

CHANGE YOUR THINKING...CHANGE YOUR LIFE! ~ by Judy Urquhart, MSW, RSW

“For as he thinketh in his heart, so is he...” ~ Proverbs 23:7

Gentle Path often gets requests from Employee Assistance Companies or clients for counsellors to provide Cognitive Therapy or Cognitive Behavioral Therapy (CBT). What is Cognitive Therapy? CBT grew out of the work of Albert Ellis (Rational Emotive Therapy) and further developed in the 1960's by psychiatrist Aaron T. Beck. Cognitive Therapy states that thoughts, feelings and behavior are all connected. For individuals to overcome health or mental health problems—for example, depression, inappropriate expression of anger, panic and eating disorders—they need to identify and change unhelpful or inaccurate thinking (sometimes referred to as “stinking thinking”), unacceptable behaviours and distressing emotional responses. Cognitive Therapy teaches skills for individuals to learn and practice so he/she can become his or her own therapist. (*Paraphrased from an article in Wikipedia*)

Basically, how we think eventually leads to feelings which lead to behavior—if I think angry thoughts, eventually with enough thinking (obsessing) it will translate into angry acting out behavior. Many times, we walk around thinking that our thoughts are private, that no one knows what's going on upstairs. However, humans have the ability to interpret body language and facial expressions. Think for a moment—have you ever gone into a room where there was an angry person and you knew they were angry, felt it even, before they even opened their mouths? And even though the angry individual denied being angry, more often than not you knew they were—clues to his or her anger might be facial expressions, body movements (tapping fingers, quickly swinging a leg, pacing, pushing down heavily on a pencil or pen, slating or slamming things around, and so on). Most will answer in the affirmative. Why is this so? Because anger is energy and it pulsates. The movie Spiderman refers to this ability as “spidy sense!”

Changing our thinking means that we must look at our perceptions—ideas, attitudes and beliefs that have been forming since childhood—many of which are inaccurate distortions that grew out of earlier, negative experiences and over the years have become entrenched. For example, if I grew up in a non-nurturing environment where my emotional needs were not met, I may have developed a belief that I am unlovable. That belief may color my relationships, life choices and self-esteem. When someone rejects me or says negative things about me, I may take it to heart and believe the rejecting individuals have good reason

to treat me badly since I have an entrenched and erroneous belief that I am unlovable and may be getting what I deserve.

During counselling, therapists help clients unearth those negative, self-defeating beliefs that are the filters through which life events are viewed. When I change how I think and feel about myself, I function much differently in all aspects of life and I make healthier choices. That is not to say that I will never revert to old thinking and behavior, but I recognize them much sooner and have new techniques with which to challenge that “stinking thinking.” I can reframe the event and see it differently by asking myself questions, such as: “Just because he/she said it, does that make it true? How might it be a good thing that I did not get that job or marry that person? Could it be I am being spared something worse down the road? What did I learn about myself during this encounter or event? Going forward, what would I like to do differently.”

One of my favorite quotes comes from feminist literature and says: “Of all the opinions that are passed on us, the one that needs to matter the most is the one we have of ourselves.” Helping clients change negative self-talk is an important technique in changing unhealthy behaviors and inappropriate emotional responses.

Worry and regret are often referred to as the twin thieves that rob us of our ability to be present in our lives. We can be consumed by thinking about the past, even though we cannot go back and tinker with it and make it come out differently, or we can be obsessed about the future and the “what if’s”? *“Obsessive/compulsive disorder is now recognized as one of the most common causes of disability worldwide.”* (Khouzam) Anxiety disorders, depression, low self-esteem and anger problems are often the result of overthinking, ruminations of the past or obsessing about the future, both of which we have no control over, waste energy and ruin our “now.” In the words of Mark Twain: *“My life has been filled with terrible misfortunes, most of which have never happened.”*

Some techniques to help with obsessive thinking include:

- 0 Distracting oneself—calling a friend, leaving the house, volunteering, exercising, going to a movie, and so on
- 1 Self-soothing techniques—listening to favorite music, lighting candles, preparing or buying favorite foods
- 2 Visualizing a large stop sign
- 3 Putting a rubber band around my wrist and giving it a pull whenever I catch myself obsessing about the past, the future, a person or a current event
- 4 Create a thought journal that answers the Who, What, When, Where and Why the thought is occurring. This can be very helpful in identifying the times, places, events or things that may trigger the obsessing thinking. Once that is known, a plan can be devised in calmer moments that can be called upon when one is caught up in obsessive thinking
- 5 Meditation—One technique is to picture each obsessive thought as floating away in a bubble. (Practice beforehand to be familiarized with the technique)
- 6 Schedule a time for worrying or obsessing. Have a worry chair and an alarm clock that alerts the end of the worry time. In this way, rather than wasting a whole day or days worrying or obsessing, it can be put aside for the “worry time”
- 7 Practice relaxation techniques. There are lots of books available to teach you how
- 8 Join a group where you can meet other like-minded people
- 9 Work with a counsellor
- 10 Talk to your doctor about the possible need for medication