Let’s use a real life example to help us understand the map we will present. In this case the map will take the form of a model. And this model will help us link various psychological components such as thoughts, emotions, behaviour in a perhaps more sophisticated and functional way than you have been taught or picked up along the way. We will start with one piece at a time in this chapter and once we have enough of the map described we will look at some obvious, but also potentially astounding, implications of this model and the practical implications for your life.

We could, and will, use any combination of situations, thoughts, emotions and behaviours as they arise in the world and our lives. However, for illustration we will use the common fear of public speaking. The TV show Seinfeld once had an episode in which he poked fun at the ubiquity of this fear by saying in the opening monologue: “at a funeral, most people would prefer to be in the casket than deliver the eulogy.” Even if you are not afraid of public speaking, or even love it, you probably wouldn’t think it strange if someone you know confided their fear about standing up in front of 3000 people to deliver a speech. This might not be the same reaction if we used the example of, say Koumpounophobia. This is a phobia of buttons. You are most likely not even aware of the possibility of such a fear, to be grateful you don’t have it.

Bill is walking down the hallway of his office floor when his boss John happens to be walking the other way. This is how the dialogue plays out:

John; “Hi Bill. Glad I bumped into you. You know that big conference keynote presentation I was due to give next week, on Friday?”

Bill: “Yes… You mentioned it a while back.”

John: “Well, I’ve actually got to be in Hong Kong for a board meeting that day… so I’ll need you to do the presentation. All good? I know you will do a great job!”

Bill: “Huh.. Ahh. .. Ok.”

Some of you reading this may be vicariously traumatised by Bill’s predicament and may have experienced something similar in your lives.

Imagine that Bill wasn’t a huge fan of public speaking. Public speaking is one of the most common fears so it wouldn’t be unlikely Bill had at least some trepidation if not being wholly terrified at the prospect.

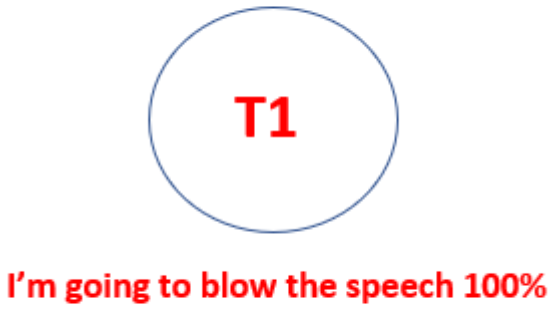
It's likely he will have a number of thoughts that are entering his mind as soon as his boss walks off. Let's call these thoughts, **Thoughts at Time 1**, or **T1s**. Or in other words thoughts right now after some trigger.

A sample list may include a grey hazy fog (or perhaps a red volcanic glow) of the following:

Eg 1: **T1: "I'm going to blow the speech 100%"**
Eg 2: **T1: "I don't have time to prepare properly"**
Eg 3: **T1: "This is not my area of expertise"**
Eg 4: **T1: "How am I ever going to do a good job"**
Eg 5: **T1: "If/when this goes badly this could hurt my reputation"**
Eg 6: **T1: "How unfair is it that I got roped into this"**

There could be potentially hundreds of others so this is not an exhaustive list.

As we are going to construct a visual representation of a model step by step this is our first point of reference. As we develop the model we will highlight each new element in **red** and then revert it to **black** when we introduce the next new element. Visually **Thoughts at Time 1** (**T1s**) can be represented by the circle below:

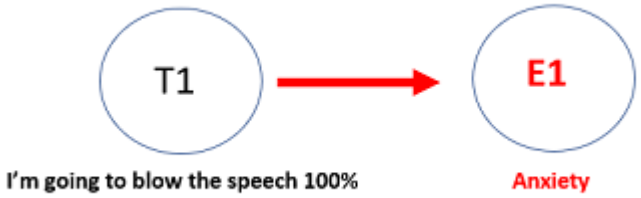


Bill will likely have an emotional experience to any of the **T1**s that arises after the conversation with his boss. If we take one of our example **T1s**: "I'm going to blow the speech 100%",

Bill will likely have the emotion of anxiety arise in response. We will call each emotional reaction to a **Thought at Time 1 (T1)** an **Emotion at Time 1 (E1).**

Bill might also have other **T1s** arise at the same time. If the **T1** of "How unfair is it that I got roped into this" comes up, it might be followed by an **Emotion at Time 1 (E1)** of frustration, for example. The diagrams below illustrates both of these.

Example 1



Example 2

Thoughts and emotions are not usually experienced one at a time like a simple queue to get into the restaurant. Rather they come like a gang of teenagers throwing snowballs at us from different directions. However, to help us understand and construct our maps and models we will just follow one of these **T1s** on its journey for now.

We are clearly marking the difference between a thought and an emotion. Often this distinction is lost in the hail of snowballs we can experience.

The emotions we feel at **E1** act as action tendencies. They are part of our makeup and drive us towards performing (or not performing) some sort of behaviour. We can now add another element of the model. **Behaviour** is denoted by the letter B and

is highlighted in the next diagram. We haven't labeled the circle **B** with anything yet as we will come back to it in more detail a bit later and rather than oversimplify now we will just keep it on the shelf until we need it.

Some modern psychological approaches just work with these three variables in various ways. A common assumption underlying these approaches is that thoughts, emotions and behaviours are all inter-related and the thoughts (or **T1**s in our case) drive much of your emotional experience (or **E1**s in our case), which then drives much of your behaviour (or **B** in our case). We will construct a higher resolution map than this in this chapter. But let's stay at this resolution for just a bit longer.

To jump to another example for a moment. A 16 year old is going to their first party with alcohol involved. They hear that the school bullies will be there. Their **T1**s might related to thinking he will be bullied. A prominent **E1** might be anxiety. Options considered for **B** might be avoid the party altogether, only go with a large group of friends and keep a low profile, or get drunk first to numb the anxiety. Or combine two **B**s.

If Bill decided he needed to get help for his anxiety, and he visited a psychologist using a form of modern "evidence based practice" the following dialogue might be indicative (assuming the psychologist has some understanding of Bill's underlying psychology):

Psychologist: I see you have a list of thoughts that you think are driving your anxiety about this upcoming speech. Let's look at the one that is top of the list: "I'm going to blow the speech 100%" So, how many speeches have you done in the past?

Bill: Umm…. Something like 15.

Note: the psychologist has ascertained that Bill has perfectionistic tendencies and this informs where the psychologist will take the process next.

Psychologist: So how many of those have you blown?

Note: the psychologist may make the assumption that Bill has had a previous traumatic experience with speeches and then

overcompensated after that to make sure that never happened again. This won't always be correct but the odds favour this as a possibility and often forms a beginning basis of inquiry.

Bill: I had a speech in Year 9 on hot air balloons. It was a humiliating disaster. Someone in the class had a lot of experience with them and asked me all sorts of questions I had no answer to. It took me months to get over the teasing and humiliation.

Psychologist: What about the other 14 speeches you mentioned? How did they go?

Bill: Well, I can't say any were fantastic but I haven't really blown any since then I suppose.

Note: If the psychologist's perception that Bill is perfectionistic then this is an expected answer as someone with perfectionistic tendencies is likely to find fault with their achievements by default and maintain attentional focus on what they could do better.

Psychologist: So let's go back to the troubling thought you wrote down: "I'm going to blow the speech 100%". So there is a 100% chance you'll blow this coming speech based on what you have just explained to me about your past experience with speeches?

Bill: Alright, now you put it that way, its probably a bit of an exaggeration. But it still feels like 80% chance.

Note: the psychologist may now work through the rest of the list of troubling thoughts or the most troubling of them if there are time constraints. The idea behind that approach is that if the thoughts are filtered through a more "realistic" lens then the emotional intensity (in this case the E1 of anxiety) will lessen and the need to undertake compensating behaviours will lessen. The negative intensity of the experience would hopefully reduce according to these approaches.

The preceeding is a basic example of a possible therapeutic interaction Bill might have. We are not going to criticize this approach, but take the subjective perspective that in most cases working purely at the **T1 - E1 - B** level may not be enough to achieve Bill's psychological goals and it will likely fall far short of helping Bill optimise his psychology in a long term way. We will show how as we journey through our model construction.

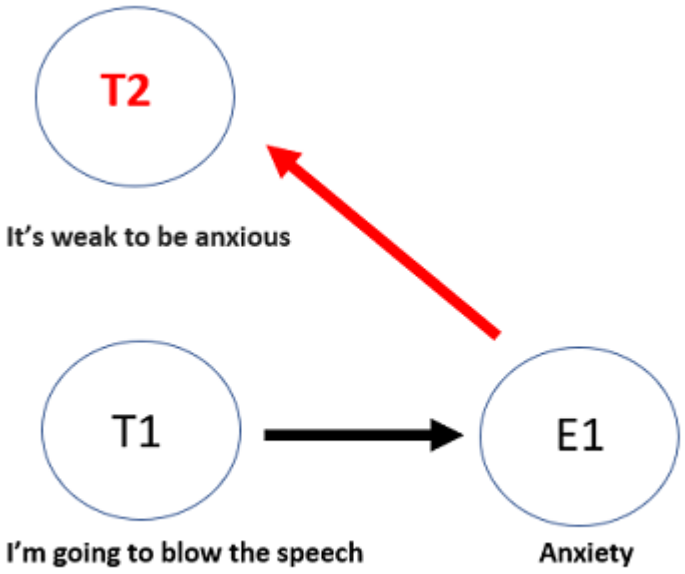
Now things will start to get interesting. We will add another level. When Bill has his **E1** of anxiety, this will trigger

thoughts in response to Bill's **E1**. We will call these thoughts, **Thoughts at Time 2**, or **T2s.**

T2s can fit into a number of categories and some possible examples of **T2**s that may be relevant to Bill are:

Eg 1: **T2: "It's weak to be anxious."**
Eg 2: **T2: "If I wasn't incompetent I would be able to deal with this without Anxiety."**
Eg 3: **T2: "It's unhelpful to be anxious."**
Eg 4: **T2: "Anxiety is ruining my career."**
Eg 5: **T2: "Anxiety has stuffed up my career, because I haven't been able to handle this stuff properly."**
Eg 6: **T2: "There must be something wrong with me as I don't see others getting so anxious about these types of things."**
Eg 7: **T2: "I can't change"**
Eg 8: **T2: "These physical sensations may be damaging to my health in some way."**
Eg 9: **T2: "My speeches go okay, so why on earth do I keep worrying about this so much. That's just stupid!"**
Eg10: **T2: "This is reminding me that my life just isn't working."**

Let's draw in our next shape on the model, the **T2** and use example 1 above, **"It's weak to be anxious"**.

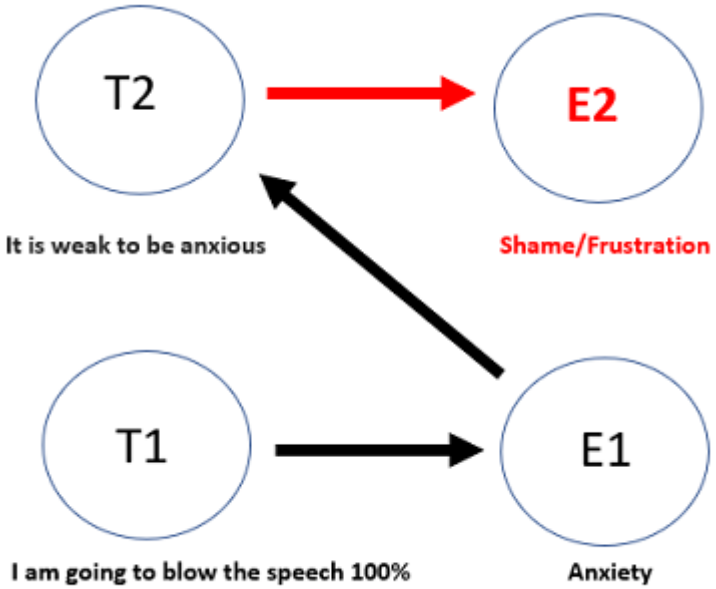


There are potentially thousands of possible **T2s** that may arise for Bill but they all share the same feature of being triggered by the **E1s** themselves rather than the impending speech in this

example. **T2s** can relate to appraisals about: a particular emotion; the experience of emotion in general; the causes of emotion; the legitimacy or otherwise of the **T1s** that triggered a process; appraisals about ability to cope; appraisals about change; just to name a few. Any cognition that comes in response to an **E1** could possibly be categorised as a **T2** for our purposes, although some will be more relevant than others.

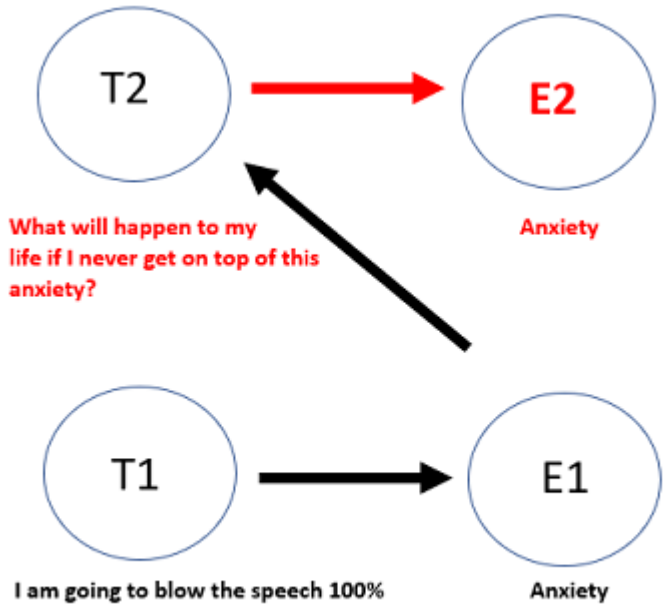
Most **T2s** that we are concerned about have a self-critical or self-deprecating flavour to them. Even **T2s** like: "It's unhelpful to be anxious", which doesn't appear on the surface to be self-critical, often lead to the next question, "why am I doing it then?", which itself has implicit critical undertones.

When Bill has **T2s**, he is going to experience more emotion following the **T2s** arising. We will call these emotions: **Emotions at Time 2**, or **E2s**. Let's draw in the **E2** circle in our model.



As can be seen we have put a label of Shame/Frustration here. Shame and frustration are so common that we will put this in by default. We should note that any emotion can be at **E2** but when emotions appear at **E2** they tend to be "weaponised versions" of emotions. We are not saying there are specific **E1** or **E2** emotions, but we will develop the case that the **E2** versions are the radioactive, problematic ones and they are the ones usually slightly outside of our line of psychological vision.

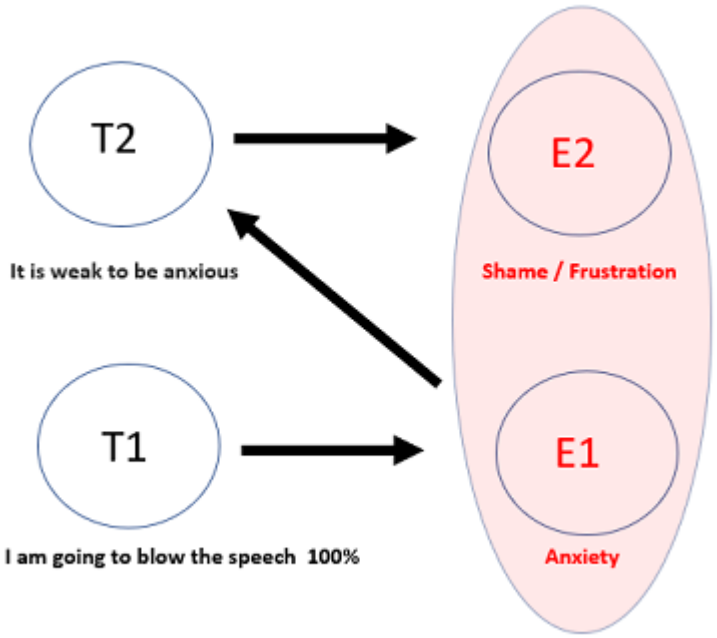
Let's look at an example where anxiety appears at both the **E1** and **E2** level. Follow the next diagram through its logic.



In this example, we have our usual previous starting point at **T1** and **E1** with "I am going to blow the speech 100%" at **T1** and the emotions of anxiety appearing right after at **E1**. However, now that anxiety at **E1** has triggered a **T2** response which is "What will happen to my life if I never get on top of this anxiety?". The emotion of anxiety is now turbo boosted at **E2**. However, the anxiety at **E1** and **E2** is different. At **E1** it is linked specifically to the impending speech and is correlated with that thought. However, the **E2** version of anxiety has an existential quality about it, a form of radioactive gas that is harder to contain. Its the difference between ice (**E1**) and water vapour (**E2**). The water vapour is harder to contain, define and find the clear boundary around than the block of ice.

This can be challenging material to consider because it is most likely not how you have been conditioned to think about your psychological experiences.

Let's press on as we continue to increase the resolution of our map. At this point we could say that Bill's emotional experience is a combination of **E1** and **E2** emotions. But Bill will not likely realise that. He will likely label his emotional experience by what is appearing at **E1** in his experience. Usually that process is describing headline emotions such as "I'm anxious"; "I'm angry"; "I'm depressed"; "I'm stressed". In our entire model the **E1**s are the most attention seeking, noisy variables and can distract us from the nuances of what is going on elsewhere in our psychology. We can draw that in a diagram to visualise it below.



The anxiety at **E1** that Bill encounters is most easily accessible and noticeable. It is hard for Bill to notice the **E2s** of shame and frustration he may be also feeling because **E2s** will often be obscured by the immediate "intensity" and attentional focus hijacking of the **E1** emotions he is experiencing.

A central point we are developing is the proposition that the emotions at **E2** are the source of the psychological destabilization and any ongoing damage; the diffuse, acute, weaponised versions that are pulling Bill's strings from the shadows of his mind.

The E1s aren't the problem at all. Let that sink in for a second. Because we only usually notice the **E1**s we experience we naturally think they are central to our problem/distress/unhelpful behaviours and think that if we can just get those **E1** emotions managed, removed, accepted, or under control in some way we will be where we need to be. We are proposing that **E1s**, whether depression, anxiety, anger etc felt at **E1** are not the issue, however much it feels viscerally that of course they are. This might appear like a ludicrous or irrational proposition that triggers all sorts of defenses and questions. It might even be offensive to some people. People sometimes commit suicide when they are very depressed don't they? How can depression not be relevant? We will spend a lot of time, step by step to clarify exactly what we are talking about and to justify the legitimacy of the subjective map we are creating.

We will develop our argument in a minute. But first, let us finish our example. Bill is experiencing a combination of **E1** and

E2 emotions, even though he might only be aware of an **E1** emotion of anxiety. It is like different pieces of coloured plasticine rolled together to make one ball and we just label it the colour that seems most prominent on the outside.

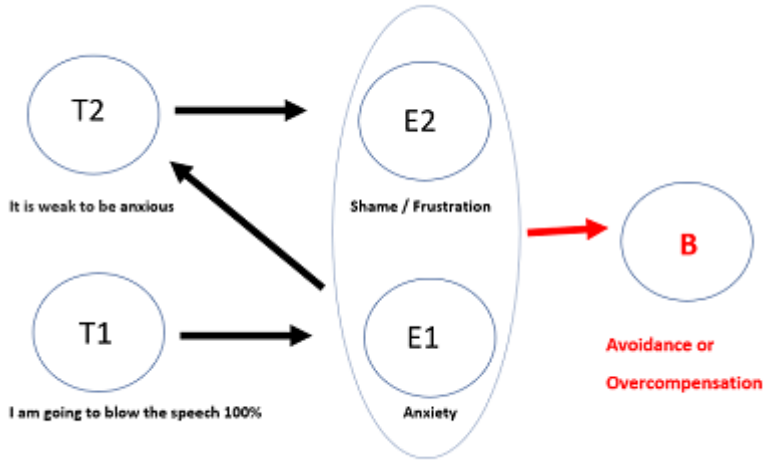
Let's step back from our model for a minute and talk in simple terms that are more naturally relateable. In Bill's example, his felt emotional experience at this point might be labeled as the so-called "fight or flight response."

Bill's biology starts to kick in, telling him:

"Danger! We're not safe here."

It's partly a biological reaction. We feel a drive to contend with the threat and return to safety. Thus we are driven to do **Behaviours (Bs)**, can make us safe as quickly as possible.

Let's add **Behaviours (Bs)**, back into our model below.



When it comes to the speech Bill is due to give next week, he may feel there is a proverbial lion in the room as he contemplates his imminent future. There are potentially two common types of **Behaviour (B)** that Bill might try to get safe. The first would be outright avoidance, which is the first label under B in the model, or the evolutionary equivalent of "running up a tree" when a lion may be in the vicinity. Some of the options that may quickly cross his mind and appear as a metaphorical tree might be:

- **How do I get out of this?**
- **How do I put it off?**
- **Can I make up an excuse like illness?**
- **Can I get a colleague to do it somehow?**

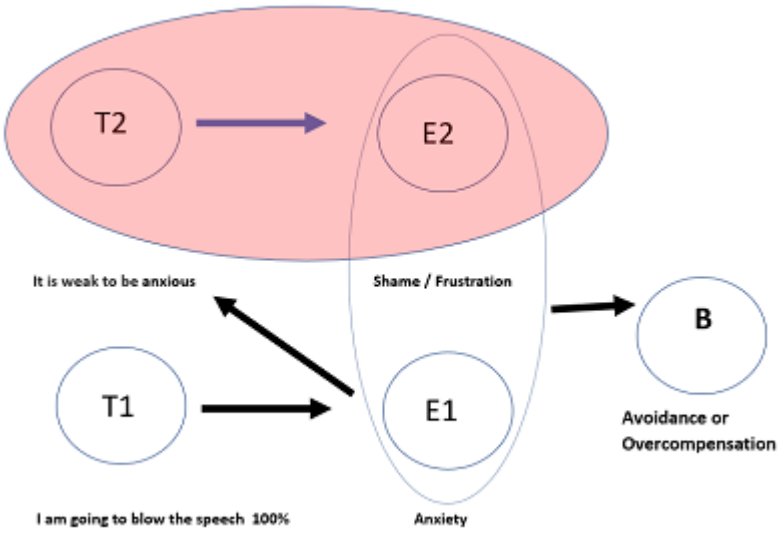
- **Should I just quit my job to avoid the whole humiliation of it?**

If outright avoidance of the speech was impossible for Bill for whatever reason, such as being told he would be fired if he didn't do it, and therefore would not be able to pay his bills, Bill is likely to move into what we might term "over-compensation" behaviour to manage his "anxiety" and pursue safety that way. This might involve staying up until 3am every night until the speech is due, researching, rehearsing, perfecting, trying to neutralise the threat and get a "bulletproof" structure that won't be judged negatively by the time the speech has arrived, and hence achieve "safety".

However, Friday may come along and Bill may still feel high levels of anxiety, but he may also begin to create a confirmation bias for his behaviour and say to himself: "I feel anxious, but imagine how much more anxious I'd feel if I hadn't done all that work the last few days. Maybe next time I need to stay up until 5am to remove the anxiety properly."

Both avoidance and overcompensation are strategies Bill may employ to get safe from the threat he feels. Bill might have a tendency to do one or the other in work situations like this. Interestingly he may employ a different strategy in a different context. While at work Bill may employ overcompensating behaviours, socially when feeling threatened Bill might use avoidant responses. These might be automatic and are usually just the quickest way to "get safe" in the moment. It is often a lot easier for Bill to say to a friend he can't go to the social function than it is to say to the boss that he can't do the speech or the report that is due. The risk and consequence profile may differ for Bill in different contexts.

The thrust of our discussion to this point is to propose that the **T2/E2** layer is the "main game" in this system so far. **T1** and **E1** may not be anywhere as significant as we think and devoting all our time to the **T1/E1** level may be like a dog chasing a parked car. As a visual aid we can highlight this in the diagram below.



Bill's **T2**s are really defining what the reality of his E1s are for him. That is, his full anxiety experience at **E1** is determined at the highlighted **T2/E2** level in the diagram.

At this point it is common for some reading this to think something along the lines of the following:

*"Okay, I'm sort of onboard with the idea that if I was anxious at **E1** and then I beat myself up about it at **T2**, I'd probably make the experience worse for me, with emotions such as Shame and Frustration or others at **E2**. That would increase the intensity of the whole thing.*

*But I'm not necessarily buying the idea that anxiety at **E1** is purely benign, nothing, just data. I think it's pretty bad when **E1**s are there sometimes, it's just possibly made worse if you add some **T2**s and **E2**s into the mix. I don't think **E1** is a good thing. **T2** and **E2** feel like they are putting petrol on the fire that has already been lit by anxiety, depression, stress, anger, etc at **E1**."*

While that monologue may seem a reasonable analysis from our conventional psychological conditioning we will investigate further and make a case for the lack of importance of **E1** emotions in any interventions required to optimise our psychology at any given moment.

For that we will start with a thought experiment. We will artificially hold some variables in this thought experiment constant to be able to highlight what we want to highlight. If you become aware of this it doesn't damage the philosophical example. We could let all variables roam free and the theory will be consistent. However, it would be far more intellectually demanding exercise to follow all the moving parts

simultaneously. So let's freeze some less pertinent variables at first.

Here we go. We have blindfolded and sedated adult twins and taken them to the biggest rollercoaster in the world. As they are twins they are genetically identical. It should be noted that this experiment would not pass any university ethics department since somewhere around the dark ages! We wake up the twins with smelling salts after having placed them both next to each other on the front carriage of the rollercoaster. As they regain consciousness and start trying to make sense of their situation we say "enjoy the ride" and press the start button on the rollercoaster. They instantly drop 20 stories then the ride goes up, down and sideways for 10 minutes. Everybody on the ride has their arms in the air screaming.

At the end of the ride we ask the twins if they would mind doing some psychological and physiological tests for us related to the intense experience they just had. They happen to agree to our request. Blood tests show elevated cortisol and adrenaline levels (commonly released during an anxiety, fear, or stress reaction) for both of the twins. Both of their blood pressure readings come back as 180 over 120 for one twin and 182 over 122 for the other. Basically the same. The heart rate of one is 180 beats per minute and for the other it is 178 beats per minute. Again, basically the same.

Both are then given psychological measures for anxiety/fear and they both score in the upper ranges. Symptoms such as dry mouth, shaking, racing heart, and sweating etc are endorsed by both.

All in all we conduct 153 different tests covering all possible psychological and physiological variables and on that basis the twins cannot be distinguished in an meaningful way. We are basically building a multidimensional, high resolution picture of their **E1** experience through this situation. They recorded very similar results for everything we measured. This may or may not surprise us due to the identical situation they just went through combined with other elements such as identical genetics. So as we measured it, their "emotional activation" as a placeholder for anxiety or fear labels was the same.

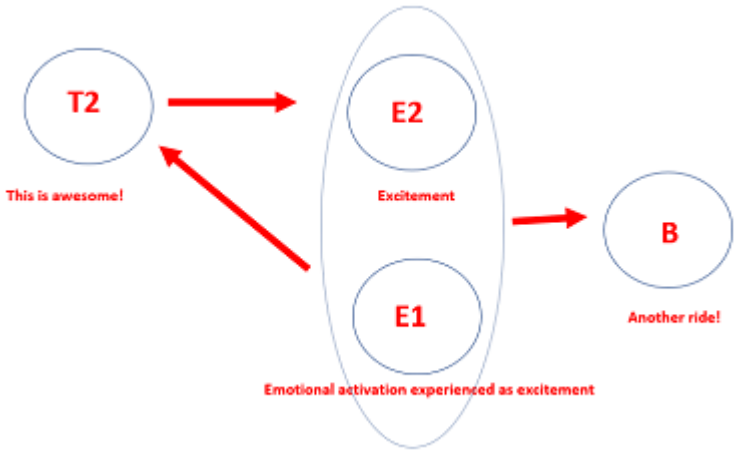
We thank them for their time and let them go on their way. This is where things become interesting. One of the twins immediately and excitedly goes to the end of the queue for another ride, whilst their sibling almost runs to the car park, still shaking and returns home traumatized by the experience. This trauma is still measureable months later.

What happened here?

We just showed that their **E1** experiences were close to identical. However, their behaviours and interpretations are poles apart. We are contending that it was their **T2** interpretations of their **E1** emotions which created their perception of reality and the resultant behaviours of each. Thus their **E1**s were the same but their **T2**s and **E2**s were different. Interestingly we set up the controlled experiment in such a way that they didn't have time to construct cohesive initial **T1s**. If we had told them about the experiment a week ahead of time then it is likely that we would have confounded the experiment as their **T1**s would most likely have been very different to each other and influenced the other variables in their system. And that will be the real life reality we will work with as we proceed in fully fleshing out our model and using it day to day.

To visually map this we have diagrams relating to twin A and twin B below. As we removed **T1** initially, somewhat artificially and arbitrarily, by the setup of our experiment (by driving an emotional reaction as soon as they regain consciousness) we have removed it from the diagrams. Of course, once the ride is over, **T1s** would of course be part of the ongoing systems of psychological response for the twins.

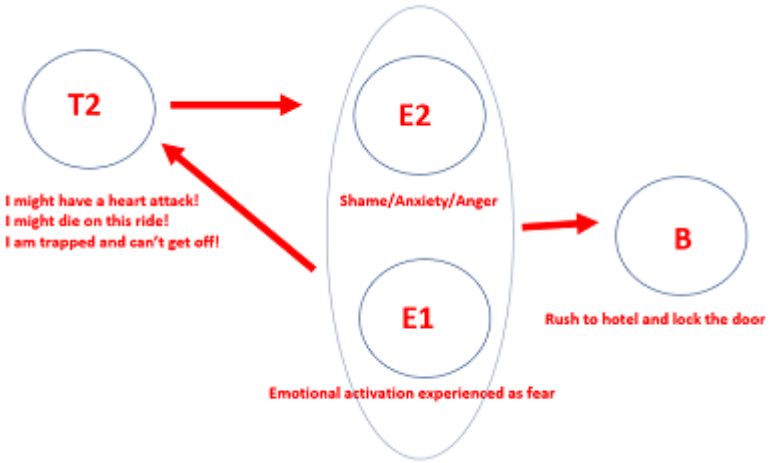
Twin A example pathway



Here we can see that Twin A experiences the emotional activation (**E1**) on the ride as excitement as this is reverse engineered from their **T2** interpretations of that activation at **E1**. One of those possible interpretations at **T2** is shown as "This is awesome!" which flows to positive **E2s** such as an

escalation of excitement amongst other similar emotional flavours. The addition of the **T2** and **E2** layer on top of the **E1** activation leads to the immediate behaviour (**B**) (or desire for that behaviour) of Twin A lining up for another ride.

Let's look at the experience of Twin B.



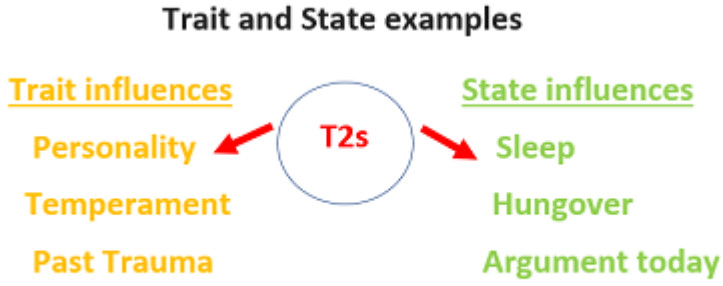
For Twin B we can see that the emotion activation (**E1**) on the ride is experienced as fear as this is reverse engineered from their **T2** interpretations of that activation at **E1**. We have written in 3 possibilities of **T2s** that might occur, possibly simultaneously for Twin B: "I might have a heart attack!" plus "I might die on this ride" plus "I am trapped and can't get off!". Following from these **T2**s could be emotions of Shame, Anxiety or Anger separately or in combination. The addition of the **T2** and **E2** layer on top of the **E1** activation leads to the immediate behaviour (**B**) (or desire for that behaviour) of Twin B rushing to the hotel and locking their door.

So we are arguing that Twin A and Twin B are having the same E1 experience, they are just interpreting the psychological and physiological variables that make up an E1 activation differently which leads to different processes and outcomes for Twin A and Twin B.

In absolute terms was the **E1** a bad thing or a good thing? It was neither. It had no inherent positive or negative valence in and of itself. Each twin had to wait for the instantaneous feedback from **T2** to decide how to interpret the experience at **E1**. As these processes occur so quickly we need the equivalent of a slow motion camera to notice the pathways. As the real time experience will miss these nuances. However, just as we can't see the hummingbird's wings flapping up to 80 beats a second we don't doubt they are when we see the blur. In fact, it is likely that Twin A and Twin B will have fused together their **E1s** and

T2s and **E2s** together unknowingly with a broad label of something positive for Twin A's self assessment of their experioence and something negative for Twin B's self assessment of their experience. They may not even be able to communicate effectively with each other about their experiences. Twin A is not going to think (unless perhaps they have read this) that they had the same **E1** as their sibling just different **T2s** and **E2s** leading to different behaviours afterwards. Twin A may think that Twin B is boring and Twin B might think Twin A is just reckless as they will each see their individual experiences as either good or bad and may project a flaw on their counterpart to explain the different reactions.

If, as I hope we have established, that the **E1s** for Twin A and Twin B were the same then why were the **T2s** so different for each. We will give a partial answer now and reveal the rest of the answer in due course when we birth the appropriate part of the model. **T2**s are formed from a combination of filters. They can be broken into two broad categories. The first category are trait like filters. They include elements such as personality, temperament, past traumas etc. Elements that, while possible to change, are more stable over time. The other category of filters are state like filters. These are elements that are more short term activations. How much sleep you have, whether you are hung over or not, if you have had an argument with someone today are a few examples of these state like influences. Trait like influences and state like influences combine to colour your **E1** activations.



To repeat, our contention is that **E1s** are not as relevant as you think and the action lies at the **T2/E2** level. We are saying the **E1**s are benign. This does not mean they can't be activating or deactivating processes. Anger and anxiety are activating processes, while depression has a more deactivating effect on our nervous systems. But whether those experiences are seen as positive or negative experiences are completely determined at the **T2/E2** layer. There is no positive or negative valence at the **E1** point itself. Our rollercoaster analogy opened the door to this perspective. On the surface it makes sense for us to try

to "get on top" of our **E1s**, as the **E1** is the most noticeable and "noisy" variable in the model. However, we will propose and set out to justify the position that it is the least important variable in the model. But like a toddler acting out it tends to get all the attention. Countless self-help books and therapy variations come into the world every year, a sizeable percentage of which, explicitly or implicitly target the **E1** area. Maybe our assumptions need to be updated about where to direct our attentional focus for psychological optimisation. Let's continue the journey and see if you agree when we reach the end.

The Itch

A second example will highlight other aspects of the paradigm we are constructing. Let's take a person who had a bad day yesterday, and they were stressed or anxious or angry or all of the above at different times. If this person were asked about the course of the day they might describe something similar to the following:

"*I woke up feeling anxious and then settled down a bit for most of the morning as I got distracted and busy. Then, after that phone call just before lunch, it spiked again as I worried about the implications. Then it settled down a bit after lunch as I was busy again. Then it hit me as I was trying to go to sleep and I had a restless night*."

This most likely seems a reasonable narrative for a person to give about an emotionally destabilising day the day before.

However, if this person was then asked how many itches they scratched yesterday, what do you think they would likely respond. How many itches did you scratch yesterday? The response might be something like "*I don't remember, I don't even think I had any itches yesterday that I scratched*."

Thus, there is likely to be no awareness or memory of any itches yesterday.

Ironically, you might find right now reading this that you are noticing some itches. This would be very common. And the more I discuss itches in these lines the higher the probability your awareness will be directed to notice some itches you are experiencing right now. As I write these words I can feel an itch starting on my right shin. The bottom of my left foot is starting to itch and I'm contemplating taking my boot off to get at it. And now there are a couple popping up on the back of my head and my left shoulder……

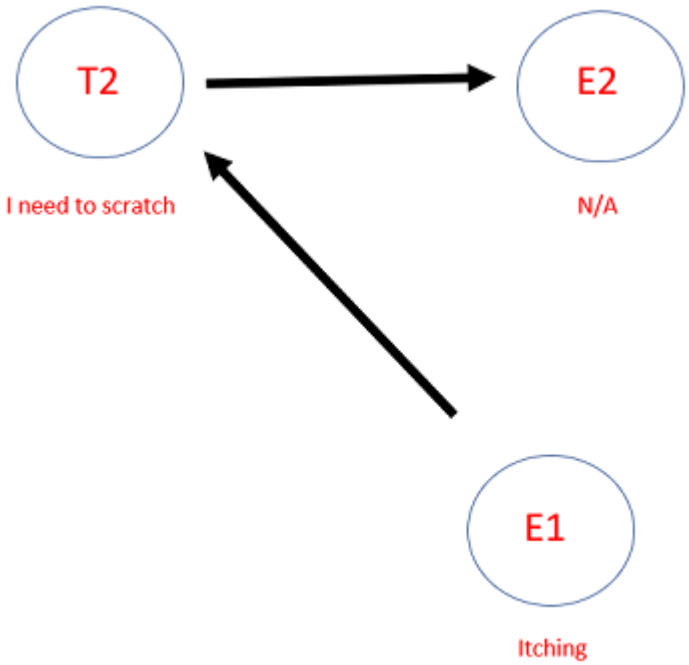
If this is the case for you, what is happening here? The itches weren't apparent before the discussion. Is the discussion

directing attention to itches that were there already but were unconscious? Or, is the hyper-awareness creating new itches where none were before? It is an interesting question and irrelevant for our discussion. What is apparent is that a change in our attentional focus can change our experience of reality. Attentional focus is a key part of our model and we will return to the concept again and again from different angles later.

Why can't you remember whether you had any itches you scratched yesterday unless you have a current serious skin condition that is predominating your thinking. We will return to the model for some clarity. To start, let's make itching an honorary **E1**. **E1**s are by definition emotions so it is not strictly part of our map to include a physical phenomenon such as an itch but it helps us illustrate.

The reason you most likely don't remember any itches you scratched from yesterday is that you have no well developed **T2s** about itching, except for perhaps "this is annoying I need to scratch." And that **T2** might even be semi-conscious or completely unconscious. I even remember talking to someone who was scratching their lip for 20 seconds and after they finished I asked if they were ok. They were surprised and asked what I meant. When I mentioned they were just scratching their lip for 20 seconds they appeared stunned, paused, thought, and then replied that they just realised they were and no they were fine. They had no conscious awareness of their actions.

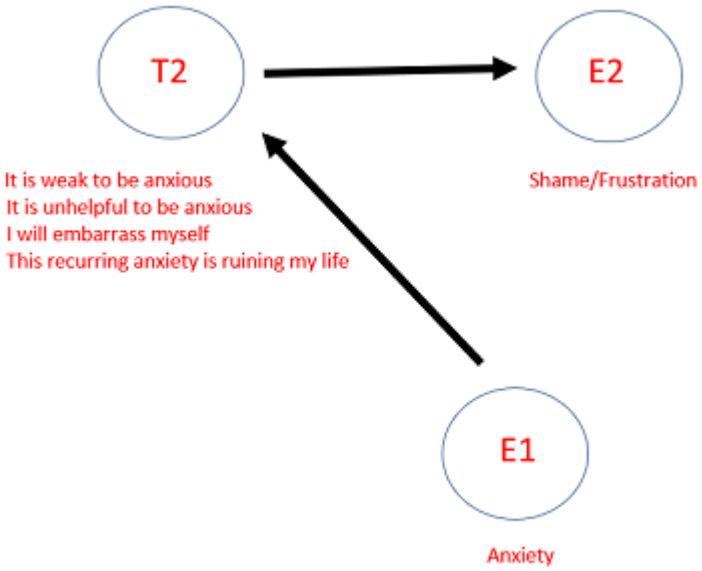
Itching



We can represent relevant aspects of our model with this simplified itching example. Our honorary **E1** of itching now triggers a conscious/semi-conscious/unconscious **T2** such as "I need to scratch." Interestingly, this cognition of I need to scratch does not trigger any extra emotional content of significance at **E2**. Again, it should be noted, our **E1** of itching does not fit strictly into the model and that is a large part of the reason why the **E2** is not as relevant or apparent. This artificial example is purely for comparison purposes for the next section.

Contrast the preceding example with a variation of our previous discussion related to anxiety. We have written in a few random **T2s** to illustrate.

Anxiety



You can see that unlike our itch example it is very unlikely that the honorary **E1** of itching is associated with self-critical **T2s** such as

- **It is weak to itch**
- **Itching is ruining my life**

Unless, of course, a serious skin malady is chronically present in a person's life. There is less oxygen for **E2s** such as Shame and Frustration when the only **T2** is "I need to scratch."

One of the natural outcomes of the process we are undertaking is that in the end you may find you are working with all your emotions in a similar way to the way you deal with an itch. That is, an emotional stimulus arises at **E1**, you take the information of that emotion on board and respond in a way that presumes it is functional data (with screening mechanisms that we will detail) and uses the potential of that information to move you closer to your needs, goals or values in the moment. Once the emotion at **E1** has its value extracted it fades from your psychological system rather than adds barnacles to your ship, depreciating or adding a negative spin to your self-concept along the way. We will see how this could evolve as we proceed. We can apply this across the entire palette of emotional experience including depression, anger and any other flavour of emotional experience. We utilize, optimize, move on. Not avoid, shut down, or attempt to cut it out because of a series of semi-conscious or unconsciously conditioned **T2s** and **E2s.**

In the end, we won't have to worry anymore about controlling **E1**s, because in our model they are not a "problem" in and of themselves. Most people try to control their **E1**s, if possible,

avoid situations so they don't arise in the first place. However, we will develop a more functional way of dealing with the **E1**s than avoidance or control because they will be seen as benign and non-threatening in the end. Trying to control, manage or eliminate **T1s** and **E1s** through all sorts of mental gymnastics is exhausting and usually provides a low exchange rate for your effort and only a temporary shift for that effort. It's like the plates spinning on sticks in a circus where any lapse in effort can lead to the risk of plates crashing. It is the **T2/E2** layer which is radioactive in our map. You may find it a far more profitable place to exert your effort as well as simpler and more efficient. You want your garden hose to put as much water on the garden and less on the concrete. Even the more modern concept of acceptance is not strictly what we are aiming at here as we will explain next chapter. You might learn to "accept" an injury or illness, but does the concept of acceptance seem relevant to a beautiful meal, or a deep contentment that arises in the moment. In other words, If something you think is negative is "misperceived" where does that need to "accept" it come in once that misperception is resolved?

Chronic Pain

We will move into one last example which will use another honorary **E1**. On that surface this example may appear as an odd choice to see through the prism of the model as chronic pain seems an objective experience. So how could the **T2/E2** layer influence this in any meaningful way?

Chronic pain can be our new honorary **E1**, just like itching was before. But, unlike itching it is harder not to notice if you suffer from chronic pain.

I witnessed an interesting experiment at a pain conference once. Most of the participants in the conference were medical specialists at the hard edge of medicine. Many thought that psychology had little relevance to chronic pain and it was correct surgery and medication that were the tools of most use for a chronic pain sufferer.

There were approximately 200 people in the auditorium. A large, mobile, whiteboard was placed in the middle of the audience so that 100 people could only see one side and 100 people could only see the other side.

Everyone was handed a plastic cup with ice in it and a napkin. The instructions were to hold the ice in the right hand for three minutes and to calculate the highest level of pain that was experienced out of ten during that three minutes. Zero being absolutely no pain and ten being the worst pain ever experienced in life. One further instruction was to read the words on the

whiteboard you could see in front of you continuously while working out this peak pain level.

It turned out that on one side of the whiteboard were written words in green ink such as:

- **healing**
- **soothing**
- **calming**
- **relaxing**
- **etc**

On the other side were words written in red, including:

- **damage**
- **danger**
- **scarring**
- **burning**
- **etc**

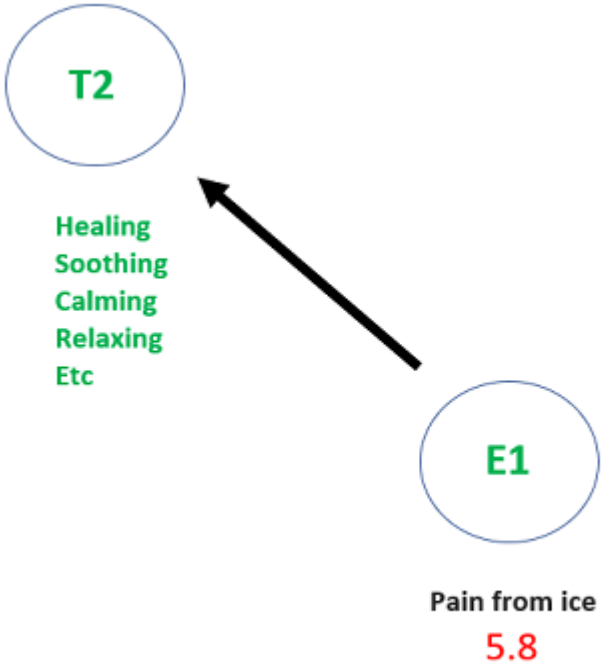
At the end of the three minutes everybody called out their peak pain level out of ten, one at a time. These were recorded by a student on another whiteboard at the front of the room. Columns on the left for side of the room reading the green words and columns on the right for those reading the red words.

The averages for the two groups were worked out by everyone with a phone calculator app. The average peak pain level of the group reading the green words was **5.8**, whereas the average peak pain level of the group reading the red words was **8.1**.

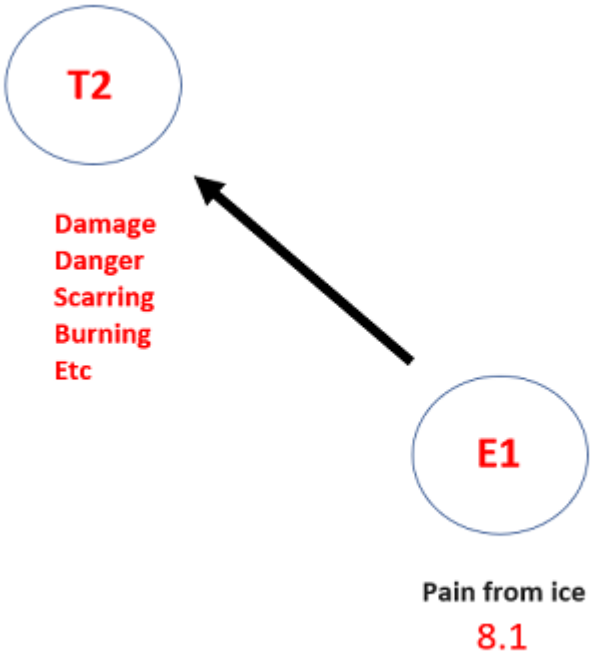
Gasps were heard in the audience. There was a real, undeniable, upward bias for those reading the red words and a corresponding downward bias for those reading the green words. It was clear to everyone in the room that psychological variables were in play. No further unpacking of the exercise was undertaken because the point was made.

But let's run this through using the part of the model we have constructed already. We will show visually the green word perspective first then in the second diagram the red word perspective. As this is an artificial example using an honorary **E1** in a way we hadn't originally intended we will just show the **E1** and **T2** circles to unpack the conference experience.

Group reading the green words



Group reading the red words



Through our lens we could say that the people reading the green words were subtly being influenced, temporarily at least, to filter their **E1** pain experience through the artificially implanted **T2s** such as healing, soothing, calming, relaxing, etc.

This helped them interpret their **E1** pain experience subjectively at an average of 5.8 out of 10. Conversely, we could say that the people reading the red words the whole time were subtly being influenced, temporarily at least, to filter their **E1** pain experience through the artificially implanted **T2s** such as damage, danger, scarring, burning etc. This helped them interpret their **E1** pain experience subjectively at an average of 8.1 out of 10. We should note that the green words did not lead to a process that "took the pain away" completely, but it did appear to have some subjective influence on the experience in comparison with the group being pushed the other way. It should also be remembered that this was only a three minute exercise.

Some may get concerned about having to work out what is a **T1** and what is a **T2** and what is an **E1** and what is a **T2**. You won't need to navigate this model at this level if your goal is a more optimized psychology. If you had a white t-shirt with a red stain on it you may not know what caused the stain. Was it tomato sauce, beetroot, red wine, blood or something else. You may want to send it over to the CSI lab to find out before you can do anything about it. But what if you have some wonderful super duper washing powder. If your goal is just a white t-shirt you can have that very quickly without ever knowing what the actual stain was.

At this point let's take a breath. You are half way up Theoretical Mountain. A bit more to go then its a smooth downhill ride after all the hard work. Our take home message thus far is that there is a lot more going on than our ongoing initial emotional reactions and that has a lot of implications for how we can view the process that unfolds as well as how to optimize our psychology in the face of that process.

Our next step will be to delve deeper into the implication of the these ideas. You may find that exploration profound, surprising and hopefully a little exciting! It has been said on more than one occasion that when you know the ideas that follow you can't unknow them. Strap in, and get ready to travel somewhere you likely haven't been before…….