

---

# Phobias

WORKSHEET A

Do you know anyone who suffers from equinophobia, pluviophobia or leukophobia? Or, to put it another way, do you know anyone who is very afraid of horses, rain or the colour white? You probably don't, and yet these are recognised medical conditions, albeit very rare ones.

According to many surveys, more than ten per cent of people in the United States have some kind of phobia (the word comes from the Greek *phobós*, meaning fear). There are, of course, dozens of different kinds, ranging from the obscure to the well known. The names of most of them have been created by adding 'phobia' to a Greek or Latin root – a process that has turned into something of a word game, with people inventing names for conditions that perhaps exist only in theory (for example androidophobia, the fear of robots).

True phobias consist of an intense but generally irrational fear that produces a very strong desire to avoid the object of that fear. Without specialist help they are very difficult to control and tend to disrupt the daily life of the sufferer. Quite often, however, the term *phobia* is also used to refer to a lesser degree of fear, or even just a strong feeling of dislike.

There is some disagreement as to the most common phobias, but the 'top ten' lists usually include arachnophobia (the fear of spiders), acrophobia (heights), claustrophobia (confined spaces) and aerophobia (flying in aircraft).

Phobias often originate from traumatic experiences earlier in life – for example an intense fear of dogs (cynophobia) often comes from having been bitten by one; and of water (aquaphobia) from having been close to drowning at some point. In some cases, however, experts suggest phobias are to some extent evolutionary, arising not from personal experience but from inherited ancestral memory lying deep in our brains. Arachnophobia and ophidiophobia (the fear of snakes) are often suggested as examples: for our distant ancestors, who lived closer to nature than we do, fear of poisonous spiders and snakes would have served the useful evolutionary purpose of helping them avoid potentially lethal bites.

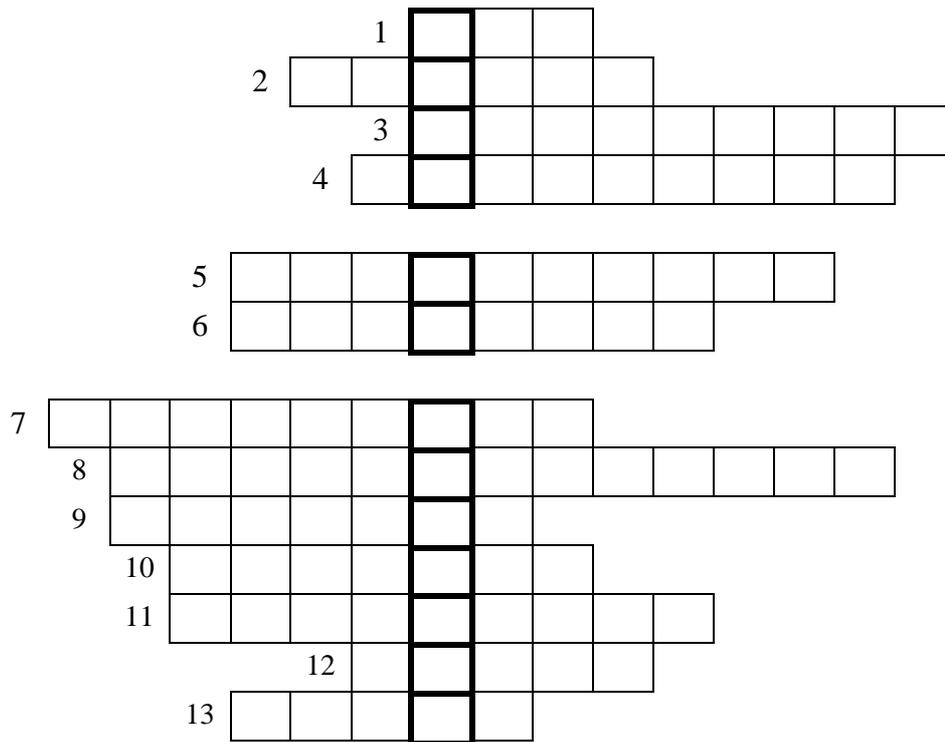
A common technique for treating some phobias is that of 'progressive exposure' in which sufferers are encouraged by a therapist to gradually get closer to the object of their fear. The idea is that at each step the patient realises nothing bad is happening to them, which should lead to their fear gradually decreasing. With someone who is terrified of spiders, for example, the therapist might start by showing them a picture of a spider, then introducing a real spider in a glass box and slowly moving the box closer to them, then finally having them hold the spider in the palm of their hand. Therapy of this kind is said to be very effective, although in this case perhaps not very enjoyable.

## Phobias

WORKSHEET B

### Exercise 1

Complete the crossword below. If all the words are correct, the meaning of entomophobia (which is quite common, at least in its milder forms) will read from top to bottom.



1. Very \_\_\_\_\_ people are afraid of rain or the colour white.
2. The text suggests that some phobias might exist only in \_\_\_\_\_.
3. The fear of spiders might be something we have inherited from our \_\_\_\_\_.
4. \_\_\_\_\_ experiences can lead to phobias.
5. Someone with \_\_\_\_\_ might find it impossible to make a journey by plane.
6. Claustrophobia means a fear of \_\_\_\_\_ spaces.
7. The text suggests that \_\_\_\_\_ names for possible phobias has become something of a word game.
8. The text gives an example of how \_\_\_\_\_ might be treated.
9. People with true phobias experience \_\_\_\_\_ fear.
10. \_\_\_\_\_ suggest that many people in the USA have some kind of phobia.
11. The text suggests that 'progressive exposure' might be very \_\_\_\_\_.
12. Progressive exposure consists of gradual \_\_\_\_\_ closer to the object of fear.
13. According to experts, not all phobias \_\_\_\_\_ from personal experience.

# Phobias

## Exercise 2

The text from Worksheet A has been copied below, but now contains one mistake on each line. Can you find the mistakes and correct them?

Do you know anyone who suffers of equinophobia, pluviophobia or leukophobia? Or, to put it another way, do you know anyone who is very fear of horses, rain or the colour white? You probably don't, and yet these are recognised medicine conditions, albite very rare ones.

According to many surveys, more than ten por cent of people in the United States have some kind of phobia (the word comes from the Greece *phobós*, meaning fear). There are, of course, dozens of different kinds, ranging to the obscure to the well known. The names of most of them have created by adding 'phobia' to a Greek or Latin root – a process that has turned into something a word game, with people inventing names for conditions that perhaps exist only on theory (for example androidophobia, the fear of robos).

True phobias consist of an intense but generally unrational fear that produces a very strong desire to avoid the object of that fear. Without especialist help they are very difficult to control and tend to rupt the daily life of the sufferer. Quite often, however, the term *phobia* is also used to refer to a lesser degree of tear, or even just a strong feeling of unlike.

There is some disagree as to the most common phobias, but the 'top ten' lists usually include arachnophobia (the fear of spiders), acrophobia (heighs), claustrophobia (confined spaces) and aerophobia (flying in aircraft).

Phobias often originate to traumatic experiences earlier in life – for example an intense fear of dogs (cynophobia) often comes from having been bited by one; and of water (aquaphobia) from having been close to drowning at some point. some cases, however, experts suggest phobias are to some extent revolutionary, arising not from personal experience but from inherited ancestral memory lying low in our brains.

Arachnophobia and ophidiofobia (the fear of snakes) are often suggested as examples: for our distant ancestors, who lived closer to the nature than we do, fear of poisonous spiders and snakes would have served the useful evolutionary porpoise of helping them avoid potentially letal bites.

A common technic for treating some phobias is that of 'progressive exposure' in which sufferers are encouraged by a therapist to gradually get closer to the object of their fear. The idea is that at each stop the patient realises nothing bad is happening to them, which should lead to their fear gradually increasing. With someone who is terrified on spiders, for example, the therapist might start by showing them a picture of a spider, then introducing real spider in a glass box and slowly moving the box closer to them, then finally having them hold the spider in the parm of their hand. Therapy of this kind is says to be very effective, although in this case perhaps not very enjoying.

---

# Phobias

WORKSHEET D

Do you know anyone who suffers **from** equinophobia, pluviophobia or leukophobia? Or, to put it another way, do you know anyone who is very **afraid** of horses, rain or the colour white? You probably don't, and yet these are recognised **medical** conditions, **albeit** very rare ones.

According to many surveys, more than ten **per cent** of people in the United States have some kind of phobia (the word comes from the **Greek** *phobós*, meaning fear). There are, of course, dozens of different kinds, ranging **from** the obscure to the well known. The names of most of them have **been** created by adding 'phobia' to a Greek or Latin root – a process that has turned into something **of** a word game, with people inventing names for conditions that perhaps exist only **in** theory (for example androidophobia, the fear of **robots**).

True phobias consist of an intense but generally **irrational** fear that produces a very strong desire to avoid the object of that fear. Without **specialist** help they are very difficult to control and tend to **disrupt** the daily life of the sufferer. Quite often, however, the term *phobia* is also used to refer to a lesser degree of **fear**, or even just a strong feeling of **dislike**.

There is some **disagreement** as to the most common phobias, but the 'top ten' lists usually include arachnophobia (the fear of spiders), acrophobia (**heights**), claustrophobia (confined spaces) and aerophobia (flying in **aircraft**).

Phobias often originate **from** traumatic experiences earlier in life – for example an intense fear of dogs (cynophobia) often comes from having been **bitten** by one; and of water (aquaphobia) from having been close to drowning at some point. **In** some cases, however, experts suggest phobias are to some extent **evolutionary**, arising not from personal experience but from inherited ancestral memory lying **deep** in our brains. Arachnophobia and **ophidiophobia** (the fear of snakes) are often suggested as examples: for our distant ancestors, who lived closer **to nature** than we do, fear of poisonous spiders and snakes would have served the useful evolutionary **purpose** of helping them avoid potentially **lethal** bites.

A common **technique** for treating some phobias is that of 'progressive exposure' in which sufferers are encouraged by a **therapist** to gradually get closer to the object of their fear. The idea is that at each **step** the patient realises nothing bad is happening to them, which should lead to their fear gradually **decreasing**. With someone who is terrified **of** spiders, for example, the therapist might start by showing them a picture of a spider, then introducing **a** real spider in a glass box and slowly moving the box closer to them, then finally having them hold the spider in the **palm** of their hand. Therapy of this kind is **said** to be very effective, although in this case perhaps not very **enjoyable**.