



7. WHEN A LONG PERIOD OF STRESS, FAILURE OR ANXIETY ARISES

This chapter deals with the following content:

- recognising the signs of stress in students and the reasons that lead to stress;
- mental disorders as a consequence of stress;
- how to recognise anxiety;
- the development of anxiety disorders;
- the causes of stress during study and methods of tackling it;
- techniques for overcoming anxiety and stress;
- managing stress in six steps;
- when to seek the help of a doctor.

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Over the course of their lives, people in all stages of life encounter various challenges and obstacles. The time of studying is a time of change, when students often move away from home, go off to a new environment, meet new people and face a number of challenges, both in their studies and personal life. For someone who is not used to change, new life situations can generate stress and serious anxiety.

7.1. How stress is manifested

Stress is a psychological and physiological response to events that impact personal balance. When you face threats to your physical safety or mental balance, the body responds by shifting into a higher gear.

Stress is good in small quantities. At that point it gives you energy and motivates you to try to focus on the problem and be alert. It keeps you on your toes during a presentation at work or forces you to study for an exam at the end of the semester, although you would rather be watching TV, playing a computer game or hanging out with your friends. But if the demands are too big and go beyond your ability to deal with them, stress can become a threat to your psychological and physical health.

On the physiological, bodily level the stress response involves a sequence of changes that prepare you for immediate activity. When a danger is perceived, the hypothalamus in the brain triggers a chemical alarm. Corticotropin, a relaxing factor, is released, and through the hypophysis it releases stress hormones. These hormones are released into the blood and prepare the body to fight the danger or flee from it. Here the autonomous nervous system also plays a part, causing a redistribution of blood from the digestive system and less important organs to those that are activated during stress: the brain, lungs, heart and skeletal muscles. Other physical signs also appear: higher blood pressure and accelerated heartbeat and

breathing, increased sweating, higher levels of blood sugar and accelerated blood clotting, dilated pupils and dry mouth.

Pressures and demands in your surroundings or demands that you place on yourself and cause stress, **are stressors**.

Stressors include:

- The first recognised stressors are **major traumas**, such as physical attack or natural disasters.
- Later on, stress events include **major life events** (marriage, divorce, loss of a loved one, start of new or loss of job, moving to a new environment, starting to study).
- Stressors in the broader sense can also include **harmful environmental impacts** (noise, overpopulation, pollution), **chronic tension** stemming from your role in life (difficulties in marriage, at work, poverty), and also **everyday difficulties**.

Stressors can be short-duration events, chronic or can often be recurring. The rapidity at which they arise is important, as is also how different stressors connect and bind together mutually.

Loss of job causes poverty, which can negatively impact your family or marriage and can lead to divorce. Failure in studies, failed exams or a bad overall grade can lead to loss of a grant, loss of the possibility of living in students halls and consequently a halt to studies. For students, the feelings that go with breaking up with a partner can lead to apathy in studies.

Stress can be viewed as an interaction between the environment and the person, i.e. a combination of demands from the environment and individual abilities. The perception of stress depends on the demands of the environment and the ability of the individual to deal with these demands. Stress stems from an imbalance between demands and individual abilities.

Thus for instance a fault in a car represents a manageable problem for a mechanic, but for someone who does not have these skills and is also in financial straits, this problem is a serious stress.

Stress over exams in the final exam period for an important subject is probably greater than over an exam in a subject for which the student has prepared well and for which several exam periods are available.

What represents stress to a person depends on gender, age, personality, general outlook on life, the cultural and social environment the person comes from, the ability to overcome difficulties, past experience and social support.

How can you recognise that you are experiencing stress?

Stress is manifested in physiological, emotional and behavioural reactions. The psychological and behavioural signs of long-term stress are numerous and diverse:

- There are **physical symptoms**: accelerated heartbeat, headache, sweaty palms, cold hands and feet, nausea, diarrhoea, upset stomach, irregular breathing.
- **Mood changes** are evident: indecisiveness, loss of sense of humour, tension, depression, irritability, anger.
- There are often **changes in behaviour**: lack of will, lack of organisation, crying, irregular sleep, sexual dysfunction, excessive use of alcohol, nicotine, caffeine, analgesics and psychopharmacological products.
- There may be changes in **thinking patterns**: forgetfulness, lack of concentration and attention, poor judgement, confused notions, difficulties in thinking and a diminished imagination.

A person experiencing stress often thinks as follows: I can't do this, I'll lose my mind, it's all too much, it's hard. One's self-image is often poor.

7.2. Mental disturbance as a consequence of stress

When stress kicks in on a person with heightened vulnerability, in addition to the aforementioned specific symptoms, the person can develop actual mental disorders that can require further treatment by a doctor or psychologist.

Acute stress disorder

This is directly tied to extremely serious physical or mental stress events. The disorder arises during the actual stress event or immediately after. Often there is evidence of feelings of apathy, emotional lack of response and non-perception of surroundings. There are expressions of anxiety, uneasiness, hopelessness, irritability, depression and sleeping difficulties. The person's social functioning deteriorates markedly. The disorder is short-term and generally eases off after a few days.

Post-traumatic stress disorder

This arises as a delayed or extended response to extremely stressful events, which can be very frequent, different and universal, for instance being a victim or witness to rape, mugging, wartime trauma, abduction, being a prisoner of war, torture, traffic accident or incurable disease. The signs of the disorder can be seen in the first three months after the trauma, but can be drawn out over several months or even years. The traumatic event is constantly relived in the form of images, thoughts and perceptions. There are often nightmarish dreams about the stress event, accompanied by severe mental strain, and the avoidance of stimuli associated with the stress event. There is a significantly reduced interest in activities, along with a feeling of alienation and limited emotions. Frequently there is disrupted sleep, irritability, outbreaks of anger and difficulty concentrating. The disorder lasts at least one month and causes severe mental strain, and seriously impacts the person's quality of life.

Adaptive disorders

These appear as emotional disorders that significantly affect a person's social functioning and are linked to life changes to which a person is forced to adapt. These changes can be for instance moving to another environment, changing or losing your job, change in a person's social network, loss of an important person, learning of a serious illness. Adaptive disorders can be seen in depressed mood, worry, anxiety, the feeling that the person can no longer resolve everyday difficulties on their own. The signs appear sooner than one month after a stress event and usually do not last longer than six months.

7.3. How to recognise anxiety

Occasional anxiety is a common feeling experienced by all people. It is an unpleasant feeling that causes a sense of internal oppression. The sense of anxiety is closest to the feeling of nerves that is tied to some specific event, such as an exam or public appearance. With anxiety you feel a 'vague fear', which you often cannot explain.

Anxiety can appear gradually or come on suddenly. It can last a few minutes and be barely noticeable or it can appear in the form of panic attacks.

In a stress event it is quite normal for you to be anxious and worried, because you are focused on danger and the body is activating for fight or flight; this is therefore an evolutionally determined defence against an impending threat. Anxiety therefore has principally a protective function, but it becomes problematic to health when it is excessive or arises without reason. Anxiety is a symptom which apart from in ordinary life situations is also expressed in all stress-generated mental disorders.

7.4. Anxiety disorders when there is too much anxiety

Anxiety, the feeling of internal tension, which can also be accompanied by uneasiness, is frequently and strongly expressed when you find yourself in a threatening situation. We can talk of an anxiety disorder when it arises in situations where it is not necessary and there is no external reason for it, and if it is necessary it lasts too long, and if it incapacitates a person to the extent that they are no longer capable of functioning normally.

This kind of anxiety is found in anxiety disorders, which include a generalised anxiety disorder, panic disorder, obses-

sive-compulsive disorder and various phobias. These disorders are further detailed below. In this way anxiety becomes disruptive and burdensome, and it can strongly impact normal human activity and affect the quality of life.

Generalised anxiety disorder	The basic characteristic is anxiety, which is general and persistent, and is not limited to any particular external circumstance. The person is irritable, quickly becomes psychologically and physically fatigued, they have fears and worries about the future, difficulties concentrating, muscular tension, headache, trembling hands and the feeling of being unable to relax.
Panic disorder	Anxiety is manifested in the form of panic attacks, which recur unexpectedly and are not tied to any specific situation and in circumstances that in themselves are not dangerous. Due to vegetative excitement the person feels a range of symptoms, such as heart palpitations, rapid pulse, sweating, tremors, they feel shortness of breath and choking, they may have pain in the chest and stomach, a feeling of nausea, vertigo and dizziness, feeling cold or hot and a sense of their skin crawling. The person is most incapacitated by fear of death, fear of loss of control over themselves and fear of losing their mind.
Obsessive-compulsive disorder	Characteristic of this are repetitive, intrusive thoughts, obsessions and repetitive ritualistic behaviour, compulsions accompanied by anxiety, especially when the patient tries to resist these symptoms. The person recognises obsessive thoughts as their own, although they are involuntary, irrational and often unpleasant or aggressive. Compulsions are also movements or behaviour that is not useful and brings no joy.
Phobic anxiety disorders	It is characteristic of these that anxiety is triggered by certain external objects or situations which in themselves are not dangerous. The fear is therefore tied to various objects and situations, such as a closed space, open space, height, darkness, weather phenomena, pain, dirt, the sight of blood and so forth. For this reason the person avoids such objects or situations, but sometimes the mere thought of them evokes fear which can be just a mild uneasiness or can reach the level of terror. Students can also be severely hampered by social phobias, where anxiety is triggered in limited social positions with a small group of people, in which the person anticipates being exposed to scrutiny or criticism, so these symptoms are often manifested in exams.

In the first panic attack the person is often highly fearful, and convinced that something is dreadfully wrong with them physically and often they seek urgent care. In the period between attacks the difficulties are not present, but often there

is an anticipatory anxiety – this is a fear of the next attack. Attention is often selectively focused on certain bodily responses, while excessive anxiety is triggered by an erroneous interpretation of the individual momentary physical or mental symptom which in itself is not dangerous.

7.5. The causes of stress during studies

At the start of their studies, many students move to a different location. The time of adjustment to the new environment differs from student to student. Some students experience homesickness and frequently visit their home town, while others adjust more easily to the change in environment. Upon moving there is also often a need to adapt to housemates, who are many times unknown people. Students have to take care of themselves entirely and learn how to spend money sensibly, if they have not already mastered these skills. Even the method of learning at university is often different from that in secondary school.

Unsuccessful adaptation to the new environment and to numerous changes for some students triggers anxiety, and the previously described adaptive disorder can develop.

The most stressful periods in the period of studying are usually the exam period and the end of the academic year, when there is uncertainty regarding the academic results.

The actual preparation and approach to exams or failure in exams can generate in students the above-described acute stress reaction, with heightened anxiety, emotional instability and a pessimistic view of the future. A burden of stress on students is often also engendered by thinking about the future and concerns about finding a job.

Parents and the student's family can help ease the burden on the student, but their response, if it involves criticism and anger can amplify the student's sense of failure.

As a tutor, just by speaking out about noticing their difficulty, you can enable the student to talk about the problems besetting them. Just talking about difficulties can ease the burden. If you notice that the strain on the student is increasing, you should advise them to seek professional help.

7.6. Methods of dealing with stress

People use multiple ways and strategies for dealing with stress.

The problem-focused method: a person in difficulty tries to change the situation by seeking information on how to act; there are few impulsive and immature reactions.

Balancing emotions: the person tries through defence mechanisms to reduce the emotional impact of stress. They seek emotional support and understanding from other people and in this way ease their situation.

Regressive behaviour through the use of earlier, more primitive defence mechanisms: the person acts as if they are in childhood, when others, usually the parents, solved their problems and consoled them.

Denial: the person pretends that there is no problem at all. At first this can bring a sense of ease, and the stress temporarily subsides, but frequently this causes additional consequences and problems when grappling with stress later.

Being inert, inactive or withdrawn: it seems to the person that there is no longer any possible solution to the problem and is no longer dealing with the stress.

Easing the strain by using psychoactive substances: a strategy that is risky to health is easing the strain by using psychoactive substances – self-medication with alcohol, medications and drugs, which can momentarily ease the anxiety that is present, but can cause major risk of the development of addiction, especially among vulnerable persons.

It is advisable for a student in difficulty to use what is the most appropriate strategy for them to deal with stress, and especially to avoid those that are more harmful. If you fail an exam, the strategy of denial, regression, inertness or easing the strain by using psychoactive substances will probably not be of any help in dealing with the problem, and will rather simply intensify it.

As a tutor you can guide students to seek healthier ways of easing the burden and dealing with the strain.

7.7. How can you help yourself overcome anxiety and stress?

Each one of us uses their own method of relaxation. These methods are very diverse, ranging from physical training, yoga, running, walking, reading books, socialising, chatting with friends to work and hobbies.

One of the effective and simple methods of influencing how you feel is **movement**. Physical activity eases the stresses of everyday life. Regular exercise contributes to reducing feelings of anxiety.

Another effective method for overcoming stress among students is **rest**, since adequate rest is essential for the regeneration of both physical and mental abilities. Adequate rest improves the ability to concentrate and other intellectual abilities, and improves academic performance.

As a tutor you can encourage students to spend their free time on **hobbies and things that interest them**. **Socialising and connecting through common interests** are also recommended, and this is something particularly important for students who find themselves without important social networks and friends after moving to another location.

By asking questions such as ‘How are you getting used to living in a different place?’, ‘Are you lonely?’, ‘Do you miss your people at home?’, ‘Have you made any new friends

at the faculty?’ and so forth, the tutor can let the student know that they are also available for more personal topics and not just for advice on studies. Often this is enough for the student to unburden themselves just by sharing their sense of hardship.

7.7.1. Relaxation techniques, help in overcoming anxiety and stress

The most highly recommended **relaxation techniques** are breathing exercises, deep relaxation, visualisation, mindfulness and autogenic training:

a) When done properly, **controlled breathing** is a very effective relaxation. As you breathe in, the diaphragm tightens and expands, then relaxes when you breathe out. It is important to inhale deeply through the nose and slowly exhale through the mouth. The body must be in a comfortable position and the muscles relaxed. While breathing in, count to four, then hold the breath for four seconds and again count to four as you breathe out. Correct breathing lets you quickly relax and thus reduce your stress level.

b) Gradual muscular relaxation is a systematic technique for reaching a state of deep relaxation. In a precisely determined sequence, you gradually relax the 16 main muscle groups of the body. You start with the fist and lower arm, followed by the upper arm, the upper and lower forehead, eye muscles, mouth, jaw, back of the neck, shoulders and lower neck. Then you move on to the chest muscles, inhaling deeply and holding your breath for ten seconds, then exhaling. This is followed by the stomach muscles, the thighs and the lower legs and feet.

Each exercise is repeated twice. The procedure is to first tense the muscles for a few seconds, then relax them. The aim of the exercise is to learn what is tension and what is relaxation. The tensing and relaxing of different muscle groups in the body engenders a state of relaxation.

Settle yourself comfortably in an armchair or chair. Lean back, with your head if possible resting on the back rest, your hands on your knees or arm rests. Your legs should be parallel, with your feet on the floor. Keep your eyes closed, so you can focus better on what is going on within your body. The time of relaxing should be twice as long as the time of tensing the muscles. Your attention should be constantly focused on what is going on and being felt in your muscles, and your breathing should be calm and even. At each step, focus first on the feeling of tension, followed by relaxation.

c) Visualisation is a method that harnesses your imagination to change your behaviour, emotions and even your inner physiological state. The power of the imagination is stronger than the power of conscious will.

In your mind you can picture yourself for instance floating on the surface of the sea, how leaves flutter in the wind, listening to bird song and so forth.

It is important that you visualise the scene with enough detail to completely hold your attention. When you reach a state of relaxation, you achieve the effect on the physiological level, tension eases in your muscles, your heart rate slows and blood pressure is lowered. The images you conjure up and enjoy will relax you and drive away negative thoughts.

d) Mindfulness or conscious focus is the direction of attention to the present moment, which is accompanied by a sense of non-attachment. The term relates to clear, non-reflexive attention focused on the present, on mental and physical processes that arise from moment to moment. Due to its broad usefulness and benefits, in the past two decades the practice of mindfulness has spread throughout the world. It is used as a technique in psychotherapy, mainly in managing anxiety. It can help reduce stress in chronic illnesses, and is used in schools.

The main characteristics of mindfulness are therefore presence from moment to moment (stable presence), being conscious in relation to the present and very clear cognition. This involves concentration and being focused on the current moment, and on what arises in that moment, for instance hearing raindrops, and knowing that these are raindrops and that is all that it is,

and not reacting to it. It is important not to interfere with the mental and physical processes, to observe them without reaction, to be non-attached and not involved in them – for there is nothing that lasts longer than a moment.

e) Autogenic training is composed of six exercises and is based on reducing tension through mental concentration. At first it needs to be practiced under the guidance of an experienced therapist, then later the individual can practice the exercises alone.

7.7.2.

Managing stress in six steps

Anticipate and plan!

Try to foresee which stresses might await you, and prepare yourself for them. Each morning or at the beginning of a new week, think about what awaits you, and make a plan of how you will face the stressors.

Limit the effect of the stressors!

Minor stressors such as the morning rush hour on the roads, an important work meeting, quarrel with a partner and so forth can spread into all areas of your life (e.g. when you 'bring home' a bad day at work and then make a bad day for everyone around you). Put stressors in their place: a problem at work should not wreck your relationships at home, and vice versa. When you find that you have a powerful stressor in one area of your life, try concertedly to maintain or strengthen the other areas of your life!

React calmly!

If you respond immediately to a stressful situation with action or emotionality, you become a victim of the stressful situation. This triggers a stress reaction, which in the long term weakens your immune system. But if you react calmly, you can maintain your inner balance and in that way gain time to decide consciously how to deal with problems.

Establish control over your body!

It is important to halt the stress reaction as soon as possible: ease your breathing and relax your muscle tension.

Slow down and find your inner strength!

Stressful situations usually drive you blindly towards actions to remove the stress or avoid it. Instead of this, calm yourself mentally and physically using relaxation techniques. When you become attentive to your breathing and a sense of relaxation in your muscles, your attention will automatically be turned inwards. This is the source of your strength.

Think optimistically!

When you are stressed, you often lose sight of what is possible and what is important. In your momentarily negative situation try to find good sides and opportunities. Do not forget your goals.

You can find the described steps in the final section of the Manual as Appendix 11 and you can use them as a handout.

7.8. Help at the doctor

When anxiety is manifested as one of the stress-generated disorders or as an anxiety disorder, the person needs to find expert help from a chosen family doctor, who can judge whether there is a need to refer the person to a specialist in psychiatry or clinical psychology.

If you recognise that a student you are working with is in severe discomfort and shows signs of needing help, encourage them to seek the help of a doctor.

Both a psychiatric specialist and a clinical psychologist work at the University of Ljubljana Student Health Centre.

Anxiety disorders and stress-generated disorders can be treated with medication, psychotherapy or a combination

of the two, depending on the clinical picture and the level of affliction of the individual, and what is important is the level of affliction of daily functioning and the experiencing of the condition. Treatment with medication involves mainly anti-depressants, which mitigate or eliminate the symptoms.

There are various effective psychotherapy approaches, the most common being cognitive and behavioural, support or dynamically oriented psychotherapy, while other psychotherapy measures and relaxation techniques are also helpful. The aim of the therapy is for the person to gradually recognise the factors that contribute to the emergence and manifestation of psychiatric symptoms, and to develop changed behavioural patterns.

Where to go for medical help

Student Health Centre of the University of Ljubljana

- Psychiatric Clinic – by appointment; you can call 01/2007411 or come in person during surgery hours. Only students are treated, and no referral is needed.
- Treatment by a clinical psychologist – the clinical psychology clinic provides examinations, counselling and psychotherapy. To attend this clinic you need a referral to a specialist clinical psychologist, which you can obtain from your personal doctor or from a psychiatrist.

In urgent cases you can seek help at:

- **The Urgent Psychiatric Clinic**, which operates on weekdays from 8 am to 3 pm, at Njogoševa 4, (Poliklinika, Njogoševa 4, Centre for Outpatient Psychiatry, tel.: 01/4750670). The purpose of the Urgent Psychiatric Clinic is to rapidly assess the psychiatric state, provide initial counselling and introduce medication or adjustment of medication, if the patient already has prescribed medication, directing patients to additional diagnostic procedures where necessary, and directing the patient to further treatment (to a clinic-selected physician, a psychiatric specialist or specialist in a non-psychiatric discipline, or referral for hospital treatment);
- **Centre for Clinical Psychiatry**, Chengdujska 45, (Psychiatric Clinic, duty service, tel.: 01/5872 112);
- **Centre for Mental Health**, Grablovičeva 44a (Psychiatric Clinic, duty service, tel.: 01/5874916).

In conclusion

Stress is with us throughout life. Balancing the requirements of studying, time for recreation and socialising can help students successfully navigate all the burdens.

Where stress is heightened and present for a long time, it is important for the student and for you as the tutor to recognise the harmful consequences of stress on the body and mind, since through timely action and self-help you can prevent the onset of more serious mental disorders.

You can help the student just by having a talk, and in serious situations you can guide the student to seek appropriate expert help.

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