

Communication-Focused Therapy (CFT) for Anxiety and Panic Attacks

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Abstract—Communication-Focused Therapy (CFT) is a psychotherapy developed by the author, which can be applied to a number of mental health conditions, including anxiety disorder and panic attacks.

Index Terms—anxiety, panic attacks, communication-focused therapy, CFT, communication, psychotherapy, treatment

I. INTRODUCTION

ANXIETY is like any other emotion a heightened mental state with a higher probability of certain conscious processes and behaviors. In anxiety an individual dreads uncertain and often ill-defined events in the future or immediate future. It is not a fear of a specific event, but an unpleasant feeling of heightened arousal which can cause various thoughts and feelings of dread.

Some anxiety in life is normal and necessary for survival. It puts an individual into a more alert state and can help in processes that are directed at dealing with new situations. There is also an overlap between anxiety and excitement which may be difficult to distinguish. An anxiety disorder, on the other hand, is a condition in which the anxiety interferes with individual happiness and the ability to get one's own needs and wishes met.

A. Uncertainty

Anxiety requires a certain amount of uncertainty. It often occurs in situations when there is uncertainty about external events or situations, especially interpersonal ones, or uncertainty about one's own feelings, mental or physical states. Without feelings of uncertainty about oneself or the world there is no room for anxiety.

B. 'Out of Sync'

Individuals often are more likely to encounter anxiety when there is an underlying feeling that something or things in their life are 'out of sync'. This can occur in many situations in professional or private realms. However, often it is uncertainty and when something in life is out of sync. The uncertainty can often be as a consequence of interpersonal difficulties which can arise in a relationship, at the work place or another area in life.

A life is 'out of sync' if it does not correlate anymore with one's values, basic interests, aspirations, true needs, wants and desires. Through one's behaviors and thoughts one finds out more about oneself, but one does not have to know these parameters consciously in order to have a sense for what is meaningful in one's life, which, however, requires being connected emotionally to one oneself in a meaningful way. Individuals who are suffering from burnout, for example, often experience this disconnect.

C. Panic Attacks

Panic attacks are intense phases of anxiety and can often occur 'out' of the blue. Still, in any case, exploring and looking into the panic attack can often unearth reasons for the panic attack. Panic attacks are sudden periods of intense fear that may include palpitations, sweating, shaking, shortness of breath, numbness, or a feeling that something bad is going to happen. The maximum degree of symptoms occurs within minutes. Typically, they last for about thirty minutes, but the duration can vary from seconds to hours. There may be a fear of losing control or chest pain. Panic attacks themselves are not dangerous physically.

D. Communication

Communication is the key to resolving anxiety and panic attacks. Often, it may be emotions which have not been resolved or addressed yet. Emotional conflicts and getting used to anxiety, can trigger and maintain it. Anxiety can mean being outside the social network, outside the web of communication which is the web of life, where autoregulatory processes help life adapt n new, and often also novel, ways.

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E. Uncertainty

Communication also helps bring more certainty in the world. The more confidence one has in oneself to communicate effectively, the safer one feels in life and the more certain it seems. Being able to deal with a certain amount of uncertainty is important to come up with novel answers and solutions to problems or to be creative in any meaningful way.

F. Psychodynamic Psychotherapy and CBT

Both of these therapies have shown effectiveness in the treatment of anxiety and panic attacks. Both have theories about why they help. The former sees learning processes about certain thought processes as central, the latter psychodynamic processes that bring about a change. [1] However, they both neglect the communication process and changes in how people communicate as what ultimately helps. The difference to interpersonal psychotherapy is that the latter focuses more on the interpersonal setting than the actual communication processes.

II. ANXIETY

Anxiety is an emotion characterized by an unpleasant state of inner turmoil, often accompanied by nervous behavior, such as pacing back and forth, somatic complaints, and rumination. It is the subjectively unpleasant feelings of dread over anticipated events, such as the feeling of imminent death. Anxiety is not the same as fear, which is a response to a real or perceived immediate threat, whereas anxiety is the expectation of future threat. Anxiety is a feeling of uneasiness and worry, usually generalized and unfocused as an overreaction to a situation that is only subjectively seen as menacing. It is often accompanied by muscular tension, restlessness, fatigue and problems in concentration. Anxiety can be appropriate, but when experienced regularly the individual may suffer from an anxiety disorder.

People facing anxiety may withdraw from situations which have provoked anxiety in the past. There are various types of anxiety. Existential anxiety can occur when a person faces angst, an existential crisis, or nihilistic feelings. People can also face mathematical anxiety, somatic anxiety, stage fright, or test anxiety. Social anxiety and stranger anxiety are caused when people are apprehensive around strangers or other people in general. Furthermore, anxiety has been linked with physical symptoms such as IBS and can heighten other mental health illnesses such as OCD and panic disorder.

Anxiety can be either a short term "state" or a long term "trait". Whereas trait anxiety represents worrying about future events, anxiety disorders are a group of mental disorders characterized by feelings of anxiety and fear. Anxiety

disorders are partly genetic but may also be due to drug use, including alcohol, caffeine, and benzodiazepines (which are often prescribed to treat anxiety), as well as withdrawal from drugs of abuse. They often occur with other mental disorders, particularly bipolar disorder, eating disorders, major depressive disorder, or certain personality disorders.

A. Communication Confidence

Anxiety often occurs when the confidence to communicate one's needs, wishes or feelings is compromised. Humans learn early on that their well-being and survival depends on communicating their needs to others, originally their parents, later their work colleagues, friends, and romantic partners. Communication makes us feel safer in the world, because it is the main tool to get things we cannot get for ourselves.

III. COMMUNICATION-FOCUSED THERAPY (CFT)

Communication-Focused Therapy (CFT) was developed by the author to focus more specifically on the communication process between patient and therapist. The central piece is that the sending and receiving of meaningful messages is at the heart of any change process. CBT, psychodynamic psychotherapy and IPT help because they define a format in which communication processes take place that can bring about change. However, they do not work directly with the communication processes. CFT attempts to do so.

CFT has been developed for depression [2], OCD [3], psychosis [4], social anxiety [5], and many other conditions. Communication is also a process with relevance for diagnosis and medication [6].

A. Communication is Life

We engage constantly in communication. The cells in our bodies do so with each other using electrical current, molecules, vibrations or even electromagnetic waves. People communicate with each other also through a multitude of channels, which may on several technologies and intermediaries. It does not have to be an email. Spoken communication requires multiple signal translations from electrical and chemical transmission in the nervous system to mechanical transmission as the muscles and the air stream determine the motions of the vocal chords and then as sound waves travelling through the air, followed by various translations on the receiving end. At each end, in the sender and in the receiver, there is also a processing of information which relies on the highly complex networks of the nervous system. Communication, in short, happens everywhere all the time. It is an integral part of life. Certain communication

patterns can, however, also contribute to experiencing anxiety and panic attacks.

B. Autoregulation

Communication is an autoregulatory mechanism. It ensures that living organisms, including people, can adapt to their environment and live a life according to their interests, desires, values, and aspirations. This does not only require communicating with a salesperson, writing an exam paper or watching a movie, but also finding out more about oneself, psychologically and physically. Whether measuring one's strength at the gym or engaging in self-talk, this self-exploration requires flows of relevant and meaningful information. Communication allows us to have a sense of self and a grasp of who we are and what we need and want in the world, but it has to be learned similar to our communication with other people.

C. Future Directed

Communication bridges the present and the future, as well as the past and the present. It helps store information or transmit it to people somewhere else we have never met. The principle behind it is that information will be transmitted as long as the sender feels the message is relevant to another and/or oneself. Information endures as long as it is relevant to the people who communicate it. In an emergency information can get through because it is relevant, and the sender can expect help as long as he or she believes that the own emergency situation is relevant to others. The ability to communicate by various means, spoken, gestures, email, smoke and so forth, can thus make people feel safe, if they trust in their own skills and that their message will be relevant and meaningful to another. Patients with anxiety often have lower faith in either or both.

D. Trust

Trust in oneself is built through communication with oneself and others, together with a sense that one can get one's needs, wants and aspirations satisfied. A sense of competency is acquired through being able to send messages that seem meaningful to others. One only sees if another person finds the message relevant, but if it changes something and they act on it, one knows the message was also meaningful. Practice with communicating with oneself and others builds trust.

Building trust in oneself is an important component in the treatment of anxiety. A first step usually is that the patient can identify own needs and wishes, which is an important step in reconnecting with oneself. Feeling this reconnection is ultimately what builds more trust. If one is more connected with something, it becomes more predictable and closer to oneself.

IV. UNDERSTANDING ANXIETY AND PANIC ATTACKS

Anxiety and Panic Attacks are related to how people communicate with themselves and with others. They often occur when a relationship breaks apart or some other interpersonal change or issue causes. The result is often communicative patterns that are maladaptive to the individual. These changes in communication patterns are what causes then the problems to the individuals.

Often, there are already maladaptive communication patterns before, that cause the problems in the relationship or interpersonal interactions. These patterns can be analyzed and changed. Another important element is that communication can also take place on the inside of the individual.

A. Uncertainty

In life, one has to live with uncertainty. Uncertainty just means that there is no manual in the beginning and there are still unknowns which leave room for excitement and exploration. Life is a learning experience. An individual suffering from anxiety may have areas in life where she thrives on excitement, and other areas where images of worst case scenarios cause her to freeze when she just considers a change in action or any action at all. Uncertainty to someone suffering from anxiety seems to be bearable in some areas and avoided in others. Often, the areas where it is not tolerated feel meaningful only to the person suffering from anxiety.

B. Communication Deficits

Areas which people often feel anxious about are where there has been an issue with their interpersonal interactions in the past. Early traumata, like a disappearing or abusive parent, stay unresolved. For example, if a parent feels fearful and angry with himself and this is picked up by a child, the latter may decode these messages correctly in that the parent is angry, but since the parent may not be conscious about it, the child does not pick up on the second important half of the message, that the parent has a problem with himself and his issue is unrelated to the child. Of course, one can learn to pick up on the self-blame and frustration of the parent, and therapists should become experts at reading between the lines in this fashion, but it requires experience, reflection and insight into transference and counter-transference phenomena, for example, to use the psychoanalytic terms.

C. Avoidance

Anxiety can lead to avoidance, which in turn can attach even more anxiety to the situations or behaviors which are being avoided. In social situations, not interacting with others

deprives the person of continuously updating and honing the skills and confidence of interacting with others. Avoidance can thus lead to an increase rather than a decrease in anxiety in the long-run.

V. REVERSING THE DISCONNECT

The disconnect with oneself and others can be reversed quite easily. The fears that are connected with it are often the hardest obstacles to overcome.

A. Looking Back

Connecting with oneself means using all the information that is available to find out more about oneself. Previous life experiences and how one felt and feels about them can be helpful. It does not mean going back into traumata or reliving something, but finding what has been relevant and meaningful to oneself. From this one can gain insight into what is truly important to oneself. From there, it is usually quite easy to have some ideas about what to engage in more or less now and in the future.

VI. MEANING

Individuals suffering from anxiety and panic attacks often see less meaning in the things they do. In therapy an important part is to rediscover meaning, and find it in the things that are relevant to the patient. Relevant is anything that is close to his or her values, basic interests, aspirations, wants, wishes and desires.

A. Awareness of the Inner Workings of Anxiety

An important step in therapy thus to make the person aware of how anxiety affects one's thinking. Individuals from anxiety often focus differently from other individuals. There is often a focus on worst outcomes and strong fears which are caused by it. Underlying this are often strong emotions or conflicts which need to be defended against. The danger and uncertainty is quite frequently inside oneself, rather than on the outside. An individual with a fear of flying may be more afraid of not containing oneself and not being able to leave the plain than anything else. Anxiety is the fear of crashing oneself and the feelings of a dreaded uncertainty about oneself and one's emotional states.

This insight into the inner workings of anxiety is useful because it helps to formulate new strategies in interacting with oneself and with others.

B. Interacting with Oneself

Communicating with oneself should become meaningful in itself. After all, this is the most relevant exchange of information can have. But it cannot be separated entirely from one's interactions with one's environment. One cannot determine how one may feel in the presence of a bear, if one has not had encounters with large or potentially hostile animals. One cannot know what a good strategy for a relationship is, if one has never been in love with anyone. To explore the inner worlds, one needs to have interacted with the outside worlds.

C. Interacting with Others

Better interactions with others, which reduces anxiety, follows from better interactions with oneself. The reason is that since one cannot know the thoughts or feelings of another person fully, one will always project an element of oneself into the other person. We assume that another person will behave either as they did in the past or in a way that seems to us reasonable, if we judge the other person as reasonable. Thus, to a degree one interacts with oneself when one interacts with another person, while being corrected by the other person about one's assumptions as the exchange progresses. It is thus important to have a good sense of oneself to know what is a projection and what is not.

Interacting with oneself is also practicing communication, which helps in communicating with others. It is not a substitute for communicating with others, but helps in experimenting with different communication patterns. Also, since there are significant similarities among people on a more basic level, one's own reaction to a thought or feeling can be a good first indication of what another person might feel. This is how art, literature and films can excite multitudes because they touch what is shared by most people.

VII. EXPERIENCING THE WORLD

To break through the vicious cycle of anxiety, in which emotions like fear and anxiety cause safety thoughts and behaviors, which in turn reinforce feelings of fear, loneliness, sadness, and so forth, it is helpful to focus on identifying what is meaningful and having more of it in life. Communication helps in identifying and finding meaning, either communication with oneself or with others. The exchange of messages is like a learning process in which meaning can be identified, found and accumulated. Through meaningful interactions one accumulates more meaning, more connectedness with oneself and the world and reduces the need for thoughts and behaviors which are triggered by fears, guilt, self-blame and other negative emotions. This also helps against depression and anxiety.

Perceiving more meaning also makes interacting with others and oneself more meaningful. This has a positive effect on one's interaction patterns, how and in which one ways one relates to one's environment and exchanges messages with it.

VIII. VALUES, NEEDS AND ASPIRATIONS

Often, individuals suffering from anxiety or burnout have become uncertain about what is really important to them and the fit between these values and interests and their current life situation. Whether in the professional or romantic realms, getting what one needs and values makes happy in the long run. If I value helping people, it is important that I do that to make me happy.

Since values and basic needs remain relatively stable over time, knowing about them can give a patient a greater sense of safety about oneself. Having knowledge of them also helps in interacting with others, partly because one feels more secure about oneself and partly because having a clearer idea about one's needs also helps one to have a clear of others' needs.

A. Self-Exploration

The process by which one identifies one own needs and values is self-exploration. It means engaging in communication with oneself, being open and receptive to the information one is receiving from one's body and mind, while also being perceptive to one's emotions. The emotions can play an important role in gauging what is 'good' and what is not, because they are the end product of a large amount of information which has been integrated into them over time. Essentially all the information which is processed can end up in an information, which is not necessarily true for many thoughts.

IX. MEANINGFUL MESSAGES AS THE INSTRUMENT OF CHANGE

Communication is the vehicle of change. The instruments are meaningful messages which are generated and received by the people who take part in these interactions. In a therapeutic setting, keeping the mutual flow of information relevant and meaningful brings change in both people who take part in this process.

The therapeutic setting is a microcosm in which the internal world can be played out and the external world be experimented on. An important quality in the therapist is not to take anything that happens in this setting as personal. What happens in the therapeutic setting should be seen as relevant to that specific setting only, which can give the patient a greater sense of safety to bring the internal world out into the setting. By then experimenting and daring new patterns in the setting, the patient develops insight and builds confidence in the

communication process with oneself and others. It is the task of the therapist to support the dynamics of this process through observations, reflection, feedback, and by maintaining healthy boundaries between the therapeutic setting and the outside world. At the same time, the patient will carry more of the insight and skills gained into the therapeutic process into the outside world if it appears helpful and relevant.

X. PSYCHOTHERAPY

In patients with persistent insomnia, the addition of medication to CBT produced added benefits during acute therapy, but the long-term outcome appeared optimized when medication is discontinued during maintenance CBT. [1] Psychodynamic psychotherapy can be helpful in finding emotional conflicts or other causes that may be underlying the insomnia.

XI. CONCLUSION

Insomnia in many psychiatric conditions can be treated by treating the underlying condition. However, this may not always be the case, and then a combination of pharmacotherapy and psychotherapy may be the most helpful combination. At the same time, the patient's everyday life and adequate sleep hygiene should be discussed.

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