

Brief Communication:

Innovation in Technique:  
A Group-Based Induced Anxiety

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**ABSTRACT**

*Induced Anxiety has been shown to be a highly effective means of producing sustained behavior change. This paper presents technical detail describing a group-based IA treatment procedure. Research further defining the parameters of this behavioral technique appears in order.*

**RESUMEN**

Se ha demostrado que la Ansiedad Inducida es un medio altamente eficaz para producir un cambio conductual mantenido. Este artículo presenta detalles técnicos que describen un procedimiento de grupo para tratamiento con AI. Se expone investigación adicional que define los parámetros de esta técnica conductual.

Sippelle (1967) has described Induced Anxiety (IA) as a behavioral technique used to reduce or extinguish anxiety responses in persons with disorders characterized by excessive anxiety. The procedure involves the simple operant conditioning of anxiety states, elicitation of stimuli associa-

ted with the anxiety, and substitution of non-anxious for anxious responses. Case studies (Boer and Sippelle, 1969; Bornstein and Sippelle, 1973a; Noonan, 1971) and experimental reports (Burns and Ascough, 1971; Jordan and Sippelle, 1972; Sippelle, Bornstein, Pilgrim, Saar and Sletten, 1973) have shown IA to be highly effective in providing individuals with the ability to relax when confronted with fear-producing stimuli.

Bornstein and Sippelle (1973b) have recently reported using IA as a group technique in the treatment of obesity. Although their IA procedure was shown to be a highly effective treatment modality, discussion of therapeutic method was both limited and vague. The purpose of the present paper is therefore to provide exposition of technical detail regarding a group-based IA procedure and further implement its use in both research and actual clinical practice.

### *Method*

Detailed procedures and instructions regarding the traditional IA technique have been thoroughly described elsewhere (Sippelle, 1967). In the group-based IA treatment procedure, *Ss* are first seated in padded chairs with pillows used as headrests. Instructions in deep relaxation as outlined by Wolpe and Lazarus (1966) are then verbally presented by *E* to all *Ss* simultaneously. Once relaxation is achieved, *Ss* are instructed to turn their attention inside themselves, to forget everything outside, and to "feel a small feeling start to grow". Multiple suggestions to "feel a feeling inside you growing stronger and stronger" are given. Observable increases in physical tension, irregularities in respiration, tremors, grimacing, crying and/or any other indications of heightened affect are then verbally reinforced. To insure continued arousal, the *E* operantly reinforces individual *Ss* by systematically rewarding affective behavior as it occurs. In the typical IA procedure, when a state of induced anxiety is achieved the *S* is asked to report his thoughts and feelings at that moment. Members of group IA, on the other hand, are not asked to verbalize stimuli associated with the intense affect, but rather receive instructions similar in some respects to those presented by Gendlin (1969):

Let that feeling grow more and more intense now. . . that's right. . . stronger and stronger, moving through all parts of your body. . . good. . . that's just fine. Now, just as that feeling fills your gut let the thoughts fill your head — let thoughts come from the feeling. . . that's it. . . very good. The feelings in your stomach and the thoughts in your head are one and the same. . . now you've got it. . . good. The thoughts come from the feelings and the feelings come from the thoughts. . . fine. . . now, let it all out. . . that's it. . . let it all go. As those thoughts and feelings merge together now, let words or pictures begin to capture what it's all about. . . that's good. . . feelings growing stronger and stronger, thoughts becoming more and more intense, images becoming clearer and clearer. . . very good. . . now you've got it. . . let it all go!

Once the anxiety responses appear to reach a plateau, the *E* then switches contingencies and progressively instructs the *Ss* to relax in the face of the anxiety-associated thoughts, feelings and/or images. Anxiety induction is then repeated a second time, followed immediately again by relaxation. Responses typically elicited during the group induced anxiety phase include a general state of restlessness, increased swallowing, tightening of muscular control, rapid breathing, tears and quiet sobbing. Group sessions conclude with a general discussion emphasizing explanation of the process, reassurance and support. The combined relaxation, anxiety induction, relaxation, anxiety induction, relaxation treatment package may last anywhere from 20 to 50 minutes in length, solely dependent upon *E*'s procedural bias and the extent of emotionality observed. Similarly, the number of *Ss* included in group sessions appears more related to practical limitations (e.g., availability of space) than any major theoretical issues.

### *Discussion*

Research indicates that the above group-based IA procedure is an effective tool for promoting psychotherapeutic change. It appears that *Ss* treated in IA groups do, in fact, acquire coping responses to self-produced, emotional-laden stimuli. Since *Ss* learn a response of relaxation to the somatic and cognitive cues often experienced as danger-signals to anxiety, relaxation tends to become a natural by-product of associated anxiety-arousing cues. Furthermore, operant reinforcement of observable behavior (i.e., tension-relaxation), in groups appears capable of eliciting emotional arousal appropriate to that state. In conclusion, further research into the effectiveness of a group-based IA procedure appears in order. The nature of the detailed instructions presented above clearly allow for both systematic investigation of the group IA procedure and further application to clinical practice.

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