Preface

This guide provides an overview of the Daily Mood Log (DML), one of the critical tools used in carrying out TEAM CBT (or TEAM therapy, as it’s also called). More than that, the DML is essential in understanding the structure of this therapeutic approach, and in understanding why TEAM CBT is so powerful.

While discussing the DML in the www.feelinggood.com podcast #275 with Drs. David Burns and Rhonda Barovsky, I made the comment that I thought that this was one of the greatest inventions in the history of psychology. After I said that, I immediately thought “Yikes – that’s a pretty strong statement. Am I being too enthusiastic? Will the listeners find a claim like that too exuberant?”

No, that’s not quite accurate. I worried that people might think “Single session cures? Overcoming therapeutic resistance with positive reframing and a Magic Dial? A few pieces of paper is the greatest invention in psychology? Is this some weird psychological cult group?”

The claim I made about the DML is a strong one, and I imagine a few people (probably more than a few) will think that it was overly enthusiastic. (The same reaction is frequent, by the way in regards to claims about being able to treat depression and anxiety in a small number of therapy sessions, without using medications.) I actually hope that’s how people react, because we have a saying in science that extraordinary claims require extraordinary evidence.

On the podcast, there was only enough time to talk about a couple of reasons for my views on the DML, so I’ve added some additional thoughts on this topic in this guide, which can be downloaded along with the Brain User’s Guide to TEAM Therapy. I wrote quite a bit about the DML in the User’s Guide, so it’s useful to read that first. This is particularly the case because the User’s Guide is where there is more information on attempts to understand TEAM CBT from the perspective of brain function. Some of what I’ve written here overlaps with information in the User’s Guide, but writing a focused essay on the DML gave me the chance to add more details and to consider some topics that couldn’t fit into the podcast or the User’s Guide. Thus, there’s also a fair amount of additional information in this document.

The DML is central in understanding the most important question in TEAM CBT, which is how rapid emotional recovery is possible - and in the hands of the best TEAM therapists can occur in a few sessions. I’m particularly interested in how it’s possible to get rapid change in someone who has not benefitted from working with other therapists and using a variety of medications for years, even for decades. Seeing this happen is a remarkable experience, and understanding how it happens strikes me as one of the great challenges in psychology.

Rapid change, particularly when it occurs for someone who has not benefitted from years of other therapies, seems like magic. But, as the late Arthur C. Clarke wrote, “Any sufficiently advanced technology is indistinguishable from magic.” Although there is no electronic, biological or chemical technology in TEAM CBT, we can think of it as an advanced technology of the mind. It’s not magic. It’s something that is understandable.

For anyone who encounters TEAM CBT for the first time, and even for therapists who have been studying this approach, the rapid change that occurs routinely in the hands of therapists like Dr. Burns is difficult to understand. In fact, having that reaction the first time I observed a therapy session was one of the reasons I became so interested in understanding TEAM CBT.
Now, you might not believe in the possibility of rapid medication-free change. That’s fine. I’m not going to try and convince you otherwise. If you do have such beliefs, I do have three questions for you:

- Have you listened to some of the multiple podcasts of live sessions available on the website www.feelinggood.com? There are quite a few of them that demonstrate that rapid change is possible, even for people with severe depression, anxiety, OCD and other problems.
- If you have listened to such podcasts, then why would you make the decision to ignore the evidence that rapid change is possible?
- If you haven’t listened to the podcasts, but still don’t believe in the possibility of rapid medication-free recovery from depression and anxiety, then is it possible that you’re jumping to a conclusion without examining the evidence?

If you’re curious about how high-speed treatment works, I think that understanding the DML is essential. You, dear reader, may disagree with me about the importance of this tool. You may disagree about the possibility of high speed, medication-free, change. Before you embrace those conclusions, however, let’s examine some of the evidence together. After we’ve done that, if you can think of anything in the psychology toolbox that accomplishes more than the DML, please let me know. If you think of aspects of the DML I’ve left out, please let me know about those also. And if you think the high-speed change that is documented in a variety of podcasts at www.feelinggood.com is not possible, then I’m curious to know why that is.

I’ve tried to provide enough detail here to begin a discussion about how to get the most out of using the DML and about why the DML is a remarkable invention. Even with the information provided here, however, this is still only a portion of what I think is interesting about this invention. But I hope it’s enough to get the conversation started.

There are just two more comments to add before we start: (i) First, the ideas in this essay have benefited enormously from my conversations with a large and growing number of TEAM therapists, but most particularly from interactions with David Burns, Rhonda Barovsky, Leigh Harrington, Richard Lam and Jill Levitt. The ideas that I’ve gotten correct are due to them, and the parts that are wrong are entirely due to me. Whether right or wrong, the ideas I propose may or may not be shared by the above therapists, by the University of Rochester (where I currently work) or by anyone else. (ii) Second, as with the User’s Guide, this essay is copyrighted under a Creative Commons License. That gives others a lot of freedom for distributing this information, translating it into other languages, and using it for various purposes. The only thing that’s not allowed is putting your name on it and presenting it as your own work, either for free distribution or for sale. Other than that, if you want to send your copy to someone else, please go ahead and do so.

With warm wishes to you all,

Mark Noble
December 2021
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Introduction

First, just to be clear on language, the DML is an invention, and not a discovery. An invention is when you create something new that did not exist before. In contrast, a discovery is when you find something that already exists but you just didn’t know about it. Inventions are based on discoveries, but they’re not the same thing.

The distinction between an invention and a discovery is important because I’m going to write about why the DML is an important invention, and also about the discoveries made using it. Earlier versions of the DML were already based on multiple discoveries, and brought them together in a novel way. Using the DML has enabled still more discoveries, which are used in turn to further refine this invention. When you use the DML, you’re also going to get to make new discoveries. If you’re using it personally, you’ll get to make new discoveries about yourself. If you’re using it to work with someone else, both of you will get to make new discoveries about how to enable effective and rapid recovery from depression or anxiety.

The DML seems to me to fit into the most useful type of inventions, which are the ones that help you do something new, make new discoveries, and provide the detailed information you need to test new ideas in a quantitative way. All of science depends on the ability to measure whatever you’re studying, and the more detailed the measurements are that you can make with an invention, the more useful it is. The DML, particularly in its current form, fits all of these categories: it lets you do something new, helps you make new discoveries, and it provides detailed quantitative information at every step.
But why make the claim that the DML is the most important invention in all of psychology? To address that question, we need to start by considering what needs to be solved for people with depression, anxiety or related problems.

There’s a long list of challenges that need to be met to enable recovery from depression and anxiety. Regardless of your beliefs about the causes and treatment of depression and anxiety, I hope we can agree that we need to:

- Identify what kind of problems need attention.
- Identify the cause(s) of unhappiness.
- Treat those causes.
- Be able to treat emotional problems that may have a history of years, or even decades, of unhappiness.
- Be able to solve a wide range of different emotional problems (e.g., different types of depression, anxiety, PTSD, OCD, phobias, etc.).
- Combine the ability to solve a range of problems with therapies personalized to the specific needs of each individual – which presents a difficult paradox. How do you address the general problem of solving a wide range of emotional problems and at the same time tailor therapy to the needs of each specific person?
- Know whether you’re making progress in a way that can be quantified and also is specific enough to know where progress is being made and where it isn’t.
- Overcome confirmation bias. Our brains work in such a way that we often pay the most attention to information that confirms what we already believe. Even worse, our brains often take information that shows we’re wrong and misinterprets that information to confirm what we already believe.
- Overcome therapeutic resistance. This is one of the greatest challenges in psychotherapy. It affects many people, it’s difficult to understand, and it’s hard to overcome.
- Make the therapeutic journey enjoyable, not stressful. Why is this? After all, if you have a bacterial infection, you don’t worry about whether taking antibiotics is enjoyable. Yet, for depression and anxiety, we are talking about the ability to experience joy in your life. A therapeutic journey that’s enjoyable is part of that process.
- Provide ways of preventing relapses.

If you think depression and anxiety are caused by problems in thinking, then needs include such things as:

- Change the interpretations of the world that are causing unhappiness.
- Change the internal story, which you can think of as the “big picture” that ties together the interpretations that in turn cause unhappiness.
- To accomplish the above goals, you need to modify ways of thinking.
- You also need to promote efficient learning of the new thinking patterns.
- You also need to promote the focused attention and alertness needed for effective learning.
- There needs to be a clear strategy for therapeutic homework that will be effective in hastening recovery.

If you think depression and anxiety are caused by organic problems in brain function, then perhaps you want to

- Harness the biochemistry of the brain in a way that works to your advantage instead of your disadvantage.
• Correct altered functions in, e.g., the amygdala and the prefrontal cortex, that may contribute to depression and anxiety.
• Achieve high speed recovery that is durable when treatment is stopped and that also has no side effects.

Let’s add one more group of challenges that are too often ignored, which are the challenges of costs and availability of treatment. The number of people with emotional problems that interfere with their daily lives is large, and far exceeds the number of available therapists. In addition, the costs of therapy are too high for many people. Thus, it would be preferable if therapies also could be:
  • Inexpensive
  • Accessible without a therapist

If there was a single device that helped you accomplish many of the above goals at one time, I hope we could agree that this would be an important invention. If that invention could be used to solve all of the above problems, and still others not even included in these lists, I hope we’d agree that such an invention would be a strong contender for the most important invention in the history of psychology.

What if you could do this with a few pieces of paper? No fancy gadgets, no batteries needed, and no chemical interventions. What if the invention consisted of new ways of using your brain’s normal functions? Such an invention seems like it would be worth some special attention.

I’m going to present core aspects of the case that the DML can do all that I’ve discussed, and more. Let’s see what you think as we take a step-by-step look at the DML and at what happens at each step of using this invention.

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Everything from this point on is meant to be read after you read the Brain User’s Guide to TEAM CBT first. If you haven’t read the User’s Guide yet, then please start there. Although there is some overlap with information in the Guide, for the most part I’m going to assume that you’re familiar with concepts that are discussed there. That way I can add to this information.

As I’m going to sometimes refer to sections of the User’s Guide, you may want to keep that available in case you need to have another look at it.

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Solving years of problems by working on a single moment in time and harnessing the biology of nerve cell networks. (Step 4 in the User’s Guide)

You start the DML by picking a single moment in time that you’re going to work on. This is already a major change from other types of psychotherapy, and is one of the critical discoveries in the development of TEAM CBT. Working on a single moment has multiple benefits, such as:
  • Working to understand a single moment makes sense because the reasons you’re unhappy on Tuesday of this week are the same reasons that you were unhappy on Wednesday of last month, or Monday of last year.
• Working on a single moment is much easier, however, than trying to unpack months or years – or decades - of anxiety and/or depression. Choosing a single moment allows you to focus on something specific and defined, instead of wandering for a long time across all of your memories.

• Working on a single moment and understanding it in detail is also more effective than talking in less detail about years of feelings.

• You’re hopefully choosing a moment when your unhappiness was particularly intense. If you’re having a bad day right now, you can choose to work on the moment that’s happening right now. You can also choose the first moment when your problems began, if there was a particularly important event that you want to focus on. If you’re having a good day, then you can choose to work on a time that was not so good.

• Whatever moment you choose is fine. You are in charge of making these decisions, and no one is going to force a particular choice on you. As with everything else in TEAM CBT, the approach that you take is going to be personalized to your needs, including choosing the moment on which you want to focus.

• Because you’re the one making the choice, you’re less likely to be resistant to working on that moment.

Working on a single moment only makes sense, however, if this strategy works. If you’ve been depressed, or anxious, or both, for weeks or months or years or decades, then how can working on a single moment in time help you unravel a pattern of unhappiness that has lasted for so long?

We discussed on the podcast (with more detail in the User’s Guide) that the power of working on a single moment comes from the way the brain uses networks of nerve cells to organize information. Even though the brain is extraordinary in its ability to store and process information, and has a lot of nerve cells, there are not enough cells and connections in the brain to have a single one for every moment in our lives, or for every thought and feeling and memory that we have. That’s the case for our large human brains, and it was even more true over the many millions of years over which the most fundamental principles of brain function evolved. Those brains were smaller, and had fewer cells, but they had to solve the same problem that our brains need to solve. The central challenge for the brain is how to store and process information in a way that allows you to work with a limited number of cells.

The way evolution seems to have solved the problem of needing to deal with more information than there are available cells to store and process that information is to use the same nerve cell networks whenever you encounter similar circumstances. Thus, although you’re technically working on one moment in time with the DML, you’re also working to modify nerve cell networks that are used over and over again when you’re solving similar problems. The example provided in the podcast and in the User’s Guide is the simple mathematics problem of 2+2. If you were wrongly taught that 2+2=5, then you’ll get the wrong answer in any mathematics problem where you need to add 2+2. If you correct this information one time, so that you’ve modified your nerve cell networks to give the correct answer of 2+2=4, making that change one time is enough to let you get this answer right in any problem that you work on.

The same principles that apply to nerve cell networks involved in solving mathematics problems also apply to nerve cell networks involved in interpreting the world. If you have a mistake in your interpretations in one moment in time, then it’s just about certain that you’re making that same mistake at other moments in time. That’s true because your brain uses a lot of the same networks of nerve cells any time you’re in a situation that seems like one you’ve been in before.
We do not know of any other way that the brain can solve the challenges of there being too much information to use separate cells for each one of the thoughts and moments in our lives, and of needing to retrieve information quickly and accurately.

If you think about the effectiveness of working on a single moment from the perspective of how we think the brain works, then it makes a lot of sense. The idea is that although you’re technically working on one moment in time with the DML, you’re also working to modify nerve cell networks that are used over and over again in different circumstances. If you try to understand the power of working on a single moment from any other perspective, however, it’s hard to understand why this approach would be effective.

Thus, right from the beginning, the DML is helping you do something new.

Are there other possible advantages to working on a single moment? One that comes to mind is that this idea will stimulate your curiosity because of the novelty of this approach. You’re being told that this is not just an effective approach to changing your emotional life, but is in fact a far more powerful one than anything you might have tried before. Does that statement make you at least a little bit curious?

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The next two sections of this document focus on ideas that are not developed in detail in the User’s Guide, but that are critical in understanding some of what’s accomplished with the DML.

**Defining your feelings in more detail**

After you’ve chosen the moment that you’re going to work on, the next step is to identify the emotions you were feeling in that moment. Doing this is made easy because the top of the DML has a list of emotions. All you have to do to get started is circle the words that apply to you.

This simple list accomplishes multiple objectives:

- Having a list is a lot less stressful than trying to remember the words that describe your feelings. Having a list of choices provides the opportunity to define how you feel without the stress of trying to remember the words you need to describe your feelings.
- The list on the DML has a lot of subtlety to it. There’s a lot of disagreement about how many emotions exist, but the fact that we have so many words to describe our emotions shows clearly that there are many emotions and that each of these emotions can be quite nuanced. The DML recognizes categories of emotions and nuances by organizing the emotional descriptions in groups. For example
  - The emotion of feeling **Sad** also includes blue, depressed, down, unhappy.
  - The emotion of feeling **Inferior** also includes worthless, inadequate, defective, incompetent.
  - The emotion of **Lonely** also includes unloved, unwanted, rejected, alone, abandoned.
  - The emotion of **Angry** also includes mad, resentful, annoyed, irritated, upset, furious.
- Having such a range of choices is important in describing how you’re feeling with much more specificity than exists in most emotional tests (including the Brief Mood Survey).
The broader lists are useful, but their emotional categories are too simple for personalized therapy.

- In addition, it’s rarely the case that there is only one emotion that you’re feeling. Our emotional states have multiple components to them, and we generally have lots of different feelings at the same time. This list helps you think about the complexity of your feelings.

- Being able to choose from this list allows you to see, in a straightforward way, that if you come to a therapist to treat depression, for example, there are a lot of different emotions that are in play at the same time.

- You may even see that there are negative emotions that you’re feeling very strongly, but which you haven’t even realized are part of how you’re feeling.

- Emotions are personal, and specific words mean different things to different people. What you call “annoyed” or “unloved,” another person might call “upset” or “abandoned.” That’s okay because you’re choosing words that mean something to you, and what’s important is that you find words that resonate for you. If they mean something different to someone else, even your therapist, it doesn’t matter. As the session goes on, you and your therapist are going to understand your feelings in all their complexity.

- By working on this list of emotional words, you’re also jogging your memory about other emotional words that might describe your feelings. You might read through the list and see that it’s missing words you need to describe your feelings, which will help you remember what words you want to use. In fact, there’s a section of this list that is reserved for describing still other emotions than the ones already provided.

- Despite all the information this list provides, however, it’s a very quick process to circle the emotional words that apply to you.

Remember that the first goal that needs attention in treating depression and anxiety is to identify what problems need attention. The DML approaches this challenge in a different way than just talking, and provides a great deal more detail about your feelings.

It would be very hard for this detailed description of your emotions to come out in conversation because you’d be spending so much time thinking about words. That’s not easy for everyone, and this approach makes it much easier. If you were trying to do this by talking, you’d also likely get focused on a smaller set of emotions than are revealed by circling words in the list. In addition, if you were doing this by talking, you’d have to remember what your said. Now you don’t have to do any of these things, because the DML makes it easy to remember all the words you chose whenever you want to use them, and all you have to do is look at the top of the page.

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*What is the intensity of each of your feelings?*

After picking the words that describe your feelings, the next step is to score how strongly you feel them. As with choosing your emotions from the list, doing this has multiple benefits. For example:

- Instead of just saying that you feel sad or angry or hopeless, you’re defining your emotions with much more precision. This is more useful than simply saying that you feel down, or nervous, or any of the vague descriptions people most often use to describe their feelings.
• Scoring the intensity of your feelings reveals more about the details of your emotions, as you find out which are the ones that weigh on you the most heavily.
• There’s a score for each row, but if you want to give different scores to different words in the row, then go ahead and do that. For example, let’s say that you circled “inferior” and “worthless” and “defective” in the same row, but you’re not feeling each of them with the same intensity. You can write down different scores for each by writing down a number and the first letter of the specific emotion next to the number.
• Scoring your emotions also provides information that will be important throughout the use of the DML because by scoring the intensity of your feelings, you’ve defined your starting point with precision. This means you’ll easily be able to tell if the intensity of your feelings changes and how much they change.
• Having scores for individual emotions also tells you whether some emotions are decreasing in intensity but other emotions are not. This way, you know where you’re succeeding and where more work is needed.
• By combining subjective information about how you feel with measurements, the DML is doing something surprisingly complex. Measuring your emotions is not like getting on a scale and finding out how much you weigh, or finding out what your blood sugar levels are. You’re taking private states that seem unknowable to others in detail, and providing detailed information about their intensity.

For medicine, as for all other parts of successful science, the ability to make accurate measurements is the key to both accurate therapy and to making great advances. Psychotherapy can only benefit from following in this path. It was because of the ability to measure outcomes that CBT could be established as beneficial. It was because of the ability to measure emotions in more detailed ways, with tools like the earlier versions of the DML, that it was possible to progress from CBT to TEAM CBT.

That’s not, however, all that’s going on even at this early stage of working with the DML. In addition to the above considerations, you’re thinking in an alert and focused manner as you decide whether each particular word describes your emotions. You’re paying attention to how strongly you feel each emotion. The attention to what you’re doing also is increased by the fact that you’re using your visual system. Learning requires attention and focus, and using the visual system provides one of the most powerful means of achieving that focus very quickly. As explained in the User’s Guide, you’re also using your musculature as you circle words, and your memory about what the words mean. Multimodal approaches make learning more effective, and the DML uses multimodal approaches throughout.

<table>
<thead>
<tr>
<th>Emotions</th>
<th>% Now</th>
<th>% Goal</th>
<th>% After</th>
</tr>
</thead>
<tbody>
<tr>
<td>Sad, blue, depressed, down, unhappy</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Anxious, worried, panicky, nervous, frightened</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Guilty, remorseful, bad, ashamed</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Inferior, worthless, inadequate, defective, incompetent</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Lonely, unloved, unwanted, rejected, alone, abandoned</td>
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You’re also using analytical thinking (and associated parts of your brain) to decide which words apply to you and which ones don’t. Working with your analytical thinking abilities is what you need to do proceed to the next step in the therapeutic journey.

Another thing that’s hopefully happening is that your curiosity is being stimulated in different ways. For example, right next to the column in which you’re scoring your emotions is another column labeled “goals,” and then another column labeled “after.” What are those for? And what about all the other spaces on the DML?

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**Identifying your negative thoughts**

The next step in using the DML is to use your emotions as clues to find out the ways in which you think about yourself and the world.

The core hypothesis in all cognitive therapy is that our emotions are the result of how we think about what happens to us. They are not the result of an event. Instead, they are the result of our interpretation of the event. This hypothesis stretches back at least to Stoicism and, further back, to the origins of Buddhism, and has been tested in many different ways. It continues to be one of the most solid hypotheses in all of psychology.

The idea that our emotions arise from our interpretations sounds simple, but can be hard for most people to grasp until they start doing the experiments on themselves. When things are going well, or even decently, you can do this experiment by examining your memories. It will be easy to remember times when you were sad, or angry, or felt hopeless about a situation, but when you changed your interpretation, your emotions changed in an instant. As discussed in the first section of the *User’s Guide*, this is how your brain works. Emotions need to align with your interpretations and predictions so that you do what your brain believes will increase your chances of survival. When your brain carries out a “quality control check” on your interpretations, and decides that they’re wrong and need to change, then when the interpretations change the emotions will also change. When you’re suffering from depression or anxiety at levels that are disrupting your life, however, it’s hard to see the possibility that this could also be true for you.

There are a lot of horrible things that happen to people in this world, and many of them are things over which we have little control. You may or may not be able to change those events. But what you can change are the effects those events have on your emotions.

What we can do is take advantage of the extraordinary ability of the human brain to change itself so that the events of the world no longer control our emotional lives. There is no other organ in the body that has the brain’s ability to decide to change itself, and there is no other organ that can then decide on the path needed for such change. Your heart does not seem to have the option of deciding to change itself and acquire new skills. Your pancreas does not seem to have the ability to learn a new language, or even to make a new hormone. Your hands don’t decide to learn to play a musical instrument, even though your brain uses those hands as part of that acquiring that ability.

Using the DML will help your brain quickly change your interpretations and, by changing your interpretations, change your emotions.
The first step in changing your interpretations is to identify them, and your emotions are the clues for doing this. Every emotion will be associated with multiple interpretations of the world (which are also called beliefs). They might take the form of “I’m never going to get a promotion,” or “I’m never going to find a friend,” or “I shouldn’t be treated like that,” and so on. This is a topic discussed in more detail in the User’s Guide, in all of the books by Dr. Burns (and also in books by others), and on multiple podcasts.

Start by picking an emotion that you’d like to work on. The choice is up to you, and any of them can be used to identify important negative thoughts.

As you identify each negative thought, you’ll write it down on the DML and also score how strongly you believe that thought is true. Giving each negative thought a score is critical, because this is the information you need to tell how much progress you’re making in modifying your thoughts. This information also will tell you whether particular thoughts require extra attention.

As with everything else in TEAM CBT, the concept is simple but there’s a lot that’s going on. For example:

- The thinking and writing that you’re doing keeps you alert and focused, which is critical in enhancing learning.
- Because you’ve written down each negative thought, you don’t have to keep them in your active memory. The list is there for you to refer to whenever you need to do that.
- The negative thoughts that are involved in generating your emotions are often ones that you’re not using consciously. Using the DML, you’re bringing them to conscious awareness.
- By identifying multiple negative thoughts, you’re revealing your internal story.
- Being able to talk about and write down each negative thought means that you’ve activated the networks of nerve cells associated with those thoughts. These are the networks that you’re going to modify in order to change your habits of thought. (The beginning section of the User’s Guide discusses the idea that you can only modify specific nerve cell networks if they’re active, so having a clear demonstration that they’re active is important in successful therapy. The DML provides a simple means of doing this.)
- By scoring your belief in each negative thought, you’re providing the information needed to determine whether you’re succeeding in changing your belief in that thought (which will occur in later steps of using the DML).
- Thus, the DML provides the information you need in order to know if you’re being successful in changing your interpretations. It also identifies negative thoughts that you still believe in strongly and that warrant closer attention.
- As discussed in the User’s Guide, you’re shifting your brain from the rapid thinking we use for almost all of our daily activities to the slow analytical thinking we use to solve problems. Rapid thinking relies on the experiences we already have and on what we already believe. Slow analytical thinking is what we use when we encounter a new problem to solve, or a new skill to learn. Here, the problem you’re trying to solve is to identify the negative interpretations associated with each emotion.
• Making the shift from rapid thinking to slow analytical thinking is critical, because slow analytical thinking is the tool we need to change our interpretations.

Now you’ve defined the emotional problems. The DML also contains the tools needed to create the solution.

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Amplifying curiosity with the magic button question

You’ve defined your negative emotions and negative thoughts. Everything you can think of that has made you unhappy is right there in front of you, all written down so that it’s easy to remember it all. Your unhappiness is described in detail.

Now it’s time to ask what you’d do if you could make all those negative feelings and negative thoughts vanish in an instant, just by pressing a Magic Button.

Most people say they would push that button, because getting rid of all those negative feelings is the reason why they’re seeing a therapist.

If you decide that you’d press the Magic Button, your therapist will empathize with you but also tell you that there is no Magic Button – but that even if there was, this doesn’t seem like a good idea.

That’s probably not the response you expected. After all, isn’t getting rid of those negative thoughts and feelings the reason why you’re seeing a therapist?

The next thing your therapist will tell you is even more surprising, which is that the reason pressing the Magic Button is not a good idea is because all your negative feelings and negative thoughts are revealing beautiful and awesome things about you. Instead of showing what’s wrong with you, they’re revealing your best qualities.

At this point in the use of the DML, you’ve had a couple of interactions that probably are making you pretty curious. The first of these was the claim that you’re going to be able to solve all your problems by working on one moment in time, and the second is the idea that all of the feelings and thoughts that are making you miserable are in fact revealing why you’re not broken and not defective. You might have some resistance to these ideas, which seem like remarkable claims to make. At the same time, this approach has been used in large numbers of people around the world, and is successful for almost everybody who uses TEAM CBT. Are you wondering if it might work for you?

Curiosity is one of the greatest enhancers of learning, and what’s happened with the DML so far will hopefully be making you curious about what comes next.

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Discovering what’s right about you with positive reframing: Changing your internal story and harnessing the power of desirability bias

The next step in using the DML is to identify the positive virtues that are revealed by your negative feelings and thoughts, a step that’s called positive reframing. Although positive
reframing seems simple, Dr. Burns’ experience is that the effects of carrying out positive reframing early in the therapeutic process is one of the most important discoveries enabling high-speed recovery to occur for almost everyone. If you look at the early books by Dr. Burns, the importance of recognizing the positive attributes revealed by your negative feelings and thoughts is there, but the power of doing this has been greatly amplified by the way it’s used in TEAM CBT and in the current version of the DML. (And, it’s important to add, making this discovery was enabled by using the DML to keep a detailed record of every stage in the therapeutic journey.)

As there’s a lot of discussion on how to carry out positive reframing in the User’s Guide, in Feeling Great, and in multiple podcasts, I’m only going to quickly summarize what you do in this step. Then I’ll spend more time on what you might be accomplishing.

On the same rows as the ones in which you wrote down your negative thoughts are other boxes labeled Positive Thoughts. The boxes for positive thoughts are where you begin writing down the awesome and beautiful things about you revealed by your negative thoughts and feelings.

Here’s what it looks like in the DML:

<table>
<thead>
<tr>
<th>Negative Thoughts</th>
<th>% Now</th>
<th>% After</th>
<th>Distortions</th>
<th>Positive Thoughts</th>
</tr>
</thead>
<tbody>
<tr>
<td>1.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

You get to choose which negative thought you want to work on, reinforcing the idea that you are the one in charge of the direction you’re going to take.

You then start listing the positive traits revealed by that negative thought, and you spend time discussing them and scoring how much you believe that they are positive traits. You can also identify lots of beautiful and awesome things about you revealed by your negative feelings. There’s no box on the DML for that, but you can just use another piece of paper.

Positive reframing is just that simple. Although it can be difficult to learn at first, you’ll quickly learn how to do this (as explained in the User’s Guide and in Feeling Great).

The question of why positive reframing is so powerful is an interesting one, and one that’s ripe for investigation. It was originally developed by Dr. Burns as a strategy for helping people troubled by anxiety, as anxiety always has a component of protecting yourself or protecting others. The positive reframing can help you see that you’re not broken and that your emotions of anxiety are instead a sign that your brain is doing its proper job of trying to protect you or help you protect others you care about. The surprising discovery made by Dr. Burns was that carrying out positive reframing early makes it possible to achieve rapid recovery with almost everyone.

Here are some possibilities to consider about the effects of positive reframing:

- You started with the internal story that your emotions and interpretations show that you’re broken and defective, but now you’re creating interpretations and an internal story that you’re not broken. This alone can be extremely helpful. I mentioned during the
podcast that when you’re carrying out positive reframing with someone, you can see their entire body language change. Your body language often reveals whether you’re interpreting an interaction, or a stimulus, as negative or positive. If the stimulus is interpreted as negative, then your body language will be fearful and pulling away. If the interpretation is positive, then you tend to lean forward, and to smile. Your eyes will display interest and positive anticipation. These positive changes are very apparent during positive reframing.

- As your internal story changes, you’re changing your beliefs about yourself – and when you do that, your emotions will begin to change. This is because your brain is going to match your emotions to your interpretations.
- In other words, you’re going to start feeling better about yourself.
- As you keep working on this step, you’ll soon run out of room on the DML page and you’ll need to add another piece of paper to work on. This is because it turns out there are a lot of positive virtues revealed by your negative feelings and thoughts. Even this simple action can subtly amplify the good feelings you’re starting to have about yourself, because you’re discovering there is a lot about you that is beautiful and awesome.
- You’re benefiting from the power of joyful anticipation. What are you going to discover next that helps you feel better about yourself?
- You’re also harnessing desirability bias in your favor, which is the tendency to pay particular attention to things that make you feel happier. Desirability bias can be a powerful force for change (for example, because you believe that change is going to bring you feelings of joy) or can be a powerful force for staying the same (for example, because you may not want to challenge your relationships with members of your family or your group of friends). Here, you’re harnessing it as a powerful force for change.

Overcoming confirmation bias in psychology is considered a major challenge, and there are some strong arguments that the most effective means of overcoming confirmation bias is to have a desirability bias that goes in a different direction. The desirability of learning that there are good things about you is a powerful force to enhance the learning process that is supported by your use of the DML.

- By doing this with one negative thought and then moving on to examine another one, you’re learning how to do this for multiple different thoughts. You’re going to get better and better at doing this as you learn this new skill.
- The repetition and the novelty and the anticipation of learning something else good about yourself all contribute to more effective learning.
- By discussing each positive thought, asking whether it really is a good thing, writing it down, and asking how much you believe it’s a good thing, you’re also reinforcing the learning experience.
- Moreover, as you’re doing this, you’re connecting the networks that represent your positive ideas to the networks that represent your negative ideas. In other words, you’re modifying the networks of nerve cells that are causing your unhappiness.
- By doing this multiple times, you’re modifying multiple nerve cell networks that are relevant to your unhappiness.
- Writing down the positive virtues next to the negative thoughts is another important feature of the way the DML is constructed. You’re writing this information all down in the same space – so every time you look at a negative thought the existence of your positive virtues will be reinforced. Every time you think about the negative thoughts, you’ll also think about the positive virtues.
- By writing them down, you’re also making it easy to recall them.
- You’re developing these abilities as a skill and as a habit of thought, which means that you’re establishing new patterns of rapid thinking. You’re doing all this by modifying the
nerve cell networks that need to be modified in order to change your internal story in a very specific way. You’re not trying to modify your whole life. By analogy, you’re just correcting the wrong idea that 2+2=5. You’re not trying to relearn all of mathematics.

- There’s another benefit of positive reframing, which is that it’s a joyful experience. Finding out that we’re not broken gives us pleasure. As people learn how to do this, they start smiling. That’s not surprising, because finding out good things about ourselves is enjoyable.
- You also have the surprise that this can be done, and curiosity about what else you can learn.

Positive reframing is going to play an important role in modifying those negative thoughts. The DML places those positive virtues right next to the negative thoughts so that every time you work on a negative thought, you’re going to also be looking at the positive virtues and reinforcing the networks of nerve cells that are the physical underpinnings of those virtues.

Moreover, in addition to all the benefits of learning to look at yourself in a different way, positive reframing is the step that enables you to easily overcome therapeutic resistance.

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**Overcoming therapeutic ambivalence (also known as therapeutic resistance) with the Magic Dial**

The next step that you take with the DML is called the Magic Dial, and it is a critical part of understanding how to achieve high speed recovery by modifying your nerve cell networks.

Using the Magic Dial is easy. Your therapist will introduce this idea by saying something like “Although we don’t have a Magic Button, maybe we can use a Magic Dial. With the Magic Dial you can keep all the wonderful positive things revealed about you by your negative feelings and thoughts, but maybe we can dial down the intensity of those feelings. Would you like to give that a try?”

The next step is to look at the intensity you wrote down for each emotion, and choose an intensity that you think would be enough for you. You then write the new numbers in the goals column.

Using the Magic Dial introduces the idea that it’s possible to turn down the intensity of your emotions without losing the positive virtues revealed by them. Instead of battling to get rid of your negative feelings, your goals are looked at in a different way. You now know that your negative feelings are revealing very good things about you, and you want to keep those good things. It’s possible to do that, and at the same time to decrease the intensity of the negative feelings.

There are some things about the way this is done that we can be pretty sure are important, such as:

- The Magic Dial provides a breakthrough revelation for many people, which is that you can choose the intensity of your emotional feelings.
Moreover, you can keep all the benefits (both the positive virtues and the information provided by the negative feelings), while turning down the intensity of the negative feelings.

What’s also important in using the Magic Dial is that you’re setting goals for the emotional intensity that you think would be suitable. These are values that you’re choosing. They’re not pressed upon you by anyone else. This approach is part of the overall structure of TEAM CBT, and the use of the DML continues to let you choose what you’re going to work on. This way, there’s no resistance to whatever goals you choose, because your therapist will agree with whatever goals you choose.

Using the DML in this way does not cause defensiveness on your part, because you’re in charge.

Setting quantitative goals gives your brain something specific to work towards.

Setting quantitative goals also gives you a clear indication of how well you (and your therapist) are doing in achieving them. If you find that your emotional intensity remains higher than your goal, that identifies an area where you can focus your attention. On the other hand, if the scores go down to the levels you’ve identified – or even lower – this is exciting and rewarding.

The idea that you get to keep the virtues reinforces the idea that these virtues are part of you.

To go back to our starting list, the Magic Dial helps reinforce the benefits of positive reframing in several ways:

- Change the interpretations of the world that are causing unhappiness, while turning down the intensity of the unhappiness
- Change the internal story, which you can think of as the “big picture” that ties together the interpretations that in turn cause unhappiness.
- To accomplish the above goals, you need to modify ways of thinking. Positive reframing begins this and the Magic Dial reinforces this process.
- You also are promoting efficient learning of new thinking patterns by introducing a novel concept of turning down the emotional intensity.
- You also need to promote the focused attention and alertness needed for effective learning, and you do this by thinking about the numbers that you’re going to choose for your goals and engaging your visual system in all these tasks.

What Dr. Burns discovered by including the Magic Dial technique after positive reframing is that doing this enables you to melt away therapeutic resistance very rapidly. In fact, part of the skill set that makes TEAM CBT so powerful is the way that it identifies and overcomes resistance right from the very first interaction (as written about in the User’s Guide Step 6), and amplifies this change again and again.

Using the DML to overcome therapeutic resistance is a major accomplishment whether or not we understand how it does this. Nonetheless, it would be interesting to understand how this works. I think one reason it’s hard to understand why this part of the DML is so effective at overcoming resistance to change is because the psychotherapy community is still far from understanding resistance. A lot of good therapists have worked on this problem, but it’s not been easy to solve.

I wrote about resistance in the User’s Guide, on pages 30-37. Much more importantly, Dr. Burns has written a lot about this in multiple sections of Feeling Great and discussed this in multiple
podcasts. The interested reader will find lots of food for thought in these writings and discussions.

I just want to add a bit more here on the metaphor I used to describe positive reframing and the use of the Magic Dial, which is that of adding a fifth leg to a chair. This metaphor has been helpful to me, and I hope it might be helpful to some of you.

In using this metaphor, the picture in my mind looks like this:
- Leg 1 = what happens
- Leg 2 = how we interpret what happens
- Leg 3 = the predictions and the emotions that follow from those interpretations
- Leg 4 = our quality control systems (which are discussed in the first section of the User’s Guide)

In the beginning of the User’s Guide, I discussed that the main function of the brain is to make predictions, and each of the four legs is important in this process. Our predictions are based on the way in which we interpret the world. If we change the interpretations (Leg 2), we also change the ability to make predictions (Leg 3). If we undermine those interpretations without replacing them with something else, however, we create big problems.

If our ability to make predictions is taken away, then what we’re left with is chaos. The perception of chaos, of not knowing what comes next, is even more disturbing than a straightforward prediction of misery.

Whether this problem is studied in humans or in mice, it turns out that uncertainty is one of the greatest stressors of all. And when you’re stressed, your anxiety levels go up and it’s difficult to pay attention to anything but trying to figure out how to get out of the stressful situation. If you don’t understand what’s causing the feelings of stress, your anxiety levels will continue to climb. Moreover, you might feel helpless and hopeless, which are some of the central feelings in depression.

In other words, loss of the ability to make predictions is not a favorable outcome. At least if you make a prediction of misery, you know what to anticipate. If you can’t make predictions (which requires the use of your interpretations of the world), this is going to be a stressful situation.

Thus, one way that I’ve been thinking about the causes of resistance, and that I find helpful in thinking about the power of the DML, has to do with not wanting to interfere with the ability to make predictions.

To return to the metaphor in the podcast, I think of our thought processes as a chair that has four legs. If you take away one of those legs, the chair becomes unstable.

In this metaphor, one of those legs is the negative thoughts in which we are soon going to identify cognitive distortions. Even if those thoughts are wrong, they’re the ones that you’re using to make predictions.

If you take away the interpretations you’ve been using without first replacing them with something else, then what has happened to your ability to make predictions? You’re creating a situation of uncertainty.
With positive reframing, it seems like you’re essentially adding a fifth leg to the chair and thus making it safer to decrease belief in the negative thoughts because you’ve provided another way of interpreting the world. You’ve stabilized the chair by showing that the negative thoughts are wrong without jeopardizing the predictive framework. This is because you have the alternative predictive framework provided by all your positive virtues.

Next, let’s get to work on the leg of interpretations - which we can now safely change. This is the next step in using the DML.

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Identifying cognitive distortions helps you crush belief in your negative thoughts

How do you make your emotional scores go down? The next critical step is to identify cognitive distortions because that is how you undermine belief in your negative thoughts. These are thoughts that you have determined that you believe in strongly – but what if they’re wrong? In the User’s Guide, I presented the argument that given the choice between making predictions based on correct versus incorrect interpretations, we’ll generally use the correct interpretations.

The next step in using the DML is to choose a negative thought that you would like to work on and to identify the cognitive distortions present in that thought. No matter which thought you choose, you’ll be able to identify distortions. For some thoughts you might identify a small number of distortions and for other thoughts you might find that all of the cognitive distortions apply to that thought.

There is a lot on information on identifying cognitive distortions in many podcasts, in all of the books by Dr. Burns (and in books by many others). There’s also some information on this topic in the User’s Guide.

The DML is designed to make it easy to learn how to identify cognitive distortions. There is a list of the most common cognitive distortions at the end of the DML, with a brief description of each one. This way you don’t have to memorize all of them. Instead, the information is there for you to easily find.

<table>
<thead>
<tr>
<th>Checklist of Cognitive Distortions*</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. All-or-Nothing Thinking. You view things in absolute, black-and-white categories.</td>
</tr>
<tr>
<td>2. Overgeneralization. You view a negative event as a never-ending pattern of defeat: “This always happens!”</td>
</tr>
<tr>
<td>3. Mental Filter. You dwell on the negatives and ignore the positives.</td>
</tr>
<tr>
<td>4. Discounting the Positive. You insist that your positive qualities don’t count.</td>
</tr>
<tr>
<td>5. Jumping to Conclusions. You jump to conclusions not warranted by the facts.</td>
</tr>
<tr>
<td>6. Magnification and Minimization. You blow things out of proportion or shrink them.</td>
</tr>
<tr>
<td>7. Emotional Reasoning. You reason from your feelings: “I feel like an idiot, so I must really be one.”</td>
</tr>
<tr>
<td>8. Should Statements. You use shoulds, shouldn’ts, musts, oughts, and have tos.</td>
</tr>
<tr>
<td>9. Labeling. Instead of saying, “I made a mistake,” you say, “I’m a jerk” or “I’m a loser.”</td>
</tr>
<tr>
<td>- Self-Blame. You blame yourself for something you weren’t entirely responsible for.</td>
</tr>
<tr>
<td>- Other-Blame. You blame others and overlook ways you contributed to the problem.</td>
</tr>
</tbody>
</table>

What you do next is to write down the cognitive distortions right next to the negative thoughts. As you do this you’ll use abbreviations for each cognitive distortion, which forces an extra thinking step as you think about the cognitive distortion and the abbreviation you’re going to use. You’re also going to discuss why the cognitive distortion applies to that thought, so that you understand the principle of what each cognitive distortion means. You’ll find that every negative
thought that you examine has multiple distortions. Right there on the page you have the appropriate box in which to write down multiple abbreviations for multiple cognitive distortions, right next to the negative thoughts.

As you work on this step, your therapist will ask you if you still believe the negative thought is true. You’ll probably find that your belief in that negative thought has decreased a lot — even though you believed it was totally true just a short time ago. You might even decide that the negative thought is not true at all. You’ll write down how much you believe in the negative thought in the DML. When you crush the negative thought that you chose to work on, then you’ll move to another one and do the same thing.

What happens when you identify cognitive distortions in your negative thoughts is powerful and complex. For example:

- By identifying ways in which your negative thoughts are based on cognitive distortions, your brain will automatically compare the less accurate negative interpretations with the more accurate positive interpretations. If the interpretation that your brain makes is not correct then it is of critical importance to generate a more correct interpretation. Thus, as you do the work in the DML, your brain will automatically start the process of changing your beliefs and interpretations to the ones that are more accurate.
- By working with the DML, you’re laying out all the information your brain needs right in front of you. You’ve written down the negative thoughts, and also written down positive thoughts that have the power to crush the negative ones. Now you’re also writing down the cognitive distortions. All this information is right there, organized in a way that makes it easy for your brain to do its job and check whether your interpretations need to change.
- You can also look around at other negative thoughts and get a clear picture of how all these pieces fit together. This will provide a more thorough understanding of the internal stories you use to interpret the world.
- Moreover, you don’t have to worry about remembering everything, because using the DML involves writing all this information down.
- All the time that you’re doing this, your brain is making interpretations and engaging in quality control in a very focused way, aided by the discussion, the use of your visual system and other enhanced learning techniques that have been discussed as intrinsic to the DML.
- As you move from one negative thought to the next, you’re learning more new skills (i.e., how to identify cognitive distortions), you’re seeing how to apply them, and you’re using all the principles that we’ve discussed for enhancing your learning. You’re using your visual system to focus attention, you’re thinking and discussing the meaning of the cognitive distortions and what is the point of the negative thought, you’re thinking about the abbreviations for each cognitive distortion and writing it down.
- As you work with your negative thoughts and decrease your belief in them, you’re seeing things change right there in front of you. By doing this with numerical scores you’re getting a clear message that change is possible and that you can do this yourself.
- You’re doing this all using slow analytical thinking, so that you’re working in a deliberate and focused manner on a problem.
- Reducing belief in a negative thought that is filled with cognitive distortions provides a good example of the way that the DML allows all therapies to be crafted for the needs of the individual. For example, let’s say there’s a negative thought that you’re continuing to believe even though it’s filled with cognitive distortions you’ve identified and multiple positive virtues that are associated with it. There are multiple methods that you can use
to explore that thought further, as described in the *User’s Guide*, in detail in *Feeling Great*, in other books by Dr. Burns and in multiple podcasts. The quantification of your belief in a negative thought immediately and accurately identifies something that requires further attention. In addition, the structure of the DML, in which you are going through these thoughts one by one, allows you to use appropriate techniques wherever they are needed.

- In this way, each session becomes easy to personalize for your individual needs.
- By giving each negative thought a belief score, you also have identified negative thoughts where your belief is not changing so you’re using the DML to establish specific information. That could be due to a couple of different reasons, that can help you distinguish between healthy and unhealthy negative thoughts. For example, the negative thought might have some truth to it. If you are sad and depressed because someone you loved a great deal has died, then it’s appropriate to have some active sadness. Moreover, you might find that you can’t articulate the reason why you still believe in that thought. In that case, the reason for still believing it may be because there are reasons that you have not identified yet. When that occurs, you and your therapist (or you by yourself, using *Feeling Great*) can use a variety of methods to explore that negative thought still further.
- You might also identify thoughts that you don’t want to work on right now. If so, you can make a note to come back to them later. Having that reaction often tells you that there are important issues connected with that thought, and choosing to work on it is something important. You can revisit that thought later, while the same time you’ve set your brain in motion on that particular thought.

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Re-examining the intensity of your feelings

You’ve now finished all but one of the stages of this use of the DML, which is to re-examine the intensity of your feelings. The next stage in this journey usually starts with the Methods TEAM CBT uses to further decrease belief in your negative thoughts. Using these methods, you’ll be able to decrease belief in your negative thoughts even more than you’ve already accomplished. (Even if you’ve already crushed your negative thoughts by positive reframing and identifying cognitive distortions, it’s important to work with one or more methods to reinforce what you’ve learned.)

TEAM CBT therapists have developed over 100 different methods to help change your negative thoughts., and working on the DML provides the background information needed in most of these methods. Many methods are discussed in the *User’s Guide*, in *Feeling Great* and in other books by Dr. Burns. Moreover, different methods and their use are demonstrated in almost every podcast.

What’s important about the methods, in respect to the DML, is that they all share the property of contrasting positive thoughts that are more accurate with negative thoughts that are less accurate. This is information that you’ve been generating by positive reframing and by identification of cognitive distortions in your negative thoughts, letting you identify more accurate and less accurate thoughts, respectively.

When you’ve decreased belief in your unhealthy negative thoughts to very low levels (e.g., 5% or less), then the final stage in this part of using the DML is to circle back to re-examine the intensity of your emotions.
To start, take the negative feeling that was the starting point for your negative thoughts and score how intensely you feel that emotion now. Write down the current intensity of that emotion in the box next to where you previously wrote your goals.

The next step is to write down the current intensity of each of your emotions in the boxes next to where you previously wrote your goals. Although you started out choosing one feeling to examine in depth, as your conversation developed you identified negative thoughts that also apply to other emotions. In fact, many of your negative thoughts will apply to multiple emotions.

Re-scoring your feelings has multiple benefits:
- The success in decreasing the intensity of your feelings is the clear demonstration that changing your interpretations changes your emotions.
- You've decreased your negative emotions by using your brain to modify your own thinking, without the use of any medications.
- You'll often exceed your goals, which is a great feeling in and of itself.
- Identification of feelings that have not decreased in their intensity tells you where to direct attention in the next round of therapy.

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Some final thoughts on the DML

Before we consider just how much you've accomplished, there is still more that's relevant to the contributions of the DML to achieving high-speed medication-free recovery from depression or anxiety.

To more fully understand the DML, it's critical to also see this invention as a sequence of steps taken to reach particular goals on the road to recovery. Every one of these steps has a purpose, just as every step in TEAM CBT has a purpose. For example:

- Focusing on a single moment in time is what enables straightforward and individualized identification of your emotions.
- Identification of your emotions is what's required to provides scores on how strongly you're feeling each emotion.
- Your choice of emotions provides the foundation for identifying your negative thoughts, and scoring how strongly you believe in each of them.
- Identifying the negative thoughts further the focus on each person's individual needs.
- Identification of your feelings and negative thoughts is required to set up effective use of the Magic Button question.
- The Magic Button discussion then leads to positive reframing (which is built on the earlier identification of negative thoughts and feelings).
- Positive reframing enables effective use of the Magic Dial.
- Use of the Magic Dial, and setting goals for the intensity of your emotions, is important in overcoming therapeutic resistance.
- Positive reframing and overcoming resistance make identifying cognitive distortions more effective because you're not undermining a belief system necessary for interpreting the world.
- Identifying cognitive distortions is critical in decreasing belief in your negative thoughts.
- Decreasing belief in your negative thoughts is how you change your emotions.
• Working through the DML gives you information that makes the Methods of TEAM CBT more powerful.
• Scoring your emotional intensity reinforces the power of this approach, shows what you’ve accomplished so far, and helps pinpoint areas that might need more attention.

The well thought-out movement of the DML from one emotion at a time to one negative thought at a time, and to one task at a time, are also important parts of its structure. This structure gives you time to learn and reflect on each step, and is also focused on a small enough task so that the task itself never becomes overwhelming. You’re not trying to write an entire story in a haphazard way, moving between different topics. Instead, you’re working in a way that gives you access to many different aspects of your particular internal story in an organized manner. Instead of facing the problem of not knowing where to start, you have a clear path on which to proceed. And there are many places you can start and they all are fine. Whichever negative thought you decide is the correct one to start with your therapist is where you'll start.

The DML also needs to be thought of in the context of the overall TEAM CBT therapeutic journey, where it also plays multiple roles. For example:

• The DML is critical in treating many types of emotional problems, including different kinds of depression, anxiety, borderline personality disorder, suicidal ideation, obsessive-compulsive disorder, post-traumatic stress syndrome and many other emotional challenges. It is a general tool that is valuable in many different situations.
• Using the DML provides information that is useful in effective use of multiple different Methods.
• The DML makes therapeutic homework straightforward. You can work on your own to continue the identification of negative thoughts, positive reframing, and identification of cognitive distortions. You can also work on a different moment in time.
• The DML is also a central tool used in relapse prevention, as discussed in the User’s Guide, Feeling Great and multiple podcasts. Whenever you’re having a relapse (as defined by a minute or more of unhappiness, as described in the User’s Guide, in Feeling Great and in multiple other books by Dr. Burns), you can just pick up the DML and work through each of the steps described in this overview.
• You can use the DML on your own, whether or not you have access to a therapist.
• The DML is inexpensive.

One of the additional interesting things about the DML is that although you’re approaching things in an analytical way, you also have ready access to your emotions. This is very useful because emotions are a tremendous reinforcement for learning. For positive emotions, this reinforces learning as an experience that you want to experience again and again. For negative emotions, this is something that you quickly learn that you want to stay away from them. Therefore, it’s very important to pay attention to the language that is used by TEAM therapists when they work with the DML. Their language and tone of voice is always kind and supportive, and displays a great deal of empathy. But even here, as discussed in all of the views on empathy presented in the User’s Guide, and in many podcasts, great care is taken not to provide answers or push the patient in any particular direction that might trigger a reaction of resistance. If the patient is stuck, then the therapist might offer some gentle multiple choices and ask if any of these seem like they might apply, or they might say something like "I wonder if this might also apply."
Let’s now take another look at our initial checklist. In this overview, I’ve touched on the relevance of the DML to addressing every goal on this checklist, including:

- Identify what kind of problems need attention.
- Identify the cause(s) of unhappiness.
- Treat those causes.
- Be able to treat emotional problems that may have a history of years, or even decades, of unhappiness.
- Be able to solve a wide range of different emotional problems (e.g., different types of depression, anxiety, PTSD, OCD, phobias, etc.).
- Combine the ability to solve a range of problems with therapies personalized to the specific needs of each individual – which is a difficult paradox. How do you address the general problem of solving a wide range of emotional problems and at the same time tailor therapy to the needs of each specific person?
- Know whether you're making progress in a way that can be quantified and also is specific enough to know where progress is being made and where it isn’t.
- Overcome confirmation bias. Our brains work in such a way that we often pay the most attention to information that confirms what we already believe. Even worse, our brains often take information that shows we’re wrong and misinterprets that information to confirm what we already believe.
- Overcome therapeutic resistance. This is one of the greatest challenges in psychotherapy. It affects many people, it’s difficult to understand, and it’s hard to overcome.
- Make the therapeutic journey enjoyable, not stressful. Why is this? After all, if you have a bacterial infection, you don’t worry about whether taking antibiotics is enjoyable. Yet, for depression and anxiety, we are talking about the ability to experience joy in your life. A therapeutic journey that’s enjoyable is part of that process.
- Provide ways of preventing relapses.
- Change the interpretations of the world that are causing unhappiness.
- Change the internal story, which you can think of as the “big picture” that ties together the interpretations that in turn cause unhappiness.
- To accomplish the above goals, you need to modify ways of thinking.
- You also need to promote efficient learning of the new thinking patterns.
- You also need to promote the focused attention and alertness needed for effective learning.
- There needs to be a clear strategy for therapeutic homework that will be effective in hastening recovery.
- Inexpensive
- Accessible without a therapist

Which all seems pretty impressive for a couple of sheets of paper.

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I hope we can agree that what you can accomplish with the DML is pretty impressive for a single invention. I also hope you don’t think that the DML is less of an invention because it’s all contained on a couple of pieces of paper. Would it be more impressive if it were a piece of fancy machinery? To me, it’s all the more remarkable due to its ability to use simplicity to harness multiple aspects of brain function, psychological insights and methods.
About the author

Dr. Mark Noble is Professor of Genetics and Neuroscience at the University of Rochester Medical Center. He's best known for his work as one of the pioneering figures of stem cell biology. His current laboratory is engaged in development of improved treatments for traumatic injury to the nervous system, more effective and safer treatments for various types of cancer, and discovery of new molecular pathways involved in development of the nervous system.

Following disturbing discoveries in his laboratory on the toxicity of some widely used antidepressants, Dr. Noble reached out to Dr. Burns in 2017 to understand TEAM therapy. After observing the remarkable changes that occur in high-speed therapeutic sessions, he began interacting with Dr. Burns and his colleagues to understand how TEAM therapy can produce such rapid change, even in people for whom other therapeutic approaches failed to provide benefit for years, or even decades. This work has led to new hypotheses on the neuroscience of effective psychotherapy, as well as to experiments on molecular aspects of chronic stress that feed back into Dr. Noble’s research on cellular and molecular approaches to understanding normal development and treating disease. Additional thoughts on the analysis of TEAM therapy from the perspective of brain function can be found in podcasts that are part of the free weekly series provided by Dr. Burns as part of providing training in this therapeutic approach. At Dr. Burns’ invitation, Dr. Noble also contributed a chapter on the neuroscience of TEAM therapy for Feeling Great.¹