

What makes researchers anxious? It's *Time to Talk* about talking about research

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Introduction

Employers participate in mental health initiatives in a number of ways. Key amongst these is the provision of accessible places and events for employees to discuss mental health issues. In the course of discussions in our organisation, Cambridge Assessment, researchers raised the issue of workplace activities that cause them anxiety – top of the list was giving presentations.

Inspired by these conversations, we held a workshop for staff to encourage the discussion to develop more widely, facilitated by the first two authors of this article. The workshop was timed to coincide with the UK national *Time to Talk Day*¹ in 2018 and it was agreed with participants at the outset that a summary of the discussions held during the event would be written up to form this article.

Background

Workplace anxieties have been investigated in the context of more general anxiety disorders, with Linden and Muschalla (2007) finding high levels of work-related anxiety amongst patients admitted to hospital as a consequence of stress. Colligan and Higgins (2006) explored the effects of workplace anxiety upon an organisation and found consequences including low morale, decreased productivity, and increased absenteeism.

The literature around the cognitive and physiological symptoms arising from workplace anxiety is extensive and references poor concentration, rapid heart rate, tremor, sweating, and dry mouth (Kelly & Seveanu, 2005; Wesner, Noyes & Davis 1990). Physiological responses have been linked to the activation of the *fight-or-flight* response of the sympathetic nervous system in response to stress (Harvard Health Publishing, 2018).

The Royal Academy of Dramatic Art (RADA) has an interest in anxiety arising in the workplace. *RADA Business* runs courses in managing nerves and dealing with stage fright, which it extends to a business context:

Many people in business experience a workplace equivalent to stage fright. We're calling the nerves, uncertainty and fear that we may feel in workplace scenarios in which we need to perform 'workplace performance anxiety', and many people in their daily working lives experience the feelings associated with it.

RADA Business (undated)

As a part of its work, RADA Business surveyed 1,000 business people and identified specific situations where workplace performance anxiety was experienced by a proportion of those surveyed. These included job interviews (37.5%), pay negotiations (30.0%), dealing with

disagreements (28.1%), giving a presentation (27.5%), making a pitch (24.4%), and networking events (24.2%).

Workplace anxieties which are particularly relevant to the specific work carried out by research staff are those relating to giving presentations and networking, including the 'cold calling' via telephone which is sometimes needed to recruit project participants. RADA's description of workplace performance anxiety sounds very similar to the anxiety that researchers have talked about in conversations about giving presentations.

In this article, we use the terms *presentation*, *performance*, and *workplace anxiety*. They are not necessarily interchangeable as they refer to an increasingly broad set of situations, but are each used in the context to which they seem most applicable.

The workshop

The hour-long workshop was held on 1 February, 2018 – the designated national *Time to Talk Day*. The full title (shown as Figure 1) reflected one of the key activities in a researcher's role which tends to cause anxiety – giving presentations.

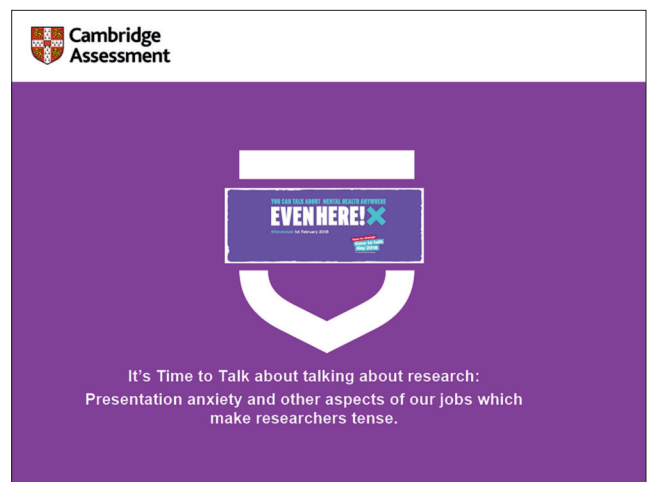


Figure 1: Title of the workshop

The workshop also allowed for the additional exploration of other sources of anxiety connected with talking about research, such as making phone calls to potential research participants, and discussing research performance in annual performance reviews. The key aim of the workshop was to start an open conversation amongst researchers at Cambridge Assessment. This conversation could have a wider impact by prompting other colleagues across the Cambridge Assessment Group, or in other organisations, to reflect on their experiences of workplace anxiety.

The format of the workshop included a brief introduction to the topic, followed by a 20-minute discussion in table-based groups about when,

1. *Time to Talk Day* is coordinated by *Time to Change*, a social movement working to change the way we all think and act about mental health. It says: "On *Time to Talk Day*, we want everyone to have a conversation about mental health". *Time to Change* is led by *Mind and Rethink Mental Illness*.

how, and what anxiety was experienced by participants in the course of their normal work. This was followed by a short presentation of key elements of the literature. Finally, a second round of open discussion was held in the same table groups as before, brainstorming practical strategies for reducing the impact of performance anxiety.

Table discussions format

Fifteen researchers from Cambridge Assessment attended the event. The participants represented a range of job descriptions and levels. Participants were free to sit where they chose, naturally ordering themselves into four small groups of approximately four participants each. This ensured a relatively random allocation to the groups, although in some cases friends or close colleagues will have chosen to sit together.

Table discussions guidelines

After the general introduction, each group was given 5 stimulus questions to discuss for 20 minutes. One member of each group was asked to take notes under the headings of the questions, and these notes formed the data corpus for analysis. The order in which the questions were presented to each group was intentionally varied to reduce the impact of adjacent tables' conversations, and to ensure that, if time ran out, all questions would have been addressed. The stimulus questions were:

1. Which workplace occasions prompt performance anxiety?
2. Are we open with colleagues if we are nervous? If not, why is that?
3. What are the physical symptoms of presentation anxiety and when do they occur?
4. What are the emotional symptoms of presentation anxiety and when do they occur?
5. Are there any other aspects of the issue you discussed?

The nature of anxiety experienced by workshop participants

The notes from the table discussions were analysed in three main stages. These broadly adhered to the principles of thematic analysis according to Braun and Clarke (2006), although a full-scale thematic analysis was not attempted due to the limited nature of the data. The first stage of analysis consisted of familiarisation with the responses through repeated reading. Secondly, common themes across the responses were identified. Thirdly, the themes were refined and, lastly, they were written up.

The themes yielded by analysis fell under three broad categories, which were aligned with the discussion questions: (a) openness about anxiety, (b) sources of anxiety, and (c) implications of anxiety. Table 1 shows the identified themes under their respective categories.

Table 1: Categories and themes about workplace anxiety identified by workshop participants

Category	Openness about anxiety	Sources of anxiety	Implications of anxiety
Themes	Role of culture	In the spotlight	Socio-emotional
	Workplace relationships	Conflict	Physiological
	Anticipated negative consequences	Hierarchy	Cognitive
		Appearing unintelligent	
		Uncertainty	

The following paragraphs illustrate each theme using extracts that supported the data. The extracts could be either individual opinions of group members, or opinions formed by group consensus. Since we were unable to determine this with certainty, we have not attempted to make this distinction in the findings. The groups are referred to as Group 1 to 4.

Openness about anxiety

Participants across all groups reported some circumstances in which they were open about their anxieties, and others in which they were not. Their openness about anxiety was influenced by cultural factors, workplace relationships, and anticipated consequences.

The role of culture

All four groups made reference to the role of culture in their openness about anxiety. Group 4 commented that talking about anxiety was not part of the organisational culture – “not much culture in the office about talking (generally) and this kind of thing”. Group 1 noted that they would “share when it’s something it’s socially acceptable to be nervous about”. This points to the role cultural norms have in determining whether anxiety is acceptable or not. Role expectations also featured. For example, Group 2 noted a reason they were not open about anxiety was that they “want to meet expectations”, and Group 3 would not be open due to a “fear of letting the side down”. However, they also noted they would share if they were invited to, indicating that employees may be open to talking about anxiety if this is encouraged by their colleagues. Timing may be important here, as Group 1 noted they might be more likely to talk about it after the event.

The role of workplace relationships

Workplace relationships featured prominently in discussions on openness about anxiety. Participants reflected on how their openness varied depending on whom in the organisation they were talking to, and what their relationship with that person was. For example, Group 2 noted “It depends on the colleague”; Group 3 wrote “[It] depends on both the personal and professional relationship you have with them”; Group 1 noted “[We would] share with people we are comfortable with”; and Group 4 said “[We would be open about our anxiety] if [we] feel close/comfortable with someone”. The extracts suggest that the strength of the relationship was an important factor in openness. If there was a weaker relationship, people were less willing to share. For example, Group 3 said that the “level of existing workplace relationship [is] not yet ready”.

For Group 2, relationships and openness were related to the organisational structure. They noted being less willing to share anxiety with colleagues from another department (known as ‘division’ in our organisation), but being more willing to share with their close team. They wrote “More likely to share within the team – save divisional face”. This may be a reflection of the relative strength of relationships of different teams. It is interesting that this group noted that sharing anxieties with team members allowed them to “save divisional face”. The team possibly provides a safe place for sharing anxieties, whilst avoiding embarrassment at a divisional or organisational level.

Anticipated negative consequences of being open about workplace anxiety

All groups reflected on the possible negative consequences of openness about anxiety. Negative consequences for the most part related to the potential for reputational damage. Group 2's note of "save divisional face" suggests that openness about anxiety could lead to humiliation. They also noted "people think worse of you and want to save face". Group 3 echoed this sentiment with "Fear of being judged", and Group 1 said "We're trying to avoid looking stupid". Conversely, some positive consequences were reported; for example, Group 4 noted that telling others about anxiety "gives an excuse". Caution should be exercised when interpreting these findings as it is unclear whether these anticipated negative consequences are based on actual past experiences, or if they are hypothetical or imagined fears.

Sources of anxiety

Analysis of the data yielded five themes relating to sources of anxiety, which were: (a) work being placed in the spotlight, (b) appearing or feeling unintelligent, (c) conflict, (d) hierarchy, and (e) uncertainty.

Although the themes are presented separately for theoretical purposes, it must be noted that each data extract may reflect various themes. For example, "receiving feedback on reports" could be a source of anxiety due to four of the above five themes:

- Appearing/feeling unintelligent – if the feedback is negative;
- Conflict – possible disagreement about the feedback;
- Hierarchy – if feedback is given within the context of an unequal power relationship; and
- Uncertainty – the element of the unknown related to what feedback will be received.

In the spotlight

The majority of reported sources of anxiety across all of the four groups related to workplace events in which work was placed in the spotlight for possible scrutiny by others, whether internally or externally. Commonly reported sources included "giving presentations"; "giving a talk"; "making and receiving phone calls, especially if overheard (e.g., in an open plan office)"; "sending drafts for people to see"; "being videoed"; "feedback meetings with advisors"; "receiving feedback on reports"; "annual performance appraisal meetings"; "report review meetings"; and "being interviewed". A specific instance of performing in front of others with high potential for embarrassment was "using technology in front of people with no practice (e.g., a conference call)".

Some sources of anxiety for Groups 3 and 4 were situations where work was under the spotlight to external parties. These included "feedback meetings with customers", "chairing conference sessions", "sending external emails", "publishing", and "talking to journalists". Participants reported pressure related to representing the organisation in such situations (e.g., "sending external emails").

Appearing/feeling unintelligent

A few sources of anxiety for Groups 1 and 3 seemed to reflect a fear of appearing or feeling less intelligent in front of others. For example, "asking about something you probably should know (feeling stupid)"

and "feedback meetings with certain people perceived as less tolerant of low knowledge". Group 3 also noted *imposter syndrome* as a source of anxiety, which refers to a belief that one is unintelligent despite numerous achievements and other evidence to the contrary (Clance & Imes, 1978). "Presenting someone else's work (that you might not even agree with)" could also be an instance of this theme, although the anxiety could result from other factors, such as a lack of confidence in the material to be presented.

Conflict

For Groups 1 and 2, a few sources of anxiety were the result of situations in which conflict was anticipated. These included "meetings with difficult colleagues", "asking someone to do something", "difficult phone calls", "meetings where you anticipate conflict", "meetings where you have to give negative feedback", and "meetings where you have to pass on bad or unwelcome news".

Hierarchy

This theme was prevalent across all four of the groups, and refers to sources of anxiety that were related to positions of power within the organisation. For example, "meetings with senior people", "meetings with high-status colleagues", "meetings with advisors", and "report review meetings" were all noted as sources of anxiety. "Asking someone to do something", which was mentioned in the previous theme, could also provoke anxiety due to power dynamics.

Uncertainty

For Groups 1 and 4, situations in which there was a high degree of uncertainty were noted to provoke anxiety. These were: "calling someone we don't know" and "[taking part in] calls with unknown people, especially conference calls" respectively. Group 2 also noted in their discussions about the symptoms of anxiety and "fear of the unknown".

Implications of anxiety on a researcher's functioning

All groups recognised the negative impact that anxiety had on their socio-emotional, physiological, and cognitive functioning.

Socio-emotional

Various negative emotions were associated with anxiety, including "fear", "panic", "terror", "annoyance", "irritability", "less happy" (low mood state), and "feeling small". Beyond these transitory emotions, anxiety was noted among some groups to have a wider impact on their lives through affecting their interpersonal relationships. Group 3 noted "being intolerant – reduced capacity to engage" and Group 1 noted that it could "affect inter-personal relationships".

Physiological

Anxiety was perceived to cause a myriad of negative physiological changes. These included symptoms associated with activation of the sympathetic nervous system which include gastrointestinal complaints ("stomach ache", "needing the loo", and "digestive problems"); "sweating"; speech production issues ("false start to sentences", "stumbling over words", "shaky voice", and "speaking less fluently,

faster or more quietly”); “shaking”; “increased heart rate”; “sleep problems”; and “dry mouth”.

Cognitive

Although the groups were not specifically asked to discuss the cognitive symptoms of anxiety, a few groups made mention of them. Group 1 noted *catastrophising*, which refers to focusing on the worst possible outcome, however unlikely, or experiencing a situation as unbearable or impossible when it is just uncomfortable. Groups 1, 2 and 3 made reference to the cognitive process of *ruminating* (*negative replay* and *ruminating*). Rumination refers to going over a negative thought or problem without activating the process of problem solving. Furthermore, Group 3 noted how anxiety can cause ‘distraction-can’t focus’, which refers to an impairment in concentration.

In summary, as expected, the sources of anxiety were predominantly performance related, in situations where participants felt they were in the spotlight. The participants sometimes feared possible negative evaluation or judgement. However, not all their anxieties were strictly related to traditional performance situations. Imposter syndrome was noted as a source of anxiety and there were a few interesting cases of anxiety in situations with high potential for conflict, and situations in which power imbalances were present. The latter two could relate to the broader construct of social anxiety, but they may also relate to fears of the unknown, and feelings of loss of control.

In terms of openness about anxiety, participants reflected on the different circumstances in which they would or would not be open about anxiety. The analysis pointed to the role that culture plays in this, specifically in terms of cultural norms and role expectations. Lastly, there was a wide range of socio-emotional, physiological, and cognitive symptoms occurring with anxiety.

Relating our researchers' reported experiences to the literature

Participants' experiences of social and performance anxiety in the workshop were similar to symptoms of social anxiety in general, and performance anxiety in particular. The anxiety seemed to revolve around a fear of negative evaluation by others, such as the fear of looking unintelligent or potentially embarrassing oneself. These findings were in line with what was expected, since the workshop was particularly focused on performance anxiety. While most of the anxiety-provoking situations in this research were performance-only, some could be related to the wider construct of social anxiety, such as talking to an unknown person on the phone.

Anxiety is both an emotional and physical condition, and therefore results in many symptoms across the socio-emotional, cognitive, and physiological domains. The symptoms reported by participants in this research were consistent with known effects of anxiety (American Psychiatric Association, 2013). The participants' discussions around cultural elements of anxiety revealed an awareness of the way in which cultural norms and expectations influenced their willingness to talk about anxiety. In particular, social norms were important as they noted how some forms of anxiety are considered acceptable, but not others.

Role expectations also influenced openness about anxiety. Role expectations reflect what is expected of individuals who occupy certain socially defined categories (Parsons, 1991). Participants in this research

referred to expectations and standards they felt under pressure to conform to, and which, at times, limited their openness. Hierarchy can also play a part. For example, situations characterised by unequal power relationships can provoke anxiety due to a lack of control for the individual occupying the lower status position (Gray, 1991; Raghunathan & Pham, 1999; Smith & Ellsworth, 1985).

Participants were concerned about looking and feeling unintelligent, a core feature of imposter syndrome. This syndrome also has cultural dimensions: experienced psychologists have noted that imposter syndrome is more likely to occur in cultures that place high value on achievement (Weir, 2018). The fear of appearing unintelligent was a source of anxiety, as well as a factor limiting openness about anxiety.

Participants' identification of uncertainty and fear of the unknown were not unexpected. Uncertainty and lack of control can be seen as two major fears underlying many forms of anxiety (Carleton, 2016; Gray, 1991; Raghunathan & Pham, 1999; Smith & Ellsworth, 1985), and they may explain why conflictual situations, and situations involving power imbalances, were perceived by participants to provoke anxiety. Conflicts are generally unpredictable and are often not in our control, and situations of power imbalances also result in a lack of control for the party with less power.

Respondents' reflections on the cognitive action of catastrophising when faced with certain situations are not surprising. Catastrophising is linked with performance anxiety in particular; for example, it has been found among students in relation to taking their GCSE examinations (Putwain, Connors, & Symes, 2010). Rumination is more concerning: it is a specific type of repetitive negative thinking (McLaughlin & Nolen-Hoeksema, 2011) and is a common factor in both anxiety and depression (Harrington & Blankenship, 2002).

Research on reducing performance anxiety

Research on reducing performance anxiety has come a long way in recent years. In our view, the technique underpinned by the strongest evidence base is that developed by Brooks (2014). Her key insight is to get people excited rather than nervous. Brooks argues that in psychological terms, anxiety can be conceptualised as an emotion characterised by high physiological arousal and negative valence, as well as uncertainty and a low sense of control (Gray, 1991; Raghunathan & Pham, 1999). This point is illustrated in Table 2, which also contains some contrasting emotions.

Table 2: Anxiety as an emotion

	<i>High physiological arousal</i>	<i>Low physiological arousal</i>
Positive valence (mood)	Excitement	Calmness
Negative valence (mood)	Anxiety	Boredom

A substantial literature indicates that reappraising negative emotions is more effective than suppressing them (e.g., Gross, 1998, 2001; Gross & Levenson, 1993; Hofmann, Herring, Sawyer, & Asnaani, 2009). Therefore, it might make sense superficially to attempt to reduce anxiety by reappraising it as calmness; that is, by telling ourselves we feel calm. Brooks argues, however, that calming ourselves down can be very difficult because it entails crossing both of the axes in Table 2. During high physiological arousal, we experience surges of adrenaline, causing

our hearts to race and our stomachs to turn over, and these processes are not easy to control consciously. Instead, it is easier to reduce anxiety by reappraising it as excitement. This entails crossing only the valence axis in Table 2. That is, it involves accepting a state of high physiological arousal but making ourselves feel positive rather than negative. We can move from anxiety to excitement by visualising something positive, and/or finding a reason to be excited about the impending task.

To test her ideas, Brooks (2014) conducted a series of experiments. In the first of these, 113 participants were informed that they would soon have to sing a popular song in public. In response to this news, their heart rates rose considerably. Prior to their singing performances, participants read out one of three statements:

1. *I am excited;*
2. *I am anxious;* or
3. *I am calm.*

Voice recognition software was used to assess each participant's singing performance in terms of pitch, volume, and rhythm. The singing performances of 'excited' performers scored an average of 81%. In contrast, 'anxious' performers scored an average of 69%, and 'calm' performers scored an average of 53%.

Brooks (2014) repeated her experiment using a public speaking task. Each of 140 participants had to give a 3-minute presentation explaining why they would be good work colleagues. Participants who said they were excited scored higher across measures of persuasiveness, competence, confidence, and persistence compared to participants who said they were anxious or who explicitly attempted to calm themselves down. Similar results were achieved in a study of 188 participants, each of whom attempted a difficult mathematics problem (Brooks, 2014). Overall, Brooks' findings provide a convincing demonstration that, prior to undertaking anxiety-inducing tasks, the way we talk about our feelings influences whether we feel anxious or excited, and this has a significant influence on our subsequent performance.

Summary of notes recorded by groups on practical techniques for reducing the impact of anxiety

The final session of the workshop was a brainstorming discussion about techniques that participants knew about, or had used to help ameliorate anxiety. The specific question which was presented as a stimulus was: *What other strategies are there for handling anxiety?* Figure 2 shows a completed recording sheet from one of the groups.

Table 3 presents the complete list of techniques that were generated during the session, in the participants' own words. In each case, an indication is presented of whether the technique is used before or during the event.

Nearly all of the techniques noted by participants in the final brainstorming session relate specifically to presentations, even though the stimulus prompt was more general. This may have occurred as a result of this being the overriding concern for many participants, or it may have been that the presentation from the literature tended to lead them to this point. The techniques suggested by workshop participants relate back to issues identified earlier in the workshop.

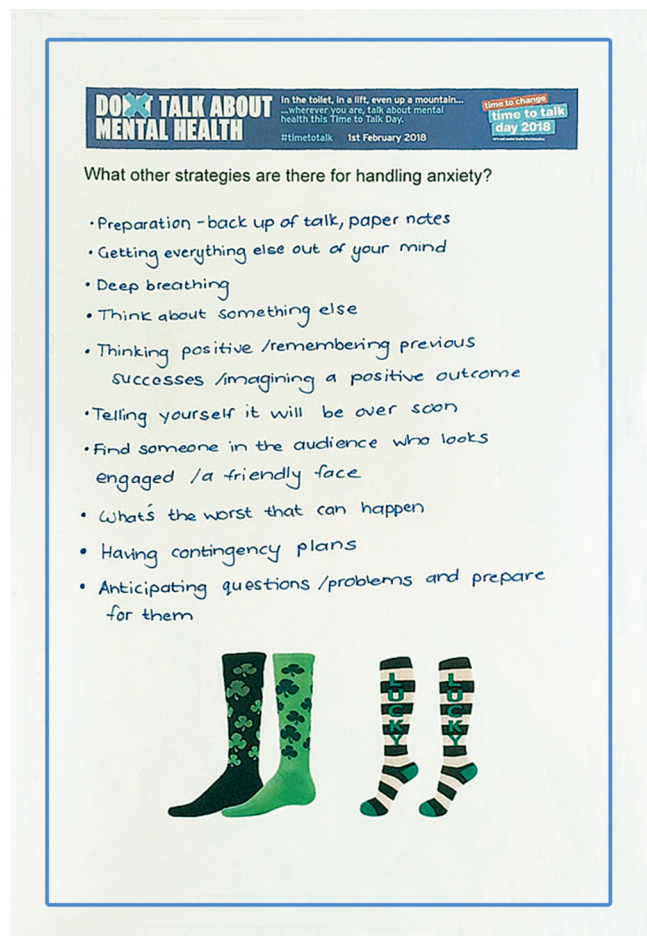


Figure 2: Completed recording sheet from the final discussion session

Social and performance anxiety

Suggestions of techniques to alleviate fears of negative evaluation or being embarrassed included preparation, thinking positively/imagining a positive outcome, finding a friendly face in the audience, focusing upon the opportunity with positive benefits to be gained, and having a presentation persona.

The technique of preparing for questions and anticipating problems ahead of time suggested in the final discussion session is one which directly addresses the issue of being perceived as unintelligent. More importantly, the knowledge of that preparation helps the individual to feel that they are not going to be in danger of being caught out.

Uncertainty and loss of control

Participants engaged with the need to have tactics for dealing with feelings of a loss of control and with potential conflict. As well as preparation, already discussed in the context of culture, participants suggested arriving early to test the presentation. This avoids being caught out by unexpected technical problems which might place the speaker in unfamiliar territory. Having anchor points within the presentation acts in a similar way – placing extra control back into the presenter's hands.

Socio-emotional, cognitive, and physiological responses

Many of the suggestions made by participants were in response to alleviating physiological symptoms of anxiety: breathing exercises, singing, and physical activity to dissipate energy. Some interesting suggestions were made which relate to managing cognitive elements of

Table 3: Techniques for alleviating anxiety in presentations and similar events, as described by workshop participants

	<i>In advance</i>	<i>Just beforehand</i>	<i>During</i>
<i>Preparation (paper notes, practice – particularly the beginning, check the room)</i>	◆		
<i>Have contingency plans (back-up of talk, paper notes)</i>	◆		
<i>Getting everything else out of your mind</i>		◆	◆
<i>Think about something else</i>	◆	◆	
<i>Breathing exercises</i>	◆	◆	◆
<i>"Thinking positive" by remembering previous successes or imagining a positive outcome</i>	◆	◆	
<i>Telling yourself it will be over soon</i>		◆	◆
<i>Find someone in the audience who looks engaged/a friendly face</i>			◆
<i>Think: What's the worst that can happen? Remember the grand scheme of things. Nobody will die. It's highly unlikely that you'll be the worst presenter they've ever seen.</i>	◆	◆	
<i>Anticipating questions/problems and preparing for them</i>	◆		
<i>Arrive early and test the presentation</i>		◆	
<i>Sleeping tablets</i>		◆	
<i>Wear comfortable/"confident" clothing</i>		◆	◆
<i>Have a drink</i>		◆	◆
<i>Sing a happy song</i>		◆	
<i>Practise a good physical stance</i>	◆		
<i>Run up the stairs to use up adrenaline</i>		◆	
<i>Tell a joke</i>			◆
<i>Lucky underwear – a fun secret that reminds you that you have a life outside</i>		◆	◆
<i>See the event as an opportunity with everything to gain</i>	◆	◆	◆
<i>Have a presentation persona – a professional sort of separate self</i>		◆	◆
<i>Try not to be alone so you don't immediately have dwelling time</i>	◆	◆	
<i>Have anchor points within the presentation</i>	◆		◆

anxiety. The presenters had noted suggestions such as "focusing upon a nice meal or activity as a self-reward after the event". Additional suggestions from workshop participants included two strategies for refocusing perspective: (a) "telling yourself it would be over soon", and (b) "wearing particular clothes as a confidence booster and reminder of life beyond work".

Openness and cultural elements of anxiety

Participants reported being open about their anxiety to colleagues in their teams with whom they had strong relationships. This is a protective factor since social support reduces the negative impact that anxiety has on a person's functioning. Cultivating strong workplace relationships may be a productive step for organisations to take to increase openness.

Limitations of the research

The research has several limitations. Firstly, the group who participated were self-selected and the workshop might reasonably be assumed to have not attracted people who are totally unaffected by anxiety, or those who are so badly affected that they prefer not to engage in discussions about it. Due to the cultural influences on openness around anxiety, participants may have been reluctant to share their true feelings in front of their colleagues and they therefore may have only discussed socially acceptable anxieties. This means that there could be a greater number of anxiety-provoking workplace situations that were not revealed in this research. There is also the possibility with roundtable discussions that one or a few participants dominated the discussion and the views of some participants were not represented. Errors could have been introduced as the person taking the notes may not have accurately recorded what others meant, and there is a possibility of misinterpretation of the notes during analysis. There were some instances where the meaning in what was written was not entirely clear and more detail would have aided analysis. Lastly, the wording of the questions led participants to focus on performance anxiety; therefore, few other sources of anxiety in the workplace were uncovered.

Conclusion

Core to this research was how workplace situations led to performance and social anxiety as experienced by Cambridge Assessment researchers who participated in the workshop:

- Participants feared negative evaluation and humiliation by others.
- Traditional performance situations provoked anxiety, but conflict situations and situations involving hierarchy were also noted as sources of anxiety.
- Participants were sometimes not open with others about their anxiety due to the fear of judgement, and this illuminated the role of cultural norms and expectations in openness about mental health issues, even in an organisation which takes great care to encourage this.
- Elements of culture and workplace relationships can either encourage or discourage behaviours, including talking about mental health.
- Participants were open about their anxiety if they considered it to be socially acceptable, and if they had strong relationships with their team members.
- Participants' anxieties were accompanied by a wide range of physiological, socio-emotional, and cognitive responses, all of which are known to accompany anxiety.

Organisations need to be aware of the situations which provoke anxiety amongst employees in order to enable the provision of support

and intervention. We anticipate that this research will be helpful in enabling research staff in our, and other, organisations to become more open in discussing the aspects of their role which cause anxiety. In turn, this will facilitate finding ameliorative solutions to the issues raised, to the mutual benefit of individuals and organisations. We hope that we have achieved the aim of opening a discussion among our own researchers and, with this article, we hope to extend that discussion to a wider audience.

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