understanding phobias
Understanding phobias

This booklet is for anyone who has a phobia, and their friends and family. It describes what phobias are, how they make you feel and what help is available.
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What is a phobia?

A phobia is an extreme form of fear or anxiety triggered by a particular situation (such as going outside) or object (such as spiders), even when there is no danger.

For example, you may know that it is safe to be out on a balcony in a high-rise block, but feel terrified to go out on it or even enjoy the view from behind the windows inside the building. Likewise, you may know that a spider isn’t poisonous or that it won’t bite you, but this still doesn’t reduce your anxiety.

Many of us have fears about particular objects or situations, and this is perfectly normal. A fear becomes a phobia if it lasts for more than six months, and has a significant impact on how you live your day-to-day life.

"It stops me living my life. Things that other people do without thought become huge ordeals for me."

What are the symptoms of a phobia?

The symptoms of a phobia involve experiencing intense fear and anxiety when faced with the situation or object that you are afraid of. If your phobia is severe, thinking about the object of your phobia can also trigger these symptoms.

"I have a phobia of mashed potato. I just feel sick if I even hear the word – even writing this has been difficult."

Symptoms of a phobia include:

Physical symptoms
- feeling unsteady, dizzy, lightheaded or faint
- feeling like you are choking
What types of phobias are there?

- a pounding heart, palpitations or accelerated heart rate
- chest pain or tightness in the chest
- sweating
- hot or cold flushes
- shortness of breath or a smothering sensation
- nausea, vomiting or diarrhoea
- numbness or tingling sensations
- trembling or shaking.

Other symptoms
- feeling out of touch with reality or detached from your body
- a fear of fainting
- a fear of losing control
- a fear of dying.

If these symptoms are very intense, they could trigger a panic attack. (See Mind’s booklet Understanding anxiety and panic attacks and Mind tips for better mental health: panic attacks for more information.)

Experiencing this type of acute fear is extremely unpleasant and can be very frightening. It may make you feel stressed, out of control and overwhelmed. It may also lead to feelings of embarrassment, anxiety or depression.

As a result, many people with phobias avoid situations where they might have to face their fear. While this is an effective strategy to start with, avoiding your fears often causes them to become worse, and can start to have a significant impact on how you live your life.

What types of phobias are there?

Phobias can develop around any object or situation. They can be roughly categorised into two groups:

- specific (simple) phobias
- complex phobias
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Specific (simple) phobias

These are phobias about one thing, such as spiders or flying. They often develop in childhood or adolescence, and for many people they will lessen as they get older.

This list shows some of the more common phobias. However, there are many more:

- animals (such as dogs, insects, snakes, rodents)
- the natural environment (such as heights, water, darkness)
- situational (such as flying, going to the dentist, tunnels)
- body-based phobias (such as blood, vomit, injections)
- sexual phobias (such as sexual acts themselves or a phobia of nudity).

If you are afraid of something you have to see or do a lot, this can start to have a serious impact on your everyday life.

I have a phobia of eating due to the fact that I am convinced that I will choke to death if I eat any solids. I always eat baby food or milkshakes [and] smoothies. [This] has a major impact on my day-to-day life as I cannot go out for a meal, on holiday or to any social occasions.

If you have a phobia about something you do not come into contact with very often, this can often have less of an impact on you. However, you may still experience fear and anxiety even when the object or situation is not present, meaning that your phobia can still affect you on a day-to-day basis.

I have emetophobia (fear of vomit). Even just hearing people cough freaks me out as I think they're going to vomit.

Complex phobias

Complex phobias tend to have a more disruptive or disabling impact on your life than specific (simple) phobias. They also tend to develop when
you are an adult. Two of the most common complex phobias are social phobia and agoraphobia.

**Social phobia**
If you have social phobia (also called social anxiety or social anxiety disorder), you will feel an extreme sense of fear and anxiety in social situations. This may be connected to one specific situation, such as public speaking, or it may be that you are afraid of talking to or being around other people in general.

“I cannot answer the phone or open letters and the stress makes me sweat until I cannot look people in the eye.”

A lot of people find social situations difficult, or feel shy or awkward at certain times, and this is completely normal. If you have social phobia, you will feel a sense of intense fear in social situations, and will often try to avoid them. This can be extremely debilitating and make it very difficult to engage in everyday activities like going to work and seeing friends or to do regular tasks like shopping and going to the bank. These phobias can also make it very difficult to seek support, particularly if you are not able to phone or meet with people who could help you with them.

**Agoraphobia**
Agoraphobia is widely thought to be a fear of open spaces, but it is more complex than this. The essential feature of agoraphobia is that you will feel anxious about being in places or situations that it would be difficult or embarrassing to get out of, or where you might not be able to get help if you have a panic attack.

This anxiety will then result in you avoiding a variety of situations that may include:

- being alone inside or outside the home
- being in a crowd of people
- travelling by car, bus or plane
- being on a bridge or in a lift.
This can have a serious impact on the way you live your life, and many people with agoraphobia find it hard to leave their house. It is common that if you experience agoraphobia, you might also dislike being alone (monophobia). You may also become anxious in small confined spaces (claustrophobia).

“I’ve had a varying amount of agoraphobia for many years, which comes and goes depending on how my depression and anxiety is. In recent years, I seem to have developed a fear of being touched by anyone other than close friends or family, and a general fear of most people/strangers.”

What causes phobias?

There doesn’t seem to be one particular cause of phobias, but there are several factors that might play a role:

- Particular incidents or traumas. For example, someone who experiences a lot of turbulence on a plane at a young age might later develop a phobia about flying.
- Learned responses, picked up in early life. You might develop the same specific phobia as a parent or older sibling. Factors in the family environment, such as parents who are very worried or anxious, can have an effect on the way you cope with anxiety in later life.
- Genetics – some people appear to be born with a tendency to be more anxious than others.
- Responses to panic or fear. If you have a strong reaction, or panic attack, in response to a particular situation or object, and you find this embarrassing or people around you react strongly, this can cause you to develop a more intense anxiety about being in that situation again.
- Long-term stress can cause feelings of anxiety and depression, and reduce your ability to cope in particular situations. This can make you feel more fearful or anxious about being in those situations again, and over a long period, could lead to you developing a phobia.
How can I help myself?

I have a huge phobia of driving after being in a car accident... This phobia affects all aspects of my life. I miss out on social events if it means driving somewhere I’m not comfortable with... I am unable to do daily tasks such as driving to the supermarket at busy hours of the day.

You might find that it is helpful to try and work out a specific cause for your own phobia, but you might equally feel that there is no simple explanation.

If you avoid the object or situation that is making you phobic, this will often make your fear worse over time. However, it can be extremely difficult to face your phobia, and you may need professional help to enable you to do this. (See ‘What treatments are available?’ on p.11 for more information.)

How can I help myself?

There are various techniques you can use to address your phobia and reduce the impact it has on your life.

Learn to manage panic and anxiety

Learning to manage the panic and anxiety you feel as a result of your phobia can help you feel more in control and less anxious about facing the situation or object you fear.

Relaxation techniques can help you to reverse the effects of the anxiety you feel as a result of your phobia. There are many different relaxation techniques available, ranging from meditation to breathing control and stretching. (See Mind’s booklet How to manage stress for more information.)

You might also find it helpful to learn mindfulness techniques. Mindfulness is a way of paying attention to the present moment, using techniques
like meditation, breathing exercises and yoga, and can help you learn to manage stress and focus on the present moment. Be Mindful has more information and details of local classes around the UK (see ‘Useful contacts’ on p.17).

"Take one day at a time. Don't dwell on yesterday or live in tomorrow. Take each moment as it comes."

If you experience panic attacks, learning to manage these can help to reduce the anxiety you feel about facing the situation or object you have a phobia of. (See Mind’s booklets Mind tips for better mental health: panic attacks and Understanding anxiety and panic attacks for more information.)

Join a support group
A support group gives you the opportunity to share common experiences and methods of coping with others who are facing similar challenges. It is sometimes very comforting to know that you are not alone, and other people may be able to suggest different ways of coping. Mind or No More Panic can help you find a suitable local group (see ‘Useful contacts’ on pp.17–18).

You can also access support groups online. This can be particularly useful if there are times when you can’t leave the house or if you find it hard to talk to people on the phone or face-to-face. Websites of national support organisations – such as Mind’s Elefriends community or Anxiety UK’s forum – can offer support, and are monitored to make sure they are safe. (See ‘Useful contacts’ on p.17 and Mind’s online booklet How to stay safe online for more information about how to use these resources safely.)

Use self-help resources
Self-help books or online programmes can be very helpful for people coping with phobias. They are often based on the principles of cognitive behaviour therapy (CBT) (see p.12) and will help you to develop your
own programme to reduce anxiety and make it easier to face your fear. There are many available – search online or contact an organisation like Anxiety UK or No More Panic for more information. (See ‘Useful contacts’ on pp.17–18.)

When should I get help?

It can be difficult to know when to seek treatment. If avoidance of the object, activity or situation that triggers your phobia does interfere with your everyday life, or keeps you from doing things you would otherwise enjoy, it’s time to seek help. Consider getting treatment for your phobia if:

- it causes intense and disabling fear, anxiety or panic
- you recognise that your fear is excessive and unreasonable
- you avoid certain situations and places because of your phobia
- your avoidance interferes with your normal routine or causes significant distress
- it stops you getting support for other health problems, for example by using the phone or seeing the doctor
- you’ve had the phobia for at least six months.

What treatments are available?

If you want treatment for your phobia, the first place to go is normally your GP. They can provide an assessment and explain what treatments are available. If you find it hard to get to the GP for an appointment, they should also be able to provide an assessment over the phone or in writing.

Your GP should explain all of your options to you, and your views should be taken into account before starting any treatment.

There are three main types of treatment for anxiety and panic disorders recommended by the National Institute for Health and Care Excellence.
(NICE) (there are no guidelines specifically written about phobias). These should be included in your options:

- talking treatments
- medication
- advice and information about self-help – such as self-help books or online programmes, support groups or relaxation.

If you are finding it hard to access treatment, you may find it useful to have an advocate – someone who can listen to you and speak for you when it is helpful. A member of your family may act as an advocate, or you can ask about an advocacy service. (See Mind’s booklet *The Mind guide to advocacy* for more information.)

**Talking treatments**

There are different types of talking treatments that may be offered to treat a phobia. Some phobias, such as a fear of flying or driving, are so common that there are therapists who specialise in treating them. (See Mind’s booklet *Making sense of talking treatments* for more information.)

Your GP should be able to explain what options are available and may refer you for treatment. Unfortunately, waiting times for talking treatments on the NHS are often very long, so you may choose to see a therapist privately. The British Association for Counselling and Psychotherapy (BACP) and The British Association for Behavioural and Cognitive Psychotherapies (BABCP) both have lists of accredited practitioners (see ‘Useful contacts' on p.17). Some offer a reduced fee for people on a limited income.

**Cognitive behaviour therapy**

Cognitive behaviour therapy (CBT) aims to identify connections between thoughts, feelings and behaviour, and to help develop practical skills to manage any patterns that might be causing you problems. (See Mind’s booklet *Making sense of cognitive behaviour therapy* for more information.)
When CBT is used to treat phobias, it should include a range of different techniques, including a technique called exposure therapy (or desensitisation). Exposure therapy involves gradually exposing you, in a safe and controlled way, to the object or situation that you fear. For example, if you have a phobia of going to the dentist, you might read about the dentist, then look at a picture of a dentist’s chair, sit in the waiting room and talk to the dentist, before finally sitting in the dentist’s chair.

“I have been helped by a course of CBT. We looked at the circle of fear and did exercises to combat the fear... I'm not cured by any stretch of the imagination but I'm definitely better than I was. I only wish I'd done it sooner!"

Through repeated experiences of facing your fear, you feel an increasing sense of control over your phobia.

“I used to be scared to pick up the phone and go shopping alone, but practice helped and boosted my confidence."

This technique needs to be carefully managed to avoid causing distress and anxiety, so it is important that you understand the treatment fully and feel comfortable with your therapist.

You may also be offered a programme of CBT using a workbook or a computer, which you can follow either by yourself or in addition to sessions with a therapist. This might be particularly helpful if you experience social phobia, telephone phobia or agoraphobia, as you can complete the therapy in your own home.

**Hypnotherapy**

Many people who have phobias find hypnotherapy helpful for relieving their symptoms. The Complementary and Natural Healthcare Council (CNHC) has a register of hypnotherapists who have trained to national standard level. (See ‘Useful contacts’ on p.17.)
Community services

If initial treatment is not helpful, you may be referred to a Community Mental Health Team (CMHT) where you will be given a more thorough assessment of your health and social care needs, and a potential care plan for any future treatments. (See Mind’s online booklet The Mind guide to community-based mental health and social care for more information.)

Medication

If your phobia causes significant anxiety, you may be offered medication to help you deal with this. Currently, there are three classes of drugs considered useful in managing anxiety. These are:

- antidepressants
- tranquillisers (benzodiazepines)
- beta-blockers.

Antidepressants

The most commonly prescribed drugs are selective serotonin reuptake inhibitor (SSRI) antidepressants, such as paroxetine (Seroxat), citalopram (Cipramil) and escitalopram (Cipralex). These drugs can be helpful, but may also have side effects that include sleep problems and increased anxiety. If SSRIs don't work or aren't suitable, you may be offered a tricyclic antidepressant, such as imipramine HCI or clomipramine.

If you have social phobia, you may be offered the reversible MAOI (monoamine oxidase inhibitor) antidepressant, moclobemide (Manerix). MAOI antidepressants interact dangerously with certain foods, and a warning about which foods to avoid is given with the drugs in the Patient Information Leaflet (PIL).

All of these drugs may take several weeks to work. They may also cause side effects, which your GP should discuss with you. When you stop taking the drugs, you may experience withdrawal symptoms, such as dizziness, tingling, an upset stomach or headaches. It is therefore
important to reduce the dose slowly. (See Mind’s booklet *Making sense of antidepressants* for more information.)

**Tranquillisers**
If you experience very severe anxiety that is having a significant impact on your day-to-day life, you may be offered a benzodiazepine tranquilliser, such as diazepam (Valium), to reduce anxiety. Benzodiazepines can be addictive, so they should be taken at a low dose and for a short period of time, preferably as a one-off dose and for no longer than four weeks. (See Mind’s online booklet *Making sense of sleeping pills and minor tranquillisers* for more information.)

**Beta-blockers**
Beta-blockers such as propranolol are sometimes used to treat the physical symptoms of anxiety, such as a rapid heartbeat, palpitations and a tremor (shaking). However, they are not psychiatric drugs, so they don’t reduce any of the psychological symptoms. They may be helpful in certain situations if you have to face a phobia, such as going on an aeroplane.

Beta-blockers can cause side effects, such as sleep problems and nightmares, but they don’t have withdrawal symptoms and are not addictive. Because of the effects they have on the heart and blood pressure, you should stop taking them gradually, by slowly reducing the dose.

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**What can friends and family do to help?**

*This section is for friends and family who want to support someone who has a phobia.*

**Be supportive**
Try not to be dismissive or laugh about your friend or family member’s phobia. You may not understand why they are so afraid of something, but the anxiety and fear they are feeling is very real. It can be very distressing if other people don’t take these experiences seriously so try to be supportive and sympathetic.
Find out what helps

“I feel better if I have someone with me who knows about my anxiety and how to calm me down. It helps if I just focus on that person talking.”

Ask your friend or family member what you can do to help. For example, it might help to take them out of the situation, talk to them calmly or do breathing exercises with them. Often knowing that there is someone around who knows what to do if they start to feel frightened or panicked can help them feel safer and calmer.

“I never go into situations that affect me without one of a small handful of people I trust completely who can deal with my panic attacks and the fallout. They get me to sit down and do my breathing exercises and, once the panic attack is over, immediately get me home to a 'safe' environment where I can recover and sleep.”

Don’t apply pressure

While avoiding a situation can make a phobia worse over time, it can be extremely distressing if someone is forced to face situations when they are not ready. Don’t put pressure on them to do more than they feel comfortable with, or force them to face their phobia.

“For years, I’ve had social anxiety problems and my family were, for the most part, not helpful – forcing me into uncomfortable situations and making me feel like there was something wrong with me.”

Encourage treatment

If your friend or family member’s phobia is becoming a problem for them, encourage them to seek appropriate treatment by talking to a GP or therapist.
Useful contacts

Mind
Mind Infoline: 0300 123 3393
(Monday to Friday 9am to 6pm)
email: info@mind.org.uk
web: mind.org.uk
Details of local Minds and other local services, and Mind’s Legal Advice Line. Language Line is available for talking in a language other than English.

Anxiety UK
tel: 0844 477 5774
web: anxietyuk.org.uk
Information and counselling. Offers a helpline and online support for people with anxiety and phobias.

Be Mindful
web: bemindful.co.uk
Explains the principles behind mindfulness, and gives details of local courses and therapists.

British Association for Behavioural and Cognitive Psychotherapies (BABCP)
tel: 0161 705 4304
web: babcp.com
Lists accredited CBT therapists.

British Association for Counselling and Psychotherapy (BACP)
tel: 01455 883 300
web: bacp.co.uk
Information about counselling and therapy. See sister website, itsgoodtotalk.org.uk for details of local practitioners.

Complementary and Natural Healthcare Council (CNHC)
tel: 020 3178 2199
web: cnhc.org.uk
Lists hypnotherapists and other complementary healthcare practitioners.

Elefriends
web: elefriends.org.uk
Mind’s safe, supportive online community where you can listen, be heard and share your experiences with others.

National Institute for Health and Care Excellence (NICE)
tel: 0845 003 7780
web: nice.org.uk
Guidance on phobias, anxiety and panic disorders.
Understanding phobias

No Panic
tel: 0800 138 8889
web: nopanic.org.uk
Information and support for people with phobias, panic attacks and anxiety disorders.

No More Panic
web: nomorepanic.co.uk
Information and online support for people experiencing anxiety disorders, panic and phobias.

Triumph over Phobia (TOP UK)
tel: 0845 600 9601
web: topuk.org
Help for people with phobias.
Further information

Mind offers a range of mental health information on:
• diagnoses
• treatments
• practical help for wellbeing
• mental health legislation
• where to get help

To read or print Mind’s information booklets for free, visit mind.org.uk or contact Mind Infoline on 0300 123 3393 or at info@mind.org.uk

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This information was written by Celia Warin and Sam Challis

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Mind
(National Association for Mental Health)
15-19 Broadway
London E15 4BQ
tel: 020 8519 2122
fax: 020 8522 1725
web: mind.org.uk
Mind

We're Mind, the mental health charity for England and Wales. We believe no one should have to face a mental health problem alone. We're here for you. Today. Now. We're on your doorstep, on the end of a phone or online. Whether you're stressed, depressed or in crisis. We'll listen, give you advice, support and fight your corner. And we'll push for a better deal and respect for everyone experiencing a mental health problem.

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info@mind.org.uk
mind.org.uk