Chapter 6. Working with Fear and Anxiety

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Fear and anxiety are closely related but distinct emotional experiences. Fear arises when an immediate and overwhelming personal danger is clearly perceived. Anxiety arises when one faces an uncertain threat to one's safety, value, or meaning of existence (Lazarus, 1991). Both belong to the human threat system.

Human emotional functioning can be understood as consisting of three interacting systems:

Acquisition system: pleasure, achievement, excitement, enjoyment

Security system: safety, fulfillment, emotional connection with others

Threat system: fear, anxiety, anger, hatred, self-blame

These systems exist in dynamic balance. When one system becomes dominant, the others tend to diminish. During wartime, fear and anxiety intensify, causing the threat system to expand while the acquisition and security systems shrink. As a result, people may feel that joy, meaning, and emotional connection disappear from daily life.

Persistent activation of the threat system is associated with various mental health conditions, including specific phobia, social phobia, panic disorder, agoraphobia, generalized anxiety disorder, obsessive–compulsive disorder, acute stress disorder, and post-traumatic stress disorder (PTSD).

Coping with Fear and Anxiety (from the Perspective of Morita Therapy)

1. Accept fear and anxiety as part of your experience, without trying to eliminate them.

Morita Therapy does not regard fear and anxiety as pathological states that must be removed. They are natural reactions to threat and uncertainty, and expressions of the desire for life.

In clinical Morita Therapy, including psychological support for people facing life-threatening illness, a core message is: “It is acceptable to fear death. Live constructively today, as things are.”

Attempts to eliminate fear and anxiety often intensify suffering. Avoidance, suppression, or constant monitoring of internal states can create a vicious cycle in which fear grows stronger through resistance. In contrast, when fear and anxiety are accepted or at least acknowledged, without attempts at control or eradication, they tend to change naturally over time. Emotional states are fluid; when they are not forcibly managed, they often lose intensity.

Accepting fear and anxiety does not mean resignation or passivity. It means allowing them to exist while continuing to live and act.

2. Find the desire for life behind fear and anxiety

Teachers living and working during war are repeatedly exposed to bombings, alarms, loss, and uncertainty. Such conditions exhaust psychological energy and may obscure awareness of one’s desire for life.

From the perspective of Morita Therapy, fear and anxiety always reflect what matters deeply. Behind fear lie desires for safety, love, connection, achievement, enjoyment, and meaning—elements belonging to the acquisition and security systems.

When fear dominates attention, these desires may become invisible. By gently asking what fear is protecting or pointing toward, individuals may reconnect with their desire for life, even when fear itself remains present.

3. Act constructively to demonstrate the desire for life

While emotions cannot be directly controlled, actions can be chosen.

Morita Therapy emphasizes purpose-oriented action: focusing on what can be done here and now, rather than on what cannot be changed. Even in unpleasant reality and in the presence of fear and anxiety, constructive action remains possible.

Examples include caring for children or animals, teaching, communicating with family, engaging in creative activities, gardening, volunteering, or maintaining daily routines. Many teachers have reported finding renewed meaning and energy by continuing small, necessary actions, even while fear persisted.

Action should not be used as a technique to eliminate fear. Action is taken together with fear, not to remove it, as an expression of the desire to live.

4. Using Your Temperament as a Strength

Morita Therapy does not divide personality traits into good or bad. Traits such as nervousness, sensitivity, anxiety proneness, or perfectionism often reflect serious engagement with life.

Individuals with anxious or sensitive temperaments may be more attentive, careful, empathetic, and responsible. These qualities can be valuable in teaching and caregiving roles. Rather than attempting to change one's temperament, Morita Therapy encourages using it constructively, in ways that align with reality and purpose.

Dealing with Psychosomatic Symptoms

Fear and anxiety may manifest physically, producing psychosomatic symptoms such as palpitations, dizziness, gastrointestinal discomfort, fatigue, or hair loss.

From a Morita Therapy perspective, the following principles are important:

1. Medical evaluation first. Physical symptoms should be assessed by medical professionals when necessary.
2. Breaking the two vicious cycles. 1) Attention–sensation cycle: Excessive attention to bodily sensations amplifies discomfort. Redirecting attention toward necessary action reduces symptom intensity. 2) "Should-be" thinking: Rigid expectations ("I must not feel fear," "I must function

perfectly") increase tension. A fact-oriented, flexible attitude reduces psychological strain.

3. Working with the body. Adequate rest, physical movement, and ordinary activities such as cooking, cleaning, walking, or gardening support recovery.
4. Waiting. After adjusting life and actions, allow time for natural processes to unfold. Emotional and physical states often change gradually.

Through these steps, energy is redirected from fighting fear and symptoms toward realizing one's desire for life. Morita Therapy trusts the natural healing capacity of the human mind and body.

Living in the Present

Morita Therapy encourages living in the here and now, accepting fear and anxiety as part of reality while continuing meaningful action. Especially in times of war, this approach supports psychological survival, resilience, and the continuation of life with dignity.

Discussion Note: Voices from the Group

The group discussions revealed the complex psychological reality faced by Ukrainian teachers living and working under prolonged wartime conditions. Teachers' voices expressed profound fear, inner pain, exhaustion, and uncertainty, while also revealing diverse ways of continuing life and educational practice. These discussions illustrate how fear, anxiety, despair, and resilience coexist rather than replace one another.

Existential Exhaustion and the Loss of Desire for Life

Some teachers expressed a deep loss of desire for life itself. Teacher A wrote several messages in the chat that conveyed despair and emotional paralysis. When

invited to speak on behalf of the group, she declined, likely because her inner pain made verbal expression impossible. Her messages included: “I am no longer afraid of death. But I have no desire to live in this terrible world. What can I do when I don’t want anything?” “Medication does not help. We do not feel the joy and happiness of life. There is only one desire: for the war to end.” “We pray that things will not get worse. We wait and hope for victory, for the end of the war. But much does not depend on us. We have no influence on the process.” These statements reflect existential exhaustion and helplessness, characteristic of prolonged exposure to uncontrollable threat and ambiguous loss. In Morita Therapy terms, this state reflects a collapse of visible desire for life under continuous dominance of the threat system.

Fear Embedded in Daily Educational Practice

Fear was described not as a temporary emotional state, but as an everyday reality shaping teaching environments. Before one session, Teacher B shared her experience of teaching during air raids: “It is very difficult to teach in a shelter when I have only five children with me and the rest are behind a screen. They do not show their faces and do not want to talk. The children have become silent, afraid to communicate, and unwilling to learn.”

This account illustrates how students’ fear, withdrawal, and silence directly increase teachers’ emotional burden and complicate educational practice.

Teacher D stated: “I live in the Komunarsky district of Zaporizhzhia. Rockets are constantly flying over us. It’s very scary. What do I do to not be afraid?” “During the day we still live, but at night we freeze and pray to survive.” “Art and my own creativity help a lot, especially doing something with my hands.” These comments depict a life divided between functional daytime activity and nighttime fear, highlighting the limits of emotional control.

Similarly, Teacher H noted: “While we are working, we do not feel fear, but at night the fear returns. The support of colleagues plays a very important role.” This suggests that action and social connection can temporarily absorb attention, though fear itself does not disappear.

Reflecting on Fear Rather Than Immersing in It

Teacher C articulated a critical insight into the psychological struggle with fear: “It is very difficult for us to accept fear; we live with it every day. Therefore, we do not need to immerse ourselves in fear, because we are immersed in it every day.” “Fear destroys everything inside a person—feelings, desires, emotions. Nothing remains but fear.” “It is important for us to find the desire to live with fear and anxiety. How can we do that?” This question directly resonates with the central concern of Morita Therapy: how to live meaningfully when fear is unavoidable.

Constructive Coexistence with Fear

Other teachers described ways of living with fear without denying it. Teacher E emphasized purpose and responsibility toward children: “Positive thinking helps a lot. We try to find the positive even in a terrible world.” “We strive to give children light, positivity, and an idea of goodness.”Rather than naïve optimism, this reflects an active commitment to meaning and responsibility—what Morita Therapy describes as purpose-oriented action.

Teacher F described a more integrative coping approach: “Prayer, positive thinking, accepting fear and anxiety, love of life, and looking for opportunities to do something better help me a lot.” “Nature, simple natural phenomena such as the sun, rain, and green trees, as well as family, work, sports, and creativity are very calming for us.” These statements illustrate acceptance of fear alongside concrete daily

practices that restore psychological balance. Fear remains present, but life continues through action and connection.

Resource Depletion and Structural Limits

Not all teachers felt able to sustain such coping. Teacher G expressed severe depletion: “We are running out of internal resources.” “We work hard for our children, but it is very difficult to maintain inner balance and inner peace.” “Some colleagues have left, but we stay because we have nowhere else to go and no means to restore our health.”

Teacher I highlighted economic constraints and an important relational shift: “Teachers’ salaries are very low. We cannot live on this money and restore our health.” “I used to think only about children, but now I also think about my colleagues.” “Responsibility and reliability have become important values. This is a new quality of the teaching team.” These voices remind us that resilience is shaped not only by individual attitudes, but also by social, economic, and institutional conditions.

Implications for Psychological Support

At the end of the discussion, many teachers requested to be taught specific exercises and practical techniques for restoring mental health. This request reflects both exhaustion and ongoing motivation: despite fear, pain, and uncertainty, teachers continue to seek ways to live, work, and support others.

Overall, the discussion suggests that psychological support during war should not aim to eliminate fear. Rather, it should help teachers acknowledge fear, reconnect with their desire for life, and continue purposeful action within harsh realities. Morita Therapy offers a framework that closely aligns with these lived

experiences—not by imposing external solutions, but by articulating and supporting capacities that are already present among teachers.