Resilience is the ability to face and handle life’s challenges, whether everyday disappointments or extraordinary disasters. Capacities to bounce back are innate in the brain, but their development can be derailed over time by negative patterns of response to stress or trauma that become deeply encoded in our neural circuitry.

Neuroplasticity is the capacity of the brain – also innate – to rewire itself, to grow new neurons and new connections among those neurons, thus new neural pathways and circuits, even repair brain structure, lifelong. Recovering our resilience means choosing the experiences that will cause neurons to fire together and wire together – self-directed neuroplasticity – in ways that create new patterns and/or rewire old ones.

Below are edited excerpts from the book *Bouncing Back: Rewiring Your Brain for Maximum Resilience and Well-Being*, that will illustrate some of the 80 exercises offered in the book to do that rewiring, safely, efficiently, effectively. As you learn to use tools and techniques
Greetings

The Wise Brain Bulletin offers skillful means from brain science and contemplative practice—to nurture your brain for the benefit of yourself and everyone you touch.

The Bulletin is offered freely, and you are welcome to share it with others. Past issues are posted at http://www.wisebrain.org/tools/wise-brain-bulletin.

Rick Hanson, PhD, edits the Bulletin. Michelle Keane is its managing editor, and it’s designed and laid out by Laurel Hanson.


drawn from mindfulness practices and relational psychology to create and accelerate brain change, you can recover what I call the 5 C’s of coping: calm, clarity, connections to resources, competence, and courage. These 5 C’s strengthen the parts of the brain we need to cope skillfully with the twists and turns of life and become the core of a deep well-being that will last a lifetime.

(See issue 7.2 of the Wise Brain Bulletin for exercises in Calm, Clarity, and Competence.)

Connections to Resources

Bonding and Belonging Nourish Resilience

The roots of resilience are to be found in the felt sense of existing in the heart and mind of an empathic, attuned, self-possessed other. — Diana Fosha

Resonant relationships help us recognize our own deep inner goodness and feel competent and confident in the world. If your earliest experiences of attachment and bonding gave you a sense of security and a sense of yourself as a uniquely resilient human being, that’s great news. Even before you had any conscious choice in the matter, your brain was able to develop a solid inner sense of safety and trust in those relationships.

Even if you didn’t get the full benefit of that trust, confidence, and resilience from your earliest experiences, it is possible to recover or develop those capacities now. The brain develops its hardware and software of resilience, for better or worse, through engaging with other brains. The prefrontal cortex matures — and is repaired — most rapidly through interactions with other mature prefrontal cortices. The most effective way to learn resilience is by interacting with other resilient human beings. And the speediest and most reliable way recover our resilience is through experiences with people who can be, as the clinical psychologist Diana Fosha puts it, true others to our true self.

True others are those who can see and reflect our true self back to us when we have forgot-
ten, or perhaps have never known, who we truly are. They remember our best self when we are mired in our worst self and accept without judgment all of who we are. True others are not necessarily the people closest to us, though they may be: they are the people most attuned to us, those most accepting of our innate goodness, our essential worth as human beings. For many people, a true other can be a spiritual figure or deity; for others, it may be a counselor, teacher, or friend. When someone who is acting as a true other genuinely sees us at our best, we can see ourselves in that light, too. This mirroring helps us rediscover our resilient self.

My client Richard had set out driving to his best friend’s engagement party in a pretty good mood. His job was satisfying: he was climbing the ladder as a regional division manager of a biotech company. His body was strong and healthy: he was one of the fastest swimmers in his master swim class. The tomatoes were ripening robustly in his garden, and he was making good time traveling, despite the crowded mountain highway. He was happy for his friend Toby, who was getting married to the woman he adored.

Suddenly, Richard felt a pang inside, as if someone had opened the door to a dark room. He could expect some teasing by a mutual friend at the party about his two failed marriages.
Why couldn’t he get it together? Richard began to slip into a cascade of misgivings and self-doubt. Should he have tried harder? Was there something wrong with him that caused two women to leave him? Would everyone at the party know he was a failure? The hope he harbored of meeting someone new at the party, having another chance, began to fade.

Even though Richard tried to switch the channel and think of something else, or even remember the good things about himself that he was recounting earlier, he began to sink into a black hole. His inner critic was relentless. Who was he kidding? He’d never be good enough to meet someone at the party today. In his fog, Richard didn’t notice that the car in front of him had stopped abruptly. He “woke up” too late to put the brakes on and rear-ended the car in front. No one was hurt, but he totaled his small car and seriously dented the car he hit.

Even though a friend quickly came and rescued him, and everyone at the party was understanding and concerned about the accident, Richard found it impossible at first to take in their love and acceptance. He was sunk in a swamp of shame.

Shame has been called the “great disconnector.” The best way to crawl out of the swamp of shame is to come into connection with another person who loves and accepts us exactly as we are, even if we sometimes have to conjure up that person in our imagination, and then to build on that love to come into our own love and acceptance of ourselves exactly as we are. As my colleague Ken Benau says, “To be seen or not to be seen; that is the question, and the answer.”

Richard managed to find a few moments alone with Toby at the party and told him what had really caused the car accident. Toby had been Richard’s friend since college, through all the dating, getting married, getting divorced, trying again, and “failing” again. Toby knew Richard’s deep-down goodness, his sincere intentions to be kind and loving, and his willingness to learn what was getting in the way of those intentions. Toby also knew Richard’s tendency to collapse into a “poor me” attitude rather than an empowered feeling of “I can do this.”

As they talked, Toby reminded Richard of all the trust, affection, and respect they had shared with each other over the years. Richard could begin to listen as Toby framed Richard’s longing to be in a healthy relationship as itself a healthy sign. “Look, man, after all
you’ve gone through, you’re still willing to take a risk again. I’m betting my money on you for sure; it will happen.”

At the end of the conversation, Toby suggested that Richard join a men’s group that he knew about, which was focused on connecting in healthy relationships. Because Richard could take in the sincerity of Toby’s acceptance and affection for him, he could see the possibilities for healing and awakening in the suggestion. He was able to come out of his shame swamp and rejoin the party. Within a few weeks he had joined the men’s group and began, in effect, hanging out with emotionally healthy brains. He also enrolled in several workshops on being authentic in intimate relationships, learning to focus on being his true self and seeing the true selves of other people.

You may think I’m making this next part up, but I’m not. After six months in the men’s group and those workshops, learning many skills of healthy relating and accepting himself as a good enough potential partner, Richard hit it off with Lucy, the sister of one of the guests at Toby’s wedding. They have now been happily married for eleven years.
Shame is not always toxic. Healthy shame can lead us toward actions that are resilient, as can its cousin, guilt. Both shame and guilt can arise when we feel we are or have done something that might exile us from our kin or tribe. Early in our evolution, exile or shunning was a death sentence: no one could survive alone on the Serengeti. We learn the norms of acceptable behavior through the conditioning of others’ responses to our behaviors, our emotions, and ourselves. We learn to fit in. We internalize the values and moral precepts of our society and culture, and our reward is the feeling of safety that comes from belonging to that society. If we sense we are violating those precepts, the shame and guilt we experience tend to get us back on track.

Toxic shame takes root whenever we feel judged, criticized, rejected, or put down not only for what we do but for who we are. If we feel we have to be a certain way in order for somebody else to feel good about who they are, our developing sense of self can feel ignored, uncared for, or neglected completely.

There are actually neural cells around the heart that can feel the rupture of disconnection. The feeling of being unlovable or “bad,” of having a “hole in our heart,” has some physiological basis. When this happens, all the innate goodness we are programmed to
develop goes into exile. As a colleague of mine says, all the eagerness and innocent exuberance with which we naturally move in the world gets “slammed mid-pirouette.”

If this toxic shaming or guilting begins early enough, continues long enough, and remains toxic enough, we begin to smallify ourselves: the experiences build a self-reinforcing negative loop in our neural circuitry. We begin to perceive all of our experience through a filter of shame or guilt. When you think you’ve done well on a test and the grade comes back as a C-minus, the instant message from the inner critic is, “I told you you were stupid!” When you slip on a rug and fall down three steps before you catch yourself, another message comes: “What a klutz!” When you get distracted by a phone call and burn the steaks on the grill, it’s “Can’t you do anything right?” With enough negative experiences, we go into what the clinical psychologist and meditation teacher Tara Brach calls a “trance of unworthiness,” experiencing a constant sense of failure rather than the pride in competence and mastery that leads to resilience.

**Exercise:**

**Sealing Toxic Shame through Love and Acceptance**

*Love makes your soul crawl out of its hiding place.* — Zora Neale Hurston

This exercise uses reconditioning [described below] to rewire old patterns of toxic shame. Any time we work with reconditioning, it’s important to prepare yourself carefully, to avoid reinforcing negative feelings and patterns.

1. Anchor your awareness firmly in the present moment. You are safe here and now and will
still be safe even when you retrieve a troubling memory of what happened back there, back then.

2. Focus your awareness on your positive resources: positive self-regard, self-acceptance. Trust your innate goodness, and evoke the wisdom of your wiser self.

3. Start small! Work with a teaspoon of trouble, not a ton. Recall one small, specific relational instance when resilience went awry:
   * You were chosen last for the neighborhood softball team, and the sting of not being good enough lingers to this day.
   * You forgot to leave the car windows cracked when you dashed into the drugstore; you were delayed, and your new puppy in the backseat almost collapsed from heatstroke.
   * At your daughter’s preschool, you blurted out the news of a teacher’s cancer diagnosis in front of a group of parents.
   * You got a speeding ticket with a potential client in the car.
   * You were a little flip in your response to someone’s money worries, responding with a quick slap on the back and a “Keep your chin up,” and now they’ve ignored you for two weeks.

Shame and guilt can carry such an intense charge that incidents like these may not seem at all small. If that’s the case, just bring to mind the first moment or one small piece of the experience.

When we deliberately focus our attention on a negative memory we want to resolve or dissolve, the focused attention causes the neurons constellating that memory to fire at every level — from implicit body-based and emotional memories to explicit cognitive thoughts. Neuropsychologists call that process “lighting up the network,” making the old memory available for rewiring.

As you light up the networks of this memory, small but vivid, keep the compassionate awareness of your wiser self steady. You want to be with your experience but not in it, affected but not infected. With practice, over time, reconditioning can indeed dissolve even memories of severe trauma, but please let your brain feel successful at dissolving the pain of smaller memories first.
4. When this negative memory is vivid, bring to mind a memory of feeling genuinely seen and deeply loved and accepted by another person (or a pet), of being seen for real. Let yourself receive this love and acceptance and feel it in your body.

5. Hold both the negative memory and the positive memory of love and acceptance together in your awareness at the same time – simultaneous dual awareness. If this is difficult at first, toggle back and forth between the two, always strengthening the memory of love and acceptance.

6. When this simultaneous awareness of the paired memories is steady, gradually spend more time focusing on the positive resourcing memory, strengthening the felt sense of love and acceptance in your body. After a moment, let go of the pairings and let your attention rest solely in the experience of self-love and self-acceptance. Take a few moments to savor the resting in this self-love and self-acceptance.

7. Reflect on your experience. Notice any shifts you experience from doing this exercise. Repeat this process of reconditioning as many times as you need to in order to fully dissolve the shame or guilt connected with a particular memory. The more often you practice this process with specific memories, the more you will be reprogramming those deep neural networks associated with toxic shame.
The Neuroscience

Reconditioning depends on an intricate neural mechanism that neuroscientists have been able to detect with brain-imaging technology only in the past ten years. This research shows that neural networks that constitute any individual memory (or thought or belief) spontaneously fall apart (deconsolidate) and then reconsolidate again a fraction of a second later.

Neuroscientists can now demonstrate how, under the right circumstances, we can choose to harness that natural deconsolidation-reconsolidation process to intervene between the deconsolidation and reconsolidation phases and redirect the reconsolidation. This is how reconditioning – or self-directed rewiring of the brain - happens.

As we intentionally work with the memories of feeling bad because of who we are (shame) or because of something we did (guilt), it’s helpful to remember that implicit memories can
feel completely true in the present, with no sense whatsoever that they are memories from the past. As we recondition, we pair explicit positive feelings of pride or of loving, caring acceptance, recognizing these as experiences in the present, with the negative toxic memories that we recognize as belonging to the past.

This reconditioning can also happen in therapy; in healthy intimate relationships; with an attuned friend, a beloved benefactor, or a devoted partner; and in our imagination. Repeating this process strengthens the neural circuitry until the love and acceptance become the new normal. Our growing capacity to evoke and feel love and acceptance becomes the superhighway of resilience; old shame and guilt become the country backroad we don’t have to go down anymore.

**Courage: Training Our Brains to Risk Something New**

*Yes, risk-taking is inherently failure-prone. Otherwise, it would be called sure thing–taking.* — Tim McMahon

Whenever we’re about to venture into something new — moving across the country, getting married again, taking on a new job, finally fixing the leaky showerhead — we can feel a hesitancy, a pullback within — a somatic feeling of "Uh oh! Strange territory! Don’t know if I should be doing this!" — even though, consciously, we might very well want to forge ahead. Our resilience goes on hold.

We can learn to cross that threshold of resistance through dopamine - the neurotransmitter of pleasure and reward. With the release of dopamine in the brain stem we feel good, we feel alive and energized.

Dopamine operates on the basis of expectation. When the brain experiences what it expects to experience — when we turn on the kitchen faucet and water comes out — dopamine levels stay steady. If something unexpected happens — we turn on the faucet and no water comes out — the expectation is disrupted. The disruption switches off the dopamine and generates a slight unease in the body. A mistake has been detected. The brain directs us to stop moving forward until we know things are okay. (Some neuroscientists refer to this function of dopamine as the “Oh shit!” circuit.)
It *feels* like a risk to try something new. If we want to move forward, we need to know how to work skillfully with our dopamine system so that we are not stopped in our tracks by warning signals from our lower brain.

“Do one thing every day that scares you” was Eleanor Roosevelt’s sage advice. Wise practice from a stellar role model of resilience, who coped with the hardships of the Great Depression, the tragedies of World War II, and the infidelity of a husband who happened to be president of the United States.

When we deliberately face our fear of doing something new or risky, or confront deep doubts about ourselves as human beings, we come to that somatic threshold that might block us from moving forward. By facing the fear and intentionally crossing the threshold into action, we are deliberately choosing to evoke new experiences that recondition the anxiety in our nervous system. By pairing an old pattern of fear or block with a new, more positive pattern of courage and action, we contradict the old and rewire it. This is reconditioning at its finest.
Exercise:  
Do One Scary Thing a Day to  
Train Your Brain to Risk Something New

1. Identify one scary thing to do today to cross that somatic threshold of anxiety and experience something new. For example, apologize to your teenager for not keeping a promise; create a realistic budget of income and expenses and then talk with your spouse about it; go up into the attic with a flashlight to see what’s scurrying around up there at night; make a doctor’s appointment to find out what’s really going on with that persistent cough; ask your boss to make good on a promise of time off for the extra time you put in last month.

2. Practice facing the fear today, and then practice doing one new, different scary thing a day every day for the next thirty days. Crossing the threshold into action at least once a day re-wires into the brain a new default feeling of “Sure I can!” or “Wow! I did it!”

3. As you repeat this practice of doing one scary thing a day for several weeks, notice any shifts in the messages your body is sending you as you prepare for the scary thing and after you’ve done it. Notice any emergence of the sensation of “Sure I can!” Facing fear is ultimately easier than constantly navigating around situations that provoke it. We reset the default to honesty, courage, and resilience.

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Using the Science of Meaning to Invigorate Values-Congruent, Purpose-Driven Action

© Todd Kashdan, PhD and Joseph Ciarrochi, PhD


I wanted to share an excerpt from Chapter 11 of my new book, with Dr. Joseph Ciarrochi, titled *Mindfulness, Acceptance, and Positive Psychology: The Seven Foundations of Well-Being*. You can consider it the “greatest hits” of positive psychology and spiritual transformation. Why? Because Joe and I contacted our favorite thought leaders and gave them two instructions. First, write about the most exciting, effective ideas that you are working on. Second, give readers concrete take-ways and strategies for consultation, therapy, teaching, parenting, and/or living well.

Two separate communities, Acceptance and Commitment Therapy (ACT) and positive psychology, began at about the same time and set the same goals: to help people lead richer, meaningful lives. To our surprise, these two communities rarely talked to each other and produced two isolated bodies of research and applications. This book can be viewed as a synthesis that is intended to create the most potent, state-of-the-art interventions to help people move past suffering and toward a life of happiness, meaning and purpose in life, vitality, and a sense of belonging, mastery, and autonomy. But this attempted synthesis is not straightforward. It raises deep theoretical and practical questions that we answer in this book. For example, how do you combine work in positive psychology that “aims to replace negative experiences with positive ones” with work in ACT that aims to help people focus less on positive form (how something appears on the surface) and more on positive function? Or how do you align people’s values, strengths, and goals to mindfully instill moments...
with greater vitality and meaning? Or how can mindfulness and cognitive reappraisal, two effective strategies for improving one’s quality of life, work together?

But there is another reason that we wrote this book. Joe and I both felt that the majority of discussions, workshops, research, and books on mindfulness have been stagnant. Rehashing the same content. There is a fascination with “the present moment” as if mindfulness is only about being blissfully attuned to whatever and whomever you are with here-and-now. There is also the issue of mindfulness being fused with the notions of “non-judgment” and “non-striving”. But this raises questions. How does training people to be more mindful affect their ability to make decisions and act? By definition, decisions among competing options for time, energy, and money require judgments. How can we teach people to be mindful in the messy, complexity of the real world where rejection, failure, boredom, and annoying, obnoxious people are the norm rather than the exception? This book is about understanding mindfulness and acceptance in the context of everyday perils and promises. The authors of these chapters will challenge your assumptions but in return they will reward you with new strategies and exercises to use on yourself and other people. There are no allegiances and there is no attempt to protect the status quo, this book is about the best ideas for improving the human condition.

* * *

Clinicians and researchers across the field of psychology have written about the importance of meaning making in cultivating a life worth living. Meaning in life is often meant to convey the sense that people make in life, capturing the idea that, similar to meaning making in language, meaning in life holds symbolic content. As a sentence conveys information, so then does life. This is the cognitive quality of meaning in life. We refer to this aspect of meaning as Comprehension. Meaning has also been used to describe the point of life; what are people trying to do, accomplish and aspire to. This dimension has been nearly universally referred to as Purpose. Taken together, meaning in life is the degree to which an individual makes sense of and sees significance in their life and believes their life to have an overarching purpose.

Generally, research has focused on whether people have meaning in life, or how much of it they have. Hundreds of studies have linked the presence of meaning in life to
desirable characteristics, ranging from character strengths and well-being variables to less distress and even lowered risk of Alzheimer’s and death. However, research also suggests a distinction between the presence of meaning and the degree to which people search for meaning. The search for meaning refers to the active pursuit of meaning in life (‘I am seeking a purpose or mission for my life’) and is related to neuroticism and negative emotions. Searching for meaning may range from straining to establish a minimal level of meaning to viewing life as a continuous attempt to understand one’s purpose in life. It appears to matter whether people are searching for meaning from a position of strength—trying to build an already healthy sense of meaning in life—or from a position of desperation—trying to re-build or simply find some way for life to hold meaning. People who are searching for meaning in the absence of meaning in life are less happy and satisfied than people who are not searching for meaning; yet searching for meaning does not appear to detract from happiness among people who feel their lives are meaningful.

Helping people find healthy and effective ways of constructing meaning therefore appears important for how well people are able to live their lives. Although the focus of meaning in life research and interventions is on the over-arching, encompassing comprehension
and purpose people create in their lives as a whole, other research has focused on the way in which people make meaning from specific events. Researchers have shown that negative events are more likely to be perceived as meaningful. Finding meaning in negative events such as chronic or life-limiting illnesses like cancer and congestive heart failure appears to support health.

In the next section, we will use a case study to illustrate how we think work in two disciplines, “meaning in life” work and Acceptance and Commitment Therapy (ACT) can be used together to yield better, stronger interventions.

Understanding Mandy

Mandy is a 34-year-old woman whose divorce was finalized 6 weeks ago. She shares custody of her two daughters with her former husband. If you ask Mandy why she is divorced, she says it’s because her husband wanted to “upgrade his wife.” In fact, he is already living with someone. Like her ex-husband, her ex’s new partner is a middle manager at a large electrical parts manufacturing corporation. Mandy has been working for a title company for 12 years, moving up to underwriter during the start of the housing boom. Her income at the peak easily rivaled her ex-husband’s and they enjoyed a high standard of living. In the past few years, so few home sales have closed that Mandy’s income has plummeted.

Mandy expresses little hope for the future, worries about the bad influence of the new woman in her children’s lives, and has recently emerged from a prolonged major depressive episode. She now expresses constant worries about doing a poor job of raising her kids, having something bad happen to them while they are in her ex-husband’s custody, and losing her job and her house. She says that her sleep and work performance have suffered because of the time she spends worrying and the intensity of her anxiety, particularly over the weekends when her children are in her ex-husband’s care. When pressed, Mandy admits that she deeply misses the days when her income was so high that she never worried about money.

Mandy is obviously dealing with tremendous change and stress. One way to work with someone in Mandy’s situation is to explore Mandy’s self-concept, or in Acceptance and Commitment Therapy (ACT) terminology: the “conceptualized self”. Many of her worries stem from the seemingly vast divide between how she once saw herself and how she now
sees herself. She once lived a life of few worries and many pleasures. As she goes through her days, she dwells on how hard things are now and how great things were before. She also revisits the pain of being left by her ex-husband and the humiliation of learning that he already had replaced her. As the weekends approach, she grows increasingly anxious about the time her children will spend with her husband. By ruminating about the greatness of the past and worrying about the future, Mandy has no idea how to rebuild her life.

From an ACT standpoint, Mandy may be suffering from the dominance of her conceptualizations of the past and the future, as well as from a narrow and unhelpful self-concept. She has poor contact with the present moment.

From a meaning in life standpoint, the core components of Mandy’s comprehension of her life are no longer accurate, useful, or nurturing. Instead, they have been broken-down by her divorce and all that has resulted from it. Instead of guiding Mandy’s actions, cradling her values, and shaping her purpose, her meaning system degrades and demoralizes her. Because Mandy’s life has changed so much, she needs to accommodate or alter the defining features of her self-concept (i.e., her meaning systems).
We would suggest two approaches to working with clients to help them revisit, restore, rebuild, or revitalize their basic comprehension of their lives.

1. **Givens.** “We hold these truths to be self-evident…” The authors and signatories of the United States Declaration of Independence boldly and clearly stated their given assumptions about the equality of all men. Aside from the fact that many of these signatories had slaves who were treated with anything but equality, this “given” puts the rest of this document in context. How often do we, or our clients, express the fundamental “givens” that put our lives in context? This exercise simply asks clients to take a week to think about the things they assume are true, the things they believe and never have to question, or the truths that they hold to be self-evident. For example, clients might think about their family life. I will never turn down a hug from my children. Each child will be treated as a unique individual. Whenever possible, the family will eat dinner together. Or, I will never discipline my children like my parents disciplined me. When clients return with this homework, clinicians lead a discussion about the implications and the themes of these givens, helping to illuminate the fundamental assumptions—the most basic comprehensions—people have. These may need to be challenged in order to move forward, so clients should be encouraged and empowered to be completely honest about their givens. In the parenting examples above, despite their laudable nature, “absolute” phrasing often reveals reactive givens—those that are generated because of somewhat unresolved pain. This is most clear in the given about never disciplining like one’s parents. This might or might not be a great idea, but the absolute nature of that given likely sets a person up for failure and may even be used to prevent effective and reasonable responses to a child’s behavior. Therapists and coaches are a great resource for helping clients discover and reconsider their most basic comprehensions of the world.

2. **Values Work.** The aim of both ACT and a meaning in life standpoint is to assist and inspire people to live in accordance with what they care most deeply about. This is tough to do without exploring one’s values; an act done less often than presumed. Here, we draw on Schwartz and colleagues (2005) to give clients a concrete way to think about values.

Ask your client to identify one or two of the important life choices or dilemmas they
have faced in the past. Ask them to describe what made that situation so difficult. For example, many clients face hard choices between dedicating their time and effort to their careers or to their families. Often clients will say that there were no good choices, or that whichever decision they made they would let someone down. Make note of the themes that arise, but do not address them yet. These reasons provide powerful clues about your client’s values. Next, ask your client to talk about the decision, and in particular how selecting their chosen option made them feel. Then, depending on your preferences in working with this client, you have two choices. You can help the client draw links between the feelings that resulted from the decision and the reasons the client gave about why the choice was so tough. A client who chose to focus on family rather than career might say that they favored family because they were raised with the notion that being a parent is the most important job they will ever have. Immediately after choosing to forgo an important career opportunity, our client might have felt great pride, but also worries that friends and family
would feel they’d made a stupid decision, or failed to reach their potential. In this case, you could help this client explore how strongly and deeply this client actually valued parenting versus career pursuits, as well as self-direction versus the importance of others’ opinions. Alternatively, you can continue to explore with your client why they think they felt that way, and how they feel about their decision now. To continue our example, our client might now feel smothered by family, and feel inadequate in comparison with friends flaunting the milestones of career success. Here, work with this client might focus even more tightly on the importance given to others’ expectations, as well as on how large a role those expectations might have played in driving the client’s apparent valuation of parenting. Whichever approach seems relevant to you, the idea is to work to help clients see what is important to them, because this is what drives both decisions and feelings in their aftermath.

Some clients will lack sufficient insight to identify their values without considerable assistance. They may characterize their givens and decisions in mechanical or concrete terms (“I guess I didn’t have a choice, I didn’t want to go to jail”). They should be guided to explore their values in similarly concrete terms (“Perhaps that is because you couldn’t
be there for your family if you were in jail?”). In helping clients explore—and commit to—their values, we should always be aware that we ourselves may have values that conflict with those of our clients. We recommend an exercise that asks you as a clinician about what you do best, what you most want to give to your clients, and the lasting impact you would most desire to have on clients. Their exercise can provide a language you can use when working with clients to explore their values. This includes those moments when there is conflict between your values and those of clients. Managing conflicts requires tolerance for tension, self-honesty, and candid dialogue with clients about how our values impact the way we interpret what our client tells us.

Finally, we must face the possibility that some people’s values are morally objectionable. As one of the authors likes to say “Saints have holy purposes, and assholes have assholey purposes.” Based on available research, most people have pretty decent purposes, some have awe-inspiring purposes, and a small portion have horrible purposes. Working with this latter group is difficult and therapy may need to proceed by showing how it is eventually in the client’s selfish interests to figure out how to have reasonably pro-social values and purpose.

**Mandy’s Meaning-Making**

Mandy tells her therapist that she once had great plans for herself. She was a good student in high school and college, and always felt that she was well-liked. When she met her ex-husband, she had already decided to get involved in the real estate business. She initially worked as a real estate agent, but then she had her first child, she agreed to stay home with the baby for the first year. She went to work for the title company part-time, only gaining promotions as her daughters grew older and were in school full-time. Now that the real estate market has gone bust, Mandy says she can’t see any way that she'll be successful. Even making a little money these days takes following many dead ends, watching appraisals fall short, banks pull out, and deals fall apart at closing. She can’t see herself doing anything else, and seems convinced that her next step will be poverty. She says that her daughters would never forgive her for destroying their lives like that, and maybe she should just go ahead and give up custody so that they can have a better life with her ex-husband.

Here we begin to see that Mandy’s rigid attachment to “how things were” has become
despairing paralysis in the face of her new reality. Beyond feeling stuck in her present circumstances, Mandy seems to struggle to figure out who she really is, and how her life can “return to normal.” Much of the way she frames her situation is in terms of what cannot be done and the failures that seem to await her.

One way of looking at her problem is that her pre-divorce comprehension system—the network of beliefs about self, world, and self-in-the-world—has been shattered, and has failed to adapt to the impact of this difficult event. Elsewhere, we have speculated that when difficult things happen, two kinds of comprehension systems might predict the best outcomes. The first is an exceptionally rigid, one-size-fits-all meaning system. In such a system, people have unquestioning confidence that their relatively simple comprehension system can explain all life events. One possible example comes from religious comprehension systems, in which the belief that “it is God’s will” can be used to account for everything that happens. Such systems may be able to withstand significant impacts from negative life events without requiring any alteration. However, it seems possible that any event(s) that could shatter such a comprehension system would be devastating,
leaving people without much of an intact way of understanding and integrating their experience.

The second comprehension system is one that is flexible, iterative, and dynamically responsive to life events. People adapt their comprehension as they gain feedback from living their lives. These systems may be more resilient in the face of negative life events, but it may be that people fall into the tendency to over-think, and show a lack of commitment to completing important life projects, like the perfectionist author who can never stop tinkering with a manuscript.

Mandy seems to need to make meaning from her divorce, and perhaps reexamine her comprehension system. Cognitive therapy already uses cognitive restructuring to help people work on similar tasks, and narrative therapy has several techniques for helping clients re-author their stories. We consider an additional way of helping people articulate their comprehension system. We are currently researching this approach, and are excited about its use in the context of ACT because a large part of what it is about exists entirely apart from language. Although it may be well-suited for helping clients chart out their existing values and comprehension systems, we believe it can also be used to revise and clarify a newly emerging comprehension system in the wake of negative life events. We call this intervention “The Photojournalist.” We also suggest another way of eliciting growth narratives from clients, which can be used to alter, or re-build, comprehension systems.

1. **The Photojournalist.** In the most basic application of this intervention, participants are simply given a digital camera and asked to take 10-12 photos of “what makes your life meaningful.” Because not everyone is in close proximity to the things that make life meaningful (a child may have moved out of the house, and not everyone lives in their ideal vacation destination), we tell people they can take photos of mementos or even other photos. When they return the camera, their photos are uploaded to a computer and printed off in a format of one photo per page, with a space provided for writing.
When the photos are printed, the client is asked to describe what it is a photo of, and how it contributes to life’s meaning. In our lab, we also ask people to rank-order photos in terms of centrality to their life’s meaning. This allows us to gauge whether there are any discrepancies in what people say about their values or purpose and how they rank photos that seemingly align with those values or their purpose. For making meaning from negative life events, we would suggest altering the instructions to allow clients to choose to take photos of one of the following: what makes life meaningful, what used to make life meaningful, or what someday will make life more meaningful. The eventual point is to lead clients in a discussion of what is different about the photos they took to address each of the three choices. Perhaps a new comprehension system can be built on what is meaningful now, perhaps new versions of what used to make life meaningful can be found or a comprehension system can be built that no longer needs those things, and of course it will be important to help clients find ways to bring into their lives that which they hope will give meaning to their lives someday. Not all clients will be able to see a hopeful, meaningful future, which is why we like providing those three choices.

2. *Growth Narrative.* This intervention would ask a client to reflect on life, beginning in childhood and adolescence, and have her or him identify two areas in which growth has
occurred (e.g., where they gained a newer, more adaptive and mature self-awareness, insight, or positive self-transformation). The clinician would ask the client to anchor these growth areas with specific life examples. As the clinician asks for details, she or he is also helping the client to identify themes, and how the growth that was accomplished aligns with the client’s values. Finally, the client is asked to propose a future vignette exemplifying future growth, including in what areas growth would need to occur and what the client’s activities, internal experience, and social circumstances would look like.

These interventions should be helpful in assisting clients to explore the landscape of their present and future comprehension systems. However, stopping here might trap clients in an artificial world dominated by their conceptualizations of the “big picture,” “what life’s really all about,” or “the meaning OF life.” The critical next step is to help clients put their meaning into action. This is done through purpose.

Mobilizing Mandy

When her therapist asks her about what she wants to accomplish in her life, Mandy is vague. She says she wants her daughter to be happy, and that she wants to be successful again, but when pressed for details, she seems to become hopeless and says she’d just be content if her ex-husband would pay for what he did. Mandy says she is a good person at heart, and that she still trusts people, but that she feels vulnerable because of this experience, and “not like herself.” She perseverates about her husband’s new life, and frets over comparisons between herself and his new wife. She is not sure what she wants to accomplish any more, but she says that the most important thing to her right now is to give her daughters a good role model. Part of this, for Mandy, is showing how to be strong and recover from setbacks.

Mandy is aware of some of her core values. In particular, she is consistent about wanting to bear up for her daughters and give them a good life. Bearing up under strain is a noble aim, but it is inherently a limited one. What does bearing up look like? What purpose does being strong serve? What does it mean to recover from a setback? What comes after the bearing up? Mandy wants to do right by her daughters, but it really is not clear what that looks like, and it appears that thoughts of vengeance and inadequacy slip into the gaps created by that lack of clarity. In the end, our values can only come to define us if we do something to stand up for them and act them out. ACT identifies a lack of clarity and contact with values.
as a pathological process because in the absence of this knowledge, short-term needs can dominate. Mandy needs to move away from treading water, and find something to move toward. We are fond of saying that purpose is the anchor we throw to pull us to our future. Mandy needs help discerning her purpose.

The basic process of discerning a purpose calls for a careful and honest exploration of the comprehension side of meaning in life. This exploration then must lead to a shift from static knowledge to what that knowledge implies about how people should act in the world. At this point, comprehension is used to give people a sense of what they are about and what they are good at doing, what the world needs, and the ways in which people are best at navigating the world around them to accomplish their aims. In Mandy’s case, the straightforward question about what she wants to accomplish was not sufficient. She needed a process that is not so overwhelming.

We suggest two intervention strategies for helping people discern a purpose.
1. **Mobilizing Values.** A question many clients should have after exploring and clarifying their values is “so what?” In reality, how often are people really called to task for their values? The aim of this intervention is to answer the question “so what?” by showing that one of the “points” of having values is turning them into action. If values-work has already been done, such as the activities we suggested above, those that ACT manuals recommend, or others clinicians are comfortable with, then the output of those activities can be used. Otherwise, you can ask clients to tell you about what they stand for, what they believe in, what makes them proud about their own conduct, and so on. Then you can ask your client how she or he shows the world that these are important values. Essentially, how do other people know what your client stands for without your client verbalizing. This line of questioning may identify behaviors your client has already used to activate values. You can continue this line of questioning by asking your client about what she or he is really good at doing, what people compliment her or him for, and what she or he does that feels most authentic. In other words, you are asking your client about personal strengths. Finally, you can ask your client what it would be like to use their strengths to act out their values for the world to see. This line of questioning should continue to push your client to talk about what the end result of all of this would be—ideally, if we used the best of ourselves to act out what we truly valued, we would do so in the service of a natural purpose.

2. **What the World Needs Now.** This intervention strategy starts on the other side of the equation. Rather than beginning with what clients value and do best, it starts with what the world needs. You can ask clients about one or two things they would change about the world, or about news stories they have read recently that have really moved them, or even what part of their experiences they would want most to spare their children and those they care about. This identifies some things that people may want to work toward as part of their purpose. Continued dialogue can help clients find the most magnetic need in the world. When paired with the “Mobilizing Values” intervention, people can be helped to find a purpose they care about and articulate some rough ideas about how they would like to pursue it.

In Mandy’s case, once she identified a purpose for her career, it became clear that there was a conflict with another purpose. Mandy could not both attend a traditional law school
and be there for her daughters during the week. Rather than giving up and viewing her purpose as unobtainable (and herself as worthless), Mandy found another road. She registered for weekend classes through a non-traditional law school to gain competencies and qualifications to work effectively in her chosen area of land preservation easements. In making this decision, she needed to be creative, and relinquish superficial needs for prestige (in the eyes of others). It was a longer road to her career purpose, but she found a way to encounter both life aims along the path she chose.

We suggest that by combining the applications of ACT with the encompassing perspective of meaning in life, more effective treatment strategies can be developed to help clients live the lives they want. By anchoring clients’ personal values in their overall comprehension of their lives, and anchoring their willingness to be flexible in pursuit of valued life aims in their purposes, clients can be drawn toward positive, hopeful, futures of contributing to those around them.

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Just before I retired from counseling in a boy’s school, a grandparent came to pick up his grandson for an early dismissal. It was the day before spring break, and a number of kids were leaving early to catch their rides out of town for warmer climates. The man told me who he was, so I sent for his grandson. While we were waiting for the boy to come to the main office, the old man and I started talking. I learned that his son, the student’s uncle, was also a graduate whom I remembered. He told me with pride that the graduate had become a physician in North Carolina. The boy we were waiting for was a daughter’s son. He also told me he and his wife had another child who was a physician, a daughter, an aunt to our student.

With two physicians among the offspring, I figured there was a pretty good chance that the man, himself, or his spouse was also a doctor. So I asked him, “Were you a physician?” He was easily in his 70’s, so it was fair for me to assume he was retired.

“I still am,” said the older man. “I’m an oncologist.”

When he said that, I was stunned. In the conversation, he had already told me about his childhood in Peru, how he wrote poetry, and how he translated scientific works into Spanish for Spanish speaking physicians. He was active, very much alive, and filled with energy. He was also one of the kindest men I had met in a few weeks. I was so impressed with the man.

And I couldn’t get over the oncology part. I checked by asking him, “You mean you deal
with cancer patients?"

“Yes,” he said, “that’s what oncologists do.”

So I went on and asked him how he could maintain such a youthful attitude with all of the patients he had met who died, or who were about to die.

He told me that dying patients was certainly a daily experience. Then he described a terminal patient he had been with that morning, just a few hours before our conversation.

I interrupted him with a question. I was still stunned, “But what I really mean is this. How do you maintain such an inquisitive, curious, hopeful attitude in the face of that kind of a daily experience? And over a lifetime, too! How do you do it?”

Obviously I was speaking from the viewpoint of a counselor who, himself, had heard, and
been part of, his own share of sad stories.

The older man looked at me with a glimmer in his eye and said, “I have a good memory.”

Now, to a guy like me who grew up on the streets of North St. Louis, a good memory carries this context: “Hey, pal, don’t think I’ll forget what just happened. I have a good memory.”

So I posed another question. “What do you mean, doctor, by a good memory?”

And he said, “I remember the good and forget the bad.”

I was silent....and grateful. If I hadn’t been so impressed with this man before the punchline, I don’t think the story would have penetrated me as it did. And if I hadn’t spent years in child abuse work and four years in a children’s hospital where I often met children dying of cancer, my admiration for him would not have been as great. But it was and is. “I have a good memory.” It’s a short phrase (like those in Just One Thing by Rick Hanson) that has made a huge difference to me.

Jim Schulte is a recently retired from Chaminade College Prep in St. Louis. He was on the staff there for thirty years as a counselor. Prior to that, he was a Deputy Juvenile Officer, teacher, elementary principal, and child abuse case manager at a children’s hospital in St. Louis. He and his wife, Judy, have been married forty-four years. They have two children. Their son, Ben, and his wife, Ali, live in Brooklyn, New York. And their daughter, Deborah, and her husband, Trevor, live in Tampa, Florida.
When I was in high school, I used to dream about having Melissa Morris’s legs, Toni Oliver’s eyes, and Amy Breyer’s hair. I liked my skin, my breasts, and my lips, but everything else had to go. Then, in my 20s, I dreamed about slicing off pieces of my thighs and arms the way you carve a turkey, certain that if I could cut away what was wrong, only the good parts—the pretty parts, the thin parts—would be left. I believed there was an end goal, a place at which I would arrive and forevermore be at peace. And since I also believed that the way to get there was by judging and shaming and hating myself, I also believed in diets.

Diets are based on the unspoken fear that you are a madwoman, a food terrorist, a lunatic. The promise of a diet is not only that you will have a different body; it is that in having a different body, you will have a different life. If you hate yourself enough, you will love yourself. If you torture yourself enough, you will become a peaceful, relaxed human being.

Although the very notion that hatred leads to love and that torture leads to relaxation is absolutely insane, we hypnotize ourselves into believing that the end justifies the means. We treat ourselves and the rest of the world as if deprivation, punishment, and shame lead to change. We treat our bodies as if they are the enemy and the only acceptable outcome is annihilation. Our deeply ingrained belief is that hatred and torture work. And although I’ve never met anyone—not one person—for whom warring with their bodies led to long-lasting change, we continue to believe that with a little more self-disgust, we’ll prevail.
But the truth is that kindness, not hatred, is the answer. The shape of your body obeys the shape of your beliefs about love, value, and possibility. To change your body, you must first understand that which is shaping it. Not fight it. Not force it. Not deprive it. Not shame it. Not do anything but accept and—yes, Virginia—understand it. Because if you force and deprive and shame yourself into being thin, you end up a deprived, shamed, fearful person who will also be thin for ten minutes. When you abuse yourself (by taunting or threatening yourself), you become a bruised human being no matter how much you weigh. When you demonize yourself, when you pit one part of you against another—your ironclad will against your bottomless hunger—you end up feeling split and crazed and afraid that the part you locked away will, when you are least prepared, take over and ruin your life. Losing weight on any program in which you tell yourself that left to your real impulses you would devour the universe is like building a skyscraper on sand: Without a foundation, the new structure collapses.

Change, if it is to be long-lasting, must occur on the unseen levels first. With understanding, inquiry, openness. With the realization that you eat the way you do for lifesaving reasons. I tell my retreat students that there are always exquisitely good reasons why they turn to food.
Can you imagine how your life would have been different if each time you were feeling sad or angry as a kid, an adult said to you, “Come here, sweetheart, tell me all about it”? If when you were overcome with grief at your best friend’s rejection, someone said to you, “Oh, darling, tell me more. Tell me where you feel those feelings. Tell me how your belly feels, your chest. I want to know every little thing. I’m here to listen to you, hold you, be with you.”

All any feeling wants is to be welcomed with tenderness. It wants room to unfold. It wants to relax and tell its story. It wants to dissolve like a thousand writhing snakes that with a flick of kindness become harmless strands of rope.

The path from obsession to feelings to presence is not about healing our “wounded children” or feeling every bit of rage or grief we never felt so that we can be successful, thin, and happy. We are not trying to put ourselves together. We are taking who we think we are apart. We feel the feelings not so that we can blame our parents for not saying, “Oh, darling,” not so that we can express our anger to everyone we’ve never confronted, but because unmet feelings obscure our ability to know ourselves. As long as we take ourselves to be the child who was hurt by an unconscious parent, we will never grow up. We will never know who we actually are. We will keep looking for the parent who never showed up and forget to see that the one who is looking is no longer a child.

I tell my retreat students that they need to remember two things: to eat what they want when they’re hungry and to feel what they feel when they’re not. Inquiry—the feel-what-you-feel part—allows you to relate to your feelings instead of retreat from them.

Sometimes when I ask students what they are feeling in their bodies, they have no idea. It’s been a couple of light-years since they felt anything in or about their bodies that wasn’t judgment or loathing. So it’s good to ask some questions that allow you to focus on the sensations themselves. You can ask yourself if the feeling has a shape, a temperature, a color. You can ask yourself how it affects you to feel this. And since no feeling is static, you keep noticing the changes that occur in your body as you ask yourself these questions. If you get stuck, it’s usually because you’re having a reaction to a particular feeling—you don’t want to feel this way, you’d rather be happy right now, you don’t like people who feel like this—or you’re locked into comparing/judging mode.
So, be precise. “I feel a gray heap of ashes in my chest” rather than “I feel something odd and heavy.” Don’t try to direct the process by having preferences or agendas. Let the inquiry move in its own direction. Notice whatever arises, even if it surprises you. “Oh, I thought I was sad, but now I see that this is loneliness. It feels like a ball of rubber bands in my stomach.” Welcome the rubber bands. Give them room. Watch what happens. Keep coming back to the direct sensations in your body. Pay attention to things you’ve never told anyone, secrets you’ve kept to yourself. Do not censor anything. Do not get discouraged. It takes a while to trust the immediacy of inquiry since we are so used to directing everything with our minds. It is helpful, though not necessary, to do inquiry with a guide or a partner so that you can have a witness and a living reminder to come back to the sensation and the location.

Most of all, remember that inquiry is not about discovering answers to puzzling problems but a direct and experiential revelation process. It’s fueled by love. It’s like taking a dive into the secret of existence itself; it is full of surprises, twists, side trips. You engage in it because you want to penetrate the unknown, comprehend the incomprehensible. Because
when you evoke curiosity and openness with a lack of judgment, you align yourself with beauty and delight and love—for their own sake. You become the benevolence of God in action.

A few years ago, I received a letter from someone who’d included a Weight Watchers ribbon on which was embossed “I lost ten pounds.” Underneath the gold writing, the letter writer added “And I still feel like crap.”

We think we’re miserable because of what we weigh. And to the extent that our joints hurt and our knees ache and we can’t walk three blocks without losing our breath, we probably are physically miserable because of extra weight. But if we’ve spent the last five, 20, 50 years obsessing about the same ten or 20 pounds, something else is going on. Something that has nothing to do with weight.

Most people are so glad to read about, hear about, and then begin any approach that doesn’t focus on weight loss as its main agenda that they take it to be license to eat without restraint. “Aha!” they say. “Someone finally
understands that it’s not about the weight.” It’s never been about the weight. It’s not even about food.

“Great,” they say, “let’s eat. A lot. Let’s not stop.”

And the truth is that it’s not about the weight. Either you want to wake up or you want to go to sleep. You either want to anesthetize yourself or you do not. You either want to live or you want to die.

But it’s also not not about the weight.

No one can argue that being a hundred pounds overweight is not physically challenging; the reality of sheer poundage and its physical consequences cannot be denied.

Some people at my retreats can’t sit in a chair comfortably. They can’t walk up a slight incline without feeling pain. Their doctors tell them their lives are in danger unless they lose weight. They need knee replacements, hip replacements, LAP-BAND surgeries. The pressure on their hearts, their kidneys, their joints is too much for their body to tolerate
and still function well. So it is about the weight to the extent that weight gets in the way of basic function: of feelings, of doing, of moving, of being fully alive.

Yet.

The bottom line, whether you weigh 340 pounds or 150 pounds, is that when you eat when you are not hungry, you are using food as a drug, grappling with boredom or illness or loss or grief or emptiness or loneliness or rejection. Food is only the middleman, the means to the end. Of altering your emotions. Of making yourself numb. Of creating a secondary problem when the original problem becomes too uncomfortable. Of dying slowly rather than coming to terms with your messy, magnificent, and very, very short—even at a hundred years—life. The means to these ends happens to be food, but it could be alcohol, it could be work, it could be sex, it could be cocaine. Surfing the Internet. Talking on the phone.

For a variety of reasons we don’t fully understand (genetics, temperament, environment), those of us who are compulsive eaters choose food. Not because of its taste. Not because of its texture or its color. We want quantity, volume, bulk. We need it—a lot of it—to go unconscious. To wipe out what’s going on. The unconsciousness is what’s important, not the food.

Sometimes people will say, “But I just like the taste of food. In fact, I love the taste! Why can’t it be that simple? I overeat because I like food.”

But.

When you like something, you pay attention to it. When you like something—love something—you take time with it. You want to be present for every second of the rapture. But overeating does not lead to rapture: It leads to burping and farting and being so sick that you can’t think of anything but how full you are. That’s not love; that’s suffering.

I’m not exactly proud to say that I have been miserable anywhere, with anything, with anyone. I’ve been miserable standing in a field of a thousand sunflowers in southern France in mid-June. I’ve been miserable weighing 80 pounds and wearing a size 0. And I’ve been
happy wearing a size 18, been happy sitting with my dying father, been happy being a switchboard operator. But like many people, I’ve had the “When I Get Thin (Change Jobs, Move, Find a Relationship, Leave This Relationship, Have Money) Blues.” It’s called the “If Only” refrain. It’s called postponing your life and your ability to be happy to a future date when then, oh then, you will finally get what you want and life will be good. You will stop turning to food when you start understanding in your body, not just your mind, that there is something better than turning to food. And this time, when you lose weight, you will keep it off. Truth, not force, does the work of ending compulsive eating.

The poet Galway Kinnell wrote that “sometimes it is necessary to reteach a thing its loveliness.” Everything we do, I tell my students, is to reteach ourselves our loveliness.

Diets are the result of your belief that you have to atone for being yourself to be worthy of existing. Until the belief is understood and questioned, no amount of weight loss will touch the part of you that is convinced it is damaged. It will make sense to you that hatred leads to love and that torture leads to peace because you will be operating on the conviction that you must starve or deprive or punish the badness out of you. You won’t keep extra...
weight off, because being at your natural weight does not match your convictions about the way life unfolds. But once the belief and the subsequent decisions are questioned, diets and being uncomfortable in your body lose their seductive allure. Only kindness makes sense. Anything else is excruciating. You are not a mistake. You are not a problem to be solved.

The Sufi poet Rumi, writing about birds learning to fly, wrote: “How do they learn it? They fall, and falling, they’re given wings.”

If you wait until you have Toni Oliver’s eyes and Amy Breyer’s hair, if you wait to respect yourself until you are at the weight you imagine you need to be to respect yourself, you will never respect yourself. To be given wings, you’ve got to be willing to believe that you were put on this Earth for more than your endless attempts to lose the same 30 pounds 300 times for 80 years. And that goodness and loveliness are possible, even in something as mundane as what you put in your mouth for breakfast.

Beginning now.

* * * * * * *


Fare Well
May you and all beings be happy, loving, and wise.