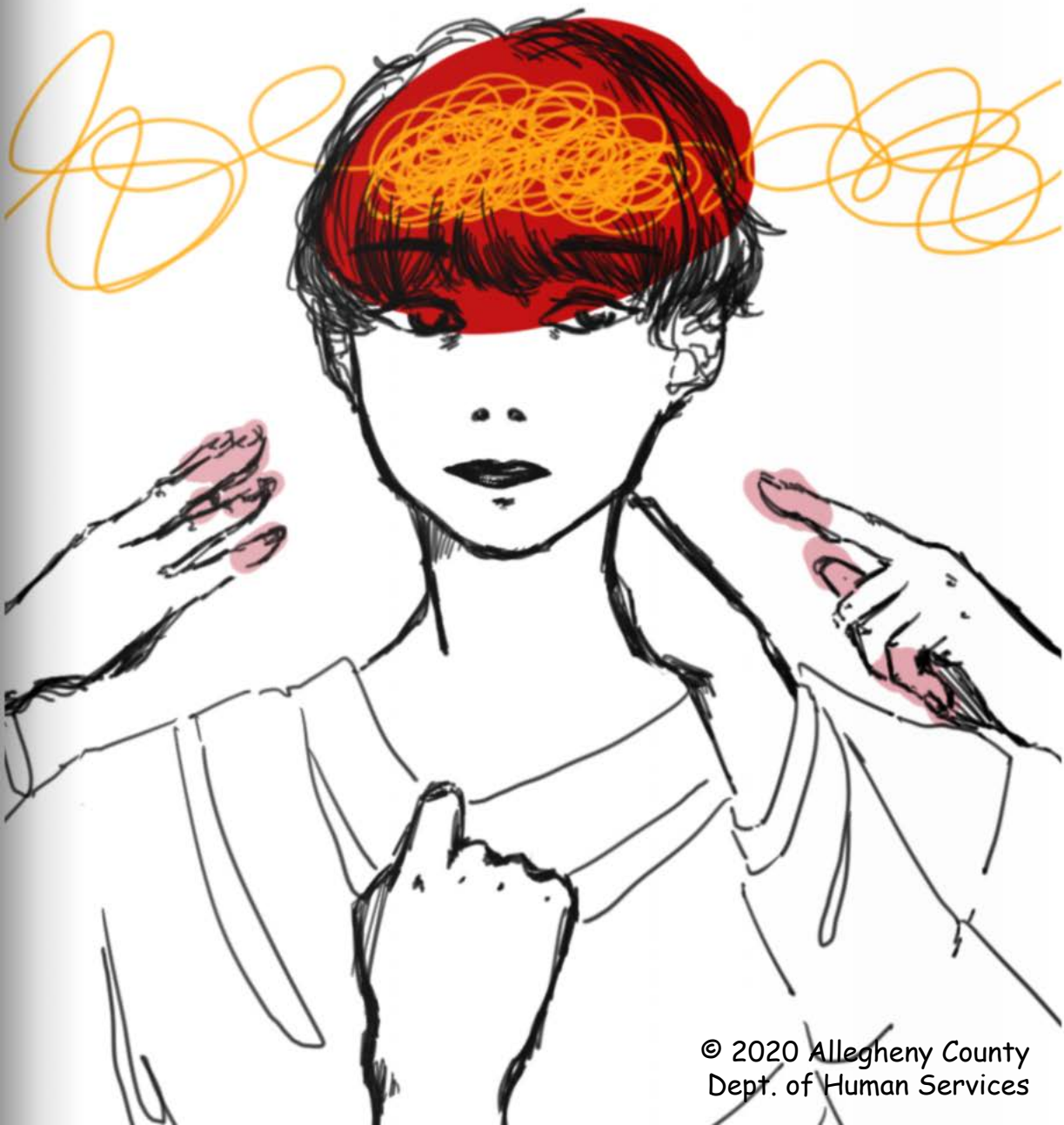


The FundaMENTALS

A Youth Guide to Mental Health

Panic Attacks and Anxiety

Stand Together 2020



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Dept. of Human Services

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Credits

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Introducing a new edition to the Stand Together program....

WELCOME TO OUR STAND TOGETHER SUMMER PROGRAM! WE'RE TAKING THE FIGHT AGAINST STIGMA TO THE VIRTUAL PLATFORM WITH THE HELP OF OUR DIFFERENT SCHOOLS. THIS PROGRAM IS A COLLABORATION OF STUDENTS FROM DIFFERENT SCHOOLS WORKING TOGETHER TO SPREAD AWARENESS AND EDUCATION ABOUT MENTAL HEALTH CONDITIONS AND SUBSTANCE USE DISORDERS. THIS VIRTUAL PROJECT HAS TWO PLATFORMS:

Zines

The first step to spreading awareness is education! Take a read at our Zines or 'mini magazines' to learn more about specific disorders, read interviews with both mental health professionals and people with lived experience, updated resources, and more! Each edition will focus on a different condition to help provide you with information that may be helpful to you, and others around you.

Podcast

Students share their personal experiences to help encourage others to talk about mental health and substance use disorders. Join them for their variety of discussions ranging from stigma and media perception, to bringing in mental health professionals to help answer questions. Take a look at the episodes they have out so far:

<https://www.youtube.com/watch?v=cfisE7XqGK0&t=14s> - This podcast contains mentions or descriptions of a panic attack, self harm, abuse and trauma, depressive episodes, intrusive thoughts, and body image issues.

<https://www.youtube.com/watch?v=5miWmCqVbXk&t=4s> - High school students Caitlin, Brendan, Kara, Riley, and Ella discuss how different forms of media portray mental health. These can be both positive and negative.

**#stand
together**

Education

There is **general anxiety** (excessive anxiety and worry over various situations that causes difficulty in daily tasks) and phobias (extreme anxiety and fear focused on one object or animal) that interferes with someone's life

Physical symptoms of anxiety can include lightheadedness, sweating, nausea, shortness of breath, fatigue (may experience no physical symptoms)*

Some treatment options include therapy, medication, yoga, acupuncture, exercise, and massage therapy**

Anxiety Disorders

excessive and unrealistic fear about everyday tasks, events, objects, or people

Anxiety can be caused by brain structure/chemistry, constant stress, traumatic events, genetics, and drug/alcohol abuse**

Panic attacks are sudden attacks of fear (fear of disaster or losing control) that consist of a racing heart, chills, trembling, trouble breathing, chest pain, and tingly/numb hands***

Ways to help a loved one dealing with anxiety are providing validation, expressing concern, asking them if they need help, and encouraging them to receive help if they deal with symptoms for an extended period of time**



References

* <https://www.hopkinsmedicine.org/health/treatment-tests-and-therapies/how-to-help-someone-with-anxiety>

John Hopkins Medicine seeks to deliver the promise of medicine. They want to improve the health of the community and the world by setting the standard of excellence in medical education, research and clinical care. John Hopkins Medicine educates medical students, scientists, health care professionals and the public, conducts biomedical research, and provides patient-centered medicine to prevent, diagnose, and treat human illness.

** <https://www.everydayhealth.com/anxiety/guide/>

Everyday Health bridges the gap between lifestyle and medical websites by delivering trusted health information and resources along with the stories, tips, tools, and insights of the day's most influential and compelling voices, role models, and celebrities. They are committed to providing our audience with trusted, real-world, evidence-based health information from the nation's leading healthcare providers and patient advocates, alongside personal patient perspectives and health consumer insights from those on the front lines, in real time.

*** <https://www.nimh.nih.gov/health/publications/panic-disorder-when-fear-overwhelms/index.shtml>

The National Institute of Mental Health (NIMH) is the lead federal agency for research on mental disorders. NIMH envisions a world in which mental illnesses are prevented and cured.

Resources

The National Alliance on Mental Illness (NAMI)

<https://www.nami.org/Home>

The nation's largest grassroots mental health organization dedicated to building better lives for the millions of Americans affected by mental illness.

Anxiety and Depression Association of America

(ADAA) <https://adaa.org/>

International nonprofit organization dedicated to the prevention, treatment, and cure of anxiety, depression, OCD, PTSD, and co-occurring disorders through education, practice, and research.

The Mighty

<https://themighty.com/>

The Mighty is a digital health community created to empower and connect people facing health challenges and disabilities.

Mythbuster

TIME TO BUST SOME MYTHS! READ MORE TO LEARN THE COMMON MYTHS AND MISCONCEPTIONS REGARDING PANIC ATTACKS AND ANXIETY!

1. Panic attacks are an overreaction to stress and anxiety.

False.

People who have panic attacks are **not** overreacting to anything because that would imply that they have control over their symptoms, which they do not. People with panic disorder have attacks randomly with no warning. Expected anxiety or nervousness from situations are **not the same** as having a panic attack.

2. Panic attacks can only happen while the person is awake.

False.

While most panic attacks do occur while the person is awake, there are **nocturnal panic attacks**. Nocturnal panic attacks cause symptoms that can cause the person to wake up.

3. You can die from a panic attack.

False.

Panic attacks are **not** life-threatening. Although, panic attacks may cause symptoms that **imitate symptoms** of serious medical conditions.

4. You can completely overcome anxiety disorder using only a self-help approach.

False.

Although it may help for some mild cases of anxiety disorder, it does not **completely** cure anxiety disorder. Actually, it's one of the most common reasons why people struggle with anxiety long term.

Mythbuster Sources

Myths about panic attacks: <https://www.verywellmind.com/common-myths-about-panic-attacks-2584405>

Myths about anxiety: <https://www.anxietycentre.com/anxiety/myths/self-help-anxiety-materials-alone.shtml> • Editor's Note: Anxiety can be caused by environmental, behavioral, or biological factors

Interview

People asked us questions on Instagram, and here are some answers from our peers!

1. How long did your symptoms persist until you went to get your diagnosis?

- I had symptoms of social anxiety for a year before being diagnosed at 3. Then, I had symptoms of general anxiety starting at age 9 and got diagnosed at 12.
- I've always really had anxiety, but specific things started to happen for me. For example, I would get very nauseous on the bus, even if I would be excited for things that day or not actually feel nauseous at all. That's when I went to the doctor, but I wish I would have gone sooner.
- For my anxiety and depression symptoms, I noticed it was problematic in my daily life for about a year or so before I went to my therapist
- 2 years
- They've persisted since 2014 and I got diagnosed in January 2020
- I have always had body image issues, but it wasn't until middle school that they made me so depressed that I went to get a diagnosis.



2. what do you do during a panic attack?

- I try to do the 5 things method. 5 things you can see, 4 things you can feel, 3 things you can hear, 2 things you can smell, and 1 thing you can taste. Sometimes, I will expose myself to something hot or cold to bring me back to reality.
- When I have a panic attack, it helps me to go to my friends and try to breathe with them. Other things I have learned are naming 5 things around you, such as colors, white objects, etc. I, also, try to pretend to smell flowers and then blow out a candle for breathing.
- Try to block out external stimuli like sound and feelings and scents because they overwhelm me, lay down and try to breathe
- Regulate my breathing and do things that make me calm
- Practice face diving (putting your face in cool water helps calm your body instinctively) and use distractions like breathing exercises.

3. What does anxiety look like to you?

- Anxiety to me is like a constant cloud over my head. It makes me think to the extremes of things, and I think about every possible outcome in a given situation good or bad. It makes me very conscious and self-aware of things, but it can be too extreme at times.
- Anxiety is almost the constant worry of things small or big. It's like being nervous for a test except it's most of the time and a little more extreme. It's different for a lot of people and so are panic attacks. I've had panic attacks where I would hyperventilate, and then, I have had panic attacks where it would feel like my throat was closing up. So, it depends on the person. I was nervous to talk to my doctor about my anxiety because I didn't want to be "one of those people" that self-diagnoses, but so many things I thought were normal for everyone have gotten better because I went to the doctor.
- Constantly assuming the worst/thinking I'll make a mistake or that I'm doing something that's weird or wrong all the time. Overthinking everything and when it's at its worse I get nauseous, weak, and my heart races.
- Feeling the pressure of all 97 things I have to do at once, and feeling like each one has to be worked on now. I overthink things a lot. Physically, my panic attacks involve hyperventilating, my heart racing, my throat closing up, and crying and shaking.



4. Do you think some people intentionally/unintentionally misuse the word "anxiety"?

- Yes 100%. But, some people really do truly have it. Some fake it for attention, which, then, makes the people who are actually struggling be undermined by others.
- Yeah. In a way, I think some people just get nervous for a speech (which people with anxiety do, but to an extreme) and think they have anxiety because of it. I definitely think that people do sometimes do it for attention or even to undermine others that truly do have it. However, I don't think that happens as often as people who have a couple of symptoms and automatically think they have it. It's definitely frustrating for people who are diagnosed because it feels like we're getting treated a little bit like a joke.
- Not really, I think anxiety is common enough and people know enough about it to say that they have a lot of symptoms of anxiety and maybe the disorder itself.
- Way too often it's used as a noun in common conversation when in reality it's more serious
- Absolutely, just like depression, people popularize these two mental illnesses
- I think people use the term "panic attack" incorrectly often, but anxiety itself is generally understood pretty well.



Stigma

Stigma is the disapproval of a person based on perceivable social characteristics. There are three types of stigma. Structural stigma is the expectations, cultural norms, and institutional practices that ultimately constrain the wellbeing of individuals in stigmatised groups. Social stigma refers to the negative social norms that cause people to reject or discriminate against individuals who are different. Self stigma is negative self-talk that can lead to isolation, denial of symptoms, and rejecting treatment.

Some common misconceptions that lead to stigma against people with anxiety is the notion that they can simply snap out of it or that anxiety isn't a real mental illness. Additionally, people can view their anxiety as a personal weakness. The stigma surrounding anxiety results in about 40% of people with anxiety not seeking medical help. In order to combat the stigma surrounding anxiety and other mental health issues is to educate yourself and others, don't use stigmatizing words, and be aware of your own judgemental thinking you may have. It's also important to provide (S.H.E.) support, hope, and encouragement for people you know who may be suffering from anxiety.

Resources

**911 if it is a
matter of life
and death**

Mental Health

Resolve Crisis Line 1-888-796-8226

**National Suicide
Prevention Lifeline** 1-800-273-TALK(8255)

**Transgender Suicide
Lifeline** 1-877-565-8860

The PA Crisis Text Line Text "PA" to 741741

**Allegheny County Peer
Support Warmline (not
for crises)** 1-866-661-WARM (9276)

Resolve Crisis Line 1-888-796-8226

**Pennsylvania Department
of Drug and Alcohol
Programs Crisis Hotline** 1-800-662-HELP (4357)

Drug and Alcohol