Our Worldview After a Trauma

As a psychologist, I marvel at the tenacity and courage it takes for women to discuss traumatic experiences in therapy. It may not feel courageous in the moment; in fact, it may feel like the exact opposite. Trauma has been defined in a number of ways, but here I use psychologists John Briere and Catherine Scott’s (2015) definition: “an event is traumatic if it is extremely upsetting, at least temporarily overwhelms the
person’s internal resources, and produces lasting psychological symptoms (p.10).”

In the cognitive-behavioral model, we believe that what we think influences our emotions and behaviors, and that our thoughts and beliefs are foundational to how we experience our lives. By its definition, traumatic experiences are unexpected, overwhelming, and significantly impactful. How then, do we think about (let alone make sense of and integrate) something like a traumatic event? The beliefs we hold after a traumatic event may be very different from the beliefs possessed prior to the event, and sometimes we get stuck.

For example, let’s consider a woman (we will call her Liz) who believes that 1) she is a capable person and 2) she is generally safe as a single woman dating in the world. Liz agrees to be set up by friends and goes on three dates. While the first few dates were fun and enjoyable for Liz, at the end of their fourth outing her date starts to initiate sex despite Liz’s clear discomfort and attempts to slow it down. She ends up having sex that was unwanted and unsatisfying. Afterwards, Liz feels multiple emotions, including confusion, anger, shame, fear, and hurt. How does she think about and make sense of this experience in light of her prior beliefs about herself in the world? How might her thinking affect her next steps? Research supports that much of how we manage the impact of a trauma comes down to our thoughts and beliefs about the experience, even long after the event itself has occurred.

Below are some common examples of how Liz might have responded to the traumatic experience if we were to focus just on her thoughts and beliefs. Please keep in mind...
that the following examples are limited and meant to highlight a few of the ways that we may think about a traumatic event. They are not meant to present a “right” or one-size-fits-all way of responding to trauma.

Recall that Liz’s prior beliefs included: 1) I am a capable person and 2) I am generally safe as a single woman dating in the world.

Response 1: Maybe this means my date felt chemistry and that meant sex. But it felt like a violation to me because I did not want to move this quickly, and I tried to slow things down. It didn’t work - I felt disregarded in the process and unsafe. I will not date this person again, and will move on to date someone who is more respectful.

Here, Liz’s belief that she is capable manifests as a healthy sense of self-worth and motivates her to an action plan that includes honest self-assertion. She acknowledges that she did not feel safe having sex at the time and will take steps to ensure her safety by dating people who are more respectful. In this example, Liz’s original two beliefs remain intact and produces action that reinforces those beliefs following an unwanted sexual encounter.

Response 2: Why did that happen? Maybe there’s something wrong with me for not wanting to have sex that night. I’m probably overreacting and this is completely normal on a fourth date.

In this response, Liz modifies her first belief to a belief that I must be out of touch and overly sensitive. Instead of viewing herself as a capable person, she wonders if she is
inept when it comes to dating. If she changes her original belief about herself, her reaction to the sexual experience doesn’t reflect perhaps fair misgivings, but points to her as the one with unreasonable expectations. The second belief that she is generally safe dating in the world is maintained because she rethinks her experience as normative rather than a traumatic event.

Response 3: I can’t believe that happened. How could I have allowed myself to be in such an unsafe situation? Something is seriously wrong with me. It’s my fault and I should have known I would be in danger. The world has become a dangerous place.

This example draws attention to an instance where a trauma results in a rejection of all prior positive beliefs. Following the experience of unwanted sex, Liz no longer believes that she can trust herself. Instead, she views herself as flawed and to blame, and she sees the world as inherently dangerous.

These examples show just some of the ways our thoughts play a key role in life and in our suffering after a traumatic event. In therapy at CTWPS, we help our patients talk about and manage the effects of their traumatic experiences on their beliefs and worldview. Our work with our patients leaves us radically hopeful, as we are able to see just how much influence we can have in calibrating our beliefs to our most consistent realities, even following trauma.

If you recognize your own responses in the examples above and would like support in discuss them further, please consider reaching out to us for an initial consultation.
What does being vulnerable mean to you? Many women associate being “vulnerable” with feeling uncomfortable, exposed or even scared. Pioneering vulnerability researcher Brené Brown describes vulnerability as expressing our true selves, rather than the selves we believe we “should be,” to intimate partners.

Vulnerability does not guarantee that each partner’s needs will be met, or that the relationship will last, but we also cannot have lasting intimacy without it.

If you struggle to express your true self in intimate relationships, consider these three common myths that foster and maintain avoidance of vulnerability:

**Myth #1: “Being vulnerable means that I must share my deepest and darkest secrets.”**
Many women believe that being vulnerable requires that they unveil deep thoughts and personal experiences with their dating partner, often early in a relationship or in an intense “let it all out” fashion. Women who carry this belief often avoid self-expression altogether, due to the burden of vulnerability feeling too overwhelming.

Here at CTWPS, we support the concept that healthy vulnerability involves doing so with someone who has gained your trust over time. The ways that you express vulnerability can grow as that trust grows. In therapy, we work with women to build efficacy and confidence in expressing themselves (e.g., being vulnerable) in ways that are tempered and intentional.

For example, consider a woman who is uncomfortable expressing preferences with her girlfriend when planning activities to spend time together. In therapy, we may first challenge her to take more tolerable risks, such as practicing communicating these preferences (e.g., restaurant preference) to her partner. As she develops confidence, we may then work toward increasing her capacity to tolerate more intimate disclosures, such as desire to feel more connected in the relationship, or readiness to take the next step in the relationship.

**Myth #2: “Being vulnerable is a sign of weakness.”**

Our culture perpetuates the myth that “not being vulnerable” is a form of strength that protects one from getting hurt, and that, conversely, being vulnerable is a sign of weakness. By contrast, here at CTWPS, we view a woman’s capacity to be vulnerable with those that appear worthy of her trust, as a sign of strength. It is ironic
that it is women who avoid vulnerability who often experience their relationship needs not being met, as they may avoid all sorts of assertions within their relationship.

In therapy, we may ask a woman to track her thoughts and beliefs regarding what it means to be strong and weak in an intimate relationship. We would then specifically focus on beliefs that may be leading to unhealthy behaviors. For example, if she believes that being strong in a relationship means hiding unpleasant emotions (e.g., sadness or anger) from her partner, we would then explore ways that hiding those emotions may make her feel distanced and unheard by her partner, and ways that avoiding the expression of these emotions may lead to increased frustration and resentment. As she develops an understanding of ways that these thoughts and behaviors make weaken her, rather than strengthen her, in the relationship, we may then work toward increasing her confidence in sharing her emotions, appropriately and effectively, with her partner.

**Myth #3: “To show vulnerability is to be needy.”**

There is a difference between “being needy” and “having needs” in a relationship. Everyone has needs in a relationship. Vulnerability then is the honest expression of one’s genuine, legitimate, and healthy needs in a relationship to a trusted partner.

For example, consider a client who wants to feel more connected in her relationship, but is fearful of being perceived as “needy” by her husband. Because she is afraid to honestly express her desire to feel more connected in the relationship, she may end
up feeling frustrated and isolated. Then she may pick a fight with her husband because he spends too much time on his phone, nag him about the amount of time he spends at work, or complain when he starts watching television after dinner rather than pitching in with household chores. Ironically, while she is fearful of being perceived as needy, these indirect attempts at communicating her desire to feel more connected are likely to be perceived as needy or aggravating to her partner! In therapy, we would help this client develop tools and confidence to communicate in a way that is directly congruent with her goal of getting her needs met in the relationship.

While there is fear and risk associated with being vulnerable, there is also potential for the reward of deepening intimacy. In therapy here at CTWPS, we work with our clients to create a more flexible definition of vulnerability, and provide tools to build safety, confidence, and efficacy in being vulnerable in intimacy.

Even the most accomplished and confident woman may find herself from time to time
questioning her capabilities or value. Whether on the first day of a new job, on a date with a desirable partner, bringing home a first child, or talking to a big client, a woman may think, “I’m not good enough for this”, “I don’t belong here”, or “someone else would be better suited for this than me.” If these thoughts persist, however, it may reflect what psychologists Suzanne Imes, PhD, and Pauline Rose Clance, PhD named “imposter syndrome” - a phenomenon that manifests as self-doubt, a lack of confidence, and a belief that one is unqualified for her position and happened into it by luck or circumstance. For some women, the belief persists that she has somehow “cheated” or “tricked” her way into convincing others that she is capable. But internally, she feels like a fraud.

Studies have shown that imposter syndrome is significantly more common in women than in men, perhaps because women are more likely to attribute successes to luck or help from others rather than hard work, and more likely to attribute setbacks to personal deficiencies rather than outside factors. In other words, when a high achieving woman gets a promotion, she is more likely than a man in her position to attribute it to factors other than her own talent and skills. This sets the stage for skewed thinking about her abilities, and over time, it can reinforces the fallacy that she is “faking her way” through her achievements.

At CTWPS we see this kind of thinking often - ironically, often in especially brilliant, talented and accomplished women! The first steps toward managing imposter syndrome involve identifying thinking traps, working toward a more balanced self-
view, and engaging in constructive behaviors. Below are action items that we might engage in therapy for reducing feelings of fraudulence:

1) Reframe your thinking. Part of battling imposter syndrome is recognizing that it involves some non-truths. While a woman may be justified in feeling some nervousness about taking on a challenging new role (who doesn’t?!), it is usually not true that she is completely unprepared for it. Most likely, she is not actually a fraud - she has some training and experience that have led her to this position. We would encourage a client to practice telling herself the whole truth, and challenge black and white thinking, by taking an honest accounting of her work and accomplishments. When a client sees herself as undeserving of a promotion, we might ask her to concretely list out her qualifications and accomplishments, as well as her areas for development. It is important to be honest and realistic about the gaps in one’s expertise, but often the focus on this detracts from a woman’s attention to her accomplishments. By asking our clients to be explicit with us about her achievements, we can come to a more balanced perspective.

2) Challenge the presumption that you are a superb con artist (and everyone else is gullible). Because the belief that one is an imposter is hard to shake, it is important to seek out as much outside evidence as possible to balance one’s view. Drs Imes and Clance suggested an experiment to help a woman let go of the belief that she has tricked everyone. We would have the client imagine a person she believes she has tricked (i.e. a boss), have her role play telling that person specifically how she has
tricked them (i.e. "you gave me that promotion because I've charmed you and you like
me as a person, but you don't realize that I'm not really capable of managing the new
role"). Next, we would the client to talk back to herself from the perspective of that
person (i.e. to say as her boss, "I don't just give promotions to the people I like, I give
them to people who show promise"); or "It is insulting that you think my judgment is so
skewed by liking people - I know talent and skill when I see it"). Giving voice to
disconfirming evidence is an important part of challenging the idea that you have
tricked everyone. Developing an open relationship with a mentor or other experts can
also be helpful, both as a learning opportunity, and as a source of reliable feedback.

3) Change your language. An important behavior to address is in how a woman
speaks to and about herself. If a woman finds herself consistently attributing her
successes to luck, she can edit this by engaging in productive self-talk, i.e. “I contributed
to this project by…”, “I closed that deal by…”, “I got an A on that paper by…” We
encourage clients to practice demonstrating evidence of her competence on a daily
basis, and credit herself verbally for her achievements. This can also be practiced by
having a mindful moment at the end of a project, successful or not, in which a woman
writes down for herself what strengths and skills she brought to to the table. While
increasing positive self-talk is important, it is also useful to share one’s successes with
others. We encourage clients to celebrate their achievements! Share them with your
family, friends, and colleagues. While many women tend to focus on negative
feedback, it is important to balance this tendency with the positive. Practice
internalizing praise and practicing pride in your work by talking about it to yourself and
others; this will help your accomplishments to become integrated into your self-view.

4) Develop your “inner expert” and increase your self-efficacy. While we want to focus on our achievements, there is always room to grow! We might invite a client to set learning goals for herself, and develop expertise about the field in which she is feeling deficient. For a new mom this can mean taking a parenting class or spending time with other moms to share tips. For a rising professional this can mean taking continuing education classes, attending conferences, or reading books about her field. The behavior of building mastery is self-perpetuating; by learning more, a woman builds confidence and faith in her own legitimacy. Developing the quality of self-efficacy requires a “walking the walk” or “fake it until you make it” attitude, in which a woman pushes herself to embody and emulate the person she wishes to be, even if she does not completely feel it. We might encourage a client to push herself to volunteer for challenging tasks and take on the goals that are a bit intimidating. By “acting as if” and doing the behaviors of someone who is confident about a project, she can further rewire her thinking. The important thing to remember is to take ownership of one’s self-doubt and take action. Learn by doing! Anxiety is designed to make us avoid danger; we encourage clients to practice mindfully disobeying her anxiety and feelings of self-doubt, and delve into honing her skills.

It is essential to remember that those who struggle with imposter syndrome may be no less successful, competent, or capable than those who do not struggle with it. Our goal is to help clients who experience feelings of insufficiency and fraudulence to change
Many women in New York City strive to achieve ambitious goals in their personal and professional lives. When a woman works towards her goals in a balanced fashion, such striving for achievement can add great meaning and fulfillment to her life. However, when a woman’s self-worth is overly dependent on whether she achieves the goals she sets for herself, she becomes uniquely vulnerable to the trap of self-criticism.

Here at CTWPS, we recognize how self-criticism reinforces the cycle of perfectionism by weakening a woman’s self-esteem and, in turn, driving her to “prove herself” by setting incrementally higher standards for her performance. In therapy, we teach our clients how to catch their “inner critic” and how to respond to the events in their lives – successes and failures – with greater flexibility and self-compassion. Has your own inner critic been “acting up” lately? If so, the following tips may help you begin to broaden how you evaluate your worth so that it is informed by, but less dependent upon, your achievements:
1. Get to Know your Inner Critic

Given that you may be quite loyal to your “inner critic,” it can initially be difficult to notice when it starts “acting up.” In fact, many clients even express a reluctance to challenge their inner critic, due to the (fallacious) belief that it motivates them to work hard and meet their goals. Without their inner critic, these women fear that they will be less successful, less important, or unneeded in their relationships or roles. At CTWPS, we support our clients in challenging the fallacy that they must be self-critical in order to meet their goals, and we teach women how to successfully identify and catch their inner critic using various tracking exercises. For example, we may ask a client to keep a log of situations wherein her inner critic makes personal judgments (“I’m a total failure”) or critical accusations (“I’m a loser for responding that way”). Together, we would evaluate the consequences of such self-talk on her subsequent thoughts, feelings, and behaviors.

2. Identify the Costs of Self-Criticism

We also help our clients to identify the consequences of remaining loyal to their inner critic. For example, we may ask a client to look at a list of critical words her “inner critic” calls her for several minutes (Think: ugly, incompetent, unlikable…). If she were to rate her mood before and after the exercise, how do you imagine her mood would change? Most likely, her mood would worsen! Or, we may ask her to imagine that someone who she respects and holds in high esteem were to be followed around by a self-critical bully for a week, constantly criticizing her and ignoring all of her...
accomplishments. What do you think would happen to this woman? Most likely, her mood and confidence would begin to plummet. Bottom line: Self-criticism makes you feel bad!

3. **Distinguish Between Self-Criticism and Constructive Self-Feedback**

As you begin getting to know your self-critical tendencies, you may begin to recognize that you have been conflating self-criticism with constructive self-talk. For example, imagine a woman who recently gave a big presentation at work. In a debriefing meeting, her boss provided her with several points of positive feedback, as well as a few recommendations regarding how to continue refining her presentation moving forward.

If in response to receiving her boss’ feedback this woman were to be blindly loyal to her inner critic, she would likely berate herself for falling short of her own standards as a “strategy” to motivate herself to perform better next time. For example, her inner critic may say: “My boss clearly thought I could have done better. I totally bombed that presentation. I’m incapable.” The problem with this statement, however, is that it completely ignores and disregards the many strengths in this woman’s presentation!

4. **Develop a Self-Compassionate and Respectful Response**

Ultimately, our focus at CTWPS is to support women in cultivating skills to treat themselves kindly and flexibly, and to tolerate setbacks and perceived inadequacies.
Thus, in treatment, we would support the client described above in learning how to construct a new self-statement that honors her boss’ constructive feedback in a way that is more growth sustaining and balanced. For example, she may practice telling herself: “There were many strengths to my presentation, it was a great start. Next time, I will also focus on putting less text on my PowerPoint slides and speaking more slowly, as my boss recommended. This will make me an even stronger public speaker in the future.” The practice of constructing a new self-statement would help this woman to take responsibility and incorporate her boss’ constructive feedback into her narrative without becoming unduly self-critical.

We may also invite this client to consider what she would say to support a close friend who had received such feedback from her boss. Would she confirm her friend’s belief and say, “You’re right, I think you’re incapable, too, and you will probably never get that promotion you’ve been working so hard for”? Probably not! In fact, she would likely help her friend take stock of all the strengths in her presentation, and would normalize the process of receiving constructive feedback as one rises in her career.

Additionally, we may encourage this woman to gather “evidence” that directly challenges her self-critical belief, such as positive performance reviews, a recent promotion, or a specific point of praise from her manager. Together, we would cultivate an alternative perspective that integrates the kernel of truth in her experience with a more compassionate view of herself, such as: “I am generally well-respected in my role at work and tend to receive positive feedback from my managers. I may also
On the path toward self-growth, even the most talented and brilliant women experience setbacks and moments of self-doubt. Our ultimate goal is to support our clients in normalizing such moments as a healthy part of their experience, and to cultivate flexible and compassionate responses, both internally and as reflected in their behaviors.

This post is Part II in a series on cognitive-behavioral approaches for perfectionism. Check back for more posts in this series coming soon.

Peggy Loo, Ph.D, March 1, 2018

Getting A Second Wind: Revisiting Your 2018 Goals

Peggy Loo, Ph.D, March 1, 2018

It’s February 28th, which means we are 59 days into 2018 and for some (myself included) - the New Year's resolutions that looked promising and hopeful on January 1st may feel considerably less so. Whether or not you set yearly resolutions, we all
have some practice of goal-setting, whether it is in career, school, relationships, or personal life. While reaching goals often feels rewarding, unmet goals can elicit frustration, self-doubt, or self-criticism. These thoughts and feelings can often be enough for us to call it quits. However, this does not need to be the case. If the adage “experience is the best teacher” is true (and I think it is!) goal-setting (and striving positively) can always be an instructive and productive process.

First of all, let’s acknowledge that goal-setting itself can activate a whole range of automatic thoughts and emotions. For some, identifying goals can be motivating and exciting, whereas for others it may feel overwhelming and induce anxiety. We may experience optimistic thoughts, like “I think this will be a great experience” or possess skepticism and think “Well, any progress isn’t going to last”. As cognitive-behavioral therapists, we believe that identifying how we are thinking about a situation is just as important as the thought itself. Observing how we think and feel about goal-setting is a first step towards honest self-reflection, challenging unfair expectations of ourselves, and recognizing inaccurate beliefs about our ability that get in the way of goal-setting.

It may be helpful to ask yourself:

- What thoughts or emotions did/do I have about setting this goal?

- What information or experiences have I had already that supports that my thought is true? Is there any information that contradicts my thought as true?

Onto the act of goal-setting: While there are many ways to set goals, I have found
the S.M.A.R.T. acronym a helpful guideline (Doran, 1981). Is your goal Specific, Measurable, Achievable, Realistic, and Time-based?

Let me provide a specific example from my own life: I’d like to be more environmentally conscious in 2018, and in my goal-setting process, I have broken down my goal into a bite-sized chunk. For example, I decided: S - I want to reduce my material footprint on a daily basis, M - I will take my daily coffee in a reusable thermos, A - Yes, I have multiple reusable options in my home/workplace, R - I can make coffee at home or request that a barista fill my thermos when purchasing it, T - I commit to this every morning. I will continue for 3 months and then reevaluate how things are going. Although it can be tempting to set goals that represent the ideal life we’d want, identifying reasonable and smaller goals that account for your present reality is essential. In fact, choosing goals that seem to be smaller than you think you should choose is a good first step. Why? Because being successful in smaller goals allows us to begin building a foundation to support more complex goals (e.g. if I can bring my thermos to work regularly, then I can add the goal next of always carrying reusable shopping bags with me, scaffolding on the same habit I’ve already created). Making our goals overly ambitious sets us up for quick setbacks that typically result in a barrage of self-criticism which pulls us off track of problem-solving and habit building.

Importantly, there are always setbacks in meeting goals. How we respond to the setback is critical. Do we shame ourselves or over-personalize the setback (e.g., I
forgot my coffee thermos twice this week, so this week is a wash; How could I forget my thermos-am I just an irresponsible person?!). Instead, we can “take the shame out of the game” and get curious about what happened and do some fact-finding. Here at CTWPS, we are very invested in staying curious and supporting your problem-solving. Reach out to us if we can help!

Citation:


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Ayelet Boussi, Ph.D. January 16, 2018

**Dating Challenges**

Ayelet Boussi, Ph.D. January 16, 2018

While dating can be a fun and exciting period of a woman’s life, many women find it
difficult to maintain optimism while seeking a committed relationship, especially when she has been working at it for some time. While dating can certainly be challenging at times, at CTWPS we aim to help women reduce any feelings of distress or hopelessness that might arise. The first step on that path is to help women examine their thinking and behavior when it comes to dating, and this involves identifying any thinking traps that a woman may fall into as she works toward her goal.

One common cognitive distortion that can be provoked by dating is the “fortune telling” error. The fortune telling error takes place when one assumes a negative outcome will occur without fully evaluating the probability of that outcome. It acts as a mental shortcut, allowing conclusions to be drawn using limited available information. Often, the negative predictions made by the fortune telling error can lead to a woman feeling sad, resentful, or anxious. Consider the following beliefs:

“I’ve been on so many bad dates, this one will be no different.”

“Nobody will want a woman who looks like me.”

“I’m never going to meet someone who will be okay with my commitment to my job.”

“I want to end my unsatisfying relationship, but I don’t think I’ll meet anyone better.”

If this kind of thinking feels familiar to you, you are far from alone! When a woman tells herself one of the statements above, she believes it and feels it, most probably because she has actually experienced it in some way. However, while our past
experience is important, it does not allow us to make perfect predictions of future
dating partners or relationship outcomes. And when we engage in fortune telling and
assume a negative outcome, we risk impacting our mood negatively, as well as our
behavior.

For example, consider a woman who tells herself that if she isn’t married by age 35,
all hope is lost and she will never find someone. This woman may find herself feeling
increasingly depressed as she nears the dreaded age, which may cause her to spend
less time socializing and going on dates. While nothing has actually changed about
her, and there is no evidence that she has “expired” as a potential romantic partner,
her mood and her behavior have changed, fulfilling her belief that she is out of the
game. This woman’s fortune telling about her prospects ends up encouraging the
feared scenario. Another example might be a woman who tells herself that all dates
that she goes on are terrible, and so she’s not going to bother putting herself out there
with this one because it will turn out just as badly. She goes into the date unenthused,
resentful, or withdrawn, and the date ends up being a bust. Unintentionally, this
cognitive shortcut is resulting in the opposite outcome of what she really wants, and it
confirms her belief. She comes out of the date fulfilling her faulty prophecy that all
dates are bad.

Here at CTWPS we work with women to influence what they can do to maximize
their experience of dating. We would determine together whether “mental shortcuts”
or thinking habits are inhibiting her dating life or expanding it. We would also consider
ways to align her dating behaviors so that they are consistent with her long term goals of partnership. Dating and finding a partner are similar to other goals, and can definitely benefit from an approach of positivity and flexibility.

Women struggling to conceive often express how frustrating it is to be unable to get pregnant once they’ve decided the timing is right - after years spent trying to avoid untimed pregnancy. Many women lament the fact that friends and family members appear to become pregnant when their husband or partner “simply looks their direction;” while they may spend months peeing onto ovulation sticks, tracking basal body temperatures, and timing sexual intercourse. A friend’s pregnancy announcement on Facebook may trigger an acute sorrow for the woman who has been injecting hormones into her stomach, waking at 5:00 am for monitoring appointments, and experiencing repeated disappointments for months on end. There is no doubt, a feeling of utter unfairness accompanies one’s (unwelcome) membership to the community of women who struggle with infertility. To add salt to the wound, oftentimes “membership” is granted only after a year (or several years) of failure, after many
Managing the myriad of emotions that come with infertility can be incredibly taxing, on both male and female partners. Anger, sadness, jealousy, fear and disappointment are just a few of the emotions that may arise when struggling with infertility. Depending on an individual’s unique personality traits, history, vulnerabilities, and life stressors, sometimes these emotions become truly impairing and develop into clinical depression and/or anxiety. At CTWPS, we are attuned to these issues – we understand the emotional toll of infertility on you and your relationships, and we honor the psychological anguish that often comes with this journey. While we cannot wave a magic wand and make you pregnant, we can help you cope with the negative emotions you may be experiencing about your body, your partner, and the process of conception. We can help you develop tools for managing depression and anxiety in the face of disappointment and loss. And, through it all, we can support you by providing a safe, judgment-free space to express the full range of emotions you may experience.

When addressing infertility-related mood concerns, cognitive-behavioral therapy functions in the same way it does for many other mental health concerns. CBT aims to help the individual 1) see the relation between her thinking, mood and behavior; 2) develop skills to evaluate her thinking in order to view their life circumstances as accurately and helpfully as possible; 3) engage in healthy behaviors that promote
optimum mental health; and 4) develop the ability to tolerate uncertainty, discomfort and adversity that we all invariably experience in life.

One of the primary goals of treatment at CTWPS is to increase hopefulness. To do so, we first need to acknowledge the intense fears that underlie catastrophic or fearful thoughts. These thoughts are real and significant, and yes, there is almost always a kernel of truth to our greatest fears. However, while the worst case is possible, it is almost always unlikely – and living in that place of “worst case scenarios” before it is a reality, is unproductive.

Oftentimes, our minds jump to worst case scenarios out of an innate desire for certainty: “If I know the worst is going to happen, then at least I don’t have to wonder, wait, and worry.” However, living in this dark place of hopeless negativity is counterproductive to our mental wellbeing, and may leave us feeling sad, depressed and helpless. Thus, the work of CBT is to increase our tolerance of uncertainty (and adversity), such that we can properly assess the opportunities we do have to improve or change the situation. Taking action – rather than catastrophizing – provides a sense of self-efficacy, hopefulness, and the opportunity for positive change.

Infertility can be extremely stressful and overwhelming, heartbreaking and painful. For couples who are ready to conceive, the disappointment of unrealized expectations can become emotionally disheartening or even debilitating. At CTWPS, we recognize how lonely this struggle can be. Our goal is to support you during this difficult time by providing emotional support, by teaching you strategies for managing
maladaptive thought processes, and by offering practical strategies for navigating your life and relationships in the face of infertility. Our goal is to help you live a full and balanced emotional life, whereby a set-back like infertility is a challenge, but is not life-defining.

Like many – I have a love-hate relationship with keeping up with the news. While I believe it is important to be informed, sometimes the information can feel overwhelming; it is easy to go from reading countless updates on a breaking story to avoiding the news entirely. With today’s unfettered access to the news, our contact with breaking stories may be more frequent, immediate, visual, and perhaps for some, intrusive. News websites, apps, notifications on our phones, and social media are only a few ways we access current events, intentionally or not. For most of us, this increasing exposure may be major shift in our relationship with news media. How might these changes affect our thinking, emotions, and actions?

Research suggests that the way people consume the news can significantly impact their well-being. On the one hand, watching the news has been associated with emotional
distress and negative attitudes; on the other hand it has also been linked with increases in knowledge, one’s likelihood to vote, and civic participation (Bodas, Siman-Tov, Peleg, & Solomon, 2015; Hao, Wen, & George, 2014; McNaughton-Cassill, 2001, Roche, Pickett, & Gertz, 2016). How then, can we develop a healthy way of thinking about and engaging with the news? Below are a few suggestions.

1. Be proactive, not passive, in your news consumption:

It is easy to go on autopilot when it comes to news consumption, allowing information to come to you unfiltered. But remember, you are the primary curator of the information you receive and this is an important job. Take stock and record your news consumption patterns over the span of a week. If you do not have established habits that feel good, make a decision based on your personal values about how much time you’d like to spend daily on conscious news consumption.

One way to do this might be by identifying times that are less than ideal to engage with the news (e.g., after a stressful day, when you are feeling unwell, right before bed), and times of day that are most ideal (e.g. “I will look at the news around 8:30 and at 4:30”). Turning off social media notifications may be helpful. Limiting content that may be emotionally taxing or personally triggering because of your own history and not re-watching videos with disturbing images are simple ways to also create intention around your routine.

As psychologists here at CTWPS, we encourage our patients to test out both the utility
and validity of their thoughts. We help women identify evidence in their daily lives that challenge thought patterns that may in fact be inaccurate, incomplete, or unhelpful. In the spirit of encouraging critical thinking, we suggest reading the news from multiple sources. Media outlets often report from a specific lens. Gathering a range of perspectives on a single story may help create a more balanced perspective.

2. Consume news thoughtfully.

Negative news cycles can affect our thinking. It may seem like every breaking headline on a given day features the latest act of terror, injustice, natural disaster, or sexism. It is a cynical fact that negative news cycles grab the attention of the public more quickly, via anxiety, than stories about puppy rescues. The media industry is rewarded by presenting negativity more than positivity, and we should always factor that bias into our experience. Expanding the content range of your news consumption (e.g., a brief Google search on “advances in medical research this year”) is one way to challenge the negative bias built into how the news is often packaged.

If, after watching the news, you notice your mood lowering, you may be engaging in some distorted thought patterns that were triggered by negative news. An example of this might be the catastrophic thought “The world is falling apart”, which has some truth in it (some parts of the world are in great dysfunction), but does not acknowledge all of the functional and joyous aspects of the world - and your personal world - as well.

There is a lot happening in New York City and the world. Given our busy lives and responsibilities, it can be easy to delay self-care or overlook its importance in how we consume news. Yet research exists pointing to a greater need for self-care if we are frequently exposed to stories that include multiple traumatic events and images (Holman, Garfin, & Silver, 2014). Some self-care practices we would recommend at CTWPS are using relaxation techniques to reduce stress and manage your sleep. Talk with friends and colleagues so you are not isolated in your experience. Explore your own spiritual beliefs or supports as a way to address larger questions that may come up around news stories about injustice and suffering. Get in touch with your personal values which may help you narrow what types of stories to pay attention to and empower your news consumption. If you are able and interested, get actively involved in a cause or organization to help feel empowered and part of a positive story.

However, if you are finding yourself significantly distressed because exposure to particular events may be personally triggering or preoccupying, please seek out professional support. We are happy to support you and your mood by finding ways to boundary your news exposure with you, and teaching you more skills for coping in our modern age.

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Beyond Love: How Our Thinking Impacts Our Relationships

Ayelet Boussi, Ph.D. October 27, 2017
All couples experience periods of difficulty in their relationships. Occasional disagreements, disappointments, and frustrations are a part of every long-term committed relationship. When things get complicated many women find themselves trying to improve things, but they may discover their efforts are met with resistance from their partners, or are simply ineffective. This can prove immensely frustrating, and women and their partners run the risk of falling into a cycle of misunderstanding and distance.

One challenge in communication with our partners is the belief that the onus is solely on our partner to change. When things are rocky, it is natural and understandable to assign blame to one’s partner. And sometimes in frustration with our partner, we employ maladaptive strategies to the conflict - giving the silent treatment, picking fights, or engaging in sarcasm or manipulation to get our partner to change. Not only do these strategies typically not work, they further disconnect us in relationship.

The good news is that there are strategies that can be implemented to create more connection, and it starts with our own thinking. The somewhat radical first step toward the goal of a closer relationship is to start with ourselves! At CTWPS, we work with women to identify and address difficulties in their relationships, with a special focus on both the thinking and the behaviors that can perpetuate problems of disconnection. Below are three of the most common distortions in thinking that come up for women in relationships:
1. Negative bias

Negative bias occurs when the positive aspects of our relationships are washed away by overemphasizing the negative qualities of the relationship, or “reading negative”. Addressing this requires really taking stock of how you view your partner. Idealization vs. devaluation is one kind of biased thinking: imagine a woman when she is most in love with her partner. He is perfect! The kindest, most attractive, smartest, most considerate partner; she wonders how she ever get so lucky to have him! But when her mood changes and she is angry or frustrated with her partner, the picture quickly darkens. She views him as selfish, inconsiderate, inattentive, and far worse than her friends’ partners. She feels foolish for having ended up with him. This kind of black and white thinking conceptualizes our partners as being either all good or all bad. At CTWPS, we help women create an honest accounting of how they view their partner, and provide specific training on how to create a balanced perspective of their partner (even in conflict!).


We learn about what relationships are “supposed” to look like from many sources - observing our parents’ partnership when we are children, hearing about friends’ relationships, even experiencing fictional characters’ love in books and movies. The lessons we learn are internalized deeply as a set of “shoulds”: i.e., if my partner loves me, he should do a certain behavior every day, or verbalize certain things, or spend a
certain amount of time with me. These “should” beliefs are so closely held that when our partners do not live up to them, we can feel deeply unloved and hopeless about the relationship. However, these “shoulds” vary across individuals, and many times a woman’s partner is simply unaware of what hers might be. Adherence to a set of “shoulds” can get relationships into trouble when our partner’s benign behavior is interpreted as malicious or rejecting because it does not align with our “should” beliefs.

In therapy at CTWPS, we take a close look at a client’s “shoulds”. Sometimes these beliefs run so deep that we see them as fact, and so acknowledging them as beliefs rather than facts is the first step toward developing flexibility internally and with our partners. We’ll search together for opportunities for perspective taking, communication, and behavioral adjustments that can make all the difference in the level of comfort and ease you feel with your partner.

3. Wanting to win

We all like to win! But sometimes a woman’s desire to protect her position prevents her from engaging in effective communication. When it comes to having critical conversations with a partner or asking for what we need, many women find themselves thinking about it as a zero-sum game in which there is a “winner” and a “loser”. The assumption here is that someone in the discussion is right and someone is wrong, when in fact often both partners see the same set of circumstances in different ways, both feeling and being “right” from their perspective. Women can find themselves stuck between two tough options: I can be honest and true to myself and
I can be aggressive and attack my partner (“winning”, being right), or I can be peacekeeping and swallow my needs by withholding the truth (“losing”, being wrong). At CTWPS, we work with women to increase cognitive flexibility, to move beyond a winning-and-losing style of communication, and to increase the number of options a woman has for maintaining closeness with her partner.

Conflict is hard, and it is easy for any of us to fall into some distorted patterns of thinking when stressed. At CTWPS, we will support you in your relationship goals by teaching you strategies to manage your thinking process and keep your perspective as clear as it can be (even when you are in conflict with your partner). These steps start with your perspective and are the beginning steps to creating healthier communication and relationship.

Many of our patients here at CTWPS struggle with perfectionism in one way or another. By perfectionism, we mean holding high standards for herself in any area of her life and then becoming overly self-critical or anxious if she does not meet that high standard. While many women consider perfectionism to be a positive characteristic,
we as therapists see the darker side of perfectionism - when the experience of imperfection results in distress, depression or anxiety for a patient.

In our practice, we find that women can develop evaluations of themselves that are contingent upon personally demanding, self-imposed standards. For example, consider a woman who believes that she must deliver her presentation flawlessly in order to be considered competent in her work, or a woman who is overly self-punishing if she falls a few pounds short of her target weight, despite consistent dedication to her new diet and major health improvements. Whether it be the constant striving to meet perfectionistic ideals, or the idea that imperfection on the path towards achieving reasonable goals should result in major (often self-imposed) consequences, perfectionism can be an unhealthy mindset for women. Perfectionism has been linked with such negative consequences as anxiety and low mood, poor nutrition from excessive exercise or dieting, poor concentration, or even procrastination at work to avoid feeling imperfect.

There are certain cognitive biases, or thinking styles, that are most prominent among women who hold themselves to perfectionistic standards. Do you find that you go beyond setting high standards, such that your sense of self feels contingent upon how well you live up to these standards? If so, it may be helpful to examine the impact that your thinking has on your mood. Below are three common thinking biases to consider:

1. Selective Attention
Do you find that you’re really skilled at noticing the negative aspects of your performance and discounting the positive? Consider a woman who has recently been promoted to a more senior position in her organization for her stellar performance, but who constantly feels as if she is failing at work, and who worries tremendously about making mistakes. When this woman makes a minor mistake, such as a typo in a memo, she automatically discounts the positive aspects of her performance, such as her promotion and praise from her boss. Even more, because of her style of thinking, she concludes that she’s a failure. In this instance, this woman actually confirmed her negative belief about herself as “failure” by attending disproportionately to negative information.

In therapy, we would work to help this woman recognize her pattern of scrutinizing her own performance. We may invite this woman to keep a record of provocative situations (e.g., her typo), her corresponding negative thoughts (e.g., “I’m a failure”), and ways to broaden her attention in the moment so as to notice actual evidence of her performance, ultimately arriving at a more balanced view of herself (e.g., “When I consider the evidence, the memo was well-written and effective overall”). We may also invite this woman to keep a record of her positive achievements, so as to become more balanced in the attention she devotes to her view of herself.

2. Double Standards

Are the rules you set for yourself stricter than your rules for others? It’s quite common for overly perfectionistic women to hold themselves to strict, difficult-to-achieve
standards, but to adapt a more flexible set of standards for others. For example, let’s imagine that, when asked, the woman described above explains that she believes it’s reasonable for other people to make occasional grammatical errors in their memos without discounting their intelligence, and yet, believes it’s unacceptable for her to make such a mistake. In expecting more of herself than she does of others, this woman becomes quite vulnerable to self-criticism. For example, she may tell herself, “Because I’ve made this mistake, I’m a failure at my job.” This critical self-talk likely has a cascade of consequences for her, such as over-compensating by spending exaggerated amounts of time checking over her memos before sending them to her team, or beating herself up such that it becomes difficult to concentrate and meet future deadlines.

In therapy, we would work with this woman to consider whether it’s fair to have harsher rules for herself than for others. We would work together to track instances wherein her double standards are activated, and together, we would explore the impact of holding double standards on her self-esteem and mood.

3. “Should” and “Must” Statements

What do you tell yourself to get motivated when you have to get something done? Often, perfectionistic women attempt to motivate themselves, and to protect against poor performance, with “should” statements, such as “I shouldn’t make any mistakes at work” or “I should always work harder.” At CTWPS, we work with women to think of this type of self-talk as overly rigid, and to recognize that it can have potentially
destructive emotional consequences. For example, let’s imagine you have a friend who wants to exercise more regularly, and she says to you, “My goal is to exercise 7 days a week.” How might this pressure make her feel? Likely, she would feel highly stressed because she inevitably cannot live up to this goal consistently!

In therapy, we invite women to self-monitor, and keep track of how often throughout the day or week they use “should” or “must” language, as a way to highlight how ingrained this style of self-talk may be. We also work with women to log their absolutist thinking, and to replace such statements with flexible preferences, such as: “I would like to exercise more regularly.” We know as psychologists that setting more readily attainable goals actually results in better outcomes than setting extremely high goals. With practice, women find that their performance actually improves when they set more flexible and reasonable goals for themselves. This is most likely because imperfection and setbacks are part of every goal that has ever been achieved.

For so many women, a sense of striving for perfection can be a consuming thread in their lives. Here at CTWPS, we believe that every woman has within her the potential to achieve her goals while living a balanced life that includes time to relax, socialize, and pursue varied interests. In fact, those factors are known to enhance performance overall. In our practice, we actively work to help women to identify and challenge the thinking biases that keep their perfectionism in place, to experiment with more flexible behaviors, and to cultivate more realistic and compassionate expectations of themselves - not because we don’t want to encourage ambition, but because we
actually want our patients to be highly successful.

This post is Part I in a series on cognitive-behavioral approaches for perfectionism. Check back for more posts in this series coming soon.

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