



On the other hand, some people might have the same experience and develop Cynophobia. Such a person would probably be unable to see the dog



bite as an isolated incident. Instead of being 'filed away' in their memory, the attack would haunt them, they would mentally relive it again and again.



Unsurprisingly, the individual would start looking at dogs in a different way. Despite only one dog's being involved in the attack, the person would attribute *all* dogs, from tiny, Toy Poodles to Great

Danes, with not only the *ability* to bite but also the *desire* to bite them. This is where irrational thinking comes into play. The Cynophobic truly believes that dogs will single them out for biting, at any and every opportunity. Whilst it's true that any dog *could* bite, we know that there are old, toothless dogs, blind dogs and friendly dogs. We also know that there are also vicious dogs, snappy dogs and dogs that are just plain mean. The phobic can no longer make this distinction: to them, all dogs bite and any dog encountered is going to bite, period.

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Phobia = $Fear^2$

What might you say to this person? Avoid dogs? This action can be taken as read for a Cynophobic, the avoidant behaviour will have begun. But the dog attack will prey on the phobic's mind, in every idle moment of every single day. The fear caused by the bite will have become an insoluble anxiety. As we know, anxiety and fear cause bodily changes. We all feel these as a natural response and we know that they go away. But the poor phobic tends to have these feelings frequently enough to forget that they go away. Consequently, the fear of dogs is joined by another problem, the fear of the feeling of fear, which is what the equation entitling this section is about.

It's easy to understand that the phobic finds this constant anxiety very distressing and also extremely tiring. Whilst the phobic may initially be able to fight this anxiety, the more they fight, the more tired they become and so, the fight becomes harder still. This in turn leads to yet more agitation and anxiety, to still more upsetting bodily feelings and ultimately, to panic attacks.

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Phobia Triggers

The above is a very simple example and suggests that a phobia can begin because of an unpleasant or frightening experience involving a particular object or situation. While this can be - and often is - the reason for a person's developing a phobia it isn't the only way in which phobias begin.

Often, people say that a phobia comes 'out of the blue' - it starts one day for no apparent reason and quickly grows into a major problem. This is, naturally, confusing, because the individual concerned has no idea why they have become phobic. So, can this be explained? Yes it can, though not necessarily simply. In fact, phobias don't develop for no reason at all, they develop for no *logical* reason. A long period of severe stress, an unresolved childhood fear, an unrelieved frustration and an insoluble life problem can all lie behind the beginning of a phobia. What's more, knowing the originating problem doesn't always help because the phobia may bear little relation to it.

In any case, phobias develop and are classified into two groups...

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Specific Phobias

A specific phobia involves a feared object or situation which can be seen,

felt, touched, smelt or heard. Specific phobias, therefore, involve *concrete* objects or situations and it isn't surprising that these are the best known of phobias.

The list of specific phobias is practically endless. People develop phobias of spiders, snakes, cats, wasps and virtually any other creature that you can think of. Some of these creatures are harmful, some are not; some are indigenous to places where people live and some aren't. The fact that, say, a mouse is very unlikely to do anyone any significant harm and will certainly be more frightened of a human being than the human being is frightened of it means nothing to the Musophobic. Equally, the fact that a



feared creature is not indigenous to the area where the phobic lives and would probably die in any unfavourable climate is equally unimportant. In phobia, people cannot apply rational thinking.



Moreover, creatures are not the only things about which phobias can occur. People can develop phobias of anything from air sickness to X-rays. In between are phobias of heights, water, bridges, cars, lightning, needles and or injections, dentists, doctors, the feel of buttons or velvet, dirt, fish and so on. These are all recognisable entities but the list doesn't finish here. I have talked about events and situations and these can also be the object of phobias. So, there are people who fear having surgery, those who fear heights or being near tall buildings, or being driven in a car, or travelling by any means where they are not in control. Again, the list goes on and on.

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Complex Phobias

If specific phobias are of specific objects or situations, why aren't all phobias specific? In one sense, they are: all phobias relate to a given object or situation. However, the complex phobias, which include agoraphobia and social phobia, are more deeply-rooted than are specific phobias.

The concept of a complex phobia is difficult to understand but it is most easily explained by contrasting it with a specific phobia. Our theoretical Cynophobic could gain some respite from their fears by going to a safe place - perhaps their own home - where it is known that there are no dogs. In a complex phobia such as agoraphobia, the problem cannot be escaped. Whilst 'home' may be seen as 'safe', the agoraphobic can suffer inexplicable panic attacks, feelings of unreality, depression, feelings of faintness *as well as* the feelings usually associated with anxiety. Naturally, the presence of these upsetting feelings, even in a 'safe' place, soon makes that place that place feel not quite as safe anymore.

Every agoraphobic has what I call a *Radius of Operation*, which simply means the area in which the agoraphobic feels safe. Where agoraphobia remains untreated or is not receiving appropriate treatment, this radius of operation becomes smaller and smaller. The phobic may eventually stop going out of the house and some get to the stage of remaining in one room often the bedroom. Even then, anxiety symptoms may still occur so it can be seen that agoraphobia can be extremely limiting.

Many people think that agoraphobia is a fear of open spaces. In fact,

'agoraphobia' literally means 'Fear of the Market Place'. So, rather than being about places, agoraphobia is more about people. Specifically it is about control in the form of dignified escape. The fear that drives agoraphobia is the fear of collapsing, panicking or somehow making a scene in a public place. This is often worse where that place is particularly crowded.

In this respect, agoraphobia shares some of its elements with social phobia. We are all a little wary in social situations, especially ones that are new to us. But for the social phobic, even previously familiar gatherings can be torture. Shakespeare wrote that, 'All the world's a stage' and social phobics take this literally. So, a social phobic is constantly afraid of what other people think of them.





Unlike agoraphobics, social phobics fear revealing the small 'giveaways' to others. They become concerned about whether their trembling hands will be noticed,



whether they might start blushing furiously, or stumble or stammer. To a social phobic, the public world is a mass of eyes, watching and waiting for them to do something embarrassing. If all the world is a stage, then social phobics have chronic stage fright.

The limitations of social phobia mean that a sufferer tends to appear inordinately shy to others. Things that others would laugh off, such as dropping something or spilling a drink are deadly serious matters to a social phobic and so, sufferers take refuge in avoidant behaviour. Paradoxically, it is rare for a social phobic to actually commit even the smallest gaffe in public. The problem is that they *believe* that they will.

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How many people develop phobias?!

This question depends on the phobia and its characteristics but approximate figures can be given, in terms of adult populations...

Agoraphobia - Up to 5%

Social Phobia - 1 to 2%

Specific Phobia - 2 to 3%

The interesting point about these figures is the disparity between agoraphobics and those with specific phobias. A maximum difference of only 3% may seem small, until the vast range of specific phobias is considered. This underscores the fact that agoraphobia is the most common phobia.

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Are Phobias Something New?!

Absolutely not. The Greek physician Hippocrates was alive over 300 years before the birth of Jesus and described a man who, '...through bashfulness, suspicion and timorousness, will not be seen abroad...he thinks every man observes him.' This description of social phobia is nearly two and a half centuries old!

Then, there are the famous phobics, who are to be found throughout history...

Augustus Caesar...Fear of Cats.

King James I...Fear of Unsheathed Swords.

King Henry III of France...Fear of Cats.

Feydeau (French Playwright)...Morbid Fear of Daylight

Sigmund Freud.....Anxiety Symptoms, Fear of Travel.

And right up until the present day...

Aretha Franklin (Singer)...Agoraphobia.

Joanna Lumley (Actress)...Fear of Water

Ainsley Harriot (TV Chef)...Fear of Snakes

Ian Wright (TV Presenter)...Fear of Enclosed Spaces

Wendy Richard (Actress)...Fear of Spiders

Robson Green (Actor)...Fear of Wasps

Kim Basinger (Actress)...Agoraphobia

Phil Jupitus (TV/Radio Presenter/Comedian)...Fear of Spiders.

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Phobias' Names

Many people come to these pages with a phobia for which they don't know the name. The naming of phobias is not very scientific: some are referred to with modern names, some with Greek names and some with a mixture of the two.

Some phobias don't even have a name but this doesn't mean that they don't exist. So, you may have one of the better known phobias, such as Arachnophobia (fear of spiders) or Ailurophobia (fear of cats). But if you have a fear of warehouses, wardrobes or the feel of peach skin, don't worry that the phobia isn't named. It exists and can be treated; these are the aspects that really matter.

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Are Phobias a Sign of Madness?

The internal world of a phobic can be incredibly distressing. This world, populated by dark images, half-detected fears and doubts and uncertainties, leads many who experience it to feel that they may be going insane.



Were it possible to transfer the thoughts and

feelings of a phobic to a person with no experience of a phobia, that person would almost certainly feel that their world was falling to pieces, around them and inside them.

But are phobics 'mad', are they going insane, are they going crazy? The answer is no. Regardless of how unbalanced a phobic's world may seem,



there is no evidence for significant organic changes in their physiology.

'Madness' is an archaic term for insanity and insanity involves radical changes, malformations or damage in brain structure and/or brain chemistry. Although there is evidence of unusual activity in phobic's brains, this creates changes only over a very long period of time and even then, such changes are not significant.

Phobics and those suffering anxiety disorders are not mad, nor will their problems make them go mad.

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