Listening to Anxiety and Depression

Many people access counselling services through their Employee Assistance Program because of anxiety and/or depression. These two mind states are often very closely related, like two sides of the same coin. Anxiety and depression are like the common colds of mental health. Everyone experiences these mind states to some degree from time to time. And like the common cold, anxiety and depression may be a passing thing depending on the emotional resilience and overall mental health of a person. The capacity to bounce back is a function of individual and social factors, including early childhood experiences, the quality of current relationships, rewarding work, adequate income and housing, nutrition, safety and security.

Anxiety and depression are such common terms we tend to take for granted what they mean. Let’s briefly define them for our purposes. Anxiety can be defined as “an emotion characterized by feelings of tension, worried thoughts and physical changes like increased blood pressure.” Anxiety has a future orientation; it is apprehension about something that may or may not happen in the immediate or distant future. The experience of anxiety can take various forms, and range from mild and occasional to severe and chronic. Depression can range from a feeling of being very sad, to a more severe state characterized by “inactivity, difficulty in thinking and concentration, a significant increase or decrease in appetite and time spent sleeping, feelings of dejection and hopelessness, and sometimes suicidal tendencies.”

The experience of anxiety and depression should not necessarily be seen as a mental health problem. A degree of anxiety can be a good thing. Research has shown that mild anxiety increases alertness and enhances performance. A depressed mood can serve the creative function of getting us to slow down and turn inward to be more reflective and “soulful.” A little more than a hundred years ago, the language of clinical psychology became the dominant form of expression about such mind states. It is the language of dysfunction and disorder. An alternative discourse, the language of poets, philosophers and spiritual figures reveals the inherent dignity and meaning these experiences may hold for us when listened to carefully. One of the functions of counselling and psychotherapy is to offer a safe place, provide time, space, and compassionate presence for an individual to explore the meaning within her or his suffering.

Anxiety and depression are built into the very fabric of our human organism; they have served an evolutionary purpose. Anxiety served our ancestors as an archaic early warning system. Anxiety reflects that fact that we learn from experience, and through imagination we are able to project into the future and anticipate challenging events (threats) that require us to mobilize our inner resources in order to survive.

Part of the reason anxiety is a problem for modern humans is that our organism evolved under constant threat of physical danger. The fight/flight/freeze response sends stress hormones coursing through our nervous system. Within our modern “first-world” circumstances the threats are not so much threats to our immediate physical survival. Yet the social and psychological threats we do face daily triggers that same archaic response. Chronic stress triggers a chronic anxiety response, which has very real emotional and physical health consequences.

Let’s call the kind of anxiety or depression most people experience occasionally or temporarily ordinary emotional distress. Most of us will admit to close friends or family members if we’ve been feeling unusually down or worried about something for more than a day or two. There’s no real stigma to this. Although many men, particularly to the extent that we subscribe to the traditional masculine ideal of always being strong and in control, will not even admit to ordinary emotional distress. This is to our disadvantage. It is usually very helpful to be able to admit or acknowledge ordinary emotional distress, because the simple process of naming it and talking about is often all that is needed to put things into perspective and help us shift back into what feels like a normal mind state. Women tend to be more willing to be vulnerable in this way. In this sense, vulnerability is strength.

The preceding discussion is not meant to trivialize the very real and potentially devastating distress of more severe states of anxiety and depression. A distinction may be made between ordinary emotional distress, mental health problems, and mental health disorders. In the case of ordinary emotional distress, self-help and social support strategies can help us make sense of, find meaning in, and provide needed relief from depressive and anxious symptoms.
Ongoing struggle may be an indication of as a mental health problem for which professional support like psychotherapy may be in order. Psychotherapy can help a person develop the skill to manage emotional distress more effectively. The term disorder is usually applied to the most severe forms of distress, and requires more intensive professional support.

These different terms reflect differences of both degree and kind. Mild but recurring depression has a different basis than for example, bipolar disorder. If not attended to, ordinary emotional distress may turn into a more serious mental health problem, depending on the various factors that have given rise to the psychological response or symptom. Each individual’s experience is unique. A good rule of thumb is this: When anxiety and/or depression interfere with the ability to carry on the normal functions of life, such as performing a job and maintaining healthy relationships, it’s time to seek help.

For most of us, most of the time, we can manage ordinary emotional distress though regular physical and mental hygiene; a combination of regular aerobic exercise, good nutrition, moderation in alcohol intake, and a generally mindful approach to living. A form of mental hygiene, psychotherapy has been shown by research to helpful and effective; at least as effective as medication.

There has been tremendous insight gained over the last 20 years or so into the nature of emotional distress through a cross-fertilization between neurobiological and psychological research into the nature of mind. One of the most prominent researchers in this field, Daniel Siegel, describes mind as something that cannot be reduced to mere brain chemistry. The mind - our conscious experience of ourselves as a centre of identity and intention -- emerges from the interaction between our embodied brain/nervous system and our interpersonal relationships, within a larger social, cultural, and ecological context.

Siegel defines mind more precisely as “an embodied and relational process that regulates the flow of energy and information.” There’s a lot packed into that statement.

Energy here includes, for example, overpowering emotions generated by the flight/flight/freeze response emanating from the brain stem in response to a real or imagined threat. It also refers to the flood of positive emotion that comes from holding a newborn baby. Information here refers to the biochemical and electrical signals encoded in our brains, and the symbolic capability (thoughts, memories, projections into the future) made possible by our higher brain functions in interaction with the realm of culture. The key point: emotional distress may be understood as reflecting difficulty with the mind’s natural capacity for emotional self-regulation.

For reasons such as childhood trauma, other shocks to the psyche, or the relentless grind of chronic stress, our capacity for emotional self-regulation becomes impaired.

The good news is there is strong evidence that mindfulness and psychotherapy can repair and restore the capacity for emotional self-regulation, increasing our ability to manage our emotional distress and increase our psychological and spiritual well-being. Mindfulness is a general term that encompasses many simple practices which are designed to strengthen our capacity for emotional self-regulation. Mindfulness is to the mind as physical exercise is to the body. The sidebar provides a bit more of a description of what mindfulness means. In a coming issue of FSEAP Solutions, I will offer some practical suggestions of how mindfulness may be incorporated into your daily life.

1 http://www.apa.org/topics/anxiety/
2 http://www.merriam-webster.com/dictionary/depression

What is Mindfulness?
The notion of mindfulness has become more common in the last few years. It is both ancient, through its relationship to Buddhist-informed meditation practices, and thoroughly modern, in its validation by modern neuroscience as an effective mental health promoting practice.

In a recent book entitled Wisdom and Compassion in Psychotherapy: Deepening Mindfulness in Clinical Practice (2012), Ronald Siegel and Christopher Germer describe mindfulness as follows:

In practicing mindfulness, “we’re less interested in changing the content of our personal experience than in changing our moment to moment relationship to our sensations, thoughts, emotions, and behaviour. This new relationship is characterized by... (1) awareness, (2) of the present moment, (3) with acceptance, or the awareness that emerges through paying attention on purpose, and nonjudgmentally, to the unfolding experience moment to moment. It particularly emphasizes acceptance: active nonjudgmental embracing of experience in the here and now... The opposite of mindfulness is resistance or experiential avoidance - warding off unpleasant experiences by tensing our bodies, getting stuck in our thoughts, avoiding distressing situations, or blocking out our feelings with psychological defenses. Although such reactions may reduce discomfort in the short run, they tend to amplify distress in the long run.”

For those interested in exploring mindfulness further, or obtaining practical resources to support mindfulness practice, a good place to start is:

http://www.mindfulnessstudies.com/resources/

For further assistance please contact fseap at 1-877-433-0701.

We offer confidential individual, group, and family counselling to all ages. During business hours counselling is provided in-person. Qualified counsellors can also be reached for phone counselling at the above number 24 hours a day, 7 days a week.

REMINDER: Should you need to cancel or rebook your appointment, please provide at least 24 hours’ notice.

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