Attachment 5.3
Generalized Anxiety Disorder: What Is It and What Can Be Done About It?

What Exactly is Generalized Anxiety Disorder?

You have been diagnosed with generalized anxiety disorder. This means that for more than six months, you have frequently been anxious due to worries about everything. Sometimes you worry about your health, other times about the chance that you or a loved one will have an accident or illness, and then again about your work. You find it difficult to manage these worries. Often, you can't stop overthinking. This constant worrying makes you feel restless, rushed, or irritated. The fretting makes you quickly tired and irritable, and your muscles are constantly tense. Your worries also make it hard to concentrate or remember things; you have trouble falling asleep, often wake up in the night, or wake up unrested.

Is it Common?

Yes, generalized anxiety is common. It's estimated that over five percent of people will experience it in their lifetime. Unfortunately, the diagnosis is often 'missed' and treated as a physical problem. This is because many people suffering from this disorder visit their doctor due to their nervousness, fatigue, or sleep problems.

Is Worrying about it Bad?

No, not necessarily. Risks and dangers are a part of everyone's life. Worrying about them has its good sides. You try to find solutions or take actions to reduce the likelihood of feared situations occurring. 'Normal' worries prepare you well for exams, prevent you from impulsively buying an expensive house, make you look both ways before crossing the street, and ensure you file your taxes on time. So, nothing wrong with that.
However, for people with generalized anxiety disorder, it's not about 'normal' worries. Often without any clear danger, you feel anxious, tense, and nervous. You endlessly worry about what could happen to you or important others like your partner, children, or parents. You may lie awake at night worrying about these situations, while others seem not to worry at all. Once one feared problem passes, the next worrying issue naturally arises. For example, if you see a TV program about a Legionella infection in a nursing home, you fear your parents will also get infected. Out of concern, you frequently call them to ask how they are and whether they should visit the doctor. If you're given an important task at work, you lie awake wondering if you can handle it. You become increasingly afraid of making a mistake, as it could lead to dismissal or even bankruptcy of your employer. Hearing from a neighbor that her sister's daughter had a traffic accident, you worry every day whether your children will come home safely. You might go to school to check if they've arrived safely or have them call you when they do. And so, there's always something to worry about.
You want to stop the worrying, but it's usually not possible. Sometimes you find distraction, like through sports or watching a thrilling movie, but as soon as you relax, the thoughts return.
Where 'normal' worrying leads to finding solutions and undertaking helpful activities, the worrying in someone with generalized anxiety disorder actually prevents them from thinking

clearly about solutions and dealing effectively with problems. The worrying is counterproductive: for example, you might not be able to study for an exam because your

concentration is disrupted or you're too tired from worrying. This can lead to things going wrong, which in turn leads to new worries. This way, you get caught in a vicious cycle.

Is There a Solution?

Various forms of psychotherapy have been effective for generalized anxiety disorder, especially cognitive behavioral therapy. A form of cognitive behavioral therapy specially developed for this disorder, called 'metacognitive therapy', will be offered to you. The developer of this method, Adrian Wells, discovered that the content of the worries in people with generalized anxiety disorder is similar to that of other people. He also found that people with this disorder have positive and negative beliefs about worrying itself, the so-called metacognitions. He concluded that it's not the content of the worries that leads to complaints or problems, but the way a person thinks about worrying. Therefore, he developed a treatment that aims to change the beliefs about worrying. Scientific research has since shown that this approach is more effective than treatments focusing on the ever-changing content of the worries.

What Beliefs About Worrying Exist and How Do They Arise?

In metacognitive therapy, a distinction is made between positive beliefs about worrying and negative beliefs. An example of positive beliefs about worrying is: 'Worrying can help me prevent problems.' Worrying is thus seen as useful or helpful. Such beliefs arise because you have linked worrying to the positive outcome of one or more feared events. If you pass an exam you worried about, you might attribute that success to the worrying: 'The worrying at least prepared me well' or 'Because of the worrying, I thought of everything, and that's why I didn't failed.

What happens in metacognitive therapy?

In metacognitive therapy, the beliefs about worrying are addressed. By first changing the negative beliefs about worrying, anxiety and tension decrease. By then changing the positive beliefs about worrying, you will use worrying less as a helpful strategy for problems. You are also taught other ways to deal with difficult situations. Therefore, the treatment offered to you is primarily focused on the beliefs about worrying and much less on the constantly changing content of the worrying. In the beginning, this can certainly be difficult because you are anxious and worried about various issues and want to talk to your therapist about these issues. Your therapist will certainly pay attention to this but will then work to clarify your beliefs about worrying. Your therapist repeatedly asks about your thoughts on worrying in the situations you bring up.

"What exactly happens in the treatment?

Here are some general characteristics of metacognitive therapy for people with generalized anxiety disorder:

- Metacognitive therapy is short-term: the treatment described here consists of a maximum of fourteen 45-minute sessions.
- Metacognitive therapy is practical and goal-oriented: work is done according to a fixed treatment plan towards pre-determined goals.
- In metacognitive therapy, the focus is on learning skills: the treatment consists of learning skills to view worrying differently.
- Metacognitive therapy involves self-work: to learn the skills well, you need to practice. Your therapist will make homework arrangements with you.
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Furthermore, metacognitive therapy consists of four phases:

- In the first phase, you learn to recognize your negative and positive beliefs about worrying. An example of a homework assignment in this phase is making a list of pros and cons of worrying.
- In the second phase, you learn to examine and change negative beliefs about worrying. For example, you learn, using a registration form, to consider the accuracy of your negative beliefs and possibly formulate more appropriate beliefs. You are also asked to perform experiments to check if your beliefs about worrying are correct. For instance, you might be asked to postpone worrying until a fixed, predetermined time. As soon as worrying starts, you tell yourself, 'I can worry at 8:00 PM.' Then at 8:00 PM, you recall the themes that occupied you that day to start worrying about them. If you manage to postpone the worrying, this challenges the belief that worrying is uncontrollable.
- In the third phase, you learn in the same way to examine and, if possible, change positive beliefs about worrying (e.g., 'Worrying keeps me sharp and alert') in the same way as in phase 2.
- In the last phase, you learn ways to deal with new information other than worrying about it. You are also taught to stop using safety behaviors (such as asking for reassurance) and to give up avoidance behaviors (such as no longer reading newspaper articles about burglaries in the neighborhood or not watching TV programs about diseases)."