



## Panic Stations

### Module 3

## **The Thinking-Feeling Connection**

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## Introduction

People often believe that the feelings and emotions they experience are determined by external events, situations, and the behaviour of others. For example, we may hear ourselves say, “My boss made me so nervous,” “My partner made me so angry,” “This trip down south made me feel so relaxed,” or “I’m depressed because I didn’t get the job I wanted.” What is the assumption underlying these statements? That someone or something other than ourselves was directly determining the feelings we experienced.

We come to these conclusions automatically without asking ourselves if this assumption is true. However, if we stop to analyse the process that links an external situation to our emotional responses, we will find that there is a step in between.

The aim of this InfoPax module is to describe how thoughts can influence emotions. Learning how thoughts can influence the way we feel is the first step in understanding how we can change that process to improve our mood.

## How Our Thoughts Influence Our Feelings

What really makes us feel and respond the way we do, is often not the situation or the words and actions of another person, but how we perceive that situation or that person’s actions. It is how we see something or someone and what we think about it or them that really influences how we feel. It is our thoughts and beliefs about an event that significantly influences our emotions and actions.

Here’s an example. You’ve had a long and tiring day at work and arrive home to find two sets of muddy footprints (your son’s and his dog’s) on your cream-coloured carpet. If you thought, “I can’t believe that I have to come home to this. That inconsiderate, selfish brat!” - how would you feel? What if you thought, “I’ve told him not to bring the dog in but he never listens. I try so hard, but I just can’t get them to do what I ask. I must be a really bad mother.”

You probably realised that you felt different emotions as a result of those different thoughts. Often, we are not aware of our thoughts and beliefs because they are so automatic and happen quickly. But they are there, and they affect the way we feel.

### WHAT AM I FEELING?

It is often difficult to know exactly what we are feeling and even more difficult to put it into words. The following list contains words that describe feelings, and this may be a useful starting point in you being able to understand the connection between your thinking and your feelings.

<b>WORDS THAT DESCRIBE FEELINGS</b>					
Tense	Scared	Angry	Joyful	Cheerful	Uneasy
Anxious	Depressed	Enraged	Excited	Euphoric	Disgusted
Frightened	Sad	Irritated	Exhilarated	Keyed Up	Jealous
Panicky	Unhappy	Annoyed	Calm	Tired	Frustrated
Nervous	Discouraged	Mad	Happy	Flat	Insulted

Obviously this is only a limited list but it gives you an idea of the kinds of words we use to describe our feelings.

## AUTOMATIC THOUGHTS

Just as we are not always conscious of the way we walk or how we drive a car, we are often not aware of our thinking. Some of our thinking is so habitual that it is automatic, and just like driving, when things are automatic, we might not be conscious of them. All of the time, our brains are turning over thoughts and ideas. However, we are not consciously aware of most of them because it happens relatively fast and we are not accustomed to slowing them down. Our automatic thoughts, however, play an important role in our emotional well-being.

There are three kinds of automatic thoughts:

**Neutral thoughts**→e.g. "I think I will buy some bread today"

**Positive thoughts**→e.g. "This is something I can do really well"

**Negative thoughts**→e.g. "I must look like a fool, I bet everyone thinks I am acting stupid"

People who have difficulties with panic attacks often have particular types of thinking patterns

- a) Have catastrophic thoughts about normal or anxious physical sensations (eg "I'm a bit dizzy – I'm going to faint!")
- b) Over-estimating the chance that they will have a panic attack (eg "I'll definitely have a panic attack if I catch the bus to work")
- c) Over-estimating the cost of having a panic attack (eg "No! This can't happen now. It will ruin everything!" )



Automatic unhelpful thoughts often reflect worries and concerns, however they can be about anything at all, anything we have ever seen, heard or learned. Additionally, it can be anything we know about from any source at all – positive, neutral, or otherwise. Obviously, though, negative automatic thoughts are the ones that can cause us emotional distress and it is these thoughts that can be changed to reduce your anxiety about panic attacks. We call these negative types of thoughts *unhelpful thoughts*.

## FEELINGS ARE NOT THOUGHTS

When we first try to distinguish thoughts from feelings, it can be easy to confuse them. We might be used to talking about thoughts and feelings as being part of the same experience, but it is more helpful to separate them and remember that feelings are not thoughts. For example, you might hear a person saying "I *think* I'm anxious," but they're probably *thinking* "I'm going to have another attack," and so they *feel* anxious. More commonly, you might hear someone saying something like "I *feel* that my partner doesn't appreciate the gift I bought for him," when they are actually *thinking*, "My partner doesn't appreciate the gift I bought for him," and *feel* hurt.

Try the exercise on the following page and see if you can identify the possible feelings and thoughts in each of the scenarios. Remember to try and make the distinction between thoughts and feelings.

# Making the Connection

## **Part One**

Instructions: Read the following scenarios and identify the feelings that may result from the self-statements.

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### **SCENARIO 1:**

You are packing your suitcase, getting ready to go on an overseas holiday. It's your very first time on a plane. As you start to pack, you notice your heart beating faster.

#### **A) You say to yourself:**

#### **Possible Feelings:**

"Oh no! What's wrong with my heart? I must be unwell! I'll have to cancel the trip. If I don't get to a doctor soon, I'll be in trouble!"

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#### **B) You say to yourself:**

#### **Possible Feelings:**

"Wow, this is so exciting - even my heart's beating faster! I can't wait to get on that plane!"

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### **SCENARIO 2:**

One evening, your parents ask you to go over to their house for dinner. As you arrive, you noticed that it is all dark and there are no lights on. You knock on the door and ring the doorbell but no one comes to answer the door. You turn the doorknob and find that the door is unlocked. You step in and find that the house is in total darkness. Suddenly, you hear a chorus of voices shouting, "Surprise!" The lights come on and you see a group of your friends and relatives singing "Happy Birthday" to you.

#### **A) You say to yourself:**

#### **Possible Feelings:**

"Oh, NO! I can't believe my parents would do this to me! Everyone's staring at me, and I'm not even dressed up. I just want to get out of here."

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#### **B) You say to yourself:**

#### **Possible Feelings:**

"Wow! I completely forgot about my birthday! What a really nice surprise! Everyone must think I'm pretty important to throw me this party!"

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## Part Two

Instructions: Read the following scenarios and now fill in the self-statements that may lead to the feelings experienced.

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### SCENARIO 1:

You just finished cooking dinner for you and your partner. Your partner calls to say that he/she will not be home for dinner because he/she has to work late.

**A) You say to yourself:**

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**Feelings:**

Disappointed

**B) You say to yourself:**

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**Feelings:**

Concerned

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### SCENARIO 2

You are shopping at the local supermarket. You go around an aisle corner and run into a tall stack of toilet rolls. They tumble down and roll in many directions forcing many shoppers to stop to avoid hitting the runaway rolls.

**A) You say to yourself:**

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**Feelings:**

Embarrassed

**B) You say to yourself:**

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**Feelings:**

Indifferent

**C) You say to yourself:**

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**Feelings:**

Amused

Happy

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## Module Summary

- Thinking responses and the types of thoughts we have play a large role in panic disorder. While we assume that situations "make us feel" a particular emotion, there is actually a step in between. Our thoughts influence our feelings. The same situation can be perceived in different ways, leading to different emotional experiences.
- Automatic thoughts can be neutral, positive or negative. Automatic thoughts that are negative are usually *unhelpful thoughts*, reflecting worries and concerns, and leading to unpleasant emotions such as anxiety.
- An important step in understanding how thoughts influence feelings is to more clearly identify and label particular emotions. Furthermore, it is important to separate thoughts from feelings, acknowledging that feelings are not thoughts - feelings follow from thoughts.
- It can be useful to examine a situation and identify different types of thoughts that might occur in response to the situation. You can then more clearly identify which types of emotions follow on from those different types of thoughts.

In the next module we will look at how you can analyse the ABC's of thinking and feeling as a first step towards changing how you think.



## About This Module

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### Some of the material in this module was taken from

Nathan, P.R., Rees, C.S., Lim, L., & Smith, L.M. (2001). *Mood Management – Anxiety: A Cognitive Behavioural Treatment Programme for Individual Therapy*. Perth: Rioby Publishing.

### BACKGROUND

The concepts and strategies in this module have been developed from evidence based psychological practice, primarily Cognitive-Behaviour Therapy (CBT). CBT for panic disorder is a type of psychotherapy that is based on the theory that panic disorder is a result of problematic cognitions (thoughts) and behaviours. There is strong scientific evidence to support that cognitions and behaviours can play an important role in panic disorder, and that targeting cognitions and behaviours in therapy can help many people to overcome panic disorder. Examples of this evidence have been reported in the following:

Royal Australian and New Zealand College of Psychiatrists Clinical Practice Guidelines Team for Panic Disorder and Agoraphobia. (2003). Australian and New Zealand clinical practice guidelines for the treatment of panic disorder and agoraphobia. *Aust N Z J Psychiatry*, 37(6), 641-56.

### REFERENCES

These are some of the professional references used to create this module.

Craske, M.G., & Barlow, D.H. (2001). Panic disorder and agoraphobia. In D.H. Barlow (Ed.), *Clinical Handbook Of Psychological Disorders, Third Edition*. New York: Guilford Press.

### FURTHER READING

There have been many other information resources written for people with panic attacks

Barlow, D. H., & Craske, M. G. (2000). *Mastery of your anxiety and panic (3rd edition)*. San Antonio, TX: The Psychological Corporation. (ISBN: 0127850783)

Royal Australian and New Zealand College of Psychiatrists. (2003). *Panic Disorder and Agoraphobia: Treatment Guide for Consumers and Carers*. Available: <http://www.ranzcp.org/publicarea/cpg.asp> (click on "Panic Disorder and Agoraphobia"). Accessed Feb. 2004.

Zuercher-White, E. (1998). *An End To Panic: Breakthrough Techniques For Overcoming Panic Disorder (2nd Edition)*. Oakland, CA: New Harbinger Publications. (ISBN: 1567313760)

### "PANIC STATIONS"

This module is part of the following InfoPax:

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