Chapter 14: Methods for Changing our Thoughts, Attitudes, Self-Concept, Motivation, Values and Expectations

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Introduction



Our mental processes--our "cognition "--play a complex and dramatic role in our lives. Our cognition makes us human. We can cope only by first sensing and understanding the environment. Sometimes we misperceive and wrongly interpret the situation, causing problems. Our expectations and response sets partly determine how we see the world. Our attitudes, suspicions, and conclusions about others also determine how we relate to people. Our hopes, dreams, and/or fears become self-fulfilling prophesies and determine the future to some extent. As we saw in chapter 3, our values and goals determine the directions our lives take. Our knowledge of human behavior, including self-help skills, and our rational planning partly determine our success in achieving our life goals. Our motivation also determines how far we go in the directions set by our needs and values. The discrepancies between reality and our ideals will determine how satisfied we are with ourselves and our lives. Most importantly, humans are the only species which can systematically study its own thought processes; we know some of our inner selves. This entire phenomenal world of cognition is due to 2 1/2 pounds of 100 billion nerve cells inside each human head. The brain weighs less than 3% of our total weight but burns 25% of our total oxygen intake. It is a busy, powerful, phenomenal, mysterious place.



Humans are the only animals endowed with enough mental capacity that they may *glorify themselves* by believing they will spend eternity in heaven with a God who looks like them, *or*, at the other extreme, they may denounce and *abhor themselves* so much that they choose to end their lives.



Between 700 and 1500, the concept of the "self" referred to only the weak, sinful, crude, "selfish" nature of humans. The evil "self" was contrasted with the divinely perfect nature of a Christian soul. Joseph Campbell believed the concept of an independent, self-directed "self" didn't start to develop until about 800 years ago. So, it is a relatively new idea (somewhat older than the idea that we are not at the center of the universe) which has grown in importance. In medieval times,

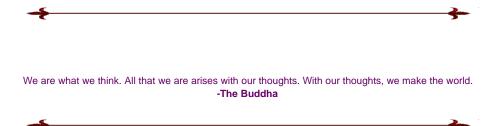
values and meaning were dictated by the community ("do what you are told to do"). Today, modern "self" theory says each person is expected to decide what is right (almost by magic and without much reliance on the accumulated wisdom of the culture) and to know him/herself well enough to determine what courses of action "feel right." In short, we must know ourselves, so we can set our life goals and self-actualize. The cultures of 1200 and 2000 are two very different worlds.

Today, our self-concept, i.e. our knowledge, assumptions, and feelings about ourselves, is central to most of the mental processes mentioned in the last paragraph. This self-awareness is one of the most important concepts in psychology. We know that each person's self-concept is different from all others. But, surprisingly, there is no general agreement about the general structure or content of the self-concept. Some adages suggest that you have one true self or authentic self, such as in the saying "just be yourself." The true self may be similar to your preferred identity or your best self. This tidy, unified, relatively stable positive description of the self doesn't fit the reality most of us experience. We seem to have a self with many parts, some we like and some we don't.

Freud described three parts of our personality; Berne thought there were six parts; other theorists proposed other parts (see chapter 9). They are very different but all recognizable parts. More recently, several researchers suggest that humans are best understood by accepting that we have many selves. For instance, we are not only aware of many current traits, but we have selves leftover from the past (our "former" selves) and we have potential future selves, such as "hoped for" selves, "ideal" selves, "successful" selves, "rich" selves, and also "feared" selves, "incompetent" selves, "drop-out" selves, "unemployed" selves, "angry" selves, etc. Most psychological tests only ask about the current selves and neglect the future and past selves, although what you want to become and what you fear becoming powerfully affect your behavior.

Some aspects of our self-concept are stable for years; other aspects change almost moment to moment. For instance, most of us immediately feel "stupid" after failing a test or making a foolish comment. We may feel attractive at one time and unattractive a little later. Each of us also has public selves (several may be used to manage one's image as presented to others) and private selves. One may love him/herself in some ways and hate him/herself in others (Denzin, 1987). One's self-concept may mostly mirror other people's opinions or only one's self-evaluation. Your self-concept may largely reflect the dictates of a culture, religious teachings, family tradition, or you can create a unique personality based on your own ideals. The self-concept is probably primarily learned or acquired, but basic tendencies, such as to like or dislike others or one's self, might be inherited as well. The self-concept may have conscious and unconscious facets; it is a safe bet that the former is more socially acceptable than the latter. Surely very few of us would consider even

our conscious selves to be perfect. Some think the "self" we know is just a highly verbal part of us that tries to understand our other parts. Obviously, there are many different notions about the self.



Humans have always, I suppose, been fascinated by the mind. Yet, the disciplines of psychology and psychiatry only started studying the mind or cognition about 100 years ago. The universe of the mind is still a dark, vast, unexplored place. It mystifies us. Yet, it is a region of great promise. If we could learn to develop our values, master basic psychological principles, and increase our self-awareness and motivation, great strides might be made in self-control or selfactualization. Many wise people have thought that it would be much more lasting and meaningful to change a person's basic self-concept or personality than to try to modify thousands of his/her specific, isolated, overt behaviors and superficial emotions. Some theorists think the mental image of ourselves (or of our potential) must change first, then the behavior will change; others think it works in the opposite direction, i.e. behavior changes first, then the self-concept (I think both ways may work). Psychoanalysts, cognitive psychologists, behavioral psychologists, and others will, no doubt, continue this debate.

When minds study themselves or each other, a number of paradoxes appear: While we know much about our mental processes, there is far more we don't know, and, as individuals, there are some things about our minds we don't seem to want to know. Likewise, while the brain is a fantastic sensing, remembering, thinking, problem-solving machine, it still, without our awareness, makes many foolish mistakes, and, certain individuals seem to want to make mistakes. Much of this chapter is devoted to straightening out our thinking, both as a rational process and as an attitudinal process.

All this "internal activity"--ideas, memory, imagery, hopes, and self-evaluation--is complexly intertwined with simple behavior, motivation, and emotions (chapters 4-8), including self-help methods using plans for behavioral changes and self-instructions (chapter 11), for expressing our emotions (chapter 12), and for learning skills that alter our choices and increase our effectiveness (chapter 13). Clearly, the brain and "mental processes" are involved in everything we humans do. However, for clarity, this chapter includes the more complex and cognitive self-help methods, such as:

Changing Your Self-Concept and Building Self-Esteem

Only we know who we are--what we have intended to do and actually done, what we have thought and felt, and what we have hoped for. Our "self" is a life-long accumulation of impressions. How we see and evaluate our "selves" and others' selves has a tremendous impact on self-acceptance, self-control, and acceptance of others. But as mentioned above, psychology has no clear-cut definition of the self concept (Campbell, 1976). Examples: Is most of the self hidden (the ice-berg self) as Freud suggested? Does our self include the dark and shadowy but "natural instincts," such as greed, hostility, and sex, or does the self constantly fight these basic instincts? Does the self include "human nature," such as infatuation, nurturing, game playing, and Jung's archetypes, or are these "needs and impulses" separate from our "self?" Is the self basically good (Maslow's "Pollyanna" self) and yearning for personal growth once the basic needs are met? Is the healthy, fully functioning self accepting and reflective of all your feelings, urges, thoughts and experiences, including the organism's striving to be all it can be (Roger's authentic self)? Or, is the self persecuted and constantly being judged against one's own ideal standards which are separate from the self? Is the self merely an illusion because there is nothing there except a conditioning machine, as Skinner suggested, or layers of roles or masks used to manipulate others, as Goffman suggests? Is the self primarily Mead's "mirror" reflecting our interpretation of the reactions of others to us? The self is seen many ways.

The concept of good self-esteem becomes clearer, however, if you think of it as having two parts: (1) a generally positive but realistic self-evaluation and (2) the generally positive belief that one can handle life's problems. Currently, there is a national debate between two groups of theorists: (1) those who believe low self-esteem causes most social problems--school failure, strained relationships, drug use, unwanted pregnancy, delinquency, and all kinds of troubles. They, of course, advocate building children's self-esteem but mostly by giving rewards and praise even for easy tasks in school. Self-esteem is considered so vital that some even say "don't make your kids feel bad if they lie and steal." (2) The other theorists think it is the other way around, i.e. that failing in school, getting in trouble, fighting in the street and at home, being irresponsible and anti-social, etc. cause low self-esteem. I suspect both views are right to some extent, i.e. selfesteem can be both cause and consequence of undesirable behavior (Bednar & Peterson, 1995). Having self-esteem would help with many social problems, but it will take more than teachers full of praise to develop motivated students and good citizens with high self-esteem. It will take a supportive (perhaps even demanding) environment,

removal of fears and resentment, development of high values, good interpersonal relationships, life plans, useful life skills, knowledge, actual praise-worthy achievements, and on and on.

Although feeling negative about yourself is an unpleasant situation (such people especially get down on themselves when they fail), it isn't always entirely bad. Fears and feeling inferior may *sometimes* compel us to work very hard to succeed. Most of the time, however, failure makes us (especially if we are extrinsically motivated or conclude we are stupid) feel incompetent and uninterested in the task (Kohn, 1994). Certainly, as we will see, there are better ways to motivate ourselves, but nevertheless self-doubts, fears, and guilt can help us strive to be better. At the other extreme, there are highly arrogant people who are mean, dishonest, immoral, lazy, and all sorts of bad stuff. Dalrymple (1995) reminds us that the Nazi leaders had such inflated self-esteem that they felt invincible and were unfazed by their atrocities. So, high self-esteem can be part of a serious problem as well as parts of solutions.

For most of our purposes here, however, we don't have to impose a definition: the self is whatever you define it to be. Your sense of self is whatever you believe you are. It can be all of you or just your conscious self-evaluations; it can be good or bad or both. Individuals obviously see their selves very differently, e.g. as free, choosing, and effective (Bandura's self-efficacy) or as helpless and controlled by external forces or internal unconscious urges. This method is to help you feel better about yourself, no matter how you acquired the negative feelings.

Certainly we humans have an enormous capacity to judge ourselves as bad or inadequate--dumb, mean, selfish, ugly, unlovable, hopeless and on and on (probably equaling our capacity to exonerate ourselves and deny our evilness.) It has been estimated that almost 90% of college students feel inferior in some way (Hamachek, 1987). Some of us know very well that demanding, judging part of us, called our "internal critic." It is a common source of low self-esteem. But we also have a "rational part." The rational part can confront the unreasonably critical part.

Your internal critic may be obviously cruel and merciless with you, like Sooty Sarah's critic in chapter 6. Or, your critic may also be weak so that you are insensitive to your own cruelty and indifferent to others (see chapter 3). Or, you may not have much of an idea about how strong your critical parent is (see chapter 9). In which case, it may help you get in touch with your critic if you imagine how you would respond to the unpleasant assignment of eating a worm. Two psychologists (Comer & Laird, 1975) tried this experiment and found that subjects responded by talking to themselves in one of three basic ways as they contemplated the wiggly worms:

1. "Worms aren't so bad."

- 2. "I'm tough. I can do it. I'm braver and more adventurous than others."
- 3. "I deserve it. I should suffer."

If you respond self-critically, as in #3, you surely have a mean internal critic. Similar careful observations of what you say to yourself moment by moment will help you decide how destructive your critic is. For instance, note how you talk yourself into getting up in the morning:

- 1. "It's going to be a wonderful day! I want to get started."
- 2. "Oh, God, I've got so much to do today: 1__ 2__ 3__; I'd better get up."
- 3. "You are such a lazy slob. Get your butt out of here."

Several examples of a destructive internal critic will be given later in this method. But, it is important to note that the internal critic is often seen as doing good too. The "self" may, in fact, feel that the internal critic serves many important specific purposes (like getting you up). Therefore, the critic is reinforced (via negative reinforcement) when it helps us out of some mess, as when we say "Wow, I'm glad I got up and got things done this morning" (Mc Kay & Fanning, 1987). What useful purposes do you feel your critic is serving? It may seem to help you overcome laziness and do what needs to be done. It may seem to help you avoid painful feelings by stopping some act that would cause shame or guilt. The critic may seem, ironically, to help you tolerate certain disliked parts of yourself, such as it.

Examples: when the internal critic tells you, "He/she won't like you, don't approach him/her," the critic is protecting you from social stress and from the fear of rejection. If the critic says, "You can't do that," it is helping you avoid a situation in which you might fail. If your critic repeatedly says, "You were terrible to have done that," it is punishing you so you won't have to feel so much guilt. Thus, we often tolerate and even welcome the internal critic as a necessity. The question is: can a person achieve these purposes *without* having a destructive internal critic? The answer seems to be "yes."

You can produce the desired behavior in other ways. You can correct the critic when it exaggerates your negative traits. You can use thought stopping (see chapter 11) to silence the critic. You can stop depending on others for your self-esteem; do your own self-evaluation. You can accentuate your strengths and assets. You can learn to accept yourself--warts and all--just like a good therapist would accept you in therapy. You can avoid the tyranny of your own "shoulds," your perfectionistic tendencies, your over-reactions to criticism, and your domination by others. You can modify your negative traits; you can feel good and adequate by being good and adequate.

It is also important to keep in mind that a poor self-concept can be dealt with at other levels, not just by changing your thinking. For

example, you can reduce feelings of inferiority, shame, and guilt by being a high achiever and behaving morally (level I, chapter 11), by desensitizing yourself or using stress inoculation (level 2, chapter 12), by learning new skills (level 3, chapter 13), and by recognizing the sources of your low self-esteem in childhood and lovingly reassuring the scared little boy/girl still within you (level 5, chapter 15). In this chapter, I am focusing only on level 4, i.e. cognitive methods for building self-esteem. But it is important to take all levels into account, as described in chapter 2.

Many writers only concentrate on one level. Gloria Steinem (1992), for example, writes powerfully about uncovering her own internal sources of low self-esteem (always before she had believed low self-esteem in women came entirely from a discriminating, sexist-racist culture) and about regaining her self-esteem by getting in touch with childhood events that produced her suppressed, neglected, and insecure inner child. Certainly, uncovering unconscious forces, like your inner child, is one way to build your self-concept (see shame in chapter 6 and chapter 15), but there are many other reasonable methods.

Besides this first method in this chapter, method #4 will help you accept yourself and method #9 in this chapter also discusses the building of self-efficacy, which is closely related to self-esteem. Likewise, a poor self-concept is a part of many human problems, including a lack of purpose (chapter 3) and motivation (chapter 4), a lack of confidence (chapter 5), sadness and pessimism (chapter 6), a lack of assertiveness (chapter 8), self-put down games (chapter 9), and the lack of wisdom and equality in selecting a mate (chapter 10). Low self-esteem is closely related to sadness, so chapter 6 contains many related topics, such as self-criticism, anger turned inward, guilt, shame, feeling inferior, low self-concept, and pessimism.

The idea here is to raise your self-concept if it is lower than warranted and, as a result, enable the person to be happier and to achieve more of his/her potential, to be all that he/she can be. The goal isn't to just accept yourself, regardless of how you are behaving or feeling. More self-esteem is not necessarily better if it means becoming an egotistical snob or a prima donna. The 1990 California Task Force to Promote Self-esteem and Responsibility has this definition of self-esteem: "appreciating my own worth and importance and having the character to be accountable for myself and to act responsibly toward others." Self-esteem isn't narcissism; it is self-love, responsibility, and respect for all other humans.

Purposes

- To have a more positive self-concept.
- To see yourself honestly and to like or at least accept yourself.
- To remove the internal barriers that keep you from doing your best.

Steps

STEP ONE: Recognize the internal critic and realize what pain the critic helps you avoid.

The critic, as mentioned above, badgers you into doing what is right or into doing what is necessary to achieve some goal. You may even think you need a haranguing critic to make you be good! However, every time you think the critic is helpful, the bitchy, nasty critic is reinforced and becomes more likely to attack you again and again until you dislike yourself. In short, although the critic seems to do you some good (actually you could do without it), it does more harm by undermining your self-esteem in the process (Mc Kay & Fanning, 1987).

You have to search deeply for the critic; much of its harm is done without your awareness. The critic blames you when things go wrong (and you accept the blame). When things go well, you call it luck or "someone felt sorry for me." Expressing self-criticism and self-blame may relieve some tension, but in the end you are degraded. Likewise, you may feel good about setting high perfectionistic standards, but in the end you fail because you can't be perfect. The critic tells you how inadequate you are, especially in comparison to "the best" (and you buy that nonsense). If you attack yourself, maybe others won't attack, but in the end you dislike yourself. The critic isn't honest, it exaggerates your failures: "you always screw up," "you never say the right thing," "you're totally weird," etc. (and you still don't challenge the critic). It remembers all your mistakes and sins... it calls you names, like stupid, gross, clod, bore, weakling, childish, etc. The critic may be such a natural, ordinary part of your mental life, you may hardly notice the criticism or the damage done.

A low self-concept may be responsible for defeatist "giving up" or for obsessive workaholic behavior. A negative self-concept may result in constant self-put-downs or in constantly trying to prove one's superiority. The person with low self-esteem may be over-attentive, giving and solicitous, believing that no one will like him/her unless he/she is super nice, or he/she may be hostile and offensive, rejecting the other person first.

The mind is its own place, and in itself can make a Heav'n of Hell, a Hell of Heav'n.

-John Milton

But your rational part can learn to recognize the critic and turn it off. How? See the next several steps. But, first, you have to detect the critic's work. So, for two or three days keep a record of every self-critical thought or feeling you have. Then search for the purpose served by the self-criticism, like this:

Your internal critic says	How the critic is trying to help you
"You have no skills; you're going to be unemployed."	Motivating you.
"You think you're so smart; what about that tire around your middle?"	Keeping you aware of things that need attention.
"Don't speak out, you'll say something stupid."	Avoiding embarrassment.
"He/she would never go out with you."	Avoiding disappointment.
"You'd like to join a discussion group, theater, literary club, etc. but you'd look stupid."	Avoiding challenges and community responsibility.
"You really messed up. You did terribly."	Seeking sympathy or support (or avoiding criticism).

Try to figure out the background and purpose of each of your critical thoughts. Does the negative thought yield a pay off? What does this fault keep you from doing? Does it help you avoid or reduce some other feeling, such as fear or anxiety or guilt or anger? Does the criticism help you accomplish something or to feel better because you had high standards or criticized yourself? What would happen if you didn't have this negative thought or trait? This diary and these thoughts should give you some explanations of how your critic got so strong by serving certain purposes.

STEP TWO: Challenge the internal critic. Then use healthier ways of achieving the critic's purposes.

First, check out the accuracy of each critical thought. What is the objective evidence? // you see that the internal critic has been overly critical or exaggerated your fault *and if* you understand what payoffs the critic is getting, you are better able to discount what he/she says. Then, you will feel better. Examples of how to challenge the critic by saying more reasonable, self-tolerant things to your internal critic:

• "You are cutting me down like my parents did, and I'm still accepting this stuff like an unthinking child. I'm not going to take it any more. Knock it off!"

- "You are cutting me down and making me look like a weak nerd. That's probably a good way to avoid criticism but it also keeps other people from giving me honest, helpful confrontation about my problems. So, stop it."
- "You say, 'I can't do anything right' or 'God, I'm stupid,' but that may be just another way of bragging and saying, 'Look at how upset I am with this little setback, I must really be super.'"
- "You say, 'If I had studied, I would have done OK,' but that is
 just an excuse for not testing out my intellectual ability and
 finding out just how smart I really am. Let's see how well I can
 do when I really try."
- "You are harping at me so I'll get something done. Well, I will feel lots better by doing my work and avoiding stinging insults from you. So, shut up!"
- "You think I'd like myself if I were perfect. That is silly. It's unreal. Lay off! I'll do it well enough...and still enjoy myself."
- "You are telling me 'I can't do it' or 'He/she won't like you' so I
 won't try and get all upset. That's nice of you but I want to
 carefully make my own decisions about what to do with my
 life "
- "You are suggesting 'She/he will dump me' so I'll be prepared and not hurt so much. But this kind of thinking makes me doubt myself all the time and hurts the relationship."
- "You are calling me names so that I can put it behind me.
 Maybe I had better think of some way to make up for being a jerk, rather than trying to forget it."

Second, there are other ways of stopping the critic's hurtful messages. You can use thought stopping (see chapter 11). As soon as you recognize the critic's voice, yell (silently inside), "Shut up!" or "Get out of here!" or "This is the crap my mother told me!" or "No more put-downs!" Another way is to think of all the ways low self-esteem hurts you in the long run, e.g. refusing to try things or to meet people, feeling scared and inferior, being crabby and unable to express affection, etc., etc. Then say to the critic, "Go away! Look at what you cause me to do...." When you have shut up the critic, replace the negative thoughts with positive ones: "I am a unique and worthwhile person. I have many good traits... (see step 6). I'm in control and doing well."

Third, use healthy self-help methods to achieve the same useful purposes that the unhealthy internal critic is trying to serve. Thus, you won't need the critic. Examples:

- To decide what is right to do--see chapter 3 for rationally choosing your values and learning to live by them.
- To do what needs to be done--see chapters 4 and 11 for controlling your behavior and finding healthy motives.
- To see yourself objectively--see chapters 5, 9, 15 and methods #2, #4, #8, and #9 in this chapter.
- To handle guilt or frustration or self-depreciation--See chapters 3, 5, 6 and 12.

- To reduce the fear of failure--see chapters 5, 12, decision-making in chapter 13 and method # 3 in this chapter which reminds us that making mistakes doesn't mean we are worthless. We make decisions based on our views, needs, knowledge and hopes at that moment. What we do is lawful-what seems best at the time.
- To cope with a fear of rejection--see chapters 5, 9, 10, 12 and learn to handle criticism or to assess the true likelihood and consequences of rejection. Remember good things sometimes result from a failure.
- To deal with anger--see chapters 7, 9, 12 and especially assertiveness in chapter 13 because all of us have to ask for the things we want (early in the game) and politely demand that everyone be dealt with fairly.

The point is: to feel competent and moral, you must *be* those ways. You can be good without a nasty, lying, brutalizing critic inside.

STEP THREE: Do an accurate self-assessment. List your positive and negative traits.

The people who emphasize their bad points and failings need to focus on their assets and positive traits. McKay and Fanning (1987) recommend listing your strengths and weaknesses in several areas: appearance, relationships, personality, morals, work (school), art, sports, daily tasks, mental functioning, and sex. This will take quite a while. Then mark or underline all the negative characteristics. The first task is to re-write each negative statement. This is to be certain that each criticism is stated accurately; for instance, take out all the emotionally laden words (see examples below). Make the statements factual, not judgmental.

In addition to self-put down words also eliminate over-generalizing words, such as never, always, and completely; these are seldom accurate. In fact, it is beneficial to look for instances or circumstances in which you would not have the negative trait. Example: suppose a person wrote "I never stand up for myself" but she might realize that she does assert herself with her children and her friends, just not with her husband, her boss or other authorities. Likewise, a person might write, "I always say the wrong thing," but realize that this only occasionally happens when he is caught off guard or when very nervous. Clearly, accurate specific negative statements, citing your strengths as well, are more honest and less devastating than the global, nasty criticisms. Sometimes, even the solution becomes more obvious and hopeful when the problem is stated more factually. Other examples are:

Nasty words

Replace with explicit, factual, balanced statements

stupid

"I don't follow current events; I don't remember history *but* I know how to manage money well, how

to relate to people, and how to plan and organize a

group effectively."

fat "I weigh 135 when 120 would be ideal but I have lost

weight before and I can again."

selfish "I think about my parents only a couple times a week

but I am very thoughtful of my wife and I spend a lot

of time with my best friend."

In fact, be reluctant to use any negative words that categorize or measure or judge you (or others) as a person. You may judge your behavior, but as a person you are perfect--you are exactly you! Also, avoid concluding prematurely that you can't do something or have a handicap or probably will have difficulties doing something, and so on.

At this point, we have just cleaned up your negative statements for use in the next two steps. The positive, complimentary statements will be used in step 6.

STEP FOUR: Have the serenity to accept the things that can't be changed: Understand and accept your permanent weaknesses; accept the past.

First, be sure you have the fault being considered. Would others agree that you have the negative trait? Are you sure you aren't exaggerating it? For instance, do you reject compliments in your weak spots? (See method #2 to test the accuracy of your self-concept.) Are you sure you aren't miscalculating the consequences of the weakness? For example, suppose you *know* you have a bad complexion. Are you sure it is as unattractive as you think it is? Is it correctable (medicine, surgery or cosmetics)? Suppose you are of average intelligence. Can you compensate in school by working very hard? Can you become such a caring, giving friend that your intelligence doesn't matter?

Secondly, be sure it can't be changed. Remember any learned trait can theoretically be unlearned, even though "you can't change the past." Was your negative trait modeled and/or reinforced by a parent? Was it developed as a way of coping in the family? Did the peer group encourage this trait? Are irrational ideas (method #3) part of the problem? Is something like your "critical parent" (chapters 6 & 9) involved? All of these kinds of "faults" are correctable. Some people do lose weight after years of over-eating; "hot heads" do learn to control their tempers. It's possible. Other examples: if you have never learned to speak in public or always felt inferior to a highly educated person or always been a pessimist, you can change. Don't accept these kinds of negative traits (unless they don't concern you very much).

Thirdly, be sure you don't confuse an unchangeable cause with an unchangeable trait. You may be stuck forever with critical

parents, mean siblings, and/or rejecting peers in your past, which contributed to your low self-esteem, but you may be able to reject those old judgments by others and learn to judge yourself more favorably. You may have had other childhood traumas--deformity, poverty, illness, a learning disorder, etc.--which contributed to your self-doubts and low self-esteem. You can't change these facts of life. But you can change how you view or feel about these facts (see method #3 below). And, you can still overcome these handicaps and learn to evaluate yourself fairly and constructively.

Lastly, there may be, of course, some of your characteristics that can't be changed: height, body build, facial and physical features, lack of abilities or talents, some diseases, and perhaps mental illness. You can "forget about" the things that can't be changed or you can look at them differently, such as accept them or make up for them. Quite often, you may realize your negative trait can be changed but it just isn't worth the effort. That may be a reasonable decision; if so, put the matter behind you.

There are several viewpoints (or philosophies) that should help us accept ourselves and others (even the changeable characteristics): determinism (method #4 in this chapter), humanism (unconditional positive regard for everyone since every human is unique and precious), positive mental attitude (see method #9), or logical reasoning. As an example of the latter, Barksdale (n.d.) reasons that all our behavior is a result of our motivations and awareness at the moment. Since our awareness (view of the total situation) could not have been different, it would be illogical to expect us to have acted differently. Repeating one of these philosophies over and over to yourself, especially when you are starting to harshly chastise yourself, should be helpful.

STEP FIVE: What are the ways to build self-esteem? Have the courage to change the things you can: List the ways you could improve. Become a good self-helper. And develop self-accepting attitudes.

Deci and Ryan (1994) speak of *contingent* self-esteem as distinguished from *true* self-esteem. Contingent self-esteem is like conditional love; your self-acceptance or self-love is based on living up to your and other's expectations--passing all the tests of life. So, you feel good only when things are going well. This tenuous, conditional self-esteem is not a secure foundation (and is associated with an external orientation, such as seeking money, fame, and attractiveness). On the other hand, true self-esteem, according to Deci and Ryan, involves a more secure, solid sense of self and self-acceptance, regardless of what happens in the outside world (and is associated with intrinsic motivations, such as seeking relationships, self-improvement, and serving others). Of course, contingent self-esteem might even be gained by being proficient at something you don't value (like pretending to like someone or being a thief) but *true* self-esteem comes only when your actions are highly valued and freely

chosen or *self*-determined. Examples: true self-esteem and pride comes when you study for joy, not just for grades; when you play sports for fun, not for Dad's attention; when you do your job to help others, not just to get paid. Also, your self-esteem grows in proportion to your goodness, e.g. the self-esteem gotten from your glibness in selling an over-priced product is less than that gotten by a caring kindergarten teacher who is loved. When positive action, especially the it-did-my-soul-good-to-do-that kind, comes from your true self, then you will feel true self-esteem.

It is becoming clear that building self-esteem isn't just silencing the unreasonable internal critic, accepting your faults, and emphasizing your good traits. The healthy, confident, efficacious person assumes responsibility for his/her life. The self becomes a change agent, a *self*-helper. The task is to realize the self-improvements you could make, to know how to make changes, and to feel confident about your self-help ability. And...

Coopersmith (1967) suggested that high self-esteem requires two things: setting high goals and some success in reaching your goals. In other words, you must DO SOMETHING. Contrary to popular opinion, self-esteem in children is not related to good looks, being tall, mother being at home, and social or economic status of the family. Kids who like themselves had parents who set high standards (yes, expected politeness and housework, not "do your own thing"), showed respect for the child (democratic decision-making where everyone is heard) and showed love (not necessarily overtly but in terms of caring about "how things are going"). You can't change the past but you can talk to yourself. You can say such things as "don't be lazy just because you were pampered as a child." You can DO SOMETHING!

If you assume responsibility for improving your life, if you learn to have more control over your life, and if you put in time and effort on good causes, you will like yourself better and others will admire you. So, in a sense, all self-help enhances self-esteem. Conversely, self-esteem facilitates self-help (Bandura, 1977b). For instance, good students feel responsible for doing well while poor students blame teachers, the school, or the tests (Coleman, 1966). Chapter 6 gives several specific suggestions for countering feelings of inferiority. At the very least, ask yourself "what do I fear doing that I would like to do?" Then imagine overcoming that fear and make plans to develop these skills.

Think of it this way. In addition to getting better at what you are doing now, i.e. in your current life style, you might need to diversify. For example, when a person specializes or concentrates too intensely, as some say "putting all your eggs in one basket," there is a risk of feeling and being adequate in only one way. (Perhaps persons who feel inadequate tend to find a niche and stay there.) For instance, a mother devotes herself exclusively to raising the family but feels useless and lonely when the nest is empty; a secretary devotes her life to her job but realizes in her 50's that she has given up too much for \$1000 a

month; a manager works 70 hours a week but finds out later that his efforts and the programs developed were not really appreciated; the athlete who is a star in high school or college discovers he has no career skills and few are impressed with his previous stardom. Perhaps all of us need several ways to feel good about ourselves, ways to further build our self-esteem and to prepare for the future. Make sure your life goals are ethical and an expression of your true self.

STEP SIX: Write a list of your more important positive traits. Repeat them frequently with feeling.

Many of us are afraid to brag, even to ourselves. But we need to know our strengths. Make a list of your good traits, using the list of positive and negative characteristics from step 3 (also include the strengths you added to your list of weaknesses). Make the list as complete as possible. What good traits do your friends, your parents, your teachers, your idols have? Do you have some of those traits too? If so, add them to your list. No one needs to see your list, put down everything you like about yourself, everything that is good. If you have difficulty thinking of positive traits, this may mean you have an overwhelmingly severe critic. Ask your friends for suggestions.

Write several simple positive statements about yourself. Examples: "I care for my family and friends; I'm loving and giving" or "I'm fun to be with, people enjoy me" or "I'm a serious student preparing for life." Repeat statements like these, which are true of you, several times a day, perhaps followed by a reward. Put your positive traits on cards and stick them up where you will see them often. When relaxing, spend 10 minutes thinking about specific incidences in which you were good in the past *and* fantasize about situations in which you could use your good traits again in the future. All of these methods accentuate your positive features. What is most important is that you remember the positive when the internal critic attacks you.



Think of what you have rather than of what you lack. Of the things you have, select the best and then reflect how eagerly you would have sought them if you did not have them.

-Marcus Aurelius 30 B C



STEP SEVEN: Self-help books, support or growth groups, and insight techniques offer a variety of esteem building methods.

A shelf full of self-help and how-to-be-successful books emphasize positive thinking (memories, self-evaluations, and expectations) and refusing to let the negative thoughts drag you down (Dyer, 1976; Lazarus, 1984; Maltz, 1970; Stone, 1962). For example, Lazarus cites Dorothy Susskind's method called ISI--Idealized Self-Image. The idea is this: if you repeatedly picture yourself having the traits and skills you want to have (including the ability to change), you will keep working on self-improvements and gradually come closer to your ideal self. Thus, a scared person can imagine doing whatever is frightening, a quiet person can imagine expressing opinions and telling stories, a golfer can imagine hitting the golf ball straight, and so on. Fantasies will help but success requires practice, practice, practice and DOING SOMETHING.

There are some rather spooky notions expressed in this area, e.g. tell your unconscious lies--positive lies--and it will believe you and work to make you this way (Helmstetter, 1986). Thus, a worrier might say, "I don't worry. I solve problems quickly, then relax and enjoy myself." A severe self-critic could recite, "I am special and unique. I like myself. I am confident, fun, wise, interesting, loving and good." A procrastinator would repeat, "I carefully plan my time and follow my schedule. I'm full of energy; I never goof off or put off tough jobs." There is no evidence whether self-statements such as these work or not. Obviously, it takes more than fantasy to be a top sales person; I want my surgeon to have more training than how to say "I'm really great with a scalpel." But, probably ideas do precede action in most cases.

Mental health professionals did not consider any book very helpful in building self-esteem (Stantrock, Minnett & Campbell, 1994). My students find two books, besides McKay & Fanning, especially helpful: Johnson (1986) and Briggs (1986). Additional useful books are Burns (1993) who has a 10-day self-esteem building program, Wegscheider-Cruse (1987) who stresses self-acceptance, Gardner (1992) who focuses on children's self-esteem but is more for therapists, Palmer (1989) who addresses teens and young adults, and two good books by Branden (1983, 1994) who is a recognized scholar in this area. Johnson (1986) emphasizes doing your own self-evaluations and weaning yourself away from others for your self-esteem. Also, stop the senseless collection of negative comments about you by others and stop comparing yourself unfavorably with others. A recent book (Bednar & Peterson, 1995) found low self-esteem in many disorders; they focus on getting their clients to attack their problems with coping skills rather than just liking themselves better. Three other books, Truchses (1989), Sanford & Donovan (1984), and Bepko & Krestan (1990), address the problem of low esteem in women as related to our culture's demands that women be self-sacrificing and of service to others. Cash (1995) helps people get a better body image. Lastly, Taubman (1994) has attempted to go deeper than curtailing the internal critic and accentuating the positive. He calls it developing "deep confidence" based on knowing yourself and your psychological history very well.

Other ideas for building self-esteem are: develop a support system, develop a set of values and live them (chapter 3), develop positive attitudes (method # 9), and learn to feel special and unique. It seems that we learn to think of and treat ourselves as we have been treated by others. Therefore, if you lack self-esteem, it is very important to avoid negative, critical friends, relatives, co-workers, and others as much as possible.

You can gain an understanding of the development of your selfconcept by remembering the nicknames you had as a child and young person, remembering how your parents introduced or talked about you to others, and remembering how others responded to you when you did something bad or destructive and when you were good and helpful. Try to see the connections between childhood experiences and your current self concept. Other memory and fantasy experiences may give you more insight (see autobiography in chapter 15). At different stages of your early life, remember what you needed from others, such as your parents, which you didn't get. Then, see if you can understand how those wants (and the neglect of those needs) caused you to feel certain ways about yourself. Also, hold a conversation between your confident self and your insecure self; see how they feel about and explain each other. Draw your "life line," showing the highs and lows of your life, and see how your self-esteem varied with the peaks and valleys. Figure out how to have more peaks.

Time involved

Your self-concept reflects years of experience and self-evaluation. There are no magical ways to quickly change your opinions of yourself. It will take a few days to get to know and record the internal critic. Challenging or shutting up the critic and achieving the purposes of the critic in healthy ways may take weeks. Honest self-assessment followed by self-improvement where possible means big time investments--daily work for months.

Common problems

Although the internal critic makes us miserable, we believe what it says about us. If we feel inadequate, inferior, and unable to change, where does one get the motivation to spend hours trying to improve? To some it seems hopeless, just like being depressed. Sometimes, no doubt, the self-depreciating person will need outside help from a therapist and/or a support group.

In our culture, many of us have high hopes that are impossible ambitions. Thousands want to be president or an astronaut. Perhaps millions want to be a sports star or musician. Most will have "faults" (and/or bad luck) and fail to achieve their highest goals. Our task, therefore, is to strive for our major goals despite the stress, and, at the same time, learn to accept the inevitable failures and frustrations as they occur. We want to compete and be "above average," but half of us must, by definition, be below average on any given trait or skill.

Learning how to gracefully accept our limitations is part of methods #3, #4, and #9.

Effectiveness, advantages and dangers

The reader is reminded, again, that there are many ways to change one's self-concept. This method tries to reduce the negative self-evaluations by focusing on the actual internal words or thoughts about ourselves. McKay and Fanning (1987) cite no supporting research for this method in their book, but similar cognitive methods have been effective. The procedures are reasonable but much research is needed. As mentioned in chapter 11, there have been a few cases in which repeating positive statements just prior to smoking a cigarette has improved self-esteem (Homme & Tosti, 1970).

One advantage of this method, as described here, may be that it concentrates on the harmful details of our thinking and encourages us to emphasize the positive. Perhaps we aren't as bad as we think we are; maybe we have overlooked ways of improving; maybe we neglect a lot of our good points; maybe the destructive part of the critic isn't needed. Yet, the focus is a disadvantage of this method too. Most people are not accustomed to reviewing their thoughts for errors (see method #8). When we are in a down mood, the excessive self-criticism seems absolutely true. A new and different approach to your most intimate thoughts and feelings is required. It is hard to question what we have always believed to be the truth; it is hard to think of an important trait, one that defines your basic self, as changeable. But, that is exactly what has to happen when low esteem is changed to high esteem. Swann (1996) discusses some "self-traps" that make gaining self-esteem difficult.

Building self-esteem is considered by many psychologists and educators to be so vital to good mental health, education, and physical health that research interest in this area should stay high. However, in an excellent review of self-esteem research by Kohn (1994) there is little hard data showing that self-esteem is related to helping others, academic achievement, or good citizenship. Kohn says the current self-esteem building programs in school aren't working. He thinks this is because high achievement, for example, produces self-esteem, not the other way around. Unfortunately, this interpretation of the data may lend some support to the misguided conservative position opposing to all affective education (conservatives distrust change). I think the "basics" should not just be the "three R's" but also self-understanding and self-control, relationship skills, and practical career skills; these skills would surely increase our self-esteem.

Another new theory challenges the practicality of merely increasing positive thoughts about one's self. Mark Leary, a psychologist at Wake Forest, believes that humans, being very social animals, have great sensitivity to how we are getting along with others (see *Psychology Today*, Nov., 1995). Just as any movement in our environment attracts our attention, an angry face in a crowd stands out. When we

detect any indication that we might be rejected, our feelings of self-esteem immediately plummet. It is a signal to mend our relationships. Low self-esteem may associated with depression, tension, joining gangs, drugs, etc. because sensing that we are rejected causes us to feel bad, self-critical, and hopeless. Thus, the way to correct the sinking feeling of low self-esteem is not to force yourself to think positive thoughts about yourself but rather to take action to improve your relationships with others.

There may be an even bigger issue. What if the modern selfconcept, becoming more and more individualistic, is completely misdirected? For instance, what if I focus so much attention on my goals, myassets, my failures, my self-awareness, and my selfcriticism, that I lose sight of the rest of the world? What if I take this self-centered orientation because that view serves society's and industry's need for me to feel insecure and threatened, resulting in my buying many expensive things that I really don't need to own exclusively by myself? What if instead of seeing myself as one lone person in the world competing against everyone else (except maybe spouse and children), threatened from many directions, and subject to criticism from every quarter, I saw myself *primarily* as merely one among many in a cohesive community (a small town, an important business, a needed profession, etc.) or, even, as just one person among 5 billion intelligent, fair humans? Only 50 years ago, many people saw themselves primarily as a loved, secure part of an extended family or of a religious group, much more than they saw themselves as an isolated, self-aware, self-dependent, morally confused, self-critical individual. Thus, perhaps re-defining the human "self" is not impossibly difficult to do. And, perhaps how you define your self is crucial to how you interact with others. Perhaps as long as humans think of themselves solely as individuals ("I am me"), they won't join in forming a caring, loving community ("I am us"), they won't cooperate and share, they won't put aside individual wants and advantages for the good of the group. This deserves serious thought (Cushmen, 1990; Taylor, 1989; Etzione, 1993).

A similar but more sinister view is that the people in power want to stay in power and "advantaged" ... and what better way to maintain the status quo than to direct each individual's attention to how he/she feels about him/herself (rather than towards the faults of the system or needs of others) and to how it is each person's job to help him/herself (Kohn, 1994)? Carried to an extreme this would divert us from building together a better world. But, is there is any reason why we can't have high self-esteem <code>and</code> also be highly involved in caring for others (indeed, that may be the best way to self-respect).

Naturally, some possible problems can be found with any specific social or educational program for building self-esteem, but it would be hard to fault effective efforts to overcome an overly severe inner critic that depresses us and interferes with our being successful and good to others.

Increasing Self-Awareness



Sullivan (1953) spoke of "good-me," "bad-me," and "not me" parts in all of us. The first method reduces the misery caused by an unreasonably harsh self-critic, the "bad-me" part. It deals with how we *feel* about ourselves. This method deals more with how we *think* about ourselves. Our self-concept is the foundation of our entire personality; it affects almost everything we do. All of us have a part that wants to feel good about ourselves and to have others approve of us. This is our "good-me." However, our actions are subject to interpretation (our "having a good time" may be seen by others as "laziness" or "alcoholism"). Most of us who are not depressed usually see ourselves in a good light (in spite of the self-criticism and feelings of inferiority mentioned in method #1). This exaggeration of our goodness by the "good-me" can cause problems too, which this method deals with.

Sometimes the "not me" part keeps us from noticing things we don't want to see about ourselves. Generally we would be better off facing the truth, i.e. becoming more self-aware. There are several interesting personality measures in this area (Fenigstein, Scheirer & Buss, 1975):

Private self-consciousness (sample items rated on a scale from 0 to 4):

- 1. I'm always trying to figure myself out.
- 2. I'm generally attentive to my inner feelings.

Public self-consciousness (sample items):

- 1. I'm concerned about the way I present myself.
- 2. I worry about what other people think of me.

Snyder's (1980) Self-Monitoring Scale (sample items):

- 1. I guess I put on a show to impress or entertain people.
- 2. In different situations and with different people, I often act like a very different person.

Social anxiety:

- 1. It takes me time to overcome my shyness in new situations.
- 2. I get embarrassed very easily.

Low private self-consciousness is not thinking or knowing very much about your inner feelings. High private self-consciousness involves knowing ourselves, e.g. realizing we wear several social masks and being able to predict our own behavior as well as seeing ourselves as others do. Self-monitors with high public selfconsciousness often use many masks to manage the impressions they make on others. They may even, at times, pretend to believe and feel differently than they really do. Sometimes, this is conscious deception, i.e. just "putting your best foot forward," not self-deception, but sometimes high self-monitors are not sure themselves what is their "pretend self" and what is their "real self" (Snyder, 1983). Other people are low self-monitors with little social awareness and/or with pretty fixed ideas about what they should be like; they may want to "tell it like it is" or they may just not care what others think of them. These low self-monitors may or may not be aware of all their parts-urges and feelings--inside; there is only a moderate correlation between private and public self-consciousness. The major point is: we can't be consciously in control of ourselves if we aren't aware of all our "selves."



To Thine own self be true, and it must follow, as the night the day, thou canst not then be false to any man. -Shakespeare, Hamlet



Everyone recognizes that how a person sees him/herself is not necessarily the way it is. Thus, for every aspect of our lives (every part), there are three selves: (1) the perceived self--the way we see that part of ourselves, (2) the real self--the way we truly are, and (3) the ideal self--the way we would like to be in that area. Research has shown that a big discrepancy between the perceived self and the real self or the ideal self will probably lead to unhappiness and poor adjustment. This method is concerned with our misperceptions of our real self. Obviously, our errors can involve thinking we are better or worse (see the last method) than we actually are and refusal to admit certain parts of ourselves.

It is well known that self-deception and defense mechanisms, as described in chapters 5 and 15, lower our anxiety and protect our self-esteem by helping us deny our bad parts and avoid reality. In a similar way, many of us put ourselves in the best possible light by (1) taking credit for our accomplishments but denying blame for our failures, (2) exaggerating our own importance, (3) assuming that others need to change, not us, and (4) seeking or maybe even designing in advance excuses for our failures. Almost all of us want to be happy and like ourselves. But should we lie to ourselves? Being honest with ourselves is a crucial first step towards coping with reality (Hamachek, 1987).

How we see ourselves is powerfully influenced by how others, especially important others, see us. So, messages from others in the past may help explain our misperceptions. It seems logical then that feedback from others in the future may help correct our misperceptions. Furthermore, we can learn about our own rather vague attitudes by observing our own behavior. For example, have you ever been surprised by your reaction to a certain kind of person, say, a person of a different race or an obese person or a homosexual? Have you ever had a fight with a lover and left him/her thinking "good riddance," only to discover a day or two later that you missed him/her terribly? Sometimes a part of our true selves is revealed by our own unexpected reactions; the better we know ourselves, the less surprised we will be and the better we will cope.

Goethe said, "If you want to know yourself, observe what your neighbor is doing. If you want to understand others, probe within yourself." We can observe others more objectively than we can ourselves; understanding others improves self-understanding. We can discover our motives easier than we can our neighbor's; self-understanding helps us understand others.

Purposes

- To realize that we sometimes think we are better than we are and to try to correct this tendency.
- To recognize that fears and misconceptions keep us from making self-improvements and living up to our potential; this insight may set us free.

Steps

STEP ONE: Uncovering self-deception: self-con and self-hype.

It's nice to like yourself. Having self-esteem helps us be happy, healthy, and effective. So, we select friends and do things that make us feel good. But we also present ourselves to others in the best possible light *and* we distort reality a little bit to make ourselves look good. We give ourselves the benefit of the doubt. I'll give some examples of the latter; you see if you are guilty of any of these defensive deceptions.

(1) A tendency to take responsibility for successes and deny responsibility for failures. This is illogical but it makes us feel better. Examples: if our school won, it's "we won" but if our school lost, it's "they lost." If you do well on a test, it is because you "really hit it" or "are good at ______," but if you bomb the test, it is because "it was a stupid test" or "there were lots of trick and vague questions" or "what a lousy teacher!" If you have a good relationship with someone, it is because we "work at it" or "talk things out" or "I'm real attentive," but if the relationship is in trouble, it is because "He won't talk" or "She wants her way" or "He/she is so irritable." Remember, though, that in chapter 6 we learned that depressed persons are the

opposite; they feel at fault for failures and not responsible for successes. Somewhere in the middle of these two extremes is the truth--honesty is the best policy because we need to face our shortcomings and not blame others. Think about how you tend to respond in several situations and ask your friends what distortions they suspect you might make.

- (2) A tendency to exaggerate our own importance and our own strengths. Almost everyone can consider him/herself superior if he/she selects carefully the basis of comparison--just my face, my body, my athletic ability, my musical ability, my social skills, my brain, my social status, my car, etc. We tend to consider only our best features (Hamachek, 1987). We exaggerate our role, our strengths and our contributions. Examples: when group projects are done, most persons tend to feel his/her contribution was greater than the others would judge it to be. If you ask a married person who makes the major contribution to the marriage, 70% say "I do" (Ross & Sicoly, 1979). About 85% of people in high school think they are above average in intelligence. College students think they will live 10 to 20 years longer than the average person their age (Snyder, 1980). "Yep, lots of college students are budding alcoholics but not me" or "Yeah, I believe the reports about cancer and smoking but I don't think it will happen to me." In general we tend to inflate our image and deflate others--they cheat on taxes and spouses (more than I will do), they can't be trusted (as much as I can be), they won't work as hard as I will, they are prejudiced (more than I), etc. These "I'm OK, You're not OK" tendencies and the exaggerated sense of self-importance cause many problems (see chapter 9). We need to face reality. How much do you do these things?
- (3) A tendency to believe others will change and we won't have to. Examples: when considering marriage (or divorce) we are more likely to think of our partner as having to make certain changes rather than us. When our partners have more or less sexual drive than we do, we expect him/her to adjust to us. When students don't do well, they expect the teacher to change and the teacher expects the students to change. When poorly paid foreign workers produce a cheaper product, we want them to stop flooding the market rather than our changing. When the wealth of the world is very unequally distributed, we resist the idea of changing and suggest the poor nations raise their standards of living. Isn't there an air of superiority implied in these situations? Surely it would be better to have an egalitarian attitude among caring people who are unafraid of change.
- (4) A tendency to create excuses for our failures. Not only do people "explain" away their past failures, there is growing evidence that some people even devise their own barriers to success, i.e. they provide themselves a "handicap" which will serve as an excuse in case they fail in the future. Examples: One motive, among many, for students to party and use drugs is that being "out partying" or "high" or "hung over" is an acceptable ("I'm a popular, fun-loving person") excuse for doing poorly in school. Just like being injured or ill explains

why an athlete doesn't play well. Even the procrastinator (see chapter 4) has an excuse for not doing well--"I put off studying." Furthermore, all these excuses--drinking, illness, or disorganization--afford another special pay off, namely, they permit the user to continue his/her self-concept that he/she has the ability to do really well //he/she had really tried. Obviously, if you use excuses and believe your own excuses, you are not seeing your real self. Do you use excuses?

In summary, (1), (2) and (3) suggest that some of us have strong tendencies to think we are right--almost a determination to prove we are right or superior and others are wrong or weak. In addition, (4) implies that we shield ourselves from seeing our weaknesses, so we can go on feeling superior (see chapters 5 and 15). Yet, such a misinformed person will surely eventually have difficulty relating to others and coping with life. Also, all this unconscious conniving to help us feel superior raises a question: Doesn't some part of us have to know or suspect we are inferior-to-our-aspirations before these defenses would be erected? I think so, just like the braggart shows signs of self-doubt by boasting too much.

STEP TWO: Recognize the barriers to growing, learning, and being the best one can be.

Sometime changes, even self-improvements and career advancements, can be more scary than satisfying. A person may feel fairly content day to day but over a period of time become concerned that he/she is in a rut, unable to make his/her life better. There are two kinds of barriers to change: (a) it is comfortable to just be yourself and (b) fears can be a barrier to succeeding. This comfort with yourself can be a problem, e.g. suppose you have a terrible temper. You have learned over the years to accept being "hot headed"--it is part of your self-concept. You may not like your temper but it is an established, permitted part of you. Criminals sometimes feel they were meant to defy the law and be punished. Students sometimes think of themselves as poor readers or writers or testtakers and readily accept low grades. Our self-concept develops over the years--it is us. Any challenge to our view of ourselves is threatening, something to be resisted. For instance, if a normally mild tempered person flies into a rage, he may say, "I wasn't myself." We protect our self-concept. There is a tendency to continue acting out our self-concept; this inhibits change. Now, let's consider several fears that also inhibit change.

(1) The fear of growing up. As we outgrow the relaxed, pleasure-oriented habits of childhood, we are expected to become more reasonable, more responsible, and more mature. Being grown up may mean giving up an easy life, working steadily, exercising self-control, taking care of others, being assertive, overcoming shyness, making sure things get done, etc. These changes can be a hassle and even scary.

- (2) The fear of success. If you prove you can do something well, people will expect it of you all the time. Show you can fix delicious desserts and you'll be asked to make them. Show you can take good notes and you will become the secretary. Show you can make the best grade in the class and the teacher as well as your parents will expect it every time. If you are successful, you may acquire more responsibilities and expose yourself to more hurts. Be successful on the job and you will be given more to do. Be successful in love and you are in jeopardy of being dumped (or having children to support). Do well in school and you will be expected to continue in school until you do poorly.
- (3) The fear of excelling. Maslow, who studied self-actualizers, i.e. creative, outstanding achievers, thought that many of us fear and dislike successful people...and, thus, we may be reluctant to become great. Consider how often we hear someone's achievement degraded: "Wonder how he got so much--probably his family had money" or "Wonder who she had to sleep with to get where she is" or "I'd have lots of friends too if I had a car like that and money" or "Anyone could make all A's if all they did was study." Such put downs of reasonable goals (status, promotions, friends and grades) sounds a little like "sour grapes" and this kind of thinking might reduce one's drive to achieve one's own potential.
- (4) The fear of knowing. A lot of people would be reluctant to find out their spouse was unfaithful or abusing the children or breaking the law. Once you know, you may have to take action. If you don't know, you don't need to do anything. Likewise, people avoid finding out what is wrong with a person lying on the sidewalk. Knowing the situation requires a person to do something because ignorance can no longer be used as an excuse. Likewise, knowing the poverty, illness, and starvation in the world puts pressure on us to act. Discovering a problem at work or knowing a better solution to a problem than the boss knows can sometimes be scary. Drinkers, smokers, over-eaters, procrastinators, and insulters don't want to know the eventual results of their behaviors. We use defense mechanisms to keep from knowing the truth about ourselves.

Do any of these fears ring true for you? If so, awareness may be the first step to overcoming the barriers to becoming your best true self.

STEP THREE: Learn all you can about personality (ch. 9), self-concept (ch. 6), personal dynamics (chs. 7 & 8) and interpersonal relations (chs. 9 & 10).

Learn about psychology but realize there is an enormous gulf between psychological book-learning and practical, usable wisdom. The gulf is primarily "practice, practice, practice" in terms of applying the principles to your own life. Learn about cases--real human lives--and ask yourself: "Could that be true of me too?" Make use of the methods in chapter 15 for increasing your self-awareness.

STEP FOUR: Explore the many conflicting parts and roles that make up your self.

"Know thyself" surely means being aware of your personality--all the complex parts: "parent," "adult," "child," "internal critic," "self-monitor," and many other facets. Be sure to consider the possible future selves discussed in method #1 and in chapter 4. How do you recognize the parts? First become familiar with the parts and roles as described in chapter 9 and other personality books. Then, notice your behavior: the kind of words you use, how you feel, and your goals. Notice your relationships with others: when are you dominant? when submissive? when angry, scared, fun-loving, serious, mature, emotional, etc.? Notice your attitudes: when do you feel OK, when not OK? when are others OK, when not OK? when do you feel loved, unloved, nurturing, selfish, confident, helpless, etc.? Notice your expectations about your future: what are you hoping to do in the future--what are your expected strengths? What are you afraid will happen--what are your weaknesses?

Notice the conflicts between parts. Observe how you resolve the conflicts. From chapters 9 and 15 try to figure out your life scripts, games, and defenses. Consider the possibility that everything is true of you (see chapter 15). Self-exploration takes a life-time.

STEP FIVE: Use skills learned in chapter 13--listening, empathy, caring and self-disclosure--to increase your closeness with others. Ask a variety of others for honest feedback.

We increase our understanding of ourselves by close and intimate interaction with others, many others. We would have little faith in feedback from others unless we felt they knew our true selves, which means we must have disclosed our intimate feelings to them. People who have not disclosed their real selves to others often don't know their real selves. The more of our real selves we have shared with others (and been accepted), the more likely we are to accept ourselves. The better we understand others, the better we can understand ourselves. And, the reverse, the better we understand ourselves, the better we understand others. However, this doesn't mean that close friends will always give us the most accurate feedback.

To keep growing, we need continuing, honest feedback. Friends and lovers like us and tend to agree with us, they support and compliment us, overlooking our weaknesses. Some *true* friends will tell us the truth, not what we want to hear, but many do not unless we ask for frank answers. Other true friends can't tell us the truth because they need and use the same defenses we do. There is a saying, "Blessed are our enemies, for they tell us the truth." Sometimes slightly outsiders, such as older people, relatives, authorities, teachers, counselors or casual acquaintances, can be the best sources of information about your true self if they think you genuinely want honest feedback.

Growth groups use a good exercise for getting feedback: ask each person to anonymously list two positive traits and two negative traits (or 2 suggestions for improvement) for every other person in the group. The leader reads aloud the descriptions for each person. You can take notes about how the others see you, then share how you feel about the feedback and ask for clarification.

Adler said we came to know and like ourselves by developing our capacity to care for others. Maybe we must love others before we can love ourselves...or is it the reverse? Maybe both loves (for others and for ourselves) grow together. It is pretty clear that one of the enormous pay offs for being good is self-respect.



A little girl was returning from the house next door where her friend had just died and her father asked, "Where have you been?" "Next door," she answered. "Why did you go there?" asked the father. "To comfort the mother," said the girl. "How could *you* do that?" he asked. "I climbed into her lap and cried with her."

-Anonymous



STEP SIX: Take personality tests that will confirm or question your notions about yourself.

Just as feedback from others is a way of getting to know yourself, similarly taking psychological tests is another good way of discovering more about ourselves. The details of this method are dealt with in chapter 15.

STEP SEVEN: A healthy, attractive body in good condition contributes to self-respect.

People who exercise and stay in shape are less depressed and more self-accepting (McCann & Holmes, 1984).

STEP EIGHT: Work on self-actualization; in order to excel, which usually means doing better than anyone else expected of you, it takes hard work and courage.

Lastly, keep in mind that "knowing thyself" at this moment is only a part of a life-long endeavor to create a self you admire. Insight is not the end goal, changing is the goal. Changing into what? Your choice. But see the characteristics of a mature, self-actualized person in chapter 9. Consider striving for those traits. Remember from chapter 6 that happiness is related to being a good person, job satisfaction, family satisfaction, education, income and status as well as self-esteem.

Give yourself a chance to strive for excellence--dream big and go for it. Keep in mind: when your achievements merely meet expectations, that is nice (you haven't failed), *but* it is only when you achieve well beyond everyone's expectations that you are really successful and feel great. So set your sights high. It takes courage to face the risk of failure. It takes a strong will to accomplish hard jobs.



There are many inspiring stories of triumph over adversity. The story of Abraham Lincoln is one. He had failed in business twice and lost an election by the time he was 24. He had also lost his mother early in life, lost a lover (at 29), reluctantly married a neurotic woman (32), lost his father (43), and lost a child (53). Although elected to the state legislature (25) and U. S. Congress (at 37 for one term only), he lost elections as speaker (29), congressman (twice--34 & 39), senator (twice--45 & 49), and vice-president of the United States (47). Lincoln in his late twenties and early thirties suffered such severe depression that friends took away his knives and razors. Yet, he learned to handle his defeats to become one of our most sensitive, humble, and greatest presidents (51-56).



Time involved

Self-confrontation and seeing ourselves realistically are life-long endeavors. There are so many parts of our selves and some parts are so well hidden that the exploration is never completed. Nevertheless, some of us are far more "aware" than others. But changing from moderately unaware to very aware would ordinarily take months or a few years of concerted efforts. Perhaps the most dramatic transformations are among people who have had extensive psychotherapy or who have gone through several years of training in clinical psychology.

Common problems

Much of this method is similar to the methods in chapter 15. The barriers and resistance to uncovering unpleasant characteristics about ourselves are the same. Most people will quickly "brush off" these ideas. The best you can hope for is a continuing awareness of these tendencies (self-aggrandizement, excuses, fears) so that you can remain on guard against their getting out of control.

Reading can open our eyes but getting feedback from others is probably the most common way of finding out about ourselves. It isn't that others explicitly tell you a lot about yourself, more often the views of others are eked out as a result of interactions. For instance, other people's behaviors have implications to and about us: if others are unfriendly, we start to wonder what about us keeps them at a distance. If others impose on us for favors, we question why and so on. These are valuable insights.

Effectiveness, advantages and dangers

There is almost no scientific evidence that reading about various self-deceptions and fears (steps 1 and 2) or about psychology in general leads to self-insight and a more realistic self-concept. But since psychotherapy and group therapy do alter many peoples' self-concept, then ideas via reading probably do too. Frankly, I doubt if many people are interested in thinking much about their self-deceptions, their fears that enable them to remain unchanged, and their conflicting parts. That's the big disadvantage of this method. There are no known dangers, except that an already overly self-critical person could use these traits against him/herself.

Challenging Irrational Ideas



Challenging irrational ideas (Rational-Emotive therapy)

Our thoughts influence our feelings. If you think people won't like you, you feel disappointed and withdraw socially. If you think nothing will work out well for you, you feel sad or passive and won't try. If you think you must have help to do something, you may feel inadequate and be dependent. If you think you are stupid and incompetent, you may feel worthless and be indecisive and self-critical. No doubt there are connections between thoughts and feelings and/or actions.

Rational-Emotional therapy is built on the belief that how we emotionally respond at any moment depends on our interpretations--our views, our beliefs, our thoughts--of the situation. In other words, the things we think and say to ourselves, not what actually happens to us, cause our positive or negative emotions. Thus, as Albert Ellis (1987) would say, "Humans largely disturb themselves... your own unreasonable, irrational ideas make you severely anxious, depressed, self-hating, enraged, and self-pitying about virtually anything--yes, virtually anything." This is a very old idea.



As a man thinketh, so is he.

-The Bible

Men are not worried by things, but by their ideas about things. When we meet difficulties, become anxious or troubled, let us not blame others, but rather ourselves, that is: our idea about things.

-Epictetus, about 60 AD

It is very obvious that we are not influenced by "facts" but by our interpretation of the facts.

-Alfred Adler



If the theory is true that irrational ideas cause most of your intense, long-lasting, unwanted emotional reactions, then there is a simple solution: change your thinking! Actually that may not be as easy as it sounds but that is exactly what Rational-Emotive therapy tries to do. It identifies the patient's unreasonable thoughts and immediately confronts or challenges these problem-producing ideas so that the patient will think differently--see things in a different way--and, thus, feel differently. Thus, this therapy involves persuasion, arguments, logic, and education--essentially insisting that the person be rational and scientific. If you don't have a therapist, you can try to persuade yourself that certain thoughts are unreasonable.

What kinds of ideas are irrational and make us upset or "sick"? Ellis and Harper (1975) described ten common irrational ideas, such as "everyone should love and approve of me," "I must be competent; it would be awful to fail," "when bad things happen, I am unavoidably very unhappy and should be," "it is terrible when things don't go the way I want," and so on (see step one below). There are hundreds of such ideas which transform, for some people, life's ordinary disappointments into terrible, awful catastrophes. Preferences that are quite reasonable are made in our minds into absolutely unreasonable shoulds, musts, and demands which are very upsetting. Mole hills become mountains. We talk ourselves into emotional traumas; yet, the upset person thinks the external events, not his/her thoughts, are upsetting him/her. Ellis called this mental process "awfulizing" or "catastrophizing." It is described as a factor in depression in chapter 6.

What is rational thinking? First, as Carl Rogers said, "the facts are friendly." We must face the truth; that's rational. Secondly, if we view reality as a determinist (see next method), we will tell ourselves that "whatever happens is lawful, not awful." Everything has a cause(s). The connections (called laws) between causes and effects are inevitable, the nature of things. So, when something happens that you don't like, don't get all bent out of shape, just accept that the event had its necessary and sufficient causes (and try to change it the next time). Thirdly, Ellis urges us to constantly use the scientific methods of objective observation and experimentation, i.e. the systematic manipulation of variables to see what happens. For example, if you think no one would accept a date with you, Ellis would give you an assignment to ask out five appropriate, interesting people. If your belief (that no one will go out with you) proved to be correct with those five people, then Ellis would direct you to start manipulating variables, e.g. how can your appearance or approach be improved,

how can you pick more receptive "dates" to approach, and so on, and observing the outcome. In short, we accept what is happening and what has happened as lawful, as the natural outcome of immutable but complex laws, and not as terrible, awful events that we or someone should have prevented. And, while we can't change the past, we can learn to use these "laws of psychology" to help ourselves and others in the future. What we can't change in the future, we can accept.

To understand any strong, troublesome emotion, you need to see clearly three parts of your experience:

- 1. The actual upsetting *physical-social situation and event*, what you and others did, and the outcomes. Example: boyfriend and you argued about what to do this evening, watch football or visit your family. He got his way.
- 2. The *thoughts, wishful images, and self-talk* you had before, during, and after the event, but especially just before feeling bad. This includes what you had originally hoped would happen and how you now wish it had worked out. Examples: he doesn't even listen to my needs; I really wanted him to have a good time with my family so we can go more often; he always has to be in control; he is so hung up on sports, I hate them; he should let me have my way half the time; I don't want to stay home, but I can't visit my family alone; when he dismisses me, I'd rather just read a book and fall asleep.
- 3. Your *emotional reactions* about or to the event and the outcomes. Examples: I feel frustrated when I try to communicate to him; I'm hurt and furious because my needs are dismissed; I resent his self-centeredness; I'm scared my marriage is not going to last.

But, without some instruction, we don't recognize that some of our thoughts (2) may be irrational or unreasonable. Therefore, my description of this method begins with a careful explanation of irrational thoughts, then more rational thinking is described. With these concepts in mind, it will be easier in step 3 for you to select either a troublesome emotion (3) or an upsetting situation (1), and then go looking for your irrational ideas and unfulfilled expectations that really produce your overly intense emotions.

Purposes

It is necessary to distinguish between reasonable and irrational emotions. Obviously, fears of reckless driving, an irate person, electrical wires, VD and AIDS, etc. are realistic and not irrational. It is also appropriate to temporarily feel disappointment, sadness, or regrets after a loss or a failure. One will temporarily feel irritation and frustration after someone has cheated or lied about him/her, even though one realizes that the person who did you wrong had his/her reasons. You would have preferred that things had worked out differently, but it is not reasonable to "cry and scream" that it

shouldn't have happened or to "rant and rave" that you can't stand it. Intense reactions, when carried on excessively long, become irrational over-reactions. At least to some extent these extreme emotions are based on or augmented by irrational thoughts which can be eliminated.

- To reduce or prevent intense, prolonged, irrational anger, anxiety, depression, guilt, feelings of inferiority or worthlessness, jealousy, dependency, and other such emotions.
- To learn more rational ways to view life, more honest ways to evaluate oneself, and more reasonable expectations to have of oneself and others.
- To recognize that we can not understand ourselves or others without knowing the "internal environment," i.e. how the person views or interprets the situation and what the person is saying to him/herself.

Steps

STEP ONE: Identify your irrational ideas.

Until recently it was thought that only 10 or 12 common irrational ideas caused most of human misery (Ellis & Harper, 1975). Now, it is thought that there are thousands of misery-causing false ideas (Ellis, 1987), a few of them are very obviously irrational but many are subtle and more convincing (but still wrong). As these ideas are described, think about your own thoughts, attitudes, and self-talk. To what extent do you think this way?

It is necessary for me to describe several irrational thoughts because we differ very much in terms of how we think. You will not have all the harmful thoughts that I describe; you may have only two or three, but they could be enough to make you miserable. Unfortunately, you will have to skim all the ideas below to find the few that are giving you trouble. Here are the common, fairly obvious irrational ideas described by Albert Ellis which create unwanted emotions:

- 1. Everyone should love and approve of me (if they don't, I feel awful and unlovable).
- 2. I should always be able, successful, and "on top of things" (if I'm not, I'm an inadequate, incompetent, hopeless failure).
- 3. People who are evil and bad should be punished severely (and I have the right to get very upset if they aren't stopped and made to "pay the price").
- 4. When things do not go the way I wanted and planned, it is terrible and I am, of course, going to get very disturbed. I can't stand it!
- 5. External events, such as other people, a screwed-up society, or bad luck, cause most of my unhappiness. Furthermore, I don't have any control over these external factors, so I can't do anything about my depression or other misery.

- 6. When the situation is scary or going badly, I should and can't keep from worrying all the time.
- 7. It is easier for me to overlook or avoid thinking about tense situations than to face the problems and take the responsibility for correcting the situation.
- 8. I need someone--often a *specific* person--to be with and lean on (I can't do everything by myself).
- 9. Things have been this way so long; I can't do anything about these problems now.
- 10. When my close friends and relatives have serious problems it is only right and natural that I get very upset too.
- 11. I don't like the way I'm feeling but I can't help it. I just have to accept it and go with my feelings.
- 12. I know there is an answer to every problem. I should find it (if I don't, it will be awful).

Note all the "things-should-be-different" ideas mentioned or implied in these statements, including one's own helplessness. Our desires or preferences become "musts" or demands. Much of this self-talk suggests an underlying cry that things should be different, almost like a child's whine that the situation is awful, "I hate it," and it must be changed. Perhaps the common ridiculous notion that "you can be anything you want to be" also contributes to these unreasonable expectations. No one can be anything they want to be! A rock star? A Olympic champion? President? The person loved by the next door neighbor? Sometimes "if you just try hard enough" is subtly added to "you can be anything..." to make it more believable (like the subtle ideas below) but then a person's modest efforts become the basis for a demand: "I worked so hard, it really ticks me off that I only got a 'C' or didn't get a raise."

How many of these 12 irrational ideas are similar to your own self-statements? How many sound pretty reasonable to you? The more of these irrational ideas you believe, the more likely you are to be upset and have unreasonable feelings. However, just one irrational idea may be all you need to become distraught. Furthermore, Ellis (1987) has recently suggested that one reason why people keep on getting upset (even after reading Ellis's books and having Rational-Emotive therapy) is because they have rejected most of the obvious irrational ideas but retained some of the subtle ones:

- 1. Of course, I can't totally please everyone all the time, but I must have approval of certain people because I have been rejected and hurt... because I was spoiled with lots of love as a child... because I really try hard to please... because I feel so upset when I'm not approved... because I only want a little approval... because I'm a special person... and so on.
- 2. I know I can't be perfectly competent all the time in every area, but I must succeed on this project because I want to excel so badly... because I really try hard and deserve it... because I have done so well in the past (or failed so often)... because I

- am handicapped and feel so worthless when I fail... because I have special abilities... and so on.
- 3. Oh sure, it is foolish to expect to be treated fairly in all ways by everyone all the time, *but* they must be fair to me in this case because I am considerate of others... because people have always treated me fairly (or unfairly) in the past... because I am at a disadvantage and can't take care of myself... because I'm furious and they have absolutely no reason to do this to me... and so on.

You can see how a clearly irrational idea sounds more believable when embellished by these pseudo-psychological explanations. However, such statements are still crazy, unreasonable expectations or thoughts which can and do upset us. Ellis suggests that the tendencies to have these crazy ideas are inborn, i.e. obsessing about something we want badly evolves into absolute musts and demands. How does this happen? We forget the probabilities and risks involved in our irrational self-talk; we over-look our lack of ability and determination; we deny that our strong feelings and needs help convince us we are right (when we are wrong); we fail to see that our strong emotions, like anger, fears and weakness, are frequently reinforced (chapters 5, 6, 7 & 8); we sometimes think it is healthy or appropriate to feel strongly and "never forget;" we aren't aware of our defense mechanisms (chapter 5 and self-deception in methods #1 & #2); we may acquire emotional responses without words, e.g. via conditioning and modeling (chapter 5); we prefer to change the situation rather than our thinking (get a divorce rather than deal with our anger, flunk out of school rather than cope with our overwhelming need for fun); we escape but don't solve our problems by drinking, socializing, involvement with activities and cults, dieting, taking medication, etc.; we convince ourselves we can't really change (and, therefore, don't try very hard). Thus, irrational thinking becomes the easy way out: I can just insist that things should go my way. And scream about injustice when things don't go my way. That way, I don't have to take responsibility for controlling my life.

Finally, Transactional Analysis and Cognitive therapy have described a number of other self-messages that are illogical and unhealthy (Butler, 1981):

- Driver messages: Be perfect, hurry up, try hard, please others, be strong, and so on, reflecting unrealistic demands that interfere with our natural preferences and inclinations (see chapter 9).
- 2. Stopper messages: (ideas that "stop us in our tracks" or "shoot us down" and keep us from trying)
 - Catastrophizing -- "If I said something stupid, it would be terrible." "If he/she rejected me, it would be awful." (See Ellis's irrational ideas above).
 - o Self-put-downs -- "I'm so dumb... boring... ugly... weak... selfish... demanding... bossy... irresponsible..." (see chapter 6).

- Self-restricting statements: "I'll speak up providing no one's feelings will be hurt." "I'd give an opinion if I had all the facts." "I'd approach him/her if I could think of something witty to say."
- o Witch messages -- "Don't be yourself; they won't like you." "Don't be different... don't be like your father... like a sissy... like a pushy boss... like an egghead professor..."
- 3. Illogical thinking: (see method #8)
 - o False or unfounded conclusions -- "If she doesn't love me, no one will." "He smiled; I think he is turned on by my body." "He/she loves me so much; he/she will make the changes I want him/her to make." "I won't be able to find a job and support myself, it's hopeless." "I know they are making it hard for me, that makes me mad." Eric Berne realized that some people tend to respond again and again with the same emotional response, say self-criticism, pessimism, or anger. He called this reoccurring emotion the patient's "racket." The racket--an emotion based on faulty thinking--has become a basic part of your personality.
 - o Misattribution -- often we blame our feelings on someone or something else. Examples: "You make me so mad." "This setting is depressing." "Depressed people get me down." "I did it because I was drinking." "I only hit you because you were trying to make me jealous." Often we blame the victim.
 - Overgeneralization, exaggeration, or either/or thinking -- anytime we use never, always, or everything, we are probably over generalizing. Also, many of us over-emphasize the importance of a blemish, a mistake, our looks, etc. Another problem is when vague words are used, like "success," "happiness," or "good." If terms like these aren't carefully defined, how do you know you have reached that condition? Then, some people use either/or reasoning: "If I'm not (successful) yet, I must be a failure." That is foolish; it would be better to think in terms of percentage--how successful have I been? How happy am I? How much progress have I made?

This step is to introduce the idea of irrational thoughts that cause unwanted emotions. It is a giant leap from recognizing these irrational ideas to getting rid of them. In fact, Ellis says we never learn to think straight all the time. How many wrong ideas most of us retain is not known yet. Certainly, a better understanding of rational, adaptive thinking would help all of us. In the following steps, we will study ways to detect and correct your own unique, well hidden, wrong and disturbing ideas.

STEP TWO: Try to find more rational sentences to say to yourself.

Like replacing bad habits with good ones, your irrational thoughts must be replaced with more rational ones. For each of the 12 obvious irrational ideas listed in step 1, here is a more reasonable way to look at the situation: (Note: You may have to refer back to the original *irrational* idea to understand these *rational* ideas.)

- 1. It is not possible for everyone to love and approve of us; indeed, we can not be assured that any one particular person will continue to like us. What one person likes another hates. When we try too hard to please everyone, we lose our identity; we are not self-directed, secure or interesting. It is better to cultivate our own values, social skills, and compatible friendships, rather than worry about pleasing everyone.
- 2. No one can be perfect. We all have weaknesses and faults. Perfectionism creates anxiety and guarantees failure (chapter 6). Perfectionistic needs may motivate us but they may take away the joy of living and alienate people if we demand they be perfect too. We (and others) can only expect us to do what we can (as of this time) and learn in the process.
- 3. No matter how evil the act, there are reasons for it. If we put ourselves in the other person's situation and mental condition, we would see it from his/her point of view and understand. Even if the person were emotionally disturbed, it would be "understandable" (i.e. "lawful" from a deterministic point of view). Being tolerant of past behavior does not mean we will refuse to help the person change who has done wrong. Likewise, our own mean behavior should be understood by ourselves and others. When people feel mistreated, they can discuss the wrong done to them and decide how to make it right. That would be better than blaming each other and becoming madder and madder so both become losers.

When is anger justified? Some say never. Some say only when all four of these things are true: You didn't get what you wanted, you were owed it, it was terrible you didn't get it, and someone else was clearly at fault. If any of the four can't be proven, confront your unreasonable anger. If you are sure they are all true, then be assertive (not aggressive) with the person at fault (Ellis, 1985b).

- 4. The universe was not created for our pleasure. Children are commonly told, "You can't have everything you want." Many adults continue to have that "I want it all my way" attitude. The idea is silly, no matter who has it. There is nothing wrong, however, with saying, "I don't like the way that situation worked out. I'm going to do something to change it." If changes aren't possible, accept it and forget it. An ancient idea is to accept whatever is. A recent book urges to want what we have, to be grateful for it, and not to desire more and more (Miller, 1995).
- 5. As Epictetus said, it is not external events but our views, our self-talk, our beliefs about those events that upset us. So,

- challenge your irrational ideas. You may be able to change external events in the future and you certainly can change your thinking. Thinking like a determinist helps (see next method). Remember no one can *make* you feel anyway; you are responsible for your own feelings.
- 6. There is a great difference between dreadful ruminations about what awful things might happen and thinking how to prevent, minimize, or cope with real potential problems. The former is useless, depressing, exhausting, and may even be self-fulfilling. The latter is wise and reassuring. Keep in mind that many of our fears never come true. Desirable outcomes are due to the laws of behavior, not due to our useless "worry." Unwanted outcomes are also lawful, and not because we didn't "worry."
- 7. As with procrastination (see chapter 4), avoidance of unpleasant tasks and denial of problems or responsibilities frequently yields immediate relief but, later on, results in serious problems. The life style that makes us most proud is not having an easy life but facing and solving tough problems.
- 8. People *are* dependent on others, e.g. for food, work, love, etc., *but* no one needs to be dependent on one specific person. In fact, it is foolish to become so dependent that the loss of one special person would leave you helpless and devastated (see chapter 8).
- 9. You can't change the past *but* you can learn from it and change yourself (and maybe even the circumstances). You can teach an old dog new tricks. Self-help is for everyone every moment.
- 10. It is nice to be concerned, sympathetic, and helpful. It is not helpful and may be harmful to become overly distraught and highly worried about other people's problems. They are responsible, if they are able adults, for their feelings, for their wrong-doing, and for finding their own solutions. Often there is little you can do but be empathic (chapter 13). Avoid insisting on rescuing people who haven't asked you for help.
- 11. This helpless, hopeless "I-can't-change" attitude is contradicted by this entire book and most of the therapeutic and self-help literature. There are many ways to change unwanted feelings (see chapters 5, 6, 7, 8 & 12). On the other hand, there is merit in "being able to flow with your feelings" in certain circumstances. Being unable to feel or express certain emotions is a serious handicap but correctable. Being dominated by one's emotions--a slave to your emotions--is also a serious but correctable problem. As long as our emotions are sometimes destructive and irrational, it is crazy to unthinkingly "follow our feelings." Only our thinking, reasoning brain can differentiate between joyous, facilitating feelings and harmful, misguided emotions.
- 12. Wrong! There is no one perfect solution but there may be several good alternatives. Try one, see what happens (observe the laws at work), and try again if your first idea doesn't work. Perfectionism causes problems (chapter 6), including taking too much time, becoming too complicated, causing undue anxiety, and lowering our self-esteem.

Instead of insisting that things must or should be different, instead of believing people and the world are awful, instead of demanding perfection, instead of feeling helpless, instead of denying reality, there are better attitudes (also healthy attitudes are discussed in chapter 14):

- Accept reality: Say to yourself, "It would have been better if hadn't happened, but it's not awful, it was lawful."
 Or, "That's the way it is. I'll make the best of it."
- 2. Learn from past failures how to improve the future: "It didn't happen even though I wanted it to. So, now I'll get down to work and plan how to make things work out better next time. Where's my psychology self-help book?"
- 3. Accept responsibility for your feelings: "No one can make me feel any way. But, /can change how I feel. Okay, I can't be perfect, I'll just do my best and stop beating myself." "I" statements remind us that we alone are responsible for our feelings (see method #3 in chapter 13).
- 4. Realize that worry is useless: "All this fretting isn't doing any good. I'll make a plan--maybe desensitization and role playing-and see if that works." "I've worried about this matter long enough; worry isn't doing any good. I'll work on some other problem I can do something about." "I've been in pain long enough; he/she isn't worth all this misery; I've got to get on with life."
- 5. Tell yourself that it is better to face facts than live a lie: "I'm not going to handle this situation well unless I am realistic. I need to see my faults. I need to consider long-range goals as well as having fun today." Remember Laing's suggestion to check out your hunches about what others are feeling and thinking (see method #7 in chapter 13).
- 6. Recognize the difference between a fact and an inference: The difference is well illustrated by the saying "unloaded guns kill." Unloaded is an inference when, in this case, the gun is, in fact, loaded. You might say, "Just because Bill didn't call me today doesn't mean he is mad." "No one seems to be noticing me but that doesn't mean I'm unattractive today." "I got a 'D' on my first English paper but that doesn't prove I'm hopeless as a writer." When you draw conclusions (especially ones that upset you), ask "What are the facts for and against this conclusion?"
- 7. Challenge your illogical thinking: *Question false conclusions* --"I can't judge character by color of skin or by how he/she is dressed." "Just because I haven't overcome this jealousy yet doesn't mean I can't ever." "There is keen competition and probably several reasons why I didn't get admitted to graduate school; it isn't just that they are biased against Jews from New York... older females... young, inexperienced males like me... or that I always do poorly on tests... or that Dr. Smith gave me a lukewarm letter of reference..."

Question your overgeneralizations --"I felt he never showed any interest in me, but he does ask about my classes and eats lunch with me." "It seemed like she was always complaining

but I've started noticing that she hardly criticizes at all for an hour or two after I have done something for or with her." "I used to think women didn't know much about politics and international affairs but Louise, Kathy, and Paula are very knowledgeable and interesting." "Just because I haven't gotten a good job yet doesn't mean that finishing college and working as an aid in a nursing home has been a total waste of time." "Just because I have a pimple on my chin doesn't mean I'm ugly or totally unattractive in every way." (Method #8 deals with logical thinking.)

- 8. Counter "driver" messages with "allower" messages: "I don't have to be perfect or always on top." "It's OK to be emotional, take my time, respect myself." See scripts in chapter 9.
- 9. Counter self-put-down, "witch" messages which hold you back: "Why not approach that attractive person over there *even if* I find out she/he is going with someone or *even if* she/he eventually thinks I'm forward... odd... boring?" See method #1.

Several books concentrate on controlling your self-defeating thoughts and upsetting feelings or beliefs. Some of the better ones are David Burns's (1980), *Feeling Good: The New Mood Therapy*, McKay & Fanning's (1991), *Prisoners of Belief*, and Lazarus, Lazarus, & Fay (1993), *Don't Believe M*. Many people like Wayne Dyer's (1976) best selling, *Your Erroneous Zones*, but mental health professionals think it encourages self-centeredness and shallow thinking (Santrock, Minnett & Campbell, 1994). Many other books are cited at the end of this method.

This is an important step--learning to think rationally and seeing the sources of your irrational ideas--but your emotional responses are not likely to immediately change. You may rationally see why you shouldn't be depressed, angry, panicky, etc. long before the gut responses fade away (as a result of the cognitive changes or, if necessary, other self-help methods in chapter 12, such as deconditioning).

STEP THREE: Identify the feelings and the circumstances in which you experience unwanted emotions. Write each upsetting situation on the top of a 3 X 5 card.

The irrational ideas discussed in step 1 may have sounded familiar. If so, perhaps you can start observing and tracking your irrational self-talk, and in that way discover what emotions are generated by these thoughts. However, *it is usually more practical to start by identifying the times and situations in which you have unwanted feelings* --fears, worries, fatigue, guilt, pessimism, resentment, shyness, regrets, loneliness, jealousy, envy, passivity, conformity, sadness, etc. In the next step, we will go looking for the irrational ideas you might be telling yourself that could produce the unwanted emotions. In this step, however, we are simply identifying the emotions and situations we would like to change.

The task is to ferret out irrational ideas but the surface symptoms-the emotions--are much easier to see than the underlying thoughts--the irrational ideas. Therefore, look for and write down on a 3 X 5 card each unwanted feeling *and* the situation, interactions, thoughts and/or fantasies associated with that feeling. Do this whenever you have exaggerated, prolonged, or possibly unjustified emotional reactions, whenever you are frustrated and think things "should" be different, whenever you respond differently than others do, whenever you have emotional responses you don't understand or don't like, whenever you feel pushed by your own internal pressures and so on.

Obviously, different people respond differently to the same situation. Surely some of these emotional differences are due to how these people see the situation differently and how they talk to themselves about the situation. Do the ways you respond differently from others reveal some of your partially hidden ideas? What do you say to yourself when breaking up with someone? when failing to do as well as you would like? when starting a difficult new project? when being criticized? when you feel something is awful? Negative feelings reflect negative self-talk. Changes in feelings usually follow changes in views or ideas. Make a practice of noting when your emotions change and then (in the next step) looking for your internal judgments and self-talk in these situations. Your ideas may explain your feelings.

When you feel the need to escape, e.g. "I want to get out of here" or "I need a drink," it is possible that your self-talk is creating this urge to act or this internal pressure. Maybe you are driving yourself too hard with "be perfect," "try harder," and "don't show your anger" self-instructions. Look for these thoughts. Likewise, when we avoid our work and procrastinate by eating, drinking, cleaning, watching TV, etc., we may be telling ourselves lies, such as "I can easily do it tomorrow," "I'll work after watching TV," "I won't do it right," "I can't learn all that stuff--it's useless anyway" or "They will probably make fun of my work." Who wouldn't try to avoid all those negative self-evaluations by escaping into some other activity? Who wouldn't use excuses if we didn't question their validity?

STEP FOUR: Explore the underlying rational and irrational ideas in each situation. Challenge your crazy ideas and decide on more rational ways of thinking. This is "cognitive restructuring."

Take all your 3 X 5 cards with a brief description of the situation on the top and arrange them in order of severity. Beneath the description, draw a line down the middle of the card. The right side will be used later for more rational ways of looking at it. On the left, list the irrational ideas possibly causing this unwanted emotional reaction. A review of the common irrational ideas and the driver, self-critical, and illogical messages described in step 1 should help.

In other words, whenever you have an unwanted emotion, go looking for the possible underlying thoughts. Examples:

<u>Feelings</u>	Possible Irrational Ideas
Anxiety, stress	Hurry up or be perfect messages; failure expectations or too high expectations.
Sad, pessimistic	Self-criticism; hopelessness; expecting to fail.
Anger, irritable	Fantasies about being mistreated; believing the other person is evil and should be punished.
Disappointment	Expecting too much. Thinking things <i>should</i> be different.

Don't expect it to always be easy to pin point the exact irrational ideas involved. First of all, you may have repeated a wrong idea so many times you believe it is totally right. Examples: "I am fat." "I can't express myself." "Women can't fix cars." "I must do better than my brother." "I'm not attractive." Butler (1981) says the question is not "Is my self-talk true and realistic?" (because you frequently can't answer that), but rather you should ask yourself, "Is my self-talk helping or hurting me?" Example: It is not helpful to tell yourself, "She dumped me for Joe because I'm inferior to him" but it could be helpful to say, "Thinking I'm inferior may or may not be true, but, for certain, it is hurting me. I need to think differently. Let's see. If I learned to be more attentive to others, more fun-loving, and less self-critical, girls would probably like me better."

Butler also contends that we start to question and discard our irrational, negative ideas as we recognize more and more how these ideas are harming us. So, she asks her clients to consider the damage done in terms of (1) hurtful feelings, (2) troublesome behavior, (3) low self-esteem, (4) strained relationships, and (5) high stress or poor health. Obviously, repeatedly seeing the damage done by our own thoughts helps us see the importance of changing our thinking.

While Butler seems to disagree, I suspect we can frequently see the errors in our thinking if we stop and ask ourselves, "What is the evidence for this belief?" We can recognize some of our *subtle* irrational ideas and then challenge them. We can hear our internal predictions of failure ("you can't do that"), our demands that other people be different ("they shouldn't neglect me"), and so on. We can learn to say "That is a silly, harmful way to think, so stop it!" Then we can think of more positive, constructive ways of thinking (see last and next step). Butler suggests writing down what you say (or think) to yourself before and while you are upset. Seeing the thoughts in writing also helps you see the irrationality.

Cognitive therapists have developed several methods for challenging irrational ideas that mess up our lives (Mc Mullin, 1986). Here are some:

Try to think of several interpretations of an upsetting event. Suppose someone comments that you are getting flabby around the middle. You are hurt, ashamed, and, at first, conclude that you are unattractive, maybe even gross looking. But you look for other ways of viewing the situation: (1) Maybe other people don't see me that way, (2) he has a weight problem himself and is projecting, (3) he is angry because he thought I had been flirting with his girlfriend, (4) a little fat doesn't matter very much to me, and (5) that comment may help me start a diet tomorrow. Some of these interpretations will serve you better than the first one. With practice we can see there are several ways of interpreting most situations, not just one.

Similarly, one can often find less personally threatening explanations of a bad event. Example: a rejected lover can believe "She/he was afraid of sex" or "He/she wouldn't like anyone for long" just as easily as "I wasn't good looking enough" or "I'm boring." More objective, "clinical" explanations may be easier to take. "I don't have friends because I don't try" hurts less than "because I'm not a likable person."

Suppose a friend one day seems cold and irritated. You think he/she is mad at you, probably because you had done something with another friend the night before or because you hadn't called him/her for a couple of days or maybe because she had heard some gossip about you. All of these thoughts are rather useless speculation. The facts are that you often do things with other friends and it is common for the two of you to not call for a couple of days. What gossip could he/she have heard, you haven't done anything unusual. Maybe he/she was just in a hurry; maybe he/she was mad at someone else. It could be a million things. Don't get carried away by your speculation. Ask him/her if you misread the situation or if you had done something to upset hem/her.

Some people are catastrophizers, always making negative interpretations, making mole hills into mountains, minor setbacks into crushing defeat, tiny slights into total war, and so on. If you are one, try thinking of the best and the worst possible outcome in a situation you are concerned about. Guess which is most likely to happen. Then observe what actually happens and see if, in the course of time, you can become more accurate in estimating what the outcome will be in many situations.

Try to understand the origin, dynamics, and validity of your harmful thinking. Ask yourself questions like,

- "Where did this harmful idea come from?"
- "Is this belief true or false? What is the evidence?"
- "When do you remember first having this harmful belief?" "How did you feel?"
- "Why did you feel (inadequate... cocky... unloved) as an adolescent?"

- "Does feeling insecure have much to do with your continuing to live at home? ...staying with the same boy/girlfriend? ...staying in the same job?"
- "What attitudes do secure people have in this situation?"
- "What am I saying differently to myself when I'm not upset in similar situations?"
- "Why does this belief exist?" (Mc Mullin (1986) says some irrational ideas help us feel safe, e.g. "most people are stupid" helps us feel smart, "you are a nerd if you don't drink" helps establish rapport with our drinking buddies, "it's my fault" helps us believe we are a good, responsible person, and so on.)

Another interesting strategy to understanding negative thinking is to imagine, for the moment, that your dire thoughts are true. Then, ask yourself, "If that were true, what would that mean to you? Why would that upset you?" Flanagan (1990) gives this example: a student in counseling was worried because his professor had criticized him and probably thinks he is a poor student. The therapist always asks the above question, "If that were true, why would that upset you?" Student: "It would mean / am a bad student, he is an expert." Therapist repeats questions. Student: "It would mean I was a failure." Therapist: same questions. Student: "It means I have to leave school." Therapist: same questions. Student: "Everyone would know I failed." Therapist: same question. Student: "It would mean I was a total failure. There would be nothing for me to do." Thus, the student's reactions to these questions imply the underlying assumptions that are so upsetting: (1) any criticism of me is right, (2) my worth is determined by success in school, (3) one person criticizes me and the world falls apart and I'm useless, (4) others will not accept my weaknesses--I must be perfect, (5) everyone must respect me, (6) if I fail in school, I will fail at everything. With this kind of thinking, it is no wonder we make mountains out of mole hills.

A similar way to discover the impossible demands you may be imposing on yourself is to ask "Why?" repeatedly (Flanagan, 1990). Example: suppose you wanted to but couldn't turn down a friend's request for a favor. Why? "Because I felt uncomfortable saying no." Why? "Because I should be helpful." Why? "Because we should all try to accommodate others." Why? "Because everyone should be happy." Why? "Because being sad wastes time and that's wrong." Why? "Because you should be accomplishing something." Why? "Because I feel guilty wasting time and my mood gets down." Why? "Well, I should be productive and in a good mood all the time." Notice all the "shoulds" in this line of reasoning that ends with a ridiculous statement.

If you can understand the ramifications of your thoughts and the true underlying problems, it will help a lot when you are developing arguments against your irrational ideas.

As with self-instructions and stress-inoculation (method #2 in chapter 11 and method #7 in chapter 12), you can prepare and

practice in advance arguments designed to counter fears, self-putdowns, anger, impossible goals, and so on. Sometimes, it is even helpful to get mad at the stupid idea that is causing you trouble. Examples: There are so many beautiful and interesting people to meet, it is really foolish to let my shyness lead to all this frustration and loneliness. It is stupid to think that the only way to be happy is to be very successful... beautiful... a real man... a perfect lover and parent... because there is so much more to a full life (and, besides, these demanding goals create many problems).

By recording in a journal how well each argument works in real situations, you can find out which ideas or views help you most to avoid upsetting thoughts. Use what works.

Instead of arguing against a pessimistic attitude, one can focus on thinking rationally and replacing negative words with positive words. For instance, we can think of ourselves as having learned to be the way we are, instead of labeling ourselves as "sick," "weak," "crazy," or "mentally ill." It requires continuous conscious effort and daily practice to make these changes. Other examples of re-labeling or reframing a negative trait (see method #1 in chapter 14):

Negative words or outlook	Positive words or outlook
Wishy-washy	Open minded, flexible
Loud mouth, egotistical	Expresses honest opinions
Sloppy, lazy	Casual, carefree, relaxed
Socially shy, scared to talk	I have an opportunity to meet people, have fun, and exchange ideas
Treated unfairly	A chance to stand up for my rights
Made a mistake	A chance to learn something. Remember, Babe Ruth struck out a record 1330 times while hitting 714 home runs.

Beyond the question of accuracy of your views, you can also question the accuracy of your assumed implications of those views. Examples: Suppose you asked someone out and he/she turned you down. There are several possible reasons for being rejected that do not have negative implications for you, e.g. he/she is interested in someone else at the moment. But let's just suppose for a moment that he/she did actually think you were a creep. You should still ask yourself, "So what?" Does he/she know much about you? No, so why give any weight to his/her superficial impression? Does that impression make you a creep? Of course not. Does that impression imply that no one will ever want to go out with you? No. Suppose you are not able to make "A's" and "B's" in chemistry and physiology. Ask yourself, "So what?" Does that mean you won't become an MD? Maybe. Does it mean that your life will be meaningless? No. In short, ask yourself, "Is this situation really so awful?" Look 10 years ahead.

Compare this "awful" situation with a serious problem, such as a relative or loved one dying, losing your sight, etc. Ask yourself, "Am I making too much out of this?"

The most effective technique may be to find a basic value you really believe in that counters the harmful irrational belief. Examples:

Contradicting value
I can't control the outcome, only how hard I try. (Inspiring stories of success through hard work might help overcome a defeatist attitude.)
My religion tells me what is right and wrong, so I'd rather be liked by God and Jesus or Mohammed than by these critical friends.
I'm a caring, interesting, intelligent person, too bad he was hung up on looks. (Reading about gratifying careers and/or second marriages might help this person turn from the past to the future.)
Being a loving person with a gratifying family life and close friends is much more important than working 10 to 12 hours a day so I can buy things.

Finally, keep in mind that the upsetting irrational ideas may no longer be conscious or may not even exist at all. For example, it seems possible that irrational ideas originally produced the unwanted emotions, but in the process of being repeated over and over in association with a specific situation, these ideas may have become abbreviated or even omitted altogether from the chain reaction of situation-ideas-emotions. In this case, the situation may elicit (condition?) the emotion directly. Nevertheless, it may be helpful to guess at what the original irrational ideas might have been and then develop a more rational outlook and plan (this is an unproven method, in contrast to desensitization). For example, one may have become shy by using self-talk like "they won't like me" or "I'm not attractive." Shyness might be gradually overcome by supportive self-talk, "I can find interesting things to talk about" and "Being a caring person will make up for my weaknesses."

The crux of this method is the recognizing, questioning, challenging, and changing each irrational idea. The new thinking is based on facts. You are your-own-scientist, checking out your own ideas. It is an unending process; rational people must constantly monitor their beliefs about the past and expectations about the future, repeatedly asking, "What is the evidence?"

After you have identified the irrational ideas underlying several of the emotions and situations described on your 3 X 5 cards, you will probably find the same kind of thinking errors showing up in several situations. Are you unduly self-condemning? Are you overly critical of others or the world? Are you perfectionistic and pushing yourself too hard? Are you bitching about the way things turn out (the laws of nature)? Are you a specialist at exaggerating the awfulness? This is valuable information about your way of thinking because it will guide you to finding more rational (factual) and constructive (encouraging) ways of thinking.

Write some supportive, rational self-talk on the right side of the 3 X 5 cards. Your arguments against your own irrational thoughts can be a few words, e.g. "Ridiculous!" or "Where's the proof?," a sentence, e.g. "People will be more impressed with how much fun I have playing ping-pong than with how well I can slam," or a complex philosophy, e.g. "My goal in life is to be a good psychologist, that is inconsistent sometimes with having fun, being popular, agreeing with important people, etc."

Refer to step 2 for rational ideas if you need to, but you must understand and believe your own self-talk that counters hurtful ideas. Your ideas and views need to be expressed in your own words; they should encourage you to face the facts, accept yourself, and be gentle with yourself and others. Method #1 will help you deal with self-critical thoughts. If you give yourself a lot of upsetting "Be Perfect" or "Hurry Up" or "Try Harder" or "Don't Be Emotional" messages, develop some "Allower" messages: It's okay to make mistakes, to take my time, to act on my feelings, to assert myself, to be average, etc. Give yourself "unconditional positive regard" by replacing the impossible "shoulds" and critical judgments with (a) recognition of your specific accomplishments and (b) the development of a workable selfimprovement plan. Examples: if you get 95% on a test, don't fret about the 5% you missed, praise yourself for the 95% you knew. If you feel terrible about breaking your diet, work out a better plan that is easier to follow and allows for mistakes.

It is not easy for an emotional self-agitator to become a self-calmer. It takes work, hours and hours of work. If you can not think of rational, self-supportive views for certain situations, talk with a friend or a counselor. Accumulate a list of the arguments and ideas that effectively reduce your negative emotions. Keep on improving the challenges to your irrational ideas; it is a life-long task.

STEP FIVE: I magine being in the upsetting situations. Talk rationally to yourself, letting the rational ideas override the irrational ideas and emotions. Continue until you feel better.

Start with a mildly disturbing situation or feeling. Say to yourself, "I know where those feelings are coming from and these emotions are too intense! I'm making too much out of this. It makes more sense to look at it this way (fill in the rational ideas from the 3 X 5 card)." It

may seem strange at first to have this intellectual argument between your irrational ideas and your rational ideas, but keep trying. The unwanted emotional response will fade away and, as that happens, your belief in the rational ideas will be strengthened. Move on to imagining situations that evoke stronger emotions. Learn to change your intense, "awful" emotional reactions to more reasonable reactions: overwhelming depression becomes sadness or regrets; rage becomes irritation or a wish that things had been different, and so on.

This procedure, called Rational-Emotive Imagery, has some similarity with self-instructions in chapter 11, desensitization in chapter 12, constructive fantasy in chapter 13, this chapter's method #1 about the internal self-critic, and also method #9 in this chapter about positive, coping attitudes.

This step provides practice at attacking irrational ideas and reducing the unwanted emotions. It is preparation for real life in which you can start telling yourself rational things as an irrational emotion begins.

STEP SIX: Anticipate emotional responses. Attack every irrational idea as it occurs. Insist on behavioral changes too. Accept what you can't change.

This method is to be applied every minute of every day; otherwise, the irrational ideas will return and gather strength. Just like the therapist does, whenever you start to feel upset, ask yourself, "What crazy idea am I telling myself now?" Insist that you think factually and rationally. You must also behave more rationally! Albert Ellis gives "homework assignments." For example, you may realize your fear of flying is irrational. That isn't enough. You have to fly--several times. You must start doing the things that have been upsetting you--getting turned down for a date, speaking up at meetings, going out without make up, getting a "C," standing up for your rights, etc.

Staying rational is a life-long preoccupation. There are many obstacles: negative views are very resistive to change; the old "do's and don'ts" are very powerful; the belief that "I will be okay "I can only reach some lofty goal" is hard to shake; the idea that "I can't change" is an enormous barrier; if new thoughts are tried out, the internal perfectionist may say, "You are messing up this new self-talk; you'll never learn; besides, it won't help much anyway." You have to keep slugging away at irrational ideas month after month. Positive self-talk has to become automatic. Logical reasoning is hard work. Many people give up before the job is done.

Time involved

Just understanding the basic idea may reduce certain irrational emotions rather quickly. Working through the above steps, however, will take several hours plus time each day to counteract the unwanted emotions as they occur and to do "homework" that contradicts the

irrational ideas. Actually, what happens is that eventually your point of view and style of thinking changes; this change requires conscious questioning of one's reasoning many times each day. As stated above, being rational requires constant vigilance every time the brain works. If you have some particularly harmful irrational ideas, it may take a few minutes of forceful arguments against those ideas occasionally for a year or more in order to change your thinking (McMullin, 1986).

Common problems

The first objection to this method is that several people insist that it is rational to want everyone to love and approve of you or to want to always be successful or to want evil to always be punished. Ellis would say, "If you want to be unhappy, go ahead believing these ridiculous ideas." Think about it this way: it would be nice if everyone were always considerate, competent, successful, and loved, but to actually expect or, more precisely, demand that these ideal conditions exist all the time is foolish. It is possible to have high aspirations and still accept failure and shortcomings when they inevitably occur.

Other problems with this method are, as discussed above, that the irrational ideas are hard to detect and reject in some cases. They may not actually exist. In addition, some strong emotions are reasonable and unavoidable, but in time the continuation of the emotion becomes irrational. Suppose you have been deceived by an unfaithful lover, it is hard to tell yourself, while experiencing intense pain, that this kind of self-serving deception is a fairly common and even rational and understandable behavior from the deceiver's viewpoint. Such logical reasoning doesn't make the pain go away. Your pain (or grief or anger) isn't unreasonable at this point; it is an inevitable emotional reaction to the loss and hurt. When does the pain-grief-anger become unreasonable--after one month? two months? three months? six months? after one year? after three years? (I say two months is enough suffering!)

Dr. R. L. Wessler (1992) of Pace University has recently accused Ellis's form of Rational-Emotive therapy of dogmatically imposing a view of the world on the patient without much consideration of why the patient sees the situation as he/she does. For instance, when a client in other forms of Cognitive Therapy says he/she couldn't pass a college course, the therapist is likely to simply suggest the client check out that expectation in reality. The Cognitive Therapist wouldn't instantly and bluntly call that expectation of failure an "irrational," crazy idea. (In this instance, the client might be right.) But when a client of a Rational-Emotional therapist says "I'd die if I didn't make all A's," the follower of Ellis would immediately challenge that idea as irrational (and actual death does seem improbable). The RET therapist's focus isn't on the patient's background that results in thinking that getting all A's is crucial; the focus is on getting the patient to see that the expectation of all A's in all circumstances is an unreasonable demand. It certainly is a dogmatic and dynamic approach for the RET therapist to say that it is unreasonable to insist

that someone must love you or that you must get an "A." But is the client actually irrational, wrong, or stupid, when he/she insists that the world must be different than it is? I think so (see next method).

The final problem is that many of us are not willing or able to do the extensive work necessary to clear up our irrational thinking. It is easy to say that professional help may be needed, but realistically if we won't clean up our own thinking, are we likely to do the work *and* pay for a therapist as well? So, what does this lack of motivation say about the effectiveness of self-change?

Whatever is is right?

Can we easily question our own thoughts? Often not. Rational-Emotive and Cognitive Therapies are professional techniques usually utilized by well trained professional therapists. However, Rational-Emotional professionals have written up their methods hundreds of times as self-help techniques. The problem is that in their practice the professional therapists can be quite directive and assertive, even bluntly and repeatedly confronting and challenging the patient's irrational ideas. The Rational Emotional therapist may tell a specific patient that his/her specific thought "is an irrational idea," "is the kind of thinking that causes depression or anger," etc. The Cognitive therapists are a bit gentler but just as specific and say "now, how can we test the validity of that idea," or "let's collect some data to see how you feel after you have such thoughts." In books these authors present arguments and cases that illustrate the harmfulness of certain general ideas but in bibliotherapy they can't zero in repeatedly on the reader's specific ideas that seem to be causing unwanted emotions. Instead, they can suggest ways to question your own reasoning and ways to look at the situation differently. But if you don't diligently think about those questions over and over, your thinking and beliefs may change very little.

For example, it is suggested that you ask yourself questions similar to these: (1) Do my thoughts or beliefs help me or cause me problems over time? (2) Do my beliefs fit with known facts and reality? (3) Is this specific belief logical—does it make sense? For example, you might want very badly to succeed, but does having that need mean you *must* succeed? No. Rational ideas should be helpful, realistic, and make sense. If your ideas (beliefs) aren't rational, then one should find ones that are.

A recent book, written by a person who claims to have had no knowledge about Rational-Emotive or Cognitive therapy, provides some techniques that challenge the kind of ideas that frequently lead to unpleasant, disturbing emotions (Byron Katie, 2002). Most of her case illustrations of applying these methods (questions to ask yourself) come from a workshop or lecture circuit where she does public interviews in which she rather assertively challenges the interviewee's beliefs and ideas, much like some therapists do. So, it is not known how effectively text-based self-questioning corrects our trouble-

causing irrational thinking. Maybe it is necessary to have an "authority" challenging our way of thinking. Anyway, here is Katie's approach:

- 1. Describe in detail the situation or aspects of a relationship that bothers you. Include such things as—Who angers or disappoints you? What don't you like about the other person? How do you want them to change...to be different? What do you need or want from them? What do you especially dislike about them? What do you want to never experience with them again? Be negative and judgmental. In other words, how are you telling yourself that things "should" or "must" be different?
- 2. Once it is clear what you think about the situation and what you want to be different, then ask these questions challenging the validity of your demands... your "shoulds" or "musts:" Is my understanding of the situation true? How can you be absolutely sure your beliefs and views of the situation are true or the only way it can be understood? Example: Suppose your spouse or your boss seems to not understand you as well as you think he/she should, so you ask yourself "Is it true he/she should understand me better?" Don't just have a knee-jerk reaction...think deeply about it. "Are you certain you have communicated well or completely to him/her?" "Is it certain that it is in his/her best interests to understand me perfectly?" "Is there some important payoff to them when they don't understand you?"
- 3. When you think things should be different but the changes just don't occur, how do you feel? What emotions do those unfulfilled thoughts or wishes trigger in you? Anger? Revenge? Tension? Self-criticism? Hopelessness or do you become determined to change the other person? Does your train of thoughts increase stress or bring calm into your life?
- 4. Picture in your mind what your life would be like if you didn't have these thoughts about how these changes really must happen. What if you were with this person and didn't have the thought that he/she should be or MUST be more understanding or different? Would things be better or worse? Would you be a different person?

As you can see, these questions are aiming at the same points as Rational-Emotional therapists, namely, you are responsible for you own upset feelings because feelings result from your thinking, especially your "shoulds" and "musts." Therefore, you need to start questioning your demands that things be different from what they are, i.e. that the world should have unfolded and must unfold the way you want it to be. This is irrational thinking, the world obeys its laws, not your wishes. If you change your thinking, you will focus on less demanding and more realistic expectations—then you will be less upset with yourself, with others, and with how life unfolds.

Katie has another mental exercise that can be helpful; she calls it "the turnaround." It is quite similar to the Gestalt technique of Go

Find the Opposite. What you do after seriously considering the questions above, is to ask yourself to consider carefully if the truth lies in other directions different from your (upsetting) thinking or beliefs. Examples: instead of believing "Julie doesn't understand me; she is mad at me and she shouldn't be," perhaps you might gain some insight by asking "Was I first mad at her?" or "Am I angry with myself because I don't understand myself? Or because I haven't made myself clear to her? Or because I can't understand why Julie feels the way she does?" Other questions: "Could it be that she actually shouldn't be understanding of me?" "Do I really have to have her understand me?" "Am I less understanding of her than I could be?" There are many turnarounds to ask. Often a little truth is found in each turnaround question. The goal is to accept whatever is going to happen, however the world unfolds, even the things you dread.

Turnarounds can be revealing, disclosing facets of your inner self and your feelings that are usually hidden. These are valuable insights. Examples: if you are thinking "she ignores me," then turn this around to think seriously about: "she likes me" or "she wants me to be more independent" or "I ignore her" or "I ignore myself" or "I am very needy and want her attention badly" or "I resent her relating with someone else" and so on. If you are thinking "John shouldn't work...drink...complain...watch TV...withdraw... so much," then ask yourself or say "John should ...do these things...," or "I like when John...does these things," or "I shouldn't... do these things," or "I like to...do these things," or "I am very critical when I do...these things," or "My mother used to bitch about these things," or "John does these things to get away from me," or "John does these things instead of doing more upsetting things," etc. This is an exercise in flexible, diverse thinking.

My experience has been that many people have a difficult time correcting their own thinking. It is no surprise that we tend to believe what we think; we do that even when we have Alzheimer's and know our thinking is frequently confused and in error. So, challenging the validity of our own thinking or beliefs which arouse unwanted emotions is a difficult task. Nevertheless, as you can see from the recent pages, many techniques have been proposed for correcting our untrue or irrational thinking. Many of these techniques are presented as easy to use and sure bets to straighten out your disturbing thoughts. Unfortunately, very few (maybe none) of these self-help methods have been carefully researched as a self-help technique. Hundreds or thousands of studies are needed to objectively evaluate the methods being sold in self-help books. We are too focused on trying to make money to do the research (see Rosen, Glasgow & Moore in Chapter 1). If you have made significant changes in your thinking resulting in a reduction of unpleasant, unwanted emotions, please write me by going to Self-Change Stories on the Table of Contents page.

Many therapists cite case after case to support this method. Certainly, Cognitive Therapy has been shown to be effective with many depressed persons. There is relatively little objective, long-term research support for cognitive approaches provided by typical therapists, however. Perhaps this is because the method is much more complex than desensitization. Perhaps because it is hard to know for sure that the research subject's thinking has really changed. Perhaps because results are delayed--it takes time to change the thinking which modifies the emotions which then result in visible changes in behavior. Perhaps because there are several "cognitive" approaches, all taking a different attack on irrationality and perceptual bias.

A study or two have found RET to be as effective as desensitization in dealing with fears; another study was inconclusive. As a self-help method (as distinguished from a therapy technique), there is very little evidence of its effectiveness. Ellis (1987) himself has observed that the effectiveness of books, including his own, "is still very limited." Some of the reasons are discussed above. On the other hand, there is a consensus among clinicians that cognitive therapy, which includes RET, is fairly effective with a variety of problems. But, it seems quite possible to me that others (e.g. a therapist) can detect our faulty thinking more adroitly than we can ourselves using written guidelines. We need extensive research.

The advantages of this method are its (1) potential speed and directness, (2) conceptual simplicity, and (3) applicability to almost every emotion. There are no known dangers when attacking your own irrational ideas, but one might expect an argumentative, abrasive Rational-Emotional therapist to occasionally produce excessive stress and a "casualty."

Recommended references

Note--beyond the general references cited above, there are Rational-Emotive or Cognitive books that specialize in depression, anger, procrastination, relationships and many other areas. See the specific chapters of interest. Also there has been a new wave of books addressing harmful specific beliefs and ideas, such as pessimism (McKay & Fanning, 1991; Lazarus, Lazarus & Fay, 1993; McGinnis, 1990; Seligman, 1991).

These are the better books using some of the RET and cognitive therapy ideas: Burns, D. (1980); Butler, P. E. (1981); Dyer, W. (1976); Ellis, A. (1985b, 1987), Ellis, A. & Harper, R. A. (1975a); Freeman, A. & DeWolf, R. (1989) for overcoming regrets; Flanagan, C. M. (1990); Hauck, P. A. (1973, 1974, 1975); McMullin, R. E. (1986). The most recent good references are Young & Klosko (1993), Sills, J. (1993), McKay & Dinkmeyer (1994), Padesky & Greenberger (1995) and Greenberger & Padesky (1995). Miller (1995) takes a little different approach, he urges us to be happy with what we have.

Determinism



Determinism: accepting all behavior, thoughts, and feelings as being the inevitable--lawful--outcome of complex psychological laws describing cause and effect relationships in human behavior. Understanding the causes of any behavior helps us accept it.

The ideas of free will, determinism, personal choice, moral responsibility, and scientific prediction are old ideas, but in this century they have not been discussed seriously. Too bad, because we need a much clearer view of reality. Sappington (1990) believes some interest is being revived. He believes free will can be compatible with science. So do I.

A recent publication by Bruce Waller (1999) is a clear, readable, convincing discussion of "will power" and the sense of personal responsibility that accompanies the notions of personal freedom and choice. Free will, as most people think of it, is a term describing the vague, mysterious process by which we come to some decision about what to do or think. While we have no way to see how our mind comes to any given decision, in the case of "free will" it does seem to us as though decision-making, while guided by some of our thoughts, is a rather autonomous and sometimes almost magical process. "Our" decisions certainly seem to come out of our head and often seem only distantly connected to outside or historical causes or influences. No wonder choices and decisions are assumed to be our responsibility. But the question is: Are we totally responsible or are many complex uncontrollable and often unknown factors--inside and outside of us-involved with what merely seem to be our "free choices?"

Waller says one reason for a culture keeping the concept of "free will," a common notion which has never been scientifically explained, is so society (and each of us) can hold the actor "morally responsible" for his/her actions. Our system of punitive control of bad behavior is mostly built on this assumption. We think: the murderer deserves to die. The rapist should be severely punished. The drug dealer and chronic criminal should just be locked up, perhaps forever.

Moreover, we think the person who doesn't "help himself" deserves what he gets. The drunk who refuses treatment is responsible for his behavior; he is "weak willed" or wants to drink and fall in the gutter. The 15-year-old girl who becomes promiscuous and then pregnant "should have known better" and deserves to be a poor, uneducated, ostracized mother. The abused woman, who knows there is shelter and help available but stays with her abuser, is "making her own choice" and is "morally responsible" for her own pitiful condition. The unmotivated worker or student is "lazy" and has to assume responsibility for his/her being fired or failed. They are getting their

"just rewards." The anxious person who has lots of physical problems the doctor can't understand is "neurotic" or "sick" or "crazy" or "all messed up." Even the psychotic homeless person sleeping under cardboard on the street is assumed to be to blame for his/her condition, at least "no one else is to blame!" Our explanatory labels given to these people convey no deep understanding of the origin of their problems. Our thinking simply uses "free will" to blame the victims.

Waller also points out that many Behaviorists believe that "free will" and "moral responsibility" are intellectual cop outs, i.e. convenient and easy excuses for not looking deeper into the person's history--the environmental causes--for understanding. Why would we do that? If we can pin the responsibility on the victim, we can quickly dismiss the importance of unequal education, wealth, health, trauma, child care, social-family conditions, etc. If the immoral, addicted, criminal, incompetent, emotionally upset, and psychologically disturbed are "responsible," then why bother with exploring their history/environment/thought processes to understand what has happened to them? Sounds like a mind-set to prolong ignorance to me.

Although society assigns undue responsibility to the actor (often a victim), relatively little research has been supported to enhance the control an individual might have over his/her behavior. As discussed in chapter 1, how many schools or colleges offer courses in self-direction or self-control or self-help? These skills could be taught to everyone. But once we start thinking in terms of teaching coping skills, the concept of "free will" loses some of its power to blame the actor. This is because as we teach self-control to others it becomes more and more obvious that outside-the-actor factors (environmental, educational, and historical) have influenced how every human being behaves. Consequently, assigning "moral responsibility" exclusively to the individual becomes harder and harder to do.

Research has studied why some people are industrious and others are lethargic. The results included interesting concepts: "learned industriousness" and "learned helplessness." These traits turn out to be clearly the outcome of the individual's reinforcement history, often occurring in early childhood, and not the result of some innate trait, not just a character flaw, not intentional decisions, and not "free will." The lethargic ("lazy") or oppositional ("argumentative") person is certainly not "morally responsible" for how he/she was rewarded and dealt with as a child.

In short, the evidence is weak for the belief that "free will" is largely responsible for what we do. If we don't have "free will," then we aren't totally "morally responsible" for what we do (but maybe we are partly responsible). Similarly, we should question the beliefs in a "just world," that everyone gets his/her "just deserts," and that everyone has access to a level playing field. All these beliefs may be

convenient delusions for the advantaged and the successful, who want to avoid responsibility for making it a better world.

Waller's article focused primarily on the philosophical and social justice implications of believing in "free will." While that is very important for a society, my focus in this section is on the personal use of thinking as a determinist in terms of self-acceptance and tolerance of others.

Everything has its causes. Things don't happen by magic. According to determinism, there is nothing that "just happens," no "accidents" without a cause, no arbitrary divine intervention (or, at least, very rarely), no unavoidable fate, no mystical "free will" and no predetermined destiny. Furthermore, all events or actions are lawful, i.e. based on universal, ever present cause and effect relationships between antecedents (the past) and outcomes (the present). Gravitational pull is lawful, as is a rocket engine to counteract gravity. There are reasons, i.e. it is expected or "lawful," for an acorn to become an oak, not a pine tree. Likewise, in human behavior, it is predictable, presumably based on complex "laws," that most people will seek love, that behavior followed immediately by a reward tends to be repeated (called the law of effect), that frustration arouses a response (aggression, assertiveness, passive-aggressiveness or whatever), that unpleasant experiences tend to be repressed or suppressed, that negative self-evaluations are related to low selfesteem, that most humans can learn, with knowledge and training, to control their future to some extent, etc. Thus, life is "lawful."

All scientific efforts attempt to discover and understand "laws"-basic dependable cause and effect relationships. If there were no order (laws) in the universe, then there would be nothing to learn (except that nothing is stable and, thus, understandable). The opposite seems to be true; every event has a cause and this cause-effect connection is potentially understandable. I'm not saying we scientists understand everything right now (far from it) nor that we will eventually be able to predict all behavior. That's nonsense. Yet, I have a belief that we will be able to understand and control many of our own behaviors in 1000 years. It is our doubts about this matter that causes our reluctance to earnestly search for and use scientific knowledge about the laws of human behavior. Our ignorance about behavior keeps us preparing for and fighting wars; suffering hunger, preventable illness, and ignorance; making poor choices about careers, marriage partners, child rearing; having many avoidable emotional problems; etc. In short, discovering "laws" through wisdom and science, and using laws to improve the human condition is, I believe, the great hope for the future. Knowing psychological laws does not require us to be super smart; it is just understanding what's happening.

Much human behavior is unquestionably very complex, but it is reasonable to assume that all behavior is potentially understandable, i.e. a consistent, logical, to-be-expected outcome resulting from many causes. One way of looking at this is to say, "If I knew all the laws that

are influencing your behavior, I would understand you perfectly. I would see that *given* your genes and physical condition, *given* the effects of past events and your memory (perhaps distorted) of past experiences, and *given* your view of the present situation, I would do exactly what you are doing, no matter how saintly or how evil. "If true, that is an awesome statement or belief.

If a person can learn to think this way, i.e. that all human feelings and actions are caused by psychological laws, then all behavior becomes, in a sense, "acceptable" because it is, at the moment, unavoidably lawful. The truth is everything is lawful, so far as science knows. Thus, all behavior, yours and everyone's, is the natural, inevitable outcome of the existing causes. No other outcome was possible given the circumstances (causes and laws). Such an attitude leads logically to tolerance of yourself and others --of all that has happened in the past. Moreover, a deterministic orientation offers hope that scientists and other careful observers, including you, will discover more and more useful knowledge ("laws") for changing the future. Accept yesterday, influence tomorrow.

A great deal of benefit can result from analyzing in depth the causes of some action--called causal attribution--and/or from changing one's views of the causes. Examples: rape victims can be helped to see the situation realistically and press charges, interpersonal conflicts can be reduced easier if the reasons for each side's position are understood, fighting couples can benefit from seeing the causes as external and temporary (not because the partner is an incurable jerk), and self-esteem can be raised if one can learn to feel personally responsible for many successes, capable of improving, and not responsible for all our failures (Baron & Byrne, 1987).

Determinism has been mentioned already in "the helping philosophy" in chapter 3, in the section on overcoming guilt in chapter 6, and briefly in the list of methods for reducing anger in chapter 7. Changing how one explains one's failures is important in coping with depression (chapter 6) and a poor self-concept (method #1 above).

Purposes

- The last method helped us recognize our irrational thinking. Determinism is rational thinking, which can be used to replace harmful irrational ideas. Determinism replaces "awfulizing" and "musturbation" (see method #3). Understanding the causes of any upsetting event is a big step towards accepting and adjusting to that event.
- Most of us have pet peeves--different kinds of behaviors, attitudes, personalities, and circumstances that bother or upset us. Many of us are deeply disturbed by how we were treated by parents, siblings, peers, bosses, etc. Adopting a deterministic attitude or philosophy will help us accept everything that has happened--it was lawful, not awful. You may, of course, be able

- to change some things in the future, but whatever occurs, in the past or future for good or bad, is lawful.
- Most of us don't like some things about ourselves, as discussed in method #1 above. Understanding and accepting that there were causes for whatever we have done should reduce excessive guilt (or pride) or self-criticism, without reducing our drive to do better in the future. Moreover, developing a selfaccepting way of thinking (credit for the good, less fault for the bad) can help raise low self-esteem.
- Viewing behavior in this deterministic way may make it crystal clear to everyone that useful knowledge or laws based on careful observations are needed to solve many problems. That may be the first step towards becoming a successful self-helper (and a truly rational or civilized science-oriented society).

Steps

STEP ONE: Learn to think like a determinist. Think of all behavior as caused and lawful. Discover the causes. (This is a long, rather deep and tiresome discussion of determinism--stick with it. It is not easy to change how we see the world.)

The ideal determinist doesn't just look for causes. If that were the case, the person always blaming others or the paranoid who feels persecuted by someone would be a super determinist. One ideally will search for the true causes by testing one's hunches. Psychology may be the only discipline in which the student has a lot of false beliefs about human behavior to unlearn as well as learning a lot of new things about the causes of behavior. Throughout our lives we are bombarded with unsubstantiated or just plain wrong beliefs: boys should be different from girls, people get what they deserve in this world, you can do anything you set your mind to do, self-change is just a matter of setting goals for yourself, there will always be poor people, masturbation is bad, you have to be thin to be beautiful, redheads are hot-headed, the mentally ill are dangerous, men should earn an income and women take care of the house, and on and on. Each of those beliefs had their causes, i.e. it was/is "lawful" to believe those false beliefs, but it is wiser to question the beliefs, to value seeking the truth. All too frequently we do not question the beliefs passed on to us. A determinist, recognizing the value of truly understanding the laws of behavior, would constantly question his/her understanding of the causes of any thought, emotion, or action. He/she would recognize our current level of ignorance about human behavior, the degree of brainwashing done by society and religion, and the need for bold exploration into the true (proven) causes of everything. Here's an example.

Suppose we humans are capable of learning to live justly and lovingly with every other person on earth. That is, assume that the necessary knowledge will eventually become available and we are

capable of acquiring and using that knowledge to interact considerately with everyone. In the mean time, are we "free" as long as we do not have and use that knowledge? Some people say "no" (Williams, 1992), to live a lie or to live in ignorance is to lose our freedom. Clearly, to be controlled by foolish emotions or false beliefs is to be enslaved by ignorance, but we are not yet knowledgeable enough to be free to live justly and considerately. We don't yet have the knowledge needed to assess what is fair nor the self-control skills to do what is just. Yet, our ignorance, while regrettable, is understandable and lawful. In short, while a hopeful, thoughtful determinist would be working hard to find the knowledge needed to be a kind person, a hopeless, unthinking, prejudiced, or hostile person is still "lawful." The latter just hasn't yet learned to value, seek, and use knowledge for better relationships.

My experience with students has taught me that there are several common misconceptions about determinism. Some are obvious errors, but a clarification is needed. For instance, the "laws" made by Congress or state legislatures are entirely different from "psychological laws." The laws of behavior or of physics *exist*, they can't be written by lawyers or challenged by courts or broken or changed by anyone. The laws of behavior determine how we act and feel in specific circumstances, just as the laws of physics determine how a rocket might go to the moon.

The most common confusion by students is between determin ism, a way of viewing the world, and determination, a motivated state or a willingness to work hard for some goal. A determinist may or may not be hard working. Being lazy or indifferent is just as determined by psychological laws as being highly motivated. These concepts are confused merely because the words sound similar.

Perhaps the major objection to determinism rests on another misunderstanding, namely, each individual usually feels that he/she makes spontaneous choices and uses will power and, thus, is "free." Philosophers have debated these issues at length. No doubt we make choices--often making different choices or decisions from what we have made before. But making choices does not disprove determinism. Perhaps I can illustrate this point. Suppose a friend told you he had decided to go into engineering and that statement aroused anxiety in you about your own indecision concerning your educational and career choices. Your anxiety might then motivate you to find a book to read about decision-making and career choices. As you read and think about your future career, you may decide to take some tests, visit and observe persons in certain occupations, take certain introductory classes in interesting disciplines, talk to a counselor, read more books, etc. After weeks or months you might decide on a life work. It seems to you that you freely made the career choice, indeed, you did in the sense that no one else told you what to do. However, although there were very complex causes for each of those decisions, the process was lawful and totally understandable. You never once made a choice or acted in a way that was uncaused or defied the laws of behavior. Even if you give up and say "this career planning is too much work" or "too

confusing," that too is a lawful decision based on your past experience, your self-concept, your calculation of the consequences, your tired or frustrated feelings, your inclinations to deny the problem, etc., etc. Thus, there are understandable reasons and laws for both careful, wise choices and for impulsive, foolish decisions. So, the determinist would say that whatever choice we make would have to be lawful at that moment (we might change our mind in a few seconds, though). The concept of free choice is probably more of an illusion than an act without a cause. We are not free to be unlawful.

To many people, determinism and thinking of everything in terms of cause and effect relationships seems like it would restrict their freedom, maybe even imply predestination. We value freedom; we want to be free of control by others or circumstances or even fate. First of all, it should be helpful to distinguish between two aspects of freedom: (a) how wide a range of opportunities are provided by your family, your education or employer, your religion, your government, your friends, your abilities, your conscience, your economic situation, your social customs, your awareness of the possibilities, and so on? This is what most politicians are referring to when they speak of "freedom." There is another meaning: (b) how possible is it to think or act in ways that are contrary to the laws of human behavior? The determinist would say, "No possibility! Can water flow up hill?" As illustrated by the career decision process in the last paragraph, when any behavior occurs, the determinist assumes that it is caused, that it is lawful (the to-be-expected, inevitable outcome of the causes existing at that moment). Remember, determinism doesn't rule out making bad choices, acting impulsively, freezing up, becoming psychotic or anything else that is lawful. Determinism doesn't restrict your options (except you can't do things that are impossible or unlawful), but at any one moment only one choice or action is lawful. A moment later another choice might be lawful if you thought of another factor or started feeling differently about one of the options.

It seems like you have more freedom if you have many options and lots of self-control. Some people can see only one solution to a problem; some people think they can do very little or nothing to improve their situation. Yet, humans are so capable and there are so many possible solutions to most problems that there are usually many solutions. The question is: how many solutions do you consider? This influences your final choice of what to do, although your choice, either simple or complex, is determined by the causes and effects operating in your head at that instant. We are "free" in the sense that we can know and use the laws of behavior to change ourselves, to learn more about the situation or self-help, to see more options, to view the situation differently, to change our "minds," expectations, emotions, and attitudes, to try a new approach, etc. Our mental activity becomes another cause of our behavior or feelings, sometimes the dominant cause. Our mind creates our freedom (within the limits of what is lawful). This is not always a conscious decision-making process, our minds will often change without any effort on our part because the interplay among the myriad of laws is constantly changing--we see the situation differently, our feelings change, we become interested in

something else, etc., etc. This is lawful too. All our choices and changes, whether conscious, wise, quick, uninformed, emotional, careful, or otherwise, could clearly be caused by environmental and mental-emotional factors and, thus, lawfully determined. There is no magic.

Our ideas about freedom are fuzzy in other ways too. Examples: if you act very impulsively, is that freedom or being a slave to the whims of the moment? If you prefer to "do what you feel like doing" without much thought, is that freedom or being unthinking? If you do not have the decision-making skills or the knowledge to make wise choices, is that freedom or ignorance? If you are so upset or so in love that you can't make good judgments, is that freedom or dominated by your emotions? If you feel compelled to carefully weigh the pros and cons of several alternative solutions, is that freedom or compulsivity? The notion of a freely made decision seems unclear. Williams (1992) contends that we are not really free if we do not know the truth, if we are living a lie. Examples: if you are facing a solvable problem but don't know the solution, you are not "free" to exercise your potential. If you are dominated by an unreasonable emotion, e.g. dependency, you are not "free" to know the truth about your feelings and about how to become independent. If you have false views of the laws governing all behavior (e.g. the role of chance or of God) or false views of others or groups of others (based on race, religion, nationality, sex, sexual orientation, being on welfare, etc.), you are not "free" because you are attempting to live on the basis of a false reality. If your relationship with your spouse is not as you see it, e.g. they may not have been faithful, you are living an illusion and not "free" to see and deal with reality. Other writers even go further and maintain that freedom involves considering others and "the greatest good for all," not just selfishly acting in one's own best interest.

In contrast with Williams and the hermeneutic-social constructionist tradition (insisting that only realistic and moral choices are "free"), I still believe we humans are often "determined" to do stupid, mean, immoral things, because these acts are lawful in our circumstances and from our psychological history. With the wise use of these same laws, however, I believe we are "free" to become, i.e. capable of becoming, smart, kind, and moral. You can see that there are many different notions about the simple-sounding concept of freedom.

Regardless of how we define freedom, determinism is still a tenable notion for describing everything that happens. And, how do we explain the existence of these laws of behavior (or physics)? Is it merely "the nature of things?" If so, what a miracle! Is it the work of God? If so, what a miracle! We don't know why the laws exist, only that they do.

"Will power" is another poorly understood concept. It is not calling on some special power or an unexplainable force to enable you to achieve some desired goal. It is merely an understandable, straight-

forward but maybe-unusual-for-you concentration of effort to reach a goal. We think of ourselves as being in control when we make a special effort on a project, and we are, but there isn't any magic involved in increasing our motivation to overcome the temptations or difficulties we face. There are lawful reasons or causes (usable self-help methods) for these surges of "determination," e.g. we may have increased our motivation by thinking about the importance of the project, by visualizing the possibility and consequences of failure, by confronting our despicable lack of commitment, etc.

Clearly, we humans do change our minds and behavior frequently which makes it seem to us as if we are in control, that we merely "will" or intend our actions. I think we do change but entirely in accordance with the laws of behavior set in motion by our genetic and experiential background, our perspective, and the situation we are in. We don't just whimsically decide what course of action to take, without any compliance with the laws of behavior. In fact, there is no evidence that any of our thoughts or decisions or self-instructions are unlawful or without necessary and sufficient causes. We certainly act on our own "volition," i.e. we make decisions (both consciously and unconsciously) about what to do and act on those decisions. But our volition itself is caused, it's lawful too. Our "will" isn't totally free; we can't instantly will ourselves to do just anything (from all possible behavioral choices); what we will ourselves to do certainly isn't accidental; the neurons in our brain leading to thoughts and actions are lawful; our thoughts, intentions, hopes, and our "will" have their causes. These mental events only seem to occur by magic because we are ignorant of their causes. No doubt our thoughts and feelings affect other thoughts and feelings and actions. Thus, we can change our own minds, thoughts change thoughts, i.e. we can sometimes come to see things differently (that often also happens without any effort on our part). But when minds change, it is likely to be due to receiving new internal or external inputs or arriving at different viewpoints.

Most of us have no problem thinking of physical objects, such as an airplane, as operating according to the laws of physics. We know there are reasons why a plane flies; we have learned it isn't magic. Likewise, we don't get mad at grass because it grows higher than three inches, because it is lawful for grass to grow. Likewise, we believe there are causes for an animal to build a nest, mate, attack and so on. We don't assume the animal simply "willed" those actions. But when we get to human behavior, we tend to think of actions as being caused by the person's intentions, i.e. "he/she meant to do it" or "he/she is that kind of person," rather than thinking in terms of how the behavior was genetic, learned from a model, satisfying certain needs, yielding payoffs, influenced by our thinking and view of the situation and so on. As discussed in method #8 also, this is called the fundamental attribution error: believing internal factors, such as motives, personality traits, and abilities, are more responsible than environmental factors in causing another person's behavior (Baron & Byrne, 1987). We get mad at people who are late because we think they "don't give a damn about us" or "don't have their stuff together." Children disobeying us drive us up a wall because we think they are

challenging or defying us. [Note: these irritating personality characteristics of others may be true, but the characteristics have their causes. Defiance isn't just a "mean streak," it has a history.] We frequently neglect to investigate all the reasons, internal *and*external, why people do things, such as be late or break rules. Analyzing all the causes is hard work; thus, most of the time we will accept a quick and easy explanation of a behavior. Only when the behavior of others seems strange or upsets us (or we are responding empathically) will we work very hard to understand it (Hansen, 1980; Hastie, 1984). Knowing all or most of the causes of others' behavior (to the same extent we know why planes fly) might allay our emotional reactions (see method #1 in chapter 15) to them.

By the way, we tend to be far more generous in our self-explanations than in our attributions about others. The environment seems to us to be more the cause of our behavior than our internal motives, traits, and thoughts. You fall because you are clumsy; I fall because the floor is slick (Fiske & Taylor, 1984). However, this is not true when we are successful; we tend to take credit for our successes; it is our cleverness or drive or charm. Unless we are very self-critical, external factors--a hard task, bad luck, someone else messed up--are often blamed for our failures. This is called a self-serving bias (Miller & Ross, 1975).

We misunderstand the causes of our behavior in many ways (see method #8). Examples: as discussed in chapter 4, extrinsic rewards may conceal from us and reduce the intrinsic satisfaction in an activity. We may sometimes be surprised to discover our own attitude or feeling by observing our behavior, e.g. we may feel much more discomfort than we had expected when interacting with a homosexual. Just as Daryl Bem (1972) believes we learn about ourselves by noting what we do, it is also possible that we deceive ourselves in the same way, e.g. "I have no homosexual tendencies because I have had no homosexual contacts." Finally, an interesting study by Feather (1985) demonstrates that our explanations of behavior clearly reflect our values and attitudes, e.g. conservatives explain unemployment in terms of laziness while liberals think in terms of sluggish economy. In short, there are many factors that cause us to overlook or minimize certain causes of behavior. If we are going to understand behavior, such as unemployment, we had better study all the causes, including lack of training, laziness, poverty, discrimination, self-concept, economic conditions, and many more.

Some of our behavior is thought to be caused by factors beyond our control; thus, we have the plea in court of innocent on the grounds of insanity. It is an old notion that a person might have an "uncontrollable impulse," e.g. when finding one's spouse in bed with someone else. In the 60's and early 70's our society became more liberal, believing that a person wasn't responsible for what he/she did under the influence of alcohol or drugs, during a psychotic break, when brainwashed or under great emotional pressure. More recently we have become more conservative again, especially in terms of refusing

to excuse a person acting under the influence of drugs or alcohol. Our society has not yet dealt with the problem of determinism, namely, that *all* behavior has its necessary and sufficient causes and could not have been different under the circumstances at that moment. Punishment as a deterrent makes sense to a determinist, but punishment as retribution does not.

Another issue our society hasn't dealt with is unconsciously motivated behavior. We humans do many things we don't want to do and don't even understand. Can a person be held responsible for his/her unconscious? It seems unreasonable. Thus, a society seems to have a choice between (a) denying there are unconscious causes (which would be absurd) or (b) refusing to hold a person responsible for unconsciously caused acts (which our society is reluctant to do). So, we refuse to think about it very much.

B. F. Skinner's (1972) book, *Beyond Freedom and Dignity*, Berofsky's (1971), *Determinism*, and Rychlak's (1979), *Discovering Free Will and Personal Responsibility*, are good references in this area. I personally find determinism very helpful and a satisfying way to look at life. I have never seen any behavior, no matter how unusual or strange, that clearly could not have been caused by behavioral laws. Besides, what are the alternatives? You could assume that cause and effect relationships are far too complex for us humans to understand, that most things happen by accident, not lawfully, that mysterious forces unknown to humans determine what we do, and so on. None seem too hopeful.

STEP TWO: List disturbing situations. Recognize that you would do what others have done, if you were them and had their past and environment. Accept your own past behavior.

Your task, when anything upsets you, is to reduce the stress by understanding why it happened. This is similar to method #7, stress inoculation, in chapter 12. To begin with, you might consider what situations and behaviors you would like to be more tolerant about, more accepting of, and less disturbed by. For example, you may be upset by a critical and hurtful parent, by a racially prejudiced relative or friend, by a critical and demanding teacher, by an unwed mother on welfare, by a dishonest and power-seeking politician, by an illegal drug pusher who sells to teenagers, or by your own internal critic which calls you stupid, weak, and naive. There are innumerable situations that bother us, i.e. where we are basically saying "it shouldn't be this way" or "It's going to be awful." But, remember, whatever has happened is lawful.

Next, it may be quite helpful to list all the causes you can think of for these upsetting situations and behaviors. Method #1 (everything is true of me) in chapter 15 may be helpful at this point. Also, note how determinism compliments methods #1 and #3 in this chapter. The idea is to understand fully the behavior. You may want to talk to other people involved and/or even to uninvolved wise persons to get their

ideas about the reasons and history underlying the behavior that concerns you. One approach is to understand the causes so well that you can accept the behavior as lawful. Another approach is to simply assume--have faith--that there are necessary and sufficient (but unknown) causes for all behavior, enabling you to tolerate it. In this case, you don't have to laboriously search out all the precise reasons and history of an irritating behavior (which is likely to be impossible anyway). You just accept it.

Please do not misunderstand this point. I am *not* advocating accepting all behavior as being moral or desirable or commendable. I am just saying all behavior, good and bad, is caused and, thus, something we must accept. Value and moral judgments are also lawful. So, you may consider your own or someone else's lawful behavior to be mean, cruel, selfish, gross, immoral, or bad in many ways. In which case, it would be morally proper to do all you can to prevent the bad behavior from continuing. However, you would remain tolerant of yourself or someone else who was obeying the psychological laws that produced the bad behavior. However, if behavior is the natural, inevitable outcome of its causes, how can you dislike or blame the person for what he/she does? Over and over, convince yourself that "they did what they had to do... according to the laws of behavior" and that "but for the grace of God, there I go..." This is the key to tolerance and self-acceptance.

STEP THREE: On a moment by moment basis you can learn to accept behavior as lawful, not awful.

After accepting your long-standing pet-peeves and self-criticism, you need to focus on your day to day thoughts, expectations, and feelings which are still upsetting you. The procedure is the same; look for the causes, understand the behavior, persuade yourself that the action has its causes and is lawful. Your hopes and ideals about what is a "good person" may not change, but you can give up your irrational demands that things always turn out the way you want. You can challenge your "shoulds" and "musts," your insistence that you, others, and the world should have been different. Instead of getting upset because things that haven't worked out as you wanted them to, rely on applying your knowledge of behavior in the future so you can get closer to your goals and ideals.

STEP FOUR: Use the faith you have in the lawfulness of behavior to plan ways of achieving your goals. You become a confident self-helper.

The greatest barrier to improving is the lack of hope that one can change. Knowing that behavior is a result of cause and effect relationships and not the result of wishing or luck or fate should encourage us to study behavior and try out different approaches.

I hope you now see that thinking like a **determinist** gives us tolerance and hope



Time involved

It will only take you an hour or so to absorb the idea of determinism and do some additional reading. It will probably take weeks of practice before you have revised your thinking and accepted all events in the world as lawful. Tolerance of all others and of ourselves, coupled with a dedication to changing whatever is wrong, does not come easy. Our society is saturated with criticism, cynicism, and intolerance. We probably have blamed and resented personal traits and evil intentions all our lives. We are not even "understanding" of our own children and our lovers; we are far from accepting the behavior of strangers and our enemies as being determined by lawful cause-and-effect relationships. I think it may take decades for the majority of us to adopt determinism, even though it is reality. But you can to think like a determinist (or a scientist) and receive the benefits any time.

Common problems

First, the causes of human actions are *very* complex and, thus, hard to observe and understand. It is certain that no ordinary behavior of a human being (not even a two minute conversation) has ever been completely understood, i.e. all the causes of all behavior, thoughts, and feelings known and understood. In light of this, it is amazing that humans constantly and quickly develop simple explanations for why people acted the way they did or why events occurred as they did. Needing an explanation seems to be an innate feature of our brain, which served us well for millions of years by quickly understanding we were under attack and devising a way to survive (see method #8). The quick witted survived. There were few evolutionary payoffs for the early human who tried to understand his/her attacker's psychological background and motives (they were killed). It is hard to overcome your biological heritage.

Some of us are much more confident than others of our instant, superficial explanations of behavior. Thus, people, who are comfortable with their instant analyses, have firm resistance to thinking like a determinist. More importantly, many of our explanations of human behavior are determined by our strong feelings towards the other person. If we are angry or hurt, we see the other person's actions caused by mean and self-serving motives. If we are needy or attracted to the person, we see their behavior caused by desirable motives and factors. These aren't valid, objective, comprehensive explanations of human behavior; they are more likely

to be irrational manifestations of our own irrational emotions. Another example: the person who is convinced that his/her marital problems are caused by the spouse being terribly self-centered may be reluctant to give up that over-simplified, unsympathetic, angry explanation. If the person truly explored the complex causes for the spouse's self-centeredness, he/she might find the spouse not only blameless but the victim of a long, painful history which necessitated self-centeredness or self-protection from harm. We have to be willing to give up much of our strong negative emotions before we can become a thoughtful, tolerant determinist. In today's culture, we thrive on our resentment of others; that requires us to stay ignorant and justifies our selfishness.

Three hundred years ago Leibnitz, a German philosopher, taught, "Man should accept his lot, and not try to change it." Some people still believe we are helpless. Similarly, others believe that determinism means predestination or fatalism--that specific events in the future are inevitable and that no one should feel responsible for their future behavior. More rot. The determinist rejects all of these ideas. Consider this: Is it already predetermined whether or not we will travel to Mars and cure cancer or Aids? No, of course not, according to the determinist (but the fatalist would say yes). Laws don't fix the future; in fact, laws and knowledge must be *used to change the future*, i.e. to develop space travel and cures. How wisely laws are used determines how well future problems are handled. Therefore, each of us assumes great responsibility for what is going to happen, especially in our own lives.

This responsibility for improving the future is complicated by the fact that we can only know the past and the present. We have little or no way of gauging with certainty how much influence we are having or could have on the future. As we try to influence human events, we have to wait for the future moment that concerns us to occur in order to know if we were successful. Knowledge of the laws of behavior must be applied to a future time or event--an unforeseeable event. Thus, an intelligent user of knowledge is forced to always focus on the future and to use hindsight: what did I do one minute ago or yesterday or last year that influenced what just happened? Our answers to such questions are then used in another effort to influence the future. Thus, the thoughtful life is a series of informal experiments. We can only learn more about the laws of behavior by observing what interventions seemed to lead to what outcomes in the past, but the practical application of knowledge only involves trying to change a future event. The effectiveness of an effort to influence the future can only be known when that future time becomes the present.

In short, the determinist, who wants to be a practical activist and effective at influencing the present and maybe the future, must be future oriented and both *understand* and *use* laws ahead of time, maybe seconds ahead of time or maybe years ahead of time. The true determinist accepts, enjoys, and learns from the past and the present, observing the cause and effect relationships, and actually trying to use the laws in order to change future moments when they arrive in the

present. This gives any person who tries to be a determinist an awesome responsibility, much as Reality Therapy does when such a therapist asks the client, "What do you want to happen in your life?" and "What do you need to do to make it happen?"

Effectiveness, advantages and dangers

There is no proof that all behavior is lawfully determined; determinism is a faith, a reasonable assumption. However, human life is so complex and chaotic that many or most future events can not be controlled with certainty. There are no known studies of the impact of starting to think like a determinist. Casual observation suggests that psychology students, steeped in the science of behavior, become more and more accepting of their clients' aberrant or even cruel behavior as they become more knowledgeable and empathic. They see the undesirable behavior as less despicable. As we learn to see the world the way another person sees it, we understand the other person better. (I know of no evidence, however, that psychologists are unusually empathic with spouses, bosses, persons who rip them off, politicians, competitors or critics; perhaps an empathic attitude is situation specific. Indeed, I am bothered by my own greater empathy for a murderer or drug dealer than for a self-serving, arrogant administrator.) Thinking empathically or like a determinist may not generalize easily from one situation to another, but, at least, it seems to be possible.

The advantages of determinism are spelled out above. This belief is not dangerous, unless you abhor the idea that humans operate lawfully like all the rest of the universe.

Trying a New Lifestyle



Trying a new life style (Fixed Role Therapy)

A generation ago, George Kelly (1963) observed that people have certain views and explanations of what is happening in their lives. Thus, every one is a scientist; we all have theories about the world. Those theories (Kelly's "constructs") change as we get new information, as we see things happening differently than we thought they would. The cute 17-year-old who believes her Dad will buy her a nice car, if she begs him for it, has to change her mind (her construct about Dad being a soft touch and in her control) when he says, "No, but I'll help you get a job so you can buy one."

We keep our ideas that predict events (how Dad will react) and revise our ideas that don't fit reality. Problems, in general, result from

some weakness in our theories, i.e. being unable to foresee events and how to handle them. Kelly also thought emotions resulted from a change in our personal constructs or from a need to change our ideas about the world. For example, fear results when we suspect that our ideas are not adequate to handle an upcoming event, anger is when we discover some of our ideas and expectations are clearly wrong, happiness and complacency is when our constructs (explanations and theories) seem to fit what is happening in our world. Kelly did not advocate changing emotions or behavior by directly changing our ideas, as in Rational-Emotive therapy (method #3), but rather more indirectly by doing the opposite: change one's ideas (constructs or explanations) by experiencing new events in the world, i.e. by changing one's behavior.

In short, Kelly treated clients by helping them gain a better grasp of psychology and the world so they can live their own lives better. There is no one ideal personality or optimal adjustment to strive for; there is a constant changing of one's thinking to better anticipate the future and handle it. We, as scientists, learn new and better constructs (theories) by having new experiences and we have new experiences by behaving differently. Thus, Kelly suggested that therapists encourage clients to try new ways of coping with life (and new ways of viewing themselves) by acting out new roles or life-styles for at least two weeks. The therapist would write a script--a role description--for the patient. This new role would be radically different from the person's current behavior, i.e. both an improvement and in keeping with the person's basic needs and values.

As a result of being "a different person" for two weeks, patients frequently discovered new ways of handling situations which they adopted. In fact, occasionally a patient reported that the new role, after a couple weeks of practice, seemed as though it was their real self, perhaps a personality trait they had kept hidden and was only dimly aware of for many years.

Purposes

- To find better and more satisfying ways of behaving, interacting and thinking about oneself.
- To test out different life-styles in real life situations to see how well they work for you.
- To improve one's self-concept.

Steps

STEP ONE: Write a description of a new way of being or interacting--a new life style.

Design a new you. Consider your current weaknesses, frustrations, values, goals, strengths and opportunities, then prescribe several new ways of behaving for yourself. The new role prescription can be a

radical, overall revision or limited to a specific area, but it should be a clear change in behavior you are willing to try out.

Let's consider an illustration: Suppose you tend to be overly aggressive with others, enjoying drawing them into arguments and denouncing their views. Even if the other person has views similar to yours, you tend to steer the conversation to a serious topic and end up criticizing some person, group, or the way things are done. You are a constant social critic; people may respect your mind but they are uncomfortable with your negative views; you seldom have a light, casual conversation. You can write yourself a new role, such as:

I am fun to be with. I seek contact with friends simply for enjoyment. I have a joke for most people I meet. I ask about the other person's personal life, his/her job, family, loved ones, special interests, etc. but avoid politics and heavy topics. I'm a good conversationalist but listen at least as much as I talk. I concentrate on giving praise, empathy and encouragement.

There are all kinds of possible life-roles. A stingy person can play the role of generous gift giver, a passive person can become assertive, a very emotional person can become calm and quiet, a disorganized person can become organized, a clingy person can become a self-sufficient loner, and so on.

The fixed role may include some of the better traits you already have but, most importantly, it should specify new behaviors that have the potential of modifying your views and explanations. This isn't intended to be a way of learning new skills. It is a way of changing how you think about yourself and others.

STEP TWO: Live the prescribed life style for two weeks.

Don't try to *be* the kind of person described in the fixed role, simply try to play the role for some time. Forewarn people in your life that you are trying to change (otherwise, they may be certain you have gone wacky).

If it is difficult to get into the new role, have a friend role-play (see chapter 13) several situations with you before facing the real world. Dr. Kelly encouraged his clients to think of their old personality as being on vacation for two weeks, during which time they were to act and feel like a different person.

Many people are skeptical that they can "play a role" for two weeks. They can. Kelly felt that many people were so busy trying to be themselves that they had no time to discover their real selves or to develop a new self. Here is your chance. Keep a diary of your experiences and insights.

STEP THREE: Decide which aspects, if any, of the new ways of behaving are worth keeping. What have you learned about yourself and others?

Kelly's clients frequently after a week or so forgot that they were playing roles. They began to feel natural. With some modifications, they accepted the new behavior as a permanent part of them. The new adopted behavior reflects a new way of looking at things, new personal constructs. Personality change results from changing one's constructs which results from changing one's behavior. This is the purpose of this method.

Set aside time to review the results of your two weeks of role playing. Compare the new approach with the old way and then decide what to do in the future. You may want to go back to your old ways, or adopt some of the new ways, or try out another way of behaving.

Time involved

Probably two to three hours are needed to draft a new role description and to discuss it with friends. During the two week trial period you may not be using any more time than you ordinarily would, you are just doing things differently. There is some time involved in keeping a diary and deciding if you want to make any changes after the experiment.

Common problems

The biggest problem is overcoming your resistance to making such radical changes in your life style. In therapy, the therapist can use his/her prestige to persuade the client to try a new role. In self help, however, many people would resist drastic changes, it is scary.

Effectiveness, advantages and dangers

The technique, as used by Kelly with several hundred clients, was judged clinically to be effective. It was not studied scientifically. The advantage of this method is that one gets powerful, new experience immediately. There is no gradual shaping of a new way of behaving, no lengthy training programs. You instantly start behaving differently and seeing what happens. This shapes your personal constructs, your understanding of your real life situations, and it helps you select a better life style. There are no known dangers except that you may confuse relatives and friends, which could cause them to wonder about your stability.

Recommended reading

Kelly (1963) and Thorn and Pishkin (1974).

Paradoxical Intention

Paradoxical methods

A paradox is a self-contradictory or absurd-sounding statement (or one that seems contrary to popular opinion) that may nevertheless be true. For instance, the harder you try to get rid of some thought or behavior, the stronger it seems to become. Worry and demand that something happen and it never does. Examples: Blushing and sweating increase when you become embarrassed by your red, wet skin; obsessive thoughts increase when you try to suppress them (Neath, 1987); fears get worse if you desperately avoid the scary situation; stuttering increases when you become self-conscious about the speech problem; you make more mistakes when you worry about making them; the harder you try to go to sleep or to have an orgasm, the more difficult it is; anxiously wait for someone to call you and it seems like forever. It is as though a rebellious, devilish spirit causes the opposite of what you want.

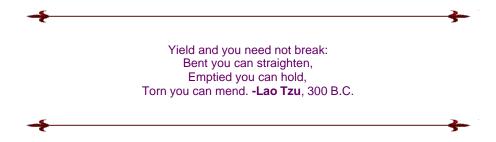
Yet, when you *do* the opposite, i.e. try to increase the unwanted behavior, sometimes the problem goes away. Just as trying too hard worsens some problems, trying to increase some problems occasionally reduces them. Examples: trying for a time to exaggerate the fears, obsessions, blushing, or stuttering may actually gradually reduce these unwanted behaviors. Just as typing a mistake--"thirr"-- over and over will help you type "their." Likewise, stopping insisting on getting some sleep or that someone call, helps the situation.

It is called "paradoxical intention" when a person strives to do or wishes for the thing he/she fears or dislikes (see confronting the fear in chapter 12). Thus, a person afraid of germs would expose himself repeatedly to dirt and infected persons. A person with a fear of the dark would walk in a different place every night. A person afraid of being unable to sleep tries to stay awake. A compulsive house cleaner would be told to learn to enjoy dust and messes, maybe even add some dirt here and there. A sexually non-responsive person is told to give maximum pleasure to his/her sexual partner and to carefully avoid having a climax him/herself.

It is also called "symptom prescription" when a therapist suggests that the client increase the unwanted action or feeling. Note that this is different than paradoxical intention in which you act out repeatedly what you are overly afraid of doing, such as come home after dark. In symptom prescription you intentionally increase the fear or the compulsion. Thus, a therapist might tell a fearful client to increase the intensity or frequency of his/her fear, to feel even more terrified (see chapter 5). The repetitive hand washer may be asked to wash his hands twice as often. In a similar way, a family therapy team may

reframe or re-define the "symptom-carrier's" problem behavior into a positive, desirable trait and then recommend changing the way the family interacts. For example, if one child develops very weird mannerisms, the therapists may say this is the child's way of holding the family together and preventing the mother and father from fighting and divorcing. Then, the child may be asked to try even harder to show his concern and love for the family by having more mannerisms. The rest of the family is asked to recognize and show their appreciation for these "signs of love."

Paradoxes are common in ancient Chinese writings: to get what you want, you must accept whatever happens and continue on your way.



By yielding you can overcome force; goals striven for mightily, such as happiness, are rarely achieved; thus, the wise person desires nothing.

Likewise, the Bible speaks of paradoxes--the meek shall inherit the earth. Those who want to be first, shall be last. Viktor Frankl (1962, 1985), founder of Logotherapy, was one of the first to explicitly use paradoxical intention therapeutically. Actually some form of paradox is involved in many therapies: cognitive-behaviorists (challenge the irrational thinking), Gestaltist (go look for the opposite feeling), hypnotherapists (tell the client to freely rebel against the suggestions), family therapists and others (tell an overprotective mother that her major task will be to teach the child that he doesn't need her).

Both paradoxical intention and symptom prescription work sometimes. But it is not known how these paradoxical techniques work. Perhaps, by learning you can increase the symptom, the unwanted behavior, you come to feel more in control. Then you can give up the symptom. Perhaps, by exaggerating the unwanted behavior, you learn it isn't so bad to blush, to stutter, to feel a little afraid, to have a dirty house, etc. Perhaps, when you are spending half your day doing some useless activity, you realize how ridiculous it is. Perhaps, by seeing the contradictions and the situation differently, one can find a new, more acceptable solution to a problem. Perhaps, striving to increase the unwanted behavior just confuses the rebellious "little devil" inside. Perhaps, symptom prescription is merely extinction via satiation, fatigue, response inhibition or punishment.

Purposes

Some paradoxical approach could be used with almost any unwanted thought, action, or feeling. The goal is to reduce the behavior, ironically by increasing some related behavior.

The most common behaviors treated with paradoxical methods are compulsions, obsessions, perfectionism, insomnia, fears, anxiety, repetitive unhappy family interactions, and other bad habits.

Steps

STEP ONE: Make plans to take a paradoxical approach to your problem.

As implied by the various examples given above, there are many paradoxical techniques but they can be lumped roughly into three major approaches:

- 1. Paradoxical intention --try to go in the direction opposite of what you want or fear. This method focuses on the underlying fear, not the surface symptom.
 - o Trying to do the opposite of what you feel compelled to do now, which is closer to what you really want to do in the end. Examples: An overly orderly and perfectionistic person should insist on experiencing the feared messiness and failure, the student obsessed with getting "A's" might try for some "C's" and "B's." A person afraid of the water should go swimming 3 or 4 times a week. A shy person should greet people, get involved, express opinions, and generally be assertive. A folk remedy for hiccups is to offer a dollar if the sufferer can produce 10 realistic hiccups in a row without any occurring accidentally. Tics too have been cured by voluntarily producing them.
 - o Trying to do the opposite of the frustrating habit or urge, which is not what you want to end up doing. Examples: if you want to be happier, concentrate on learning how to be deeply depressed: feel helpless, remember all the mistakes you've made, feel lonely and different, and dwell on your faults and guilt. If you can't get to sleep, change your goal: try to stay awake. If you feel guilty about masturbating, try feeling more guilty by masturbating twice as often as usual for a while. If you are afraid of the dark, you should frequently, say 2 or 3 times a night, experience the darkness, not because you want to be in the dark every night but because you want to be less afraid.
 - o Give up struggling for some goal. Examples: the insomniac stops trying to go to sleep and finds

something interesting to do. An impotent male stops trying to get an erection and focuses on having fun and pleasing the partner. The overly picky lover gives up looking for the ideal partner. A love relationship improves after giving each other some space (Brenner, 1985). The tennis player does better when he/she gives up self-criticism and awfulizing (Gallwey, 1974). Therapists occasionally make suggestions that they expect the clients to resist, i.e. the paradox is they are told to do one thing, but they do another. Example: a bright, unhappy housewife is encouraged to "do everything for your husband" but the result is, as expected by the therapist, she soon starts a career outside the home.

- o Give up impossible dreams. Look for the negative consequences of having your wishes come true. Examples: suppose you want to feel superior rather than inferior: you wouldn't be liked, it would be hard to accept others, there would be no competition. Suppose you would like for your partner to be perfect instead of with faults: you would be inferior and he/she would likely go looking for a better lover, all problems would have to be your fault, and perfection might get real boring.
- Symptom prescription --doing the unwanted habit to get rid of it.

Carry the behavior to a ridiculous extreme. Chapter 5 describes overcoming a fear of coming home after dark by telling oneself exaggerated horror stories about the dangers that might lurk in the dark. Other examples: If you worry excessively or have an obsessive thought, set aside five minutes every waking hour to do nothing but worry or have this unwanted thought. Carefully schedule the "worry time" and insist that the time be entirely used for worrying, no matter how hard or boring it becomes. McMullin calls this method "forced catastrophes," and he might ask a client to take 3 or 4 hours to "go crazy" if that is what he/she is afraid will happen. Other behavioral examples are if you compulsively bite your nails, clean your house, check the locks, wash your hands, etc., try to increase the habit by 50% each week until it becomes overwhelming and impossible. If you sweat so much it is embarrassing, try to sweat even more.

Lazarus (1971) calls this the blow-up method because the behavior is blown up to such an extreme that it becomes humorous or ridiculous. He describes a young man with sweaty palms. Lazarus told him to avoid wiping his palms and, in fact, to try to flood the other person with his sweat. He also had the young man imagine perspiration gushing out of his palms, spraying all over other people, and flowing across the floor. He might even imagine going outside and washing the cars with

the endless sweat pouring out of his palms and so on, until the fantasy becomes crazy and funny.

3. Taking a different view --turning the undesirable into the desirable and other ways of challenging irrational ideas.

A sense of humor helps here too. Think of how you can make an already bad situation much worse. At least think of ways to give up resisting the unwanted habit. Or, think of ways to stop trying to change. Examples: Instead of constantly dieting, occasionally try to gain two pounds in three days. If you have been arguing with someone a lot, try to pick even more arguments (hopefully some of the comments will be rather silly and funny making the situation lighter). If you swear too much or spend money (small amounts) carelessly, tell yourself that cussing is healthy, cathartic and honest communication or that shopping is good, inexpensive treatment for depression.

This paradoxical redefining the problem as being something tolerable is clearly reflected in the RET saying, "It ain't awful, it is lawful." Or, in some cases a fear can be turned into a wish. Patients have turned feared panic attacks into wishes that the heart will beat wildly which stops the panic (Frankl, 1985). More examples: when an obnoxious teenager argues and fights about everything, especially homework and chores, and you think the situation is hopeless, try to see the situation as one in which the young person is preparing to become an independent adult or attempting to get love and attention. This is called "reframing" (see chapter 15). Most of the techniques in method #3 of this chapter are paradoxical, i.e. one learns to think differently. Some paradoxical therapies promote valuing contradictions and prizing an inquiry into the many mysteries and paradoxes that exist in the world.

Think of ways to confront or contradict an idea or behavior, perhaps you can switch roles with a friend and practice arguing against your own irrational ideas. Perhaps you can carry your irrational ideas to an extreme and, thus, see that your thinking is faulty (and relationships unreasonable). Example: if you believe that people are always responsible for their own problems, then try proving that being born retarded, deformed, poor, schizophrenic, or with an alcoholic parent was the person's own fault.

McMullin (1986) provides several examples of "self flimflam," i.e. fooling one's self. This might be someone who exaggerates how important it is that he compete and win (for praise and ego inflation), exaggerates how tolerant he is of a lover exploring another relationship (so he will look kind and self-sacrificing and she will feel guilty), or over plays how unhappy he is--the "poor me" role--(to get comfort and

sympathy). Such a person, looking for the flimflam, will start to recognize how phony he is being, see the sought-after pay offs and, hopefully, give up the "act" and try to be honest. In other cases, where false beliefs cause problems, trying to prove these beliefs with evidence and logic can often result in clearer thinking.

Students who can't study because of all the fun distractions have been helped by being told that they can't, under any circumstances, study more than 2 hours per day. This is reversing roles: you can only do this good thing--study--for a limited time and you *must* do other things--socialize or play--all the rest of the day.

STEP TWO: Put your paradoxical plan into effect--do it with zest.

Paradoxical intention: Do what you fear! (Don't try to increase the fear reaction.) Worry even more! Try to stay awake! Try to like a messy house! Like dirty floors and dishes! Avoid trying to have a climax!

Symptom prescription: Increase the unwanted behavior! Increase the fear! Do the feared action more often! What do you have to lose? You have been doing the unwanted behavior anyway! If you have no trouble producing more unwanted behavior, do more! Since that damn, lousy habit wants to occur so badly, make it occur over and over! Do it until you are sick and tired of it (like the boy caught smoking and forced to smoke three strong cigars, one after another).

Changing your outlook and goals: What seems crucial to you at one time may paradoxically become unimportant in the long run. Small breast development may humiliate a girl at 16 but please her at 35. You may long to be the best guitarist, basketball player, or sex object in school but get very little satisfaction out of that skill when you are 50. It might be nice to have someone's love but it isn't a necessity! It hurts to be rejected but it isn't the end of life! Challenge your harmful irrational beliefs!

STEP THREE: Keep following the plan until the desired goal is reached.

In several of the paradoxical methods there is a strange situation, namely, you are trying to produce acts you really do not want to continue. Thus, you actually win by failing, i.e. you finally stop producing the unwanted behavior and it does not occur as often as it did before. In effect, you will threaten to begin producing the unwanted behaviors in excess again if the behaviors do not go away and stay away. At this stage, you will often find your acts or your worries somewhat silly or humorous and certainly unnecessary. If so, you are successful.

Time involved

It may take only a few minutes to say, "to hell with struggling with this problem any more" and think of ways of increasing or exaggerating your problem. Ordinarily, the results will come in a week or two and, occasionally, even sooner. Sometimes you will need to read about the method and put considerable effort into producing the unwanted habit ad nauseam.

Common problems

This method, thus far, has almost entirely been used by therapists with clients. In most cases, the therapist does not explain the method to the client but instead with tongue in cheek prescribes more and more ridiculous behavior. For example, a therapist may seriously tell a compulsive housekeeper that cleanliness is important and perhaps she should get up at five AM to do a couple of housecleaning chores before breakfast, then wash and vacuum the floors every day, wax all the wood work, and hire a cleaning person once a week to wax her floors, take the wax off the woodwork, and clean the silverware. Furthermore, throughout the day she should take five minutes every hour to tell herself how important it is to everyone in the world that her house be spotless, that *her* dishes sparkle, etc. Eventually, as more and more cleaning is added to the daily schedule, the patient realizes that the therapist is being facetious. This kind of playful teasing and ridicule may not be possible in self-help, certainly you can't deceive yourself about the purpose. But you can learn to laugh at yourself.

Effectiveness, advantages and dangers

Many therapy cases have demonstrated that paradoxical methods work, but case studies are open to a lot of misinterpretation. Frankl (1975) also mentions that many people have simply read about paradoxical methods in his books and applied the methods in their own lives.

In the last ten years, more research has been done (Weeks, 1991). One finding is that different methods are needed with resistive clients (those who rebel against the therapist's directions). For instance, when procrastinating students were told to "try to bring about your procrastination deliberately," only the resistive ones procrastinated less. The non-resisters didn't reduce their procrastination (Shoham-Salomon, Avner, & Neeman, 1989). Paradoxical methods have been shown to work with insomnia and maybe agoraphobia and other fears but many studies have design faults. We need better controlled studies and research that compares a variety of treatment methods, including self-application or bibliotherapy.

The greatest advantages of these methods are their simplicity and speed (when they work).

The greatest danger, obviously, is that trying to make the problem worse may work. It would be foolish for a suicidal person to attempt to make him/herself more depressed and destructive. There is no data,

to date, indicating how often paradoxical intervention (in therapy or self-help) exacerbates the problem. This is crucial information to get.

Increasing Motivation



Chapter 4, focusing on understanding behavior, has a lengthy section about motivation. Method #5 in chapter 11 describes ways of increasing your level of motivation. You should read those sections along with this one. I believe most of the time you need to be intensely motivated to make difficult changes in your life. That probably means working on only one or two changes at a time.

We have all known highly motivated people; they are eager, driven, determined, confident, single-minded, and obsessed. Strong motives take us in many directions: saints and crooks, stars and repeated failures, love and hate, awe-inspiring and disgusting. Think of Lincoln studying law by candle light in New Salem. Think of Gandhi fasting. Think of the work to become a champion in any area. Edison said, "Genius is 1% inspiration and 99% perspiration." What makes us want to sweat that much? We have burning needs; we strive for meaning and values; we seek external pay offs and self-satisfaction with zeal; we develop keen interests.

Some of our drives may be innate--the natural condition of the species. But, certainly, many motives are learned, so they can be changed. For instance, Adler (1951) thought children quickly learned they were inferior and spent a lifetime striving for superiority. Field Theory says that environmental forces and the ways we have learned to view our situations determine our incentives, goals, and intentions. Social Learning Theory suggests that motivation depends on observing how to get the rewards we want in the environment and our faith in our ability (self-efficacy) to do it. Attribution theory states that achievers have learned that they are able to succeed, that hard work increases the chances of success, that learning about themselves facilitates success, and that succeeding is enjoyable and worthwhile. If you want to succeed but haven't learned those things, you can if you want to.

All of us are pushed in many directions by many powerful physiological, social-cultural, and psychological needs. Most of us yearn for food, air, shelter, sex, affiliation, love, self-acceptance, achievement, power, mastery, self-actualization, etc. Those needs increase our motivation in various specific, usually positive directions. Moreover, there are drives and emotions that push us in many negative directions, such as feelings of inferiority that become self-fulfilling prophecies, desires to avoid responsibility and success, beliefs

that we do not deserve success, self-defeating rebellion against doing what we are pressured to do, tendencies to avoid any self-evaluation, and, of course, greed, hatred, and other self-destructive or self-defeating drives. All of us try to generally increase our desired motivations and/or to reduce our negative motivations.

While the power of our physiological and conditioned drives are undeniable, we must remember that by deciding and declaring "By God, I'm going to ______ (get a 3.5 GPA, get a divorce, start jogging, stop drinking...)" we have created our own powerful motivator. Likewise, by amassing lots of good reasons for changing we have created another powerful set of motives. If we are determined to change in some specific way, our task is to maximize the positive, pleasurable motivations and reasons for doing the desired behavior and to, likewise, maximize the negative, painful factors associated with continuing the unwanted behavior, i.e. failing to change. Once determined to change, most people can either "just do it" or they can easily read chapters 4 and 11, and find ways (methods) to get where they want to go. It seems to be necessary to believe we can probably accomplish the change we want, while at the same time we are scared of what will happen if we fail to change.

Recent theories (Cantor, Markus, Niedenthal & Nurius, 1986) suggest that our notions of what is possible play a major role in motivation. Our self-concept contains many "possible selves:" "I could become" selves, "I'd like to become" selves, "I should become" selves, and "I'm afraid of becoming" selves. These possible selves reflect and influence our "life goals" and, at the same time, our progress toward our life goals alters our possible selves. Thus, parts of our selves are constantly changing (even though the total self is pretty constant). Our current and possible selves and our personal plans change our behavior in complex ways. For example, on the same exam, why does good student A set high goals and study hard, while good student B expects to fail and works frantically, and good student C blows off studying altogether? All three want to achieve and have been successful. Their different possible selves may explain the differences in their attitudes and behaviors.

Student A is an "optimist," expects to do well, and works hard to meet or beat his/her past achievements.

Student B is a "pessimist," fears careless failure, overlooks past successes, and predicts doom to soften the blow when it comes. He/she tries real hard to avoid all the awful outcomes he/she is imagining.

Student C is a "self-handicapper" who wants to impress others but fears getting an average score which would tarnish his/her image of being brilliant, so he/she hopes to do fairly well on the exam while letting everyone know he/she hasn't studied, thus, preserving the image of being *real*/smart.

We don't yet know why people use different strategies, but surely we can learn to change our thinking about our possible selves and our future, thus, changing our achievement motivation.

Likewise, different possible selves may explain why three people, all interested in socializing with the opposite sex, might behave very differently, e.g. one goes to parties or the bars every night, another only goes to places where he/she already knows people, and a third doesn't go out at all. There are many possible selves involved: "I'm attractive," "I'm unattractive," "I'm shy," "I'm not likely to meet anyone interesting," "All they are interested in is sex," "I'd like to be the center of attention," "I can drink and have fun anywhere," "I don't want to look like I'm on the make or loose," "I don't want to be seen out alone," etc. We can change our self-concept, then our behavior (or the reverse, see method #5).

The nature of a "weak will" seems to involve a conflict between (a) being willing, for complex reasons in specific situations, to do the work and make the sacrifices necessary to succeed and (b) resisting making the effort, especially if we can excuse or con ourselves into believing that it is okay not to try very hard. "I have no will power" is a cop out. See the discussion of procrastination in chapter 4.

Probably one-third to one-half of all students have the intellectual ability, under current conditions, to be "A" students, but two-thirds of these potential "A" students are not willing to compete and do the necessary work. Likewise, one-third of us have the musical talent to play in a band, but most of us don't practice enough. We could play a sport well or have great knowledge of history or know hundreds of jokes or.... We know how to achieve these objectives, we just don't want to badly enough, there are other things we would rather do.

So, there are several critical aspects of self-directed motivation: *One is deciding* what you value--what you want to achieve--and how much you are willing to invest to be successful. *Second is making a commitment* to change, which includes arranging and recognizing the wonderful pay offs of changing and the terrible disappointments of failing to change (see step 4). *Third is giving up the old way* of behaving and *deciding how--step by step--to accomplish the goals* you value highly. This requires self-discipline, self-control, scheduling, practice, and reinforcement (see chapters 4 and 11).

If, on the other hand, you decide you would sort-of-like-to change, that is you have some high, maybe even noble aspiration but never get much accomplished in that direction, you may simply be enjoying having the goal but *living a lie*. Example: the person who wants to be a music or sport star but only practices for 15 minutes two or three times a week. The pleasurable fantasy is there and they tell everyone "I want to be really good" but the commitment and passion are not there. Most likely, such a person will never muster the drive or motivation to get "over the hump" that stands in the way of all goals.

Here we only deal with that one crucial factor--mustering up the motivation.

Purposes

- To help you decide what goals you really value and are willing to work for.
- To suggest some methods for getting the motivation to reach your truly desired goals.

Steps

STEP ONE: Decide what you really want to accomplish. What price are you willing to pay? Deal with early distractions and your own resistance.

Within the context of having many motives, there are two fundamental needs for many of us: (a) the need to achieve and (b) the need for social affiliation or love. Ordinarily, the latter provides its own motivation or drive, but it is not uncommon for someone who truly wants to achieve some distant goal, e.g. become a doctor, to find it very difficult to give up partying, hanging around with friends, listening to music, watching TV, playing sports, etc. We want to have it all. But often we can't. So, the first question is: "Is there anything you are willing to throw yourself into, to sacrifice for?"

If your answer is "no," it is not something to feel guilty about. For example, I have heard powerful arguments that it is better to personally and directly help friends right now than to strive to excel in the future as a psychologist or to develop "the best" department or to write a book. There are many good ways to live. Being overly competitive--always trying to beat the competition and excel--may not be the ideal life style (Kohn, 1986). Likewise, there are tolerant ways of looking at a low or moderate need to achieve: perhaps you are still maturing psychologically and need love and attention from friends or a lover more than anything else at this time (see Maslow's theories in chapter 4). Perhaps you need to build your own self-esteem before you can devote yourself to others and a career. Perhaps you correctly realize your limitations and/or prefer to live at a leisurely pace. We don't all have to be high achievers.

If your answer is "yes, I would make many sacrifices in order to______," you probably already know what you need to do (by noting what other successful persons have done). Becoming highly motivated isn't easy, if it doesn't come naturally to you. But it is possible. I've seen many students change and devote themselves to a career, to studying, to taking charge of their life. Here are some things to do to heighten your motivation:

Write down all the reasons why you want to (e.g. be a
psychiatrist). (You are most motivated when doing whatever is
your choice, not someone else's, and gives meaning to your

- life.) The more reasons you have, the more motivated you will be.
- Be sure your long-range goals are realistic and moral. Talk to others about your motives. This will clarify your thinking. Be sure the means and the end-goals are in line with your values.
- Consider what a highly motivated person with your goals would do. Observe and talk to a role model.
- Set sub-goals, e.g. get all "A's," and plan daily schedules, e.g. study 8 hours a day. See scheduling in chapter 13. Plan your life well enough and get enough self-control that you expect to succeed.
- Consider the most likely distractions, make plans for avoiding them. Guard against immediate temptations distracting you from your more important long-term goals.
- List all the sources of resistance you can foresee--your ways
 of avoiding the work, your temptations, your excuses, and selfcons. Ask what these resisting forces are trying to achieve for
 you; see if those needs can be met some other way. Look for
 the fears that cause you to resist change and try to handle
 these fears.
- When you have definitely decided what goals you want to be your priorities, stop thinking about the decision. Get on with it.
- Commit yourself publicly, specifically, and wholeheartedly to reaching your goals.

Altogether, these ideas boil down to--learn self-discipline. A critical part of discipline is learning to postpone pleasures and stick with the job until it is done. You must be able to envision the desired pay offs in the future but stay steady, organized, and dependable along the way.

STEP TWO: Acquire the skills you will need to succeed. You aren't likely to be motivated and enthusiastic about your work unless you are competent.

Ask what skills will be needed. Learn the skills before they are needed. Examples: decision-making, study, scheduling, communication, assertiveness skills (chapter 13).

Beyond special skills, learn the fundamentals of whatever you are doing. First, in school, by realizing that general knowledge taught is school provides the foundation for all other useful, practical information. So, learn to comprehend what you read well; learn to speak and write well; learn math and history and psychology... Second, on the job, no matter what level you start at, get experience at the lowest level. Don't be in a rush to advance; if you are working your field, get to know everything about it. If you know what you are doing, you will be more at ease, more secure, and more passionate about the work.

It is eye-opening to realize that Howard Gardner describes seven intelligences. Schools only teach two: math and language. There are five more: spatial orientation and art, psychomotor skills and athletics, musical talent, an understanding of others and ability to work with them, and an understanding of yourself and the ability to handle your own problems. Develop all your intelligences. This is the highest level of motivation--self-actualization.

Look for and hone any special talents you have. If you are a good teacher or speaker, get experience. If you relate well or have a talent for drawing or whatever, polish those skills and look for opportunities to contribute your talents to good causes. Experience the joy of using all your potential. We are driven to be outstanding, not to be mediocre.

STEP THREE: Make changes in the environment, learn the self-instructions, and provide the rewards necessary to get done what you need to do.

See chapters 4 and 11, especially learned industriousness. Reinforce your constructive behavior several times a day, give larger rewards every week. Shift from extrinsic to intrinsic reinforcement (See chapter 4).

Talk to yourself, taking responsibility and giving directions, pep talks, and praise. Confront negative self-talk, like "I'm too stupid to be an engineer," by testing out the idea, "I'm smart enough if I work hard." (See methods #1 and #3 in this chapter.)

Associate with friends who support your achievements. Encourage each other. If you admire or identify with someone, hopefully he/she will model the desired behavior for you. Be prepared to leave friends as you move on.

Surround yourself, if possible, with able and highly motivated people. You will be threatened, but you will learn much more, you will be motivated by them, and your group will achieve much more. Some "hot shots" can't stand to get help from others or to share success. The experience of being part of a highly effective team is the thrill of a lifetime. Don't let your ego or your insecurity deprive you of the experience.

Follow your own directions, set your own goals. Research has shown that high achievers are independent, while low achievers conform to others' wishes. So, try to avoid being too desperate for others' approval or to belong to a group (unless that group supports your achievement).

Record your "target" behavior daily and plot it. Most people will seek success if they think success is likely. Thus, maximize the probability of success and minimize the stress of failing. Low self-esteem people give up (self-handicapping) when failure seems likely,

so make sub-goals easy. Failure motivates high esteem people (Raynor & McFarlin, 1986). Use failure as a cue to try harder.

STEP FOUR: Enrich your self-concept: both with wonderful fantasies of possible successes and with visions of ways you might fail.

Read inspiring stories which you can relate to your life by using American Guidance (1977), *The Bookfinder*. Find other motivational books, such as *My Power Book* by Dan and Marie Lena (1991), Ziglar's (1975, 1987) *See You at The Top* or *Top Performance*, or Robbin's (1991) *Awaken the Giant Within*, which are mentioned in chapter 4. Any of the *Chicken Soup for the Soul* books (Canfield & Hansen, 1991-6) are touchingly inspirational.

Observe successful people, role play taking risks and succeeding, and gain knowledge increasing your expertise. Do everything to increase your ability and confidence, because believing you can succeed increases your motivation.

Nurture positive, confident, optimistic attitudes. See method #9. A self-doubting pessimist can hardly be highly motivated. I magine in detail how wonderful life will be when you succeed, how pleased you'll be. Do this every day.

Using the methods outlined in chapter 4, learn to think "I am responsible" (note relationship between outcome and effort), "I am in control" (note you can change), "I have ability" (note how success increases as your skills develop) and "I value being successful" (note the pay offs of doing well). These beliefs lead to hard work and pride.

A negative, defeatist attitude towards oneself is likely to be detrimental, to involve a lack of confidence, to reduce motivation, and so on, so work on improving your self-concept if that is a problem (see method #1 in this chapter). However, high self-esteem does not lead to high achievement. Rather, doing well academically and socially leads to increased self-esteem (Nielsen, 1982).

Research suggests that optimally motivated persons have a balance between their positive selves and negative selves, i.e. their positive expectations and their frightening awful possible outcomes. Both dreams and fears are needed; dreams draw us to success and visions of failure scare the hell out of us when we goof off (Cantor, Markus, Niedenthal, & Nurius, 1986). Some anxiety is helpful.

Anthony Robbins (1991), a motivation writer, expresses a similar idea. He says we should associate *massive pain* with not changing and *massive pleasure* with changing, and do it *now*! The examples he gives of massive pain include having an agreement to eat a can of dog food if you go off your diet, the humiliation of publicly admitting you have failed (reporting to a support group how you are doing or jumping up

in a restaurant, point to your chair, and shout "Pig! Can't you control yourself?"), thinking about getting cancer from smoking, thinking about the terrible loss if your spouse caught you having an affair and divorced you, etc. Ask yourself: "What will I lose if I don't change?" and "What will I gain if I do change?" Also, how will my failing to change affect others--my loved ones, my business, and my chances to do other things? What will changing do for others or permit me to do? The idea is to make the pay offs and consequences so strong in your mind that you feel you must change immediately.

Force yourself every few days to assess the progress you are making towards your major life goals. This is hard for some people, called certainty-oriented, who do not want to know how well or poorly they are doing, how able they are, what the outlook is for them, etc. If you resist taking personality tests, dislike reading and using methods for increasing self-understanding, and criticize the test or person giving you accurate but negative feedback, then you are probably certainty-oriented and failure threatened (Sorrentino & Short, 1986). Guard against burying your head in the sand. Indeed, if they will face facts, greater awareness of potential future failures may be quite motivating for these people.

STEP FIVE: Avoid continuing distractions, especially hedonistic temptations and strong emotions. Keep focusing on the important-for-the-future-tasks at hand.

Stay relaxed. Keep disruptive emotions under control (see chapters 5, 6, 7 and 8). Try to "lose yourself" in your work. See flow in method #13 in chapter 11. As soon as a tempting distraction occurs, immediately remind yourself of your reasons for taking on this project, the desired pay offs and all the unfortunate consequences of not doing what you intended to do. Guard against being seduced by immediate pleasures which cause you to neglect your long-term objectives.

If you suspect you are motivated to fail because of repeated failures, seek professional help. Learning to handle set backs and failures is important. Read about the failures in Abraham Lincoln's life; he bounced right back.

STEP SIX: Enjoy the fruits of your labor.

A major motivation is self-enhancement, i.e. treasuring your strengths and feeling good about your accomplishments. Feel proud.

Success yields status and material gains. Enjoy them. Celebrate each step towards success--tell friends, party, re-dedicate yourself to the next task.

Time involved

Depending on the techniques you select to use, it may take only 15 or 20 minutes per day or many hours over a period of weeks.

Common problems

If you lack motivation, how can you do the things recommended in this method? Perhaps you can start with a very simple, easy method, such as scheduling your time a little better, rewarding some desired behavior, or daydreaming about the future.

Other complex factors are intertwined with motivation--values, emotions, skills, expectations, self-esteem, irrational thoughts, unconscious motives and so on. Simple approaches may not work.

Effectiveness, advantages and dangers

Relatively little is known about motivating ourselves. McClelland and Steele (1972) suggest most of the above steps but much of this research by McClelland lacks control groups and focuses primarily on developing entrepreneurs in foreign countries. That is a far cry from helping a person who doesn't know where she is going or doesn't do his home work. McCombs & Pope (1994), McHolland & McInnis (n. d.), Alschuler (1973), and de Charms (1976) have, however, raised the academic motivation of students.

This method gets at the crux of the matter, in my opinion. That is why chapter 4 deals with motivation so much. With enough motivation you could produce almost any self-improvement you wanted. I suspect the eventual key to having "will power" lies in our philosophy of life, our dreams about the future, and our willingness to take responsibility for our lives.

There may be some dangers associated with "trying too hard." You may give up prematurely because it seems too difficult to make changes or achieve the goals you have set. It may also hurt more if you fail after trying very hard to succeed.

Brim (1992) has a neat book about managing ambition: how we handle our drive for success or mastery, how we adjust our goals to fit our ability, how we find satisfaction in doing what we can. He tells a delightful story of his father's retirement to a hillside farm. In his sixties, he trimmed trees and cut grass all over the mountain side. He had a garden everyone talked about. In his seventies, he tended only closer to the house, focusing on the lawn and garden which still supplied the neighbors. In his eighties, he cut less grass and had a small productive garden. In his nineties, he hired a neighbor to mow the lawn and he only had a few tomatoes in his garden. In his last few years, he still stood or sat near his flower boxes and tended them lovingly. My father did the same thing. We all adjust our goals to fit the ability we believe we have. But coping with success and failure is a complex process; it may help to know how others managed their lives.

The Sybervision organization (1-800-678-0887) offers a variety of audio and video tapes about self-discipline, achievement, winning, setting high goals, positive mental attitude, etc.

Straight Thinking, Common Sense, and Good Arguments

-60

For most of the last 2000 years or more, we humans were considered the only "rational animal." Then, about 100 years ago, Freud challenged our rationality with the idea of powerful unconscious motives. Since then psychology has found many, many ways in addition to unconscious drives that we humans make mental errors. Humans are still remarkably clever but we have our blind spots and our false beliefs. For instance, 93% of college students believe they can feel someone behind them staring at them, which is untrue (we remember when our intuition is correct). This chapter reviews a host of faulty ideas and denial mechanisms. You can't avoid all thinking errors, but you can learn to detect and purge some of them.

In our culture, we tend to think of people as falling along a continuum from very smart to very dumb. Smartness, in most cases, is usually related to how well you do in school, your book-learnin', your mental capacity for taking tests. The skills used in schools are mostly verbal or mathematical. But several years ago, Gardner (1983, 1993) questioned the notion of a single intelligence, suggesting instead that we all have seven different intelligences: linguistic and mathematical (the school smarts), body kinesthetic (physical coordination and athletic ability), spatial (art and sensing the physical relationships among objects), musical (an auditory sense and musical ability), interpersonal (understanding other people and relationships), and intrapersonal (understanding ourselves and having self-control). We see intelligence differently when we realize that there are many important ways to be smart, talented, and effective. Our view of intelligence influences how and what we teach kids.

Goleman (1995) says academic intelligence alone does not give us common sense, emotional control, or the skills needed to understand and relate to others. In short, book-smarts (high IQ's) alone may only enable us to be nerds. He says success at work, with friends, and in marriage requires "emotional intelligence" or people skills. This is the abilities to (1) know what you and others are feeling, (2) handle our emotions and impulses, and (3) have self-discipline, social skills, optimism, and empathy for others. Basically, Goleman's emotional intelligence is Gardner's intrapersonal and interpersonal intelligences. Whatever it is called, self-knowledge and social intelligence are surely as important as academic ability.

Our quick, intense emotional reactions sometimes overwhelm our rational brain, forcing us to over-react or misperceive the situation. But it is our emotional intelligence, according to Goleman, located in the prefrontal cortex, which enables us to understand and manage our intense emotions. So, to be a good leader or a caring spouse or an effective parent we need knowledge about emotions, control of our feelings, and interpersonal skills. Of course, articulate speech and technical knowledge are usually necessary to make accurate predictions and accomplish goals too. But, high academic intelligence (as measured by school achievement or intelligence tests) does not give you much assurance that your judgment in many areas will be accurate. Persons who do well in school, just like the "slow students," make the kind of thinking errors dealt with in this section.



Only two things are infinite, the universe and human stupidity, and I'm not sure about the former.

-Albert Einstein



About 300 years ago, John Locke (1632-1704), who influenced Thomas Jefferson's drafting of the Constitution, said there were three kinds of people who have mistaken opinions:

- 1. Those who accept hand-me-down beliefs from parents, friends, ministers and others, and don't do much thinking for themselves.
- 2. Those who let their emotions and needs dominate their thinking and reasoning.
- 3. Those who try to be logical and reasonable but lack good sense and/or expose themselves to only one viewpoint.

Locke was making a distinction between the inexperienced, poorly educated, emotionally swayed mind and the highly intellectual, objective, systematic, thorough, and logical mind. He was also making the point that straight thinking and reasoning skills aren't just inherited; accurate thinking is the result of inherited ability *and* a lot of experience and wisdom. Recent research, according to Herbert Simon at Carnegie Mellon University, has shown that a true "expert" needs enormous stored knowledge (10+ years of intense study and practice), a mind capable of systematically searching that memory for useful information, and the skill to detect defective, distorted thinking. Being smart isn't just a matter of being born that way.

How do we, even the more intelligent and expert among us, come to misunderstand the situation and/or draw erroneous conclusions? This is important for us to understand. The usual conception is that we have a logical, reasonable mind which is somehow occasionally

deceived or over-powered by our emotional biases. This certainly seems to happen, e.g. after hearing the same evidence, there were two very different opinions: three fourths of all whites thought OJ Simpson was definitely guilty and three fourths of Blacks thought he was framed. Sometimes we are well aware of our emotional needs, sometimes we aren't. In any case, as you read many of the examples of erroneous thinking given in Step 1 below, you will see that humans often view things the way they want to see them, e.g. one viewpoint has a psychological pay off (less stress), it is convenient (simple and easy), or it is wishful thinking.

In other situations, also illustrated in Step 1, the human mind simply seems programmed to see things wrongly, e.g. we have a style or habit of thinking that is wrong or we have perceptual/cultural/moral blocks to seeing reality. Piattelli-Palmarini (1994) gives many more examples of "cognitive illusions" that inhibit our ability to reason. Examples: we make unwarranted assumptions about people and, thus, marry the wrong person; we may hesitate when action is needed. There are a lot of ways to be wrong.

Instead of just thinking of a rational mind occasionally disrupted by irrational emotions, it may be fruitful to think in terms of having two, three or more minds functioning at the same time. Perhaps most of us just use or attend to certain of our minds more often than others or only under certain circumstances. Recent writings suggest the possibility that we have at least three minds: (1) a thinking, reasoning, knowledge-based mind, (2) an intuitive, common sensical, experience-based mind, and (3) an unconscious mind filled with repressed drives and feelings, a la Freud. The first two are discussed together next; unconscious processes are discussed at length in the next chapter.

Epstein and Brodsky (1993; Sappington, 1988) have convincingly argued for humans having two kinds of intelligence. One commonly known as the typical IQ or school smarts; this rational intelligence is based on deliberate, controlled, logical reasoning and on information from school, books, educational programs, etc. It is the intelligence we use to design a rocket, predict the weather, research the effectiveness of some treatment method, etc. Their second intelligence, similar to Goleman's "emotional intelligence," is based on everyday life, especially emotional experiences, which, as we accumulate more wisdom, yields quick, automatic, intuitive reactions which guide us in many situations. With experience, we automatically like some people and dislike others; we sense or "know" when we are being manipulated or when someone is feeling upset. This kind of intelligence isn't based on logic; it involves subtle sensitivity and communicates its wisdom to us via emotions and good or bad feelings about something; it is based on our interpersonal experience, not on book-learning.

Both intelligences, "knowledge-based" and "experience-based," influence our lives constantly, but the "life experience-based"

intelligence guides most of our ordinary, unthinking, every day actions and reactions. We effortlessly draw on this "common sense" intelligence to help us cope with practical problems, other people, and our emotions. This experience-based intelligence is automatic; it enables us to quickly make decisions, such as "Should I trust this stranger?" or "How should I answer that question?" This intuitive mind helped our species survive in the wild for the seven or so million years before our current cerebral cortex developed 35,000 to 100,000 years ago. It doesn't have to think of and weigh the pro and cons for every alternative; it has the remarkable capacity to add all our past experiences together and to quickly interpret the current situation in light of our history, especially our traumatic past. We needed that for survival.

Both our rational and experience-based minds make mistakes. According to Epstein, when emotions run high, the experience-based mind is likely to take over because it responds quickly and has had experience with emergency and emotional situations. And, once the experience-based mind is in control, it is hard for the rational mind to intercede. Thus, the danger is that the experience-based, more emotional mind will misinterpret a situation or choose an inappropriate reaction, e.g. you might be excessively fearful of your male boss because your father was harshly critical and aloof when you had made a mistake. This dual-mind theory helps explains why intellectually smart people do not solve everyday problems better than average people; bright people can't handle their emotions any better than the rest of us, so they don't have better marriages nor better kids nor better mental or physical health. The knowledge-based mind can't deal with hundreds of problems every day. But, this rational mind needs to monitor your actions, your experience-based mind, and your emotions for irrationality, asking "Why are you assuming the boss will get mad like father?" or "Won't your fears get in the way of doing a good job?" We need the rational mind to keep us reasonable. But we need the experience-based, intuitive mind to handle most situations, to sensitize us to danger in situations, to guide us in handling the danger, to detect the needs and emotions underlying our actions, and to arouse our emotional ire when something is unjust.

As you can see, as Epstein conceptualizes these two minds, both contribute vital information to our constructive thinking, i.e. to our coping with personal and interpersonal problems. Yet, we spend years in schools trying to train the rational mind but that doesn't help us much with solving ordinary problems, such as finding love, controlling our irritation, managing diets or money, dealing with difficult people and so on. On the other hand, the intuitive mind, which automatically guides us through these complex situations, gets very little attention in school and almost no training (additional experience, i.e. besides interacting in the halls).

A well-read person will also recognize the similarity between Epstein's two intelligences and men's vs. *Women's Ways of Knowing* in the seminal book by Belenky, Clinchy, Goldberger, and Tarule (1986).

Men's "separate knowing" involves a doubting mind, i.e. critical thinking, argumentation, and scientific method, and reflects rational intelligence. Women's "connected knowing" involves a believing mind, i.e. listening to others' stories, empathizing with their feelings, experiencing their pain and joy, and reflects experience-based intelligence. Both male and female ways of knowing (and intelligences) are critical to learn and use.

We all remain vaguely aware of our two or more minds because we know they disagree sometimes, e.g. one of our minds wants the cute, little sports car (with a miserable repair record) and another mind wants the practical car recommended by *Consumers Report*. One mind worries about things that are very unlikely to happen, repeatedly compares ourselves unfavorably to others, jumps to the conclusion that something awful is going to happen, sees doom and gloom everywhere, etc., while the other mind knows these ideas are probably wrong (Freeman and DeWolf, 1992).

One current theory is that many specialized parts have developed within our brain, each evolved as a reasoning-coping mechanism during millions of years as hunter-gatherers (Barkow, Cosmides & Tooby, 1992). Thus, we may have inherited specialized clusters of nerves that originally aided in foraging for food, that operated when we were threatened, that directed us in selecting a mate, that guided us in seeking justice and cooperation, etc. We may even inherit tendencies to think certain ways and to have certain feelings, drives or motives, which shape the cultures we develop. Like birds, bees, and all foraging animals, we humans have remarkable abilities to make sound probability judgments under certain conditions. However, humans in today's world may occasionally be misguided by our own mental mechanisms based on our evolutionary past rather than on current reality.

Teaching critical thinking skills is emphasized in some classes these days. The general idea is to learn to do what Socrates asked his students to do, namely, give reasons for their opinions. It is said that today's students can, if they want to, memorize and recall but can't interpret, infer, judge, reason or persuade (Benderson, 1984). What skills are needed for these activities? Many thinking skills methods have already been described in this book: problem-solving and decision-making (see chapters 2 and 13), challenging irrational ideas (see method #3 in this chapter), methods for coping with disruptive emotions (see chapters 5, 6, 7, 8 & 12), persuasion and negotiation skills (chapter 13), and a willingness to seriously consider the purposes of one's life (chapter 3). There are many ways to straighten out our thinking.

One of the best sources of thinking skills is an audiocassette program, Masterthinker, by Edward de Bono from Prentice Hall (or one of his books, de Bono, 1992 or 1994). As an introduction, he makes the point that highly intelligent people often think they don't need to learn thinking skills, their brain is all they think they need. They have

confused intelligence with thinking; one can have a very powerful computer but not use it accurately or effectively. High intelligence poses other traps: since he/she can defend almost any opinion, such as person may not carefully explore the issue before making a pronouncement (and, thus, be a poor thinker). Also, very intelligent people find they get recognition by quickly and cleverly criticizing another person. If they stop there, little constructive thinking is accomplished. An intelligent person, who wants to maintain a reputation, hates to be wrong. Therefore, they resist admitting being wrong and changing their minds, which is not good thinking. In the same way, a fear of being wrong may inhibit them from considering and advancing new, tentative ideas. When an intelligent person reads this method, I suspect he/she will conclude that his/her thinking has several flaws (no matter how big his/her computer is). Brains aren't enough. de Bono says, "good thinkers aren't born, they're made."



It ain't so much the things we didn't know that get us into trouble. It's the things we know that just ain't so.

-Artemus Ward

The art of being wise is the art of knowing what to overlook.
-William James



The first focus of this method is on common ways we get our facts wrong or think illogically. Many of my examples come from a 40-year-old book by Stuart Chase (1956) and more recent books by McMullin (1986, pp. 256-266) and Nezu and Nezu (1989). Several types of false reasoning will be described briefly in hopes you will recognize your own illogical thinking. (This is just wishful thinking unless you take the time to seriously question and analyze your specific thoughts and conclusions.) The first four methods in this chapter have already covered many harmful ideas and beliefs.

The second brief focus within this method is on reducing the disruptive emotions that derail our rational thinking. Several other chapters cover emotions well. Gilovich (1991) deals in depth with "How We Know What Isn't So." For instance, Gilovich asks if self-handicapping ("I was partying and didn't study for this exam") is to deceive others or ourselves. Actually, other people don't tend to believe that you didn't study. Your real purpose seems to be to avoid learning how able or unable you really are.

The third focus of this section is on increasing the effectiveness of our intuitive, experience-based mind. Reading and logic will not help much here; you will need new experiences.

Purposes

- To become more able to detect fallacious reasoning by others.
- To become more accurate in our own thinking and communication.

Steps

STEP ONE: Recognize common errors in thinking and arguments.

I think it will amaze and maybe horrify you to see how many ways the human mind makes mistakes. This isn't a complete list. Indeed, certain irrational ideas have already been discussed extensively in previous cognitive methods, especially #3 above. These thoughts lead to unwanted emotions which, in a circular fashion, further distort our thinking. In addition, we all have our "touchy topics" or "sore points" that set our minds reeling and mess up our thinking. For example, making a mistake or being surprised may shut down your brain for a moment, being laughed at or treated with disrespect may infuriate you, being envious or jealous may distract your thoughts, etc. It is important to understand what is happening to our thinking in these situations, in order to gain some control and peace of mind.

The recent emphasis on Cognitive Therapy has lead to several books cataloging an assortment of toxic ideas or beliefs. For example, Freeman and DeWolf (1992) say the 10 dumbest mistakes are (1) assuming a catastrophe is about to happen, (2) thinking we know what other people are thinking (or they should know what we think), (3) assuming responsibility for other people's troubles or bad moods, (4) believing too many good things about ourselves and our future, (5) believing too many bad things about ourselves and our future, (6) insisting on being perfect, (7) competing or comparing with everyone and losing, (8) worrying about events that never happen, (9) being abused by our own excessive "shoulds," and (10) finding the negative aspect of everything good. They offer solutions too.

Other books (Lazarus, Lazarus & Fay, 1993) list thoughts that cause us trouble, such as "it is awful every time something unfair happens," "why would anyone settle for being less than perfect?" "I'm always losing," "you can't count on others, if you want something done right, you've got to do it yourself." Likewise, McKay & Fanning (1991) discuss basic beliefs that define our personality and limit our wellbeing. Shengold (1995), a psychoanalyst, contends that infantile beliefs ("I'm omnipotent," "Mom loves me most") continue into adulthood and mess up our lives. Sutherland (1995) and von Savant (1996) also attempt to explain why and how we don't think straight.

Hopefully, by becoming aware of the following typical "errors in thinking" or "cognitive distortions," you should be able to catch some

of your own false reasoning and correct it. An additional corrective step might be to explore your history to gain some insight into the original experiences that now prompts the experience-based mind to think in these stressful, unhelpful ways.

Also included in this list are fallacious, misleading strategies used by debaters to persuade the opponent of their viewpoint. These are ways we get fooled and fool ourselves too.

a. Over-generalizing and common mental errors --coming to a conclusion without enough supporting data. We hear about many teenagers using drugs and alcohol, then conclude that the younger generation is going "to pot." We hear that many black men desert their families and that many black women go on welfare, then assume (pre-judge) that most black men are sexually irresponsible and most black women want babies, not work. On a more personal level, the next teenager or black we meet we may suspect of being "high" or unfaithful. We are turned down by two people for a date, then conclude "no woman/man will go with me." We have found school uninteresting and conclude that we will never like to study. We find two red spots on our nose and conclude we have cancer (also called catastrophizing).

Anecdotal evidence is another example of taking one incident and assuming it proves a larger principle. Example: "I had a case once in which the marital problems disappeared as soon as the woman learned to have orgasms, so I do sex therapy with all couples." This thinking won't surprise anyone, but there is a troubling tendency to give more weight to a single person's opinion or experience--especially if the information is given to us face to face--than to a statistical summary of many people's opinions or experience. One person's story is *not* an accurate sample! Frankly, there is evidence that we don't read tables very well, e.g. we attend more to what a diagnostic sign (like a depression score) is related to, than we do to what the absence of the sign is related to. Let's look at an example.

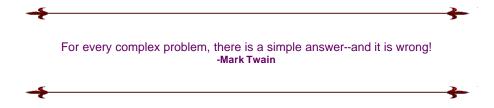
The situation may become a little complicated, however. Suppose you had a psychological test that you knew was 95% accurate in detecting the 5% of people who are depressed in a certain way. Further suppose that 35% of non-depressed people are misdiagnosed as being depressed by this test. If a friend of yours got a high depression score on this test, what are the chances he/she really is depressed? What do you think? The majority of people will say 65% or higher. Actually the chances are only 13%! The test is very good at detecting the 5% who are depressed (and we notice this score), but the 35% "false positives" is terrible (but not noticed), i.e. the test is misdiagnosing over 1/3rd of the remaining 95% of people as being depressed when they are not. But unless we guard against ignoring the base rates (the ratio of non-depressed to depressed persons in the population), we will, in this and similar cases, error in the direction of over-emphasizing the importance of the high test score. Guard against over-generalizing from one "sign." One swallow doesn't make a

summer. Also, guard against ignoring missing information; this is a general human trait which results in wrong and more extreme judgments.

In short, we often jump to wrong conclusions and make false predictions. We spill our morning juice and conclude we are going to have a bad day. We may make too much of a smile or a frown. We may sense sexual attraction where there is none. We see the teacher as disapproving when he/she is not. Indeed, perhaps the most common errors of all are our "mental filters" in one of two opposite directions: negative expectations (of ourselves, of others, or of the world, as we saw in chapter 6) and excessive optimism. The latter is sometimes a "oh, no problem" or a "everything will work out fine" attitude, which is anxiety reducing and advantageous if you still work diligently on solving the problem. If you neglect the problem, it is an attitude that will bring you grief.

Gathering all the relevant information before deciding something is hard work, time consuming, and, often, impossible. We of necessity must operate most of the time with very limited information; most of the time incomplete data isn't a serious problem but sometimes it is.

b. Over-simplification and cognitive biases --it is far easier to have a simple view of a situation, but the simple view is usually wrong, e.g. "Abortion is either right or wrong!" And we have favorite ways of being wrong. Examples: we think things are true or false, good or bad, black or white, but mostly things are complex--gray. We ask, "Is this leader competent or incompetent?" In reality, there are hundreds of aspects to any job, so the question is very complex, "How competent is he/she in each aspect of the job?" You ask, "Will I be happy married to this person forever?" The answer almost certainly is, "You will be happy in some ways and unhappy in others." A simple view of life is appealing, but it isn't real.



Yet, humans (especially the experience-based mind) use many devises to simplify things. The truth is we must interpret so many situations and events every day, we can't do a thorough, logical analysis every time. So we make mistakes. If we make too many misinterpretations, they start to accumulate and our minds go over the edge and we either become unreasonable in our behavior or we become emotional--depressed, anger, scared, etc. The more reasonable we can stay, still using both our rational intelligence and

our experience-based intelligence, the better off we will be. Therefore, we need to recognize the common kinds of mistakes we make.

We use categorical (either-or) thinking and labeling. Some people believe others are either on their side or against them, either good or bad, good socializers or nerds, intelligent or stupid, etc. Then once they have labeled a person in just one category, such as bad, nerd, real smart, etc., that colors how the entire person is judged and responded to, and inconsistent information about the person is ignored. Likewise, if there are either sophisticated or crude people, and you are sure you aren't sophisticated, then you must be crude. The world and people are much more complex than that.

When explaining to ourselves the causes of a situation, we often commit the fallacy of the single cause. There are many examples: Traits of adults are attributed to single events, such as toilet training (Freud), being spoiled, birth order, being abused, parents' divorce, etc. It's usually far more complex than that. When a couple breaks up, people wonder "who was at fault." There are many, many complex causes for most divorces. The first method in chapter 15, "Everything is true of me," addresses this issue. Usually 15 to 20 factors or more "cause" a behavior.

If we do not attend to all the factors, such as the multiple causes of our problems or the many ways of self-helping, we are not likely to understand ourselves or know how to change things (see chapter 2). For example, if you assume your friend is unhappy because of marital problems, you are less likely to consider the role of the internal critic, irrational ideas, hormones, genes, children leaving home, or hundred's of other causes of depression. Similarly, if you assume that the person who got the highest SAT in your high school will continue to excel at every level of education and in his/her career, you are likely to be wrong. There are many factors involved, resulting in the "regression to the mean" phenomena, which is illustrated by having an unusually high or low score on some trait, but, in time, your score on that trait tends to become more average.

On the other hand, having a lot of evidence is sometimes not enough. Even where you have considerable evidence for a certain view, such as for ESP or life after death, that evidence must be stronger than the evidence against the view or for an alternative interpretation. Consider another example: "Drugs have reduced panic attacks and since intense stress is caused biochemically, psychological factors have little or nothing to do with treating panic attacks." You must weigh the evidence for and against all three parts of the statement: drugs work, stress is chemical, and panic is reduced only by chemicals. All three statements would be hard to prove.

Few of us are without sin (misjudgment). Almost every judge is biased on some issue, e.g. at the very least, the therapist or scientist or sales person wants his/her product to be the best. When evaluating other people's judgments, we have many biases, including a tendency

to give greater weight to negative factors than to positive factors, e.g. being told "he sometimes exaggerates" is likely to influence us more than "he is patient." Likewise, in marriage, as we all know, one scathing criticism or hurtful act may overshadow days of love and care.

Another favorite way to over-simplify is to find fault: "It was my spouse's fault that we got divorced." "I failed the exam because it had a lot of trick questions." Obviously, this protects our ego, as does an "I-know-that" hindsight bias: When asked to predict behavior in certain situations, people may not have any idea or may do no better than chance if they guess, but when told that a certain behavior has occurred in that situation, people tend to say, "I expected that" or "I could have told you that."

Another common error is the post hoc fallacy --A preceded B, so A must have caused B. Example: Young people started watching lots of television in the 1950's and 60's, after that ACT and SAT scores have steadily gone down; thus, TV watching must interfere with studying. In truth, TV may or may not contribute to the declining scores. We don't know yet (too many other changes have also occurred).

Likewise, a correlation does not prove the cause. Examples: the economy gets better when women's dresses get shorter. Also, the more Baptist ministers there are in town, the more drinking is done. Obviously, women showing more leg don't improve the economy nor do ministers cause alcoholism. Other more complex factors cause these strange relationships. (On the other hand, a correlation clearly documents a relationship and if it seems reasonable, it may be a cause and effect relationship. Thus, in the absence of any other evidence of cause and effect, the correlation may suggest the best explanation available at this time. But it is not proof.)

Research has shown another similar fallacy: the most visible person or aspect of a situation, e.g. the loudest or flashiest person, is seen, i.e. misperceived, as the moving force in the interaction (Sears, Peplau, Freedman & Taylor, 1988), even though he/she isn't.

The answer or hunch that first comes to our mind, perhaps merely because of a recent or a single impressive experience, will often be the basis for our judgment--and it's often wrong. Examples: If a friend has recently won the lottery or picked up someone in a bar, your expectation that these things will happen again increases. If you have recently changed your behavior by self-reinforcement, you are now more likely to think of using rewards. In a similar way, assuming how-things-are-supposed-to-be or using stereotypical thinking impairs our judgment. Examples: If you hear the marital problems of one person in a coffee shop and the same problems from another person in a Mental Health Center, you are likely to judge the latter person to have more serious problems than the coffee shop patron.

We expect clients in Counseling Centers to have grave problems. Guard against these impulsive first impressions.

Here is a clever illustration of the power of the first impression to influence our overall judgment:

A. If you start with \mathcal{S} and multiply it by 7 X 6 X 5 X 4 X 3 X 2 X 1=

B. If you start with 1 and multiply it by 2 X 3 X 4 X 5 X 6 X 7 X 8=

Without figuring, what do you guess the answers are?

The average guess for A is 2250 and 513 for B. The correct answer for both is 40,320. Your ability to guess numbers isn't very important, but it is important that we recognize the fallibility of our minds. Our ability to judge the actual outcome of some economic or political "theory" or promise is not nearly as high as the certainty with which we hold our political beliefs. Likewise, our first impressions of people tend to last even though the first impressions are inconsistent with later evidence. This is true of trained therapists too.

It may come as a surprise to you but considerable research indicates that, in terms of predicting behavior, better trained and more confident judges are frequently not more accurate than untrained, uncertain people. Why not? It seems that highly confident judges go out on a limb and make unusual or very uncommon predictions. They take more chances and, thus, make mistakes (which cancels out the advantages they have over the average person). The less confident predictor sticks closer to the ordinary, expected behavior (high base rate) and, thus, makes fewer mistakes. (Maybe another case where over-simplification is beneficial.)

While it is not true of everyone (see chapter 8), there is a tendency to believe we are in control of our lives more than we are (not true for depressed people). For example, people think their chances are better than 50-50 if you put a blue and a red marble in a hat and tell them that they will win a real car if they pick out the blue marble, but they get only a match box car if they draw out the red marble. Gamblers have this I'm-in-control-feeling throwing dice, obviously an error. We want to believe we are capable of controlling events and we like others who believe in internal control (Sears, Peplau, Freedman & Taylor, 1988); it gives us hope. This is also probably related to misguidedly believing in "a just world," i.e. thinking people get what they deserve. We believe good things happen to good people ("like me") and bad things happen to bad people. There is little data supporting this belief, but, if bad things have happened to you, people will conclude you must have been bad and deserve what happened (and, therefore, many will feel little obligation to help you).

Some people believe they are the sole cause of other people's actions and feelings: "I am making him so depressed." Not only do some people feel in control, others feel they *should be* in control, i.e. have special privileges (a prince in disguise). "I shouldn't have to help clean up at work." "Everybody should treat me nicely."

A special form of over-simplification is cognitive bias, i.e. a proneness to perceive or think about something in a certain way to the exclusion of other ways. One person will consistently see challenges as threats, while another person will respond to the same challenging assignments as opportunities to strut his/her stuff. Cognitive biases have already been mentioned in several psychological disorders, e.g.:

<u>Problem</u>	Thinking bias
Anxiety	Expectation that things will go wrong.
Anorexia	A belief that one is getting fat and that's terrible.
Depression	Negative view of self, the world, the future.
Anger	A belief that others were unfair and hurtful;
Conformity	Exaggeration of the importance of pleasing others.
Social addiction	I can only have fun with my friends.

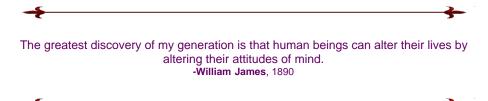
There is one cognitive bias so common it is called the fundamental attribution error: we tend to see our behavior and feelings as caused by the environment but we think others' behavior and feelings are caused by their personality traits, needs, and attitudes. In short, we are psychoanalysts with others but situationists with ourselves. Example: When rules are laid down to a teenager, the action is seen by the parents as being required by the situation, i.e. to help the adolescent learn to be responsible, but the teenager becomes a little Freud and sees the rules as being caused by the parents' need to control, distrust, or meanness. When rules are broken, however, it is because "the kid is rebellious" (parents now do the psychoanalyzing) or "my friends wanted me to do something else and, besides, my parents' rules are silly" (the teenaged Freud suddenly doesn't apply this psychology stuff to him/herself). This kind of thinking is oversimplified and self-serving. More importantly, it causes great resentment because the troubles in a relationship are attributed to the bad, mean, selfish traits of the other person.

In spite of the fundamental attribution error, we will make an exception for ourselves when we are successful: Our successes are attributed to positive *internal*, not situational, factors--our ability, our hard work, or our good traits. In keeping with the fundamental attribution error, our failures are usually considered due to bad external factors--the lousy system, the terrible weather, someone else's fault, bad luck, and so on. Sometimes we are so desperate to protect our ego from admitting we don't have the ability to do something that we will actually arrange to have a handicap (see self-handicapping in method #1) or excuse for failing, "I was drunk," "I

didn't get any sleep," "I forgot," etc. Sometimes, we just lie and make up an excuse, "I was sick," "I'm shy," "I have test anxiety," "I've had bad experiences," etc. Likewise, people exaggerate their contributions to any desirable activity; they tend to see themselves as being more important or more responsible than others. And, we believe that the majority of others agree with our opinions, even when that is clearly not the case. These misconceptions--self-cons really--help us feel better about ourselves by overlooking important facts.

We consistently misperceive how others feel about us. For instance, most people think most others see them like they see themselves. That isn't true (Kenny & DePaulo, 1993). Other people's reactions to and feelings about us vary greatly; we are not liked equally by everybody, just as we don't like everyone equally. But we think most people see us in about the same way. We are largely unaware of the discrepancy between how we think another person views us and reality (and many other people hope to keep it that way).

Many people also tend to find psychological causes for events and ignore other causes: "My head is hurting, I must be up tight," "I forgot to call him, I must not want to do it." Other people find mystical causes: "Hypnotic regression to past lives and the experiences of people who have died and come back to life prove that there is a life after death." Most of us find "good" socially acceptable causes for what we do, called rationalizations (see chapter 5). But, if we do harm someone, we may illogically attempt to deny our responsibility by denying any intention to harm, "I didn't mean to hurt you," or by blaming the victim, "He was a scum." These are all biases.



c. Self-deception --when some thought or awareness makes us uncomfortable, we have a variety of ways to avoid it (Horowitz, 1983):

- Avoid logical conclusions--"I have never taken my studies seriously, but I'm going to really hit it next semester." "He'll stop drinking if we have a baby."
- Avoid appropriate feelings--"I don't think much about the millions who test positive for AIDS virus or the 50 million children who die from *preventable* diseases every year."
- Avoid working on solutions--"I can't do anything about world hunger...nuclear pollution...poor teachers..."

- Avoid unpleasant memories--"I won most of the time I gambled last year."
- Avoid the truth--"It was an accident; it won't happen again" (a battered women in an emergency room with a broken arm and two teeth knocked out). "I only spend a few bucks on drugs and booze" (a student who spends \$25 to \$50 a week on drugs and alcohol).
- Avoid reality, replace it with self-enhancing fantasies. John Dean, President Nixon's Legal Counsel, distorted his role in the Watergate scandal, making himself appear as having a fantastic memory (he was frequently wrong), as being highly successful and praised by Nixon (not true). Our memories often become wishful fantasies.

I would add to this list: avoid reality by believing in mystical forces and myths. Did you know that more people in America believe in ESP than believe in evolution? that 1 in 4 Americans think they have had a mental telepathy experience? that 1 in 6 have spoken with the dead? that 66% of Americans believe in the devil? that 1 in 10 say they have talked with the devil? There is some pay off for believing in superstition, astrology, and psychics. To the extent we surrender to or depend on mystical forces, we lose a chance to discover the real causes and make things better.

Daniel Goleman (1985) provides a fascinating book about self-deception as a way of avoiding stress. Lockard and Paulhus (1988) have edited a more specialized text. When patients with a divided brain are given written instructions to the right half of the brain only, e.g. "leave the room," they do not realize they received the directions. Yet, they obey the instructions. Furthermore, they believe they are directing their own behavior and say, "I want to get a drink." Perhaps many of the things we think we have consciously decided were actually decided by unconscious thought processes for reasons unknown to us. Denying our blind spots makes it impossible to cope. Admitting our blind spots gives us a chance to cope.

We are taught as children to deny the causes of our emotions. Children hear: "You make me so mad," "You make me so proud," "I can't stand the messes you make," and on and on. Is it any wonder that adults still assume that other people cause their feelings?

It isn't just that we avoid the unpleasant. We also seek support for our beliefs, our prejudices, our first impressions, our favorite theories, etc. Example: The psychoanalyst finds sex and aggression underlying every problem. The behavioral therapist finds the environment causing every problem. The psychiatrist finds a "chemical imbalance" behind every unwanted emotion. The religious person sees God everywhere; the atheist sees Him no where. We all like to be right, so "don't confuse me with too many facts." As we think more about an issue, our opinion usually becomes more extreme.

The mind is like a parachute. It only works when it is open.



In all fairness, it must be mentioned that investigators are busy documenting that self-deception may at times be beneficial to us physically and emotionally (Snyder and Higgins, 1988; Taylor, 1989). Examples would include certain kinds of rationalizations, excuses, unrealistic optimism, denial of negative information, illusions enhancing oneself, and so on. They make us feel better.

d. Attack the messenger --if you can't attack the person's argument or reasoning, attack the person personally. If you don't like what a person is arguing for but can't think of good counter arguments, call the speaker names, such as Communist, homo, women's libber, a dope, etc., or spread nasty rumors about him/her. An "ad hominem" attack means "against the man," not the argument, such as "If you aren't a recovered alcoholic, you can't know anything about addiction."

Likewise, if you are being criticized by someone, there is a tendency to counterattack with, "You do something that is worse than that," which is totally irrelevant. Besmirching the speaker, "You're so stupid," doesn't invalidate the message.

Another way to unfairly attack an argument is to weaken it by making it look foolish. This is called a straw man argument. Examples: The only reason to stop smoking is to save money. You won't make love with me because you have a hang-up about sex.

- e. Misleading analogies --making comparisons and drawing conclusions that are not valid. Keep in mind, many analogies broaden and clarify our thinking. But, other analogies often confuse our reasoning, e.g. suppose you are arguing against nuclear arms by saying that nothing could justify killing millions of innocent people. Your opponent challenges, "Wouldn't you have the guts to fight if someone were raping your daughter?" That is a silly, irrelevant, hostile analogy which is likely to stifle any additional intelligent discussion. Suppose someone expresses an idea and others laugh at it. The person might respond, "They laughed at *(some great person)* too!" But that is hardly proof that his/her idea is great. Many foolish ideas have been laughed at too.
- f. Citing authority --reverence for a leader or scholar or authority can lead us astray. Aristotle was revered for centuries; he was smart but not infallible. We are raised to respect authorities: "My daddy says so," "My instructor said...," "Psychologists say...," "The Bible says...." Some people become true believers: "Karl Marx said...," "The

president says...," "E. F. Hutton says...." Any authority can be wrong. We must think for ourselves, circumstances change and times change.

Sometimes the authority cited is "everybody" or intelligence, as in "Everybody knows...," "54% of Americans believe...," "Everybody wants a Mercedes," "It is perfectly clear...," "If you aren't stupid, you know...." Likewise, an old adage or proverb may be used to prove a point, but many adages are probably not true, e.g. "Early to bed, early to rise...," "Shallow brooks are noisy," "He who hesitates is lost," "The best things in life are free," etc. Knowing the truth takes more work-more investigation--than a trite quote.

A similar weakness is over-relying on general cultural beliefs. It is called "arguing ad populum" when social values are blindly accepted as truths: "Women should stay home," "Men should fight the wars," "Women are more moral than men," "God is on our side," "Marriage is forever," etc.

Another undependable authority is one's intuition or "gut feelings." "I just know he is being honest with me. I can tell." We tend to be especially likely to believe a feeling if it is strong, as when we say "I'm sure it is true, or I wouldn't be feeling it so strongly." A Gestalt therapist might say, "get in touch with your gut feelings and do what feels right." Neither intuitive feelings nor brains have a monopoly on truth or wisdom.

- g. Over-dependence on science and statistics --we take one scientific finding and pretend that it provides all the answers. Just as we revere some authority and look to him/her for the answers, we accept conclusions by scientists without question. While science is the best hope for discovering the truth, any one study and any one researcher must be questioned. Read Darrell Huff's (1954) book, *How to Lie with Statistics*. Also, watch out for predictions based on recent trends: although life expectancy and divorce rate have doubled or more while SAT scores and birth rate drastically declined, it is unlikely that humans will live for 200 years in 2100 and have several spouses but only a few retarded children. Don't be intimidated by numbers. Ask the statistician: "How did you get these numbers?" Ask yourself: "Does this make sense?"
- h. Emotional blackmail --implying God, great causes, "the vast majority," your company, family or friend supports this idea. Propagandists make emotional references to our belief in God (and our distrust of the unbeliever), to freedom, to a strong economy, to "this great country of ours," to family life or family values, to "the vast majority" who support his/her ideas. When you hear these emotional appeals, you'd better start thinking for yourself. Remember: in war both sides usually think God is on their side. Remember: 100 million Germans can be wrong. Remember: freedom and wealth (while others are starving, uneducated and poor) may be sins, in spite of being in a "Christian" democracy. Remember: millions have gone to war, but that doesn't make war right or inevitable.

When it is implied that your friends and/or family won't like you, unless you believe or act certain ways, that is *emotional blackmail*, not logical reasoning. Cults, religions and social cliques use this powerful method when they threaten excommunication, damnation, and rejection.

By the same token, it may become clear to you that your company, lover, friend, family and so on may be real pleased *if* you think or act in a certain way. This is a powerful payoff, but that does not make the argument logical or reasonable. In the same way, many want to buy and wear what is "really in" this spring. To buy something just because millions of others have done so is called *the fallacy of the appeal to the many*.

An appeal to pity may be relevant at some times (Ethiopians are starving) but not at others (give me a good evaluation because I need the job). A good job evaluation must be based on my performance, not my needs.

i. Irrelevant or circular reasoning --we often pretend to give valid reasons but instead give false logic. Moslems believe their holy book, the Koran, is infallible. Why? "Because it was written by God's prophet, Muhammad." How do you know Muhammad is God's prophet and wrote the book? "Because the Koran says so." That's circular and isn't too far from the child who says, "I want a bike because I need one." Or, from saying, "Clay knows a lot about self-helping because he has written a book about it." Or, from, "Man is made in God's image. God is white. Therefore, blacks are not human."

To argue that grades should be eliminated because evaluations ought not exist is "begging the question," it gives no reasons. Likewise, "I avoid flying because I'm afraid," and "I'm neurotic because I'm filled with anxiety" are incomplete statements. Why is the person afraid? ...what causes the anxiety?

To argue that people should help each other because people should always do what feels good is illogical--feeling good is not necessarily relevant to the issue of doing good unto others, helping others frequently involves making sacrifices, not having fun.

j. Explaining by naming --by merely naming a possible cause we may pretend to have explained an event. Of course, we haven't but many psychological explanations are of this sort. Examples: Ask a student why he/she isn't studying more and he/she may say, "I'm not interested" or "I'm lazy." These comments do clarify the situation a little but the real answers involve "Why are you disinterested? ...lazy?" How often have you heard: "He did it because he is under stress... hostile... bisexual... introverted... neurotic... self-centered"? True understanding involves much more of an explanation than just a name.

- k. Solving something by naming the outcome goals --when I ask students how to deal with a certain problem, such as procrastination or shyness, they often say, "Stop putting things off" or "Go out and meet people." They apparently feel they have solved the problem. Obviously, solving a problem involves specifying all the necessary steps for getting where you want to go, not just describing the final destination. Freeman and DeWolf (1989) describe "ruminators" as regretting their past and wishing they had lived life differently. Such persons think only of final outcomes, not of the process of getting to the end point. Langer (1989) says a self-helper will focus on the steps involved in getting what he/she wants, not simply on the end result. A student must study before he/she becomes a rich doctor.
- I. Irrational expectations and overestimating or underestimating the significance of an event should also be avoided --believing things must or must not be a certain way (see method #3). Making wants into musts: "I have to get her/him back." "I shouldn't make mistakes." "Things should be fair." "I should get what I want." A related process is *awfulizing or catastrophizing.* "I'll bet my boy/girlfriend is out with someone else." "I don't know what I'll do if I don't get into grad school." "If something can go wrong, it will." "Flying is terribly dangerous." In short, making mountains out of mole hills. Of course, there is the opposite: "Oh, it (getting an A) was nothing" or "Employers don't care about your college grades, they want to know what you can do" or "I'm pregnant but having a baby isn't going to change my life very much." That's making mole hills out of mountains.

It is fairly common for certain people in a group to assume that others are watching or referring to them specifically. Often, such a person makes too much out of it. Thus, if someone makes a general but critical comment or walks out of a meeting, such people feel the individual's action is directed at them. Or, if a party flops, certain people will believe that it is their fault. This is called personalizing. Another common assumption is that the other person intended to make you feel neglected, inferior, unathletic, or whatever. This thinking that you know what the other person is thinking is called mind reading.

m. Common unrealistic beliefs are similar to the irrational ideas in I. above and in method #3 (Flanagan, 1990). Included are the assumptions that most people are happy and that you should be too. This idea may come from people putting on their "happy face," so they look happier than they are. Seeking constant happiness is foolish; with skill and luck we can avoid constant un happiness. Secondly, we humans often assume that others agree with us and do or want to do what we do. Sorry, not true. We are very different. If you sat in one seat in one room alone for month after month (like I am doing writing this), many of you would feel tortured. A few of you, like me, would like it. Some of us love silence; many people experience sensory deprivation if music isn't playing most of the time. The party animal

can't understand the person who wants to quietly stay at home. Many of these differences can cause serious conflicts if one person or both start to assume the other person has a problem and is weird, a nerd or boor, a social neurotic, etc. Lastly, there is the very inhibiting belief that you can't change (see chapter 1) and that others won't change. These beliefs exist because they meet certain needs, like a need to be right or accepted, or reflect wishful thinking, like wanting to be very happy. Instead, they may cause unhappiness.

n. Blocks to seeing solutions --a very clever book by James L. Adams (1974) describing many blocks to perceiving and solving a problem. These may be *perceptual* blocks, such as stereotyping and inflexibility, or *emotional* blocks, such as a fear of taking a risk and a restricted fantasy, or *cultural* blocks, such as thinking intuition and fantasy are a waste of time, or *intellectual* blocks, such as lacking information, trying to solve the problem with math when words or visualization would work better, and poor problem-solving skills. Adams also suggests ways of overcoming the blocks and cites many other good books.



It is so easy and there are so many ways to be wrong, but it is so hard and there are so few ways to be right.



By reading this bewildering collection of unreasonableness, it is hoped you will detect some of your own favorite errors. Unfortunately, I was probably able to gather only a small sample of our brain's amazing productivity of nonsense (for more see Gilovich, 1991, and Freeman & DeWolf, 1992, and for overcoming it, see Gula, 1979). Next, you need to diagnose your unique cognitive slippage.

STEP TWO: Recognize the cognitive factors that affect your coping with problems and managing your emotions. Discover your self-help Achilles' heel.

It is obvious that some mental errors are self-inflating, others are self-defending, some are "leftovers" from emotional experiences, and some may be due to the quirkiness of our cognitive processes. What are the more common obstacles to living wisely and effectively? Seymour Epstein (1993) tried to answer that by asking his students to record their most pleasant and most unpleasant emotion each day for a month. They also recorded their automatic thoughts associated with these emotions. From this data and further research, he identified six characteristics of "constructive thinking," i.e. the most successful players in the game of life. He found two constructive ways of thinking and four destructive ways. Here are sample items:

Constructive thinking: (the more of this, the better you cope)

- Emotional coping: I don't worry about little things or the past; I don't demand perfection; I accentuate the positive most of the time; I avoid the "blame game;" I realize "you can't win them all," etc.
- Behavioral coping: I do something when I'm unhappy; I see problems as challenges; I accept that unpleasant jobs have to be done; I cheer myself on rather than criticize myself; I carefully think through how to handle most problems; I handle things pretty well most of the time, etc.

Destructive thinking: (the less of this, the better you cope)

- Categorical thinking: I feel people are either for you or against you; if someone does something wrong, they should be punished; I am quick to judge people; I usually believe I know the right way to do something; people are either good or bad.
- Superstitious thinking: Wishing for something or talking about it keeps it from happening; it seems like a string of good luck is followed by bad luck; there are good and bad omens; some people just have bad luck; I don't walk on cracks or under ladders or across a black cat's path.
- Mystical thinking: I think there are ghosts and spirits; I believe in my good luck charm; some people can predict the future and some can read minds; my astrology sign is pretty accurate; occultism scares me; the future is more determined more by spiritual forces than by humans.
- Unwarranted optimism: If you have enough willpower, you can
 do anything; everyone should love their parents; after a
 success, I feel I can do anything; religious people can be
 depended on; I think good things will happen to me if I am
 good; my family calls me a lucky person, so I will do well in life.

You can estimate how you would do on Epstein's tests designed to predict success in living. The subtests may reveal weaknesses you need to change. Obviously, some of the constructive thinking comes from the rational mind and some from the experience-based mind; this includes relaxing, planning, being positive and active. The destructive thinking comes mostly from the intuitive (experiential) mind; this includes over-simplifying, inflexibility, being judgmental, believing in fate, luck, and superstitions, believing in mystical forces and psychic powers, and a vague belief that things will turn out wonderful. Wonder why beliefs in luck, superstitions, and spiritual-mystical-psychic powers are associated with poor coping? Perhaps because these people depend on outside forces to solve their problems, rather than depending on their own constructive thinking.

STEP THREE: Use good reasoning to make your own good decisions or arguments.

What is a good thinker? Look up *The Mind's Best Work* by D. N. Perkins (1981) for outstanding examples, but for ordinary, everyday thinkers Ruggiero (1975) says:

- He/she has good ability--a vivid imagination and accurate intuition
- He/she tries to understand the issue, including noting and questioning his/her own reaction to the issue before accepting his/her first impressions.
- He/she carefully decides what evidence is needed to solve the problem and gathers the data accurately.
- He/she draws a tentative conclusion based on the facts, avoiding "pat" and emotionally appealing answers.

In the simplest sense, one might say that the best way to win an argument is to be right (see chapter 13). Being "on the side of truth" gives you enormous advantage. But we can never know the truth for sure. That is why scientists speak a special language, such as "the data suggests...," "the difference is significant at the .05 level" and so on. A scientist is never certain; only true believers (basing their opinions on faith) are certain.



If a man's actions are not guided by thoughtful conclusions, then they are guided by inconsiderate impulse, unbalanced appetite, caprice, or the circumstances of the moment.

-John Dewey



In contrast to the poor arguments discussed in step 1, Missimer (1986) says *Good Arguments* have these characteristics:

- Define your terms and the issue clearly, then state your claim-what you believe to be true or should be done--and give your reasons. This is the essence of an argument; it consists of an issue, conclusions, and reasons.
- A critical thinker, listening to an argument, will look for alternative arguments and try to improve the reasoning. Try arguing for the opposite conclusion. Try opposing the reasons given by the other person. Try acknowledging the validity of the opponent's reasons, but argue that your reasons for a different conclusion are stronger than his/her reasons. If that isn't possible, look for exceptions, places where his/her reasoning doesn't hold up, e.g. you say school/work is boring, but Jane/John loves school/work. Look for big factors that have been overlooked or for the strongest-case kind of argument. Finally, maybe it is clear that more evidence is needed before a conclusion can be reached, in which case suggest some fact-finding experimentation.

• Ask, "How good is the evidence?" Evidence may be based on scientific experimentation, after-the-fact correlations (smoking and cancer), case studies (the effects of divorce on children), or an appeal to the most convincing situation (torture is justified to save hundreds of lives). Doubt any claim that something has been "proven;" scientists say, "The evidence to date suggests...." Search for and collect evidence for a different conclusion. Evaluate the data, the supporting facts, and the reasoning; ask yourself repeatedly how strongly the conclusion is supported by the evidence.

When reasoning deductively, you start with a statement about "all," "every" or "only," and the conclusion logically follows: (1) Everyone in my group of friends likes rock music. (2) Bill is in my group. (3) Therefore, Bill likes rock. The real question is if (1), the generalization, is accurate.

When using another form of reasoning called inductive, you start with some specific observations and draw generalizations: (1) I noticed that many students in my school like rock music. (2) Therefore, "most" students like rock music. The question here is: Have you made enough accurate observations to warrant making the "inductive leap" to *most* students in your school? to students in the state? to students everywhere in the world? Statisticians use careful sampling techniques and statistics to make accurate predictions, such as what people will buy or how they will vote.

• Look for the assumptions being made. If someone says, "Abortion is murder," one has to question the term murder. The dictionary says murder is the killing of one human being by another. When is a fetus a human being? When its heart beats (15 days)? When it has brain waves (4th month)? When it has a 50-50 chance of surviving on its own without massive medical assistance? When he/she is born at full-term? These are improvable personal opinions, individual beliefs, but they are critical to the idea of murder. Unfortunately, emotional issues, like "Abortion is murder," get infused with dogmatic religious beliefs which the believers would like to force on others.

If someone says, "Students are either serious or party animals," the assumption is being made that students can not be both serious and party-lovers and that students can not be disinterested in both studies and parties.

In most arguments, there are many assumptions about both values and facts. Many are subtle, e.g. that hiring the "best person" is better than affirmative action, that personal gain is of more value than serving others, that expressing anger reduces future anger, and so on. Uncover the assumptions being made and decide if you agree with them.

• Rather than being a hostile debater and trying to win, try to think constructively, i.e. by thinking together perhaps you and the other person can come closer to the truth.

STEP FOUR: Develop other skills and methods that enhance your critical, clear thinking.

We all have learned about scientific methods in many classes throughout school. These methods help us think straight and, hopefully, realize there are many possible causes for any event. By experimentally varying one variable while holding other variables constant we can find "laws," what causes (contributes to) what. In everyday life, there may be too many factors and too little control to draw conclusions, but the idea is still valid: carefully observe the connections between specific causes and their effects. Ruchlis (1992) teaches us how to evaluate evidence and how to detect common deceptions.

For fifty years educators, psychologists and management consultants have tried to teach creativity, problem solving, and productive thinking (see section f below). There is evidence that such skills can be taught; however, thus far the skills taught seem to be used largely in the subject matter areas in which they were learned (Mayer, 1984). For example, if you teach students strategies for solving math or engineering problems, the students do not automatically learn to use better strategies to solve social or personal problems. That isn't surprising. Probably very different strategies are needed in different problem areas, such as math and self-control.

As mentioned in the introduction, recent findings indicate that good problem solvers need (1) lots of specific knowledge (e.g. 10 years of practical experience and lots of research-based information) and (2) specific instruction and practice on how to use that knowledge in understanding the problem, setting goals, discovering and organizing a plan of attack, carrying out the treatment plan, and evaluating the outcome. In short, there are still no easy ways to become an expert in any area, including self-management.

Problem-solving techniques (for self-help) are given in chapter 2. Decision-making, persuasion, and other thinking skills are taught in chapter 13. Methods for correcting irrational thoughts that produce unwanted emotions are given in this chapter. Chapters 5 to 8 help control emotions that may influence our thinking and attitudes. Self-understanding methods are given in all the chapters but especially 9, 14, and 15. Self-awareness is surely critical because some of the major obstacles to clear thinking are within us, i.e. our defenses, our emotions, our blind spots.

Also, according to Alice Isen and others, happy, relaxed people in general think more clearly and creatively than unhappy people (Hostetler, 1988). However, happy people, in some situations, tend to over-simplify the problem, use impulsive hunches and guess at the

solution and, thus, are wrong more often (but they may not care!). The notion that relaxation enables us to learn more or better is an old idea from the 1960's or earlier. But there is also evidence that concentration while reading is improved if the body is moderately tense. Clearly, much more research is needed.

Benson's (1987) latest book, with the hokey title of *The Maximum Mind* suggests (1) learning to relax, as in his first book (see chapter 12), (2) deciding how you want to change and that you *can* change-with the help of a "maximum mind guide," meaning a counselor, and (3) using "focused thinking" about the desired changes 10-15 minutes a day, like being happier or more creative--which supposedly helps "rewire" your mind. It appears that Benson in his first book rediscovered meditation and now has re-invented self-hypnosis as well.

Finally, you must keep in mind that straight thinking requires more than mental rumination by yourself. Ideas must be tested in reality. Talk to others with different views (not just supportive friends). Try out your ideas, see if they work, see if others agree, and see if your ideas can be improved.

STEP FIVE: Ways to improve your intuition or your experience-based mind, which is needed along with the knowledge, skills, and logic of the rational mind.

Epstein and Brodsky (1993) believe you can't change your automatic thinking (intuition, irrational ideas, biases, etc.) by willpower nor by reading and getting some intellectual understanding. He says the experience-based mind only changes with experience. So, the main priority is to identify the automatic thoughts that cause your problems, that arouse unwanted emotions or create misconceptions (this is much like detecting the irrational ideas in method #3). You need to find the experience-based feelings, thoughts, memories, opinions, judgments, attitudes, etc. which could explain why you had the emotions or the faulty thinking you had. Often it is your view of the situation that determines how you respond emotionally, such as berating yourself, attacking someone, or withdrawing. Examples: Losing one's boy/girlfriend or doing poorly in one class is seen as ruining your entire life. A decision by a supervisor to re-do part of your work is seen as an insult or as leading up to being fired. The question is: Is your view or interpretation of the situation or other peoples' behavior rational? If not, why did you misunderstand the situation? A review of step 1 may help you recognize your thinking errors. A review of similar prior traumatic experiences may help you recognize the source of your emotional reactions.

Your experience-based mind must have the experience over and over of being corrected and taught to think and feel differently (more rationally) about the situations. Every day take time to analyze a distressing event in this way: (1) explain to the intuitive mind how it misunderstood the situation or person; (2) note the mental rumination or fantasies that resulted from your faulty interpretation of the

situation; (3) note how you responded internally and overtly in the situation. Then, go back over the event, pointing out to the experience-based mind why it went wrong, where the emotions came from, and so on. Recognize how your train of thought, following the mental error or misinterpretation, went awry, making the situation worse. Lastly, review how you could have responded in a better way, if you had seen the situation accurately. This process of substituting constructive thinking (a new rational view) for destructive thinking is critical; otherwise, your intuitive mind will continue to misread future situations.

This process is very similar to disputing irrational ideas in method #3 and to reframing in chapter 15. Perhaps the best way to change your experience-based mind is to have new experiences. If you fear your boss, get to know him/her better and talk to others about him/her. If you are uncomfortable with very old people, get to know several. If you feel you couldn't be a leader, find a cause and try your hand at leadership roles.

In chapter 15 several methods (getting in touch with your feelings, focusing, guided fantasy, and meditation) are described which will enable you to learn more from your experience-based mind. This, in turn, will help you understand the feelings that underlie many of the emotions and misinterpretations which cause you problems. Emery (1994) wrote a workbook to increase your intuition, especially in the workplace and in leadership positions. Ruchlis (1992) teaches you ways to evaluate the in-coming evidence and be a little more reasonable in daily life.

Time involved

It may take you only 30 minutes to read the steps above and ask, "What are the facts supporting a particular belief I have?" On the other hand, to understand the cognition underlying a troublesome reaction you have in a specific situation may take a few hours. Correcting the intuitive mind by experiencing constructing thinking will take 15 minutes every day for a month or so. If you want to clean up your cognition generally and become an expert thinker and problem-solver in some complex general area, like self-help, it may take years.

Common problems

The first obvious problem is failing to recognize our well entrenched erroneous thinking or reasoning. Simply reading the examples in step 1 will almost certainly not correct our thinking. We may need to be confronted by ourselves (our rational mind?) or by others many times to acquire critical thinking skills. Actually, many different skills and much knowledge are needed to be a straight, creative thinker. We need to acquire much knowledge and know how to accurately recall that information, how to analyze arguments, how to test hypotheses, how to make decisions, and how to problem-solve. There are several somewhat applied courses addressing these issues

offered around the country; the best-selling textbook about critical thinking skills is by Diane Halpern (1995). This kind of training should come before a lifetime of careful thinking.

Effectiveness, advantages and dangers

Hopefully, within the context of our emphasis on critical thinking in schools, we will soon have many studies of the effectiveness of this classroom training in terms of practical decision-making at work, in interpersonal relationships, in guiding one's own life. And, fortunately, Venezuela has already done a large-scale evaluation of teaching thinking skills in schools (Herrnstein, Nickerson, de Sanchez and Swets, 1986). The question was: Can good thinking--observation, reasoning, decision-making, inventiveness, problem-solving, and persuasive communication -- be taught? To answer the question, several teachers developed a year-long, 56-lesson course and taught it to 400 seventh graders. This remarkable study convinced the experimenters that cognitive, general intellectual skills can be taught. Note that the course took an entire year and altered how the teachers and students interacted (students became more active and logical, asking more questions and acting more independently). As yet, we do not know which parts of the course experience were helpful, how much is a placebo effect, nor how long the effects will last. Much more research is needed. The content of that course has been translated into English (Adams, 1986).

Developing Attitudes that Help You Cope



The same circumstances may crush one person, hardly concern another, and even be considered an interesting challenge by a third person. What makes the difference? One's attitude! Thus, advice-givers often suggest certain attitudes: "have a positive mental attitude," "believe in yourself," "look for the best in people," "whatever happens is for the best--it's God's will," and so on. These ideas may help some people feel better and perhaps do better, //fthey can figure out how to adopt the suggested attitude. Clearly, a negative attitude-dire expectations, pessimism, distrust, fear, anger, fault-finding--can create problems. A positive, excited, hopeful, confident, enthusiastic person can be a joy to be with (and he/she sells more insurance). The problem is how to get rid of bad attitudes and learn good ones.

Our attitudes influence our behavior and vice versa (Sears, Peplau, Freedman & Taylor, 1988). Not surprising, many attitudes have already been dealt with in this book. Examples: in chapters 1 and 2, positive but realistic attitudes about self-help are advocated. In chapter 3, the importance of deciding on your major purpose for living is emphasized; the Golden Rule is advocated. A major form of therapy,

Frankl's (1970) Logotherapy, means "health through meaning." In chapters 2 and 4, the belief that you can change your behavior, that your problems are solvable by you, leads to better problem solving. In chapters 5 and 6, the expectation that things will get worse and that you will be helpless produce anxiety and depression or a pessimistic attitude. In chapter 7, the view that others should have behaved differently leads to anger (and as we have seen in this chapter, determinism leads to tolerance). In chapter 8, the submissive person must start to believe she/he has a right to equal treatment in order to effectively demand her/his rights. In chapter 9, if we think of ourselves as being the result of several constantly competing parts, we will have more self-understanding. In chapter 10, we will see that our attitudes toward the opposite sex, marriage, and sexuality have great impact on our interpersonal relations, sexual preferences, commitment, etc.

An attitude is defined as a manner, disposition, or feeling about a person, event, or thing. Recognizing the three components of every attitude may be helpful: (1) the cognitive or knowledge part (what you know, think, or believe about the person or situation), (2) the feeling or evaluative part (what emotions you have towards the person or situation), and (3) the behavioral part (your actions with the person or in the situation). Ordinarily, the cognitive aspect of an attitude is much more complex than the feeling aspect, e.g. our positive or negative thoughts about virginity are much more complex than our emotional or behavioral reactions in sexual situations. Perhaps because of it's simplicity, the emotional part of an attitude usually has more influence over our behavior than the complex, ambivalent, and easily overlooked cognitive part has, but each part may affect the other two parts (Sears, Peplau, Freedman & Taylor, 1988).

Any one of the three parts of an attitude may be changed as part of a self-help effort to change the other two parts. Examples: First, changing your cognition or viewpoint may change your feelings and action. Most of the suggestions given below in this method illustrate this approach. Secondly, changing your behavior may also change the feeling and cognitive part of your attitude. This occurs primarily when you feel personally responsible for your decision to change (not forced or bought off--you had a choice, made it, and could have foreseen the consequences). For example, if you have had to choose--and it's a close call--between two schools or two friends or two boy-girlfriends, afterwards your thoughts and feelings about the chosen one become more positive while the rejected one is seen more negatively. Another example: If a poor student decided to study much harder next semester, managed to do so, and got better grades, his/her attitude toward studying would become more positive and his/her attitude towards socializing, TV, etc. would become more negative. Thirdly, changing the strong emotions you have about something will, of course, change your behavior and your cognition. Example: If a certain kind of sexual activity, say mouth-genital contact, were repulsive to you, but you desensitized (extinguished) this emotion, then your thoughts about this activity would change and so might your actions. Obviously, there are many ways to change attitudes.

A self-helper needs to have hope. Even when people suffer serious losses (divorce, get cancer, permanently disabled), individuals have all kinds of reactions--sadness, anger, stress, apathy--but under certain conditions a person will strive mightily to regain his/her mastery over the situation (Sears, Peplau, Freedman & Taylor, 1988, pp. 147-152). Cancer victims, for instance, sometimes learn all they can and vigorously fight the cancer, which can be helpful. People who have been rejected by a lover try to understand what happened; that can help. Paraplegics, who take some responsibility for their accident and don't entirely blame others, cope with their paralysis better. Women, who avoid blaming their moral character ("I'm irresponsible, weak, bad...") for their unwanted pregnancies, handle having an abortion better than self-blamers. It is important to believe we can help ourselves... and to prove it by our actions.

This method summarizes several specific methods for changing our attitudes, our expectations, or our views of the situation.



The greatest discovery of my generation (about 1900) is that human beings can alter their lives by altering their attitudes of mind.





Purposes

There are many attitudes that may help us feel better about ourselves or others, more in control of our lives, and more accepting of whatever happens to us. Here are some suggestions.

Steps

STEP ONE: Accurately assess your attitudes.

From self-observation, you realize certain attitudes--you are pessimistic or optimistic, religious or agnostic, extroverted or introverted, careful or impulsive, etc. From others' comments, you may suspect that you have certain traits--tolerant or critical, perfectionistic or sloppy, chauvinist or feeling inferior, etc. From tests or scales, you can get factual information about how your attitudes compare to others, for example several previous chapters provide brief measures of concern for others (chapter 3), stress (chapter 5), sadness and perfectionism (chapter 6), anger and distrust of others (chapter 7), internalizer-externalizer (chapter 8), strength of parent, adult and child (chapter 9), meaning of sex to you (chapter 10), self-esteem (chapter 14), use of defense mechanisms (chapter 15), and others. There are hundreds of attitude tests, including......

- Optimism
- Fear of negative evaluation
- Trust
- Altruism
- Self-criticism
- Self-monitoring--the masks we wear

When our attitudes (the feelings and cognitive parts) are strong and clear, our behavior is usually in line with the attitude. But it is not uncommon for our behavior to differ from our weak or ambivalent attitude towards an act. Examples: we smoke or drink in spite of knowing the harm it can do and feeling that smoking or drinking is a nasty habit. We think we agree with the Golden Rule but we don't act that way. We procrastinate in our studies in spite of knowing many reasons to study and feeling good about doing well in school. We act friendly towards people we dislike or think badly of. This situation where you think one way but act another is called cognitive dissonance. There is a tendency--a pressure--to become cognitively consistent, i.e. to get the three parts in agreement, so we tend to change our thinking to fit our feelings or change our thinking-feelings to fit our behavior and so on. The point here, however, is that you should not be fooled by these inconsistent attitudes. There are probably many of them. Carefully attend to all three parts of an attitude--thoughts, feelings, and actions. Any of the three may be a problem or in need of strengthening.

To understand our attitudes, we need to explore several areas:

- How strong are my feelings about a person, a belief, a thing, or a situation? Are these emotions changeable and in need of change? Am I prejudiced? Are my emotions irrational?
- How detailed and clear-cut are my thoughts and judgments about this person, thing, or event? Where did these ideas come from? Are my ideas and views reasonable? Am I using stereotypes or over-generalizing? What other information do I need? Are there other ways of looking at the situation?
- How would I like my behavior to be different? Can I change the behavior directly or do I need to change my thinking or feelings first?

This kind of self-exploration will clarify your current attitude about any issue that concerns you and, in fact, may lead to changes rather automatically or, at least, help you plan for changes.

STEP TWO: Find new attitudes that seem useful.

New or different attitudes are advocated by many sources. Religions preach certain attitudes, like love one another, respect your parents, everything comes from God, sin is punished, etc. Therapies teach us to like ourselves, take responsibility for our feelings, expect treatment to be effective, etc. Sales managers tell the sales force to think positive, to be enthusiastic, to act as though it is a foregone conclusion that the customer will give a big order, to follow up with service, etc. This book says knowledge is useful, take charge of your life, you can change things, etc. These are all attitudes.

Building Helpful Attitudes

I have already reviewed for you (2nd paragraph) some of the attitudes discussed in different chapters. In addition, six major areas will be focused on here: meaning in life, optimism, self-efficacy, acceptance of life, crisis intervention techniques, and faith in religion or science.

Moral self-direction

Have you found your "place," a satisfying purpose in your life, a way to make your life meaningful? Have you learned the skill of finding or making something meaningful in any situation you face? Which purposes are worth your life? That is, what activities will you spend your life pursuing? If you are seeking the highest possible purpose, Frankl (1970) and Fabry (1988) say you can never know for sure the "ultimate meaning" of life. Like religion, ultimate meaning is a personal belief or a faith, not an established, proven truth that every rational person accepts. You could search for the ultimate meaning forever. You may someday think you have found it, but others will say, "I'm glad you are at peace" and go on their way unfazed by your discovery. Of course, you could be approaching "the truth;" you just can't be certain of it. There is wisdom about purposes and meaning to be had, e.g. in religious sayings, in some laws and customs, and in the writings of great thinkers. But, in the end, each person chooses the purposes of life that are meaningful to him/her (or defaults by accepting someone else's judgments). Today, values and judgments about what has meaning are changing.

There are lots of preachers, politicians, teachers, philosophers, elders, singers, and friends trying to persuade you of what is meaningful. My chapter 3 gives you my best shot. Please note that there are at least two steps involved here. First, you go *searching for the answer*, as in chapter 3 where you consider and compare many purposes of life, such as serving God, doing good for others, being happy, making lots of money, having a good family life, being successful, being content, and others. Second, after deciding on a goal--in this case an answer to "What is most important?"--you must then focus on the details of *how to achieve your goals*. We don't just automatically do whatever we decide we should do, right? This book and hundreds of others focus on enhancing these on-going, life-long, purposeful efforts. Surely there are advantages to knowing what your guiding principles are.

But separate from the searching for "ultimate meaning "--an overall purpose or philosophy of life, like the Golden Rule--the

logotherapists do an excellent job of helping a person find a "meaning of the moment." You can almost always find something helpful to do in any situation, something considerate of others. Meaning, in this sense, is everywhere. How do you find special meaning in every situation, even boring or stressful ones? Fabry (1988) suggests these *five guideposts for finding meaning* wherever you are:

- 1. How can I discover more about myself? The more you see yourself from different angles and in different settings--and the more honest you are about your feelings--the more meaning you will see in the world around you.
- 2. Can I think of lots of choices I have in this situation? There are usually many alternatives. The more freedom of choice you have, the more meaning the situation has for you.
- 3. Can I make a unique contribution in this situation? The more you feel that only you could or would have done what you did, the more meaning you get out of the situation.
- 4. Can I take some responsibility for improving this situation? Something positive can be done in most situations. The more responsibly you behave, the more meaningful your life will be.
- 5. How can I help others? How can I take care of others' needs, rather than my own? Self-centeredness--thinking about yourself--lessens the meaningfulness of a situation; altruism--thinking about others--increases it.

These questions are designed to help your conscience decide what to do. A logotherapist focuses on your positive traits, your hopes, your peak experiences, and any other hint as to what would be meaningful to you. The idea is to *feel good by finding something meaningful to do*. And, meaningful acts, according to Frankl, are *not* seeking fun, status, money or power. But, how do you convince yourself to adopt these new attitudes? It sounds a little feeble just to say by "self-confrontation" (see chapter 3).

Optimism

Do you believe that, in general, things will work out pretty well for you in life? Optimism is your explanatory style--your attributions and, even more so, your hopeful expectations of the future. Optimism is good for you! More and more research supports this view (Seligman, 1991, 1995; Scheier & Carver, 1992), but as a society we are becoming more and more pessimistic. Having hope and expecting positive outcomes buffer you from the ravages of psychological distress. You have better mental and physical health. Seligman says success at work requires ability, motivation, *and optimism*. If you don't believe you can do something, you won't try, no matter how talented you are or how much you hope for success. Underachievers tend to be pessimists, overachievers optimists. Optimism is related to but different from self-esteem, self-efficacy, and being happy. Having a hopeless view (chapter 6) contributes to depression. Because women worry and ruminate more about their problems than men (men play basketball or

"do yard work" on the weekends), they are twice as depressed as men.

A healthy optimist is not blind; he/she faces facts and problems, avoiding the denial of a pessimist. Also, do not confuse optimism with simply a Pollyanna attitude. Optimists are not always cheerful, everything isn't always "wonderful," although they are more ready and able to see different ways to see and solve a bad situation. When it is needed, they are more likely to change their diets, exercise more, give up drinking, recover from suicidal depression, etc. They see themselves as active agents influencing their futures. And, as change agents, they may tend to become overly optimistic and, in deed, their mental and physical well-being may improve as a result of their unrealistic views of their ability to change things (Taylor, 1989). How do you become a more active optimist? Should you even develop positive illusions? Taylor says yes.

Seligman (1995) recommends raising self-reliant children to protect them from depression and provides parents with many steps for developing an optimistic child.. McGinnis (1990) also devotes an entire book to increasing optimism and suggests 13 steps: (1) face reality, expect bad times, and become a problem-solver, (2) look for the good in bad situations, perhaps there will be a partial solution there, (3) cultivate a faith in your self-control, (4) seek ways to renew your spirit, your energy, and your devotion to a cause, (5) challenge your negative and irrational thoughts, (6) learn to "smell the roses" and appreciate life, (7) use your fantasy to rehearse for future challenges, (8) smile, laugh, and find something to celebrate even in hard times, (9) believe in the awesome power of humans--and you in particular -- to solve problems, (10) love many things passionately -nature, art, play, but above all love people, (11) vent your anger but temper it with empathy and tolerance, (12) don't complain, instead, share good news with others, and (13) accept what can't be changed. You will quickly realize that most of these prescriptions are described in detail in this chapter or elsewhere in this book. An optimistic attitude is a blessing. However, that doesn't mean that negative thinking can't be used to advantage in some situations.

It is inevitable that with optimism being highly praised, there will be critics. Julie Norem (2001) has written a book that says, what should be obvious to thinking people, that negative thinking--anticipating possible pitfalls and problems--can help some people plan and prepare for trouble. This process can reduce some people's anxiety if they come to (with coping strategies) believe they can cope. Just reviewing over and over imaginary problems and worse-case scenarios (without any idea how to handle them) will not calm most of us nor make us more competent. Negative thinking can, no doubt, be an asset in some situations for certain types of people (maybe all of us); however, the advocates of "defensive pessimism" and critics of optimism are basically using negative thinking to cope better and bolster optimism. There are many different strategies.

You will recognize that positive psychology is encroaching on a stronghold of religion, namely, positive thinking. To his credit, Norman Vincent Peale helped us think positively about the power of positive thinking. Other tel-evangelists also jumped on the bandwagon, such as Robert Schuller. The problem is this: religion relies primarily on faith and prayer to give us hope. Mental health professionals say religious optimists imply that all problems are solved quickly, easily, automatically just by simply being religious and expecting miraculous changes (Santrock, Minnett & Campbell, 1994). Science doesn't immediately accept this assumption. Psychology relies on science and the laws of behavior to discover specific, proven methods of solving problems. Knowledge is a source of power and optimism.

Self-efficacy

Do you see yourself as having a lot of control over what happens in your life? "Believe in yourself" is common advice. Americans are more likely to believe they can control their lives than are people in other cultures. When asked why one person succeeds while another with the same skills and training fails, about 1% of Americans say it is fate or God's will, while 30% of people in developing countries give this explanation (Sears, Peplau, Freedman & Taylor, 1988, p. 153). What would your answer be? Perhaps this difference between cultures is due to our having more opportunities to do what we want or due to our greater need to blame the poor for their poverty or due to our thinking more of ourselves as individuals having free will or due to different religious views or due to some other factors.

What were the results of your Internalizer-Externalizer (I-E) test in chapter 8? The I-E scale clearly measures whether you believe you are in control of what happens in your life or not--your locus of control. It does not measure, perhaps, the *degree* of control you think you have--your self-efficacy (see below). But it seems unlikely that you would see yourself as an internalizer and responsible for guiding your life and, at the same time, believe you are (and actually be) ineffective in doing so. We are just learning some of the complexities involved in measuring self-confidence and personal power (see Sappington, et al. below).

Bandura (1986) believes that self-efficacy judgments, i.e. one's belief in his/her ability to effectively control specific events in his/her life, play a role in almost everything we do, think, and feel. Hundreds of research studies support this notion (see Bandura's chapter 9) and hundreds of wonderful children's stories, like *The Little Engine that Could*, illustrate the importance of a positive attitude. The average person agrees that self-efficacy influences our actions; we'd call it confidence or belief in ourselves or a sense of personal power. However, self-efficacy is *not* used by most researchers as a global concept; it is not a single score applied to all aspects of your life. Self-efficacy is a judgment about your competence in one specific situation. It is easy to see why. To believe you could effectively handle almost any problem situation--e.g. bring peace to the world, replace fossil

fuels, educate everyone, solve Russia's problems, and stop a bad habit--would require many phenomenal skills. But some people do see themselves as being an effective change agent in many important areas of living. Others, no doubt, feel ineffective. Still others think they can shine in only a few arenas. As yet, psychology has not adopted psychological tests measuring generalized or specific self-efficacy. Instead, researchers usually ask each subject to judge what specific tasks he/she can do well (and his/her confidence in that judgment) or "How well will you do on this task?"

Self-efficacy involves or is related to four different concepts:

- 1. Predicting our performance: "I think I can make 5 out of 10 foul shots."
- 2. Rationally-based ("consider the facts") self-efficacy judgments: "I'm a good shot. I'd rate myself an '8' on a ten point scale" or "I cognitively realize the fact that I'm not good at all shooting foul shots. I probably would make 1 or 2 out of 10 shots."
- 3. Gut-feeling-based ("don't worry about the actual facts") self-efficacy judgments: "Oh, I love basketball. I'm a good shot, I'll make 8 or 9 out of 10!" or "I feel I'm terrible at this. I emotionally feel I can't make any out of 10."
- 4. The extended outcome or consequences expected from your performance: "It will impress the hell out of my girlfriend if I sink 6 or 8 out of 10" or "the other players will hate me //I miss this shot."

You can see the difference between prediction 1 (above) based on past performance and prediction 2 based on one's intuitive feelings by realizing that a professional basketball player, averaging 76% of his foul shots, may consider himself a poor free throw shooter and lack faith in his ability to make his next shot, whereas an 8th grader averaging about 40% of his/her shots may think of him/herself as a really good shot and feel pretty cocky about the next shot. Both skill (percentage of shots made) and confidence (self-efficacy) are related to actual performance, but skill, of course, is much more important in the case of shooting baskets. (Naturally, skill and confidence are usually closely related.) Confidence is probably more important than skill in other situations, such as deciding to approach someone for a date.

Most studies have not heretofore distinguished *between 2 and 3*, but recent work underscores the difference between intellectual-rational assessment and emotional-intuitive judgment about your efficacy. For instance, Sappington, Richards, Spiers, & Fraser (1988) point out that a person may intellectually know that he/she can not catch cancer or AIDS from a friend but may still *feel* as if it is contagious. Our feelings are not rational, but emotions are related to performance. For example, when patients at a pain clinic intellectually estimated (as in 2 above) their ability to reduce their own pain, it had no relationship to the actual outcome of their self-help efforts to overcome pain. But the patients' gut-feeling estimates (as in 3 above)

of their pain-control ability were clearly related (r=.53) to actual results; the higher the *feelings* of confidence, the greater pain reduction. The same researchers also found that students' I-E (Internalizer-Externalizer; see chapter 8) test scores answered on the basis of emotional, gut-level feelings were related to their Abnormal Psychology test scores, but rationally answered I-E test scores were not. Students who *emotionally* felt personally in control of their lives did better on the classroom examination.

These results suggest the popular advice of "believe in yourself" should be modified to: "EMOTIONALLY BELIEVE DOWN IN YOUR GUT IN YOUR SELF-CONTROL." Unemotional, intellectual belief in personal control seems less personally helpful in certain situations. However, this research is very new and primitive. We need better measures, better understanding of what is happening, more insight into beliefs in self-control and placebos, etc. Perhaps the instructions to the selfraters in 3 encourages more unbridled optimism and pessimism, which leads to more variable scores and accounts for the higher correlations with performance. Perhaps an emotionally enhanced "faith" or enthusiasm or zeal about our ability to change ourselves or a problem situation helps us conquer problems. Coaches everywhere seem to think so. So, how do you get this highly emotional, zestful, reassuring confidence? Sappington, Richards, Spiers and Fraser (1988) say it must come from an emotional experience, not from logical, factual information. For example, high feelings of confidence might be generated by

- watching a person similar to you struggling with a familiar problem, then you get so emotionally involved in his/her efforts to succeed that you feel exhilarated when they master the situation.
- listening to a person, who has successfully coped with a serious problem, describe his/her techniques, setbacks, traumas, and other emotionally meaningful or moving experiences, and
- having actual, uplifting experiences that conclusively demonstrate to us that we have more control over ourselves or the situation than we thought we had.

Some psychologists believe that excessive self-confidence could cause problems, not just in terms of appearing arrogant but perhaps by causing failure since you don't see your limitations and may, thus, overextend yourself. Or an inflated opinion of ourselves may lead us to become poor planners, lax, and prone to backslide or relapse with some bad habit we have recently overcome (Haaga & Stewart, 1992). These consequences seem likely but there is only a little evidence, thus far. Excessive negative thoughts and low self-efficacy *are* clearly associated with emotional problems and relapsing; excessive overconfidence may sometimes get us in trouble (relapse); moderate confidence in maintaining our desired behavior in spite of full awareness of the risks will rarely cause problems. In short, a combination of realism and confidence seems to work best.

The following discussion and summary of findings (mostly from Bandura, 1986) are based on research using each subject's single rating of self-efficacy, not both their intellectual and emotional beliefs. People who believe they are efficacious tend to see their successes as resulting from high ability and their failures as resulting from a lack of effort. As mentioned above, an over-estimation of your ability might encourage you to test your limits and maximize the effects of positive expectations. If you can accept some failure and also feel generally confident in your self-help ability, you will feel less stress, take more risks, and try harder and longer to make the changes you desire. The harder you try, the more success you will have. Being successful increases self-efficacy, one then wants to learn more useful skills. Success and confidence alter our goals. Eventually, you can gain selfcontrol and "produce your own future," according to Bandura. In a similar way, managers-coaches-teachers think employees-athletesstudents perform better when leaders expect them to do well, i.e. "I think you can." This becomes a self-fulfilling prophecy.

Low efficacious people, similar to depressed people, think they lack the ability to help themselves which makes them nervous and further impairs their performance. Examples: self-doubting students predictably avoid school work, but how much homework is done by highly anxious students is not predictable. Having strong physiological responses while socializing will not tell us if a person will act and feel shy, but self-evaluations of "I'm shy" or "feeling tense is normal" will tell us. Without confidence, most people give up... but some decide to learn some new coping skills. On the other hand, over-confident people are unlikely to feel the need to prepare in advance to meet problems and may, therefore, not do well in spite of having confidence. This complicates matters. For example, smokers and drinkers who believe they can abstain are actually more successful in doing so, but those who believe they could overcome a relapse are not as successful at abstaining as those who think "one drink leads to a drunk" (Bandura, 1986, p.437; Haaga & Stewart, 1992).

If you are inaccurate and over-estimate or under-estimate your effectiveness in a certain situation, there can be unfortunate consequences, e.g. you might attempt impossible tasks or avoid tasks you could handle. Sometimes, as with a placebo, reality doesn't matter. Example: if you are taught that relaxing your head muscles prevents tension headaches and are convinced by the experimenter that you are able to relax those muscles effectively (even though you are in fact tensing the muscles), you will have fewer headaches in the future (Holroyd, et al, 1984). Faith in doctors, pills, therapy, God, witch doctors, and self-help can be powerful forces, usually for the good. Believing we are helpless is just as powerful in the other direction (see depression in chapter 6).

Where does this belief in or doubts about your self-efficacy come from? How can self-efficacy be increased? Bandura (1986) cites research suggesting past successes or failures --as judged by usresulting from our efforts in relevant areas are primarily responsible

for our efficacy judgments. (How many free throws have you made out of 10 in the past?) It's not easy to change our self-appraisals. To increase our confidence we need to repeatedly (not once) handle a difficult (not an easy one) situation without working too hard and without outside help. If you have to work much harder than others seem to, you may doubt your abilities. Many people find it so hard to become and stay efficacious that they lose hope, give up personal control, and start depending on others (Langer, 1979).

Bandura contends that feeling efficacious has no consistent relation to feeling good about yourself, e.g. he says a person may feel effective (as a manipulator) but take no pride in such activities or feel incompetent (as an artist, mathematician or tight rope walker) without feeling low self-esteem. While these examples are valid, I still say that success--e.g. being an effective self-helper--in most cases raises our self-esteem as well as our feelings of self-efficacy (see method #1). In order to feel able, in most situations you need to learn to be able.

By seeing or imagining others model successful or unsuccessful responses in specific situations may give us confidence or the jitters. We get the biggest boost in our confidence by watching several persons (not one) similar to us (in traits and ability) successfully conquer a tough challenge by determined effort (not easily nor by virtue of great skill). Watching talented models will get us familiar with the situation and give us some "tips," but such models may intimidate us. Watching failures gives us confidence if we think we can do better (failures may show us what *not* to do).

Other people could also model for us how to solve problems and accurately form efficacy judgments by talking aloud as they solve problems and compare their effectiveness with others. We could hear how others think, how they assess their ability. This is called cognitive modeling (Meichenbaum & Asarnow, 1979) or coaching.

We can be persuaded by a believable evaluator (perhaps not an uninformed friend), especially via encouraging feedback, that we have the ability to do something. Also, we can be cheered on to try harder (which increases our chances of succeeding). Books try to build our confidence (see motivational books cited in the motivation section of chapter 4).

However, persuasion has not been, as yet, a powerful means of building self-efficacy; actions seem to speak louder than words. Interestingly, it is probably much easier for negative feedback to undermine our confidence, than for encouragement to build it. Self-doubts lead to not trying or to timid efforts which quickly and easily confirm the negative self-evaluations. It is harder to be successful than to fail.

Persuasion is the approach of the super salesperson or the efficiency expert. They tell us to believe in our sales ability (or in the customers' gullibility). Clearly, the insecure, self-doubting, nervous

sales person is easy to turn down (unless he/she is 7 years old and you want to offer encouragement).

Observing how "up tight," tired, or physically upset we are in specific situations probably influences our judgments about our efficacy. The self-doubting speaker probably interprets his/her sweating as a sign he/she is doing poorly rather than as a reaction to a warm room. The depressed person remembers previous failures while confident people remember past successes; this further influences self-efficacy estimates. A good mood and a healthy, comfortable body generate positive expectations.

Many therapies emphasize assuming responsibility for and having control over your own life, especially Reality therapy, Gestalt therapy, Existential therapy, Cognitive-Behavioral therapy, and Rational-Emotive therapy. Several of these therapies add another related concept: choice or "free will." Existentialists say, "You are who you are because you want to be" (Poduska, 1976). The saying is: "No one can make you feel any way," you choose to feel the way you do. You also choose to do whatever you do. Who else is responsible for your actions, feelings, and thoughts as much as you are? Self-help books, like this one, and psychoeducational approaches make the same point: humans can influence their own lives if they know effective methods.

Research evidence piles up suggesting that self-efficacy is related to good health, satisfying relationships, and success (Schwarzer, 1992). What is not clear, yet, is how much obtaining these outcomes in life is responsible for raising your faith in your ability to control your life vs. how much the faith alone should be given credit for producing these outcomes. That is, which comes first the confidence or the accomplishments? Clearly, it works both ways. So, raising your self-efficacy is a good idea, but there have to be accomplishments too. Indeed, if it were easier, you could surely start with the achievements first.

Certain Eastern philosophies teach a very different point of view: you are not responsible for what happens in the world. In fact, you can't do much about it, so accept whatever happens. The oriental sages say you can only *control your internal reaction* to the external world. Trying to change things is like trying to stop a river with a teaspoon. So, flow with the river. Accepting the inevitable and the laws of nature are parts of the next attitude discussed. Different Eastern philosophies speak of karma, which suggests we receive from the world according to what we give. This can be positive karma: by giving love, we get more love in return; by letting others be free to make choices, we lessen our responsibility for others and increase our own freedom. It can be negative karma: by being unkind and dishonest, we will be disliked; by over-eating and over-drinking, we will shorten our lives. Today, you experience the results of yesterday's acts, but you aren't responsible for controlling what happens.

Acceptance

Do you accept whatever happens or are you being dragged down the path of life kicking and screaming, "This shouldn't be happening!"? Methods #3 and #4 in this chapter--Challenging Irrational Ideas and Determinism--focus on acceptance of things as they are and avoidance of the "tyranny of the shoulds." This doesn't mean we can't change things. It means trying our best to change things and then accepting whatever we can't change. It means accepting our selves and finding our own fulfilling life (Kopp, 1991). Several other viewpoints emphasize acceptance of others: Carl Rogers (1961) recommended unconditional positive regard (chapter 9) in which we respect every human being regardless of what he/she may have done. This is similar to Buber's "I and Thou" relationships in which people revere one another. In empathy (chapter 13) the focus is on understanding, not judging, the other person. Any personality theory or insight method (chapter 15) which increases our understanding of others also increases our acceptance.

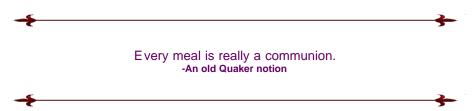


Christ: Love the sinner, condemn the sin. Buddha: Love the sinner; realize sinning is a part of life.

Blaming others for who they are, without recognizing who they may become, is short-sighted.



Folk wisdom (Fleming, 1988) tells us that understanding and forgiving others who have hurt us are two major steps towards a healthy life (see chapters 3 and 9). Miller (1995), drawing on Buddhist, Jewish, and Christian writings, encourages us to accept life as it unfolds and resist asking for more "goodies." Seek contentment with life through *compassion* with others (practice it rather than being critical or suspicious), *attention* to the nice and wondrous things happening at the moment (rather than on past regrets and future worries), and *gratitude* for all the things in life that we take for granted.



Also, remember that many skills, such as tennis or public speaking, are performed better if you can relax and "just let it flow." That is self-acceptance, mistakes and all.

Attitudes that help us cope with crises

Do you have the stability and internal strength to weather crises? Can you see some potential good in almost any bad situation? Well adjusted, secure, self-actualized people handle crises without depression or bitterness. Such people may, in fact, become more sensitive and caring, less vindictive, and wiser, while others are crippled by the same crisis. How do they do this? They seem to have a "center" core of calm, optimism, personal faith, and tolerance that helps them weather emotional storms. There is also the concept of "centering" which (a) involves finding the middle ground between opposites so one can have a balanced, clear view of an issue, (b) removing yourself from stresses so you can find peace, as in meditation, and (c) building a solid center of self-esteem so one is not self-critical or buffeted by contradictory reactions from others. By withdrawing into our "center," we can "settle down" and avoid many destructive emotions.

There are several attitudes that help people cope with crises and problems:

- 1. The "so what if" technique. If you are worried about something bad happening, ask yourself, "So what, if this happens?" Many people create their own anxieties, e.g. "What if I make a fool of myself?," "What if they get mad at me?," or "What if he/she left me?" These "what if..." questions imply a terrible outcome, but realistically it may not be so bad. So, to reduce some of the worries, ask yourself two questions (Lazarus, 1971):
 - o How big an "if" is in "what if"? How likely is this event I'm worrying about? How often have you worried about things that never happened?
 - o So what if (this awful thing) actually happens? Would it be so terrible? Could some good come of it? Do others see it differently?

If the event is unlikely, minor, or something you can't prepare for, stop worrying (see thought stopping in chapter 11).

If the event is likely, major, and something you can prepare for, figure out the best way to handle it, make preparations (like role playing), and then forget it. Don't waste time worrying. Some people feel better by asking themselves, "What is the worst that could happen?" and telling themselves "I could handle it" or "it could be worse, I could be handicapped."

2. Time projection (Lazarus, 1971). If you are depressed by oppressing circumstances, ask yourself, "What will I be doing in 1...5...10...20 years?" and "What are some of the good things that could happen?" Be optimistic. The future offers so many opportunities that looking into the future is an effective antidote to gloom.

If you are lost or unmotivated and just marking time today, ask yourself, "What do I want to be doing 30...20...10...5 years from now?" Once the long-range goals are set, then tell yourself, "if my dream is going to come true, I will have to make progress towards those goals every day." Make up a daily schedule and get moving! Reality therapy takes this approach.

3. Lowering expectations. Some people are unhappy because they had hoped for too much. They could feel better by being satisfied with less, by lowering their goals. Make your goals reasonable and achievable. Base them on your past performance--maybe a little higher and gradually increasing. Give up impossible dreams. Examples: If you want all A's but make C's, try for a B or two next semester (and increase your study hours, study with a good student, improve your study skills, and so on). If you are working hard but making low C's in chemistry, give up the goal of becoming a doctor.



Caution: It may be hard to find the middle ground between having frustratingly high goals and not expecting enough of yourself. Lowering your expectations may become a way of excusing oneself or of avoiding hard work, "Oh, I didn't expect (wasn't trying) to win." Having high ambitions motivates us. Having high but barely attainable goals and doing your very best are unavoidably demanding and stressful. But, how else can you fulfill your potential? However, perhaps the solution to this dilemma is to have highly inspiring dreams but at the same time be tolerant of the inevitable occasional failure. Shoot for the moon, but expect some falls.



4. "I can think clearly and creatively." We may be able to learn new attitudes and techniques that enable us to be more creative, more innovative, more original--to go further in our thinking than most people go (Adams, 1986; Schank & Childers, 1988). In straight thinking and common sense (method #8 above), we learned some pitfalls to avoid; in chapter 13, we reviewed decision-making. D'Zurilla (1986) recommends therapists adopt a problem-solving approach. In the last 10 years, educational specialists have tried to teach thinking skills in school via asking probing, challenging questions, group discussions, enhancing listening, attending and categorizing skills, teaching problem-solving and decision-

making, and so on. We have to feel responsible and able to think before we take problem solving seriously; otherwise, we let authorities, writers, friends, and others think for us. This is an important attitude to bolster our independence.

Faith: In a religion, in priests and healers, in science, in spirits, in others, in ourselves, in drugs, in treatment and so on. Beliefs in sources of help, such as science or religion, have a powerful influence on our lives. Over 90% of Americans believe in some kind of higher power, a superior being or force. Awesome powers and consequences are thought to be involved: God answering each person's prayers, determining everything that has ever happened or ever will happen, arranging for ever-lasting life in heaven or through reincarnation, providing an intimate, personal relationship with the supreme being, and so on. In addition, many people all over the earth (and since prerecorded times) depend on God or spirits to heal physical diseases, to bring good weather, to provide necessities, and to relieve mental suffering. Examples: faith-healers like Oral Roberts, witch-doctors in Africa, medicine men among the Indians, Buddhist devotion to ancestral spirits, and shaman in primitive tribes.

Keep in mind that 75% of the people on earth today have no access to modern, scientifically based medicine...or to psychotherapy or psychological self-help. For that 75%, spiritual help and communityfamily support is all that is available. Even after modern medicine and psychotherapy are make available, it takes a generation or two for a culture to give up the old beliefs and accept the new. For example, 90% of Native Americans felt helped by going to the tribe's shaman but only 40% felt helped by mental health counselors (Cordes, 1985). Having faith in your source of help is a critical factor in determining it's effectiveness, especially in religious and psychological treatment (Frank, 1974). In fact, in some instances, the power of your own belief system--the "suggestion or placebo effect"--may be much greater than the drug, faith healer, religion, therapy, or self-help method you may use. In addition, belief in culturally accepted healing methods-religious or scientific--is often powerfully reinforced by a caring community and by a supportive family. There are many reasons why the things we believe in actually work for us. Knowing the truth, however, about what really works and why should help us in the long run.

As observed in chapter 6 on depression, becoming more "in tune with" a protective, caring, loving, omnipotent God is surely spiritually and emotionally uplifting. With religion, life definitely has some special meaning; you become significant. What could be more reassuring and comforting than to be approved of and loved by God? Many people who are lonely, depressed, anxious, self-critical, purposeless, and lost would be well advised to investigate the benefits they might get from a carefully selected and loving religious group. There are thousands of books attempting to persuade people to become religious and depend on God. Norman Vincent Peale would be an example. Many studies, however, have found little or *no relationship overall* between religiosity and honesty, helping others,

obeying the law, or psychological adjustment. Yet, George Gallup & Jones (1992) say that the *most committed* 13% of the believers are the happiest, most tolerant, and ethical (compared to the less committed). Likewise, among only the *more active* religious youth, there is some suggestion of less delinquency (Cochran, 1989) and greater closeness with their parents. On the other hand, the highly religious seem to be more guilt prone (Richards, 1991). Some people become "addicted" to their religious beliefs. Father Leo Booth (1992) helps people escape from religious addiction. And, Winell (1994) helps former fundamentalists with their guilt, fear, anger and other losses. The benefits of religion seem to be limited primarily to the most devout, but the most devout are also the most susceptible to becoming addicted or obsessed.

Another viewpoint is held by certain Humanists who contend that religious involvement frequently distracts us from helping others in need. For instance, some churches are much more interested in "saving souls" than in "helping the poor." Some would rather build an expensive church than feed the poor. Fundamentalists sometimes believe everything is God's will; thus, all you have to do is believe in God and pray, then the world will be as it should be. Other churches agree with the Humanists, emphasizing that we each must love one another and take responsibility for making things better. I find it hard to believe that any God would approve of 42,000 children dying every day from preventable illnesses and hunger, 600,000 mothers dying in childbirth every year from lack of medical care, and 1.2 billion people living on less than \$1 a day, while others of the same species live in luxury. If religions can't influence our moral decisions (including killing for religious causes), what are they for?

It is firmly believed by almost all caring, giving people (whether religious or not) that helping others helps you feel good too. Chapter 3 tries to help you find meaning in life, which may or may not involve religion. James Fowler (1981) says all religious faith develops in seven stages (like Kohlberg's stages of moral development) and involves making meaning out of our lives, starting with the primitive belief that "if I am good, God will be good to me," through youthful acceptance of "hand-me-down beliefs," on to maturely accepting "responsibility for deciding what is meaningful," and, finally, on to "feeling at one with God and everyone, and acting accordingly." You may want to read more about faith in order to strengthen or challenge your own beliefs.

STEP THREE: Establish the desired attitude cognitively, emotionally, and behaviorally.

As stated in the general idea above, there is a cognitive, an emotional, and a behavioral component to every attitude, just as there are five parts to every problem (chapter 2). Therefore, if you think you want to adopt a new, more helpful attitude, you need to (1) be sure you really believe and accept the attitude, (2) modify your feelings so they are in keeping with the desired attitude, and (3) start behaving in ways consistent with that attitude. Examples: If you don't live your

values, they aren't really your values. If you think you want to be a people helper but don't eagerly seek out the needed knowledge and don't feel positive about the hard work involved in acquiring information about helping, your attitude towards people-helping isn't consistent; you aren't wholeheartedly committed to being a people helper. In short, cognitive attitudes or ideals must be scheduled and acted out routinely. Moreover, the thoughts and actions must be associated with positive feelings.

Suppose you have been a perfectionist and have decided to lower your expectations because you have often been upset by failing to meet your impossibly high goals. Let's say you have cognitively set lower goals and accepted the reasoning for doing so. You can also change your behavior by becoming less driven, less obsessed, and able to attend to other activities. But whenever you fail to reach the very high, perfectionistic standards you have sought for many years (but recently decided to change), you may still get anxious, self-derogatory, and depressed. Thus, the emotional component is not yet in line with the cognitive and behavioral aspect of the attitude. Perhaps you could desensitize yourself to these "failures" (that are a part of your new rationally set lower goals); you might even need to plan to have several such "failures" in order to learn to tolerate the new standards.

Another example: Beginning students in psychology wanting, cognitively, to become understanding and tolerant of all potential clients frequently continue to respond with strong negative or fearful emotions to psychotics, criminals, abusers, homosexuals, and so on. These are our clients. Every psychologist must conquer these critical emotions. Therapists-in-training can use desensitization, expose themselves so long to such clients that they are no longer bothered, talk themselves out of having such emotional responses, and/or become so knowledgeable about such people (and all other types) that they "understand and accept" such clients. This is the mark of a learned person; however, in no way should such an attitude imply approval of the awful actions committed by the violent criminal.

Some additional ideas about how to change your own attitudes: once you have decided on what attitude will work best for you, mentally rehearse thinking, feeling and acting that way until you can adopt that attitude in real life. If you think your situation is awful, try to imagine a worse-case scenario, e.g. suppose you haven't just lost a sale but lost your lover or your sight or your child, or reframe the situation, e.g. rather than wanting to get drunk to escape being upset, try to figure out how you could act more constructively. Remember too that you can change your self-talk: "I-can-handle-it" talk is a lot more productive than "I-don't-know-what-to-do" talk. Encouraging sayings can help, such as "I will try for what I want; I will want what I get," "every crisis presents an opportunity," "every experience, even failure, teaches me something," "if what I'm doing isn't working, I'll try something else," "positive thinking gets me further than negative thinking," "everything passes," "the situation bothered me but it's

behind me now," "maybe something good will come out of this mess," etc.

Time involved

Most of the attitudes mentioned in this section would require considerable time to learn, if you were starting with a negative attitude. One doesn't develop a new philosophy of life or a broad belief in self-efficacy or an acceptance of others quickly. But, fortunately, most people already have many positive, helpful attitudes.

Common problems

Each attitude would have its own problems, i.e. different obstacles to the adoption of that attitude. For instance, many people are conditioned to have negative reactions, even by age 18 or 20, to racial groups, to mental illness, to obese and unattractive people, to old people, to violent criminals, etc. As a result, the development of tolerant, understanding attitudes towards these people is very difficult. The only solution I know of is to get a lot of experience with the type of person you don't understand or don't like. Examples: If you feel negatively towards welfare mothers, get to know several intimately and find how they got in that situation. If homosexuality is disgusting to you, make friends with many gays and lesbians; empathize with their needs for love.

Effectiveness, advantages and dangers

Very little is known scientifically about how to change your own attitudes or about the effects of doing so. There is a great deal of clinical and practical knowledge about these matters, however. Love one another is an old idea (but we can't do it yet). Quite a bit is known about persuading others (see chapter 13), mostly related to sales. Most of the attitudes mentioned above sound beneficial and have been advocated by outstanding philosophers, therapists, and wise people. But, the ramifications of broad general attitudes, such as "I'm in control of my life" or "tolerance of others," are so vast that the precise measurement necessary for science has not yet been done. The limited research findings (primarily about self-efficacy) are theoryoriented, proving only that thinking you are effective is associated with being effective. Research findings are not very practical thus far in terms of actually showing us how to build self-efficacy and gain control of our lives. The research will probably become more personally useful in the next 10 to 20 years.

There are no known dangers but some are conceivable: beliefs in self-efficacy may exaggerate how much control you actually have and could lead to an unrealistic sense of self-responsibility; a demanding philosophy of life may increase stress and guilt; an accepting attitude based on determinism may reduce your zeal to wipe out injustice and

so on. These risks seem small relative to the gains some of these attitudes might yield.

Self-Hypnosis and Mental Imagery

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With a little practice, most people can be hypnotized and can use self-hypnosis. Hypnosis allows us to experience thoughts, fantasies and images as almost real (Soskis, 1986). The hypnotized person knows the experience is not real, however, because he/she doesn't act like it is real. Under hypnosis we may vividly imagine being at the beach but we don't take off our clothes and try to jump into the water. Yet, by experiencing a situation differently, e.g. seeing public speaking as a way of influencing minds, we may act and feel differently (more positive, less scared).

The mental scenes can seem very real to us but we know it is all just in our head. It is the same experience as watching a film and feeling we are there, we really get "into it" and become afraid, inspired, sexually aroused, very sad and so on. This imagery is something we do, not something done to us. It used to be thought that the hypnotist gained power over the subject through "animal magnetism." Actually, there can be no hypnotic experience without the subject's agreement and participation. Thus, all hypnosis is in a sense self-hypnosis. Could anyone force you against your will to get deeply emotionally involved in a good book or movie? No. But you can do it by yourself...and feel wonderful.

No one knows who discovered hypnosis. No doubt a storyteller thousands of years ago. We do know that hypnosis was used to treat illness long before Christ. During the Middle Ages, priests used self-hypnosis to make God more real to them and to intensify their relationship with God. Hypnosis has been used by physicians and faith healing by preachers to cure people. In the early part of this century, a Frenchman, Emile Coue' (1922), popularized the idea of autosuggestion. His most famous self-instruction was, "Every day in every way I'm getting better and better."

At first, you are likely to believe that an experienced hypnotist could perform impressive feats but you couldn't possibly do much. That is a reflection of the stories you have read and movies you have seen. Research has shown (Fromm, 1975) that some people reach deeper trance states in self-hypnosis than with a hypnotist. They have more vivid, richer imagery. Self-hypnosis costs nothing, is easy to produce, and allows the person to make changes in the procedures so that they work best for him/her. So, again, an old therapy technique may become even more effective in the hands of an informed self-helper (Fisher, 1991). Alman & Lambrou (1991) also provide a self-

hypnosis induction method and specific self-instructions for several specific problems, like self-confidence, pain relief, weight loss, phobia reduction, etc.

It is not necessary to be hypnotized in order to have vivid imaginary experiences. Daydreams are vivid. The basic idea of hypnosis and mental imagery is this: if you want to do something, imagine yourself doing it over and over. This is also called goal rehearsal. The idea is father to the act. Books by Lazarus (1977) and Fanning (1988) are filled with examples of visualization (without hypnosis) serving many purposes.

Purposes

By using hypnosis or mental imagery (without hypnosis) a person can sometimes produce impressive results. Perhaps the most astonishing is the control of pain. Many people (not everybody can) have had dental work, surgery, and babies without pain. One of the easiest experiences to have is relaxation which can counteract fears and stress. If your behavior or someone else's is hard to understand, the key is likely to be uncovering the thoughts and images occurring between perceiving the situation and responding. Example: One paraplegic sees only misery, another plans on going to graduate school. Developing new intervening images and self-suggestions can change certain behaviors, such as studying and concentration, help control anger and sadness, build self-esteem, reduce bad habits, and so on.

Steps

STEP ONE: Become familiar with self-hypnosis and/or mental imagery.

There are several things to learn. First, you need to get a "feel" for what is involved--some basic understanding. Second, you learn a simple procedure for inducing self-hypnosis or using visualization. Third, you practice these procedures several times. Fourth, you make plans of exactly how to use hypnosis or visualization to change the things that concern you. Only after this preparation do you start actually trying to use hypnosis or visualization as a self-help method.

Almost all of us daydream. Our daydreams tend to be helpful reliving of the past or rehearsing for the future, i.e. useful stuff. Very few of our daydreams are self-aggrandizing or erotic fantasies. Sometimes they relieve the boredom, but most of the time they involve some emotion--a important event, a threat, a frustration, a hope, etc. Daydreaming is like brainstorming, a chance to mentally test out and practice different solutions. There is evidence that daydreamers concentrate better, are more empathic, less fearful, more lively and alert, may enjoy sex more, and generally are more fun

to be around (Klinger, 1987). Of course, obsessions with harming others, using drugs or eating, past or possible future catastrophes and so on are a serious problem. In most cases, however, a good fantasy life should be of great value, nothing to be ashamed of.

Most of us know how to daydream, it comes naturally. Perhaps you can encourage more daydreams and guide your fantasies into more constructive, fruitful, creative areas, rather than leaving it entirely up to the "whim of the moment." You might refer to chapter 15 where guided fantasies are used for insight. Perhaps your re-occurring daydreams reveal some frustrated needs that deserve more conscious attention. Otherwise, I'm going to assume you know all you need to know about daydreams and go on to hypnosis.

Most hypnotists start by giving the subject some introductory experience, often a demonstration of "suggestion effects" or an illustration of how ideas influence behavior, called ideomotor action. For example, they will ask you to clasp your hands together and imagine that your palms are tightly stuck--glued--together. Then they ask you to try to take your hands apart. Many people find it is somewhat difficult to separate their hands after the suggestion is given. Other hypnotists will have you stand with your eyes closed, heels together, and imagine swaying backwards. Most people actually sway backwards (the hypnotist must be prepared to catch the subject). In other words, thinking of some action tends to produce that action //your imagination is vivid enough.

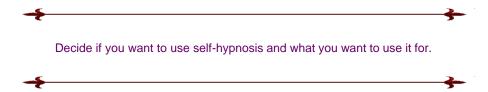
You can have similar experiences by yourself (Soskis, 1986). For example, make yourself a pendulum out of a small, round object that has some weight to it. A spherical button or glass ornament is ideal, but a medallion or set of keys or heavy ring will do. Make the string about 10" long. Then draw a circle on a piece of typing paper and draw two lines intersecting in the middle of the circle. Put the paper on a table in front of you. Put your elbow comfortably on the table and grasp the string at the point where the pendulum is just resting on the center of the circle where the lines cross. Now, lift the object off the paper slightly (1/8 inch) and think of the object moving back and forth along one of the lines. Don't consciously move your hand or fingers, just think of movement back and forth in a certain direction. Guess what? The pendulum will start to move (an inch or so) in the directions you are thinking about. Wow! Then think of the object moving in the other directions, then in a circle, and so on. Play with it for a while. Of course, your thoughts aren't moving the object, very tiny imperceptible movements in your hand are. Most people are impressed.

Another hypnotic experience is extending your arms in front of you and carefully noting that the palms are facing each other at the same height and about two inches apart. Then close your eyes and imagine your right arm is getting heavy while your left arm is getting lighter and lighter. Tell yourself over and over that the left arm is feeling very light...the right arm and hand is getting heavier and heavier all the

time. Dwell on those images...then add to the images...a helium balloon might be attached to the left arm by a soft ribbon and it is gently lifting that arm higher and higher into the air. On the right arm there is a bookstrap and several heavy books are pulling it down...further and further down. After imagining this for a minute or so, open your eyes and see how far your hands have actually moved. Six inches or more is not unusual but an inch or two makes the point that thoughts influence behavior.

Consider some other factors about hypnosis. It should be an interesting experience and it may be helpful. However, *if you have had a bad experience with hypnosis*, you should not use this method by yourself. If you expect magical, instant, major changes, like a cure for cancer or a new personality, forget it. Yet, pain can be lessened and new attitudes learned. Also, you can get started on a diet or quitting smoking, but one hypnotic session isn't all you need.

You may wonder if you will be able to respond, e.g. to a telephone or the door, while hypnotized or if you will remember what happened. The answers to both are yes. You can come out of it at any time. Is hypnosis like sleep? No, you know what is going on (although it is easy to fall asleep while so relaxed). If you fall asleep, don't be concerned, just take a nap. You won't do anything weird, like with a stage hypnotist, because you are in control. You won't hurt yourself although a warning is in order: very rarely a person trying hypnosis for the first time will have a reaction that alarms or scares them, such as going into a trance state very quicky (within a minute or so) or having some fantasy or sensory experience they didn't expect. My advice to a person having such a reaction is to stop trying to use this method, unless one seeks the services of a professional with hypnotic experience. Much of the effects of self-hypnosis is due to expectations or placebo or suggestion; therefore, only use hypnosis if you believe it can be helpful and safe.



Before trying self-hypnosis, you may want to do some reading or talk to a friend or a professional. But in the kind of experiences I will suggest you try, there are no more dangers than in using other self-help methods. As suggested under purposes above, hypnosis is best used with (a) problems that primarily concern only you, not your spouse or boss or family, (b) recent problems, (c) problems that involve your feelings (e.g. anxiety), not your performance (take a speech class if you want to be a more skillful speaker), and (d) problems that can be helped by new cognitions--thoughts, attitudes or images--not problems requiring insight or new knowledge.

Do not use self-hypnosis with (a) serious, long-term mental illness, (b) problems involving a troubled relationship with someone else or if you are a loner with "spacey" or peculiar ideas, (c) problems that have not responded to professional help in the past, or (d) problems which you are not willing to devote 15 minutes each day for a month or so. Also, do not try to uncover suspected traumatic early childhood experiences, e.g. abuse or incest, or to explore past lives. In fact, don't try to use hypnosis to "discover the truth" about anything because many of the vivid "memories" one might have under hypnosis may be radically different from reality. Yet, mental imagery is used (with caution) to gain insight and new awareness (see chapter 15).

STEP TWO: Prepare a specific method for inducing self-hypnosis.

You may want to be hypnotized by a trained person first, he/she can then teach you how to do self-hypnosis (Soskis, 1986). Or, you can memorize the general induction process and give self-instructions. Or, you can put the entire induction procedure on an audiotape. I'll show you how to do the latter two:

- Find a quiet place, sit in a comfortable chair.
- Close your eyes and relax your whole body. Use something like one of the relaxation methods given in chapter 12. Repeatedly tell yourself throughout the relaxation procedure to become more and more deeply relaxed. At the same time, tell yourself you will remain totally awake and alert, carefully attending to your own self-instructions. When deeply relaxed all over, tell yourself that you are ready for a pleasant, effective hypnotic state which will help you help yourself.
- When very relaxed, say to yourself or listen to the self-hypnosis instructions you have prepared. Usually, relaxation instructions are all that are needed.
- When hypnotized and feeling very comfortable and relaxed, imagine being in a very safe, peaceful, and comfortable place. Enjoy that as long as you like.
- Give yourself instructions for improving (written in the next step).
- Wake yourself up by counting from 5 to 1, become more awake at each step.

If you wanted to simply record the whole thing, you might use a script like this: (read in a clear but slow drraaawwnn-out voice, a hypnotic voice)

- "You should be relaxing in a comfortable chair with the phone and other distractions turned off. If you are interrupted, you will at any time be able to open your eyes and take care of whatever needs to be done.
- Close your eyes and concentrate on relaxing all over. Take a deep breath and slowly exhale...notice the calming effect of deep breathing. Take some more deep breaths.... Feel the

- muscles in your body losing their tightness and tension. As this happens, you will feel better and better.
- To increase the relaxation, I will count from one to ten and get more and more relaxed as I count towards 10. At the count of 10, I will be in a very relaxed, very pleasant, worry free, completely alert and aware, but comfortable hypnotic state. One, I will relax my hands and forearms. Think of the right hand, fingers and forearm, tell those parts to get rid of all their stress and tension. Relax more and more. Think of the left hand, fingers and forearm. Relaxing deeper and deeper. Two, I let the calmness spread into my upper arms...into the biceps and triceps. Very relaxed. Feeling good. Three, my shoulders and neck are relaxing...deeper and deeper. Four, the top of my head, scalp and forehead are calming...relaxing...feeling smooth and soft. Five, I notice the wonderful feeling moving down into my eyes, cheeks, lips, tongue and jaws. I tell the entire head and face to relax more and more. Six, my chest, lungs and upper back are slowing and calming down...very comfortable. Seven, I am letting the stomach relax and settle down...also the lower back and spine...the tension is going away...replaced with pure comfort. *Eight*, the muscles in my upper legs relax deeper and deeper. Nine, the wave of relaxation moves down into my lower legs, feet and toes. Ten, I am extremely relaxed all over. The last remaining tension anywhere in my body is melting away...my whole body is calm...very comfortable...feeling wonderful.
- I am now probably in a pleasant, enjoyable, effective hypnotic state, even though I may not feel certain of that. In any case, I will be able to think clearly and control my own thoughts. My imagery will be very detailed, very clear and realistic. I will be able to use this imagery to my advantage. I will remember everything that happens while I am hypnotized.
- I will first use hypnosis to imagine being in a pleasant, comfortable place, a place where I feel perfectly safe, perhaps on a beach or in my own private place. I will see all the details... hear the sounds...feel and smell the air...really get into it. I will talk to myself about all aspects of the scene...and enjoy myself thoroughly for a minute or so."

Be quiet for a minute, then continue recording:

"At this point I will give myself the instructions I have prepared for self-improvement. I can open my eyes if I need to look at notes (but it is better to keep your eyes closed, so the visualization is more intense). If the self-instructions do not use all of the three minute break that follows, I will just return to my pleasant scene and enjoy it until the tape takes me out of the hypnosis or I decide to come out of it."

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Note: At this point either record the 3-minute self-instructions developed in the next step OR be quiet for 3 minutes, during which you can, over a period of time, give yourself a variety of self-instructions. Then continue recording.



- "Now, I am ready to end the session. I will count from five to one and become more and more alert as I count. Five, I am starting to come out of the hypnosis. Four, feeling a little more like moving. Three, feeling good with more energy. Two, my eyes are gradually opening...now, completely open. One, I am completely alert, feeling good and refreshed. I am done. Stretch a little and get up."
- Turn off the recorder.

STEP THREE: Develop self-improvement instructions to give yourself during hypnosis or while using mental imagery.

The self-instructions may reflect a new attitude towards others or yourself, a different way of thinking, a post-hypnotic suggestion for a change in behavior and so on. Hadley and Staudacher (1985) say that hypnotic suggestions should (a) be worded simply (focus on one change at a time) but repeated several times, (b) be believable, obtainable (gradual steps may be needed) and desirable, (c) be stated positively ("I am relaxed" rather than "I won't get uptight") and for a specific time (I will study effectively from 6:30 to 10:00 tonight), (d) use cue words or a key phrase to trigger the suggested reaction (saying "relax" while approaching an attractive person or "good memory" while studying), and (e) provide detailed images of the suggested outcome ("I am taking a test...relaxed and doing well...").

Here are some specific suggestions (mostly from Le Cron, 1964, and Hadley & Staudacher, 1985), modify them to fit your situation:

• Studying and concentrating: "I will start studying tonight at 6:30, right after the news. I will remain alert and concentrate fully on my reading, except for taking a 5-minute break every half hour. If other thoughts intrude, I will quickly re-focus on the studying. If friends try to get me to do something else, I will tell them that I definitely intend to study for three hours. Nothing can change my mind. I will quickly understand what I read and will have a 'good memory,' remembering the material well for the exam.

I will start on time and stay on schedule, including 5-minute rest periods every half hour. My mind will attend only to the

text; it will absorb the big and important points; it will take the time every two or three paragraphs to repeat (recite from memory) what the author has just said. As I do this, I will feel really good about studying so effectively and learning so much. I will remember the material well for the exam on Friday."

• Weight loss: "I can feel very relaxed and I can change my eating habits. I see myself as becoming thinner and thinner, in better and better shape. I will allow myself to lose weight.

I will change my poor eating habits into good ones. Imagine a table filled with the high-fat food and the junk and sweets that make me overweight. These foods harm me and interfere with my life; they might even kill me. I won't eat them any more. I'll shove this food off the table. Now, I'll place good, healthy, low-fat, high fiber food on the table. Imagine slowly eating--only when I'm hungry, not when I'm upset--small amounts of the good food. Delicious. My hunger is satisfied and I am really pleased with my self-control.

I see myself as thin, in good shape, healthy, beautiful, and coping. When I'm bored, I'll call a friend. If I'm tense, I'll meditate. Instead of eating lunch with friends, I'll play handball with Joe. If I ever get 2 pounds over my limit, I'll immediately cut my calorie intake and increase my exercise for several days. I feel wonderful, full of energy, proud, attractive, in charge... I eat nutritious food but only as much as I need. Keeping in shape by eating right and exercising is a source of great pride for me."

• Stress reduction: "I am very relaxed...very relaxed. I can see that pressure comes from the outside world but feelings come from inside me. I can control my feelings. The feelings I want, I can keep. The feelings I don't want, I can discard or discharge them...get rid of them. I am a whole person with many feelings. I am aware of all my many feelings, but I can chose which feelings I want to keep and which to get rid of. I choose to be peaceful and rid of stress. I feel good... at ease... calm... composed.

Furthermore, I can build a shield against the outside pressure. External stress will just bounce off me. In this way my shield will prevent the pressure from producing upsetting emotions inside. I will be protected all day from tension and stress. No matter how many demands there are outside, I will be calm inside... protected by the shield and by my decision to get rid of unwanted emotions. When people expect too much of me or when they are critical, I will stay calm... protected and in control of the inside feelings. When I need the shield, it will automatically be there or I can call on it by simply saying, 'the shield' or 'relax.' I am very relaxed, strong, and in control of

my feelings. The shield will shelter me for the next four hours. I am safe."

• Fear reduction: People have overcome fears by watching others conquer the same fear. They even imitate others seen in a film mastering a fear. Just having vivid imagery of someone handling the fear we face may be enough to provide a new model of behavior for us to imitate. Also, hypnosis or imagery can be used to create a very relaxed feeling and then to imagine confronting the frightening situation (see confronting the fear and desensitization in chapter 12).

Other fantasies may also help reduce fears: imagine you are a powerful, important person and the other person (who scares you) is your subordinate; imagine the woman/man you want to approach will say "no, I have a jealous boy/girlfriend" (making rejection less upsetting); imagine a pleasant scene to calm yourself when scared in any situation.

Pain reduction: one procedure involves numbing your hand (or making it cold or changing it into wood or stone) and then transferring the numbness to the part of your body that hurts. Thus, reducing the pain. Another procedure involves first experiencing the pain as movable, say from the back of the head to the back of the neck, then continue moving the pain until it is finally out of your body. An example: "Even though I'm very relaxed, I can feel the pain I have been having. Focus on the pain (describe it). Now, notice that the pain is fluid...it can move within my body. As this fluid moves, it carries the pain with it. (Very gradually move the pain from its source towards the right shoulder, down the right arm and into the right hand).

As the pain enters my right hand, the fingers tighten into a tighter and tighter fist... When the fist is very tense, I can simply open the fist and throw the pain and tension away. Now, throw the pain away...completely gone. (Repeat if needed) Appreciate the relief...notice the peaceful calm that remains. I still have feelings where the pain was, so I will know if anything is going wrong... I will move, feel, and react normally. The pain is gone... drained... and I will be able to use this technique over and over again if the pain returns." Read Hilgard and Hilgard (1983) and/or Wall and Melzack (1984). Obviously, a continuing or repetitive pain must be examined by a physician immediately.

 Building self-esteem: "While remaining very relaxed, think of the labels that have in the past made you feel down or slowed you down. Imagine those labels on a blackboard. They are negative words and criticism from others and from you. Now wipe them off the board...wash them away...they are gone. Go to the blackboard, and in place of the negative labels, write positive labels...strengths that describe you... Capable... Caring... Sensitive... Good... Willing to help... Able to learn... (add other major strengths you have and/or want to develop more).

Now, stand back from the board and think of these positive traits. (pause) I am a good person... I'm fine. I am proud of myself. I am able, I have some talents. People see me as a good person. I feel comfortable interacting with people, I am as good as they are. I share my ideas and experiences with others. They are interested in me. I am positive and pleasant to be around, tactfully asserting myself, self-assured, and looking for ways to help others. I say to myself, 'I can handle this,' 'I look nice,' 'I have lots of energy,' 'I am unique, like a snowflake,' 'I'm in charge'...

I fill my mind with these positive ideas, I look for my good points, I pursue my goals, I see my life as a wonderful adventure."

• Write your own instructions for any desired change, e.g. if you are not motivated at work or at school, write self-suggestions about being able to change, becoming a successful person, deciding on your major goal and putting minor goals aside, seeing the importance of the goal and the wonderful possible outcomes, having the drive and determination to succeed, imagining yourself resolutely plodding on day after day, dream of the eventual success and the fantastic consequences for you and others around you (see method #7 for increasing motivation).

Lazarus (1977) reports using unpleasant fantasies to reduce unwanted feelings and behaviors (much like covert sensitization in chapter 11). He asks the compulsive person or cigarette smoker to imagine the awful consequences and stress of continuing the behavior. Similarly, he had a physician, who often gave women unnecessary vaginal exams, imagine getting arrested, losing his practice, and people in the community thinking he was a "sick pervert" or "dangerous man." The doctor quickly gained more self-control or will power. Note, however, that it is not a good idea to tell yourself that chocolate will taste awful if you are a chocolate addict, because you won't believe it. Hypnotic suggestions must be believable, e.g. chocolate will make you fat.

Fanning (1988) and Alman & Lambrou (1991) give much longer and more detailed visualizations in each of these problem areas. That may help you. Also, keep in mind that there are many specialized self-hypnosis tapes available for \$20.00 to \$40.00 (Simpkins & Simpkins, 1991). In most cases, though, your own personalized tape will be better.

STEP FOUR: Get prepared and have the experience daily.

Find a quiet, private place. Don't schedule anything for 20 minutes. If you are interrupted, you can answer the phone or the door, but it may be better to turn off the phone and ignore a knock. Have your self-instructions prepared. Go through the entire routine, just as you planned it, even though you don't believe you are truly hypnotized or deeply into the visualization. Try to develop a routine so you will have the experience at the same time each day. Be patient, it takes time to learn any new skill. Measure your progress.

Time involved

A couple of hours will be needed to plan and prepare the procedure you want to use. Since the effects of hypnosis and visualization are frequently short-lived, you need to schedule a 20-minute session every day. To give self-hypnosis a fair trial, expect to use it daily for at least a month.

Common problems

As with meditation, some people expect too much too fast from hypnosis or mental imagery. So, guard against premature disappointment or excessive expectations. Likewise, some people wanting instant "magic" resist having to write a script and make a tape. Such people should seek a hypnotist.

Occasionally, you may become so relaxed that you fall asleep. No problem. In fact, if you feel you have lost control for any reason in self-hypnosis, simply relax and wake up using the counting procedure *or* just go to sleep and wake up naturally.

Effectiveness, advantages and dangers

The evidence for the effectiveness of hypnosis is mostly in clinical reports. Clinical cases make it clear that some people are helped, but it is hard to know what percentage of the general population would respond satisfactorily to hypnosis. Soskis (1986) estimates that only about 10% of us are able to use hypnosis to avoid intense pain, as in surgery or childbirth. The fact is that the effectiveness of self-hypnosis suggestions, such as those given above, has not been objectively evaluated and compared to other methods. You will just have to try it and find out how well it works for you. Be objective.

An additional problem is that scientists have not yet separated the effects of hypnosis from the accompanying suggestion or placebo effects. If we think a method will work, it probably will. For example, Theodore Barber (1969) has found that a simple request without any hypnosis can produce remarkable changes, e.g. making one hand warmer and the other colder or changing heart rate. It isn't clear how the body does these things but it can be done without hypnosis.

Perhaps it doesn't matter what the real cause is; we just shouldn't be in awe of hypnosis or a hypnotist.

My main criticism of one person hypnotizing another person is that the hypnotist tends to become a superior-feeling, controlling "master" while the subject becomes a helpless, unthinking, submissive "slave." That doesn't seem healthy. Many people are intrigued with hypnosis; they want to use it with friends and at parties. I suspect they want to be seen as a comedian, a great healer, or a powerful controller. If you are not a trained professional (and qualified to treat the problem with other methods), you should *not* be using hypnotism for helping another person. You shouldn't remove a symptom that still serves a psychological purpose. And, you should certainly avoid using ageregression and probing for traumatic experiences; that could possibly cause panic and lead to a serious situation (MacHovec, 1988). Likewise, hypnosis should never be used as a form of party entertainment. You are dealing with a human life; don't demean a person by making him/her look foolish or by arrogantly playing publicly with his/her private, intimate concerns.

Self-hypnosis is easy to learn, it lets you be your own master, and it can be used whenever you need it with many self-improvement projects. It is interesting to most people; that helps us maintain our motivation to make difficult changes. Most experienced practitioners say self-hypnosis is not dangerous as long as it is used for these simple purposes and with the cautions mentioned above.

Stopping Bad Memories and Thoughts



It is obvious that some people repeat over and over very unpleasant memories that continue to upset them for years. They become preoccupied with a bad experience. All kinds of distressing events are remembered--how they were abused, mistreated or unloved as a child; how someone insulted, assaulted, criticized or dumped them; how they themselves did something very wrong; how meaningless, useless and shameful they are; how life has screwed them over; how they hate someone, some event, or some group, and so on. For a few unfortunate people, the tenor of their entire life is determined by a seemingly uncontrollable obsession with these awful memories or thoughts. Yet, other people have had equally horrible experiences--war, abuse, deaths, sins--and put the memories behind them; the bad memories are not forgotten but they are avoided or seldom remembered and apparently can remain harmless.

The belief-system that underlies the thinking of most psychotherapists and lay persons since Freud, is that highly disturbing memories need to be expressed, even if it means digging them out of the unconscious, usually in great and excruciating detail. If unexpressed, according to this theory, these toxic, partly repressed memories will seep out in the form of anxiety, various psychological symptoms (OCD, panic reactions, addictions, depression...), physiological disorders (impaired immune system, asthma, fatigue, pain...), and/or in personality disorders (suspiciousness, passive-aggressiveness, dependency, Borderline impulsiveness, social withdrawal...). The idea that bad thoughts and feelings need to be expressed is certainly not a new idea.

St. Thomas quotes Jesus as saying: "If you bring forth what is within you, what you bring forth will save you. If you do not bring forth what is within you, what you do not bring forth will destroy you."

On the basis of this express-your-feelings theory, treatment is often directed towards *improving our memories* of unpleasant events, e.g. using psychoanalysis, insight therapy, non-directive therapy, TIR, journals, autobiographies, hypnosis, and many other methods. These are not quick methods but one can understand the rationale for uncovering the festering sore, detail by detail, thus, aiding healing presumably by sharing with someone, understanding, and thinking though life's trauma.

There are many life histories taken during therapy that support the notion that fully or partly repressed memories, often terrible abuse, are indeed associated with a wide variety of long-term psychiatric disorders and difficulties relating with others and with one's self. Actually, the data is very clear that abused children, regardless of whether they forget or have crystal clear memories of the traumatic events, suffer a wide variety of psychiatric disorders as adults. It is not always true that bad memories per se lead to psychiatric problems. Just because a bad memory is correlated with adult problems doesn't prove the cause. But if the psychological turmoil as an adult isn't caused by remembered or repressed experiences, then what are the causes? We don't really have other explanations that quickly come to mind but there are certainly possible additional explanations. For example, there is compelling evidence that childhood abuse results in significant physiological changes in the brain and nervous system (Teicher, 2000). It is possible that these trauma-induced "brain alterations" could be responsible for many of the life difficulties during adulthood--and, in that case, memories would only be the initial causal factors. Another possible theory is that an individual's genetic or physiological make up, such as a quick temper or depressive tendencies, cause both the personality traits that contribute to childhood stress or trauma and result in assorted psychiatric disorders as an adult, i.e. it isn't the memories of a bad childhood that directly cause the adult problems, both just arise from the same genetic causes.

So, in summary, it seems that some people suffer miserably because they have repressed and *can't remember* horrible life experiences and some other people have miserable lives because they *can't forget* their awful experiences--they are upset by constantly remembering bad memories. Misery can certainly be caused in many ways. However, there are many people who cope with life pretty well even though they can, when they want to, remember well their terrible life experiences. And, there are probably happy, well-adjusted people who have partly or totally repressed awful occurrences. Clearly, we psychologists and psychiatrists know relatively little about these happy-in-spite-of-bad-experiences phenomenon because these well adjusted people are unlikely to seek treatment. So, how can we stop bad memories?

Relevant to all this is some recent research about "Suppressing Unwanted Memories by Executive Control." in Nature (March 15, 2001) by an Oregon psychologist, Michael Anderson. The research involved first learning pairs of words, then seeing if trying to forget or "repress" the words resulted in subsequently remembering fewer of the repressed words. The more often the subjects tried to repress words, the fewer of these words were remembered. In other words, trying to keep a memory out of consciousness (Freud's suppression) seems to facilitate forgetting or repression. However, since most therapy tries to reverse this process and decrease the repression of emotionally disturbing events, there seems to be some doubt about when remembering is healthy and when forgetting is beneficial.

Isn't it likely that many people have had... and remember... a bad experience, but they just don't think much about it or it becomes an available memory that seldom comes to mind?

Of course, forgetting paired words, as in Anderson's study, is a long way from forgetting that you were abused or molested by a relative as a child or that your mother became psychotic when you were seven. The Anderson experiment shows, however, that in some circumstances we can intentionally increase our forgetting and repression. This is of particular interest because children abused by a trusted caretaker are more prone to forget the abuse than children who are abused by a stranger. Why? We don't know, maybe because, as in Anderson's study, the more reminders you see of some event but refuse to think about it or dwell on it, the more likely it is to be forgotten. Naturally, you would see more reminders of a close relative or family friend than of a stranger, so you get more practice at controlling the memory of the bad experience. (On the other hand, the experience of being abused by a person you know well vs. a stranger will surely arouse different emotions and intensities. Those different feelings may also crucially influence the degree of repression.)

There is more discussion of the role of thoughts in determining our feelings in Faulty Perceptions. As mentioned there, research has shown that persons who continued to suffer intense prolonged stress following a serious trauma had many more intrusive disturbing

thoughts about their experiences than persons with the same traumatic history but experienced less stress. So, is it good to try to forget bad experiences--just put them out of your mind? Well, other well-known research psychologists, e.g. Wegner (1989) and Pennebaker (1991), have reported results different from the Anderson experiment, namely, that trying *not* to think about something stressful actually results in more uncontrollable negative thoughts about the situation. What happens if you are asked to not think of an elephant during the next five minutes? (See

http://mentalhelp.net/psyhelp/chap15/chap15f.htm). These researchers and many therapists believe the deniers and people-whowon't-talk-about-it, who believe they are avoiding their problems, are actually making it worse. Different therapy and crisis workers would counsel "don't obsess about it" or "just put it behind you." Science will eventually provide an explanation of these different-sounding theories about treatment but, for now, we don't have that wisdom. Probably the best approach depends on the person and the circumstances, which doesn't say much except "try different approaches."

A recent 2002 news report by Dr. Judith Hosie (j.hosie@abdn.ac.uk) and Dr.Alan Milne at the University of Aberdeen is relevant and interesting. After showing a film that arouses anger, they had male and female subjects (1) express their angry feelings, (2) inhibit those feelings, or (3) replace anger with happy memories. After showing a second emotional film and letting the subjects respond freely, they found that women who had inhibited feelings to the first film reported feeling more upset and angry than men in the same experimental conditions. That is, for women there was a "rebound effect," suppression led women to express more anger. On the other hand, substitution of happy feelings for anger resulted in women feeling less anger than men. For men, a prior attempt to replace anger with a happy memory resulted in feeling more anger than after trying to inhibit their anger. Under these conditions, anger replacement with happy thoughts works better for women while anger suppression works better for men but makes it worse for women. Surprisingly, there is little research in this area; it is badly needed. For now, find what works for you.

Many cognitive-behavioral researchers, seeing things more as Anderson does, believe some people simply think about traumatic experiences differently than others and, thus, experience different levels of stress. Thus, using methods to change or control our thoughts, such as trying to forget, or questioning the logic of the upsetting or scary thoughts, as cognitive therapists do, could be a great advantage. Research evaluating both methods--the direct reduction-of-upsetting-thoughts/feelings vs. the uncovering-and-understanding-the-details-of-the-trauma--is badly needed.

Dr. Peretz Lavie, a sleep and trauma researcher at the Technion-Israel Institute of Technology, doesn't believe in treating trauma survivors (Holocaust and war) by having them recount or relive the trauma over and over. He advocates "leaving the memories behind."

He cites some evidence for his approach: better adjusted survivors remember *fewer* of their dreams than poorly adjusted survivors and control subjects do, suggesting repression of traumatic experiences is healthy. Also, students in Oklahoma City who avoided watching TV coverage of the bombing had fewer PTSD symptoms. Other researchers have also reported that sexual assault victims, who practiced substituting pleasant images for unpleasant memories, had fewer nightmares. So, in contrast with what many trauma therapists believe, there may be some circumstances in which quickly moving beyond the bad memories is healthy for many people. Left on their own, this is what many victims are able to do, but some are not.

There are things about memory you should know. There is ample evidence, as mentioned later, that memories are often inaccurate...parts are forgotten, parts are added, memory segments from different times are all mixed up, memories are simply distorted to meet our own emotional needs, parts are often changed to make us look good and innocent, and so on. In short, memories can't be entirely trusted, at least not to the extent that we should allow them, without questioning and/or confirmation, to be used to make our lives miserable. Memories may not reflect what actually happened... and certainly our assumptions about other people's motives and intentions in our memories are often wrong. Someone else being there and experiencing our "bad experience" would perhaps have an entirely different reaction to it.

Given the fallibility of our memories, if you are frequently bothered by thoughts and memories of a bad time in your past (which makes you sad, mad, self-critical, hopeless, guilty...), what should you do? We can't give a simple clear answer. Therapists will provide, for a fee, their favorite method and confidently give you an explanation of why it should work. Here is my advice (worth what you are paying for it (:-). I suspect that all approaches are effective sometimes--with certain people, with certain problems, and at certain times. Since researchers haven't yet discovered the best method for specific conditions, I'd start self-helping with the quickest, easiest approach, which is probably a simple behavioral method. Check out Disrupt the Unwanted Behavior, Method #10 in chapter 11. If this quick thought-stopping approach doesn't seem appropriate or if it doesn't work for you, then move on to other methods as needed:

(1) I'd then try to "put the bad memory... scary experience, horrendous injustice, deeply regretful, terrible loss, infuriating incident, embarrassing moment... behind you." Try using Anderson's method, namely, consciously trying to keep the unpleasant, unwanted memory as completely out of your consciousness as possible for a couple of weeks. This method does not involve removing all reminders of the hurtful person or incident. Actually, you can continue to expose yourself to naturally occurring reminders. However, every time exposed to a reminder (or whenever the memory spontaneously appears) either pass over it without thought or immediately try stopping the memories and telling yourself to "forget about it," "don't

think about it," "let it go," "it's water over the dam," "go on to something else," "not now," "don't waste my time," "STOP!" etc., etc. This takes some intention to attend to and manage your thoughts-some people do that all the time, others don't. It isn't magic--give it a try for a couple of weeks, then evaluate (using pre and post-ratings?) the frequency and the harmfulness of the memories or thoughts/worries/fantasies.

Note: I am not implying that your should forgive the person who has hurt you. I am not even suggesting here that you try to understand the harmful situation through determinism. Those may be good ideas, but here I'm simply suggesting trying to avoid the unpleasant thoughts so you can possibly feel better and use your time more profitably. Maybe you can gradually put the incident behind you. That's all.

Note also: This bit of advice about "forgetting" assumes you no longer need the energy aroused by vividly remembering the wrongs in the past in order to build up the drive necessary to correct any still existing wrongs. As a source of determination to change some situation, the upsetting thoughts may be serving a good purpose (for a while, not forever).

(2) If forgetting hasn't worked in a couple of weeks, then I'd try some other cognitive methods to reduce the harmfulness of the repetitive or upsetting thoughts. Rather than repeat myself, please refer to chapter 14 for many cognitive methods. Also, much of chapter 6, while focusing on depression, discusses many cognitive approaches to reducing sadness by increasing rationality--the basic ideas underlying the change methods are the same, regardless of what emotions are upsetting you.

Simply learning more about the nature of memories can be a cognitive approach. For a person suffering a serious wound based on memories he/she believes to be totally accurate, just developing some doubt about the validity or completeness of those memories might radically change their emotional impact. Contrary to our usual assumption that *our* memories are accurate, scientific studies have consistently found that memories are almost always inaccurate, often in minor ways but sometimes in major, completely untrue ways. If you have highly upsetting memories or assumptions about causes, it might be healthy to question the accuracy of your memories. Daniel Schacter (2000) in The Seven Sins of Memory provides well researched information about our highly fallible and deceptive memories.

Here is a glimpse of some more research findings: many parts of the actual experiences are simply left out of our memories. At the same time, many totally made-up details are added in our memories. These additions are often immediate embellishments that "complete the story" or provide us with an explanation--a "cause"--of what we saw. Our unique additions, deletions, and distortions usually conform with our personal beliefs and, thus, meet our emotional needs. Faulty

memories come in many forms: believing something + or - happened which didn't; believing that something did not happen but it did; believing he/she did something + or - (even a horrible crime) but they didn't; believing they did not do something + or - but they did. Additional studies demonstrate that false memories can be created rather easily (Pickrell & Loftus, 2001). Moreover, parts of memories can be easily changed by suggestive questions, by being told what other people have done, by just being told to "think about it," and by previous or subsequent events.

In general, very negative memories stay with us longer than pleasant memories--the exception to this is that personally embarrassing parts often fade away quickly. In truth, we know relatively little about why some people remember vividly some bad experiences but thoroughly forget others. It probably has to do with emotional needs, pay offs, and personality. Little is also known (scientifically) about how to *accurately* recover repressed memories. Likewise, we don't know a lot about the wisdom and risks of repressing or recovering bad memories. Therapists have their hunches but the science is limited.

Of course, human memories are amazing phenomena. But, at the same time, careful study should convince us that memories are seldom if ever the total truth--there are idiosyncratic distortions and omissions. For instance, there are even cultural-family influences on memories--the childhood memories of American and Chinese adults are very different focusing on different aspects of their early lives. Our memories may be our most available and direct view of the past but it could be healthy to recognize that we are seeing our past through a murky, dark, wavy glass. The total picture is almost never available to us.

It might be helpful to find out if others who were there have the same memories. These efforts to corroborate our memories often lead to discovering that others familiar with your history have somewhat different interpretations or impressions--different opinions. Sometimes the memories of others are quite different from ours. In many situations, the consideration of other views could be realistic and healthy. Even the reduction of our certainty of what happened and why it happened might be useful in our search for insight and understanding. See woundology as an example of how people's reactions and social support can influence the content of our memories.

- (3) Psychology has developed several ways to reduce the emotional responses associated with a scary situation or object and when unpleasant memories or thoughts come to mind. They include some self-help methods:
 - Confront the scary situation over and over (exposure methods in chapter 12)
 - Vent the feelings (chapter 12)

- Desensitization (chapter 12)
- Stress inoculation (chapter 12)
- Correct false beliefs (awfulizing) and develop healthy attitudes (Rational-Emotional, determinism, optimism in chapter 14)

In addition, some specialized therapy techniques have been developed in the last decade or two to deal with the emotional reactions lasting long after a trauma. Most have not, as yet, been translated into self-help methods, but that is probably not far off. One of the more promising techniques is TIR, Traumatic Incident Reduction (http://www.healing-arts.org/tir/) , which utilizes aspects of exposure, desensitization, and non-directive counseling. The client selects a specific traumatic incident that he/she wants to handle better. The therapist simply asks the client to review, without commenting, the event as though it were a videotape in his/her mind. When the silent review is finished, the therapist just asks "what happened?" and the rest of the session (which lasts as long as needed) is devoted to allowing the client to describe the incident and his/her reactions while reviewing it. If there is time, the therapist asks the client to do the same thing again (reviewing the videotape and then describing the event as well as his/her reactions while reviewing it). The therapist doesn't give detailed instructions; the idea is for the client to get comfortable reviewing and describing the traumatic event. After a few sessions done in this manner, the client becomes more and more comfortable with the process. This will lead to attending during the review to different aspects of the trauma situation. Eventually, the client will courageously attend to and describe the more disturbing emotional aspects and the more uncomfortable actions during the event. TIR usually takes 10 to 20 hours spread over several weeks.

If things go well, after several sessions the client will have little or no negative emotions associated with the incident. During the repeated reviewing process, the client will frequently remember another traumatic event. In that case, the other event will also be reviewed and described over and over until the emotional reactions are eliminated. Naturally, as the details of the trauma experiences are explored in this way, new aspects will be discovered--these may be different emotions and feelings, thoughts and needs that had gone unrecognized, and a better awareness of the body's physiological reactions during the event. This enhanced perception of the trauma will often lead to new insights and new ideas about how to cope with similar situations.

It is uncertain if a person can benefit from such a repetitive review process when done alone, without a therapist. Since this often involves a highly emotional situation, I would not recommend it. Yet, the TIR therapist intentionally avoids being directive, encouraging, expressing sympathy, and giving other reinforcing behaviors. So, the client remembers and thinks about the trauma situation over and over in a safe, calm, undemanding setting. In effect, the trauma experience is being desensitized. Keep in mind, research has shown that writing in detail over and over about an emotional experience also reduces

negative emotional reactions to the stressful situation (http://mentalhelp.net/psyhelp/chap15/chap15f.htm).

A more self-help oriented method for understanding and soothing intense emotions is Emotions Manager 2000 (http://www.quate.us.fm/) (\$39.95). This is a software program published by Quate Publishing and based, in part, on Rational-Emotive Therapy. Don't expect this CD-ROM to offer quick, easy relief; just like therapy or other self-help methods, it requires daily work for several weeks or months. If that is not your habit or style, then don't buy it. Here is what you input to the program: whenever you have a strong emotion (happy, sad, angry...) in any arena (work, spouse, children, health...) of your life, you enter and store a detailed description of the experience into the program. Then you write out and record your answers to several questions about this emotional situation: What events or thoughts preceded your strong emotion? Were there some positive things about this experience? What is the worst case scenario--what awful things do you think might happen? If the worst things did happen, how could you handle them? That is what you do, so in a couple of months you will have recorded at least 60 and maybe hundreds of intense experiences to study and understand.

The value of the Emotions Manager program really comes in the review and analyze phases. It will enable you to review your recorded emotional reactions by kind of emotion and arena, so you can see if the emotions are changing--stronger or weaker, more or less frequent-and if there are trends and connections. It will print out colored graphs and tables, showing how recent emotions compare to reactions in the same situation 6 months ago. It will help you identify your frequent triggers, your catastrophizing thoughts, your common irrational ideas, and your usual ways of trying to cope. The program does not do the thinking for you and draw conclusions about how to change your thinking and expectations, how to correct irrational ideas and schemas, how to do less awfulizing and more preferring, how to see even unwanted outcomes as "lawful" and the natural outcome of existing complicated events and causes, and so on.

Another wrinkle that some therapists would add would be to ask you to record or remember the dire expectations you had during many, many times you have been upset. Then, six months later record what the actual outcome was, so you can check the accuracy of your awfulizing or catastrophizing. In this way, you use subsequent reality to correct some of your habitually upsetting thoughts.

If you are an introspective person with some compulsive tendencies and/or a love of writing, this method (or something like it) might work very well for you. Anyone this committed to gaining self-understanding and control, might also benefit considerably from consulting with a therapist. Such a detailed record/diary should be useful in therapy. If you are not in therapy, read a Rational-Emotive or Cognitive Therapy book or, at least, read Method #3 near the beginning of this chapter. Most of us need some outside help in

identifying our faulty logic and automatic ideas (such as pessimistic or self-critical thoughts) as well as developing new and better ways of thinking or coping, etc.

(4) If none of the forgetting, behavioral, and cognitive techniques have worked after a couple of months of daily effort, then an effort to gain insight into the persistence of the upsetting memory/thoughts/feelings is another choice. Chapter 15 concentrates on self-understanding, including uncovering needs and motivations that one has not been aware of. Just reading and understanding other cases similar to yours could be helpful. But when one seeks new insight, the usual and best approach is to see a therapist specializing in the kind of stress or trauma that you have experienced. In one form or another, insight therapy seeks to establish an absolutely safe place where all thoughts, feelings, needs, wishes... can be explored and disclosed to the therapist (and yourself). Obviously, this is not a quick fix...count on it taking months. Moreover, considering the typical therapist's fee is \$100 a session or more and that many people are not covered by insurance, long-term psychotherapy is not a practical solution for many people.

Bibliography

References cited in this chapter are listed in the Bibliography (see link on the book title page). Please note that references are on pages according to the first letter of the senior author's last name (see alphabetical links at the bottom of the main Bibliography page).