam and Eve sinned in the Garden of Eden in Genesis 3. After they disobeyed God by eating the forbidden fruit, God came looking for the first couple to take their customary evening walk together. Adam's response to God's inquiry about their whereabouts was: "I heard

You in the garden, and *I was afraid* because I was naked; so I hid" (v.10). Suddenly for the first time in their lives, fear gripped the hearts of Adam and Eve because of what they had lost and the One they had to face. The source of their fear arose from disobedience that brought about ***danger***, ***disconnection***, and ***desperation***. A key source of fear is when comfort and safety around us is lost. Fear involves not only the peril of ***danger*** but also the pain of loss. In fact, ***danger*** often translates into loss. We fear losing anything that we believe is vital to our survival. Whether those losses are our families, jobs, or possessions, fear is intensified because we know that it is only a matter of time before we lose everything and everyone we love. There is also a sense of ***desperation***. Adam lost control of his world. He was banished from the Garden, estranged from his wife, alienated from his God, and ***desperate*** to figure out how to survive in a hostile environment. Some of the people I counsel with report the feeling of being out of control. Dan Allender wrote,

"Different people fear different things with different levels of intensity, but all of us fear what we cannot control. . . . Fear is provoked when the threat of danger exposes our inability to preserve what we most deeply cherish."¹

Fear invades our most cherished relationships

because we have no real control over another person. This is especially true within marriages where a spouse fears that he/she is losing emotional and physical connectedness with their partner due to their partner's selfish choices. People are free to make their own choices. And where there is freedom, there is fear. Some spouses fear betrayal; others fear being ignored or unloved. Parents fear that their children won't turn out okay. Employees fear that the company will downsize. The troubles we face or fear to face may try to undermine our confidence in God's goodness and in His ability to help us when we are struggling (Heb. 11:6). And ***desperation*** will inevitably lead one to depend on something else (i.e. addiction, work, etc.) more than God for their sense of security and significance. Sadly, the fear of getting hurt will devour the joy of loving and serving others to the extent that it keeps us from entering into deep and meaningful relationships. Therefore the feeling of desperation may lead into ***disconnection***.

After Adam sinned he experienced the loss of his vital connection with God. He knew he was at risk. He was naked, but it was much deeper than that. He was emotionally, relationally, and spiritually cut off from his life-giving God. Whenever our sense of well-being is threatened, we experience the same dread of fear that Adam felt. We feel alone and vulnerable. ***Disconnection***

¹ Dan Allender and Tremper Longman, *Cry Of The Soul*, p.81

from God fuels our fearful struggle with insecurity, inadequacy, and self-doubt.

☐ The Internal Sabotage

One form of fear that distorts perception of ourselves and reality is *insecurity*. It strikes at the core for longing, acceptance and love. Those who fear abandonment- if seen for who they really are- desire to love others, but the frightening reality is that there is no guarantee that anyone will love them in return. They become terrified of being transparent to anyone who might not treat them tenderly. Ultimately, insecurity leads to a fear of intimacy and results in aloneness and/or withdrawal. Another fear that sabotages and distorts our perception of ourselves and reality is inadequacy. *Inadequacy* taps into our desire to make a significant difference in life—to know that we matter and that we can connect with life. Our "self" is a life-long accumulation of impressions. How we see and evaluate our "selves" and others' selves has a tremendous impact on self-acceptance, self-control, and acceptance of others. Certainly we humans have an enormous capacity to judge ourselves as bad or inadequate--dumb, mean, selfish, ugly, unlovable, hopeless and on and on (probably equaling our capacity to exonerate ourselves and deny our evilness.) It has been estimated that almost 90% of college students feel inferior

in some way.² Some of us know very well that demanding, judging part of us, called our "**internal critic**." It is a common source of low self-esteem. But we also have a "rational part." The rational part can confront the unreasonably critical part. We want to know that our life has meaning and purpose. We long to make our mark in the world. But past failures in our performance undermine our confidence that we will ever make the kind of difference in life that we dream of. Out of our feelings of insecurity and inadequacy come feelings of *self-doubt*. Upbringing, especially the impact of parents, goes a long way to shape our self-confidence. Doubters are paralyzed by the "what if's:"

- "What if I can't do anything right?" Better to think, "Look at how upset I am with this little setback, I must really be super."
- "What if I had studied, I would have done OK? Better to say, "Let's see how well I can do when I really try."
- "What if she/he will dump me?" Better to realize that this kind of thinking makes one doubt themselves and may hurt the relationship in the long run.

It's important to check out the accuracy of each critical thought. What is the objective evidence? *If* the individual sees that the internal critic has been overly critical or exaggerated their

² Hamachek, D. (1987). *Encounters with the self*. New York: Holt, Rinehart and Winston.

fault *and if* they understand what payoffs the critic is getting, they are better able to discount the critical thinking. This is especially true in a home where love and approval were based on performance. The demand for perfection is often the result. Often, underneath a perfectionist's flurry of activity is fear—the fear of failure ("I'll never be able to measure up and be enough") and the fear of success ("If I do succeed, I'll never be able to keep it going"). Doubters fear trying, so they quit. Author Gary Thomas accurately describes these people:

Many people choose safe lives in which failure (and therefore, real success) is highly unlikely. They never take risks, and they never fail; but they also die without any real service. They may never make a mistake, but they'll also never make a difference.³

Fear that strips an individual of the vitality and zest of life must be dismantled. But one must be careful not to handle fear in a way that aggravates instead of reduces the problem.



☐ Mishandling Fear

1. Dealing with fear in the wrong way can only make matters worse when trying to cover it up.

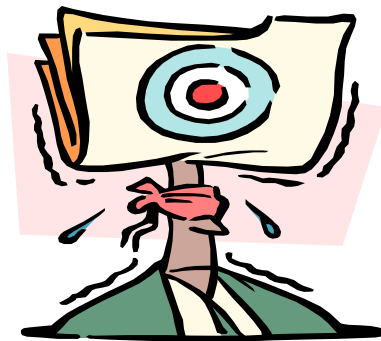
³ "Finding Fortitude," *Discipleship Journal*, July-August, 2002, p.36

A common reaction is to **mask** the fear with anger and aggression. Those who fear a loss of control often become the kind of take-charge people who themselves become guilty of being controllers. Husbands or wives turn into dictators toward one another in an attempt to seize and hold on to their perception that the other is unloving. A chronic fear of failure can also be covered by a **mask** of meticulous perfectionism. Life is a perpetual treadmill. The person works hard and strives, but never arrives. Life is hard work and frustration with little or no satisfaction. They constantly evaluate and even doubt their performance. They never allow themselves to be a liability to a group or to any particular individual. The problem with wearing **masks** is that a person loses his true identity and cannot relate sincerely with others.

2. **Minimizing** our fears by pretending that they are not important. In one particular session a woman had told me about a painful story of being totally ignored by her father when she was 8 years old. When I asked her how she felt as an adult looking back at that time in her life she replied, "It's no big deal, that's just the way things were in my family." This woman had totally minimized the fear—and rage—she felt toward her father. Not only did her pretending stifle her relationship with her father, but it was robbing her of the intimacy with her own

family, whose pain she also minimized.

3. **Exaggerating** our fears by making dangers bigger than they really are. Phobias, paranoia, and panic attacks are examples of exaggerated and disabling fears. Phobias, for example, are fears focused on specific situations or objects that are somewhat risky but pose no real threat of danger. Common phobias include getting on an elevator or airplane, driving in traffic, crossing a bridge, attending a party, or even shopping.



Phobias divert attention from the real issues that a person is avoiding by clouding them with a larger-than-life distraction. Sadly, these faulty strategies for dealing with fear will only intensify our fears. A better way is needed. When destructive fear is entrenched in our lives, we must remember that God is greater than all our fears. He desires to empower us to dismantle and demolish fear's strongholds in our lives (2 Cor. 10:4). Fear must be uprooted and the truth implanted so that we are freed not merely to survive but to thrive in a dangerous world (Jn. 8:32). Life is never risk free. But freedom from overwhelming fear empowers

us to enjoy all that God offers us in a fallen world.

Next month we will investigate how fear cripples interpersonal relationships and what steps are needed in order to learn from our fears instead of running from them. While fear comes in many forms it need not dismantle the joy of living. Whether immediate or anticipated, real or imagined, we have the choice of using fear to empower us for action, or to paralyze us and make us more susceptible to the danger at hand. That's why it's critical that we understand our fears.

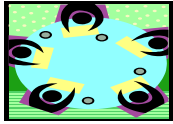
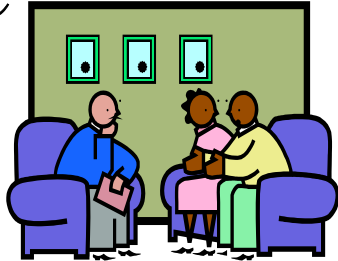
Bob Good, March 2005



Newsletter of Stonebriar Counseling Associates

From the desk of....

Bob Good



*Sexual Addiction Group Meeting
Tuesday Nights at 7:00 pm (SCA Office)*

Reclaiming Higher Ground: Facing Fears Within

A woman came to a divorce attorney. “Do you have grounds?” The attorney asked. “Oh yes, we have half an acre.” The lawyer paused, then continued. “Do you have a grudge?” The woman responded, “Oh no, we have a carport.” In desperation, the attorney plunged ahead, asking, “Does he beat you up?” She immediately responded, “Oh no, I always get up earlier than he does.” In exasperation, the lawyer shouted, “Madam, exactly why do you want a divorce?” Innocently she replied, “Because it is impossible to communicate with him!” Indeed we live in a world of uncertainty. And whether we are uncertain as to how people relate to us or how we relate to the world around us, one thing is certain—we cannot escape the emotion of fear. One of the most powerful enemies that lurks within each of us is an enemy that can strip away vitality and vision resulting in the chill of self-doubt that leads to withdrawal and demoralizing defeat. Our society is challenged as never before. Anxiety fills the air so thick we can feel it around us. Our sense of safety has been undermined, and along with it our sense of control. In this day and age, we live under the menace of global terrorism—car bombs, suicide bombers, and airplanes slamming into skyscrapers. We fear letters laced with anthrax, subways filled with sickening gasses, and snipers outside of shopping malls. No place is safe anymore. And while fear has global impact, it’s also intensely personal.

Fear wears many faces—being worried about what others may think of you, or being anxious about getting accepted at the college you’ve dreamed of attending, or being nervous while performing at a music recital, or refusing to speak in front of a crowd. Fear is the knot in the pit of your stomach that makes you wish you could just disappear. So how are we to respond when we feel afraid? Both this and next month we will be looking at the source of our fears, why we fear, how fear helps or harms us, and how we can overcome debilitating fears that hinder healthy living.

Sincerely,

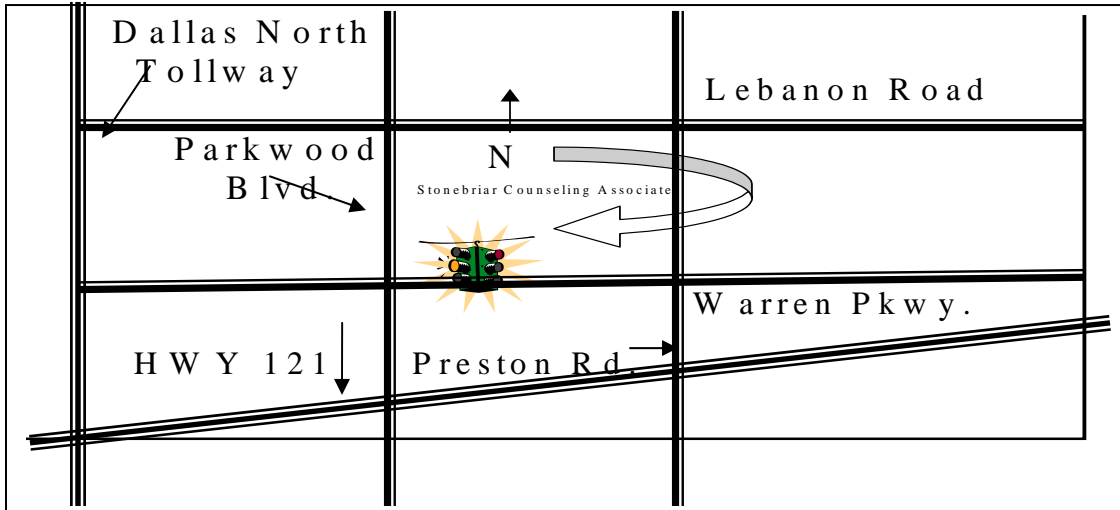
Bob



Check out Our New Web Site:
[www. Stonebriarca.com](http://www.Stonebriarca.com)



Come Visit Our Location!!



Mission Statement

Stonebriar Counseling Associates (SCA) is purposefully passionate in providing quality psychotherapy from a Christian perspective that influences the treatment of psychological, emotional, and mental health issues.

To this end, SCA is committed to glorify God by:

- Believing that each person has the innate ability for personal growth and wholeness.
- Seeking a variety of approaches to help you learn new skills and find more choices so as to manage life's changes with a broader range of solutions for recognizing your strengths.
- Accepting all people with respect and love regardless of age, sex, race, religion, ethnicity or socio-economic status.
- Thoughtfully affirming and carefully following the morals of the Christian faith and the ethics of the professional governing boards.
- Providing research and development for new and innovative programs, seminars, and workshops in order to further the well-being and self-sufficiency of each client.





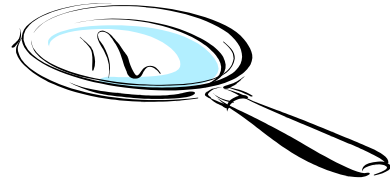
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Adults With ADHD

- ❑ Will often seek conflict with their ADHD child
- ❑ Frequent job changes
- ❑ Multiple relationships
- ❑ Move often (4 times more than others)
- ❑ Impulse control problems



Childhood abuse common in bipolar patients



Severe childhood trauma appears to have occurred in up to half of patients with bipolar disorder and warrants routine clinical assessment, say researchers. Childhood abuse has been associated with complex forms of adult psychopathological disorder, including suicidality, substance misuse and dependence, and psychosis, note Jessica Garno (Long Island University, Brooklyn, New York) and colleagues.

Married life boosts mental health



David de Vaus, from La Trobe

University in Melbourne, examined data from the Australian Bureau of Statistics 1996 National Survey of Mental Health and Wellbeing of Adults, which included information on over 10,600 men and women. The data revealed that married people were the least likely to suffer from mental health disorders overall, and any particular class of disorder. Divorced and separated adults were the most likely to suffer from mood and anxiety disorders, while never-married adults had the highest risk of drug and alcohol abuse.

Vaccine trial brings offer of hope for Alzheimer patients

A vaccine that could prevent the onset of Alzheimer's Disease has entered the first stages of clinical trials in humans. The Alzheimer's Research Trust hopes, if successful, the vaccine could be available



within four or five years. Harriet Millward, acting chief executive of the Alzheimer's Research Trust, said: 'Not only do the results indicate that the vaccine prevents the symptoms appearing, but that by breaking down the plaques, it may even reverse the effects of the disease.' She added: 'This is some of the most exciting research currently being undertaken into Alzheimer's disease.'



During the last 4 decades, the average U.S. citizen's buying power more than doubled. In 1957 the per-person after tax income: \$8500. By 2002 it was \$23,000. Did this increase in wealth increase one's happiness? Researchers have found that in 1957 35% of Americans said they were "very happy," as did slightly fewer-30%-in 2002.

Most People See Themselves As Better Than Average

Of Americans surveyed by U.S. News (1997), 19% thought O.J. Simpson is likely to go to heaven. They were more optimistic about Bill Clinton (52%), and Michael Jordan (65%). Of those taking the poll 87% believed they themselves were destined to enter the Pearly Gates.

Interestingly, the national surveys reflect an increasing overestimation of self:

- ❑ People are quicker to believe flattering descriptions of themselves than unflattering ones.
- ❑ They shore up their self-image by overestimating how much others support their opinions and share their foibles.
- ❑ They often seek out favorable, self-enhancing information.
- ❑ They exhibit an inflated confidence in their beliefs and judgments.

The American Paradox: Spiritual Hunger in an age of plenty, Myers, D.G., Yale University Press, 2000.