

Rewire My Brain

Ending Inner Battles: Finding Inner Peace

Chapter One: A View of our Journey

There are in the world a group of people, and I include myself in this group, whose inner lives frequently consist of a battle, or battles. The most obvious example (to me, because this is me) are people who struggle with their weight. There are "substantial" people in the world (Dawn French comes to mind) who are big, who are happy to be big, and who celebrate bigness.

Then there are people who are, by any measurement scale, the perfect size, and whose whole lifestyle; their nutrition, their exercise, all their habits, what goes on between their ears and in their souls easily and perfectly supports their perfect size and shape. If we fatties weren't such nice people, we'd hate them!

And then there's us. If you're like me, you're definitely overweight, probably obese, probably not happy with your size, probably hating to use the word "obese". We eat too much of the wrong things, and even as we're doing it, we don't like doing it. We have, in the past (or maybe now, if you're in one of those phases of your life) been on a diet that lost you loads of weight. At the very least your friends said "Well done"; you may have even won the "slimmer of the century" award or whatever.

But then life hits us with a curve ball out of left field, and we reach for the ice cream, or the chips, or the wine, or the chocolates, or all together mixed in a bowl. And it doesn't make us feel better, but there is a part of us inside that *thinks* we're feeling better. Or thinks we'd feel even worse if we weren't eating, drinking, smoking, gambling, getting a hit, or being mean to ourselves or the dog.

So we hate ourselves, and we hate ourselves for hating ourselves, and the spiral deepens, and the only way out is more ice cream and chocolate sauce, or another vodka, or more TV, or sex, or bingo, or roulette, or ... whatever strange and unhelpful thing inside our heads has persuaded us will make us feel better, even though we know it won't.

"I ought to stop", we tell ourselves. "I'll start my diet tomorrow". "I'll start my diet the day after my birthday". "I *will* fit into the smart clothes I liked myself in 20 years ago, by my sister's wedding day". We wake in the morning, head like dirty cotton wool, throbbing, mouth like a baked cesspit, swearing we'll never, ever, touch another drop of alcohol again in our entire lives ... until we do.

If you're anything like me, you probably have at least three little voices running inside your head. One's saying "EAT" (drink, get a hit) while another is already making excuses, "I will start my diet (dry out, get clean), soon, I promise", and the third is being critical and cynical, "yeah, right, like we believe that! You're always going to be a weak-willed fatty (drunkard/smack-head), admit it. You're just like your mother/father/useless brother/sister, uncle Fred". And in the midst of this miserable battle, all we can do is reach for whatever it is that turns down the volume.

This book will take you on a journey from inner turmoil to inner peace. Along the way we're going to understand where all this comes from, and begin to understand that this *isn't* something that we were born with. It *isn't* our true inner nature (99.9% of us are really nice people! And the other 0.1% could be, with a little help). It is due to the fact that at

some point in our lives, something inside got literally "bent out of shape". Some circuits in our brain got re-wired, backwards, so that things that *should* help us, actually do the reverse. This is what we call "psychological reversal".

We will understand that this happened because *at the time* this was our soul's *only* way of protecting us, of maybe saving our lives (or so we believed at the time) from what seemed like an impossible situation.

We will learn that there are several different forms of psychological reversal. Some are relatively trivial, and temporary, like when for a few hours you get muddled between left and right, and then it seems to get straightened out, and you're fine. Some are specific, but long term: you know that if you give this talk at work, and make a good job, you'll get the promotion you've always dreamed of. You know that everyone is rooting for you, but you can't stop the sweating, shaking, voice drying in your throat. You can't do it.

Then there is the General Psychological Reversal (GPR) which makes us depressed, self-deprecating, moody, dependent, controlling; generally not the sort of person that people want to be around, and that includes us. At it's worst, GPR can lead to suicidal thoughts and self harm; I know; I've been there.

And there are a few other species of psychological reversal around, too. We'll get to them all. They can all be dealt with. If psychological reversal is what's making your life a misery, or at least less peaceful than it could be, then what you'll learn in this book will help. I promise!

Lastly, we'll learn how to deal with psychological reversal, both in the short term, and for the rest of our lives. We'll learn the magic ingredients that make it work, and that make it stick. We'll learn how to see ourselves like the *best* of our friends, and the *truest* of our loved ones see us. We'll learn how to achieve inner peace.

Probably most importantly we'll learn that we don't have to do this by ourselves, that there are millions of people out there willing and eager to help. They are us. Because here's the one *big* hope that the universe has given us. While we psychologically-reversed people are rubbish at looking after ourselves, we are mostly pretty good at, or at least eager to be, looking after other people. With what you learn in this book, you will be able to achieve what I have been seeking for most of my life: if I show you how to change, and *help* you to change, would you, please, do the same for me? As I said in the letter that probably brought you to this book, I have the magic secret; I'm just missing the most important magic ingredient, You!

Chapter Two: Where did it all Begin?

The first thing I'm going to give you in this book is some big words that I will explain carefully. They will help us understand some things that we may not understand now, but best of all they give us some big sticks to use on the know-it-alls who always have advice that we neither want nor need. In future, when someone says that all you need is self-control, a little will-power, and the diet book that Auntie Flo used, you'll be able to say, "Well thank you. And tell me, how does it deal with the effects of Paradoxical Communication?" (As you will soon learn, this is, itself, a paradoxical communication, and you will see the results as Know-It-All stands there with their mouth flapping, but no sound coming out.)

While they are still looking stunned, you'll deliver the killer blow, "How does Aunty Flo's book deal with Watzlawick's Self-Defeating Paradox?" (You'll need to be confident pronouncing "Watzlawick": say "what's la wick".)

But seriously, folks, we need to get to understand some ideas that may be new, and they will need new names; that's the major reason to introduce the jargon; if it enables us to get a little bit of "own back" on a few people along the way, then so be it!

We need to delve into the world of relationships and communication and understand communication cleanliness.

There are "clean" communications: "*What's the time?*", "*It's a quarter past three*". And there are "unclean" communications: "*What's the time?*", "*What, someone stole your watch?*"

Once you get this initial idea, you'll start to notice unclean communications all around you. Most embarrassing is when you notice them coming out of your own mouth! My father (you'll get to know him quite well through this book) was so good at unclean communications, that he seldom produced the clean versions, and I learned to do unclean stuff myself, without ever thinking about it. There was a sense that they were, in some way, "clever". They are not. They are usually, to a greater or lesser extent, unkind.

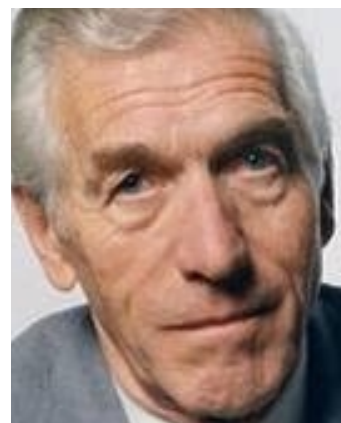
As I write this, my brain is being switched back into thinking about these things, and I just caught myself doing it. It's early morning, Easter Saturday, 2011, and I'm writing this sitting in the garden, at the garden table on the decking (yes, I know decking is passé now, but we like it!) Susan offered to make me breakfast ("thank you, dear") and brought it out to me on a tray. "Shall I join you?" she asked, and before I could stop myself I said, "If you must". I didn't mean it. I was happy, eager, for her to join me. I was just being "clever". Yuk. Luckily, she didn't hear me. It only took a second to say; it would have taken ages to repair the hurt, and that's just a minor, almost insignificant incident.

It's a Paradoxical Communication. "Paradoxical" because it actually achieves the opposite of what it's meant to achieve. I suppose that, deep inside me, something really stupid expects my "witty little jibe" to be received with a light laugh and a chuckle, and Susan saying, or thinking, "My, aren't you *clever?*"

Actually, bless her, she does believe that, but if she'd heard that silly remark, she'd have thought me less clever, less witty. What a paradox! She'd probably have thought "My, *aren't* you clever?" (And that thought, if said out loud, with the switch in emphasis, would be a paradoxical communication, because what she would have *meant* would be the precise opposite of what she *said*.)

It's probably what Watzlawick meant by a "Self-Defeating Paradox". I wanted to appear witty, wanted to be appreciated; actually, it's going to make me appear insensitive and silly. Self-defeating.

There are many other forms of paradoxical communication, but the one I want to spend most time on is called the "Double Bind". The term was coined by an English philosopher and thinker, Gregory Bateson (you need to learn all these names, too; it's all part of your armoury to defeat the know-it-alls).



Bateson was working, with a bunch of colleagues, on wondering where schizophrenia comes from, and was looking at what happens in families, and he noticed this pattern of communication called the "double-bind". Since then lots of academics have argued about it; whether it exists, whether it's harmful, whether it produces schizophrenia.

I can tell you for 100% certain that the double-bind exists, and that it is harmful. Whether it produces schizophrenia I have no knowledge either way. Whether it *always* produces schizophrenia, I know for certain is not the case.

Double binds require two people: the "oppressor" and the "victim". My dad and I were a world champion team, him as oppressor, me as victim. It bent me out of shape, and produced my psychological reversal, but for all the problems and difficulties I either have, or imagine I have, I'm not schizophrenic! Just in case you're wondering if you're schizophrenic, I can assure you that you're not.

Schizophrenia (/ˌskɪtʃəˈfrɛniə/ or /ˌskɪtʃəˈfriːniə/) is a mental disorder characterized by a disintegration of thought processes and of emotional responsiveness. It most commonly manifests as auditory hallucinations, paranoid or bizarre delusions, or disorganized speech and thinking, and it is accompanied by significant social or occupational dysfunction.

Wikipedia

Less than 1% of the population are schizophrenic, and if you have bought and are reading this book, then I would say your grasp of reality is such that it's *incredibly* unlikely that you're schizophrenic. But if you are, then this book still might help; check with your mental-health professional!

But it's significantly more likely that you're psychologically reversed, probably as a result of being consistently on the receiving end of paradoxical communication as a child, probably of the sort called "double bind".

So let's talk about double bind, what it is, and how it's done.

I was an ordinary child; not bad, not evil, not perfect. I did silly things. Didn't we all?

I was an only child; I wasn't allowed friends in the house, so if something happened in our house, it had to have been done by my dad, my mum, or me. So my "silly thing" would be discovered, my dad would get furious, and he'd say "did you do this?".

Well, dad, let's think about it. Was it you? No, we wouldn't be having this conversation if you did. Was it mum? No, same reason. So that only leaves me, doesn't it? So why are you asking?

Of course, I never said all that at the time; didn't even think it. I was frozen, like a rabbit in front of a weasel. My brain was totally shut down from rational thought; I was terrified.

"What were you thinking of?", he would bellow. What was I supposed to say? "I guess I wasn't really thinking of anything, Dad, it was just one of those mildly foolish things that all kids do from time to time". I didn't say that, either.

And then he'd deliver the killer blow.

"So are you mad, or are you evil? Come on, which is it?"

"Well, Dad, let's look at this rationally. I'm a pretty normal kid, aged four and a half, and in the course of playing, rather carelessly I will admit, but then I am only four and a half, I got some crayon on your new wallpaper. I appreciate that you put a lot of effort into

decorating the living room, and the crayon doesn't look good, but, for heaven's sake, 'mad or evil'? That's a bit extreme, isn't it? How about we just say I was silly, even careless, that I'm sorry, and we call it quits?"

But I didn't say *that*, either. I just stood there, fighting back tears, not knowing what to say.

"Don't bloody cry", he'd bellow, "you want to be a sissy, too?"

Wow, dad! That's a gold-medal option; now we've got a triple-bind. Now I get to choose between being mad, evil, and/or a sissy. I think I'll choose mad-sissy if it's OK with you.

All of those things that I *didn't* say are what is called "meta-communication"--communication about the communication. When someone says something to you, and you say 'what did you say?' that's a meta-communication: you are asking (communicating) about the communication.

This is important, because in a true double bind, meta-communication between the victim and the oppressor *is not* possible. It would probably be called "answering back", and the victim has already been very well educated into the non-possibility of answering back. You don't have to be a world-champion double-binder like my dad to have been guilty of saying to some poor child, "don't answer back". I've done it myself, as I'm sure my children will tell you!

So here's the full set of instructions for how to do a double bind.

1. You need at least two people, the Oppressor and the Victim.
2. The oppressor has to have some sort of authority or power over the victim: Parent/Child, Teacher/Child, Boss/Employee, Spouse/Spouse, Sergeant/Squaddie. I'm sure that you get the idea.
3. Meta-communication is not possible, because of the nature of the relationship.
4. The oppressor offers the victim a "heads I win, tails you lose" proposition, and insists that a choice is made.

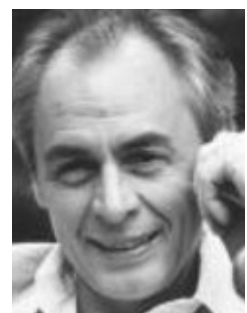
That, basically, is the double bind. It's like being put in a vice and being hammered; it's very painful, and there's no way out. And once you're there, the oppressor has a number of delicious options: they can tighten the vice, or hit you harder, or both.

Is it any wonder that we get bent out of shape?

Earlier on I said:

... this happened because at the time this was our soul's only way of protecting us, of maybe saving our lives (or so we believed at the time) from what seemed like an impossible situation.

A fascinating man called R D Laing (Ronnie Laing) was the source of this idea. According to Russell Miller, writing in the Sunday Times in 2009, Laing:



... set out to make insanity understandable to sane people and put forward the proposition that madness was caused not by some genetic inheritance, but by other people; that a breakdown could be considered a breakthrough; and that blame for madness could be attributed to the lunacy of society

[footnote:

http://women.timesonline.co.uk/tol/life_and_style/women/families/article6058901.ece]

Laing was a brilliant thinker and psychotherapist, who shed a lot of light on what happens within families, whilst leading a tortured and tortuous family life himself. He was the perfect example of "do as I say, not as I do", but even his very-hard-done-by children (all 10 of them!) wouldn't deny his brilliance at helping other people. We are lucky; we aren't Laing's children, but we can be heir to his thoughts and discoveries:

Here are some snapshots from Laing himself:

Insanity - a perfectly rational adjustment to an insane world.

This is, perhaps, the core thought that we get from Laing. It is that this thing that has happened in our heads, be it "mad", "bad", or "sad", was a "*perfectly rational adjustment*" to a world that, to us at the time, seemed insane.

The experience and behaviour that gets labeled schizophrenic is a special strategy that a person invents in order to live in an unlivable situation.

You can replace the word "schizophrenic" with almost anything you like. Here's my version (and you may quote me!)

The experience and behaviours produced by psychological reversal are special strategies that we invent in order to live in an unlivable situation.

When, as a victim in a situation in which we have no power, we are put in a double-bind, something has to give. We must congratulate ourselves that we survived, and we survived with sufficient rationality that we have made a success of living in the world. Maybe not as much of a success as we would like, or would hope for, or dream of. Those things can be dealt with, and we will deal with them here. In the meantime, let's all just take a moment to give ourselves a pat on the back that we got this far in as good a shape as we are in.

Well done, us!

Chapter Three: Where to, Next?

So we're bent out of shape somewhere inside, and it causes us to behave in ways that are less than helpful to us. What can we do about it? Well, there are loads of things, and I'm only going to consider one of them here, because I think it's the process that will give us "the most bang for our buck"; the process that will give us the best results, for the least amount of time and money spent.

If you want to know about some of the other things, my wife, Susan Courtney, a professional counsellor and psychotherapist, is writing a book called "Talking for Happiness". Go to her website, www.TrueChange.org, sign up for her newsletter, and you'll get to hear about her book as soon as it's ready. As a reader of this book, you may even get a complimentary copy, but I'll leave that to her!

Now, I'm going to appear here like a bit of a tease, because I keep talking about the answer to psychological reversal, and keep not saying what it is. That's because it is so unbelievably weird when you first hear about it, that, if you've never come across anything

like this before, you'll just sling the book in the rubbish bin, and go and eat a cream cake. But it works! So please bear with me as I tell you my story.

The Background to Psychological Reversal and Tapping

Back in 2003, in the space of a week, my love left me, my business collapsed, and my landlady said I had to move out, because they were selling up. With no money, and no income, I wound up living in the attic of my ex-wife's house. It was, without doubt, one of the lower points of my life.

I was watching daytime TV ("Richard and Judy": I told you I was low!) and they featured a very strange therapy: Emotional Freedom Technique (EFT). My best friend, Richard, had told me about EFT some time previously, but it sounded so weird that I dismissed it out of hand. ("You tap on your face, and you get better? Yeah, right!") And yet here it was, on the telly, curing people of a variety of phobias and other conditions. I was so desperate; I had nothing to lose. I called Richard, ate humble pie, downloaded a bunch of stuff from the internet and gave it a try. It saved my life.



I got trained as an EFT practitioner (I went to the people I'd seen on TV), and in a number of other "Energy Psychologies" and in the course of my training met a world expert in Energy Psychology, fell in love with her, and married her! (So phooey on the lover who left!)



So what are the benefits of EFT, or Tapping as it's called now?

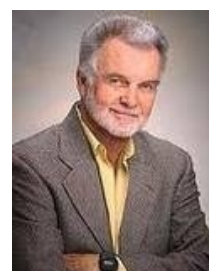
- It's easy; anyone can do it
- It works on a wide range of problems
- It has no nasty side effects
- It's a "Martini" therapy (you can do it any time, any place, anywhere!)
- It's cheap, or even free

I have helped dozens of people using tapping, and my wife, Susan, who is a professional counsellor and psychotherapist, regularly uses it with many of her clients.

And yet I'm still addicted to food!

I'm not selling this to you, am I? Bear with me.

The man who first discovered tapping, Dr Roger Callahan, also discovered psychological reversal. There is a physical test that you can do, called "muscle testing" (you can see a demonstration video on our website), that can reveal what's going on for people subconsciously.



Callahan discovered that, for many addicted people, while they consciously wanted to overcome their addiction, subconsciously they didn't. They were, as he called it, "psychologically reversed". He invented a process that fixes psychological reversal, and back in 2003, that process was what helped me the most.



We need to go on a little history tour. Back in the early part of the 20th century (their book was published in 1949 and describes 25 years of experience) husband and wife team Henry and Florence Kendal describe a diagnostic process which they called muscle testing, where you apply gentle pressure on a limb under various conditions, and make a judgement

on the underlying muscle tone, and use this as a basis for diagnosis. Florence Kendall's book, much re-printed, still gets a five-star rating on Amazon, and is used by physiotherapists, sports scientists and other physical therapists.

Their work was picked up in 1964 in the USA by a George Goodheart, a chiropractor. Goodheart used it to diagnose a wide variety of physical conditions (not just musculo-skeletal conditions) which could be corrected by chiropractic. Goodheart called his method Applied Kinesiology



Applied kinesiology is presented as a system that evaluates structural, chemical, and mental aspects of health by using a method referred to as manual muscle testing alongside conventional diagnostic methods.

Wikipedia

Many "conventional" health practitioners deprecate AK and maintain that it doesn't work. However, a very high proportion of chiropractors continue to use it; you'll have to make up your own mind! Subsequently, John Thie, a member of Goodheart's research team, developed a self-help version of AK, which he called Touch for Health, and which is widely taught and available around the world. We will have reason to come back to TfH later!



Subsequent to Goodheart's work, Australian psychologist John Diamond developed a version of AK that could look at the effects psychological events upon the body. Now before you begin to wonder if Diamond was a bit less than scientific, you have to look at his CV:

John Diamond, MD, (born August 9, 1934) graduated from Sydney University Medical School in 1957 and was awarded his Diploma in Psychological Medicine in 1962. He is a Fellow of the Royal Australian and New Zealand College of Psychiatrists, a Foundation Member of the Royal College of Psychiatrists, American Holistic Medical Association, a Diplomat of the International College of Applied Kinesiology and is a Fellow and past-president of the International Academy of Preventive Medicine. He is an Honorary Advisor to the Price-Pottenger Nutrition Foundation and its Japanese sister organization, The Koushikai Foundation.

As my American cousins might say, this guy ain't no slouch!

Diamond invented a method of using muscle testing, combined with interventions on the acupuncture meridians, to diagnose and treat certain psychological imbalances.

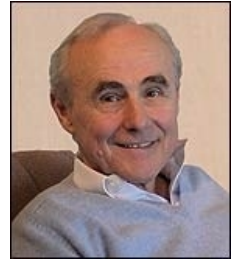
... development of Behaviorial Kinesiology in the 1970s and his discovery of the link between the meridians and the emotions ... the result of over forty years of research and clinical practice. ... Diamond was the first medical doctor trained in applied kinesiology to become a Diplomate of the International Board of Applied Kinesiology (1976) and he is the only doctor trained in applied kinesiology to have studied personally with Florence Kendall, publisher of Muscles-testing and Function that first inspired George Goodheart.

John Diamond: The Third Side of the Triangle

So here we have muscle testing as a well-established diagnostic process, now being used in the area of behaviour.

Forms of Tapping: TFT, EFT, ETC

In the early 1980s an American psychologist, Dr. Roger Callahan, who specialised in anxiety disorders, learned Applied Kinesiology and the meridian system of acupuncture to find better solutions to the problems of anxiety and phobias. He found that combining the use of tapping on acupuncture points while simultaneously focusing on the problem at hand, the problem can be removed, often permanently. He invented a process called Thought Field Therapy, still much used today around the world (indeed, Paul McKenna, the famous hypnotist, has said that if he'd discovered TFT earlier, he wouldn't have bothered with hypnotism).



A Stanford-based engineer, Gary Craig, studied with Callahan, and subsequently developed a simpler method, which he called EFT (Emotional Freedom Technique) which has spawned dozens of spin-offs, with, as Susan likes to say, a regular fruit-salad of acronyms: TFT, EFT, TAT, BSFF, ETC, and etc.

The point of all this is that this stuff has a long pedigree, dating back to the beginning of the 1900s, and wide application. Indeed, one single piece of EFT research by Andrade and Feinstein involved 29,000 patients over a 14 year period, and showed significant efficacy of using EFT¹.

It's weird, but it works, and that's my experience, too.

I've been researching the history of all this, and many people say that Callahan discovered PR subsequent to developing TFT, but on his own blog he says that PR came first, a year before TFT. He was already using muscle testing in line with the discoveries of John Diamond, and, although he was having a lot of success, he found that about 40% of his clients were proving stubborn, or resistant ... they just didn't seem to respond to the Behavioural Kinesiology. In particular, they were patients who were depressed, addicted, over-eaters. People who *said* they wanted to lose weight, but just didn't seem to be able to do it.

Muscle testing can reveal our subconscious thoughts and feelings, as opposed to our conscious thoughts. You ask someone to make a statement that you and they know to be true, and test the muscle tone. You will feel a "strong" response. Then you ask them to make a statement known to both as false. You will get a weak response. Callahan asked the weight-loss patient to say "I really want to lose weight" and tested them. He got a weak response. He then asked them to say "I really want to stay at this weight". He got a strong response. This is the basic test for psychological reversal.

And his discovery was that, if you focus your thoughts in a very precise way on the problem, and tap on a sequence of acupuncture points, the problem vanishes. The secret is framing the problem in exactly the right way, and knowing which acupuncture points to tap, and in what sequence. Callahan had a complex sequence of muscle testing to do the diagnosis, and that led to a whole library of tapping sequences, or "algorithms" as he called them.

Gary Craig's insight, however, was what moved tapping on by leaps and bounds.

Think of a medical problem that can be cured by drugs. A headache, maybe. It may well be the case that a couple of aspirin will cure the headache. However, it is *not* the case

¹http://www.tapintofreedom.com/downloads/andrade_feinstein_paper.pdf.

that if two will cure it, four will cure it twice as fast or 8 in a quarter of the time. With pharmaceuticals, it's important to get the dose right, because most pharmaceuticals are *curative*. However, it seems that tapping on an acupuncture point is not *curative*, but *normative*. If the system controlled by the acupuncture point is functioning under par, then tapping will give it a boost, and tend to restore it to normal. If it's performing *over* par, then tapping tends to calm it down, and restore it to normal. And if it's normal, then tapping doesn't do much at all.

Given that you only need to tap on one point for each of the 14 acupuncture meridians, and given that tapping all 14 only takes under a minute, it's easier to tap on them all, and not bother with the diagnostic muscle testing to tell you which ones need tapping.

EFT revolutionised the whole field--and still needed to incorporate dealing with psychological reversal. It turned out that the fix for PR was also normative; we can safely tell everyone to include the PR process at the start of every session. If people don't need it, no harm done. If they do, it helps to ensure the success of the treatment.

Getting Started Correcting PR: General Psychological Reversal

So here's what you do. We'll do a little process here to deal with General Psychological Reversal, and then go on to specific psychological reversal. Later in the book we'll get more precise; precision is one of the most important keys.

Taking the side of your hand, run a line down from the side of your neck to your chest. Imagine another line going across your chest from your armpit ... as though you had a string round your chest, tied as high as you can get it. About where these lines cross, poke around a little, and you'll probably find a place that's tender. People call it the Sore Spot. Some people have to poke around on their chest quite vigorously until they find where they think it is. Others yelp quite loudly as soon as they touch it. Rub it with a circular motion (I say clockwise as an observer would see it; Susan says do it whichever way feels right or feels good). Use as much pressure as feels good; I massage it quite hard; certainly enough to make me grunt, but not enough to make me yell! You'll find, with a little practice, what is right for you.

By the way, this place is not an acupuncture point, it's a "Chapman Neurolymphatic Reflex".²

But as important as the tapping or the massaging is, it's what you say while massaging that's more important, because we need to focus on a specific condition or problem.

Here's what you say whilst massaging:

Even with all my problems and limitations, I deeply and completely love and accept myself.

Say it three times, out loud (saying it to yourself is advanced stuff, and comes later!), while massaging that sore spot.

²Neurolymphatic reflexes were discovered by Dr. Frank Chapman, an osteopath in the 1930s. Through palpation, Chapman found tender areas in the body, which he believed to be the result of an increase and even congestion in lymph. Subsequent massage to that area would increase lymphatic drainage and lead to positive effects of the individual's health, especially to corresponding bodily organs, areas, and glands.

A number of things might happen:

1. Apparently nothing much. Fine.
2. It feels good, and you want to keep doing it. Fine.
3. You can't bring yourself to say the words. Aha!

If number 3 above is your case, try saying this:

Even though I can't bring myself to say the words, I deeply and completely love and accept myself anyway.

Still can't do it? Try this:

*Even though this whole thing is completely stupid, and won't work, and I can never imagine, in a thousand years **really** loving and accepting myself, I deeply and completely love and accept myself anyway.*

I am going to discuss, later on, starting with what is; meeting the client (you) where the client is, and also moving forward. So whatever thoughts come up at this time are absolutely fine. They are what we are looking for, so we need to acknowledge them and listen to them, and use them. So the sort of thing that I might come up with is

Even though this whole thing is a crock, and I'm only saying this because you're making me, and I know it's a scam and won't work, I deeply and completely love and accept myself anyway.

Here's the thing. You can be as negative, cynical, dismissive, rude as you want in the first half of the statement, but you can't add any "stingers in the tail". I have even had people say

"Even though I completely hate and detest myself, I deeply and completely love and accept myself anyway".

Doesn't matter how ridiculous it sounds; it works.

This is the process for correcting General Psychological Reversal. My suggestion is that you learn to do it, and do it as often as you possibly can, over and over. At first it may be difficult, then easy, then difficult. That's OK; there's a lot more to come in the book, and in Chapter four we'll be discussing how to deal with it when it becomes difficult.

RC discussing PR: <http://www.youtube.com/watch?v=bKAZ1NjPVb8>

His method. yy

But there's a Catch-22. Psychologically reversed people are the worst people in the world to keep doing whatever it is that will help them, precisely because they are psychologically reversed. Their own subconscious willpower works against them. They need something else, outside of themselves. They need another person, or other people, who can help. And the only person who can really help a food addict is someone who really understands food addiction. And the only person who really understands food addiction is another food addict. Am I beginning to make sense?

Chapter Four: Together We Can

There's a scene in the James Bond movie Casino Royale which, if I had my way, would be required watching for every trainee counsellor in the world!

Bond and Vesper Lynd, a beautiful treasury agent assigned to look after the money Bond is supposed to be gambling, are attacked by two vicious thugs, henchmen of the arch baddy. Although Bond despatches one of them quite quickly, the other almost kills him, and it's only when then Vesper Lynd, an accountant, and quite unused to all this violence, picks up a gun that has been dropped, and shoots the other baddy, that they manage to get away. Bond rushes off to see if he can deal with the arch baddy, telling Vesper to go and wait in the hotel room.

When Bond finally gets back to the room, he finds Vesper, still in her elegant evening gown, sitting in the shower, with the water running, clearly completely traumatised by her experience. Her head is bowed, water is dripping on her, and she can't speak.

Now, if you were Bond (or any other caring person--he does care for Vesper) coming into the room, what would you do?

Here's what Bond does. He takes off his tuxedo, and still in his own evening dress, he sits down beside Vesper in the shower, knees drawn up to his chest, just as she is. At first he doesn't say anything; he just sits with her. Then, after a short while he says, "Are you cold?" She nods, and he reaches up and turns the shower control to warm, and turns the water up.

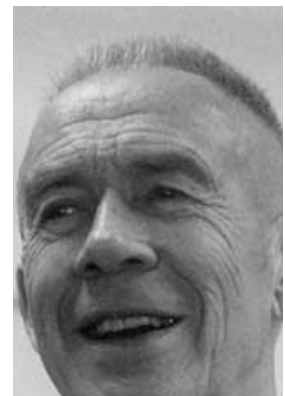


To me, that is one of the most perfect counselling interventions I've ever seen portrayed in a movie!

And it shows that even a suave and sophisticated spy can be brilliant at helping another human being. If James Bond can do it, any of us can do it!

Which brings me to Together We Can.

In the 1950s American union organiser, Harvey Jackins, while trying to help one of his union members through a difficult and emotional time, ran out of ideas about how to help him, and decided to just sit with him as he went through his emotional outpouring. It worked; was helpful, and the guy was grateful for the help. From this incident, Jackins and a group of friends and colleagues began to experiment, and developed a form of self-help peer counselling which came to be called Re-Evaluation Co-Counseling (RC). Today it is taught in 40 countries around the world.



Because of Jackins' political views (he was, variously, a Marxist, a socialist, a left-wing organiser, and was involved with L Ron Hubbard's Dianetics movement), RC was, from the outset, somewhat politicised, and became more so as time went on. In reaction to this and other perceived limitations of RC, in 1974, John Heron, then director of the Human Potential Research Project, University of Surrey UK, developed Co-Counselling International (CCI). I became involved with co-counselling (CCI) in 1979, going on to become a CCI teacher and event organiser, teaching at the universities of Surrey, Southampton and Bath, as well as running freelance classes for health centres and GP surgeries around the UK. CCI was a major part of my life for about a decade, and it's influence is with me still, and I feel a huge debt to John Heron, one of the most remarkable men I ever met.



Co-counselling is essentially D-I-Y counselling, in that you don't need a professional and, once you've paid for your training, it's pretty much free of charge. In the early 1980s, when I was teaching, a 40-hour co-counselling fundamentals class cost about £40. People today seem a little shy about saying how much a CCI Fundamentals class costs, but after a lot of poking around on the internet I did find one class that published it's cost: £350. Actually, £40 was very cheap back in 1980, and I think £350 is pretty cheap, now!

Co-counselling was almost the first form of personal growth I had ever been involved with, although I had been a meditator for the previous six years. I can't remember how I first learned of co-counselling, or what drew me to my first co-counselling class in the autumn of 1979. What I do still remember, with amazing clarity, is sitting in someone's living room on a Saturday morning and hearing someone say, "in co-counselling, the client's in charge". It hit me like a bolt from the blue. I realised that, throughout my life, if I had any sort of a problem, be it physical, financial, emotional—my style was to go and find a professional in the field, plonk myself down in front of them, and present with the attitude, "You're the professional: fix me". Now here was co-counselling saying that the client—me—was in charge. My life was never the same again. For instance, if I have a medical problem I still go to the doctor. But my attitude now is, "you're a professional, and you have knowledge and experience that I don't have. Do you know what this is? What's your recommendation?" And I may or may not accept the recommendation; quite often I don't. For instance, I have had a bad back on and off for the last 40 years, and many doctors have recommended surgery, which I have always refused. I have a wonderful osteopath who deals with any back problems I may have swiftly, and at quite low cost. For the last 20 years or so I have recurrent episodes of gout, and many doctors (in fact just about all with whom I have discussed this) recommend daily doses of allopurinol for the rest of my life. Instead I treat myself by eating cherries and drinking cherry juice when gout recurs. If I drank cherry juice on a regular basis, the gout probably wouldn't occur.

During that weekend, and the subsequent weekend of the course, I sat with other people, just listening to them, not saying anything. And other people sat with me. Sometimes I couldn't find anything to say. Sometimes the words came tumbling out. Sometimes emotions burst forth: tears, anger, trembling, grief. Afterwards I felt cleansed inside, and a lot clearer.

Co-counsellors are taught *clienting* skills rather than counselling skills. As one co-counselling website puts it:

Co-counselling is reciprocal peer counselling:

- *Reciprocal: co-counsellors take it in equal turns to be client and counsellor.*
- *Peer: everyone is equal, there are no "experts" trying to "sort out" other people.*
- *Counselling: it is a bit like other forms of counselling in that one person listens while the other talks (or "works" in other ways), but there the similarity ends. It is the person being client who is in charge of the session and the person being counsellor mainly just gives very good attention.*

www.co-counselling.org.uk

Having learned to co-counsel, co-counsellors join a local "community" (group of co-counsellors), and they probably go to regular meetings. In addition, they have a phone list. They can get a co-counselling session either by phoning someone up, or by turning up to a meeting and seeing who else is there. If you and I are co-counselling then, during the first half of the session you may be the client (and in charge of what goes on), and I provide what you ask; probably just "free attention" or "being there", rather like James Bond

(although it's not often that co-counselling sessions take place in the shower!) During that session I am responsible for "holding the space" for you. That's it. When my session is over we swap roles, and when it's all over we part company, neither owing the other anything. We may agree to meet again, or we may not; that's not prescribed nor proscribed in the co-counselling manual.

Loving Interference or Ruthless Compassion

I left the co-counselling movement for three main reasons. One was that when I attended annual co-counselling meetings I found I was co-counselling with people who were counselling on exactly the same things as they were counselling on the year before. They hadn't moved on. I didn't enquire as to why that was; that would have been against the spirit of the organisation.

Second was that I was feeling that I was a changed person; I wanted to get out there in the world and *do* something with the new me. I remember writing articles at the time saying that I felt like someone who was perennially maintaining and polishing their car, but never actually going on any journeys. The journey I embarked upon was to "recover my intelligence"; to go from "bottom of the class" to graduating with a Master of Philosophy degree.

The third reason was that a major tragedy hit my life, and my co-counselling friends had seen it coming (I didn't). But the culture of "client in charge" was so deeply embedded that no-one felt that they had permission to say "Hey, James, have you noticed that number 97 bus thundering down towards you?" I hadn't, and when it hit, I retired to lick my wounds for quite a number of years, pondering the question, "how can we help each other, provide feedback to each other, *without* compromising this *vital* principle of self-responsibility. The answer I came up with was, at first, called Loving Responsibility. Last summer I heard a better phrase, and I now call it Ruthless Compassion. Here's how it works.

As I said earlier, the only responsibility that exists between two co-counsellors ends at the end of the session (apart from the on-going responsibility to keep the content of the session confidential)

The James Bond / Casino Royale story echoes an incident in Ronnie Laing's career reported by Russell Miller in that Sunday Times article:

He had a rare, intuitive ability to communicate empathetically with disturbed people. Once, on a tour of a hospital in Chicago, he was confronted with a young woman crouching in a padded cell, stark naked and silently rocking to and fro. He stripped off and joined her, crouching alongside and rocking in time with her. After 20 minutes, to the amazement of watching doctors, she spoke for the first time in months. "Did it never occur to you to do that?" he asked them afterwards.

If you ever study Neuro-Linguistic Programming you will come across the injunction to "Enter the client's map of the territory". Both of these stories are pure examples of someone entering the "client's map of the territory", and over years of work in this field, I have many other similar stories. Let's for a moment think ourselves into Vesper Lynd's state of mind. She is totally shocked; traumatized. She is a government-employed accountant; a treasury official. Her life has been about as far from the all-action and

violence of James Bond as you can suppose, and yet she's just been the subject of a life-threatening attack, on both herself and someone she's coming to love, and has actually killed a man. How she wound up sitting in the shower we don't know, but we might surmise she was trying to wash the whole experience away. However, we don't need to know what she's doing there. All we need to notice is that she *is* there.

Now, what would you have tried to do? Most people, I suggest, would have tried to get her out of the shower, probably without getting themselves wet. Just as, we can be certain, many people at that Chicago hospital had tried to get the naked young woman to talk, without themselves getting naked. What is almost instinctive, what we *all* try and do, when trying to help someone, is to get them to come into *our* "map of the territory".

And we do it for the best of reasons, and the worst of reasons. We honestly believe that our map of the territory is the best one (if we didn't then we'd be doubting our own sanity), and we are terrified of entering their map of the territory...after all, they are the ones in trouble. But that's like refusing to jump in the river to save a drowning person. If you can't swim, then it's a good idea not to jump in. If you can save them successfully by throwing them a rope, or rowing out in a boat, or lifting them out by helicopter, then all well and good. But when you've tried everything else, and you know you can swim, then, when it come right down to it, you're going to have to get in there with them!

So what do we mean by "map of the territory". Common sense tells us that what we see in front of us is hard, real, and the Truth. But a moment's reflection will show us that there is no "TRUTH", only a vast number of personal truths. I have a big black dog called George. He is the sweetest tempered, softest, gentlest dog you could imagine, and mostly what George likes to do is cuddle. That's my truth, George's, and Susan's. Close family and friends probably feel roughly the same, but my friend Alison, who loves dogs, and appreciates George, probably has a slightly different picture of him, due to the fact that he spent four hours on a long walk, desperately trying to mount Alison's dog, who had recently been in heat! And what do you think the truth is for someone who was bitten by a large black dog when they were a child, and have been terrified of dogs ever since? Or someone who is allergic to dog hair (George sheds like crazy). My dad, who was brought up to like dogs, was really uncomfortable about George, because dad became almost obsessive about keeping his house spotless. He would only let George in after he had laid a dust sheet on the carpet for George to lie on. This, by the way, is the man who persuaded his neighbour to chop down a beautiful flowering cherry tree because of the mess the falling blossom made in the street.

And while you're pondering how my dad's "map of the territory" relates to yours, take a moment to reflect on how a Japanese artist or poet might react to the idea of chopping down a flowering cherry tree!

The idea of the "map of the territory" is that there is a "true reality" out there, but we can only know it by our internal map. Some of us have internal maps that say "doggie! Ahh!" and others have maps that say "DOG! Arggh!"

So what's the best way to enter another person's map of the territory. It's very difficult, but there are two simple things you can do:

0. Shut up
1. Listen

This has two effects. Firstly, if you quiet down your own "output", it gives you a better chance of hearing what they say. Most of us "listen" by trying to work out what we should say next. My dad (bless him; what would I have to say in this book if it weren't for him!)

was good at this, too. Whatever you had to say, he had to respond from his own experience, however inappropriate. I love sailing. I would go on a sailing holiday, then go round to my parents, to tell them about my vacation. My father would interrupt to tell us how much he hated boats ... based on his second-world war experience of being on a troop carrier sailing from Liverpool, round the Cape, to Egypt. It was an interesting story, taking by itself, but always had the effect of "invalidating" my holiday story. So that's what we avoid, and we get trained to avoid it.