THE ANXIOUS STUDENT

Description:
We have all experienced anxiety in response to a perceived stressful situation. As anxiety becomes heightened, the situation becomes more vague and less familiar.

A panic attack is an overwhelming sense of dread and fear and is the extreme result of feeling anxious. Some of the physiological and psychological components of general anxiety and a panic attack are:

- **Rapid heart palpitations**
- **Difficulty concentrating**
- **Worry**
- **Choking**
- **Memory distortions**
- **Anticipating misfortune**
- **Sweating**
- **Chest pain/discomfort**
- **Easily distracted**
- **Cold, clammy hands**
- **Dizziness**
- **Trouble sleeping**
- **Fear**
- **Trembling or shaking**

The student may experience feelings of worry, fear, and anticipate some misfortune. He/she may complain of difficulty concentrating, being always on edge, being easily distracted, memory distortions, or trouble sleeping. The student may also state unreasonably high self-expectations and be very critical of his/her present performance. This student may constantly think about and discuss his/her problems and possible solutions but be too fearful to take action.

Response:

The following may be helpful in dealing with an anxious student:

1. Let them discuss their feelings and thoughts. This may relieve a great deal of pressure.
2. Help them define their stressors (which may be difficult to do), their ineffective and effective coping strategies. This is an area where referral to the Psychological Counselor would be particularly helpful.
3. Be clear and explicit about what you are willing to do. It may be helpful to have the student repeat what you have said to insure that he/she understands.
4. Talk slowly and remain calm. If possible, provide a safe and quiet environment.
5. Encourage them to use a support system (e.g., family, friends, religious affiliations) to ventilate.

The following will not be helpful in dealing with an anxious student:

1. Minimize the perceived threat to which the student is reacting.
2. Taking responsibility for their emotional state.
3. Trying to solve their problem as if it were your own.
4. Overwhelm them with information or ideas to “fix their condition”.