Introduction

Many personal decisions are made and problems solved through discussions with friends or family, a College Tutor or Director of Studies, a Nurse, Chaplain, colleague, line manager or a GP. However, at times it is right to seek help away from one’s familiar daily environment. The University Counselling Service exists to meet such a need. Seeking counselling is about making a positive choice to get help by talking confidentially with a professionally trained listener who has no other role in your life.

Who are the Counsellors?

The Service is staffed by a team of trained and accredited counsellors and therapists. The counsellors are all experienced in helping people from many different backgrounds and cultures, and with a wide range of personal and work issues.

Some of the counsellors who work in the Service are Associates, in the late stages of their counselling training. Their work is carefully supervised within the Service. Please let us know if you would prefer not to be seen by an Associate.

Contact us

University Counselling Service
Student Services Centre
Bene’t Street
Cambridge
CB2 3PT

Tel: 01223 332865
Fax: 01223 760990
Email: counsellingreception@admin.cam.ac.uk
Web: www.counselling.cam.ac.uk

Opening times

Mondays: 9:00 - 5:30
Tuesdays: 9:00 - 7:30
Wednesdays: 9:00 - 5:30
Thursdays: 9:00 - 7:30
Fridays: 9:00 - 5:00
Phobias – a CBT approach
Simple phobias, agoraphobia & social phobia

What are phobias?

A phobia is an excessive or unreasonable fear of an object, place or situation. Simple phobias are fears of specific things such as insects, infections, flying. Agoraphobia is a fear of being in places where one feels ‘trapped’ or unable to get help, such as in crowds, on a bus, or standing in a queue. A social phobia is a marked fear of social or performance situations.

Phobias are extremely common. Sometimes they start in childhood for no apparent reason; sometimes they emerge after a traumatic event; and sometimes they develop from an attempt to make sense of an unexpected and intense anxiety or panic (e.g. ‘I feel fearful, therefore I must be afraid of something’).

When the phobic person actually encounters, or even anticipates being in the presence of, the feared object or situation, they experience immediate anxiety. The physical symptoms of anxiety may include a racing heart, shortness of breath, sweating, chest or abdominal discomfort, trembling, etc. and the emotional component involves an intense fear - of losing control, embarrassing oneself, or passing out.

Commonly people try to escape and avoid the feared situation wherever possible. This may be fairly easy if the feared object is rarely encountered (e.g. fear of snakes) and avoidance will not therefore restrict the person’s life very much. At other times (e.g. agoraphobia, social phobia), avoiding the feared situation limits their life severely. Escape and avoidance also make the feared object/situation become more frightening.

With some phobias the person may have specific thoughts which attribute some threat to the feared situation. This is particularly true
for social phobia where there is often a fear of being negatively evaluated by others, and for agoraphobia when there may be a fear of collapsing and dying with no one around to help, or a fear of having a panic attack and making a fool of oneself in front of other people.

With some phobias there may be accompanying frightening thoughts (‘This plane might crash; I’m trapped; I must get out’). However, with other phobias it is more difficult to identify any specific thoughts which could be associated with the anxiety (e.g. it is unlikely that a spider phobic is afraid of making a fool of themselves in front of the spider).

**How to cope**

There are several counselling approaches to helping a phobic person. However, it may only be necessary to do anything about your phobia if it is severe or is interfering with your life and distressing you. The approach described here is based on cognitive behavioural therapy.

There are two components in treating a phobia effectively: firstly, confronting the feared situation and, secondly, dealing with any frightening thoughts that are associated with the anxiety.

*Confronting the feared situation*

It is important to stop avoiding the feared situation; rather it needs confronting while managing the level of anxiety. Because it can be very difficult to start in the midst of the feared situation, the usual approach is by a graded exposure. This means drawing up a hierarchy of threatening situations and confronting the least feared situation first before moving on to the more threatening ones.

For example, somebody with a phobia of spiders might use the following hierarchy:

1. Reading about spiders.
2. Looking at and then touching a photograph of a spider.
3. Looking at/touching a plastic model of a spider.
4. Looking at/touching a jar with a small spider in it.
5. Picking the spider out of the jar.
6. Picking up a large spider.

It is important to stay in the situation until the anxiety has gone and not to ‘escape’ when the anxiety is high (to do so would only reinforce the anxiety). This might take up to 20-30 minutes, but the anxiety will reduce and eventually disappear if you stay in the situation; you then start to learn that you can survive and even feel relaxed in this situation.

**Dealing with frightening thoughts**

If you can identify any threatening thoughts associated with your phobia, it is very helpful to try to write them down and ‘challenge’ them. For example:

<table>
<thead>
<tr>
<th>Frightening thoughts</th>
<th>Rational thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td>This plane will crash</td>
<td>I’ve flown many times before and nothing has happened. Statistically, this is the safest way to travel.</td>
</tr>
<tr>
<td>I’ll make a fool of myself</td>
<td>I’ve done this before and managed to cope - there is no reason why I cannot do so this time.</td>
</tr>
<tr>
<td>I’ll collapse and die</td>
<td>I have felt like this before and nothing terrible happened to me - this is just anxiety - it won’t harm me.</td>
</tr>
</tbody>
</table>

If the fear is of having a panic attack, read the leaflet on ‘Anxiety and Panic’. Anxiety is normal and it won’t harm you - the worst it can do is to feel very unpleasant. View each time you confront the feared situation as an opportunity to learn to overcome your anxiety in this way, rather than something to dread. When the anxiety has subsided, remind yourself that you have survived, and have not gone mad, lost control or died.

If your fears are about making a fool of yourself and being judged negatively, remind yourself of your positive qualities, and of the times in the past you have coped with similar situations, got on well with people, or have had positive comments from others. You may
very well be much more critical of your own imagined failings than those of others; also other people are likely to be far less aware and more accepting of your failings than you might assume. Anyway, it is not possible to get on with or be approved of by everyone.

**When and where to seek further help**

- If your phobias are interfering with your ability to lead a full, normal life and you don’t make any progress in challenging them yourself.

- If you are experiencing a lot of anxiety or distress, and you seem to be feeling like this often.

- If you are avoiding situations that matter.

- If you suffer from overwhelming blushing/trembling/sweating in social situations or feel that you lack social skills.

In these circumstances, see your college nurse or GP, or come to the University Counselling Service.

**Useful resources**

You’ll also find information on a range of resources to help address phobias, as well as other issues, on the University Counselling Service website: www.counselling.cam.ac.uk/selfhelp
Available Self Help Leaflets 2019

Anger Management
Anxiety and Panic
Asserting Yourself
Bereavement
Concentration - a CBT guide
Coping with Exams
Depression
Eating Disorders
Effective Communication and Managing Conflict
General Information for Students
General Information for Tutors
Homesickness
How to be Mindful
Insomnia
Intermitting
Loneliness
Managing Alcohol Consumption
Parental Separation and Divorce
Perfectionism - a CBT approach
Phobias - a CBT approach
Post-Traumatic Stress
Procrastination
Self-Esteem
Self-Harm
Sexual Assault and Harassment Advisor
Sexual Assault and Rape
Simple Relaxation
Transition to University
What Is Mindfulness
Worry - a CBT Approach