Becoming Whole

A Healing Companion to Ease Emotional Pain and Find Self-Love

Bruce Alan Kehr, M.D.
Praise for *Becoming Whole*

“*Becoming Whole* is best described as a ‘pocket therapist.’ By sharing optimistic and compelling patient stories, personal reflections, and practical tools, Dr. Kehr literally becomes our “Companion Advisor” and provides a highly readable framework for understanding and solving many of the common problems we face throughout our lives. Weaving together self-help, psychotherapy, and medication, this book is a must-read for anyone striving to become whole and to create a more fulfilling life.”

—**Harry L. Leider, M.D., MBA, chief medical officer and group vice president of Walgreens**

“*Becoming Whole* feels so personal, as if I’m sitting and talking with the doctor in his office. I love the vivid, real cases in which we can find ourselves, the step-by-step tactics to do something, and the songs to go with each lesson. It’s an emotional, visual, and auditory feast that adds a tactile hug to complete one’s transformation to wholeness. My brain is on fire with new energy about what it means to be human.”

—**Scott Halford,** Emmy Award-winning writer and producer, Wall Street Journal best-selling author of *Activate Your Brain*
“Becoming Whole takes a new track in providing insights into the therapeutic process. Instead of it being a psychoanalytic mystery, the process of what the therapist is trying to help the patient accomplish is spelled out explicitly. Cogent case examples are given that further clarify the therapeutic interactions. These are in the setting of a holistic approach that also includes medicines, vitamins, and other adjuncts. Together, these provide an excellent road map toward wellness.”

—Robert M. Post, M.D., professor of psychiatry at George Washington School of Medicine, head of the Bipolar Collaborative Network, and former chief of the Biological Psychiatry Branch of the National Institutes of Mental Health (NIMH)

“My family is one of the millions who has a loved one with a mental disorder. Becoming Whole gave us game-changing, life-saving strategies that helped all of us. Dr. Kehr, who is as empathetic as he is brilliant, delivers on his promise to be a healing companion. The book is destined to become a classic.”

—Mary LoVerde, Hall of Fame speaker and author of I Used to Have a Handle on Life but It Broke

“Becoming Whole is an insightful, accessible, powerful, and revealing self-help guide for therapy in which psychiatrist Bruce Alan Kehr, M.D., artfully uses patient stories to illuminate the challenges we face in untangling our hearts. Because these challenges shape the way we experience ourselves and our lives, Becoming Whole is not only a healing companion but a valuable life companion as well.”

—Steve Sidel, founder and CEO of Mindoula Health

“A sensitively written guidebook full of engaging case histories and thoughtful action steps that empower readers to find their own
solutions to difficult matters of the heart and mind. This book is invaluable for anyone seeking solace from pain.”

—Leslie D. Michelson, author of The Patient’s Playbook

“Dr. Kehr’s book should be lauded for providing strategies that alleviate biological and psychological factors underlying human suffering and should be required reading for any young adult as a road map on the real life ahead of them, as well as for anyone wishing to expand their situational awareness.”

—Francis Mas, M.D., clinical professor of psychiatry at the NYU School of Medicine

“This powerful book will take you on a guided tour to the deep inside of your heart. Bruce Alan Kehr is an experienced and empathic companion on this journey. He encourages those with a tangled heart to answer the key questions of their emotional lives and shows an effective way to becoming whole again. I will share this book with many of my patients and just can’t wait for its international distribution!”

—Marcel G. Sieberer, professor of psychiatry and psychotherapy at Hannover Medical School

“A renowned thought leader in the field of psychiatry, Dr. Bruce Kehr succeeds in demystifying the most complex challenges we face as humans, offering empathy and understanding as well as thoughtful and practical solutions for building the relationships and lives we deserve. This book belongs on every bed stand to serve as a ready resource as well as a helpful reminder of the hope and possibilities of a future when people care for and take care of the people around them.”

—Denise Brosseau, author of Ready to Be a Thought Leader?
“If you are suffering from the aftereffects of having been bullied, manipulated, controlled, neglected, or abused, then this book is for you. *Becoming Whole* offers innovative strategies to bring the emotional peace you long for. I highly recommend this book.”

—**Sam Horn**, author of six award-winning books translated into 17 languages, including *Take the Bully by the Horns* and *Tongue Fu!*, top-rated speaker at the INC 500/5000
Dear reader, please feel free to share this excerpt with anyone you think would benefit from it.

BECOMING WHOLE

A HEALING COMPANION TO EASE EMOTIONAL PAIN AND FIND SELF-LOVE

Bruce Alan Kehr, M.D.
To Barbara, Melanie, and Lisa, whose unwavering love and unyielding belief in me continuously nourish my compassion and empathy and provide me the strength to heal . . . and to the many patients who have honored me with their confidence and trust and allowed me the privilege of helping them through their emotionally turbulent times.
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Begin the Journey: Ease Emotional Pain and Find Self-Love
Opening the door to the waiting room and looking out, I notice that there is someone new sitting on the couch. It’s you. You look lost in thought and are clearly in distress. I greet you with a warm smile, and as you look up at me, your eyes reveal both nervousness and the faint shadow of hopeful expectation. A familiar feeling of anticipation arises within me as I escort you back to my office: This moment marks the beginning of a new chapter in your life—one defined by healing—and I feel honored to be a part of your journey. Together, we will begin to untangle your heart and ease the emotional pain that has brought you here in the first place. Eager to hear your story, I ask you the first of many questions: “Tell me, what brings you in today? What has been troubling you?”

Your answers reveal a longing to unburden and a desire to be understood. They also subtly hint at your struggle to understand—truly understand—yourself.

“Tell me,” I ask, “How do you feel?”

You came in to feel better, to figure things out. Your life may not make any sense to you at all. Perhaps it never has, or, once upon a
time, maybe it did, but now you feel lost—confused. I absorb your emotional pain moment to moment as your wounds are exposed one by one: new wounds that need mending and old ones painfully reopened with the hope that they will finally heal.

As your story slowly unfolds, you allow me to join you in a place deep inside your heart, to listen and learn and help it recover from these wounds. But the human heart is complicated—primitive, filled with dark corners, but with areas of illumination too. It is both settled and restless, satisfied and yearning, joyful and grief-stricken, lustful and inhibited, elated and tortured, fractured and whole. At times, our hearts are at war with others. At times we are at war within ourselves.

Our hearts and minds tend to repeat patterns of feeling and behaving that can sabotage deep emotional intimacy, unintentionally wounding others or ourselves. The triggers may be events in the present that evoke the past through the unconscious,¹ a vast swamp beyond our awareness filled with memories, feelings, and our darkest thoughts, at first dimly perceived. As they become more visible, they may be frightening; we try to avoid them at all cost by establishing an elaborate defensive system that represses² the demons inside.

Ridding ourselves of the demons in our hearts can be a terrifying process. We keep them under wraps for good reason: To reawaken them may overwhelm our sense of self and threaten to crush it. Yet they tangle up our lives and sabotage our happiness. It may be painful, difficult, and emotionally challenging, but working through repressed thoughts and memories is the first step toward healing. However, you don’t have to face this challenge alone: I will be at your side for as long as it takes. I will be your companion.

Those who enter my office and sit on the couch must muster up their courage to open up in a way that they may never have before. A wise psychiatrist once said, “Never underestimate the power of listening. You may be the first person in their entire life who ever
truly listened.” For me, this work is both a calling and a privilege. I’m glad you’re here. Let’s get to work.

What to Expect from this Book

PATIENT STORIES

The contents of this book are devoted to helping you untangle your own heart or the heart of a loved one. Each of the twelve sessions that follow will explore a commonly experienced emotional issue in depth, using patient stories to clarify and contextualize key themes and outcomes. I will discuss these issues as if you were actually in treatment with me and will provide specific guidance to help you feel better, function more effectively, and end the patterns that sabotage your happiness. By walking you through the ways a psychiatrist or psychotherapist can help resolve these issues, I hope to empower you to seek out your own resolutions, whether that means using this book as a self-help tool for your own personal reflection, seeking therapy for the first time, changing your treatment plan, or helping your loved ones find the support they need.

I’ll also invite you into my office and share with you the secret inner lives of a number of my patients. Although these stories are fictionalized, they represent how I’ve helped real people become whole. By reading them, you will learn how talk therapy uncovers a patient’s unconscious feelings and memories; how a psychotherapist empathizes, interprets, and clarifies; and how this process untangles the patients’ hearts and ends the patterns that sabotage their happiness. Throughout each story, I will share with you some of the healing comments I made to the patient at key inflection points in their therapy, as well as what I was feeling at the time. At other times, I will share with you how they expressed deeply held,
intense feelings toward me (called transference⁴) and how we were able to use those experiences to further their understanding of other important relationships in their past and present.

What you’ll come to appreciate is a portrait of how the patient and I interact and how feelings and memories from my own life emerge to enable me to join the patient where they are. I will share my feelings with you at these crucial moments, as they will deepen your understanding of what goes on inside the mind and heart of a therapist to facilitate the healing process. Each exchange will illuminate a brief interlude in the telling of the tale, where I offer support, clarity, and hopefulness as the therapy unfolds. I want these tales from real therapy sessions to demystify psychiatry, talk therapy, and the healing process itself and to give you an idea of whether this is something you may need in your own life.

A cautionary note: Some of the patients’ stories, particularly those that describe a history of childhood sexual abuse, may be particularly disturbing. In reading them, you may feel that they have nothing in common with your own childhood. You may decide to stop reading partway through the story, and if you feel that is best for your emotional well-being, I respect your decision. At the same time, I promise you that each story, no matter how dire or desperate, will end on a hopeful note and will have something to teach.

THE BIOPSYCHOSOCIAL MODEL

At times, self-help is not enough to alleviate emotional suffering. This is where psychotherapy⁵ and psychopharmacology⁶ can be enormously helpful. Most of the stories in this book relate to patients in talk therapy who are also receiving medication. Although it is not the focus here, I will discuss how to select a psychotherapist or psychiatrist that best meets your needs, the roles of different
prescription medications and supplements, and how to work with your doctor to uncover underlying psychological and medical conditions that affect how you think, feel, and function.

The **biopsychosocial model** is a way of understanding how emotional suffering and illness are affected by multiple factors ranging from societal to molecular; **epigenetics** refers to how external factors, including your lifestyle choices, can switch genes on and off inside your brain cells, for better or for worse. Under the biopsychosocial model and using epigenetic principles, a psychiatrist evaluates and treats the **whole person**, not just a series of symptoms. The fundamental principles of this model involve the interplay of biology, early life experiences, and recent and current relationships, which are woven together into a framework of understanding that allows you and your doctor to make sense of what is going on inside and around you, to begin to untangle your life.

Doctors who practice this model look at every relevant domain in your life—including genetic, biological, psychological, family, social, environmental, existential, and spiritual—and seek to understand how these domains work together or against each other to affect your well-being. They thoroughly assess the history of your condition, as well as your family history, and they may suggest genetic testing or other laboratory tests to gain more insight and provide an even deeper and well-informed evaluation.

You should choose a psychiatrist who practices under the biopsychosocial model—one who will leave no stone unturned in getting to the bottom of all of the factors that interfere with your full recovery. Your doctor will partner with you to develop a comprehensive treatment plan to achieve a full remission of your symptoms—to enable you to **become whole**.
MY QUESTIONS, YOUR ANSWERS

I am a physician, attended medical school, and trained at a psychiatric residency program. I have been practicing psychiatry for nearly forty years. My patients have taught me countless lessons every single day about how to heal a human heart that may feel lost, hopelessly conflicted, or in seemingly interminable emotional pain.

You and I will partner together to leverage these lessons as I teach you to untangle your heart. Much of the teaching will be in the form of questions that I pose to you. You will reflect on your life more deeply and will want to develop as comprehensive an understanding of yourself as possible. Then, I will provide clear steps that will help you end the behavioral patterns that sabotage your happiness and that will lead you down a path to a richer life experience. You’ll find these steps at the end of the sessions, in a section called “Begin to Heal.”

As you answer these questions about yourself and those you love—and some of the questions will require a good deal of hard thinking—you will broaden and deepen your understanding of why your life is tangled up. I strongly encourage you to write out your answers to the questions as you go along in a notebook or journal that I’ll refer to throughout as your “workbook.” Your workbook will become a valuable asset that you can refer back to from time to time, particularly during periods of emotional distress, to help further your understanding. Writing out your answers will help you think about your situation in a new way, and you may discover a path forward that you hadn’t thought of before. If you are not yet in therapy and decide to begin, these answers can also serve as a starting point to help the therapist get to know you and give you an early view of what to expect.
THE ROLE OF MUSIC

I love music, especially for the therapeutic, healing potential it holds. It is a universal means of expressing the human condition. I use it at times in my practice, particularly as a way to reach patients who initially find it difficult to express their emotions. As we begin therapy, they may find it easier to relate to feelings that are poignantly portrayed in the lyrics of certain songs than to relate to me. In addition, music may help a patient access certain emotions and memories that were previously buried in their unconscious mind. I’ve tried to recreate that experience for you in this book.

Most sessions will feature a popular song that portrays aspects of the human condition illustrated by the patient’s story (for links to the songs and other information, visit DrBruceKehr.com/music). The lyrics may relate to your own story as well and may elicit thoughts, feelings, and memories from inside of you. The songs will teach you more about the human heart and will further your capacity to think about yourself and your life.

And it is not just the lyrics themselves. If you also listen to the timbre of the singer’s voice, it can move you to feel powerful emotions. You may feel less alone by listening to songs that connect with how you are feeling and what you are struggling with in your own life. You may also be inspired to reach out to a loved one who may have shut you out or who has difficulty identifying and vocalizing their own feelings.

How to Use this Book

Each session contained in this book will bring new insights into patterns of behavior and emotional vulnerabilities that tangle you up. That said, the way you choose to read this book is entirely dependent on what you’re hoping to get out of it.

If you are looking for an in-depth overview of what treatment
looks like and can achieve, you may choose to read the entire book. It contains many valuable lessons that will bring you a richer understanding of your own life and the lives of those you love. Reading the stories of people overcoming crises will leave you feeling hopeful, inspired, and less alone.

If you are seeking relief from a specific problem, you can use this book in a highly targeted way. Simply consult the table of contents to zero in on the issues that pertain to your current circumstances—the ones that create that feeling of inner turmoil—and before long, you will be on your way to feeling better. You may find yourself consulting the individual chapters of this book again and again as those circumstances change and evolve throughout your life or lending out the book to your loved ones as they work to solve their own issues.

**Begin to Heal:**
**Get Started by Looking Inward**

Let’s begin the process of untangling your life by introducing you to self-reflection and psychotherapy. Use your workbook to begin journaling your answers. You might want to glance at all the questions before you begin writing, because some of your answers may overlap—and that’s okay. If your answers to one or more of these questions make you feel uncomfortable, sad, or angry, that’s okay too. Don’t rush this process. It could take you a half hour or half a day. There is no right or wrong way to go about addressing these questions; the main goal here is to simply work through all of them.
Step 1: Let’s examine how you have been feeling recently.

In general, how has your life been going? Are you basically satisfied in your love relationships? If not, why?

What about relationships at work—how are they going? Are you satisfied with your job or career? Is it consistent with your interests and aptitudes? Write out what you love and what you hate about your work.

Are you able to like and love yourself, recognizing with pride your many strengths, despite your inevitable flaws and shortcomings? If not, how are you feeling about yourself? Do you feel that you are moving forward in your life? Or are you stuck in an unhappy and emotionally painful place? If the latter, list the sources of emotional pain. Do you feel imprisoned by feelings of anger and disappointment? If so, describe how these feelings are affecting you and your life. Do you feel unloved, disliked, or disrespected? If so, by whom?

Are most days a struggle? Or do you generally feel pretty good, able to weather the ups and downs of life? If the former, describe how you feel on those days. Do you feel that control over your life basically resides within you? Or do you feel battered and blown about by forces and circumstances around you? If the latter, describe those forces and circumstances and how they affect your day-to-day life. Is the stress in your life manageable? Or do you frequently feel overwhelmed? If the latter, what are the sources of these feelings?

Step 2: Begin to write the history of your problems.

When did your life begin to go off track? What was the setting? Describe it in as much detail as you can. Who were the people involved? How did they behave toward you? How might you understand their behaviors in the context of what was going on in their life at that time? What life stresses were they living through? What
is their relationship like with their mother, their father, and their significant others, and how might that influence their behavior toward you? Was there a major disappointment or heartbreak in your life that you need to grieve? What was it?


Once you have written out the answers to these questions, read them over several times to let them sink in. Write down any associated thoughts that come to mind. Then meditate on the answers and the questions themselves by engaging in the process of introspection: by dedicating thirty or forty-five minutes a day—perhaps in the evening in a quiet, darkened room—to begin to think about these issues. If this feels overwhelming, shorten the amount of time to five or ten minutes. Talk to yourself about what you are thinking and feeling. An inner dialogue in the service of understanding is a good thing.

Your troubles may relate to something that happened recently at home or at work that you can figure out on your own, by providing yourself sufficient time for reflecting on it. You can also speak with a trusted friend, family member, or partner who can provide support and advice. Recent upsets or traumas, ones that are not too entrenched, sometimes respond well to ventilating and unburdening to a caring and loving person in your life and do not require professional intervention.

Feel Hopeful and Optimistic as We Work Together

Within your own heart, there is a complicated tangle of emotions that continually influence your thinking and behavior. Conscious emotions are but a small portion of those that govern how you
think, feel, and behave; they are the tip of the iceberg.\textsuperscript{11} If your heart feels all tangled up, by reading this book, you will begin your own personal journey to untangle your heart and your life—and to begin becoming whole. It’s important that you nourish this hope; the road to emotional health is long and difficult, but it’s crucial that you not give up.

You no longer need to feel alone with your emotional distress. I will join you on your journey as our work together unfolds. In the lessons that follow, you will discover that there are many others out in the world just like you, and you will recognize aspects of yourself as you read about them.

If you remain steadfast in your journey, you will uncover the story of your own heart, come to know yourself better, and begin to gain some powerful insights. You will identify patterns of thinking, feeling, and behaving that have needlessly tangled up your life and that have sabotaged your happiness in love and at work.

“Knowing yourself is the beginning of all wisdom.” Aristotle’s words are as relevant today as during his lifetime, almost 2,400 years ago. They are further supported by a similar quote by Socrates: “The unexamined life is not worth living.”

Now that you know what to expect, let’s get started.

Let’s talk.
If the sessions contained within this book are unsuccessful in helping you bring about any meaningful change and you have persisted in implementing what you have learned (there are no quick fixes after all), it may be time to seek out a psychotherapist. We all have unconscious feelings and memories within us that can exert surprisingly great effects over how we think, feel, and behave. In addition, we may have a biological condition that overwhelms our natural coping mechanisms. Or we may find ourselves in a chronically distressing relationship at home or at work. Repetitive behaviors that sabotage your life and tangled situations that just won’t go away are reasons to consider seeking outside help.

Two patients recently shared novel perspectives on therapy with me. The first patient—a tough, charismatic, and highly talented college football player—put it like this: “You have to man up and face yourself in therapy.” The other patient, a middle-aged professional woman from the financial services industry, described therapy as a
place where “you are not a side effect of your life; you are an active participant in your own well-being.”

I genuinely admire those who engage in psychotherapy and commit to seeing it through—thereby bringing about personal emotional growth and a more satisfying life. Patients enter therapy for a variety of reasons. Perhaps they want to end a pattern of self-sabotaging behavior that prevents true intimacy with others; maybe they behave in ways that preclude joyful living or repeatedly choose to fall in love with narcissists or find other ways to unconsciously live out what is known as the repetition compulsion.¹ They may also be seeking understanding and relief from recurring symptoms of anxiety or depression. A life crisis over the end of a love relationship, the illness or death of a loved one, or severe job stress may lead them to urgently seek therapy, looking for immediate relief.

♫ Session Soundtrack ♫

When I think about patients entering therapy for the first time, the Coldplay song “Talk” comes to mind. Individuals often begin to consider seeing a therapist when they feel lost or incomplete or like they’re missing a piece of their puzzle.

Visit DrBruceKehr.com/music-1 for audio files and further discussion of the soundtracks.

Considering therapy for the first time can be a daunting prospect—filled with emotions ranging from fear and anxiety to anticipation and eagerness. You may wonder to yourself, What will the doctor be like? Will they be kind and understanding or strange and awkward? Will they judge me or think I’m crazy? Will they tell me what to do or help me figure it out for myself? Will I want to run out of that office and never
go back? Or will I want to continue, because I feel understood and supported? It is understandable if you are dreading the initial encounter. On the other hand, perhaps you can’t wait to start unburdening yourself and untangling your life. All of these feelings are normal.

What is necessary in making this commitment to therapy, in sitting with a psychotherapist and examining your life? At its core, the psychotherapeutic relationship requires shared courage on the part of the patient and the therapist. We’re embarking on this journey together, with no defined roadmap. At the beginning and from time to time during the course of treatment, the experience can feel scary for the patient. Coming to terms with certain previously avoided realities is emotionally challenging and may feel daunting. At times, extremely painful feelings, embarrassing or shameful fantasies, and troubling memories will arise, all demanding the courage to confront, explore, understand, and resolve them.

The foundational elements of a successful therapy include persistence, developing trust, feeling understood and cared about, feeling emotionally “held” through difficult and painful moments, mutual respect, a high level of technical skill on the part of the therapist, and a shared optimism regarding the outcome. The therapist must also exemplify a deeply held belief in the human spirit’s capacity for growth and change. Ultimately, it takes heart, and a strong belief in the patient’s (and the therapist’s own) courage, to forge ahead into the unknown.

The Language of Therapy

If you decide to venture down this “road less traveled” to begin your journey of self-discovery by working with a psychotherapist, one way to feel less frightened is to begin to understand the language of therapy. Below are a few of the most commonly used terms that help explain some important
Becoming Whole

underlying concepts of the therapeutic process. You will see examples of all of these concepts in action in the patient stories throughout the book.

**Resistance**\(^3\) stems from defense mechanisms that protect the conscious mind from experiencing emotionally threatening unconscious memories, fantasies, and feelings. Sometimes, resistance is experienced as an urge to run—to avoid facing these issues—because it is human nature to seek pleasure and avoid pain. Internal conflicts also arise over feelings of dependency toward the therapist, in opposition to the desire to remain independent and self-sufficient. This is often manifested by the belief that seeking treatment is “a sign of weakness” and that “I should be able to manage my problems on my own.” To the contrary, when you commit to the therapeutic process and see it through to conclusion, it signifies an admirable strength of character.

**Transference**\(^4\) occurs when a patient transfers conscious and unconscious feelings and fantasies they had toward important figures from their earlier life, such as their parents, onto the therapist. These may include deep feelings of love or a longing to be loved, fearfulness, erotic fantasies, a yearning to be taken care of, and so on. Optimally, transference feelings should be openly discussed in the session, no matter how embarrassing it may feel, so that the underlying issues can be resolved. If the transference feelings are not candidly revealed, the effectiveness of the therapy will grind to a halt.

**Countertransference**\(^5\) occurs when the patient elicits conscious or unconscious feelings, fantasies, and memories in the therapist derived from their upbringing and from meaningful relationships. It is important that the therapist has engaged in their own personal psychotherapy or psychoanalysis so that they are able to identify and analyze their countertransference reactions (particularly the unconscious ones), so as to not act them out on the patient or contaminate the therapy by imposing their own personal
neurotic agenda. My own psychoanalysis has been valuable in helping me more effectively empathize with, support, and heal my own patients.

**Free association** is a technique that encourages patients to speak whatever comes into their mind, without holding back or censoring their thoughts, fantasies, or feelings. This exercise is especially helpful when analyzing the unconscious causes of self-sabotaging behaviors that often originate in childhood, an important element in longer-term psychoanalytic or psychodynamic therapy.

**Abreaction** is when the patient reexperiences prior events in their life with great emotional force—at times, so powerful that it may feel like they are actually living through the experience once again at that very moment. This may occur during the process of free association.

**Memory reconsolidation** is the process that enables previously consolidated emotionally traumatic memories to be reconsolidated or overwritten, such that new learning renders them less traumatic. As a result of the abreactive experiences and the caring and empathy provided by the therapist, the traumatic event may be recast in a new cognitive framework and viewed without distortion through adult eyes, enabling the patient to finally let go of the trauma.

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**Begin to Heal**

The journey of therapy does not come with a roadmap, and at the beginning of treatment, you may feel that not much in your life makes sense anymore, that you keep returning over and over again to the same emotionally stuck place in your heart. You don't know where you're going, and you feel lost or incomplete. Whatever you're
feeling, it is important to muster up your courage and enter that first session with a clear idea of what you would like to cover and what you would like to get out of the evaluation and treatment. Write out in advance what you would like to come to understand and which symptoms you would like to relieve. The following steps will help you reflect on this matter. Answer the prompts and questions in your workbook.

**Step 1: Identify what you are feeling and begin to help yourself.**

You may feel despair or that something is just not right. Do you feel scared or worried about a recent life event? Are you suffering from depressed feelings that just won't go away? Do you experience emotional pain that feels like too much to bear? What are the feelings at those times?

To begin to feel better, I would encourage you to try out the self-help techniques that I introduced in our first session. Additional tools that may pertain to your particular symptoms or life situation can be found in later sessions. A patient and diligent pursuit of these methods may be enough to begin to turn your life around.

**Step 2: Begin to identify patterns that sabotage your happiness, and search for some of the root causes in your childhood.**

Do you keep repeating self-sabotaging patterns of thinking, feeling, or behaving? Describe them.

Have you persistently pursued some of the introspective techniques that we discussed in session 1? What are your results so far? What have you been unable to solve through introspection?

Have you spoken with a friend or family member to seek
emotional support and a sounding board to figure out what is going on with you? Did this help? If so, how? Have these talks helped for a while but don’t result in any lasting benefit? What happens? Despite outside support, do you feel increasingly depressed? Describe your mood.

Do you have excessive anxiety? Where do you feel it? What are the triggers? Are you suffering from continuing insomnia? Is it trouble falling asleep? Staying asleep? Waking up early in the morning? All of the above?

Step 3: Explore entering psychotherapy.

Do your symptoms persist or worsen, despite efforts to help yourself? If so, it is time to consider entering therapy.

Do you have persisting thoughts or feelings that you might be better off dead? Please describe them. If you feel unsafe, it is imperative that you seek professional help as soon as possible.

Psychotherapy is devoted to helping you feel better, function more effectively, and examine yourself and your life in a new way that will liberate you from emotional restraints, from the shackles that have held you back for years. What are some of these shackles? List them.

Do you resist taking that first step to pick up the telephone and book that first appointment? Please write out some of the reasons.

Although you may feel afraid to start therapy, deep inside you is an awareness that you need a new approach to solving your emotional problems. The old ways of managing and coping just aren’t working anymore, and without a new approach you will remain stuck in a very painful emotional state.
Step 4: Are you resistant to entering therapy?  
Here are some commonly held fears.

Are you afraid that the therapist and the experience will be weird? Please describe what you picture.
   Do you feel that once you start talking, you will never want to stop (because what you are wrestling with feels so overwhelming)?
   Do you fear there is no hope for you? If so, why?
   Did a friend or family member engage in therapy and have a bad experience or never get better? What happened to them? Might they have been responsible for a bad outcome? If so, how?
   Do you have conscious or unconscious fears that the therapist will be judgmental? What do you believe they will criticize?
   Are you concerned that the therapy will make you feel worse? Please describe why.
   Do you believe that the therapist will not understand, will give bad advice, or urge you to break off an important relationship? What specific concerns make you feel anxious in this regard?
   By writing out these fears and considering each of them, I hope that you will be able to put them to rest. All of these fears are unfounded if you select the right therapist.

Step 5: How to select a good therapist.

Seek out a psychiatrist, therapist, or a leader at your church or temple (if you prefer a faith dimension) with a strong reputation for being caring, effective, and ethical. Ask your doctor or other trusted healthcare professional for a recommendation. If a particular name is mentioned more than once, that's a good sign. Check online for information regarding their education, background, and what other patients have said about them. Have they won any prestigious awards? Have they been cited for any ethical sanctions or malpractice actions?
Is it possible to have an introductory phone call? If so, prepare your questions in advance. Begin the call with a brief overview of why you are seeking help and what you wish to accomplish in treatment. Then, ask them the following questions:

- What is your treatment philosophy?
- What will take place in the first session?
- If I need medication, is it something that you would prescribe, or will you refer me to someone else? If you refer me, how do you coordinate my care with them?
- Will I be comprehensively evaluated and treated as a whole person under the biopsychosocial model, and what should I expect?
- What is your experience in evaluating and treating patients like me?
- Based on what I have told you so far, is it possible to estimate the length of time that I will need treatment?
- What are your fees? What is your cancellation policy?

The goal of the introductory phone call is to help you decide whether it makes sense to schedule that first appointment—to make a preliminary determination as to the likelihood of a good fit between you and the psychiatrist or therapist. Of course, there is no substitute for a face-to-face meeting to help you decide whether you like them or whether you should keep looking. Do your research, pick up the phone, and place this most important call to begin to untangle your heart.

Select someone who facilitates, helps you figure out what is right for you, and doesn’t simply tell you what to do. In therapy, it is mainly your job to figure out your thoughts, feelings, and decisions—not the
therapist’s—so you don’t need to worry about being controlled or dominated. The therapist is there to help you untangle your life, not to mold you into their image. Ultimately, you should thoughtfully evaluate any comments made by the psychiatrist or therapist to see if they make sense. You will accept some comments and reject others. You are in control of the therapy and your life, not the therapist.

What matters most is your belief that there is a good fit between the two of you. Do you develop a warm rapport with one another in the first few sessions? Do you feel understood? Is the therapist emotionally supportive and nonjudgmental? Do you feel genuinely cared about? Do you like them? Do you feel that they like you? Are you gaining insight and starting to feel better after a few sessions? And most important of all, over time, as the relationship develops, do you come to feel emotionally safe with them? If the answer to most of these questions is yes, then you have made a good choice and are on your way to deeper understanding and symptom relief.

If the answers are mostly no, find someone else to treat you.

If you feel that you and the therapist may be a good fit but feel disappointed after the first few sessions, express your disappointment directly to the therapist. This accomplishes two important objectives: First, both of you are clear on the goals you wish to achieve. Second, you begin to assertively take charge of your life to achieve what you want, thereby using the therapeutic relationship as a laboratory for behavior change in other important relationships in your life.

Step 6: Have the courage to persist in therapy.

It takes courage to continue in ongoing therapy. Fantasies, memories, feelings, and hidden aspects of oneself begin to surface, which may be frightening or emotionally threatening.

At times, a deeply held unconscious memory of a traumatic
experience may be on the verge of surfacing into your consciousness, and this may bring feelings of high anxiety or even panic. It is important that you let your therapist know what you are feeling at these times and that you ask for additional emotional support. Their empathetic care can help you face what feels so intimidating and overwhelming. Have confidence that you can work through any issue, to feel better and lighter.

The love and support of a friend or family member can prove invaluable after a particularly rough session. You may recall courageous family members who faced seemingly insurmountable odds and overcame many obstacles. Draw strength from their tenacity. Even actively remembering a loving relationship from childhood to hold inside yourself can help you stick with it when the going gets tough by recalling and thinking about times you felt loved and supported by someone. Look at old pictures of those who loved you to evoke memories that may be sustaining.

The unconditional love and comforting presence of a pet can help you feel more supported. Try to remember a loving pet from childhood; children often talk with their pets at times of emotional distress, and memories like this can provide solace.

And finally, a caring, empathetic, and nurturing therapeutic relationship can strengthen your resolve. Permission to call your therapist after hours or arranging for an extra session when you feel overwhelmed will also help you stay the course.

Continue in therapy until you have accomplished your goals for treatment, and when you feel ready to end your treatment, discuss your reasons with your therapist. Determine whether the two of you agree that it is time to end. Your therapist may feel that there are additional issues to resolve, and although you may initially disagree with their assessment, explore the reasons for their opinion in more detail prior to unilaterally terminating the therapy. Early withdrawal may be associated with a number of negative outcomes.
It is imperative that you not give up, that you not run away. Ultimately, you will develop a deep sense of pride in facing your problems, as opposed to denying or avoiding them. Acting courageously to face the painful, shameful, regret-filled, humiliating aspects of your life will ultimately bring you greater self-respect, self-regard, and the freedom to live more fully. Your return on this investment will be exponential.

This may have been an intense session for you. Next, we will discuss how psychotherapy can help you take control of your life or help your children take control of theirs. Let’s learn how.
My family went through some hard times during my childhood. In 1959, my mother almost died following complications that developed during a routine surgical procedure. As a result, she developed a deep depression and had a prolonged recovery period. In 1961, my father lost his printing business and had to file for bankruptcy. Money was so tight that we bought our clothes from a second-hand clothing store, and we lived in constant fear of losing our home to foreclosure. My father was a man of integrity, honor, and responsibility, and he dealt with his reality head on. Throughout bankruptcy, he knew that our economic survival depended on all of the will, energy, tenacity, and drive he could muster. He had a tremendous work ethic and labored continuously day and night for three years, brokering sales between former customers and competitors until he finally restarted his business.

My father’s strength and virtue carried us through these difficult
times fraught with emotional pain and humiliation. He gave me a childhood where I learned that difficulties could be overcome through hard work, self-discipline, and the ongoing encouragement of a parent who never gave up on teaching his value system to his son and living it out personally. Most important, he taught me that I had to take responsibility for my own life, that I wasn’t entitled to anything; had to learn to behave in ways that advanced my independence; and, as a result, would develop self-respect. His insistence that each of us take personal responsibility for our lives is a value that I carried with me into my career.

In fact, this value is a cornerstone of psychotherapy. After I became a psychiatrist, I had the good fortune of serving as the medical director of adolescent, mixed adolescent and adult, and neuropsychiatric inpatient units at a private psychiatric hospital. We treated seriously ill patients with severe schizophrenia and bipolar disorder, not uncommonly suffering from substance abuse disorders as well. On one unit, a number of patients had also sustained brain injuries. There was one clearly articulated, overarching rule for each of the patients on those units, regardless of how sick they were: “You are responsible for your behavior.”

Every patient had to take personal responsibility; we gave them no other choice. Nobody would be allowed to blame the staff, doctors, medications, or other patients for their behaviors. It was remarkable how infrequently the patients behaved aggressively on these units, given the severity of their illnesses, and how reassured the patients felt in realizing that each of them would be held accountable for how they treated other patients and staff.

Perhaps there is someone in your life—a child, other family member, or a friend—who suffers from feelings of entitlement and who refuses to take responsibility for their life. How is that working for them? If you are really honest with yourself, you may have a
streak of entitlement within you as well. How is this attitude working out for you? How does it relate to feelings of self-esteem and self-respect?

As Ayn Rand once noted, “You can avoid reality, but you cannot avoid the consequences of avoiding reality.” In psychotherapy, one is forced to confront reality, both within the unconscious mind and in family and work life. The decisions made and actions taken by you will determine your outcome in life. Only by taking full responsibility will you be able to grow as a person and fully experience the richness that life has to offer. In this session, we will discuss the relationship-destroying effects of entitlement at various stages of adult life and the personal growth that can occur through holding yourself accountable for your own behavior. I will also describe how you, as a parent, can impart these values to your children.

♫ Session Soundtrack ♫

Some of the themes of this session are captured in the song “It’s My Life” by The Animals. The lyrics describe a man who feels entitled to take from women by lying and squeezing them dry to live off their money. A man who wants to take all he can get, the narrator feels entitled because “it’s a hard world to get a break in” and because “all of the good things have been taken.” He thinks he therefore has the right to steal from others and manipulate them to feed his wants and desires. He takes no responsibility for his life. The world is the problem, not him. Have you had destructive feelings like this?

Visit DrBruceKehr.com/music-2 for audio files and further discussion of the soundtracks.
Entitlement, Anger, and Personal Responsibility throughout the Life Cycle

In our twenties, we face the crisis of separating and individuating for the second time (the first separation-individuation is when we leave our infantile dependency and begin to form the core of our personality).\(^1\) It is an emotionally challenging decade. For the young adult, identity consolidates into an adult self, an initial career path, and a committed love relationship. This is not uncommonly a turbulent and tortuous process, and therapy with the young adult involves providing a great deal of support and empathy while helping them identify what to bring along and what to leave behind from their mother and father (i.e., “What are the ways that I want to be like them, and what aspects of them should I reject as not being true to my identity?”), helping them to discover and define for themselves who they truly are.

The focus of therapy may include how to manage newfound freedom, facilitating a successful separation from the emotional and financial dependency on your parents, balancing inner desires with outer realities and responsibilities, and learning how to act authentically in love relationships.

Once the young adult (hopefully) grieves the parental relationships they longed for but didn’t experience and begins to take responsibility for the direction and purpose of their life, there is newfound self-esteem that comes from the realization that they (not their parents) are now the masters of their destiny, laying out a course that will define their life. This is a liberating experience, immensely exciting yet frightening as they feel the pride that comes from supporting themselves and performing well at work.

Here are two examples of this principle in young adults.
Brenda’s Story

Brenda was a twenty-five-year-old woman who entered therapy deeply depressed. She had been an exceptional student, excelling in high school and graduating magna cum laude from a prestigious university with a degree in business. She was a person of high moral character who suffered a series of setbacks in the “hookup culture,” where she became appalled at how young men treated her and her friends. She became depressed over the difference between the world she imagined, characterized by honor, respect, and personal responsibility—the values she was raised with—and the social world she found in college, largely characterized by heartlessness, extreme selfishness, immediate sexual gratification, and disloyal behavior.

She fell in love with a young man in her sophomore year of college who had serious emotional problems and was later discovered to be using drugs. When Brenda learned that he had repeatedly cheated on her, she was emotionally devastated and blamed herself:

“I felt like I wasn’t attractive enough,” she said, “or exciting enough.”

The confidence she had felt since high school evaporated, and she became significantly depressed but “toughed it out” until a year after graduation, when she entered therapy.

Brenda’s depression was compounded by her difficulties in initially establishing a career path.

“Most of my friends are in medical or law school or investment banking,” she explained. “I hated science and have no interest in law or finance. I feel like I deserve a prestigious career with a high salary, but I feel lost. My successful friends are just luckier than I am.”

She waitressed at two upscale restaurants to support herself while applying for various sales positions, given her gift of gab and a belief that successful salespeople could make a lot of money.

First, Brenda tried out a sales position at a large insurance company that underchallenged her intellectually and felt like a creative
wasteland—which left her feeling despondent over her prospects in life. Her entry into corporate America was initially filled with idealism and hope that she would rapidly rise up the corporate ladder, but the realities of political infighting, jealous competitive rivalries, and the bureaucratic stifling of her creative sales ideas soon served to bring her down once again.

Brenda suffered an extreme narcissistic injury—a blow to her self-esteem—in her transition from the top of her class to the bottom of the heap in the working world, and she began to blame her parents. She eventually withdrew from friends and family and began to gain weight.

“They worry too much”—(her father was a Holocaust survivor and was extremely overprotective)”—and are constantly giving advice that makes me feel worse and like they don’t think I know how to make my own decisions. Like I’m completely incompetent. And they’re right! They never let me date in high school or taught me what to expect, so I’m fumbling out on my own now. Sometimes, I think it would be easier to move to another city and start over, start fresh.”

We began treatment with antidepressant medication and intensive psychotherapy, and I initially provided emotional support for her to develop an open, safe, and empathetic therapeutic relationship. We then transitioned to a deeper therapy, where Brenda began to explore the unconscious origins of her conflicts.

We learned that her entitlement was partly based in her belief that a high level of academic accomplishment would in and of itself deliver a powerful and prestigious professional position. Some of her entitlement also originated in how her parents would repeatedly tell her how wonderful she was and that she was destined for greatness. Brenda’s competitive feelings—coming from a family of high achievers and being surrounded by friends who were pursuing careers in law, medicine, and finance—created additional emotional pressures.
Through our work together, she came to accept that her employers were not like her parents: “I realize now that a potential employer won’t see me like my parents do. I have to prove my economic value.”

In the course of therapy, she also began to learn how not to personalize insensitive treatment by others, instead recognizing that the sources of the cruel behavior originated in those people’s emotional conflicts, not in her.

“Brenda,” I explained, “some women are envious of your good looks, ambition, academic accomplishments, and immense innate talent. Others envy the fact that you come from a prominent family. Some of the young men you meet and fellow employees and managers try to manage their competitive envy by devaluing, constraining, and opposing you. Others objectify you sexually, never getting to know you as a person.”

“I can see that now,” she said. “It’s hard for me not to take it personally, but I’m getting better at it. I understand, at least intellectually, that it’s not about me; it’s about them.”

Over time, Brenda was able to give up her feelings of entitlement and to not feel so wounded when others treated her badly. She settled on a career path in marketing, obtained an entry-level position in a start-up that was entering a period of rapid growth, and she worked hard to impress those above her with her creativity and ingenuity. As of this writing, she is satisfied with her work life, has been growing more romantically involved with a seemingly solid young man, and is considering applying to MBA programs with a focus on marketing.

* * *

Through our work in talk therapy, Brenda was able to develop greater emotional maturity and to recover from the inevitable narcissistic injuries of young adulthood. The story of Peter further illustrates some of the principles of psychotherapy with this age group.
Peter’s Story

Peter was in his early twenties, and had a number of longstanding emotional and physical challenges, when he first came to see me. He had been born with cerebral palsy and needed arm braces to walk. Beginning in his childhood, unfeeling students frequently made fun of him at school. As a result of severe ADHD and learning disabilities, Peter had serious difficulty passing his college classes, and he became extremely depressed when he flunked out.

As an adult child living at home, he was excessively emotionally and financially dependent on his overprotective mother. And to further challenge his self-esteem, his brother was a surgeon, and his twin sister was a successful businesswoman, both having graduated from top universities. Peter was also wrestling with the emotional implications of a major life decision—whether he should apply for and accept the government-funded disability payments that he was entitled to receive or become self-sufficient through his own initiative.

We began to work together in psychotherapy to help Peter separate from his mother and figure out an identity that was right for him. We also treated his ADHD with stimulant medication.

“I need to become my own man,” was how he put his desire for the pride that comes with independence. “Depending on disability payments would make me feel like I can’t support myself. I don’t know if I could look at myself in the mirror if I let the government pay my way. Is that any better than my mom doing it? I need to do it on my own.”

In the course of his psychotherapy, Peter grieved never having a “normal” childhood. “The constant mocking when I was in school still makes me feel sad but also angry at the kids who did it. I also feel like my brother and sister are good at everything they do, and it seems to come so easily to them, while I’m stuck at home, struggling to get by.”
Peter worked through these traumas and jealousies and gained independence. He secured an administrative position at a financial services firm and moved out of his parents’ house, which filled him with enormous pride.

Through psychotherapy, patients like Peter may confront the emotional impact of their disabilities and develop the strengths necessary to gain greater independence. In the process, some may benefit by turning down government entitlements and services that may make them feel like a chronic invalid. Although such assistance originated in compassion, it sometimes perpetuates dependencies that preclude the pride that comes from self-sufficiency.

* * *

In our forties and fifties, we face midlife, where there may be an existential crisis characterized by questions like “Is this all there is to my life?” We may feel that we have not achieved all we deserve to achieve and may blame it on others. We may experience a lack of meaning and purpose, feel empty inside, and not feel as “alive” as we did in our twenties and thirties.

Therapy may involve coming to terms with unconscious feelings of anger and entitlement and uncovering passions that can be lived out through a job change or finding a new career, discovering a new hobby, or rekindling earlier passions that were subordinated to the demands of establishing your career and raising a family. One can also find the courage to leave behind an oppressive and depleting love relationship, to begin to live out a newfound sense of freedom. Following is an example of a middle-aged patient that illustrates these points.
Michael’s Story

Michael was forty-five years old when he entered therapy, suffering from depression and anxiety. When he was a child, his parents divorced.

“I never saw my dad much after that,” he said. “My mother took on a series of live-in boyfriends, and they never cared much for my sister and me. I never felt like I belonged at home after the divorce. Yeah, I know—typical sob story, but that’s why I’m here.”

Michael’s early life was joyless, except for his remarkable athletic abilities, which brought him the admiration and camaraderie of coaches and teammates. He attended college, majoring in computer science, and partied excessively, which resulted in missed classes and poor grades. He barely graduated—in part, because of low self-esteem and the unconscious belief that he was not worthy of success. These feelings had developed in childhood as a result of his father’s abandonment and the frequent criticism and abuse from his mother’s boyfriends. Following college, he began to distinguish himself in the world of high technology, married a coworker, and fathered three children.

“I’m terrific at my job, but I can’t seem to get my bosses to realize that,” he said, describing his struggles with authority figures at work. “I explain to them how the job should be done, and they just won’t listen. Maybe I come across as angry, but I’m always right. I can’t believe several of them fired me over that; I was just trying to improve those places.”

Although he loved being a father and husband and was successful in these areas of his life, Michael’s professional life was marred by a series of setbacks that left him depressed and suffering from a multitude of physical symptoms.

Finally, he settled into a position. “It’s a large government contractor, and this kind of place seems to be really stable. They’ve got a bunch of long-term contracts and employ thousands of IT
professionals, so it should be a slam dunk. I just know that I’ll become incredibly important to them.”

Paradoxically, he became even more depressed in this position. The enormous indifference of the federal bureaucracy and the outright opposition to and criticism of his initiatives by government employees served to unconsciously remind him of his father’s indifference and the criticism and devaluation from his mother’s boyfriends.

“I want to show them what I can do—like I did on the playing field—but the bureaucracy keeps getting in the way. I’m just a number here. There’s a major contract, and I’ve got some great ideas for it, but they’re not interested in anything I have to offer.”

Through difficult and painful work in psychotherapy, Michael was able to grieve the parents he longed for but never had. His sessions were filled with sadness and anger as he worked through these feelings and expressed his deep longing to be liberated from the bonds of his childhood relationships. As he worked through his angry feelings, he was able to cast aside his feelings of entitlement. He began to take responsibility for his actions, recognized how he sabotaged one former position after another and how he unconsciously selected uncaring and authoritarian company cultures that replicated the dynamics of his family of origin. After three years of intensive work, he felt more confident and free to explore his passions.

“I feel like I own my life now,” he said. “I’ve just started as the chief information officer of a small family-owned company. They treat everyone like family—a healthy family.”

Michael’s new employer operated in a niche that was being buffeted by rapidly changing marketplace dynamics, and he quickly assumed a position of power and respect as he began to guide them to meet the future. No longer unconsciously positioning himself in the workforce as an entitled young boy, perpetually
grief stricken and angry over being abandoned and criticized and railing against authority figures, he had taken control of his life and was now the authority figure himself.

Through psychotherapy, Michael was able to change his professional identity and leave behind authoritarian cultures to join a small firm that valued each individual’s contribution and where he felt a sense of an unlimited promise. He had learned what constituted his authentic self and was now living it out.

A powerful unconscious that controls your actions and choices is an internal shackle that may impair your personal freedom. This is all the more true when you have unconscious feelings of entitlement.

### Begin to Heal

What relevance does this have for you? Use your workbook to journal your thoughts and address these prompts and questions, which will help you explore the effects of entitlement and anger in your own life.

**Step 1: Think about your own entitlement.**

If you believe that you may have entitlement issues of your own, begin to think about how this has affected specific relationships at work and with loved ones. Think back to relationships that went badly, and put the relationship under the microscope to see what you may have contributed to the negative outcome. Exactly what happened? What are the details?
Step 2: Look for patterns.

Is there a pattern to your relationships at work or in love? Do they develop in a particular way and then blow up? Describe the pattern.

Step 3: How do you feel?

Do you frequently feel undervalued, cheated, or taken advantage of? Describe the relationships this occurs in and what happens. Is there a pattern? How do you behave as a result of these feelings?

Step 4: Recognize and own your feelings of anger.

Do you harbor feelings of envy and bitterness toward those you perceive as more successful? If so, how does this affect your feelings about yourself and your prospects in life? How are these feelings expressed at work and at home? Do they affect your behavior? If so, how?

Step 5: Address feelings of entitlement.

Do you feel that the cards are stacked against you in life or that what happens to you is unfair and unwarranted? When did these feelings begin? Can you determine their origin? If so, describe what was happening in your life at that time. Did one or both of your parents feel this way? If so, how would they manifest these feelings? Please describe in detail.

Step 6: Take control of your life.

If you answered yes to one or more of the above questions, it may be that feelings of anger and entitlement are undermining your ability to grow and develop at work or in love. If this is the case, the first
and most important step you can take is to realize that you are in charge of your life and responsible for its course. Are you willing to take this step? Write out how you might begin to do so. If you are unwilling, what is getting in the way?

Step 7: Embrace empathy.

Your behaviors are influenced in part by how you view the motives of others. It is essential that you view each and every other person in your life as someone who has their own hopes, dreams, fears, goals, and emotional conflicts. Not every situation or interaction is about you; it is also about them. Begin to learn about what others in your life need and value, and begin to provide it, thereby making yourself more valuable to them. Can you commit to taking this important step? Write down the names of the most important people in your life, and then list under each name what you believe they most need and value and what you can do to help meet those needs.3

Step 8: Create balanced relationships.

Once you have completed step 7, focus on creating win–win relationships, where others’ needs are considered, as opposed to just thinking about what you can get or what you are being denied. Are you willing to create win–win relationships at work and at home? List five important people at work and at home, and under each name, write out how you might begin to engage them in a win–win conversation. What would constitute a win for them? For you?

Step 9: Take responsibility.

If you make a mistake, own it, take full responsibility, and indicate in a serious way that you intend to do better next time. Saying “I’m
“sorry” can be monumental and even life altering—particularly if you rarely utter those words. It can begin to ease chronic tension in relationships at home and at work but will only be effective if you also begin to change your behavior. List events that upset you, where you blame someone else for what happened, and then next to each event, write out how you share in the responsibility for the outcome.

**Step 10: Hold yourself to high standards.**

Dress and behave in a professional manner at work, and hold yourself to a high standard when relating to colleagues, focusing more on listening to them and working to understand their perspectives and needs than on getting your needs met. List at least five ways you can commit to acting more professionally at work, starting tomorrow.

**Step 11: Improve yourself.**

Develop new skills that will increase your value at your current job or with future employers. A supervisor of mine once said, “It is better to be in demand than demanding.” List three skills that would make you more valuable and marketable, and commit to when you will begin to acquire them.

**Step 12: Learn about your behavior from others.**

Wrestle with the answers to these questions, and if appropriate, seek candid feedback from friends and loved ones. List five questions that you would like them to answer that will provide valuable feedback to you in learning more about whether you come across as angry and entitled, and ask them to provide examples and details.

If, despite your best efforts, your anger and entitlement continue to sabotage your happiness, seek professional help. You might need
more guidance to find the solution that works for you, and your therapist can provide that.

**Preventing and Treating Entitlement in Our Children**

As parents, we have the awesome responsibility of shaping our children's personalities and imparting to them a value system that they will take into the world to serve them for life. During their childhood and adolescence, the values that we desire them to adopt may be in direct conflict with those they witness on television, in school, online, and through the many other influences that bombard them on a daily basis.

We would like our children to develop emotional maturity, treat others fairly and with kindness, have a strong work ethic, become independent thinkers, use good judgment, become capable of mature love for a significant other, earn their way through life, be loyal to their friends and loved ones, develop and maintain deep friendships, and lead a life where they will act honorably and achieve self-respect and the respect of others. We want them to understand the value of hard work, grit, and a determined effort that is sustained over time. We would like to prevent them from becoming entitled or developing other attributes of a narcissistic personality.

If you would like your children to grow up to lead virtuous lives, it is vital that you act virtuously. Because life can be painful and difficult, acting honorably can be quite challenging at times, and we parents are tested in many ways and inevitably fail from time to time. We may be called on to stand diametrically opposed to the values our children are exposed to elsewhere. It takes courage to take a stand with your child against many of these values that conflict with your own. It requires a willingness on your part to institute and enforce rules that will be unpopular, will be different
from the rules set by many of their friends’ parents, and will provoke pushback—particularly when they are teenagers.

There may be times when you feel that you have little or no influence over your child’s life, compared with all of these other forces. And at any given time, you are only as happy as your least happy child. Yet even with the ups and downs we experience in our relationships with our children over the course of a lifetime, we can continue to be a strong positive influence. It is important that you live out the value system you want to impart to your children and set an example for them in your day-to-day interactions with them and with your spouse. In other words, you need to \textit{walk the talk}.

\section*{Raising a Responsible Child}

If you are a parent with young children, you would like to impart to them a value system that will carry them well throughout their lives and ultimately enable them to develop emotionally mature adult relationships. A wonderful method is to share nightly reading sessions with your children. Try reading from William J. Bennett’s \textit{The Book of Virtues}. Bennett addresses how values such as responsibility, courage, compassion, honesty, friendship, persistence, and faith are essential traits of good character. The book offers children examples of good and bad, right and wrong, through hundreds of stories that come from many sources—from the Bible to American history, from Greek mythology to English poetry, from fairy tales to modern fiction.

If your children are too young to read, begin by reading them some of the chapter headings and story titles to get them excited about what stories they would like you to read aloud. Encourage them to take turns choosing each successive evening. If they are old enough to read aloud, have them take turns selecting and reading stories that resonate with them. Make this a nightly tradition in
your household; it will impart a reliable and memorable set of moral reference points that will help anchor them in the ideals you value.

If your child is an adolescent, imparting values can be more challenging. Many teens behave narcissistically. Some of this behavior may be age appropriate, because teens are struggling to convince themselves that they are not dependent on adults. This typically manifests itself with rule breaking, openly or secretly challenging your authority, angry entitled outbursts, demanding to be given certain freedoms or material items, refusing to do chores around the house, and asking for privileges enjoyed by their friends that you feel are excessive or unwarranted.

**Begin to Heal**

Here are some steps that you can try to encourage them to take responsibility for their lives. Take out your journal to write out your ideas and answers. If you are married, be certain to discuss your answers and proposed solutions with your spouse prior to implementing them.

**Step 1: Listen.**

Begin by patiently listening to their troubles, angry feelings, and grievances, and try not to be provoked into getting angry and dismissive. (This is really hard. Teens can be so provocative at times, can’t they?!) When was the last time you were provoked into anger by your child? Describe the details. How might you have handled it differently by trying to empathize and understand?
Step 2: Give support.

Be willing to support their self-assertion and their feelings as long as they are not disrespectful toward you, and tell them you are proud of their willingness to put their thoughts and feelings into words rather than acting on them. Think of a recent argument. How might you have encouraged them to express their angry feelings in a respectful way that would help you listen to them vent and not lose your cool?

Step 3: Pick your battles.

Stand for values that you believe strongly in, and be willing to be flexible and let go of issues that are not as important. Which rules do you feel are inviolable and why are they important to you? What is the principle behind each of them? Which rules are less vital, where you are willing to be more flexible and negotiate their terms?

Step 4: Be honest.

Be willing to be open and honest about why you believe that the rules you have established are necessary. You have established them out of love, caring, and protectiveness and will loosen certain rules as they get older and demonstrate their ability to behave responsibly. Be willing to discuss modifications to the rules, and if their proposed modifications make sense, be willing to agree. Develop a specific plan for one or more of the rules, whereby you trade increasing freedom for your teen in return for their demonstrating increased responsibility. List the steps in the plan, and then discuss them with your teen.
Step 5: Reward, don’t just punish.

Rewards work better than punishments in bringing about desired behavior. Reward behaviors that you would like to see more of, and punish behaviors that break the rules. The degree of punishment should be commensurate with the magnitude of the rule breaking—proportional to the “crime.” Try to remember what it was like when you were a teenager as you evaluate the fairness of a punishment. Develop a system of rewards and punishments for specific behaviors, and sit down and discuss it with your teen to hear their thoughts and feelings, then begin to implement them. Be consistent.

Step 6: Communicate.

Encourage your teen to think about themselves and their life and the impact of their behavior on others. Get into a habit of regular discussions—maybe after school over a snack or in the car on the way to a sports practice—where you inquire about how their life is going, empathize with any struggles they are having, and help them connect the dots between cause and effect in their life in a noncritical way. Keep these conversations relaxed and informal; if it feels like an inquisition, they’ll shut down.

Step 7: Accept disagreement.

Don’t be afraid to have your child get angry and even hateful toward you at times in response to your standing firm in enforcing rules. This can be really tough for any parent to bear, and it may feel easier at times just to give in, but it is not your job to be their friend. Unconsciously, they are grateful that you are in control and in charge at a time in their life when they feel so out of control and confused.
What are five steps that you could take to calm down when you’re under attack? How can you take the conversation less personally and put it into the context of their life struggles? List some of the causes of their angry feelings that have nothing to do with you.

**Step 8: Further incentivize good behavior.**

As they gradually give up entitled behavior and act responsibly, find additional ways to reward them. The idea is to incentivize adult-like behavior wherever possible with praise and expressions of pride. In this way, they will take increasing responsibility for their life, which, of course, is the foundation of their becoming an independent adult. Make a concerted effort over the next week to praise good behaviors on their part, and write down how they respond. How might you remind yourself to continue praising good behavior beyond the end of the week?

I hope that this session has been helpful to you in understanding the destructive effects of anger and entitlement. Hopefully, the tools I provided will assist you in charting a new and more rewarding course.

You are beginning to understand the role of childhood traumatic experiences in shaping one’s experience of themselves and the world. Some of the stories that follow will further illustrate how these experiences are addressed in treatment and how we can learn to overcome them.
Notes

Session 1


10. As discussed in an article in *Psychology Today* about the field of Music Therapy and the music-emotion connection (http://www.psychologytoday.com/blog/your-musical-self/201311/music-your-gps-voice-and-the-science-timbre), the music-emotion connection is one of the primary mechanisms underlying why music therapy works. Music therapists learn to manipulate timbre as a way to connect with clients, influence them emotionally, grab their attention, and help them sustain their focus. Timbre itself can help build and release tension, and it can impact emotional expressions and perceptions. Thus, the compositions linked to in each session may have a beneficial therapeutic effect on you. Kimberly Sena Moore, “Music, Your GPS Voice, and the Science of Timbre,” *Psychology Today*, November 1, 2013, http://www.psychologytoday.com/blog/your-musical-self/201311/music-your-gps-voice-and-the-science-timbre.
Session 2


Session 3

1. Albert Ellis, Mike Abrams, and Lidia Abrams, *Personality Theories: Critical Perspectives* (Los Angeles: Sage, 2009), 452, https://books.google.com/books?id=OObiJhzBtpMC&pg=PA452&dq=first+separation+individuation+object+relations&source=bl&ots=RkkeMmvDT&sig=4OTFl5rHj5zuAFoMaGULJSHm0I&hl=en&sa=X&ved=0CFMQ6AEwCWoVChMIwYHJhxixwIVA%5Cnv=ononepage&q=first%20separation%20individuation%20object%20relations&f=false.


3. If you would like some formal guidance in this process at work, consider exploring The Birkman Method: https://www.youtube.com/watch?v=gwXVCB1YGY8. See also https://www.birkman.com/news/view/the-birkman-method-your-personality-at-work.


About the Author

Author and national award-winning psychiatrist Bruce Alan Kehr, MD, is the founder and president of Potomac Psychiatry (PotomacPsychiatry.com) since 1981. Washingtonian magazine awarded him their Top Doctor designation from 2012 to 2017. In 2016, the magazine named him The Face of Psychiatry in their “Faces of Washington” issue. Dr. Kehr serves on the Board of the Institute on Aging of the University of Pennsylvania and served as its chairman from 2006 to 2009. The readers and editors of PharmaVOICE selected him in 2007 as one of the 100 Most Inspiring and Influential Leaders in the Life Sciences Industry.

Dr. Kehr received training in psychiatry at Tufts New England Medical Center, where he was chief resident; in neuropsychiatry at the VA Boston Healthcare System—Jamaica Plain; and in psychoanalysis at the Boston Psychoanalytic Institute. He practices psychiatry and psychotherapy using the biopsychosocial model, designed to evaluate and treat the whole person by understanding each individual’s unique genetic, biological, psychological, social, and life-stage attributes.
Dr. Kehr lives in Potomac, Maryland, with his wife, Barbara, a psychotherapist. They have two daughters: Melanie, an immigration attorney who advocates for asylum on behalf of refugees fleeing domestic violence and child abuse, and Lisa, a psychiatric nurse practitioner graduate student.

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The patient stories contained within the book are illustrative of emotional issues faced by many of us as we go through life, and some of the themes presented are universal. Although lessons learned from the treatment of actual patients are included in the stories, the historical events and facts represented have been changed to protect the identities of any real patients and to protect their confidentiality. This includes, among other minor alterations, the names, ages, careers, the number and sex of their children, and the careers of the patients’ parents. Consequently, all characters that appear in this work are fictitious. Any resemblance to real persons, living or dead, is purely coincidental.

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