

Exposure Practice for Agoraphobia

A practical guide to approaching fear gradually, with consent, pacing and learning.

Agoraphobia can make particular places or situations feel unsafe because escape may seem difficult, help may feel unavailable, or anxiety symptoms themselves have become frightening. Avoidance can bring immediate relief, but that relief can unintentionally teach the brain that avoiding was what kept you safe.

Exposure practice works differently. It creates a planned opportunity to approach a feared situation in a manageable way and discover what happens when you stay long enough to gather new information. The goal is not to force anxiety down. The goal is learning.

Important: exposure should be collaborative and chosen. A practice can be shortened, changed or stopped. Needing support is not failure, and the right starting point will be different for each person.

What exposure practice is - and is not

It is: gradual, purposeful, repeatable, based on a person's own goals, and focused on what can be learned. **It is not:** flooding someone with their biggest fear, removing genuine safety needs, demanding independence, or treating distress as something to be ignored.

Why small steps matter

A useful step usually creates enough anxiety for the brain to notice that something important is happening, while remaining manageable enough for the person to stay engaged. Very large jumps can become overwhelming; steps that are too easy may provide little new learning. The middle ground is personal, and it can change from day to day.

1. Choose One Practice

Start with one clearly defined situation. Instead of “go out more,” choose something observable, such as standing at the open front door for two minutes, walking to the gate, sitting in a parked car, entering a small shop, or travelling one stop with support.

Ask: What would I like to be able to do more freely? What is one small part of that activity I am willing to practise?

Before the practice

Question	Your notes
What situation am I practising?	
What do I predict might happen?	
What sensations am I worried about?	
What would make this step manageable?	
Who or what support is appropriate?	
What would tell me this step is currently too much?	

Rate the starting point

You can use a 0-10 scale as a rough guide, where 0 means no anxiety and 10 means the highest anxiety you can imagine. The number is not a test. It simply helps you compare experiences and notice change.

Before practice	During practice	After practice	What I learned
____ / 10	____ / 10	____ / 10	

2. Notice the Fear Cycle

When fear rises, the mind often makes a prediction: “I will faint,” “I will be trapped,” “I will lose control,” “people will notice,” or “I will not cope.” The body then responds as though danger is present. Escape or avoidance can reduce the anxiety quickly, strengthening the belief that the situation was dangerous.

During exposure, try to notice each part without treating it as proof that the feared outcome is happening.

Trigger	Prediction	Body response	Urge / safety behaviour	What actually happened

Safety behaviours

Safety behaviours are things we do specifically to prevent a feared outcome - for example, always standing beside an exit, repeatedly checking the route home, carrying an item believed to prevent panic, or relying on reassurance every few minutes. Some supports are genuinely necessary, including disability adjustments, mobility aids, medication and appropriate companionship. The aim is not to remove real support. It is to identify which behaviours are driven mainly by the fear prediction and decide, carefully, whether any could be reduced over time.

Try asking: If I kept all genuine support in place but reduced one fear-driven behaviour slightly, what might I learn?

During the practice

Let the situation provide information. Look around rather than monitoring every internal sensation. Notice anxiety as a changing experience rather than an emergency instruction. If anxiety rises, you can acknowledge it: “My alarm system is active. I can decide what I do next.”

3. Reflect on What Happened

The learning after an exposure can be as important as the practice itself. Compare the prediction with the outcome rather than judging the session only by how anxious you felt.

Reflection	Notes
What did I predict?	
What actually happened?	
Did the feared outcome happen fully, partly or not at all?	
What did I cope with that I did not expect?	
What helped without becoming a rule I must always follow?	
What would I do differently next time?	

Success is broader than feeling calm

A practice can be useful even if anxiety stayed high. Success might mean approaching rather than avoiding, staying for the agreed time, noticing a prediction without immediately acting on it, asking for appropriate support, or learning that a step needs to be smaller. These are all pieces of information.

A helpful question: What did this experience teach me that avoidance could not teach me?

Repeat, adjust or move forward

New learning often becomes stronger through repetition. You might repeat the same step until it feels more familiar, vary the setting so learning becomes flexible, reduce one unnecessary safety behaviour, or choose the next manageable step. There is no requirement to move up a hierarchy on a fixed timetable.

My Small-Steps Practice Planner

Use this page to create a sequence that belongs to you. The order can change. Add steps, split them into smaller parts or return to an earlier step when circumstances change.

Practice step	Expected anxiety 0-10	Support / adjustment	What I want to learn
1.			
2.			
3.			
4.			
5.			
6.			

Permission to pace yourself

Exposure is not a competition. Illness, sensory overload, fatigue, trauma reminders, major life stress and changes in support can all affect what feels manageable. Adjusting the plan is part of responsive practice, not evidence that progress has disappeared.

When extra support may help

Consider working with a suitably qualified mental health professional if fear is severely restricting daily life, exposure repeatedly becomes overwhelming, panic is difficult to distinguish from a medical problem, trauma is strongly connected to the feared situation, or you are unsure how to separate genuine safety needs from fear-driven behaviours. A professional can help tailor the pace and approach.

Remember: the purpose is not to prove that you should never feel anxious. It is to help your brain discover that anxiety can be present while you still have choices.

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Space to Breathe Therapy

This resource is for psychoeducation and self-reflection. It is not a substitute for individual medical or psychological assessment.