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Aldemaro Romero Jr.  
*CUNY Bernard M Baruch College*

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# Sibrava studies, teaches about stress and anxiety

## Dr. Aldemaro Romero Jr. *College Talk*

“There’s a cliché answer that you get from a lot of folks who say, ‘Well, I’ve always been interested in people,’ and that is true, but for me I always fantasized about being a lawyer when I grew up.” This is how Dr. Nicholas Sibrava explains his choice of career. In fact, he envisioned himself in a courtroom, just like in the movies.

It also explains why this native of Cleveland, Ohio obtained a bachelor’s degree in both criminology and psychology. The psychology part crept up on him while taking some psych courses. “Somewhere along the way I flip-flopped and became more and more interested in understanding people, in understanding psychology on an individual basis. Whereas criminology and sociology understand human behavior from a more macro level.”

Sibrava went on to obtain a master’s and a doctorate in psychology from Pennsylvania State University, and today he is an assistant professor of psychology in the Weissman School of Arts and Sciences at Baruch College.

Sibrava is not your stereotypical psychologist who analyzes people on a couch, but rather one who uses a laboratory for his studies. “As an undergrad at Ohio State, I was very fortunate to have opportunities to work in a couple of different research labs that were focused on anxiety and stress and do some really interesting research that showed me how intimately connected our minds and our bodies really are. One of the labs I worked in was called a psychoneuroimmunology lab, which is a very fancy way to say how the mind impacts the immune system.”

He now studies two topics familiar to all of us: stress and anxiety. “There are many ways to cope with stress. Some are wiser choices than others. But there’s no denying that drugs and alcohol are effective in the short term. They then create a host of their own problems. I try to understand how we break this cycle of addiction. You have to be thoughtful about not just trying to reduce drug and alcohol use, but trying to then increase healthier and more positive ways of managing stress,” explains Sibrava.



Dr. Sibrava at work.

Although stress seems unique to adults, it has roots in early childhood. “Somewhere around the age of six months, we begin to form what is essentially a lifelong way of coping with distress and relating to other people, and we refer to this as an attachment style. Human beings are wimpy babies. We are very ill-prepared for life at birth,” says Sibrava.

Therapists are very conscious that their effectiveness depends on how good a relationship they develop with their patients. “One of the ways you measure that is by what’s called a therapeutic alliance. Essentially what this measures is the quality of our relationship; how much do you trust me as a therapist, how well are we aligned on our goals and our tasks. One of the strongest predictors of successful treatment outcomes—regardless of what you do—is the quality of the therapeutic alliance.”

Something that psychologists have studied is

“Stockholm Syndrome,” defined as feelings of trust or affection felt in certain cases of kidnapping or hostage-taking by a victim toward a captor. This is one of the most stressful situations anyone may encounter, and Sibrava has views on the matter. “I would say that when we are under distress of any kind we do seek connection. Human beings are interpersonal creatures by nature. We are pack animals, we live together in groups. This attachment process is universal and very important. Even if it’s not conscious, we may be driven by this attachment need but also sort of wise enough to know that, if we befriend our captors, it may increase our chance of survival.”

Research has shown that a lot of what we consider to be mental illness—ranging from depression and anxiety to psychosis and schizophrenia—should not be considered separate from the normal healthy human experience. “I

think of it as a continuum that we all have a certain bouquet of traits,” explains Sibrava. “Some of us are fortunate enough that the severity of that trait is low, and it doesn’t interfere with our lives. For some of us, however, the severity is great, and it crosses some sort of threshold that makes it interfere with our lives in significant ways.”

Another disorder that Sibrava has studied is Obsessive-Compulsive Disorder or OCD. “I think most of us have a tendency toward some of these things, but some of us—via genetics or our developmental history—drew a bad card and ended up with a high level of it. There are particular structures in the brain that are actually gatekeepers for our impulses and allow us to stop or—in the case of things like OCD and Asperger’s perhaps—fail to stop us from acting on an impulse. It’s not necessarily a conscious will power thing; it’s really deeply seated in the mechanism of the brain, the sort of gate that opens or closes and says, ‘Yes, go and do it’ or ‘No, don’t.’”

This summer Sibrava will be working on some long-term studies he has been conducting on mental conditions and race. He is looking at whether race or other circumstances such as education or other socio-economic factors can explain certain differences. “What is it about the experience of being a Latino-American and an African-American that may be contributing to the fact that you are not recovering at a good enough clip relative to your non-minority counterparts, even though you have access to treatment, even though your education level is comparable, even though your income is comparable.”

Sibrava hopes that these studies can help in the treatment of mental conditions. “We can transform these data into more effective treatments or better outreach programs or better prevention initiatives to try to do better, so these folks aren’t being left behind.”

*Aldemaro Romero Jr. is the Dean of the Weissman School of Arts and Sciences at Baruch College of the City University of New York. The radio show on which these articles are based can be watched at: <https://vimeo.com/224250526>*

*He can be contacted via [Aldemaro.Romero@baruch.cuny.edu](mailto:Aldemaro.Romero@baruch.cuny.edu)*

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