Title of Course: Beyond Calories and Exercise: Eliminating Self-Defeating Behaviors

CE Credit: 5 Hours

Learning Level: Intermediate

Author: Robert E. Hardy, EdD

Course Abstract:

This course is a self-instructional module that “walks” readers through the process of replacing their self-defeating weight issues with healthy, positive, and productive life-style behaviors. It moves beyond the "burn more calories than you consume" concept to encompass the emotional aspects of eating and of gaining and losing weight. Through 16 included exercises, you will learn how to identify your self-defeating behaviors (SDBs), analyze and understand them, and then replace them with life-giving actions that lead to permanent behavioral change.

Learning Outcomes: As a result of taking this course, participant will be able to:

1. Identify the elements of an education model of change as it applies to weight-loss issues
2. List ways to apply the educational model to therapy with clients
3. Describe the process and parts of the self-defeating system
4. Describe the process and parts of the life-giving system
5. Differentiate between mythical and real fears
6. Compare and contrast faulty conclusions and reality-based conclusions

About the Author:

Robert E. Hardy, EdD, received his doctorate degree from Western Michigan University where he was a Mott Foundation Scholar. Currently, he is a Minnesota-licensed psychologist. In 1991, he co-authored Self-Defeating Behaviors (Harper/Collins). The book remains in publication, and is considered the classic work on why/how individual’s repeat negative behaviors. In 1996, he co-authored The Self-Defeating Organization (Addison-Wesley). This book applied his models to eliminate self-defeating behaviors to teams, groups, and organizations. Dr. Hardy became a frequent speaker on self-defeating behaviors – and during this time his weight was over 300 pounds. Lecturing on his topic, and weighing that much became a “marketing nightmare.” Finally, he applied his behavioral change models to his own weight issues. His current weight is 165 pounds and he has maintained this weight for over ten years. This experience led him to author You Don’t Know How to Change (Amazon and Kindle, 2011). This book presents his educational model of change: individuals first learn the models, then they learn to apply the models, and the desired outcome is permanent behavioral change.
Beyond Calories and Exercise: Eliminating Self-Defeating Behaviors

300-Pound Psychologist or 300-Pound Comedian?

After developing the theory to eliminate self-defeating behaviors, I applied the model to one of my major self-defeating behaviors: being obese. My weight loss story has a unique twist to it due to my career path - I am a psychologist and theorist/writer. I co-authored *Self-Defeating Behaviors* (Harper/Collins, 1991), a book that continues in publication and is considered the classic work on why/how people repeat negative behaviors. I made a lot of presentations on my topic, and with my own self-defeating behaviors regarding weight issues being so glaring, it created marketing problems. Since I weighed around 300 pounds and was presenting on the topic of eliminating self-defeating behaviors, it created an oxymoron. A common reaction from the audience was “Is this person a 300-pound psychologist or a 300-pound comedian?”

A number of years ago, at lunch, a friend of mine said, “Why don’t you apply your models to your own weight issues?” It was a version of “Why doesn’t the plumber fix his own leaky pipes?” I knew HOW to change, and my friend was right, it was time to APPLY the information to myself. Since people are afraid not to repeat their self-defeating behaviors, I knew that “attacking” my weight issues with dieting, will power, counting calories, etc., would fail. I started simply by focusing on eating healthful food and reducing portions. After three months, I lost thirty pounds, and my body started to feel cold, like it was slowing down. I mentioned this to a friend of mine, and she told me that I would have to start an exercise program. Then my body would make an adjustment, and I would continue to lose weight. I followed through with her suggestions. Currently, my food portions have shifted dramatically. Historically, when I would have dinner with my wife, I would eat my complete meal and finish off the other half of her meal, which she had left on the table. Today, she and I share one meal between us. Also, an exercise program has become part of my weekly routine. Positive, permanent behavioral change comes not by focusing on the negative behaviors. These behaviors are simply the caboose, and they are just along for the ride. The real drivers of self-defeating behaviors are the mythical fears that force the negative behaviors. And, the behavioral beliefs/feelings that create the mythical fears. Since these drivers are in the partially conscious and unconscious areas of the mind, people struggle with making positive corrections due to not having the drivers in full consciousness.

As I was in my weight reduction process, moving from weighing more than 300 pounds to my current weight of 165 pounds, I kept trying to focus on understanding the drivers that were forcing my weight issues. What was that behavioral belief/feeling? Along the process, it emerged: A DISCIPLINED LIFE IS A BORING LIFE. This translated into eat all you want and make no attempt at disciplining your lifestyle. Then I would be rewarded with an exciting lifestyle: carefree, open, and happy. Also, the mythical fear driver emerged: AS LONG AS MY LIFE IS UNDISCIPLINED, IT WILL BE EXCITING. Exciting! How is being treated like a 300-pound comedian, as opposed to being treated like a doctorate level psychologist and author, exciting? It is a paradox that the exact opposite is true: A DISCIPLINED LIFE IS AN EXCITING LIFE. This paradox is true of all self-defeating behaviors. Looking back over my weight loss, it is remarkable that I had allowed such a silly behavioral belief/feeling to dominate my life in such a negative way. My weight loss has positively impacted every area of my life, professionally and privately!
Introduction

Everywhere you turn these days it seems that there is someone offering advice on how to lose weight. You’ll hear or read their words of wisdom on radio and TV programs, in advertisements for nutritional supplements and exercise equipment, in articles in magazines, on websites and, of course, in books that line the shelves of almost every bookstore’s health or self-improvement section.

In recent years, we have been told the secret to losing weight is to load up on protein and skimp on starches or to pass on protein and concentrate on carbohydrates. Elsewhere we have heard that calories don’t matter, that it’s fat grams we need to count.

Despite all of the advice that’s out there—not to mention all of the weight loss products—Americans are more overweight than at any time in history. What’s going on? We have misguided ideas about food and dieting.

Many times we view eating as a reward for achievement or as a consolation prize when we don’t get what we really want from life. Perhaps we see dieting as a penalty for eating well—or, at least, too much—in the past. (And who wants to be punished?) Or maybe we approach dieting as a game—eat the right combination of foods and you win. If we are lucky enough or have the will power to stick to the diet of the moment, most of us can lose weight—for a while. But the problem is the game grows old. Old habits return and bring with them the weight you lost, often more. Excess weight makes us feel sluggish and, to many, less attractive. It increases our risk of obesity-related health problems such as heart attack and stroke and it puts stress on our joints and circulatory systems—not to mention the buttons and zippers on our clothing!

So what’s the answer? When I was struggling with my own weight issues years ago, the most sensible advice I got was also the simplest: To lose weight, you must burn off more calories than you consume. But even that wasn’t the whole answer.

While it makes perfect sense physiologically, it doesn’t acknowledge the emotional aspects of eating and of gaining and losing weight. It fails to address why we are tempted or compelled to eat, even when we are not hungry. Or why others may insist on feeding us, even when we don’t need food.

The answers to those questions came from my lifelong work of helping others identify and eliminate what I call self-defeating behaviors (SDBs). SDBs are actions and attitudes that work against our own best interest—if we let them. Although I often lectured to audiences about how they could eliminate these counterproductive behaviors, I never took my own advice (at least as it pertained to my weight problem) until about ten years ago. When I finally decided it was time to rid myself of the excess pounds that were contributing to health problems and general dissatisfaction with my appearance, I soon learned that knowing how to create a calorie deficit was not enough. By doing some soul-searching and discovering the negative thought patterns (you guessed it, SDBs) that caused me to me to eat and avoid exercise, I was able to replace those patterns with more healthful attitudes and behaviors.

I moved from living to eat to eating to live.

As these new attitudes became ingrained, the weight went pretty quickly. Today, I continue to maintain my new weight. I feel better than ever, and I would like to help you (and you to help others) do the same.
1. **Identifying your SDBs.** We’ll take a look at what SDBs are and how to identify yours. Once you understand what they are, take an honest look at yourself and you’ll probably identify at least a few you use either daily or in specific circumstances. If not, I’ll offer several other methods of uncovering your SDBs.

2. **Analyzing your SDBs.** By better understanding SDBs, why and when you practice them and how they can lead to the very consequences you’re trying to avoid, you can begin the transition to healthy, positive (what I call life-giving) choices for your life.

3. **Replacing your SDBs.** Simply eliminating SDBs can leave you with a void. By learning to replace SDBs with healthy, life-giving actions and attitudes, you’ll be better prepared to deal with whatever life throws your way.

SDBs are not unique to people with weight problems. (Yes, even those with perfect figures who can eat anything practice them.) Yet SDBs can lead to weight gain and having a less-than-perfect body can cause stress for some that leads to more SDBs.

However difficult it may seem, it is possible to lose weight, keep it off and feel good about yourself in the process. Doing so largely boils down to making a conscious choice to eliminate SDBs from your life. At first, it takes an ongoing effort to identify and then make appropriate choices, but the process gets easier with time—if you work at it.

Einstein once said you couldn’t solve your problems with the same mindset that created them. What I hope this course will do is help you create the mindset to eliminate your weight problems for the long haul.

So follow this workbook step by step, read and reread at your own pace, reflect, take notes and be sure to complete the exercises. I hope and expect you’ll see positive changes in your life – and perhaps even a new slim body. Good luck!

**Identifying Your SDBs**

What keeps you from living life to its fullest? Since you are reading this course, your immediate response may be related to your weight: health problems caused or exacerbated by excess pounds, shame with your appearance, difficulty finding clothes that fit, the frustration of not being able to shed those last few pounds—or even the first few.

If you ponder this question you may come up with a dozen or more answers, many of which are probably unrelated to your weight and most of which are out of your control. Or, at least, that’s how it seems.

In most cases, however, you have more control than you realize. Much of what we experience in life is the result of our own choices. And many of our life choices contribute, either directly or indirectly, to our heavy thighs, thick waists and flabby upper arms—as well as to many of the countless other problems we experience.

And if the things that happen to us aren’t within our control, the way we respond to them certainly is.

Most of our daily choices have little long-term effect, such as the choice to wear a navy suit versus a gray one or to paint our front door dark red instead of brown. (You get the picture.) But other seemingly innocuous choices can cause harm if used inappropriately or habitually. In other words, they become self-defeating behaviors.
For example, who hasn’t drowned their sorrows over a lost love—or hurt feelings or loneliness—with a few beers or a big bowl of ice cream? While treating ourselves to a luscious dessert or a few drinks now and then to soothe or entertain us probably won’t hurt, doing so every time you face disappointment can lead to more problems than you started out with. Perhaps more importantly, relying on food and drink to get you through tough times can prevent you from dealing with your problems in a positive, productive way.

The same goes for countless other behaviors and attitudes we practice every day. They may help us through difficult, short-term situations—an acute illness, the loss of a family member, an argument with a friend, for example—but if practiced over time they can become negative patterns that cause harm.

**The Key Aspects of Any SDB**

Self-defeating behaviors are part of a system that includes faulty conclusions, mythical fears, choices, techniques, prices, minimizers, and disowning. These factors generate SDBs which limit healthy, productive behavioral responses in new moments of life.

As you attempt to identify and eliminate SDBs, keep this definition in mind. Remember, you learned SDBs at low, stressful points in your life. And they initially worked—or at least you believed they worked. This belief is the power that sustains your SDBs. Since a particular response worked in the past, you believe (though perhaps unconsciously) it will continue to work in the future.

**SDBs: Six Ways to Spot Yours**

The good news about SDBs is they are predictable and avoidable—you can eliminate them from your life. The first step is knowing what they are. You must identify specifically the behavior you want to change. There are a number of ways to do this.

1. **Heed Unsolicited Feedback** - All of us receive verbal and behavioral feedback from those who are around us. Usually, it’s good. People tell us, “You look nice today,” or “I enjoyed your presentation,” or “I appreciate your thoughtfulness.” But they also tell us things we’d rather not hear—particularly when they’re angry with us. They may say things like, “Oh, don’t make so much out of it,” or “Would you stop feeling sorry for yourself,” or even “Can’t you ever talk about anything but your latest diet?”

   When people get angry with us, it’s a good time to pay attention, because in their anger others often give us the most honest feedback. Instead of tuning out, denying or distorting what people say to you in anger - try evaluating it. Reflect on it. If it’s true, use it to your advantage.

2. **Ask Others Outright** - If you have a good friend, relative or coworker whom you trust (and if you can take constructive criticism), ask them to give you feedback. Don’t be surprised, though, if they say no. Most people don’t like to be critical—particularly if they like us (who wouldn’t like the opportunity to openly criticize someone they didn’t like!). They may also be afraid you’ll be angry with them if they are. One boss was reported to have asked his secretary to let him have it. When she obliged, he fired her.

3. **Observe Your Family** - Like eye color, hair texture and the propensity to carry weight in your stomach versus your thighs, certain SDBs tend to run in families. While basic personality types—like body types—may be genetic, SDBs themselves are passed on from generation to generation through the learning process, much the same way we learn to cook the way our mother does.
Observe the SDBs your parents and siblings practice and ask yourself if you don’t do the same. Also be aware that you might not practice the same SDBs as other family members, but you might practice SDBs to counteract theirs. For example, if one of your parents had an aversion to sweets and wouldn’t let you eat cake or candy as a child, you might overindulge in sweets as an adult. Or if your father was abusive with your mother, you may find yourself treating your own loving spouse with the same anger or fear your mother showed your father.

4. **Check a List** - Perhaps the best and easiest way to identify SDBs is to study a list, such as the one in Exercise 1. As you read each attitude, action or behavior on the list, ask if it applies to you. If the answer is yes, you’ve identified an SDB. You may want to have a friend review the list with you.

5. **Seek Counseling** - Most people who enter counseling sense that there is *something wrong* with them. However, most often, they don’t have a clear view what that *something* might be. In counseling, professionals can help people identify their SDBs.

6. **Examine Your Responses to Stress** - As a child, your teacher ridicules you in front of the class. As a teenager, you’re stood up by your date to the senior prom. And it only gets worse: As an adult you must cope with a dead-end job, an insensitive husband, unruly children and an interfering, critical mother-in-law. All of us face a myriad of stressful situations in our lives. Often, it’s during stressful times that we develop—and use—SDBs.

Think of stressful situations you have faced in your life, and then ask yourself how you responded. You may just find an SDB lurking in your answer. (To examine the stress/SDB connection better, complete Exercise 2.)

**KEY POINT**: One thing all of these SDBs have in common is that they are learned and practiced in stressful situations. The more stressful the situation, the more intense the SDB.

**EXERCISE 1: Check Your SDBs**

One way to identify your SDBs is by checking a list. Place a check mark next to any of the following attitudes or actions that apply to you.

- □ Abrasiveness  
- □ Abuse of alcohol  
- □ Anger or hostility  
- □ Bingeing  
- □ Comparing yourself to skinny super models and coming up short (who wouldn’t?)  
- □ Complaining  
- □ Criticizing  
- □ Defensiveness  
- □ Dependence on diet pills  
- □ Depression  
- □ Eating poorly or over eating  
- □ Focusing on your appearance, rather than the person you are inside  
- □ Grieving over the loss of the slender body you once had  
- □ Negativity  
- □ Not exercising  
- □ Perfectionism  
- □ Procrastination  
- □ Relying on fad diets and herbal preparations to help you lose weight  
- □ Rigidity  
- □ Self-centeredness  
- □ Smoking  
- □ Suspiciousness  
- □ Watching too much TV  
- □ Other: ___________________
EXERCISE 2: Examine Your Responses to Stress

Describe two stressful situations you have faced in the past:

1. 

2. 

Now briefly describe how you responded to these situations:

1. 

2. 

Negative Patterns: When “Helpful” Responses Go Bad

If SDBs were practiced only once and then forgotten, they might serve as an expedient and effective way of dealing with a stressful situation. But when practiced repeatedly they can lead to negative, harmful patterns, as you can see in these examples:

EXAMPLE 1: On the way home from your weight-loss group you stop by the market to buy some fresh vegetables and fruits to make a light salad for your dinner. As you wait in the checkout line, however, the snack and chip display looks much more appealing than what is in your cart. Besides, you’re hungry and you have followed your diet all day—would it really hurt to have a candy bar and a small bag of chips now? In the short term, the answer is probably no. Splurging on snacks now and then to satisfy a craving or reward yourself for a good day’s work won’t make any significant difference in your weight. But giving into every craving and rewarding everything you do right is a negative pattern that can pile on the pounds fast. Besides, I can think of nothing more counterproductive than rewarding yourself for a good day of dieting by eating a bunch of stuff that interferes with your diet plan!

EXAMPLE 2: Due to downsizing at your workplace, you learn one evening that your job will be eliminated the following week. To ease your disappointment, you go to a local bar and rationalize over a few drinks that it wasn’t such a great job anyway. No harm done, probably, as long as you don’t drive yourself home. Yet drinking every time you face a disappointment could keep you from facing negative situations in a positive way or make healthy changes in your life. Not only that, beer—especially consumed in mass quantities—has a lot of calories. (And who can drink beer without handfuls of those salted nuts on the bar?) It can add inches to your waistline (witness the beer belly) and take the place of nutritious foods your body needs for good health.

EXAMPLE 3: As a child, an overbearing, critical father constantly berates you. In order to cope, you become angry. Being angry gives you a sense of power in a situation which you are essentially powerless. Later as an adult, when you begin to gain more weight than you like, you become angry at your husband who brings home chocolates you can’t resist, at your thin friends who can “eat anything” without gaining an ounce, at the sales clerk in the dress shop who directed you to the plus-size department and at your own body for not being young and trim. In this situation, too, anger gives you a sense of power—for a while. But unless you move beyond anger, it can become a negative pattern that robs you of joy and keeps you from taking positive steps to actually do something about your weight problem.

KEY POINT: SDBs are negative patterns of thought and action.
EXERCISE 3: Uncover Your Negative Patterns

Think of an attitude or action that may have helped you at one time. Was it having a drink to cope with disappointment? Becoming angry and telling off someone who offended you? Eating a big bowl of ice cream to relieve boredom or loneliness? Now think about how that same attitude or action may be limiting your life and your relationships today. If you have difficulty thinking of an action or attitude that fits, look back to your responses to stressful situations. The way you respond to one stressful situation can become a negative pattern of responses to future stressors.

In the following space, describe the attitude or action and how it helped you (or seemed to help you) at the time:

Now describe how the same attitude or action is limiting your life today:

EXERCISE 4: Describing Your SDB

Now I would like you to select one SDB to describe on the following page. Phrase it in a way that describes specifically what you think and/or do when practicing the behavior. For example:

- My SDB is not setting boundaries. I eat my fill—and then some—of anything I want. Thirty minutes later I realize what I have done when I am feeling stuffed and miserable.

- My SDB is relying too much on medications to control my appetite. I feel jittery most of the time. And on days that I am able to keep my food consumption down, I know it’s the medication—not my own ability or will power—that made it possible.

- My SDB is anger. I can’t graciously accept or refuse friends’ offers to diet or exercise with me. If someone offers, I angrily ask, “Why are you offering that? Are you suggesting I am fat?!”

- My SDB is perfectionism. My expectations of myself are so high that I can never meet them and end up feeling like a failure. One Thanksgiving, I set a goal to lose 20 pounds by Christmas. I drove myself nuts!

Although I have included several examples, I would like for you to pick just one for this exercise.

My SDB is:

Which means that I:
**Trigger Patterns: Discovering the Three-Ws of SDBs**

If you observe other people—or yourself—you’ll see that SDBs are not used all the time, but under particular (stressful, as we’ve established) circumstances.

The circumstances under which you perform an SDB forms the trigger pattern for the SDB. A trigger pattern typically has three dimensions:

1. **WHEN** - A particular time of day, week, month or year you are most likely to practice the behavior.
2. **WHERE** - A particular situation or location in which you are most likely to practice the behavior.
3. **WITH WHOM** - A particular person or group of persons with whom you are most likely to practice the behavior.

Suppose you decide your self-defeating behavior is overeating. Put it through the Three-W test. Do you typically overeat at a certain time (such as in the evening after dinner) or in a particular place (such as in your easy chair in front of the TV) or with certain people (perhaps your mother, who continually insists “have some more” when you go to her house for dinner)?

Or suppose your decide your self-defeating behavior is worrying. Do you typically worry at a certain time (such as nights when your teenage daughter is out on dates) or in a particular place (in your dark, quiet bedroom where there are no distractions) or with certain people (perhaps friends who tell you about the rotten guys their daughters got mixed up with)?

My clients with weight problems report a variety of triggers for overeating, such as:

- Special occasions when they go to their favorite restaurant.
- Sitting in front of the TV where they are bombarded with commercials for candy, cheese puffs, chocolate cakes and donuts.
- Being with coworkers with whom they always have a fast-food lunch.

**KEY POINT:** SDBs may be triggered by certain times, locations and people.

**EXERCISE 5: Identify Your Trigger Patterns**

When I put my own overeating to the test, here are the Three-Ws I discovered:

When: lunch and dinner
Where: restaurants
With Whom: usually with a friend
Now it’s your turn. Use the space provided to describe the trigger pattern for one SDB. Be specific in defining each dimension of your trigger pattern.

**YOUR COMPOSITE:**

**My SDB is:**

**When:**

- Circumstances:
  - Time of day:
  - Day(s) of week:
  - Month(s):
  - Year:

**Where:**

**With Whom:**

- Individuals and/or groups:

**Note:** Sometimes it is impossible to isolate a specific trigger for an SDB. Let’s say that you determine that you practice a certain SDB only during the holidays. Is it the time of year itself (when) that is triggering the SDB or the fact that you spend the holidays in the house where you grew up (where) with your family (with whom)? Usually a trigger pattern is a combination of the three.

**Healthy Choices: Catch SDBs Before They Happen**

Although SDBs are negative patterns developed over time and triggered by circumstances that may seem out of your control, each time you practice an SDB you make a new choice to do so. And once you make that choice—which I call *recreating the SDB*—an outward manifestation of that attitude or behavior follows.

This concept can be pretty difficult to understand if you feel your actions are out of your control. Let’s say, for example, your SDB is eating too much junk food, and you feel powerless to stop doing so. Certainly, eating too much may seem like an automatic response to a stressful situation. But when you really analyze what’s involved with eating too much or eating the wrong foods, you’ll see that choices are involved. For example, you must go through the whole process of purchasing all the junk food you are going to eat—whether that means going through the fast-food drive-in or selecting cookies, chips and soft drinks to put in your shopping cart. Once you have the food in your home, you are the one who makes the decision to open the cabinet or refrigerator, remove the food from its package and then place the food in your mouth. (A chocolate bar will never just automatically pop into your mouth and force you to chew—and even if it did, I suspect a carrot stick or orange wedge could do the same!)
While this all probably sounds very simplistic, it just demonstrates the point that you do make choices when you practice an SDB. And before your hand ever reaches for that chocolate bar or bag of chips, you must first make the choice to eat junk food.

Some people mistakenly believe they are eliminating an SDB when they are in actuality changing the manifestation of their SDB. Instead of throwing a tantrum, a person who is angry (recreates anger) may seethe; a person who feels inferior (or recreates inferiority) may cover it up by boasting; a person who is self-centered (recreates self-centeredness) may feign interest in those around him.

“What’s wrong with that?” you may be wondering. After all, if people are able to hide their SDBs won’t they be successful? In the eyes of others, perhaps. But people who cover up their SDBs rather than eliminating them die a slow death inside. What they do in the manifestation stage is hard work—they are trying to overcome or hide what is already created inside of them. This struggle makes life much more difficult than it needs to be. It’s easier—and better—to work on SDBs at the recreation stage.

The main reason it’s easier to change at the recreation stage is because the SDB is not a reality until it is recreated and your body has responded physiologically. Once bodily forces respond, (and your mouth starts watering for that chocolate bar you want to consume), the momentum to take the SDB road is rolling. Think of pushing a freight train over a hill and then standing in the tracks and attempting to stop it when it is thundering down the decline. Although this analogy is extreme, it shows how hard it can be to stop something (an SDB) once it gets going.

To catch an SDB before it starts, you must stay in tune to the when, where and with whom you practice SDBs. If you can’t eliminate the triggers (though in some cases, it may be possible—even preferable—that you do), you can at least be in a state of awareness as to what gets your SDB going. A thorough understanding of when, where and with whom you use SDBs can help you change the process by identifying the exact moment a behavior will be—or is likely to be—put into operation. This should help you catch yourself and switch to a more appropriate, life-giving behavior.

**SDB Patterns: Not All for One and One for All**

Interestingly, trigger patterns and SDBs themselves are not the same for all people. When it comes to weight issues for example, what is one person’s downfall may be another’s salvation.

Let me illustrate. I have had some clients tell me that keeping tempting foods in the house is an SDB that keeps them from reaching their weight-loss goals. Invariably in a moment of weakness, these people tell me, they fill themselves with these high calorie foods. “If I’m going to lose weight, I need to make it as difficult as possible to eat cheesecake, chips and chocolates,” clients have told me. Indeed, some of the most popular dieting strategies call for ridding your cabinets of cookies and filling your fridge with carrots and celery sticks. And for some people, that works. For others, it doesn’t.

I have had other clients tell me that keeping a bag of chips or a frozen cheesecake on hand actually helps them lose and maintain weight, because depriving themselves of favorite snacks ultimately sets them up for failure. By having favorite foods close by, they always know they can have a bite or two if they decide to.

Remember that weight-loss is not an all-or-nothing proposition. Finding a way to enjoy your favorite foods now and then (even if they aren’t the healthiest) is one of life’s pleasures. It’s only when eating non-nutritional foods—or too much of any food— becomes habitual that it’s harmful. Only you can figure out how to keep that balance. You must figure out what is an SDB for you.
Analyzing Your SDBs

Imagine yourself sitting at a fork in the road. The road that veers left, though filled with potholes, is familiar. You’ve driven that road many times before and probably have the wheels out of alignment to prove it. According to the roadside signs, however, the unfamiliar road to the right will take you to your destination. Which road do you take? The familiar, bumpy road or the one that will take you where you want to go? While the answer seems pretty obvious, people often choose to take the familiar, bumpy road (the SDB road, you’ve probably guessed) and then wonder why they never reach their destination—a fulfilling life, better health, inner peace, etc.

That is an issue we’ll explore in this section as we look at yet another W of SDBs—why we choose (yes, choose) to practice them. The answer lies in what we believe will happen if we do practice them and what we fear will happen if we don’t.

We’ll also look at the consequences of SDBs and the lengths we’ll go to continue practicing our SDBs—even when we recognize the consequences. A better understanding of these factors (along with the when, where and with whom) will ultimately help you steer clear of the bumpy SDB road and set you on the road to where you want to go.

Conclusion and Promises: What Fuels Our SDBs

SDB patterns are formed and/or repeated when faulty conclusions are used as guidelines for subsequent thoughts and actions. Such conclusions are the basis for all SDBs. They are composed of incorrect or incomplete evaluations about a situation and promises about what will happen if an SDB is practiced. For this reason, they can be expressed as conditional (IF/THEN) statements, such as:

- IF I worry, THEN I will be prepared for bad things that might happen to me.
- IF I do everything perfectly, THEN people will admire me.
- IF I keep trying different diets, THEN I will eventually find one that keeps the weight off for good.
- IF I have a supply of snacks nearby, THEN I’ll have something to distract me when I am bored or lonely.

How SDB Conclusions are Formed

Conclusions are formed in a flow system. You have experiences, obtain results and make a choice at some level as to how you will cope. If you feel that your coping method is successful, a conclusion is formed. The table below illustrates how conclusions are formed.

<table>
<thead>
<tr>
<th>EXPERIENCE</th>
<th>RESULT</th>
<th>CHOICE</th>
<th>METHOD TO COPE</th>
<th>CONCLUSION</th>
</tr>
</thead>
<tbody>
<tr>
<td>My husband left after our second child was born - I just couldn’t lose the extra pounds.</td>
<td>Hurt</td>
<td>Stop the hurt</td>
<td>Overeating</td>
<td>If I overeat, then I will find the comfort I need to cope with the hurt.</td>
</tr>
</tbody>
</table>
When I was growing up, my parents were very rigid.

<table>
<thead>
<tr>
<th>Tension</th>
<th>Stop the tension</th>
<th>Not setting boundaries</th>
<th>If I eat anything and everything I want, then the tension will stop.</th>
</tr>
</thead>
</table>

As I child, I was told I was a failure.

<table>
<thead>
<tr>
<th>Shame</th>
<th>Don’t put myself on the line</th>
<th>Adopting low expectations of myself</th>
<th>If I never bother to lose weight through diet and exercise, then I won’t feel the shame of failure.</th>
</tr>
</thead>
</table>

As a teenager, boys didn’t ask me out because I was heavy

<table>
<thead>
<tr>
<th>Fear of being rejected again</th>
<th>Stop the rejection</th>
<th>Being cold and aloof towards men</th>
<th>If I don’t allow myself to be close to men, then they won’t have a chance to reject me.</th>
</tr>
</thead>
</table>

**EXERCISE 6: Identify Your SDB Conclusions**

To better understand the conclusions that drive your SDBs, select two troublesome SDBs and try expressing them as conditional statements:

If I:

Then:

If I:

Then:

Now, try expressing the same two SDBs in the flow chart below:

<table>
<thead>
<tr>
<th>EXPERIENCE</th>
<th>RESULT</th>
<th>CHOICE</th>
<th>METHOD TO COPE</th>
<th>CONCLUSION</th>
</tr>
</thead>
</table>

Don’t be discouraged if you have difficulty at first understanding or identifying the conclusions that keep you performing your SDBs. Most people aren’t aware of the conclusions that generate their behaviors. We have all known people who look right at us and say, “I shouldn’t be doing this,” as they light up a cigarette or gulp down a bacon double cheeseburger—with fries. Behind their behavior is a conclusion that they don’t have in full awareness.
How Your Subconscious Can Control Behavior

Like eating fatty foods or smoking when you know it’s not healthful, an SDB—today—seems irrational. Why you engage in such irrational behavior is rooted in your history and stored in the inner, unaware area of your mind. Consider the following analogy: The human mind is like the night-and-day rhythm of nature. The conscious is akin to the daytime in nature. It’s the area where people abstract and think. The place where their thoughts are in full awareness. The preconscious is like the dawning or dusk of the day. Things are not as easily seen in this area and, in fact, sometimes ideas and thoughts can be quite foggy. Nighttime is equated with the unaware area of the mind, and this is where our SDB conclusions are stored. Our SDBs are largely dictated by the unaware, “nighttime” area of the mind.

You have an infinite number of conclusions stored in your mind at all three levels of consciousness. Whenever you experience a conflict between what you think you should do and what you feel you should do, the light of day is conflicting with the dark of night. In other words, the aware part of the mind is reasoning out a situation in present day reality, and the unaware part of the mind already knows what to do—like taking the bumpy road—based on past experiences. In these conflicts, the unaware area almost always emerges the winner. The “nighttime” area wins because behavior choices are made based on real experiences; the “daytime” area of the mind is abstracting experiences. You make behavioral choices on what you have really experienced, not on an abstract idea.

For example, let’s say that when you were growing up and faced a difficult situation—whether it was a fight with your best friend, a painful medical procedure or a breakup with your latest heartthrob—your mother used to ease your pain by baking your favorite three-layer chocolate cake. Your mind might have formed the conclusion that rich foods equal comfort. Later in life, you probably realized that in actuality rich foods make you gain weight—which can increase your risk of numerous health problems. At this point, a conflict will exist between what you think is good for you and the conclusion stored in the unaware area of your mind. As long as that conclusion stays unchanged in the unaware area, you will continue to eat rich foods to cope with stress—even though the pounds you gain in the process can add to physical and emotional stress! Of course, you may give up these foods for a while, using will power or other approaches, but until you understand the conclusion that compels you to eat them—bringing that conclusion from the “nighttime” to “daytime” area of your mind—you will probably continue to eat rich desserts.

When I began struggling with the issues behind my own SDBs of overeating and not exercising, I discovered the conclusion that drove both SDBs was this: “A disciplined life is a boring life.” For me, this translated into “eat all you want; don’t bother with an exercise program; and avoid any attempt at disciplining your lifestyle.” If I were to apply discipline to the way I lived, I told myself, my life would be boring.

Today, this conclusion sounds ludicrous, but it was only by recognizing this conclusion and bringing it to the “daytime” area of my mind that I was able to address my weight problem healthfully and successfully.

**KEY POINT:** If you want to change a negative behavior, you must understand—become aware of—the conclusion that drives the behavior.
How SDBs Ensure Unwanted Results

If being irrational in present day reality weren’t enough, SDBs often create the exact opposite results of what you want.

For example, I once had a client whose husband of thirteen years left her for a younger (and much trimmer) woman. The woman had since remarried and told me she truly loved her second husband and wanted to spend the rest of her life with him. Yet she spent years driving him away from her by being cold and controlling and withholding affection. When her second husband finally got fed up and divorced her, she said, “I was always afraid you were going to leave me too.”

What was going on? The conclusion behind her behavior was this: “I know, in time, you will reject me. IF I harden my heart to you now, THEN I won’t be hurt when you leave.” (Recognize the conditional statement?) In preparing for his departure, she practically ensured it would come to pass.

Like this woman, many of us, in our attempts to prepare for the worst, paradoxically ensure that the worst will happen.

SDB Fears: Understanding How They Affect Choices

All of us are born with two fears: the fear of falling and the fear of loud noises. Just think of all the other fears we acquire throughout life! Some of our fears are very real, rational and healthy. A fear of falling, for example, may cause you to stay clear of rocky ledges; a fear of burning your hand prompts you to use a pot holder when reaching for a dish in the oven; a fear of imprisonment may keep a would-be criminal from robbing a bank. Without real fear, people would pay no attention to red lights, stop signs, poison labels on bottles, or guns. You get the picture.

But in addition to these very real, healthy fears are fears that block the road to where we want to go. In other words, we practice SDBs out of fear of what will happen if we don’t practice them. The following are a few examples of fears that drive SDBs:

- I’m afraid IF I don’t follow my exercise plan to the letter (SDB: perfectionism), THEN I might as well give up on my diet completely.
- I am afraid IF I don’t constantly remind people that I am on a diet, and mention time and again how much trouble I have sticking to diets in the past, THEN they will offer me foods that I won’t be able to resist.
- I’m afraid IF I don’t fit into a size 4 by summer, THEN I will be a failure.
- And the fear that drove my SDB: I’m afraid IF I don’t eat whatever I want (SDB: undisciplined lifestyle), THEN my life will be boring.

EXERCISE 7: Uncover Your Fears

Now, select two SDBs you have identified. Think about what you fear will happen if you don’t use these SDBs and state that fear for each in the format above (note, again, the IF/THEN mentality).

I’m afraid IF I don’t:

THEN:

I’m afraid IF I don’t:

THEN:
A Painful Past Can Create Fears

What you need to realize as you identify the fears that drive your SDBs is that they are not real—they have no useful purpose in today’s reality.

A number of labels could be used to describe an SDB fear: imaginary, not based on reality, unfounded or unrealistic; but my favorite label is mythical. Mythical fear is fear our mind manufactures today based on past experiences (such as being abused as a child, rejected in a love relationship or suffering a bad reaction to a medication.) These experiences are so painful we do not want to have them happen again. At such pressure points in our development we build in behaviors to help us cope. The problem arises when you come into a fresh moment in life when these behaviors are no longer needed, but in the new moment of life some stimulus “triggers” the conclusion and you feel fear. Then you respond with the SDB.

In other words, the mind manufactures mythical fear by taking past experiences into a new moment of life and predicting the same situation will occur. For example:

- My college boyfriend rejected me because I gained too much weight. I know you will reject me too.
- The last diet I tried did nothing but leave me hungry and irritable. I know this diet won’t help me either.
- I gave up the last exercise program I tried after a few weeks. I just know this one will end up the same way.
- I didn’t get the last job I interviewed for because I know the interviewer didn’t like overweight people. I know I won’t get this job either.

Separating Real From Mythical Fears

Because real fear is helpful and mythical fear is destructive, it’s essential that you be able to tell the difference. Next time you find yourself feeling fearful, ask yourself these questions to help sort out the basis of your fear.

Does your response to fear alleviate it or perpetuate it? As you look over a cliff, you experience a fear of falling (a real fear). Once you’ve responded (by moving back several steps, most likely), the fear should be gone.

Your response to mythical fears, on the other hand, will make the feared event come to fruition—often repeatedly. People who fear rejection will be rejected time and time again. Much like the woman who drove away her husband with her cold behavior, they create a self-fulfilling prophecy.

When do you physically experience the fear? I worked for a number of years with veterans who were returning from Vietnam. Time and again, in groups, they told of being in extremely dangerous and fearful situations. From their discussions it was evident that during these fearful situations their behaviors were controlled—they were able to perform dangerous tasks and remain relatively calm. After these situations were over, however, their emotional reaction was bizarre; many of them couldn’t even put a quarter in a soda machine because they were physically shaking so badly. In short, their fear was felt after the actual fearful event.

In situations involving mythical fear, however, the tension is felt beforehand, as our bodies gear up for the fearful event. The fear is projected into the future. For example, I will not be able to maintain an exercise program and eat properly.
Is it a win-lose situation? If you face a real fear, one of two things will happen—you will win or lose. For example, you will either get out of the way of the oncoming car (win) or get hit (lose); your parachute will open (win) or it won’t (lose). When you face a mythical fear, however, you either lose or you tie. The following examples clarify this concept.

RON is home alone Saturday night. He doesn’t ask women out because he fears no woman will want to date a guy who is 80 pounds overweight. If he was to ask a woman out and she said yes, Ron would win. If he was to ask a woman out and she said no, Ron would be home alone on Saturday night—like he is now (a tie).

JILL is 45 pounds overweight. A friend asks her to take part in a fitness club’s new weight reduction program. Jill is skeptical, because the other programs she has tried haven’t helped her lose more than a few pounds. If she were to try the club’s new program and it helped, she would win. If she tried it and it didn’t help, she would still be 45 pounds overweight (a tie).

ANITA: When her excess pounds begin to bother her, Anita asks her doctor to prescribe a weight-loss drug for her. Her physician, who suspects that Anita may be eating more than she realizes, asks her to keep a food diary (in which she would log her eating patterns) for a month, then schedule a return visit. Anita, who insists her weight gain is the result of a sluggish metabolism and not overeating, refuses. If Anita were to keep a food diary and discover eating patterns that she could change, she would win. If the food diary revealed no troublesome eating patterns, she would still need to look for other ways to address her weight gain (a tie).

When I conduct workshops and discuss the win-tie concept, many times people will say, “But if these people challenge their fears, they may have to actually experience being turned down for a date or going through yet another futile attempt to lose weight. Why should they bother?” My response is this: Because having to live without trying is ultimately more painful than challenging a mythical fear and ending up with a tie. At least with a tie, you have some new information upon which to base new choices. Thus, a tie isn’t really a tie because something useful is learned from the situation.

The next time you have the choice whether to challenge a mythical fear, ask yourself this question: “What is the worst thing that can happen to me without my SDB?” With some serious introspection you may find that the worst that can happen without your SDB is exactly what will happen if you keep your SDB!

KEY POINT: Mythical fears lead to SDBs.

Common SDB Fears

Virtually everyone is afraid of something, and as we discussed, everyone well should be. Of course, there are people who claim they’re not afraid of anything. I beg to differ—those people are afraid of being afraid or are afraid of admitting they are afraid! Or maybe they just haven’t identified their fears.

If you’re uncertain of the fears that are driving your behavior, or if you’re still uncertain as to whether your fears are real or mythical, the following may help. These are some of the most common mythical fears I have encountered in my practice. Perhaps one or more of these will ring true with you.
Fear of the Unknown

Many writers have identified fear of the unknown as the greatest of fears in us. The way we respond to death—even the mere thought of our own death—is an example of how powerful this fear can be. Fear of the unknown is largely what makes you choose the familiar, bumpy SDB road instead of a less traveled alternative. You can create a lot of internal fear when you’re not sure what will happen to you. This is one of the reasons SDBs appear “safe.”

LAURA: Fear of the unknown was a problem for 22-year-old Laura, who had been overweight for as long as she could remember. As a child, when the other children teased her about her size, she took comfort in food. As a teenager, when her classmates were out dating, she was home trying to ease her loneliness with food. In college, food was her constant study companion. She often stayed holed up in her dorm room with her books and a pepperoni pizza. Eating helped ease her anxiety, especially at test time. By the time she was 22, Laura carried 250 pounds on her five-foot-frame. “I’m as wide as I am tall,” she told me.

Laura came to see me shortly before her college graduation. Without a job lined up, she was planning to move back home with her parents. Her parents agreed, provided she met two demands: 1) that she gets a job and help toward household expenses and 2) that she loses weight. (They were concerned for her health, they told her.) Both prospects frightened Laura. All her life she had been somewhat a loner, who buried herself in her studies and her eating. Now she was being asked to take one of the biggest and most difficult steps of her entire life—going into the unknown and promoting herself to potential employers—while giving up the comfort of constant eating.

During our few sessions, I tried to make Laura see that losing weight could help give her the energy for her job search and self-confidence to meet with and present herself favorably to prospective bosses.

“The only thing you have to lose is some weight—and a few SDBs,” I told her.

“I know,” she admitted. “I know I should lose weight, but all my life I have been known as the ‘quiet, fat girl.’ If I were to lose weight, who would I become? And if I can’t eat to deal with stress, how can I even search for a job—much less deal with the day-to-day hassles when and if I get one?”

For Laura, as well as many of us who practice SDBs, traveling the familiar road—however negative—offers a false sense of control over our lives, because by traveling the SDB road, at least we know what to expect.

Fear of Failure

When we anticipate failure, we manufacture fear and set up an SDB cycle. Once you conclude that you will fail, you unconsciously put into operation the very behaviors that bring about your failure—in other words, you hold back your efforts to succeed.

I once had a client who had eagerly joined a health club, saying she believed a well-designed aerobic and strength-training exercise program was the answer to her weight problem. Her husband supported her by leaving work early three days a week so that he could watch their young children and start dinner during her exercise sessions. During the course of our visits, however, she told me that she had not lost a pound (in fact, she had gained a few) since joining the health club—and she didn’t seem a bit surprised.
Upon questioning, I learned the truth: The woman feared failure. Because she feared the exercise program wouldn’t help anyway, she had gone to the health club only twice over the past month. To keep up the pretense of going to her classes on the other days, she got in her car and drove to a nearby frozen yogurt shop where she sat until class time had passed and it was time to go home.

Why would fear of failure cause someone to behave in a way that ensures failure?

Because by ensuring failure, a person can think: “I never really failed, because I never really tried to succeed.” People who fear failure choose to lose by forfeit rather than show up for the game and experience the anticipated loss first hand.

Fear of Success

Though certainly not as common as fear of failure, fear of success affects more people than you would probably expect. Fear of success comes when historically we have been rewarded for being unsuccessful.

DELIA: Such was the case of Delia, a client of mine who had been chubby since childhood. At age 26, Delia finally had the conviction to do something about her expanding figure. Less than six months after beginning a diet and exercise program, Delia was trim and looked terrific. Yet, I sensed she was feeling a little down.

“What’s the matter?” I asked. “Your diet is a success and you look terrific!”

Delia finally confessed. It was summertime and she had plans to visit a college friend, Patty, who had also struggled with a weight problem. As students, the two had enjoyed pizzas together as they studied for exams or as they fantasized about the clothes they could wear or the guy they could date if they were just a few sizes smaller. “We were best friends when I was overweight,” Delia said. “Patty liked me that way.”

In college, Delia was rewarded for her weight problem by a close friendship with Patty. Now that Delia was trimmer, she wondered if Patty would like her. She feared the consequences of her weight loss success.

AMY: I had another client who seemed ever more agitated as she became closer to her weight-loss goal. She was looking great, so I couldn’t understand what was bothering her.

Finally one day she confessed, “When I was overweight, men never paid me any attention. Now I am starting to notice men looking at me. A man in my office even asked me out for a drink after work. I have to face my sexuality and it scares me to death.”
Fear that Something Bad Will Happen—Eventually

When things are going well, some people take good fortune for granted, feeling somehow they are immune to misfortune. Others go to the opposite extreme, seeing good luck as an omen of bad things to come.

**BOB:** When Bob finally made up his mind that he needed to—and was going to—lose the 50 pounds he carried primarily around his mid-section, he did great. He began an exercise program and stuck to it. He also traded in the beer and chips for bottled water and fruit. In a matter of months he was nearing his weight loss goal.

Remembering how proud I was at this same point in my own weight loss program, I was a little surprised when Bob didn’t seem to feel the same. When I asked why, he told me, “I’m afraid I’ll never reach my goal. I have always heard that those last ten pounds are the hardest.”

Unfortunately, this type of fear—that things are going better than they should be and are bound to change at any moment—is not uncommon. More unfortunately, this type of fear keeps many people from enjoying fully—if at all—what should be their happiest (and in Bob’s case, thinnest) times.

Fear of Letting Go of SDBs

One of the main reasons we practice SDBs is that we are afraid of what we may find out about ourselves or how others might see us if we stop practicing our SDBs. The following are some fears my clients have expressed to me.

“**I’m afraid people will stare at me or snicker at me for being overweight.**”
*SDB: Shyness*

“**I’m afraid people will pity me.**”
*SDB: Withdrawal*

“**I’m afraid I’ll find that I can’t stick to a healthy diet.**”
*SDB: Perfectionism*

[Perfectionism often goes hand-in-hand with another common SDB—procrastination. The reason is perfectionists often put off what they fear they can’t do perfectly. Unfortunately, striving to always be perfect wears people out because humans, by nature, are not perfect beings.]

“**I’m afraid romantic partners will be turned off by my spare tire.**”
*SDB: Fear of rejection*

“**I’m afraid that people will see that I am self-conscious about my weight and take advantage of me.**”
*SDB: Hostility*

“**I’m afraid I’ll be unprepared for worse times when I am even heavier than I am now.**”
*SDB: Prophesying doom, negativity*

As we discussed earlier, however, what you will find when you stop using your SDB will be far favorable to the results you are getting from your SDB now. Remember, these are mythical fears! Another way of looking at what you fear will happen is by what you think and/or hope you’ll avoid by engaging in a particular SDB.

By the way, my client who used her weight to avoid her sexuality is now enjoying a satisfying relationship with a coworker who had asked her out for drinks. She reports that she has never been happier!
Head Fears Off at the Pass

By now you should have identified at least a few fears that drive your SDBs. Now what?

In our culture, much is said about facing or overcoming one’s fears. I partially endorse this idea because when facing real fears, many people have proven they were able to cope with those fears. But it’s a different story with mythical fears. A thorough understanding of SDBs reveals a better method of combating fears than facing up to them.

At any moment in time, we have no mythical fears unless we create them—and the resulting behavior. Only when we create the fears do we experience them physiologically with a knot in the stomach, sweaty palms or shortness of breath.

That said, it makes sense that the best way deal with SDB fears is at the stage of creation. Just like the freight train I used in the analogy earlier, stopping a fear after it starts can be extremely difficult if not impossible. Therefore, our best bet is cutting them off at the pass!

The Three-Ws (where, when and with whom) we discussed can trigger mythical fears. I teach my clients to thoroughly identify the mythical fears they practice and the types of situations in which the fears are used. After the fears and situations are identified, you can begin to catch yourself as the fears are engaged. If fears aren’t engaged, nothing needs to be overcome. Without mythical fears, SDBs are nonexistent.

Techniques: How You “Do” Your SDBs

Once you have responded to a mythical fear and made a choice—either consciously or unconsciously—to do an SDB you need thoughts and behaviors to carry out that choice. The term for these thoughts and behaviors is techniques. In other words, techniques provide you with a way to carry out your SDB choices.

Techniques may be exclusively internal or they may consist of inner thoughts and outer actions. The negative counterproductive behaviors you observe in people are external techniques.

Some examples of external techniques are:

- Wearing the same size clothes you did in college, despite the fact they are uncomfortable and look awful.
- Talking excessively about your weight and all of the various diets you have tried.
- Eating to ease anxiety.
- Lying on the couch all day when you should be exercising.
- Lashing out at others—including your husband who brings you chocolates, your doctor who won’t prescribe diet pills, and your thin friends—as if they were to blame for your weight problem.

Internal techniques are not directly observable, but they are just as potent as external techniques. The following are examples of internal techniques:

- Comparing your appearance to that of your thinner friends.
- Incessant grieving over the loss of your “girlish figure.”
- Focusing on your weight problem, rather than taking steps to improve it.
- Anticipating negative results.
- Forming unrealistic expectations—perhaps, of how much weight you should be able to lose and how fast.
- Prophesying doom. “My weight condition is genetic. There is nothing I can do about it—period.”
- Believing it’s a sign of weakness—or selfishness—to say “no” or ask for help.
For each SDB we use both internal and external techniques. For example, the SDB of shyness maybe carried internally by anticipating rejection, comparing yourself to others, labeling yourself as a loner, reviewing past hurts, concentrating on your flaws and isolating yourself. External techniques to carry out shyness might include eating alone, hanging onto only one friend for support, staying at home, turning down invitations, and avoiding eye contact.

In order to keep doing SDBs, we have to constantly repeat choices in new moments of life and implement techniques over and over again. If you were to choose not to do an SDB and/or not implement the SDB choice with techniques, the SDB would be eliminated. Techniques serve a vital purpose—they fill up time and space and allow a person to stay away from self-created fear, such as the fear of rejection, which might drive shyness. Therefore, the actions and thoughts mentioned above—seating yourself away from others, avoiding invitations, labeling yourself as a loner, etc.—would allow you to avoid facing your fear of rejection. In short, we do SDBs because they “feel” safer than having to face a mythical fear.

As we’ve discussed, certain SDBs can lead to weight issues, and weight issues can be an impetus for other SDBs. The following are some of the most common SDBs reported by my clients with weight issues.

**SDB: Depression**

*Internal Techniques:*
- Dwelling on the negative. To paraphrase the poet Yeats: People with depression have an abiding sense of tragedy sustaining them through short periods of joy.
- Constantly focusing on your weight.
- Forecasting a gloomy future.
- Comparing yourself to others or comparing yourself to the thin, healthy person you were.
- Telling yourself that you’ll never be able to enjoy your favorite foods again if you decide to proceed with a healthier diet.

*External Techniques:*
- Talking excessively about failed diets or your inability to lose weight.
- Refusing to go swimming or water skiing or participating in other fun activities that would allow others to see much of your body.
- Reflecting an “I’m big and I’m unhappy about it” face most of the time.
- Being a couch potato.
- Sleeping a lot.

**SDB: Anger**

*Internal Techniques:*
- Playing the “what if” game: What if I had been born with thin genes? What if I hadn’t been forced to clean my plate when I was a child? What if I had eaten healthy low-fat foods when I was a kid? It’s too late to change my habits now.
- Reviewing past hurts—both physical and emotional.
- Dwelling on what you’re missing—more dates, more stylish clothes, a better job, more respect from others—because of your weight (or at least blaming your weight for the fact you don’t have these things).
- Assuming other people somehow blame them for weight problems.
- Expecting herbal remedies and fad diets to bring permanent weight loss and then becoming angry when these quick fixes don’t deliver.
External Techniques:
- Verbally attacking others.
- Glaring at people.
- Putting on an aggressive air.
- Practicing temper tantrums.
- Using facial expressions that indicate “I am angry.”

SDB: Inactivity

Internal Techniques:
- Telling yourself a few more pounds won’t show up on your already large body—so why bother forcing yourself to be active?
- Relying on food to help boost your mood (when physical activity can actually improve mood—and lead to weight loss in the process).
- Magnifying how difficult it is to be active while carrying so much excess weight around.
- Ignoring your doctor’s advice and recommendations to exercise as a way to control weight and reduce your risk of cardiovascular problems.
- Maintaining a hopeless attitude.

External Techniques:
- Doing the “couch potato routine”—lying on the couch ... watching TV ... eating junk food ... drinking a lot of cola or beer.
- Joining a gym, but spending more time at the juice bar than in class.
- Resting—a lot.
- Developing hobbies that tend to be inactive, such as surfing the Internet, watching TV, reading, or playing chess. (Such hobbies are fine, but they can create a pattern of constant inactivity. It’s best to do these in addition to—not instead of—active hobbies, such as walking, aerobics, dancing or even gardening.)

If these techniques don’t ring true, perhaps you will recognize some of these other techniques reported by my clients. The first half of this list consists of techniques used to implement particular SDBs; the second half are techniques used to maintain the status quo. That is, once SDBs are a part of your life, these techniques keep feedback and outside influences from interfering with the behaviors—whatever the behaviors.

Techniques Designed to Implement SDB Choices:
- Minimizing successes and elaborating on mistakes. [SDB: Negative self-concept]
- Focusing or dwelling on something negative about your appearance, such as the size of your thighs or your “spare tire.” [SDB: Inferiority]
- Eating foods that you know are high in fat and/or calories and then thinking: “I’m so heavy anyway, what harm is a few more pounds?” [SDB: Eating poorly]
- Assuming others will reject you. “Who would want to be with someone as overweight as I am?” [SDB: Shyness]
• Believing other people are as focused on your physical flaws as you are. Imagining others are wondering: “How much does he weigh?” “I wonder where she dug up that awful dress — can’t she find any that fit?” [SDB: Paranoia or inferiority; hostility or shyness]

• Focusing on what you don’t have, rather than what you do have. [SDB: Pessimism]

• Labeling yourself or others. “I am and I always will be FAT.” [SDB: Prejudice]

• Focusing on the total number of pounds that you need to lose, so that the prospect of dieting seems overwhelming. (It’s much better to set small, attainable goals at first.) [SDB: Procrastination]

• Focusing on the fact that you’ll never be as skinny as a super model, rather than taking steps to achieve a weight that is healthy for you. [SDB: Negativism, skepticism]

• Pretending that your weight problem doesn’t bother you, rather than trying to do something about it. [SDB: Perfectionism, stoicism]

• Cutting yourself down before others do. [SDB: Inferiority]

• Focusing on what you don’t have, rather than what you do have. [SDB: Perfectionism, stoicism]

• Convincing yourself that you have nothing in common with your thin, active acquaintances, so you have nothing to discuss. [SDB: Alienation]

• Maintaining the idea that it is weak or wrong to ask for help, believing you ought to be able to work out your own difficulties. [SDB: Macho image, perfectionism]

Techniques Designed to Maintain the Status Quo

• Keeping so busy that you have little time or energy to think about yourself or face deeper issues.

• Denying you often felt depressed even before middle age ... or your spouse left you ... or your chronic disease.

• Focusing on another person’s problems, weight, faults, etc., as a way of avoiding focusing on your own.

• Making changes that are so rigid and restrictive—such as all-or-nothing dieting or an overly ambitious exercise plan—that you can’t maintain them and end up slipping back into your self-defeating patterns.

• Keeping from moving ahead by bringing back previous defeats in your own mind.

• Taking something you have read in one magazine or in an obscure research report, exaggerating it and then using it as a reason to perpetuate your SDB. (For example, taking a report that suggests quitting smoking leads to weight gain or that thin women are more likely to develop osteoporosis.)

**KEY POINT:** Techniques translate negative choices into nonproductive thoughts and actions. Techniques may be purely internal or may consist of a combination of inner thoughts and outer actions.
Where We Learn Techniques

Like SDBs themselves, SDB techniques are learned—they are not in our genetic code. So where and how do we learn techniques? We’ll examine four potential sources:

1. Initial Conditions

Usually SDB techniques can be traced to the condition that influenced you to create the SDB itself. For example, if your parents imposed excessive expectations on you as a child, you would be likely to impose these expectations on yourself as an adult. If an important person rejected you during your developmental years, you might also adopt techniques to cope with the rejection or to create the conclusions to influence rejection from other people.

Techniques are taken from the time SDBs were created and are modified as you develop. For example, if you learned to cope with frustration by throwing temper tantrums as a child, you might modify this technique into verbal abuse toward others as an adult. In essence, the technique is the same, though it has been refined to coincide with changing conditions.

2. From Other People

Although techniques are generally learned initially and then modified over time, sometimes people learn new techniques from others if their own techniques aren’t sufficient to perpetuate the SDB.

JONATHAN was about 60 pounds overweight and had created a profound distaste for any type of physical activity. He came to one of my support groups when his doctor told him that his excess weight was putting him at risk of heart disease. When the group’s conversation turned to exercise, Jonathan promptly reported he couldn’t exercise because exercising made him hungry and he was afraid of gaining more weight. When I shared with him some research that showed exercise actually helped to suppress appetite, Jonathan latched onto a technique practiced by another client who claimed that exercising put too much stress on her heart, which was already overburdened with her excess weight.

A few sessions later, I asked Jonathan if he had begun to exercise more often during the week. He said he couldn’t because he didn’t want to add stress to his already overburdened heart.

3. By Accident

A third way you can learn new techniques is by accident. For example, you may hold back a thought or feeling and find this works well to accomplish withdrawal. Or you may focus on daydreaming and realize that by doing so you can successfully close people out. You may then retain these techniques in your repertoire for future use.
4. **By Creating New Techniques**

It’s seldom that you would need to acquire techniques other than those learned from the three sources mentioned above. However, there are some situations and circumstances that call for the creation of new techniques. Ironically, involvement in counseling, therapy or some type of support group or workshop can provide such an occasion. In such situations, people do some of the most ingenious things to be able to maintain their SDBs.

Creating new techniques, or trading old techniques for new ones, involves a lot of creative talent—obviously in the wrong direction. I’ve had clients who have been extremely negative verbally. Once they recognized this technique (one used to carry out their SDB of negativity), they switched to being extremely passive.

One woman took all of her notes and completed her workshop exercises in shorthand. At the end, she revealed that her use of shorthand was in fact a technique to prevent people from getting to know her.

The fear of being without SDBs can be a potent force. Some people will actually go to extremes to use and create techniques to continue their SDBs.

**EXERCISE 8: Identify Your SDB Techniques**

Once again, think about the fears you identified in Exercise 7. Now think about the SDB techniques you use to insulate yourself from those fears.

For this exercise, select one fear on which to focus. Then, if possible, think of two internal techniques and two external techniques and list them below:

**SDB Fear:**

**Internal Techniques:**

1. 

2. 

**External Techniques:**

1. 

2. 

Now, for an even more difficult question: Do you know where and how you learned these techniques?
**EXERCISE 9: Discover the Origins of Your Techniques**

Now consider the techniques you identified in Exercise 8. Place each technique into one of the following categories and write a sentence or two describing where or how you learned it. Review the following example:

*From Other People:*

**SDB:** Inactivity

**Technique** (Internal/External): Telling myself exercise would add to the stress my overweight body was putting on my heart.

**Where/How I Learned It:** A woman in my support group told me that is why she avoids exercise; it sounded like a good reason to me.

Now, your turn:

*Initial Conditions:*

**SDB:**

Technique (Internal/External):

**Where/How I Learned It:**

*From Other People:*

**SDB:**

Technique (Internal/External):

**Where/How I Learned It:**

*By Accident:*

**SDB:**

Technique (Internal/External):

**Where/How I Learned It:**

*By Creating New Techniques:*

**SDB:**

Technique (Internal/External):

**Where/How I Learned It:**
SDB Prices: The Bad -- and the Good

For every SDB, there are inevitable consequences, or prices. The prices you pay for overeating, for example, might include such physical prices as excess weight, lack of energy, and cardiovascular disease. The prices for alcohol and drug abuse could include hangovers and liver damage. But physical prices are only part of the problem. SDBs can lead to mental prices including fear, loneliness and loss of self-respect. I once saw a bumper sticker that read “Every minute you are angry, you lose 60 seconds of happiness!” SDBs cost us many prices—not the least of which is our happiness.

Furthermore, SDB prices do not stop with the person performing the SDB. Married couples, for example, provide a real influence on each other’s behavior. It’s not uncommon for one spouse to “freeze” part of his or her development while trying to adapt to the other’s SDB.

DAVID created so much fear his wife was going to leave him for another man, that he did everything in his power to make her less attractive to other men. He discouraged her from dressing nicely when she went out and asked her not to wear make-up because he liked her “natural look.” He also tried to make her gain weight.

He bought her boxes of chocolates for every special occasion—even “It’s Thursday night and ‘ER’ is on TV.” Every weekend he grilled steaks and always made sure she was served the largest and thickest one. He even started getting up earlier in the morning to cook bacon and eggs for her breakfast. If she ever declined a second helping of her fattening breakfast fare, left a bite of steak on a plate or didn’t immediately reach into the box for a few bonbons, he would act offended. “Don’t you like it?” he would ask.

For children raised in homes where one or both parents practice SDBs, their vulnerability due to their age, physical size and available options, makes it almost impossible to escape the prices of their parent’s SDBs.

In fact, some children suffer the prices of their mother’s SDBs—such as smoking, alcoholism or drug addiction or even poor eating habits—before they ever leave the womb. The more severe the SDBs, the more severe the prices will be for the children—and the longer lasting.

As bad as they are, however, one good thing can be said about SDB prices: They teach us something. A life of SDBs without prices would be like a football game without rules or penalties for bad conduct. In either case, the result would be chaos.

Nature itself has built prices into our life system as natural consequences for doing SDBs. Prices let us know that we’re doing something wrong, that there are attitudes or behaviors we need to change.

One of the most devastating traps you can place yourself in by doing SDBs is to be torn between the prices paid for keeping the behavior and the fear of letting go of the behavior. Many times in counseling, I have observed clients who are tearing themselves apart between prices and the fear of letting go. People who position themselves in this trap are getting stung from both directions. It’s like fighting a powerful boxer who keeps hitting you with one hand and then the other. You have no place to run.
Becoming aware of the prices of our SDBs can and should be a strong motivator to make a positive change. Here are various prices my clients have reported as resulting from their SDBs:

- A “giving up” type of tiredness from carrying around SDBs.
- Inability to be fully happy with themselves.
- Living with fear—losing a relationship, a job, the love of others, self-respect, etc.
- Weight gain and, with it, fatigue and lethargy.
- Lifestyle related health problems.
- Excessive expenditure of money on diet pills, herbal remedies, exercise equipment, aerobic videos, etc., that either don’t work or sit in the closet gathering dust.
- Hurting others and getting in the way of your growth.
- Feelings of envy for thin friends and family members.
- Dissatisfaction with life in general.
- Feelings of worthlessness and hopelessness.
- Being in a constant state of anxiety.
- Suicidal thoughts.
- Loss of longtime friends and/or the ability to make new friends.
- Bitterness.

**KEY POINT:** Prices are inevitable consequences of SDBs.

**EXERCISE 10: Name Your Prices**

List two SDBs. After each, make a list of the prices associated with it.

**SDB:**

Prices:

1. 
2. 
3. 
4. 
5. 

**SDB:**

Prices:

1. 
2. 
3. 
4. 
5.
Identifying Prices with a Price Wheel

Another way to identify the prices associated with an SDB is to use a price wheel similar to the one shown below. The illustration depicts clearly the range of prices associated with a single SDB—inactivity.
EXERCISE 11: Create Your Own Price Wheel

Now select one of the SDBs you identified in the previous exercise to examine a little deeper. Place the SDB in the center circle, then think of all the prices associated with that SDB—and the prices associated with those prices—and write them in the surrounding circles.
How We Make Prices Appear Smaller Than They Are

Unfortunately, most people negate the one positive aspect of SDB prices. Rather than heed what the prices are saying and make positive changes, they instead try to make the prices appear smaller than they really are. (It’s like telling yourself it’s okay to buy something you don’t need and can’t afford—because it’s on sale!) This part of the SDB system is called minimizing and people use it to take the “sting” out of prices in order to continue their SDBs.

There are number of ways people minimize the prices of their SDBs:

Joking

Perhaps you’ve heard an overweight man with a big, bulging stomach say something like: “I’m proud of this physique. It cost me at least $85,000 in beer and whiskey!” This is an example of joking to minimize the pain or prices of an SDB-damaged body.

One of my clients told me that when she walked down the aisles of department stores, the displays on both sides of the aisle hit her hips. She also had difficulty fitting into seats in movie theaters and airplanes. Instead of making attempts to lose some weight, however, she joked, “They sure don’t make aisles and seats as wide as they used to!”

Another client told me that his doctor said he was eating too many fattening snacks and that he needed to get more fruits and vegetables into his diet. “I already eat plenty of fruits and vegetables,” he replied. “My wife serves strawberry ice cream, banana splits and cherry cheesecake almost every day, and carrot cake is one of my all-time favorites.”

Deceiving

**MAY** told me her doctor attributed her weight gain to her recent development of some health problems. She decided to minimize the prices of her weight gain by insisting she hadn’t gained that much weight. “In fact, I’m still wearing the size I wore in college!” In response to my surprised look, no doubt, May confessed: “I found a designer whom makes a larger size 14 than others, and I buy all of my clothes from that designer.”

Through careful clothes shopping—and spending more money on her clothing than necessary—the woman was able to deceive herself into thinking that her weight gain wasn’t that bad.

A common way people deceive themselves is to think a diet soda entitles them to an extra dessert or that fat-free cookies can be eaten with abandon. If you find yourself thinking this way, take stock of what you are eating. “Diet” or “fat-free” foods can give you occasional assistance with your weight-loss plan; they should not be used as an excuse to continue or increase your SDB of overeating.

I realized one of the prices of my own SDBs—overeating—when I developed a painful condition called gout. By recognizing my SDBs, replacing them with healthy alternatives and, thereby, losing over 100 pounds, I was able to greatly reduce the occurrence of my gout attacks.
**My Story:** For many years I struggled with weight issues; my weight varied from 30 to 100+ pounds overweight at any given time. Medical advice made it clear that my excessive weight was a factor in my ongoing patterns of gout attacks.

I tried a variety of diet programs and did not achieve any long-term improvement. “Knowing” what to do to improve this arthritis-related condition, yet being unable to achieve the weight loss required to improve my medical condition was very frustrating for me.

My excessive weight also had a negative impact on my career. I lecture a lot on the subject of eliminating SDBs. One facet of this change model is that it works for all counterproductive behaviors—including weight issues.

During my lectures, an attendee would ultimately ask me how the model applied to weight issues. Due to my own weight issues, I could never give an adequate response. I then realized at those times I had lost credibility among a percentage of my audience...“The theory sounds great, but obviously it doesn’t work for him.”

My simple reaction...“Well, I can’t win them all.”

During lunch one day a friend said, “Bob, I don’t believe a word you say or write about SDBs, because you can’t apply the model to your own SDB issues.”

Since he and I often bantered a lot back and forth, I didn’t take this SDB to heart. After lunch I started thinking, “Why don’t you apply the eliminating SDB Model to your own weight issues?” It was a simple version of “why doesn’t the plumber fix his own leaky pipes?”

Positive change shows itself in us when we take the information from the SDB Model and apply the model to the specific behavior we want to eliminate from our lives. I had known how to change my weight issues for many years, and now I made a choice to apply the information. In the following months, I started to increase the awareness of my weight issues. When my triggers presented themselves, I was more conscious not to eat excessively.

I also started an exercise program. I continued to think about the generator of my weight issues—what was the conclusion that drove me to overeat? After some time, the conclusion emerged clearly: a disciplined life is a boring life. This, of course, translated into eat all you want, avoid adhering to an exercise routine, and avoid any attempt at disciplining your lifestyle. Because if I did apply discipline to the way I lived, my life would be boring!

Today, I laugh at how silly my SDB conclusion was. In fact, the opposite of my thinking was true—an undisciplined life is boring.

With my weight issues under control, I felt more energetic. I was able to present my professional self in better form. And I have experienced many more positive outcomes since I applied the SDB Model.

When I have a successful experience with the SDB Model, I try to frame that specific experience in some form that can be passed on to others.

This workbook is an outcome of successful weight loss by applying the SDB Model to my own weight issues. Life is more fun when you’re not doing SDBs!
**Convincing Themselves Their Prices are Beneficial**

Some people minimize their SDB prices by imagining these prices actually make them better, stronger people or that they will somehow be rewarded for all they endure.

**BARBARA**, a client who claimed to be very religious, practiced a number of SDBs, including depression, worry, negative self-concept and inferiority. In one of my workshops she admitted that she paid some pretty high prices for some of these behaviors. In a moment of honesty, Barbara was able to see she had minimized the prices of her SDBs by convincing herself they were helpful. What she did was this: In reality she had a quite miserable life due to her SDBs, but she perceived God would reward her for her suffering when she arrived in heaven.

**Taking Medications or Undergoing Surgery**

Although there are cases in which losing weight is a necessity and the benefits of losing weight more than compensate for the risks of weight-loss medications, for the majority of overweight people, the most effective and healthful weight-loss program does not include medications.

With weight loss, people often look for quick fixes (medications, liposuction or cellulite creams) rather than eliminating the SDBs that led to and perpetuate the weight problem. As a friend once said to me, “I know there is no quick and easy answer to my weight issue, but I want a quick and easy answer!”

**Using Alcohol, Food, Sex, Excessive Shopping, (You Name It)**

Similar to the way some people use medications to forget their physical or emotional pain, others use different substances or vices to ease their pain.

**NANCY** was a young, overweight client who used sex to minimize the price of her SDB of inferiority. Self-conscious about her heavy hips and thighs, Nancy would dress in attire that revealed her ample breasts and then went to bars to pick up men. Back at home, in the dark, under the covers, she would tell herself, “I must not look bad if this many men want to have sex with me!”

**ROBERT** was a 55-year-old client whose SDB of excessive drinking and smoking led to health problems that forced him to retire early. Because of his financial situation, he became increasingly anxious about money. And how did he ease his anxiety? By shopping! By the second month of his unwelcome retirement, his house was filled with a big screen TV, a new VCR and DVD player and a collection of new DVDs to watch. “Buying new gadgets helps me forget about my money problems for a while,” he told me.

**Focusing On/Maximizing Others’ Problems**

By focusing on other people’s problems, we can divert our attention from our own problems—including those that result from our own SDBs. By convincing ourselves that other people’s problems are much worse—they drink more than we do, have even less fulfilling jobs and marriages than we do, lose their tempers more often than we do, etc.—we convince ourselves that what we’re doing isn’t so bad after all.
Changing Everything ... (Jobs, Spouses, You Name It) But the Behavior

One of my overweight clients changed jobs every two years as a means to minimize prices. Each time he left a job, he claimed it was due to the fact that a new supervisor had “a thing against overweight people” and made things unduly difficult for him. But in actuality, the man had such a bad temper and acted so hostile that two years was about all anyone could put up with him.

Some people change spouses for the very same reason. Another client drank so much and put down his wife so often that she finally left him. As a result of his SDBs, he was hurt and lonely, but rather than learning from the hurt and loneliness, he quickly remarried as a means of coping with these feelings.

Other Minimizers

Eventually everyone finds their own ways to minimize the prices of their SDBs, usually without realizing they are doing it. There are some you probably wouldn’t even think about as minimizers. For instance, have you ever thought riding in a golf cart or an elevator can be a way to minimize SDB results? Let’s say that your SDBs lead you to being overweight and out of shape. Being overweight and out of shape makes it difficult to walk and carry your golf clubs—or just to walk up a flight of stairs. Riding a golf cart or an elevator makes getting around a golf course or to the next floor of a building a little easier and makes being overweight and out of shape more tolerable. Therefore golf carts and elevators can be minimizers.

The things we tell ourselves can be minimizers, too. Here, in their own words, are some other minimizers my clients have reported.

- I tell myself that my problems are so bad that eating is the only way I have to escape them.
- I figure a friend who doesn’t want to hear about all my latest diet or weight loss failure isn’t much of a friend anyway.
- I try to convince myself that I don’t want what I missed anyway.
- I skip breakfast every day. That way it’s okay to eat whatever I want for lunch.
- I watch a lot of TV.
- I say, “C’est la vie! That’s life!”
- I think well of myself for being a martyr for paying prices.
- I think: I’m overweight anyway, so how much can another few pounds hurt?

It’s important to remember that whatever minimizer we use, it actually does nothing to reduce the prices of our SDBs—only our perceptions of those prices. Just like a friend once said, “Minimizing prices is a lot like putting perfume on a pig. Let’s face it—the pig still stinks!”

Only when you allow prices their full impact, can you begin to make choices to eliminate your SDBs.

Dietary Deceit: No Joking Matter

A woman sits down at the counter of an ice cream shop and tells the young man serving up sundaes that she would like two large scoops of vanilla ice cream topped with chocolate sauce, nuts and whip cream. “Would you like a cherry on top, too?” the young man asks.
“Gee, no,” the woman replies. “I’m on a diet!”

Most of us laughed at that joke (or some variation of it) when we were kids. What you may not realize is that you may be practicing some other variation of this joke today in real life. I call it dietary deceit and it’s an SDB that keeps many people from reaching their dietary goals. You may be practicing dietary deceit if you:

- Feel entitled to a burger and fries for lunch because you skipped breakfast.
- Eat five fat-free fig bars instead of the two regular bars you would have normally eaten.
- Drink a diet soda with lunch and then enjoy a large dessert with the calories you “saved.”
- Buy a low-calorie cereal and then think nothing of adding several teaspoons of sugar.
- Buy skim milk and then stir in chocolate to make it more palatable.
- Praise yourself for the small plate you prepared for dinner but fail to acknowledge all the bites you took during meal preparation and clean-up.
- Eat a salad topped with bacon bits, cheese and ladles full of dressing and then praise yourself for having “just a salad.”

**EXERCISE 12: Identify Your Minimizers**

Do you minimize prices so that you can continue your SDBs? In the space provided, list four ways you minimize the consequences of a particular SDB.

SDB:

Minimizers:

1. 
2. 
3. 
4. 

**How We Shift Responsibility for Our Actions**

“I didn’t do it—she did.”

“I did not.”

“Yes, she did.”

“But he told me to.”

If you have children, such exchanges are probably all too familiar. But don’t kid yourself that such childish behavior is confined to youngsters. Though we may do it more quietly—if, in fact, we verbalize it at all—we adults do it every day. It’s called disowning and it provides yet another way to maintain our SDBs.
Most of us disown when minimizing ceases to work. Disowning is the systematic process of blaming some person, institution or factor outside of your control for your SDB. This forces you to conclude—wrongly—that because an external force determines the course of your situation, you cannot be held responsible for your own success or failure. In essence, disowning removes the power of choice from the individual.

I witnessed a prime example of disowning one day while having a slice of cheese pizza and a salad (with low-fat dressing, I might add) at a local pizza place. Two women were sitting at a table next to me sharing the giant size pizza with everything. I overheard one woman tell her friend between bites, “I just have to face it. I have a slow metabolism. I never eat much, but I just can’t seem to lose weight.”

What this woman really needed to face was that she was practicing an SDB and blaming her metabolism (disowning) for the result.

Just as this woman took bite after bite of a huge, packed pizza without guilt, by disowning, you can continue to do your SDBs and not feel bad about it. Disowning is the final technique on the SDB assembly line that guarantees your ability to keep your SDBs. After all, if you aren’t responsible for your SDBs or their results, how can you possibly eliminate them?

If you’ve ever had one or more of the following thoughts, you have fallen into the trap of disowning your behavior:

- How can I exercise? My job is so demanding that I have time for nothing else.
- All of the hormone changes that occurred during pregnancy make it impossible for me to lose this baby weight.
- Anyone would be driven to drink if they had my problems.
- My weight problem (depression, temper, you name it) is inherited. My father (mother, aunt, grandfather, etc.) was the same way.
- If God had wanted me to be thin, he wouldn’t have made me enjoy eating so much.
- I can’t help but eat chocolate every day. I’m addicted to it.
- Of course, I always eat everything on my plate—that’s what I was brought up to do.

Though laying blame on another person or entity is the most common, there are actually other ways in which people disown. One is to view things, nature and self as disjointed and separate. If you separate yourself from your body, mind, nerves, feelings, etc., you can place the responsibility for SDBs on those parts from which you have separated. For example, you have probably heard someone say—and said to yourself—something like, “My mind just went blank,” “My emotions were out of control,” “I lost contact with my feelings,” or “It must have been a case of temporary insanity.”

I saw one of the most extreme examples of this type of disowning while I was working as a school counselor. One day the assistant principal brought to me a ninth grade boy, who reportedly had grabbed a girl’s breast in the hall. According to the girl, the two had been walking down the hall from opposite directions. As they passed, the boy reached out and grabbed her breast. They both reacted with surprise.

When speaking to me, however, the boy said, “I didn’t really do that.” “What do you mean?” I asked. “The girl said you did.” “Well, I did and I didn’t,” he replied. “You see, when she walked by, my hand, on its own, reached up and grabbed her.”

Apparently the boy wanted to reach for the girl’s breast, but couldn’t assume the responsibility for this; so he divided his own internal house and gave the responsibility to his hand. Within himself, then, it honestly felt like he had not done it!
An Age-Old Problem with Modern Twists

Many of the methods people use to disown have been around since the dawn of time. In Genesis, when God asked Adam why he had eaten of the fruit, Adam answered, “The woman you put here with me—she gave me the fruit from the tree, and I ate it.” When God asked Eve what she had done, Eve said, “The serpent deceived me — I ate the apple.”

I’ve been in this behavior-change business long enough to observe, however, that as society changes, it affords people with new opportunities to disown. In the ‘60s, for example, it wasn’t uncommon for people to blame their behavior on the lunar phases or the alignment of the planets. In today’s liberal society, we absolve criminals of—or even pity them for—their horrendous acts, because of the past hardships they have faced. Often people use the increased consciousness of food, nutrition and even hormones to excuse their behavior. After all, it’s a lot easier in the short run to blame your rudeness, depression, anger or lack of concentration on sugar, caffeine, food additives, PMS or mood swings than to accept responsibility for your behavior and take steps to change it—or to chalk up your consumption of a box of Twinkies to an unavoidable consequence of PMS, rather than stopping at one or two Twinkies or having a bunch of grapes instead.

The Good and Bad of Responsibility

The truth, of course, is that no matter who or what we blame for our behaviors, we are the ones who are really responsible. The realization that SDBs are a result of our own choices holds both good and bad news.

First, the Bad

The bad news is that we are responsible for behaviors that are harmful to others and ourselves, and for some people that’s a pretty hard pill to swallow. It is especially true if the SDBs we have been doing for a long time have been severe. We want others—doctors, people, God—and circumstances to make changes in our lives. For many people, behavioral responsibility is a terrifying idea.

A case in point: My oldest daughter learned an important lesson in taking responsibility for her actions when she was seven. We had just finished lunch at a restaurant and she asked for a slice of banana cream pie for dessert. Knowing she was lactose intolerant, I told her no, and carefully explained to her that having banana cream pie might make her sick. I suggested she order apple or cherry instead. She became very persistent and continued to ask for banana cream pie.

Finally I said, “Okay, you can order banana cream pie and get sick, or you can order apple or cherry and not get sick. The choice is yours.”

She looked at me with surprise and said, “You’re trying to make me sick!” I explained to her I wasn’t trying to make her sick, but was teaching her to be responsible for her own choices.

She responded, “I’ll have cherry pie. It would be dumb to eat banana cream pie and get sick.”

Ironically, I deal with so many clients today whose choices of foods—and the amounts of those foods they consume—lead not only to unattractive pounds but to serious obesity related diseases, such as hypertension and heart disease.

Unlike my young daughter, these people haven’t acknowledged (in their subconscious, anyway) that it would be dumb to eat something that would make them sick.
Now, the Good

The good news is that since we choose to do our SDBs, we can also choose not to do them. When we make the choice not to disown, we claim responsibility for our own behavior. By claiming our behavior, we are open to change. We are not slaves to our past experiences. The more responsibility you claim for your behavior the better choices you can make. Better choices lead to better psychological health and—as in the case of my daughter’s decision to skip the banana cream pie—to better physical health as well.

More good news about responsibility is that it isn’t the same as blame. It’s important to understand the difference.

Responsibility versus Blame

Because you are the one who practices your SDBs, you are responsible for them. But even so, you are not to blame for practicing your SDBs. Why? Because you are trying to cope with your SDBs and you are not fully aware that these behaviors are self-defeating or that in many cases they have a detrimental effect on others.

I have spent many hours with people whose parents (and their parents’ SDBs) had a profound influence on their adoption of various SDBs. Yet in all of my counseling hours, I know of no instances where parents said to their children, “Now that we have you, we are going to make all the conscious choices we can to screw you up!”

All of our parents had SDBs while we were growing up (after all, everyone does), and they did the best job they could carrying along with their SDBs. And when we were children, how could we blame ourselves for adopting negative behaviors to help us cope with our environments—particularly during our early stages of development?

Our society—with its hatred, prejudice and violence—plays a role in our initial development of SDBs as well. When you develop a negative self-concept due to rejection and ridicule you experienced in your family, that environment is to blame for initiating your negative self-concept. (But remember, today, you are responsible for perpetuating it.)

Here are still more reasons not to blame yourself for using SDBs:

- Because of the speed of the human mind, SDBs can be put into operation in a fraction of a second. This speed makes you feel helpless—you feel you can’t control your behaviors and you feel like the behavior “just happened.”

- The fact that you perpetuate your SDBs in the dark, unaware areas of your mind contributes to the feeling of non-responsibility. Remember your choice to do SDBs is not a conscious one. But the choice to eliminate them will be.

- When you are unaware of the alternatives to your SDBs, you believe the SDB was the only behavioral choice in a given situation. It’s difficult to perceive yourself as responsible when you see or feel no other alternative.

- Blame can lead to guilt, which itself can be counterproductive.

The point I’d like to drive home as we end this section on disowning is that accepting responsibility for your SDBs should not be a negative, crushing experience. Accepting responsibility for your actions today—no matter where or with whom they originated in our history—is a powerful tool in eliminating our SDBs and making positive, healthy choices for the rest of our lives.

**KEY POINT:** You are responsible for the perpetuation of your SDBs, but not to blame for them.
EXERCISE 13: Use Language to Accept Responsibility

The everyday language in our culture is full of disowning statements. Such simple statements as “You make me so mad,” “People reject me,” or even “I am depressed,” divert the responsibility for your attitudes and actions.

In my change programs, when my clients tell me statements like this, I ask them to rephrase them into “ownership” language. Let’s see how these same statements look when we stop disowning and accept responsibility for our actions. (Note: just reconstructing a sentence to incorporate the word “do” can show ownership.)

- “My weight makes it impossible for me to exercise” might become “I choose not to exercise because of my weight” or “I do inactivity.”

- “People are unsympathetic to my dieting difficulties” might become “I behave in ways that make people not feel sympathy for me” or “I do things to make people dislike me.”

- “I am depressed” could become “I think negative thoughts that cause me to feel depressed” or “I do depression.”

Simply by reconstructing language into ownership form is helpful for people in claiming the responsibility for behaviors that are rightfully theirs.

Now, I’d like you to try it. Think of three statements in which you disown your actions. (If you have trouble coming up with some, refer to the examples above.)

1.

2.

3.

Now, reconstruct the sentences so that you take responsibility for the action. Remember, using the word “do” can sometimes be effective at demonstrating ownership.)

1.

2.

3.
Replacing Your SDBs with Life-Giving Behaviors

By now, I hope you have made the decision to work on eliminating your SDBs. But simply eliminating them is not enough because doing so can leave you with a void. The key is to replace SDBs with life-giving behaviors. Like SDBs, life-giving behaviors are based on interplay between conclusions and fears. In the case of life-giving behaviors, however, the triggering conclusion is valid (as opposed to faulty) and the corresponding fear is real (as opposed to mythical).

In this final section, we’ll look at ways to use these valid conclusions and real fears to help guide our thoughts and actions. We’ll also look at the benefits of life-giving behaviors and how we can incorporate these healthier alternatives into our lives.

Reality-Based Conclusions: The Foundation for Life-Giving Behavior

Because reality-based conclusions serve as the foundation for life-giving behavior, it is essential that you challenge and reformulate the faulty conclusions you bring to each new moment of life. It’s impossible or, at best, extremely difficult to practice a life-giving behavior while clinging to and nurturing a self-defeating conclusion.

To challenge an invalid conclusion, you must analyze all the information on which the conclusion is based. At first, this requires some conscious effort. But soon you find it becomes second nature as you discover the “facts” on which you base the majority of your invalid behavior conclusions are, in truth, selectively supported and self-fulfilling prophecies that give you permission to continue practicing your SDB. Consider the following relatively common invalid conclusion: IF I lie on the couch, munching on candy bars and chips and swapping misery stories with a friend, THEN I’ll reduce the level of tension I’m experiencing today. (Note the IF/THEN construction of the sentence as we discussed earlier.)

Does this conclusion sound valid? Of course not, if you really think about it. But how many times have you resorted to such a practice? If you realistically analyze the consequences of the behavior that the conclusion advocates, you’ll soon see how inaccurate the conclusion is. If you actually practice this behavior, it’s likely that, in truth, you’ll experience some of the following prices:

- Lethargy from overeating.
- Worry that you will gain weight.
- Guilt because you were lying around when you should have been doing chores, exercising or doing something else constructive.
- Fear that you aren’t up to the demands of day-to-day life.

**EXERCISE 14: Restate Your SDB Conclusion**

Refer back to the invalid conclusions you identified in Exercise 6. Select one and rewrite it in the space below.

FAULTY CONCLUSION IF I:

THEN:

Now analyze this conclusion in terms of all the information that is available to you. After completing your analysis, restate this conclusion as a valid description of what will happen if you continue to practice your SDBs.

REALITY-BASED CONCLUSION IF I:

THEN:
Realistic Fears: They Can Keep You on the Right Road

Realistically analyzing the invalid conclusions on which you base your SDBs can lead to fear. But unlike the mythical fear that keeps you doing your SDBs, the fear that results from such analysis is real fear, and it should give you an incentive to eliminate your SDBs. Let me illustrate.

SDB: Worry

Faulty Conclusion: IF I worry, THEN I will be prepared in the event that I gain even more weight or that my weight problem will lead to other health problems.

Ask Yourself: Will worrying now really help in the event that you become sick and bigger? Probably not. If you realistically analyze the consequences of worry, you may discover that a more likely outcome would be anxiety, missed happiness, always being on guard, expecting the worst and living with stress that could be a factor in your weight problem to begin with!

SDB: Perfectionism

Faulty Conclusion: IF I do everything perfectly, THEN they will think I’m competent.

Ask Yourself: Will people really consider me incompetent if I don’t do everything perfectly? Is it even possible to do everything perfectly? The answer to both questions, if you are honest with yourself, is no. If you analyze the real outcome of trying to do everything perfectly, the result is likely to be constant frustration with yourself and others, low self-esteem, procrastination, anger, and missed happiness.

As you can see from the examples above, the real outcomes (prices) are to be feared. Let your fear of these outcomes work for you. By eliminating SDBs—and choosing life-giving behaviors in their places—you can avoid these negative outcomes.

Life-Giving Alternatives

In virtually all situations, there are two general alternatives to practicing an SDB. You must either substitute another SDB for your old SDB or make a healthy choice that will improve your life. Your reality-based conclusion will tell you that the first of the alternatives is both illogical and counterproductive. Your only alternative, then, is to put a life-giving behavior into practice. Following are some of the most obvious life-giving behaviors to combat SDBs:

• Volunteering to lead or take part in a support group.
• Joining—and regularly attending—a health club or a weight reduction program.
• Quitting smoking.
• Cutting back on beer—and beer nuts!
• Practicing relaxation techniques.
• Working to educate your family and friends—calmly and in a non-complaining way—about how they can help you and support you in your diet.
• Making small attainable weight loss goals and then following through.
How to Implement Life-Giving Behaviors

Once you’ve identified the potential life-giving behaviors available to you, your next step is to identify the specific methods you will use to put a particular behavior into practice. The life-giving behavior, “I am going to manage my weight,” for example, is too general to be implemented as a specific replacement for an old SDB. For this reason, you need to describe specifically what you will do the next time a trigger pattern steers you toward a cycle of self-defeat.

Here are some specific methods you might employ for the following SDBs:

**Behavior:** Poor eating
**Action:** Next time I’m tempted to eat a food filled with empty calories, I will have a glass of skim milk and an apple instead.

**Behavior:** Anger
**Action:** When I receive negative news or information, I’m going to evaluate it carefully before forming a conclusion about what it really means.

**Behavior:** Depression
**Action:** When I start feeling depressed, I’m going to take a walk or call an upbeat friend rather than sitting down with a bag of cheese puffs.

**Behavior:** Complaining or Revealing Too Much
**Action:** When someone compliments me on my weight loss, I will thank them politely rather than go on about how hard it has been to lose the weight and how many more pounds I have yet to lose.

**Behavior:** Drinking
**Action:** When I’m tempted to take a drink to deal with my problems, or physical or emotional pain, I will read a book or write about my feelings in a journal.

**Behavior:** Inferiority
**Action:** When I start feeling down on myself, I am going to make a list of five things I like about myself.

**EXERCISE 15: Identify SDB Alternatives**

Once again, select an SDB you identified in an earlier exercise. In the spaces below, list up to four life-giving alternatives for your SDB. Make sure your alternatives are specific enough so that they can be applied effectively, and do not suggest other SDBs.

My SDB is:

My life-giving alternatives to my SDB are:

1. 
2. 
3. 
4.
Although I have listed them on the benefits wheel, note that not all consequences suggested here are necessarily positive, but that’s the way life works—even when we are doing our very best to eliminate our SDBs. But if you compare the ultimate results of a life-giving behavior with those of a single SDB, you will agree the elimination of an SDB will improve many aspects of your life.

The Benefits of Life-Giving Behaviors

Once you’ve replaced your SDB with an appropriate life-giving behavior, you can expect the new behavior to yield certain benefits. These benefits parallel the prices associated with SDBs, because both prices and benefits are the logical consequences of specific behaviors. For this reason, the benefits that stem from a life-giving behavior can be depicted on a benefits wheel, similar to the price wheel you completed earlier. A typical benefits wheel might look like this:
EXERCISE 16: List the Benefits of Your Life-Giving Behavior

Now, try to design your own benefits wheel. In the center of the blank wheel provided below, write down one of the behaviors you listed in the previous exercise. Then, using all the information available to you, list the potential results of practicing this behavior in lieu of your SDB.
When You Make Mistakes

Now that you have begun to identify life-giving alternatives to your SDBs, use them in situations—such as a new relationship, a confrontation with your family or a day of worse-than-usual hassles—when you historically have fallen back on negative behavior patterns. Over time, life-giving behaviors will become a natural response and you will have created a successful, positive change. You will be on the life-giving road!

Having said that, however, replacing the SDB road for the life-giving road can’t always guarantee a smooth ride. And there will be times you’ll make brief detours and have to find your way back to the life-giving road. In other words, you will make mistakes.

Here are several examples of mistakes shared by my clients. I am including these in hopes that you will avoid these same mistakes—or if you do make them, you will see that you are not alone and that a mistake now and then is no reason to abandon your quest for successful positive change.

Doing It Perfectly

AUDREY was one of my clients who considered herself as having a severe weight problem (even though she was no more than ten pounds over her ideal weight). She had used the SDB perfectionism ever since she was a young child trying to earn the respect of her critical father. So it came as no surprise that her weight loss plan was planned perfectly. Each day, she allotted herself 1,250 calories—no more, no less. Fifty percent of those calories could come from fruits and green vegetables, 20 percent from dairy products, 20 percent from starches and grains, and the final 10 percent from meats (and that’s a pretty small piece of meat). She was proud of her ability to stick to these rigid food allocations—on most days.

Audrey came to see me because of occasional bouts of binge eating that were defeating her weight loss efforts and leaving her frustrated and ashamed. Since she typically measured and weighed every morsel of food that went into her mouth, she knew she wasn’t eating too much on most days. But once a week or so, she would break down and eat everything in the house—and follow that up with a drive through a fast food restaurant and a trip to the ice cream parlor.

By understanding that her perfect approach to and unrealistic expectations of dieting were behind her binges, Audrey was able to trade her rigid plan for one that was more healthy and natural. She also found that her binges stopped and her weight started to drop, though more slowly than she might have liked. In the long process of letting go of her SDB of perfectionism, she came to my office one day discouraged.

“I’ve improved a lot,” she said. “In fact, I didn’t weigh a single serving of food all last week and I haven’t had a major binge in a month, but I did break down and stop for an ice cream cone last night. I have been feeling bad about it all day. I feel like giving up my diet all together.”

So what was Audrey’s problem? Nothing, besides the fact that she was trying to adhere to her new diet perfectly. She saw her lone ice cream cone as a sign of failure—as a reason to give up. I, on the other hand, say it as a sign of success. She was able to stop at just one. Over the following year, as she and I worked together to understand her need for perfection and other SDBs, Audrey got to the point where she realized dieting—like many other activities in life—was not an all or nothing proposition. After that, she was able to keep her weight where she wanted it, while enjoying the occasional ice cream cone or trip through the fast food drive through.

The business of trying to change perfectly or rigidly is a common mistake people make. Stay alert—one of us are perfect!
Expecting Too Much Too Soon

SARAH, 49, had always heard about the benefits of exercise but had no interest in giving exercise a try. (“My idea of working up a sweat, was preparing a big meal in a hot kitchen,” she told me.) That is, until years of nibbling during food preparation caused her to gain 40 pounds. Since she loved to prepare and eat food and knew it would be hard to cut back there, she decided she try exercise as a route to weight loss.

She joined a gym, where she began a strength-training program, and started walking three times a week. She expected to see results—fast. Three weeks into her exercise program, she came to see me in tears. She had lost only one pound and she was so tired of exercising that she was threatening to go home and lie down until time to prepare dinner.

During our discussion, I learned that Sarah was exercising more than she ever had, but she was not making any changes in her calorie consumption. Furthermore, she had only been exercising for three weeks—hardly enough time to notice much difference, particularly if she was not using exercise in conjunction with dietary modifications. I was able to convince her that the benefits of exercise were not always immediate or dramatic and that exercise worked best in conjunction with a proper diet. She agreed to give her exercise a two month trial; she also agreed to prepare low-fat dinners three day a week and minimize her sampling during cooking.

When those two months were up, Sarah was happy with her new diet (her family hardly noticed a difference in their meals) and she had lost nine more pounds. She was well on her way to her goal.

Fearing Success or Fear of Revealing Other SDBs

AL had been overweight for as long as he could remember. As a toddler, his parents praised him for being a good eater, and other family members loved to pinch his chubby thighs. As he approached adolescence, however, his chubbiness became a source of embarrassment and teasing from his peers. He compounded the problem by isolating himself and eating to take his mind off the rejection. It wasn’t until he was in his early 30s and diagnosed with a painful musculoskeletal condition that he decided to do something about his weight problem. AL’s doctor told him that losing weight would make it easier for him to exercise, which would boost his energy level and decrease his pain. And, in turn, exercising would help keep his weight down.

Al came to me when he had trouble sticking with a diet and exercise program. Together we uncovered the faulty conclusions behind his overeating. Once he realized why he overate, he decided to consult a dietitian for a simple meal plan that he could follow and resolved to work out at the gym and walk twice a week.
When I saw Al the following summer, he was looking trim and fit. He told me that he had attended his 15-year high school class reunion and that one of his classmates—"an attractive girl who wouldn't have given me the time of day in high school"—had even asked him to be her date at a party.

When I asked how their date went, he said he didn’t go.

“Why not?” I asked.

“Because I was afraid she liked me only for my new trim physique. She never paid attention to me when I was awkward. Besides, she asked me to a party and I’m not a party person."

Reverting to an old SDB (in Al’s case, isolation and poor self-image) is not uncommon when you face a difficult situation. Just acknowledge what you have done, try to understand why and try you’re best not to do it again. It’s not the end of the world.

Replacing One SDB with Another

PHILIP: Shortly after his 50th birthday, the age at which his father had suffered his first heart attack, Philip began to consider his own mortality and became concerned about his risk of developing heart disease as well. Knowing that excess weight likely contributed to his father’s heart problem, Philip decided to do something about his own weight problem.

Philip and I spent several sessions together and at each one, I noticed a little difference in his appearance—he was losing weight. He told me how he had completely given up snacking from the bowls of chocolate candies and nuts that his wife kept around the house. He said he had even requested she put the bowls away.

Pleased, but a little perplexed, I asked Philip why his wife left bowls of snacks around the house to begin with.

“She put them there for me to eat when I was tempted to smoke—and it worked,” he answered. Philip told me that he had cut back on cigarettes (almost to the point of quitting completely) a few years earlier, but he hadn’t told me how. Now, I knew. Then he confessed: “Without the candy around, I am tempted to smoke more now. I’m back up to a pack a day.”

What Philip was doing was replacing one SDB with another. Although the tactic had worked to help him stop smoking before, it certainly didn’t work toward his ultimate goal of living a healthier life and decreasing his heart disease risk.

We discussed those ultimate goals and I suggested he replace both his smoking and snacking SDBs with brisk walks and rides on an exercise bike. Philip still has some rough days, but he is continuing to lose weight. At a recent visit, he reported that he had been four weeks smoke free.
SUMMARY

Dropping SDBs and replacing them with life-giving behaviors doesn’t ensure constant or even continuous success. What it does is provide us with the opportunity to respond to life as well as our abilities, talents and experience allow us in our given situation.

Life-giving behaviors contribute to personal development, allow us to benefit from our experiences and help us to operate consistently with how we are designed as human beings. They open the door to harmoniously fitting into the larger scheme of things in the universe. Life-giving behaviors, as the name suggests, create life in us and in those with whom we come into contact.

In the behavioral change process, you need to acknowledge setbacks and breakthroughs. Setbacks are part of the learning curve. Change is a gradual process, so set realistic expectations. Give yourself credit for each successful step forward no matter how small it may seem.

The SDB road, in reality, is a toll road; traveling that road demands constant payment of prices, and it doesn’t even take you to the destination you desire. The life-giving road, on the other hand, provides you with the tools and experiences to manage your life and enhances your quality of life. It takes you where you want to go.

Which will you take—the SDB road or the life-giving road? The choice is yours. I wish you the very best.