

CALM, MAP, STRENGTHEN AND RESOLVE (C.M.S.R): A BRIEF INTERVENTION PROTOCOL FOR ANXIETY

ACALMAR, MAPEAR, FORTALECER E RESOLVER (A.M.F.R): UM PROTOCOLO DE INTERVENÇÃO BREVE PARA ANSIEDADE

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ABSTRACT

The topic of anxiety has been widely studied in the field of science as a complex emotional response, involving physiological, cognitive and behavioral components (Barlow, 2002). Most traditional therapeutic approaches prioritize the symptomatic management of anxiety, where the majority only treat the effects of anxiety, but do not address, in a structured way, the generating cause, thus leaving aside the assumption that for there to be an effect, there must be a cause. This article intends to present an original therapeutic protocol, called "Calm, Map, Strengthen and Resolve" (A.M.F.R.), developed based on the literature in the area and based on the clinical practice of the author of this text. This therapeutic protocol model for combating anxiety is based on the assumption that anxiety is not a cause, but only an effect — where it presents itself as a sign that there are conflicts, real or imaginary, that need to be identified and resolved. The A.M.F.R protocol proposes four progressive steps, where the successor step depends on the predecessor step. The four steps are: CALM – MAP – STRENGTHEN – RESOLVE. The text was structured in order to explain what the aforementioned Protocol is, on what criteria it is organized and developed, in addition to presenting some practical cases that demonstrate its effectiveness and functionality. In short, we hope to contribute to publicizing this effectiveness, highlighting the advantages of applying and replicating the Protocol in other contexts, as it has proven to be a powerful resource for overcoming anxiety.

Keywords: Anxiety. Psychology. Protocol. Therapeutic. Cause. Solve.

RESUMO

O tema ansiedade tem sido amplamente estudado no campo da ciência como uma resposta emocional complexa, envolvendo componentes fisiológicos, cognitivos e comportamentais (Barlow, 2002). A maior parte das abordagens terapêuticas tradicionais prioriza o manejo sintomático da ansiedade, onde se trata em sua maioria apenas os efeitos da ansiedade, mas não se aborda, de forma estruturada, a causa geradora, deixando assim de lado o pressuposto de que para existir um efeito, é necessário que exista uma causa. O presente artigo tem a intenção de apresentar um protocolo terapêutico original, denominado "Acalmar, Mapear, Fortalecer e Resolver" (A.M.F.R.), desenvolvido com base na literatura da área e a

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partir da prática clínica do autor deste texto. Este modelo de protocolo terapêutico de combate à ansiedade, parte do pressuposto de que a ansiedade não é causa, mas apenas um efeito — onde ela se apresenta como um sinal de que existem conflitos, reais ou imaginários, que precisam ser identificados e resolvidos. O protocolo A.M.F.R propõe quatro passos progressivos, onde o passo sucessor, depende do passo antecessor. Os quatro passos são: ACALMAR – MAPEAR – FORTALECER – RESOLVER. O texto foi estruturado de modo a explicitar o que é o referido Protocolo, em quais critérios ele se organiza e se desenvolve, além de apresentar alguns casos práticos que evidenciam a sua eficácia e funcionalidade. Em suma, espera-se contribuir para divulgar essa eficácia, evidenciando as vantagens da aplicação e réplica do Protocolo em outros contextos, uma vez que ele tem se mostrado um potente recurso para a superação da ansiedade.

Palavras-chave: Ansiedade. Psicologia. Protocolo. Terapêutico. Causa. Resolver.

RESUMEN

El tema de la ansiedad ha sido ampliamente estudiado en el campo de la ciencia como una respuesta emocional compleja, que involucra componentes fisiológicos, cognitivos y conductuales (Barlow, 2002). La mayoría de los enfoques terapéuticos tradicionales priorizan el manejo sintomático de la ansiedad, donde la mayoría solo trata los efectos de la ansiedad, pero no aborda, de manera estructurada, la causa generadora, dejando así de lado el supuesto de que para que haya un efecto debe haber una causa. Este artículo pretende presentar un protocolo terapéutico original, denominado "Calmar, Mapear, Fortalecer y Resolver" (A.M.F.R.), desarrollado con base en la literatura del área y con base en la práctica clínica del autor de este texto. Este modelo de protocolo terapéutico para combatir la ansiedad se basa en el supuesto de que la ansiedad no es una causa, sino sólo un efecto, donde se presenta como una señal de que hay conflictos, reales o imaginarios, que deben identificarse y resolverse. El protocolo A.M.F.R propone cuatro pasos progresivos, donde el paso sucesor depende del paso predecesor. Los cuatro pasos son: CALMA – MAPA – FORTALECER – RESOLVER. El texto se estructuró con el fin de explicar qué es el mencionado Protocolo, bajo qué criterios se organiza y desarrolla, además de presentar algunos casos prácticos que demuestran su efectividad y funcionalidad. En definitiva, esperamos contribuir a dar a conocer esta eficacia, resaltando las ventajas de aplicar y replicar el Protocolo en otros contextos, ya que ha demostrado ser un poderoso recurso para superar la ansiedad.

Palabras clave: Ansiedad. Psicología. Protocolo. Terapéutico. Causa. Resolver.

1 INTRODUCTION

Anxiety is a universal emotion, often associated with perceptions of threat and activation of the autonomic nervous system (Beck & Clark, 1997; Barlow, 2002).

Mental health-related problems have been related to multiple social, cultural, economic, and environmental factors. The social, educational and work contexts and access to health services can be identified as psychosocial and environmental stressors. (COSTA et al., 2019, p.4)

Brazil is often cited as the country with the most anxious people in the world, according to the World Health Organization (WHO), with 9.3% of the population affected (18.6 million) in 2019 data. According to this Organization, the global prevalence of anxiety and depression increased by 25% in the first year of COVID-19.

The Covitel survey (June, 2023) indicated a 26.8% prevalence of anxiety in Brazil, higher among women (34.2%).

Another recent survey by the Cactus Institute and AtlasIntel (Cactus Institute, June 2023) showed that 68% of Brazilians report feelings of nervousness, anxiety, and tension, but more than half (55.8%) have never sought professional help.

When it becomes chronic, the manifestations of anxiety can impair the ability to perform daily activities. Performing tasks that were once simple, such as leaving the house, going to work, or interacting with other people, become challenges. Low concentration, procrastination, and fear of making mistakes can result in underwhelming performances. Similarly, excessive worry can also lead to social isolation and damage friendships and family relationships. (Albert Einstein Hospital, 2025).

Within the study of anxiety, some theoretical models describe the mechanisms that maintain anxious states, including cognitive distortions, avoidance responses, and behavioral avoidance (Ellis, 1962; Lazarus & Folkman, 1984). However, unfortunately, most existing clinical protocols tend to focus only on the symptomatic control of anxiety, and not on the effective resolution of its cause. It would be very wrong and dishonest to say that the traditional model does not bring any improvement to the patient's life, and it is very clear that it does, after all there are decades of research, where psychology professionals have been helping people to deal with anxiety in their lives. However, as previously mentioned, in most cases, this improvement does not tend to become permanent in the long term because, as the cause has not yet been resolved, it will tend to continue bringing anxiety to this patient's life.

Throughout my years of clinical practice, I have reached the mark of more than seven thousand five hundred hours of individual care, where I could realize that anxiety is not a cause — but that it is only an effect and I have concluded that, when the person discovers and faces what is generating anxiety in their life, The symptom loses strength and tends to disappear.

My intention with this article is to present a new alternative and structured therapeutic model, the Anxiety Protocol that I have named the **A.M.F.R. Protocol.**, a model that I have been testing for years within clinical practice and that has offered a much more practical, brief and resolute path in the fight against anxiety, a model that is based on both scientific literature and clinical experience, through application with patients with the most varied complaints of anxiety.

2 OBJECTIVE

My objective with this article is to demonstrate the effectiveness of the A.M.F.R. Protocol, developed by me, which has shown great promise in the face of the anxiety that I have helped my patients to face in the most varied areas of their lives.

It is possible to see that the A.M.F.R Protocol is effective, both for the patient who suffers from anxiety on a daily basis, caused by specific situations, and for patients who suffer from T.A.G (Generalized Anxiety Disorder), anxiety crises and even patients who suffer from panic attacks, because the A.M.F.R Protocol begins with the patient learning to use validated techniques to calm down and goes to the final apex, which is when he feels ready to face the causes of anxiety in his life. In addition, the Protocol contributes to the individual being able to experience relief and the feeling that he is the one who controls his life and is not controlled by anxiety and its effects.

Table 1

Table of the expected schedule of the a.m.f.r protocol

STEP	NAME	MAIN OBJECTIVE	EXPECTED RESULT
STEP 1	Calm down	Emotionally stabilize the patient and control the crisis	Immediate reduction of anxious response
STEP 2	Map	Identify the real causes, whether internal or external, real or unreal	Clarity about the source of the anxious symptom
STEP 3	Strengthen	Acquire skills and resources to deal with the cause of anxiety	Development of emotional autonomy and practice of new resources
STEP 4	Solve	Confront and eliminate the root of anxiety (address the cause)	Sustained reduction of anxiety and breaking the cycle of anxiety

Source: Authors.

3 THEORETICAL FRAMEWORK

Classical studies describe anxiety as an adaptive response to perceived threats (Clark & Wells, 1995), originating from interactions between cognitive, emotional, and environmental factors (Lazarus & Folkman, 1984).

In clinical practice, this response often manifests itself in intense crises, feelings of lack of control, and avoidance patterns (Beck & Clark, 1997).

Traditional approaches — such as CBT (Cognitive-Behavioral Theory), TREC (Rational Emotive Behavioral Therapy) and mindfulness techniques — have proven effective for symptomatic management and psychoeducation (Beck, Ellis, Kabat-Zinn), however, few protocols structure a step-by-step process that takes the patient from emotional regulation to concrete resolution of the cause.

In this scenario, **Protocol A.M.F.R.** It emerges as an original contribution, offering a practical model where it integrates emotional stabilization, identification of the cause, strengthening and coping with the cause that generates anxiety, focusing on the patient's autonomy over their own life and on the resolution of the conflict.

4 METHODOLOGY: THE A.M.F.R. PROTOCOL

The A.M.F.R. Protocol was developed based on clinical experience with more than seven years in the care of the most varied types of patients and with different degrees of anxiety. The protocol is theoretically based on the understanding that anxiety is not a cause, but only an effect, where the human brain, faced with a possible perceived threat, ends up reacting in flight and avoidance mode to get rid of this possible danger, thus triggering all known symptoms, where each patient experiences them in different ways and intensities.

Regardless of the cause of anxiety in the patient's life, the symptoms and even their intensity, the A.M.F.R. Protocol has proven to be a great tool in the management of anxiety, as it is not limited to treating only the symptoms, but each of the causes of anxiety in the patient's life. Of course, each patient will experience the A.M.F.R Protocol in a completely different way, as we need to take into account the level of anxiety symptoms experienced by him, his ability to look at himself and his life so that he can be able to map the causes of his anxiety, the level of preparation he has, that is, the resources, both internal and external that he carries with him, that have been built throughout his life (this determines the level of strengthening that this patient will need to develop to obtain resources and courage to face the causes of his anxiety). Finally, depending on the cause of your anxiety, it will be easier or more difficult to solve it, taking more or less time to do so. Even in the face of all these variables, the A.M.F.R. Protocol is effective, as it follows a logical line of reasoning that leads

the patient through a step by step that is totally possible to be put into practice within the scope of the therapeutic process.

Step 1 – Calm down: in this step, the search is for emotional stabilization of the patient who is in a state of anxiety, through techniques developed so that he becomes able to calm down.

I want to describe here one of the techniques that I most often teach my patients within the A.M.F.R. Protocol for the management and reduction of anxious symptoms, is the Technique entitled "5,4,3,2,1", widely taught and disseminated among psychology professionals, a technique that consists of helping the patient to take his attention away from the point of tension that is causing him anxiety and put it in other things and places, using the five sense organs, Sight, Touch, Hearing, Smell, and Taste. In this technique I lead him to observe and describe: 5 things he can see (vision); 4 things he can feel (touch); 3 things he can hear (hearing); 2 things he can smell (smell); 1 thing he can taste (taste).

Depending on the intensity of the anxious symptoms experienced by him, the patient can repeat this sequence of actions more than once using his five sense organs, which almost always brings very positive and significant results in the management of anxious symptoms, because when he begins to describe the environment, he tends to take his attention away from the focus of tension and begins to disperse this "energy" of fight and flight, thus being able to "Calm Down".

Step 2 – Map: in this step, the search is to identify the cause, find out what are the elements that cause anxiety in this patient's life. The interesting thing here is to understand that the element that can be the cause of anxiety today may not be a month from now. Example: Perhaps the mapped cause of anxiety in the patient today is a problem in the marital relationship, a problem that may have been solved with a conversation, a request for forgiveness or even a change in behavior on the part of those involved, thus causing the disappearance of the anxiety-causing factor.

Step 3 – Strengthen: in this step, the search is for the acquisition of resources, skills and knowledge that the patient does not have today, so that he can be able to fulfill step number 4, which is to "Solve" the causes of his anxiety. Example: Perhaps the cause of anxiety in this patient's life is financial problems, so in order for him to fight this anxiety and be free of it, he needs to learn to deal with his financial life, he needs to learn to deal with money, negotiate or renegotiate debts if this is the case, or even, learn how to make the family budget fit within the earnings.

Step 4 – Solve: in this final step, the intention should be to encourage the patient to face and solve everything that has caused anxiety in his life, since now the causes of anxiety

are no longer hidden from his eyes and he has also acquired tools that have strengthened him to face such causes. The idea here is to provoke and encourage confrontation with caution, so that such confrontation is not a cause of more anxiety for this individual.

5 RESULTS AND DISCUSSION

A.M.F.R. differs from traditional protocols in that it leads the patient to the problem-solving process of anxiety. Approaches such as CBT and TREC offer valuable tools for cognitive understanding and symptomatic management (Beck & Clark, 1997; Ellis, 1962), but do not clearly structure a stage of practical resolution. This gap, already recognized in part of the literature (Barlow, 2002; Clark & Wells, 1995), is filled by the A.M.F.R., which integrates psychological technique with concrete action, promoting autonomy and changes that tend to be sustainable in the patient's life.

In clinical practice, patients who go through the four stages report a reduction in the frequency and intensity of anxiety crises, a greater sense of control, the development of skills, and a decrease in avoidance patterns.

In my clinical experience, what makes the most difference within the four steps of the A.M.F.R. Protocol is the step where the patient is led by the professional psychologist to have the courage to "Solve" (face) the cause of his anxiety, but of course, this only after performing step number three, which is to Strengthen the patient for such action. Given the importance of the patient having the courage to face and "Solve" the cause of their anxiety, I will bring here two reliable reports that happened to my patients while I was applying the A.M.F.R. Protocol to them within the therapeutic process in which they were attended by me.

6 APPLICATION OF THE PROTOCOL IN CLINICAL CASES

In this successful case against anxiety using the A.M.F.R., it is possible to perceive the importance of the patient not only learning mechanisms and techniques to just "Calm down", but also to "Solve" the causes as well:

Once I saw a woman who had become my patient because of a *live* broadcast on one of my social networks, nothing I taught her, none of the techniques I presented became effective in the fight against Anxiety, and as the sessions went by I started to get uncomfortable, because I know that what I teach works, because it has already worked and helped hundreds of people in various parts of the world and in almost all states of Brazil, that is, they were all methods validated over the years within my clinical practice experience.

I work initially with my patients with packages, where each package lasts for 10 weeks, or 10 sessions, and that woman was already on our seventh date and nothing seemed to

minimize the anxiety she felt as I mentioned above, until that day, by chance, while I was receiving her to start our session, I asked a question about a person she and I knew in common, and at that moment, when she heard that name, immediately her countenance changed, and she said that she couldn't take it anymore and that she needed to tell me something that she hadn't yet had the courage to tell anyone about that person.

When this patient told me that she needed to tell me something that she had not yet had the courage to tell, I confess that I was excited, but I also confess that I was afraid of what could come, and in fact something complicated came for any psychology professional to hear. One of the types of reports that saddens me the most: child sexual abuse.

She told me that that person I had asked about had sexually abused her in childhood and even today in adulthood this still disturbed her, still caused a very great sense of injustice, which it is! I confess that what that young woman told me aroused two feelings in me.

1st Feeling: anger and indignation for what someone had done to her, because no person in the world deserves to be violated in their rights over their own body, especially a child.

2nd Feeling: relief and hope. These two feelings made sense, because now I had just found what had been generating anxiety in that woman for years. I had just managed to "Map" (the second step of the A.M.F.R. Protocol). Because she had never talked that way about the abuse with anyone before me, she had built up a lot of "emotional pressure" for years, and that emotional pressure eventually led to anxiety. I like to think that emotional pressure works like a spring, which when pressed, tends to return to its original state, causing impacts on the environment around it. Because of the abuse, the emotional pressure had been forcing her "emotional spring" down for at least 20 years, a spring that from time to time "escaped", causing her to experience terrible bouts of anxiety.

When she finally told me, I had in my hands the map of what to do with her and how to act, and that's exactly what I did, and the result was that her anxiety ended, and the reason it ended was because, by talking about the event of the past, she and I together were able to "Map" the causes of her Anxiety, thus, through the techniques, she felt emotionally strengthened to face and "Solve" everything that was bringing emotional pain to her. Through what I taught, she was able to resignify the past, let go, "let go of the spring" and also to first forgive herself for having kept it a secret about it for so long and also forgive those who had done that atrocity to her. In other words, her anxiety is over because she has solved the causes of the anxiety. I think it is interesting to point out here that the process of forgiveness and self-forgiveness were essential in her case, and she did not forgive the abuser because

he deserved to be forgiven, but because she discovered that she deserved to be free from all the pain that his actions brought to her – and the path she found was forgiveness.

I reinforce here that yes, it is possible to lead our patients to practice the A.M.F.R. Protocol, because through it we can follow a simple and coherent step-by-step capable of helping our patients to get rid of anxiety in their lives.

In this case of defeat against anxiety, it is possible to realize the importance of the patient not only learning mechanisms and techniques to "Calm down", but also to "Solve" the causes as well, because when this does not happen, anxiety tends to remain there.

I remember a real case, where a patient, a Brazilian woman who lived in France, came to me through the internet asking for help in relation to anxiety. Already in the first session I remember that I taught her some techniques on how to "Calm down" an Anxiety crisis and from one session to the next it was possible to notice a clear improvement, given the fact that by practicing what she was taught she quickly began to be able to "Calm down" in the moments where she felt Anxiety. In the subsequent sessions, I began my work of investigation and mapping of what was really the cause of her anxiety, and it didn't take long for it to come to light that the real cause of her anxiety was a very serious relationship problem with her mother. She suffered from this relationship with her mother since she was little, and the hurts she had accumulated in relation to this person, over the years, began to weigh down, bringing a lot of sadness, anguish and, consequently, anxiety.

According to the patient's reports, her relationship with her mother was practically beyond repair, and due to professional ethics I cannot offer many other details about what had happened between them, but I can assure you that the situation was really very complicated; In addition to everything that had already happened throughout their lives, in the last three years the mother had taken custody of two of the three children of this patient of mine, thus generating a real emotional abyss between them.

When we mapped out together that the cause of her anxiety was due to the relationship with her mother and the hurts that were being accumulated, I began to encourage her to start the process of solving the real problem, which at that moment focused on the amount of hurts accumulated in relation to the mother. Once this was done, I began to present her with the solution, which at that moment would be to strengthen her (third step of the A.M.F.R. Protocol) to be able to forgive her mother for everything bad she had done to her.

It is obvious that, according to the perception of my patient, the mother did not deserve her forgiveness (here I make it clear that forgiveness does not invalidate anything that happened), but that forgiveness, as studies and literature point out, has the power to generate

the ability in those who practice it to no longer let themselves be affected by what happened to them, And this was precisely my proposal to my patient.

In this case reported here, the mapped cause of her anxiety according to the A.M.F.R. Protocol was the lack of forgiveness in relation to the mother, and with that the search for strengthening was started by me immediately, but when we arrived at the fourth step of the A.M.F.R. Protocol, the patient did not show interest in "Solving" what caused her anxiety, which resulted in a negative experience for herself at that moment, as the anxiety remained there, since the cause had not yet been resolved.

7 CONCLUSION

The understanding of anxiety as an effect, and not as a cause, opens space for new forms of intervention.

The A.M.F.R. protocol — Calm, Map, Strengthen and Resolve — presents a practical, structured and problem-solving approach, based on consolidated theoretical foundations and real clinical experiences.

This model represents an original contribution to contemporary clinical psychology, offering therapeutic clarity, applicability in different contexts, and potential for international diffusion, and this is my intention with this article, because the suffering in people's lives due to anxiety is both intense and real, because for Freitas et al. (2024, p.647) recent studies indicate a high incidence of anxiety disorders and depression, making it essential to understand the factors that contribute to these mental health problems.

I am sure that the A.M.F.R. Protocol, created by me through my clinical practice, is not the only model, but it can become a model adopted by other professionals, in order to bring more health and quality of life to our patients who are real people, experiencing real situations in their lives.

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