

A Brain User's Guide to TEAM Therapy

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Preface

The success of TEAM therapy (also known as TEAM CBT) in enabling high-speed medication-free treatment of depression, anxiety and many other emotional challenges has led to a rapidly growing interest in this new therapeutic approach. There are now multiple training groups around the world that are ongoing and more that are being established. There are also book clubs that focus on chapter-by-chapter discussions of *Feeling Great*, the new book by David Burns (creator of TEAM therapy).

What's missing is a brief overview of TEAM therapy that enables people to quickly understand what it is, how it differs from other therapies, and how to practice this approach. (By brief, I mean something that can be read in a single evening, or less). That's not a simple challenge. Dr. Burns and his colleagues have recorded over 250 podcasts on TEAM therapy, and *Feeling Great* is 500 pages long. There are also 11 other books and countless articles by Dr. Burns, and books and articles by multiple other researchers and therapists that are relevant to this topic.

Providing an overview of TEAM therapy that helps someone understand it quickly is already challenging – but what makes the challenge even greater is that such a summary would be more helpful if it could also help explain why TEAM therapy is so powerful. That explanation requires understanding how this therapy works in terms of brain function. The only way any successful treatment can work is if it's aligned with the biology of the problem you're trying to fix. As we're talking about emotions and habits of thinking, that means the biology of the brain¹.

Which brings us to this guide, which is written to be useful for the following groups of people:

- *If you're having emotional problems and want to work with (or are working with) a TEAM therapist or with Feeling Great* then this guide will help you understand what happens when you're using this approach. If you're like me, then heading towards a particular destination is a lot more enjoyable if you have some idea of the way to get there. By understanding both the relevant aspects of brain function (written so that you don't need a college degree to understand them) and the steps in TEAM therapy, you'll be able to make this approach even more effective for yourself. Moreover, I think you'll find that what you'll learn about your brain will be pretty interesting.
- *If you're a therapist using TEAM therapy*, this guide is written so that you can provide it to your clients as soon as you start working with them (or any time after that). That way, they'll know what you're trying to accomplish and why you're doing what you do. That will make it easier for the two of you to work together.
- *If you're learning TEAM therapy, or are curious about TEAM therapy*, then I hope this guide will be helpful in understanding what's special about this approach, why it's so powerful, and how to get the most out of it.

The guide is in three parts:

- The first part (12 pages) is an overview of aspects of brain function that I think are needed to understand how TEAM therapy works, written so that you don't need a

¹ More information on this topic can also be found in the FeelingGood podcasts #100, 167 and 275, and in Chapter 30 of *Feeling Great*. (<https://feelinggood.libsyn.com/episode-100-the-new-micro-neurosurgery-a-remarkable-interview-with-dr-mark-noble> and <https://feelinggood.libsyn.com/167-feeling-great-professor-mark-noble-on-team-cbt-and-the-brain>)

college degree to understand the key ideas. This section distills the most important insights derived thus far in the journey to understand the neuroscience of high-speed medication-free psychotherapy

If you understand how something works, you can make it more effective for yourself. Why do you do this and not do that? Why is it important to do things in a certain way and a certain order? The information in this first section will help you think about such questions in ways that have been helpful to others.

- The second part (31 pages, including illustrations) is a guide to a typical treatment session. This section provides a grounding for exploring TEAM therapy in deeper and broader ways. It also defines the expectations for a session in TEAM therapy.

TEAM therapy was developed through careful scientific analyses of what works and what doesn't, over many years and many thousands of sessions with people with a wide range of needs. Every step in TEAM therapy has a purpose, and no steps can be left out. But what are those purposes? How do they fit together to enable high-speed recovery? These are some of the questions examined in this section.

- Finally, the last section is an attempt to answer some of the questions that come up frequently in discussions on TEAM therapy.

In addition, I've written a separate 25-page guide that provides a more detailed analysis of the Daily Mood Log (DML), a critical tool in carrying out TEAM therapy.² Understanding the DML and how to use it is critical in conducting and in understanding TEAM therapy. The DML guide is also available with the *Brain User's Guide* for your free download. If you're interested in the guide to the DML, I suggest reading this *User's Guide* first. This is because most of the information on brain function referred to in the DML is in the *User's Guide*.

The goal of both of these guides is to make the most fundamental principles of TEAM therapy easier to learn and to use for your own benefit. Just as for any skill, learning the basic principles makes it much easier to learn more advanced techniques. The material in these guides will transform your ability to learn from working with your therapist or with *Feeling Great*, listening to live sessions, or working in training groups. You now will have the background needed to understand what's happening at each stage of the therapeutic journey. You also have a guide that allows you to easily re-visit any topic, whenever you need to do that.

Both of these guides are copyrighted under what's called a Creative Commons License. That basically means that the only thing you can't do is copy them and put your name on them. Other than that, these guides are intended to be freely available to all. If you'd like to translate one or both of them into a different language, just let me know. I'd be happy to also change the text on the illustrations if you send me translated text to use. It's also okay if you want to come up with new illustrations.

Whether you are working to improve your emotional state, are learning TEAM therapy as a therapist, or are just curious about TEAM therapy, I hope that you find these guides useful. If you have questions (or criticisms), please let me know.

With warm wishes to you all,

Mark Noble
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² This is also available for download from links at feelinggood.com podcast 275, and is called *Exploring the Daily Mood Log*.

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An introduction to TEAM therapy.

Welcome to the TEAM team. TEAM stands for Testing, Empathy, Addressing resistance and Methods.

TEAM therapy is a new approach to treating depression, anxiety, OCD, PTSD and many other emotional and psychological (including, e.g., problems, habits and addictions). This approach brings together the most powerful tools from many different types of psychotherapy into a single discipline. It also adds new techniques that are unique to TEAM therapy.

TEAM therapy is built to be useful for everyone dealing with emotional challenges. We all have unique lives and unique brains, and what works best for someone else might not be the best approach for you. One of the strengths of TEAM therapy is that it includes many powerful tools that help your therapist respond to your personal needs, in the most effective ways for you.

The reason your therapist became an expert in TEAM therapy is because this approach is often more effective than other treatments for depression, anxiety and many other problems. Even if years of other treatments have not helped you, the TEAM approach can enable the emotional recovery that you seek.

You can listen to examples of such successes yourself, as live treatment sessions found at the links to www.feelinggood.com provided at the end of this guide. You may find the examples puzzling, however, because the live sessions sound like straightforward conversations. Yet, these seemingly simple conversations cause the rapid recovery that is one of the goals of TEAM therapy. How can this be?

When you listen to live sessions, the effectiveness of TEAM therapy can be so puzzling that it sounds like magic. Perhaps that's because, as the writer Arthur C. Clarke once wrote, "Any sufficiently advanced technology is indistinguishable from magic." Although there's no electronic, biological or chemical technology in TEAM therapy, it's an advanced technology of the mind.

This guide describes what you can expect when you're working with a TEAM therapist and also provides some possible explanations for what's happening at each step. With this information, you'll be able to understand what happens at every step of your own therapeutic journey. You'll also be able to understand every step in the live sessions available at www.feelinggood.com.

This guide is designed to be helpful for multiple groups of people:

- You may be new to the world of TEAM therapy, and puzzled why it's so different from other treatments. The *User's Guide* will help you understand how TEAM therapy differs and what the purpose is of features unique to this approach.
- If you're working with a therapist, or working on your own by doing the exercises in Dr. David Burns newest book (called *Feeling Great*), then knowing the purpose of each step will help you work more effectively towards recovery. Working with *Feeling Great* (or Dr. Burns' other books) can offer a powerful approach to improving your emotional life. This is even true for people who don't have the option of working with a good therapist. The techniques you'll need already are straightforward – and will hopefully be even more straightforward with the help of this guide.
- If you're a therapist who's studying TEAM therapy, this guide will hopefully make it easier to understand how the pieces of this approach fit together. The guide also will help you understand why it's important to do things in certain ways.
- If you're a therapist wondering if learning TEAM therapy is worth your interest, I hope the information in here will make you curious about learning more.

Perhaps you think the rapid recoveries that can be achieved with TEAM therapy are impossible because “that’s not how the brain works.” The problem with such a belief is that such rapid recoveries are being seen by therapists around the world who are using the TEAM approach. Perhaps it’s worth considering a different perspective on brain function, such as that provided in this *User’s Guide*.

One of the most wonderful discoveries about our brains is that changing unpleasant emotions is easier than it feels when we’re in the midst of those emotions. This discovery is the basis for some of the most effective therapies for emotional distress. Learning how to treat such distress can be one of the most liberating experiences that you can have.

Finally, I want to be clear that the use of this guide is not meant to be a replacement for seeing a therapist if you need one. If you’re in emotional trouble, then let someone know.

Why would you care how TEAM therapy works?

It’s easier to work with your mind if you know how your mind works.

There are two kinds of treatments for health problems:

- For some therapies, your active participation is needed to get better. Psychotherapy and physical therapy are good examples of treatments like this.
- For other therapies, like taking an antibiotic for a bacterial infection, you don’t have to do much. Just take the pill, and let it do its job.

If a therapy requires your participation, you can make it even more effective if you understand what you’re trying to accomplish. It’s true that TEAM therapy will work for you whether or not you understand how it works. If you know what you’re doing at each step, however, you can make TEAM therapy work even better.

Thus, there are several reasons why you might care how TEAM therapy works. For example:

- TEAM therapy is different from other therapies. Understanding how TEAM therapy works will help you see why those differences make the TEAM approach more successful.
- Understanding how TEAM therapy works will help you understand why this therapy can enable rapid recovery from depression and anxiety, even if years of working with other approaches have not helped.
- Every step in TEAM CBT is there because it’s important in enabling rapid recovery. By understanding the purpose of each step, you’ll be able to make each one even more powerful.
- Understanding how TEAM therapy works also will help you be more flexible in the way you approach therapy. As an analogy, let’s say that you’re trying to get to a particular destination and you know about all the possible roads and paths that you can use. If you have that knowledge, then you can still figure out how to get where you want to go even if one of the roads is blocked.
- Finally, understanding how TEAM therapy works will make it more enjoyable and more interesting.

With TEAM therapy, you’ll learn the skills you need to restore joy in your life.

By understanding how TEAM therapy works, you’ll also be able to make those skills even more powerful.

Approaching TEAM therapy from the perspective of brain function

All the benefits of TEAM therapy are possible because of the way this approach aligns with the basic functions of your brain, the most remarkable part of your body. The brain is where all your thoughts and feelings occur. It is the only part of your body that can decide to change itself – such as the change you’re seeking when you decide to work with a therapist. It’s also the only part of your body that can then create an action plan to do this, and can make that action plan happen. No other part of your body can do the wonderful things that your brain can do.

For any therapy to work, it has to be aligned with the biology of what you’re trying to fix. Antibiotics treat bacterial infections because they kill bacteria. But antibiotics don’t work for a broken leg. And putting a cast on your leg won’t treat a bacterial infection. The biology of the therapy has to be aligned with the biology of the problem.

The most effective approaches for restoring your emotional balance will be the ones that are most aligned with the biology of emotions.

That biology is the biology of your brain.

Part I: What’s going on in your brain?

In order for TEAM therapy (and CBT in general) to be able to treat the wide range of emotional maladies for which they’re used, these approaches must work on principles of brain function so fundamental that they apply to many different situations. Moreover, there do not appear to be any cultural limitations in the utility of the techniques of CBT, so it’s important to think in terms of brain functions that transcend gender, race, culture or anything else that varies in different populations.

Several critical brain functions help make it easier to understand depression and anxiety, and also help explain how TEAM therapy works and why it’s so effective.

A. Your brain uses emotions to help keep you alive

Where do your emotions come from? Why do you have the emotions that you do? Knowing how your emotions are generated can help you when they’re interfering with living a joyful life.

To carry out its most important function, which is helping keep you alive, your brain interprets the world, predicts what’s going to happen and motivates you to act in a way that matches these interpretations and predictions. *Those motivations are your emotions.*

The five steps your brain goes through when it interprets information, makes predictions and generates emotions are:

Step 1. The brain receives information from inside the body and from the outside world.

Step 2. It interprets this information to make sense of what’s happening and to predict what’s going to happen next (and what you need to do). Making predictions is one of the most important brain functions. Interpreting information and making predictions occurs quickly and takes place almost entirely at an unconscious level we don’t even notice.

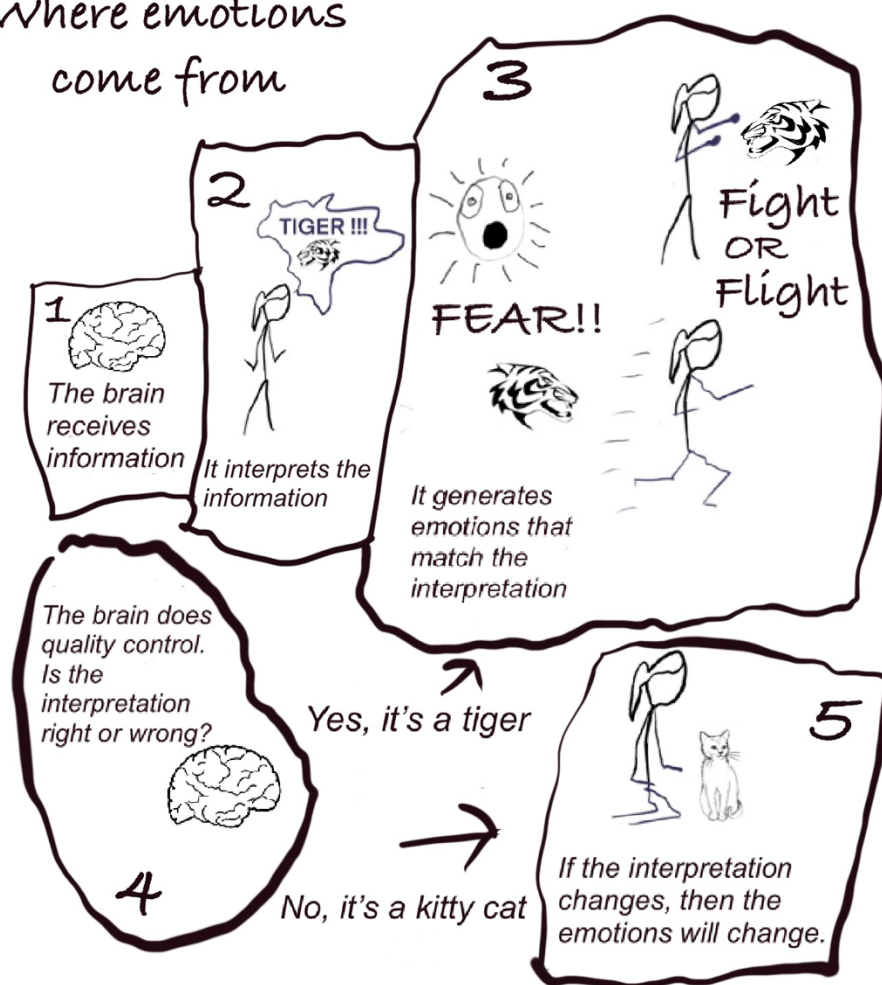
Step 3. The brain next creates emotions as motivations that push you to respond so what you do is aligned with your interpretations and predictions. This happens quickly and without

your conscious awareness. Emotions are not a conclusion you reach, like when you solve a mathematics problem. Instead, they are rapid and unconscious reactions to your interpretations and predictions. Whatever emotions you're experiencing, the key to understanding them is to identify the interpretations that cause them.

Emotions come in two basic types, and can motivate you to move towards something or away from something:

- For example, your interpretations might predict that something will be enjoyable. If so, they'll cause positive emotions, like pleasure, joy, enthusiasm, calm, curiosity, friendship, sexual attraction, or the feeling of being safe. When you have a positive emotion, it's natural to want to experience more of whatever causes that emotion and to feel happy if you can do that.
- Your interpretations also might predict that something is going to be unpleasant. If so, they'll cause negative emotions, like sadness, shame, guilt, feeling helpless or hopeless or alone or abandoned. When you have a negative emotion, it's natural to want to experience less of what causes that emotion and to feel stressed and unhappy if you can't do that.

Where emotions
come from



TEAM CBT teaches you skills to make your
quality control easier and more effective.

Step 4. It's possible the first interpretations and predictions you make are wrong, so your brain also needs to do some quality control. In this step, your brain re-analyzes information in case the interpretations and predictions need to change. If one interpretation is more correct than another one, your brain usually will choose the one that's more accurate. After all, you're more likely to survive if your predictions are based on correct interpretations than incorrect ones.

Step 5. If the original interpretations and predictions are wrong, then your brain also may have generated the wrong emotions. If so, your brain will automatically generate different emotions to match your new interpretations and predictions.

Steps 4 and 5 are the keys to understanding how TEAM therapy works. Working with your therapist, or with Feeling Great, you'll learn powerful techniques for carrying out the quality control (Step 4) that's needed to experience happier emotions. Once you carry out Step 4, your brain will automatically change your emotions (Step 5) because that is how the brain works.

Emotions are the way your brain tries to match your actions with your interpretations and predictions. Emotions are immediate, emotions are generated without any conscious thinking, and emotions are powerful! Emotions are powerful because their job is to motivate you to carry out the actions your brain believes – correctly or incorrectly – will increase the likelihood of survival.

The discovery that emotions come from our interpretations and predictions is one of the most important discoveries about the brain that has ever been made. In TEAM therapy, you'll learn many ways to use this discovery to change the way you feel.

B. The cells where it happens

Everything that you think and feel is based on the activity of cells in your brain called nerve cells (or neurons). Every memory you have, everything you imagine, every interpretation of your experiences, every prediction you make and every emotion you feel all exist because of your nerve cells.

With TEAM therapy, you're going to learn how to modify specific nerve cells in your own brain. You're going to learn how to conduct your own personal micro-neurosurgery, with a specificity that no neurosurgeon in the world can match.

Understanding how nerve cells work will:

- Make it easier for you to change them in ways that will make you happier;
- Help you understand why some of the unique features of TEAM therapy help make this approach so powerful;
- Help you understand why TEAM therapy also is more effective than using medications.

Five ideas are critical in understanding how nerve cells work, and how TEAM therapy works.

1. You have a lot of nerve cells but not a lot of ways for them to talk to each other

It takes a lot of nerve cells to store and process all the experiences that help make you who you are, so many that your brain contains around 100 billion of these cells. As a comparison, it's thought that about 107 billion humans have ever lived in the entire history of the world. So, you

have almost as many nerve cells in your brain as there are people that have ever lived on this planet! And your brain is even more complex than that, because each nerve cell makes connections with hundreds, or thousands, of other nerve cells. That means there are trillions of interactions that occur between the nerve cells tucked away in each of our heads.

Nerve cells communicate with each other by releasing small amounts of specific chemicals. These chemicals are called *neurotransmitters*. This communication mostly occurs between specific nerve cells, but some of the chemicals released can affect larger numbers of cells.

There's a problem with neurotransmitters that's critical in understanding some of the differences between TEAM therapy and the use of medications – and also helps explain why antidepressants and anti-anxiety drugs can cause so many different side effects.

The problem is this: Although there are around 100 billion nerve cells, there are only around 100-200 neurotransmitters. That means that there are millions and millions and millions of nerve cells in your brain that all use the same neurotransmitters to communicate with each other. In addition, there are other nerve cells in different parts of your body (such as in your gut and your heart) that also use the same neurotransmitters.

Some neurotransmitters are affected by anti-depressants and anti-anxiety medications, but a drug that changes a neurotransmitter changes it all over the body. Every cell that uses that neurotransmitter, anywhere in the body, is affected. It doesn't matter what part of your brain that cell is in, or even if it's not in your brain at all.

One way to think about why this is a problem is to consider your computer:

- Everything you do on your computer uses electricity, which works like a neurotransmitter. The electricity allows each tiny wire to communicate with other tiny little wires in your computer.
- The specificity that occurs is because of how the parts of your computer are connected to each other.

TEAM therapy is like using your computer to do something specific.

In contrast, antidepressants and anti-anxiety drugs are like changing the electricity in all the circuits in your whole computer at the same time. If you change the electricity in your whole computer, you change it for all those tiny little wires, with no specificity.

The ability to work with specific nerve cells in your brain is critical both in understanding why TEAM therapy is so powerful and why it's very different than using medications.

2. Brain function requires specificity.

How does your brain solve the problem of working with 100 billion nerve cells in an organized way? It's hard enough to figure out what's going on when you're in a group of 10 people and they're all talking and acting at the same time. Yet your brain is able to work with a much more complex challenge.

The brain doesn't always work perfectly, to be sure. Still, considering how many nerve cells there are, and everything the brain has to do, it generally does a pretty good job of doing what it's supposed to do.

One of the reasons your brain can do its jobs correctly is because nerve cell activation is very specific. You can usually find the nerve cells you need whenever you need them.

Imagine how difficult your life would be if every time you needed to do something, you had to go sorting through all your different nerve cells to find the ones you need. It's hard enough to work efficiently if you have to sort through 20 different things on your desk every time you start a new task. If you had to sort through billions of nerve cells every time you needed to do something, you'd never get anything done.

3. Specificity is possible because nerve cells work in networks:

How does specificity occur, and how can you use that specificity to transform your emotional life?

One of the reasons that your brain is able to find the right cells when it needs them is because nerve cells are organized into functional units called *networks*. Some networks represent a single simple fact encoded in a small number of nerve cells that may even be located in just one brain region. Larger networks connect multiple memories and thoughts together with each other.

Understanding a little bit about nerve cell networks will help you understand how TEAM therapy works. These networks are also critical in understanding how rapid change is even possible, why particular techniques are used at particular times and in particular ways and how to make them more powerful.

Three ideas about nerve cell networks are particularly important in understanding TEAM therapy:

- Our memories, our interpretations, our predictions and our emotions all depend on the activity of specific nerve cell networks.
- It seems that each nerve cell network can be used whenever the information it represents is needed.
- Learning occurs by modifying nerve cell networks.

The reason the same nerve cell networks are used over and over is that even though the brain has lots of cells and networks, there's not enough of them to use a different one for every moment and thought and feeling in your life. For example, you don't create a new nerve cell network every time you need to solve a math problem where you need to know that $2+2=4$. When you first learned that fact, you created a new network. Once that network was created, it's a much more efficient use of nerve cells to activate that same network whenever you need the fact that $2+2=4$.

Let's consider an example of how nerve cell networks are critical in understanding where emotions come from and why TEAM therapy is effective.

Let's say someone did something awful to you in the past, and caused terrible memories and emotions. All of your memories about that event are contained in nerve cell networks. Even though the memories can cause powerful emotions, the memories are not the event. The memories are groups of nerve cells.

The nerve cell networks that represent your memories of an awful event can be activated if you're reminded of the event – and this is how emotional triggers work. Those networks might

be activated (triggered) by a picture of the person who hurt you, or by a sound, or a smell or even a word that reminds you of what happened.

When your memories of an awful event are activated, your brain unleashes powerful emotions because it's trying to protect you from being hurt again. This is because when your brain remembers those memories, the emotions are generated as a way to protect you from harm. When you're reminded of the hurtful event, even unconsciously, your brain will generate negative emotions as signals to warn you of the possibility of danger.

The problem is that those powerful emotions also can leave you under the control of whoever hurt you. That person might even be long gone, but the way you remember them is letting them continue to have power over you now.

How do you get out of this emotional trap?

The way you take control of your emotions is by learning to modify your nerve cell networks, which is what you're going to do in the steps of TEAM therapy. Even for memories of trauma that can be so powerful that it feels like you're having the experience again, those memories are not the real event. Whatever happened is not still happening, no matter how powerful the memories and the emotions are. The memories are networks of nerve cells so small that you need a microscope to see them. By learning how to modify those nerve cell networks, you can take control over the emotions associated with those memories.

The most effective way to get out of emotional traps associated with hurtful past events is to learn how to take control of your interpretations, predictions and emotions so that you're the one in charge. You can't change the past, but you can change the way remembering the past affects you, so that your emotions are not being regulated by someone who hurt you. This is not about forgetting, or forgiving or condoning what happened to you. This is about giving you the power to be in charge of your own emotions instead of letting that power stay with someone else.

In other words, you get out of this trap by careful modification of specific nerve cell networks. It's an exciting idea that we have the ability to choose how we're going to feel, and learning how to do this is one of the important skills you'll learn in TEAM therapy.

The question thus is how do you modify specific nerve cell networks – and one answer is by using principles that are central for effective learning and that are critical in TEAM therapy.

4. You can modify your nerve cell networks – which is how learning occurs

We all have the ability to modify our nerve cell networks, and we do this every time we learn something new. Our brains are not like a computer that comes with its programs already installed. We start off without many skills at all – we can't speak, or understand words, or do very much beyond making a small number of sounds and doing other things needed to get an adult to love us and take care of us. Oh yes, along with feeding, drinking, and getting rid of what we ate and drank.

There's a lot that you need to learn if you're going to survive, and you do that by modifying your nerve cell networks. If the connections between your nerve cells couldn't be changed, you'd never be able to learn. Sometimes when you're learning – particularly when you're young – you have to build new networks for your new skills. Pretty soon, however, you're doing most learning by modifying the networks you've already built.

Activating and modifying nerve cell networks in specific ways obviously works pretty well, or you wouldn't be sitting here reading this guide to TEAM therapy. In fact, you wouldn't be here at all because you would not have been able to survive. It turns out that every type of life that has nerve cells is able to learn, and they do this by modifying their nerve cells and nerve cell networks. Being able to change their properties as part of learning is a fundamental part of how nerve cells work.

TEAM therapy works by finding out what you need to learn, and using powerful strategies to make the learning more effective. In this approach, you'll use multiple learning techniques to help you modify the specific nerve cell networks important in your personal emotional recovery.

5. The rules of effective learning are all important in TEAM therapy

In TEAM therapy, you're going to learn how to modify your nerve cell networks. You'll learn how to find the right networks and to modify them in ways that will cause powerful emotional change.

How do you do this most effectively?

Modifying nerve cell networks follows eight rules, which are all important in understanding TEAM therapy:

1. To modify a specific nerve cell network, you first have to activate it. You know that you've activated a network because you're aware of the information it carries, instead of just using that information without consciously thinking about it.
2. One way to modify nerve cell networks is to connect them to other networks by getting them to work together. Networks that work together become connected with each other, which scientists summarize with the saying "*What Fires Together Wires Together*." This is the most important concept in understanding how all learning occurs. In addition, the more often that nerve cell networks work with each other, the stronger the connections become. This is one of the ways that new networks are formed and that existing networks become stronger.
3. What's "*Wired Together tends to Fire Together*" is also a critical concept in understanding all kinds of learning and behavior. This is why once you've learned something it gets easier to repeat it every time you do it. Habits are behaviors caused by the rule that when nerve cell networks are wired together, it's easier to get them to fire together. This rule is also why we keep using certain patterns of thinking.
4. Learning effectively requires attention and slow analytical thinking if you're trying to change your interpretations of the world. This is different from building what's called muscle memory where too much thinking seems to interfere with building at least certain types of muscle memory. For example, when you're learning to ride a bike, or to ski, or to play tennis, or to play a musical instrument, "overthinking" what you're doing makes it more difficult to complete the task. This is not the case, however, for changing the way you interpret the world.
5. Learning is more effective when you use multiple types of brain function to learn something. Learning in this way brings more networks together to form still larger ones and also helps build stronger networks more quickly. When you learn in this way, you're also paying more attention to whatever you're learning – and that attention also makes learning more effective.

For example, you can learn something new by reading about it but the learning is more effective if you also write notes about what you're reading. When you write, you're thinking about what you want to learn and about the words that you use. You're also using your muscles to write the words, and you're using your vision to check the words

as you write them. You're using other brain networks to make sure the words are correct. If you also discuss what you're writing down, you're bringing in even more networks of nerve cells. By having multiple different networks work together, it's easier to learn something new.

You can try this yourself with some simple experiments. For example, let's say you want to learn the name of a new person you just met. If they just tell you their name, you may have trouble remembering it. I know I do. It's a lot easier to remember their name if you use it several times while you're talking together, and also write it down. You can also ask them what the name means, and so forth. Using all these different approaches will make it much easier to remember the new name.

6. Learning is also more effective if you discover answers for yourself than if someone just tells you the answers. TEAM therapy is built so that you'll be the one who makes most of the discoveries that you need to make.
7. One of the most powerful enhancers of learning is surprise. In fact, surprise is the most effective way to cause a rapid change in your interpretations of the world. This makes a lot of sense from the perspective of brain function, because the fact that you're surprised means that whatever happened was not something you predicted. That means you need to adjust your interpretations, because making the wrong prediction can decrease your likelihood of survival. Surprise also is a powerful enhancer of learning because it is the only emotion that forces you to evaluate your interpretations and predictions so quickly. Thus, it seems that surprise can even trigger the slow analytical thinking that is so important in learning. And surprise focuses your attention very effectively.
8. As powerful as surprise as an enhancer of learning is a strong emotional experience of any sort. If you think back over your life, you'll find that your strongest memories are those that have a strong emotional quality to them. If the experience was a positive one, then you will have positive emotions that make you want to repeat the experience. Such emotions include desirability, curiosity and joy. If the experience was a negative one, then the emotions will be ones that make you not want to repeat that experience. Such emotions include anxiety, fear, guilt and shame.

If you combine surprise with emotions (which is often the case), then you have an immensely powerful means of enhancing learning.

Everything that you learn occurs by generating new networks of nerve cells and by modifying existing networks. When you change your interpretations, you do it by modifying specific networks of nerve cells. This is something you've been doing all of your life. Every time you learn something new, you're carrying out highly focused micro-neurosurgery on your own brain in order to modify specific nerve cell networks! No neurosurgeon, anywhere in the world, can change your brain with the specificity you achieve every time you learn something new.

TEAM therapy uses multiple powerful learning techniques to modify specific nerve cell networks. For example, when you talk with your therapist, and answer their questions, you'll be activating specific nerve cell networks. You'll learn new ideas and new skills, which will help you modify those nerve cell networks. When you discuss these new ideas in different ways, you'll fire the nerve cell networks together and wire them together. You'll also use writing in the session and in your home practice to strengthen the new networks even more. And you'll discover for yourself many of the answers that you need.

C. Thinking fast, thinking slow, and the stories that shape our interpretations

One of the most intriguing analyses of thinking in recent times is research suggesting we use two different types of thinking to understand the world. These are called *fast* and *slow* thinking, and they appear to be critical in understanding TEAM therapy and how to make it more powerful. Fast and slow thinking also seem to be critical in understanding how depression, anxiety, relationship problems, habits and addictions occur.

Fast thinking: Most thinking occurs so quickly that we're not even aware of how or why we've reached a conclusion. Fast thinking is intuitive, unconscious and automatic, and enables us to solve problems so quickly that the answer seems to appear immediately. This approach to interpreting the world and making predictions is based on what we've already learned and what we already believe is true.

Slow thinking: Slow thinking is what we do when we're trying to learn something new, or trying to solve a problem that requires us to break out of our standard habits of thought. Slow thinking is a conscious and deliberate type of thinking that requires more focus and attention than fast thinking.

Even though slow analytical approaches to problem solving are what most people believe they're doing when they're thinking, it seems that we mostly use rapid thinking and only rarely use slow thinking. The fact that we mostly use rapid thinking makes sense for several reasons:

- During evolution, the most important problems were ones that needed immediate responses. These problems were often how to keep from being eaten, and taking too much time to respond could be fatal. Thus, the ability to interpret, predict and respond rapidly would have helped keep us alive.
- Fast thinking also seems to be a natural consequence of how nerve cell networks function. We discussed earlier the idea that nerve cell networks that are "wired together fire together." Fast thinking lets you respond quickly because it uses nerve cell networks that are already wired together.
- Fast thinking is also the most efficient way to get through the day. Most of our days are similar to each other, and events that require slow thinking to figure out a novel response are pretty rare. If we already know what to do, then it doesn't make sense to spend a lot of time thinking about it.

Fast thinking depends on our internal stories: One of the reasons fast thinking is so easy to use is because we organize most of our thoughts in terms of stories that link together multiple networks. Stories make it easier to remember and understand information. Stories also make it easier to recognize patterns, which is critical for predicting what's going to happen. The ability of stories to help us make predictions also makes our day-to-day lives easier. If you "know how the story goes," making predictions and drawing conclusions is quick and doesn't require a lot of effort.

The tendency to use existing stories to understand the world is so powerful that we often interpret things in the wrong way because it's easier to fit them into an existing story than to create a new one. Using fast thinking in this way can also be part of how your brain tries to keep you safe. For example, let's say a past event hurt you in some way. If something traumatic happened to you, any similar event can trigger the feelings of that trauma even if the similarity is small. If the trauma involved a gunshot or an explosion, for example, the first interpretation of a sudden sound is of danger. If someone abused you, anything that reminds you of that person can trigger your internal alarms. It might be a smell, an accent, a piece of clothing, the color of someone's skin, or anything else that wakes up the nerve cell networks that were created by that trauma.

Fast thinking is useful, but it's a strategy that runs into problems when

- our existing nerve cell networks lead to incorrect interpretations and predictions, or
- we're in a situation where we need to figure out new solutions.

For example, people who are depressed often interpret the world through internal stories that say life is hopeless and that they can't be helped. People with anxiety have internal stories that something bad is going to happen. These stories generate fast thinking responses that lead to negative interpretations and predictions.

If your internal stories and your habits of thought generate negative interpretations and predictions, they can also generate the negative emotions that made you decide to work with a therapist. When you generate these interpretations and emotions over and over again, the networks that represent them get stronger and stronger. It becomes harder to change the stories and the habits of thought that they're built on.

Anxiety, depression, relationship problems, unhealthy habits and addictions usually go on for a long time before you go a therapist, which means that the patterns of thought that are part of your unhappiness have had a long time to become strong habits. You may even feel as though nothing will ever change because your life has been like this for so long. This becomes part of your fast thinking.

The internal stories and fast thinking patterns that are at the center of depression and anxiety become like a maze with no way out because every interpretation keeps you trapped. Your brain then makes the internal story even worse, with the interpretation that you're broken and helpless. You become convinced that your situation is hopeless.

Depression and anxiety are like being trapped in a dark maze. The internal stories we tell ourselves keep us trapped in this maze. Eventually we can feel like there's no way out.



If depression or anxiety is disrupting your life, then it's critical to break out of your personal maze. That's hard to do if you keep using the same fast thinking strategies that you've been using all along. After all, it's those thinking strategies that created the maze.

The way we break out of a maze caused by flawed fast thinking is to use slow analytical thinking to figure out what's wrong and to figure out new interpretations. This is how you change your internal stories and change your patterns of fast thinking.

If we look at this in terms of how thinking works at the level of nerve cells, we use slow analytical thinking to modify existing nerve cell networks and to create new ones.

TEAM therapy uses multiple strategies to help you break out of your own personal maze by using slow analytical thinking:

- You'll identify and become aware of your internal stories. Our stories are the way we interpret our own lives, and learning how those stories create our personal maze is important in curing depression and anxiety.
- By identifying the relevant internal stories, you'll be activating the networks of nerve cells that you're going to modify.
- You'll find out that you're not broken. One of the important discoveries in TEAM therapy is that depression and anxiety reveal what's right about the way your brain is working! (We'll look at this idea more closely in the next section of this guide, and again when we're examining the steps in a TEAM therapy session.)
- You'll identify thinking errors that keep you trapped in the maze, and learn how to overcome these errors. We all make lots of errors in our thinking, but we do this a lot more when we're depressed or anxious. Those errors are critical in understanding and treating depression and anxiety.
- Although we're often not aware of errors in our thinking, becoming aware of them is not enough by itself. People with depression or anxiety often realize that they're thinking about things in a way that's not helping them.
- You also need to change the errors in your thinking. In fact, if you know that you need change, but don't create change, this could even strengthen the feelings that you're broken. You can feel as though you'll always be trapped in the maze.
- With TEAM therapy, you'll learn powerful ways to identify errors in your thinking and also ways to fix them.

With TEAM therapy, you're going to learn to use the power of slow analytical thinking to create new habits of thought. These new ways of interpreting the world will set you on the path to greater happiness. As you'll see in Part II of this guide, TEAM therapy uses multiple ways to encourage the use of slow thinking to analyze problems in a conscious, deliberate and focused manner.

What's the way out if you're trapped in a maze of habits of thought, internal stories and fast thinking that causes negative interpretations and negative emotions?

The answer is to do what you're going to learn to do in TEAM therapy, which is to use your slow analytical thinking as the key for unlocking the door to happiness. With TEAM therapy, you'll learn to identify the fast thinking patterns that are causing your emotional challenges. And you'll learn powerful techniques to change your habits of thought and to generate new patterns of thinking.

As you master these skills, you'll build new patterns of fast thinking, ones that are associated with greater happiness. You'll also learn powerful ways to use your analytical thinking abilities to respond to any new situation so that your recovery continues.

D. Is your brain broken? Or is it just doing its job?

Let's wrap up this introduction to brain function by comparing some of the ideas of TEAM therapy with other ways of thinking about depression, anxiety and other emotional challenges.

The most fundamental disagreement in the field of treating depression, anxiety and related problems is whether or not something is wrong in the brains of people who seek help in dealing with their emotions.

- Therapists who use cognitive and behavioral therapy techniques, including TEAM therapy, believe that you're not broken or defective. They believe instead that your thoughts include some thinking errors. They believe the most effective treatment for depression and anxiety is to correct the errors in your thinking strategies. TEAM therapists even believe that depression and anxiety are showing what's right about you, and not what's wrong about you.
- In contrast, many researchers and doctors believe that depression and anxiety are caused by the brain working incorrectly. They believe that something is defective in the brains of people with these problems.

Some of the most dramatic claims that brains work differently in people with depression and anxiety than in other people are focused on specific parts of the brain called the *amygdala* and the *prefrontal cortex*:

- The *amygdala* is a part of the brain that's important in creating your emotions. Overall, this part of the brain is called the *limbic system*. The limbic system, including the amygdala, are involved in creating both positive and negative emotions.
- The amygdala, and the rest of the limbic system, have many functions, but they're particularly important in setting off alarms if they sense danger. These alarms are called the "fight or flight" response (or, sometimes, the "flight, fight or freeze" response).
- The responses of your amygdala, and your limbic system are immediate, and rely on unconscious fast thinking.
- The *prefrontal cortex* has different jobs than the amygdala and the rest of the limbic system. The prefrontal cortex, which sits right behind your forehead, is more developed in humans than in any other animal. As indicated by its name, it's part of the cortex.
- The prefrontal cortex, and the cortex in general, are responsible for many of the qualities that are especially human. These include, for example, planning, judgement, self-awareness, and language.
- The prefrontal cortex also can turn off the alarm systems in the amygdala by sending information that everything is okay.
- The slow analytical thinking you use to examine the accuracy of your interpretations and to solve new problems depends on the cortex, and perhaps particularly on the prefrontal cortex.

If you've been learning about depression and anxiety, you may have read that the amygdala and prefrontal cortex work differently if you're depressed or anxious than when you're feeling good.

- Studies in people with anxiety or depression suggest the amygdala is more activated by information it thinks indicates danger. If you're anxious or depressed, your amygdala may even treat neutral information as though it means you're in danger.
- Similar imaging studies suggest the prefrontal cortex also seems to be less active in people with depression or anxiety.
- In addition, interactions between the prefrontal cortex and the amygdala seem to be less effective in people with depression or anxiety.
- If the prefrontal cortex is less active, and is not communicating effectively with the amygdala, this could mean that it's harder to do the quality control of interpretations and predictions that can change your emotions easily and quickly.

The problem is that even if these differences exist, that doesn't mean your brain is broken or defective. This is because changes like these are all part of normal brain function.

During most of evolution, being able to super-activate the amygdala and suppress the prefrontal cortex for a few minutes probably helped keep you alive. That's because if you didn't respond quickly enough to potential danger, you were more likely to get killed and eaten. If your brain interpreted something as a sign of danger, the amygdala and the limbic system took control. Activity in the prefrontal cortex was suppressed, and the brain was flooded with emotions that helped you survive by activating your fight-or-flight response. That way, you reacted quickly without spending extra time doing slow analytical thinking. Then, when the danger was over, these responses turned off and a more balanced relationship between the prefrontal cortex and the limbic system returned.

The problem we have in our modern world is that the stresses that trigger your limbic danger response can continue for a long time. Even worse, it seems that the limbic system does not do a good job of telling the difference between events that are real and thoughts about events that are just your nerve cell networks firing. Activation of your memories about something that happened in the past can trigger your limbic system. So can worrying about things that might happen in the future, but also might not, and that certainly are not happening now.

Our human brains are great at worrying about the past and the future instead of focusing on what's going on right now. This means that instead of the limbic alarms turning off in a few minutes when the danger's over, the alarms stay on, activity in the prefrontal cortex is suppressed and communication between the prefrontal cortex and the amygdala is less effective. Even if there's no danger right at this moment, the limbic system can keep firing if you're worrying about the possibility of something that will cause you pain.

All of these changes cause the emotions associated with anxiety. If the stressful situation keeps going on without getting better, you also might start feeling helpless and hopeless – which are two of the most frequent emotions in depression.

Although it sounds pretty serious if important parts of your brain are working differently when you're depressed or anxious, it could easily be that these changes occur because of the stress associated with depression and anxiety. Instead of indicating that there's something wrong with your brain, these changes might show that your brain is responding to your stressful thoughts just as it's supposed to respond.

Which view is true? We'll return to this question after we go through the steps of a TEAM therapy session. Then it will be easy to see how TEAM therapy can help determine whether changes in brain function are caused by the stress of depression and anxiety. If this view is correct, then these changes are not a sign that your brain is broken. Instead, they're a sign that your brain is just doing its job.

More importantly, if changes like we've talked about in this section are occurring because of your thoughts, then how do we help your brain work in a more peaceful and happier way? Learning how to do this is a part what you'll experience in TEAM therapy.

Part II: The 10 steps of TEAM therapy

TEAM stands for Testing, Empathy, Addressing resistance and Methods. These are some of the necessary components of TEAM therapy. This approach also includes learning powerful skills that will help you lead a happier life, as well as training that will enable you to react calmly and effectively if you ever have a relapse.

One of the most important features of TEAM therapy is that every component has been thought out in great detail. This is true from the moment you start interacting with your therapist (or start working with the exercises in *Feeling Great*) to the time you've recovered completely, to the training you'll receive in relapse prevention.

Another important feature of TEAM therapy is the ability to change the order in which certain steps occur, and to revisit particular steps in any way needed for each individual. This can be confusing when you listen to live sessions, because the details of the session can vary with different people. The use of thoughtful improvisation, however, is also one of the reasons TEAM therapy is so powerful. We each have individual needs, and our needs may even differ from one session to the next. By understanding the goals of each step of TEAM therapy, it becomes possible to interweave them in multiple ways to align with the needs of each person.

Let's look at how TEAM therapy works, what aspects of this approach are unique, and how you can work together most effectively with your therapist and/or with *Feeling Great* to achieve the joy that you seek.

Step 1: Committing to an action plan

The reason you're talking with a therapist, or thinking of talking with a therapist, is because your emotional life is not going the way you want.

When your emotional life is not going well, there are always internal stories that are important in understanding those emotions. Is it that you're broken, that your brain is defective, that you're helpless and it's all hopeless? Is it believing that something awful is going to happen to you?

What if your internal story said you're not broken?

What if you could be happy?

What would that be worth to you?

Most people with depression or anxiety spend a lot of time every day thinking about their depression, or their anxiety. You've probably experienced this also. It's easy to spend a lot of time every day worrying about what's wrong. Many people often spend years in therapy, years being treated with powerful medications, or both. Sometimes they make slow progress, and sometimes they don't make any progress at all. They can spend a lot of money, and the drugs they use can have unpleasant side effects.

What if you could take 15 minutes a day out of your worrying time, a few days each week for a couple of months (and maybe less), to achieve a happier state of mind?

Here's another way of thinking about these questions. What would you say to a friend who told you they wanted to learn how to play the guitar, but wasn't willing to practice between lessons and only wanted to play guitar when they met with their teacher once a week? Would you tell them that was a great idea? Do you think they'd be able to learn to play the guitar this way? Of course not!

Learning new ways of thinking is faster than learning how to be skilled musician, but it still takes some practice. Your therapist might call the practice "homework," but perhaps you didn't enjoy doing homework when you were in school. Practicing TEAM therapy techniques is going to be

a lot more fun, however, than the kind of homework you had to do in school. Best of all, you'll learn skills that really will be useful the rest of your life.

Working together both in sessions and by completing exercises on your own between sessions, you and your therapist will be able to make rapid progress.

Your therapist also may ask you to buy and start working with the book *Feeling Great*, which contains lots of information on TEAM therapy and helpful ways of practicing this new way of thinking. *Feeling Great* costs about \$20. It's like getting a second therapist for much less than the normal cost of therapy appointments – and this is one you can work with whenever you want, any time of day or night.

Step 2: Finding out how you're doing (Testing)

One of the unique aspects of TEAM therapy is that every therapy session starts and ends with filling out a simple Brief Mood Survey on your emotional state. The Brief Mood Survey is like an emotional thermometer. It provides information needed to start a session quickly and without stress.

The Brief Mood Survey provides information on Depression, Suicidal thoughts, Anxiety, Anger, Relationship Satisfaction, and Positive Feelings. It's simple to score for each category, and only takes a minute or so to complete. The information in the Brief Mood Survey makes it easy to see where to focus, and where a change in approach may be needed. If it's hard for you to describe your emotions, the Brief Mood Survey also makes it easy to do this by including a list of emotions and a place to score how strongly you're feeling them.

The Brief Mood Survey also tells you and your therapist what kind of progress you're making. For your therapist, this lets them keep track of how well they're doing when they're working with you. Filling out the Brief Mood Survey can also reveal problems that need attention but aren't being talked about. Using this "emotional thermometer" makes it easy for the two of you to find out if details of your treatment strategy need to be changed.

The Brief Mood Survey can be found in multiple versions by searching for "David Burns Brief Mood Survey" on the web ³ (The most recent versions include a section on positive feelings, which was not included in earlier versions of this form.) There is a more detailed version in Chapter 1 of *Feeling Great*, with an explanation of how to interpret the scores in each section. There are also versions of this form in Dr. Burns' earlier books.

Here's an example of what a section of the Brief Mood Survey looks like, from a version that lets you put your Before and After session scores next to each other. As you can see, all you need to do to fill out this form is to read the questions and put a check in the boxes that indicate how you're feeling.

³ For example, at <https://www.google.com/search?client=safari&rls=en&q=david+burns+brief+mood+survey&ie=UTF-8&oe=UTF-8>

Brief Mood Survey*	Before Session					After Session				
	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely	0—Not at all	1—Somewhat	2—Moderately	3—A lot	4—Extremely
Instructions. Use checks (✓) to indicate how you're feeling <i>right now</i> . Please answer all the items.										
How depressed do you feel right now?										
1. Sad or down in the dumps										
2. Discouraged or hopeless										
3. Low self-esteem, inferiority, worthlessness										
4. Loss of motivation to do things										
5. Loss of pleasure or satisfaction in life										
Total →						Total →				

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There are two additional aspects of the Brief Mood Survey that may be particularly interesting:

- First, I mentioned above that this emotional thermometer measures both negative and positive emotions. The measurement of positive feelings tells you a lot about the goals of TEAM therapy, which are to decrease unhappiness **and** to increase happiness. These are not two sides of a see-saw, where one must go up if the other goes down. Indeed, one of the most common side effects of multiple antidepressants is a phenomenon called emotional blunting⁴, where all your emotions are at a lower volume. The specific goals of TEAM therapy are to enable you to turn down the volume on your emotional demons as low as you would like, and also to enable your emotional angels to sing with joy.
- A second feature of the Brief Mood Survey that seems intriguing concerns the observations, discussed in Section 1, that the interactions between your prefrontal cortex and your amygdala/limbic system may be decreased in depression and anxiety. If decreased interactions between your prefrontal cortex and your limbic system are important in understanding depression and anxiety, then we need ways to increase the interaction between these parts of your brain. Identifying your emotions is taking the information of your limbic system and converting it to words (which occurs in your cortex). Deciding how strongly you feel each emotion also requires skills that involve your prefrontal cortex and cortex. (In addition, as you'll see, TEAM therapy has multiple other steps that seem like they require your prefrontal cortex and your limbic system to work together.)

TEAM therapy is the only type of psychotherapy where you score your feelings at the beginning and end of every session. This tells you a lot about the goals of TEAM therapy. If recovery was going to take years, then why would you check your emotional state at the beginning and end of every session? It only makes sense to check so often if you're using a therapy in which rapid progress is the goal.

⁴ This is an important concern for many people who take antidepressants, as one of the side effects that troubles many users is an emotional blunting so that they feel neither up or down. As just one example, recent studies from Oxford University reported emotional blunting in about half of people treated with multiple categories of antidepressants, (<https://pubmed.ncbi.nlm.nih.gov/28628765/>)

Step 3: Being accepted, telling your story and activating the nerve cell networks you're going to modify (Empathy)

The next step in TEAM therapy is Empathy. This step will accomplish four goals.

1. *Acceptance by your therapist:* The empathy step in TEAM therapy lets you feel seen, understood and accepted for who you are. When empathy is going well, you'll feel connected with each other.
2. *Alignment with your therapist:* You'll learn that you're working with someone who can be counted on to be on your side, and who's going to help you if things get rough.
3. *Decreasing stress:* If you're feeling accepted and understood, then your stress levels will decrease naturally. Decreasing stress is a big help any time you're trying to learn new ways of thinking. The activation of your limbic system will decrease, your flight-or-fight response will turn off, and activation of your prefrontal cortex will increase naturally as a part of normal brain function. It will be easier to do the slow thinking that your brain uses to solve problems and to learn new skills.
4. *Activation of nerve cell networks:* The fourth critical goal you'll accomplish during the empathy step is to activate nerve cell networks that you're going to learn how to modify. Activating these networks happens when you're telling your story during the Empathy step. The combination of activating and modifying these networks is critical in understanding why TEAM therapy is so effective and also in understanding how it differs from other therapies.

By learning that you're in a safe space where you don't have to defend yourself and where you can say anything you need to say, you'll be able to share what's troubling you. This means you'll be able to activate nerve cell networks that need to be modified. Feeling safe also allows you to even share information that you haven't shared with other people. Many people have secrets that they're afraid to share – sometimes even with themselves. The secrets could be about something that they did, thought or said, but just as often they're about something that was done or said to them. For example, many people who were physically or sexually abused feel intense shame about what happened. They can be reluctant to share such information with anyone for fear of being judged, or pitied. People might also have emotions that they've been taught they're not supposed to feel, or express – and so they even hide them from themselves.

All your troubling feelings and thoughts are the way you experience activation of the nerve cell networks you need to modify. The way that you know you've activated these nerve cell networks is to talk about your negative feelings and negative thoughts, and to write about them. In other words, it's by telling your story.

During the empathy step, your therapist will check frequently to see if they're understanding you correctly. If there's something you think they need to know that hasn't come up yet, then you're in a safe place where you can share information about anything that's troubling you. If they're not understanding what you've told them, then it's important to correct them.

Before completing the Empathy step, your therapist may ask you to grade them on how well they're understanding you. If you think they're understanding you well, but something is still missing, then give them a B, or even a B plus. If you think they're not doing a good job, then give them a lower grade. Your therapist's goal is to understand you so well that you decide that the right grade is an A. Only give this perfect grade if you feel they've shown full acceptance and full understanding of you.

Empathy when you're working by yourself: The value of understanding brain function.

What if you're working with *Feeling Great*, or another book, instead of working with a therapist? Clinical studies found that doing the exercises in Dr Burns' first book, *Feeling Good*, works as well as working with a therapist for about half the people who do this⁵. In these studies, half of the people with clinical levels of depression were cured by doing the exercises in *Feeling Good* for 20 minutes or so every day for a month. Moreover, three years later they were still cured – and if they had a down day, they just did the exercises in *Feeling Good* again. That's pretty remarkable, considering that the only thing these people did was spend some time during one month doing the exercises in an inexpensive book, with no drugs and no therapists. *Feeling Great* benefits from 40 years of further research from Dr. Burns since he wrote *Feeling Good*, and is likely to be even more effective.

Using a book can work like empathy from a therapist for several reasons:

- Empathy is about how you feel about the interaction. Many of us have read a book or a poem, or heard a song, or seen a play or a movie, and felt the words ring so true that we felt understood and connected to the author of those words. The writing in *Feeling Great* does that in multiple ways.
- For example, the books by Dr. Burns are very good at helping you feel that you're cared about. Dr. Burns does a great job of connecting with others with his writing. He receives many letters and emails every week from people telling him how much empathy they feel when they work with his books.
- Reading also can have a tremendous intimacy. You can imagine the people Dr. Burns writes about. You're learning of their burdens and their breakthroughs, and may even find pictures of them developing in your brain. (This experience is even stronger when you hear people in the live sessions available in the podcasts at www.feelinggood.com.)
- *Feeling Great*, and other books by Dr. Burns, also contain many examples of people solving a wide range of emotional problems. When you read these books, you'll find that other people with experiences like yours can solve their emotional challenges with TEAM therapy. The books do a good job of communicating that even though you might be in misery right now, you're not alone, you're not broken and your emotional situation is not hopeless.
- Books also make it easy to go back and forth to different topics whenever you need to do so. That can be more difficult if you're working with a therapist. Perhaps you don't want to admit confusion (an admission that your therapist will consider as their own failure, not yours, so please let them know if that's an issue). Perhaps you want to focus your paid time with your therapist on moving forward. Whatever the reason might be, with a book (and with the [feelinggood.com](http://www.feelinggood.com) podcasts) you can re-visit a particular topic as often as you like.

Understanding empathy from the perspective of brain function can show you how to make this step even more powerful when you're working by yourself. If we consider empathy from the perspective of brain function, four topics seem important in carrying out this part of the TEAM therapy journey without a therapist. These are:

1. *The power of writing*

- The most obvious difference between working with a book and working with a therapist is that when you work with a therapist, what you'd be doing in an empathy session is telling your story. Telling your story is a key step in activating the networks of nerve cells that you're going to modify.

⁵ These studies, led by Dr. Forrest Scogin, are summarized in *Feeling Great*, pgs. 465-466.

- To tell your story if you're working alone, from the perspective of brain function, the most effective way to activate the nerve cell networks you need to modify is to write down what you'd say to Dr. Burns if you were working with him. You can also do this by writing a letter to someone in your life, or to your future, present or past self. Whether you're talking about your concerns with someone else, or writing them down for yourself, this is how you can be certain you've activated the networks of nerve cells that are important in understanding your emotions.
- Writing will help you express the story that defines your challenges.
- Another helpful thing about writing is that once you've written something down, you don't have to spend effort trying to keep it in your active memory. If you've written something down, you can move on to the next thought without having to constantly remember what you've already written.
- You can set your thoughts down on paper, or type them into your computer, whichever you prefer. (If you're using a computer, make sure that you save frequently and also that you're using a writing program that automatically saves text every few minutes – a stress-inducing mistake I've made more than once.)
- If you're not sure what to write, start with the reasons you checked the different boxes on the Brief Mood Survey. This is where a therapist would start, and it's also where you can start when you're working by yourself.
- You can also get some ideas about what to write about by listening to the empathy section of one or more live therapy sessions in the FeelingGood podcasts (www.feelinggood.com). Listen to how someone explains what's troubling them, and to the questions that help them expand on their story. Then imagine you're the person in the session, and start telling your story.
- As you continue with writing, you'll trigger memories of related information that you might want to add.
- One of the critical aspects of empathy in a TEAM therapy session is that it's important to take as much time as needed to tell your story, because telling the story is the way that nerve cell networks are activated. So, take whatever time that you need to do this. That way, whenever you're going to work on modifying your nerve cell networks all you have to do to get them activated is have a quick re-read of what you've written. By writing this information down, it's also easy to go back and make additions or other changes whenever you remember other relevant information.
- Writing is so powerful that you can also do this between sessions and write down information you want to share with your therapist.

How much is the right amount to write? To some extent, the answer is to trust yourself. A half-hour of empathy in a therapy session is equivalent to three to five pages of text. You can pace yourself that way, if you like. Remember that the goal is not to describe every moment and thought that comes to your mind, but to write down the ones that would let someone else understand what's troubling you. Writing can be, however, a powerful method of self-discovery that helps us find out what we're thinking – so write whatever you feel is needed.

2. *Giving yourself a grade*

- Remember that before completing the Empathy step, your therapist will ask you to grade them on how well they're understanding you. You can do the same thing for what you've written. This is not, however, like a teacher giving you a grade for a school essay you've written. No one is going to check on your grammar or spelling. The critical question is whether anything critical is missing from the story you need to tell.

3. Changing how painful information affects you

- Something else important that often occurs during an empathy session is sharing painful information, and finding out that it's okay to do this. This is part of changing the effects of that information on you. If you've had awful events in your life (as many people have), thinking about what happened can generate emotions to try and protect you from ever having similar events happen again. Those emotions provide clues about what's important to you, and they reveal critical parts of the story you need to tell. The fact that remembering those past events is painful is an important reason to bring them into the light.
- If you find that recalling and writing about certain information is very painful, a way to decrease that pain is to focus on curiosity and awareness. If you're curious about what's troubling you, and have the goal of becoming aware of this information, then it's easier to step back and not get as involved in the emotions of what you're writing.
- If you do feel emotionally overwhelmed, and start crying (for example), that's fine. In an empathy session with a therapist, you'd be encouraged to just let your feelings flow until you were ready to go on. You can do exactly the same thing if you're writing by yourself.
- *Even though memories can bring out overwhelming emotions, it's critical to remember that the memories are not the event. Writing provides a powerful demonstration, occurring right there in front of you, that everything you remember and write down is not the event, but is words about the event that you're putting down on a page.*

4. Creating a safe space

- Maybe you're feeling too stressed to write. I get that. I've been pretty stressed writing this guide, as I try to figure out how to make it useful for others, what to include and what I can leave out. But it's important to tell your story, so write down whatever comes to mind. Once you start, you'll likely find that more thoughts will start to flow. And if you find that you still have more to say, keep going until you feel like you've put down the information that you'd like to share with a perfect friend (or a perfect therapist). If you have even more to say, then you can do this over several days.
- If you'd like to spend some time decreasing your feelings of stress before activating the networks of nerve cells to modify, there are many techniques that people use to do this. Controlled breathing, meditation and other mindfulness practices will help to turn down your fight or flight response. But it's difficult to write while you're focused on breathing or while you're meditating, so maybe some peaceful background music is right for you. Or, if you're a fan of aromatherapy, you can use that. Whichever approach you take to feeling safer, the goal is to turn down your fight or flight response and decrease your stress levels.
- Working with a book takes time, and you're hopefully using *Feeling Great* in a place where you feel safe while you're doing this. You're focusing your attention on this particular task in a physical space where you're not under immediate threat. There's no one there to attack you, and this will help give you a sense of being in a safe place. Over time, your fight-or-flight response will automatically turn off.

Step 4: Work on a moment with the Daily Mood Log (DML)

Empathy doesn't end after you've told your story and you think your therapist really understands you. The next step is to find out if you're ready to move on to the next step or whether you want to spend more time talking about what's troubling you. This is called the invitation to work, and your therapist won't move forward until you say that you're ready. (If you're working by yourself, you can ask if everything you want to say is in the letter that you wrote in the previous section.)

If you're ready to move on to the next step, then it's time to look at your emotions in more detail.

One of the unique ways that TEAM therapy teaches you how to take a deeper look at your emotions is to focus on just one moment. It could be a time in the past, or it could be right now. It could also be some future event that you're worried about. Just choose a moment when you felt the emotions you scored in the Brief Mood Survey or you talked about during the Empathy step.

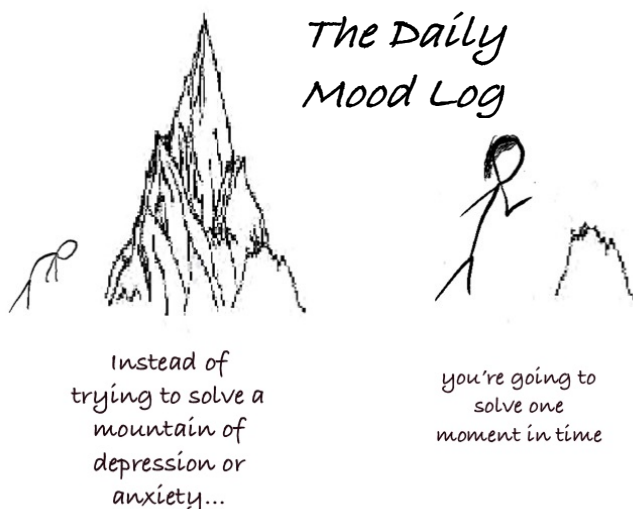
The tool you'll use to work on a single moment is called the *Daily Mood Log (DML)*⁶. (In *Feeling Great*, it's called the Daily Mood Journal, but both names refer to the same forms.) To use the DML, start by choosing a single moment to work on. Then go to the table at the beginning of the DML and circle the words that describe your emotions. Then put in a number between 0 and 100 to describe how intensely you feel each emotion.

This is what the top table in the DML looks like. The DML looks simple, but it's a remarkably powerful tool.

Emotions	% Now	% Goal	% After
Sad , blue, depressed, down, unhappy			
Anxious , worried, panicky, nervous, frightened			
Guilty , remorseful, bad, ashamed			
Inferior , worthless, inadequate, defective, incompetent			
Lonely , unloved, unwanted, rejected, alone, abandoned			

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If you're working without a therapist, you'll still use the DML just as described in the rest of this guide. If you need more information, *Feeling Great* contains detailed instructions to using the DML in Chapter 10, and in comments in multiple other chapters.



⁶ You can find a copy of the DML at <https://feelinggood.com/wp-content/uploads/2020/08/Daily-Mood-journal-with-goal-1-a-with-Do-Not-Copy.pdf>

The discovery that you can solve all of your problems by focusing on one moment in time is a surprising one. After all, it took time for you to decide that you needed to work with a therapist. You might have had depression, anxiety or other emotional challenges for years. It seems hard to believe that working on one moment can make an entire mountain of pain decrease, and even disappear. It turns out, though, that this approach is one of the reasons TEAM therapy is so effective.

How can working on a single moment solve a problem that includes so many different times in your life? The reason this approach works is because of the way your brain uses nerve cell networks.

As we talked about in Part I, even though we have lots of nerve cells, we still don't have enough to build a new network for every event and moment in our lives. Instead, once you've built a network, your brain uses that same network in many different situations. This approach is very efficient, but it's a problem if you're using nerve cell networks that store information that's wrong. For example, let's say that you were wrongly taught that $2+2 = 5$. This means that every time you added $2 + 2$, in any problem you tried to solve, you'd get the wrong answer. You'd get all those wrong answers because your nerve cell networks for this information stored the wrong answer and kept using it. Once you fix it so that your brain now knows that $2 + 2 = 4$, you've modified the network of nerve cells that encoded the wrong answer to this problem. By doing this, you've fixed this mistake for every time you solve a problem that needs you to add $2 + 2$. You can remember that you used to think that $2 + 2 = 5$, but now you can get the right answer whenever you need it because you modified that network of nerve cells.

Interpretations, predictions and other patterns of thinking work in the same way as information about mathematics. If you learn a thinking pattern that is not helpful or is wrong, then any time you use that pattern of thinking you're likely to get an answer that's not helpful or is incorrect.

The power of working on a single moment to modify nerve cell networks that you also use in many other moments is another reason that TEAM therapy is so effective.

Step 5: What are your negative thoughts?

Empathy is a necessary part of TEAM therapy, and feeling empathy from a friend or a therapist can help you feel a bit better for a little while. It's good to share your troubles with someone who will accept you for who you are.

The problem is that if empathy was enough to make a difference, however, then most psychotherapy would be quick and effective. That's obviously not the case, even though most therapists are pretty good at delivering empathy and letting you feel accepted and understood.

If you look at this puzzle from the point of view of how nerve cell networks work, it's easy to understand that empathy isn't enough to create the change that you want and need because it doesn't change nerve cell function. Empathy can help you activate critical nerve cell networks that need to be modified, but it doesn't modify them. In fact, if you keep activating those networks without changing them, they may just get stronger.

Remember that the central idea that explains how TEAM therapy works is that your emotions come from your interpretations and predictions about what's happening in your life. We may talk as though our emotions are explained by the events of our lives, but what really causes our emotions are the way we interpret those events. If your thoughts are negative, then your

emotions will be negative. If your interpretations and predictions change, then your emotions will automatically change to match your updated interpretations and predictions.

Therefore, the next step in the TEAM therapy journey is to identify the negative thoughts that help explain your emotions. These negative thoughts are the interpretations and predictions of what's going on in your life.

The first thing that you'll do is choose a feeling you want to work on and write down the negative thoughts associated with that feeling and how much you believe those thoughts are true. By doing this, you'll continue activating the specific nerve cell networks you're soon going to modify.

If you have difficulty coming up with negative beliefs associated with your feelings, you can start by changing a feeling into a statement. For example, if you feel inferior, your negative thought might be "I am inferior." A negative thought could also be why you think you have a particular feeling. For example, if you feel angry at your boss, a negative thought might be "My boss is always unfair to me."

If you're having trouble identifying your negative thoughts, your therapist will help you learn how to do this. In addition, *Feeling Great* has lots of tips on how to identify your negative thoughts. There are several rules for doing this discussed in *Feeling Great* on pages 176-181.

To do this effectively, it's important to be specific about the type of negative thoughts that are useful in the DML.

- A negative thought, for purposes of the DML, does not state your emotions. This is because your emotions are what you feel, and it's absolutely true that you feel those emotions. Your emotions are not, however, the beliefs that are the cause of your feelings.
- Rhetorical questions are not useful, although it's not hard to change them into something that is. For example, "Why is my boss/partner/relative always so mean to me?" is not a useful negative thought for the DML. It's a rhetorical question that has no answer. In contrast "My boss/partner/relative is always mean to me" could be a useful negative thought to explore.
- Statements of fact are not useful, but sometimes can be used to find out the beliefs that are causing you to be anxious or depressed. For example, "I've been diagnosed with terminal cancer" is, unfortunately, a statement of fact for some people. That diagnosis may lead to negative emotions, but it's not useful to work on it as a negative thought because that diagnosis is considered a true fact. It is useful, in contrast to examine your deeper worries, such as "I'm going to die and leave my family alone," or "I'm going to die in great pain." The deeper worries are the ones that are causing your emotions. (For an example of how this works, you can listen to podcasts with a woman who was diagnosed with advanced (Stage IV) lung cancer despite no previous indications of any cancer.)⁷
- It's clear, however, that people can have very different views about what is a fact, and whatever you consider a fact may turn out to be useful in understanding your emotions. People with certain religious beliefs, for example, might be upset because they believe

⁷ <https://feelinggood.libsyn.com/049-live-session-marilyn-testing-empathy-part-1>
<https://feelinggood.libsyn.com/050-live-session-marilyn-agenda-setting-part-2>
<https://feelinggood.libsyn.com/051-live-session-marilyn-methods-relapse-prevention-part-3>
<https://feelinggood.libsyn.com/059-live-session-marilyn-8-week-tune-up>

it's a fact that someone they care about is going to face eternal punishment because of their sexual preferences.

- Thus, the most important question to ask is whether the negative thought helps you understand the emotions you circled at the top of the DML. Even if it turns out it's not a useful negative thought to work on the way it's stated, it can still be a clue to something that will be useful to work on.

Learning to identify your negative thoughts starts the process of modifying the way you think in several ways:

- In the Empathy part of TEAM therapy, you're telling your story, but you're not necessarily analyzing it. Using the DML to identify negative thoughts and define how much you believe them is different. Now you're moving from the story-telling state of mind of the Empathy section to the analytic way of slow thinking that your brain uses for solving problems. You're beginning to ask "Why am I feeling this way?"
- Identifying your negative thoughts is the first step in learning how to change the way you think, because you're now learning to always ask "Why do I feel this way?". When you do this, you're becoming more aware of your habits of thought that make up your patterns of fast thinking. You're learning to identify the beliefs that hold the key to changing your emotional life.
- You're also learning how to use your emotions as keys to unlock the underlying beliefs associated with them and bring those beliefs to conscious awareness. This is the first step in asking what benefits you get from those beliefs, and whether the beliefs are even correct.
- By doing this, you're continuing to activate nerve cell networks that are the most important ones to modify.

If you're working with a therapist, using the DML to write down your negative thoughts also starts the process of using writing in your TEAM therapy sessions. (If you used the ideas in the section on empathy on writing down your story, then you're continuing to use those skills.) The use of writing is another important reason for the effectiveness of TEAM therapy. In most therapies, your therapist writes while you talk. But here you're also going to do a lot of writing. This will help you learn more effectively, and is another way that TEAM therapy is aligned with normal brain function. Using more senses for learning is the most effective way to learn. Instead of just talking and listening, you're also using muscle control to write the words down. You're using vision as you look at those words, which focuses your attention and awareness. You're actively thinking about how much you believe each thought. You're paying attention to what you're writing. In all these ways, you are becoming aware of your negative thoughts.

Writing down your negative thoughts is also critical because it means you don't have to try to remember all the information you've thought about. Trying to remember all these ideas can be stressful, and writing them down will decrease that stress.

Once you learn how to do this for one feeling, you can identify negative thoughts for any feeling you want to work on.

So, write down the negative thoughts in your DML, and write down how much you believe each one is true. Both of these steps are essential, whether you're working with a therapist or by yourself.

Negative feelings are the result of negative thoughts. The first step in changing your feelings is to identify the negative thoughts that cause those feelings. By bringing them to conscious awareness and writing them down in the Daily Mood Log, you're

activating these nerve cell networks. This step is necessary to begin modifying them. You're also becoming aware of the thoughts that are the cause of your feelings.

Step 6: Addressing resistance by discovering awesome things about you revealed by your negative emotions and negative thoughts

The next component of TEAM therapy is another one of the novel discoveries that makes this approach so powerful. This discovery combines the element of surprise with the harnessing of powerful positive emotions. In this step, you'll modify your nerve cell networks so that your interpretations of yourself become changed to be much positive. With the combination of surprise, attention and the generation of positive feelings, you can begin changing your interpretations and predictions in very beneficial ways.

One of the important roles of this component of TEAM therapy is to address the difficult challenge that many people with depression or anxiety find out during therapy that they have some resistance to emotional change. This is called *therapeutic resistance*. Although it doesn't come up for everyone, when it does occur it can make recovery much more difficult. And it's confusing and frustrating, because the reason you're seeing a therapist is that you're not happy with the emotions you have right now. The unconscious part of your brain, however, acts as though it's not so sure about changing these emotions. You don't know what's going on, but it seems like something keeps holding you back from getting to happiness. When you know in your conscious mind that you want change to happen but your unconscious brain is resisting that change, you might even start believing that you really are broken and hopeless.

Until TEAM therapy, resistance to change has been a difficult problem to solve. In fact, the ways that therapists talk and write about it can actually make people feel worse. Most therapists treat therapeutic resistance as though it's revealing something wrong with the person in need. Some therapists talk about people getting some kind of benefit from not changing. Some may try to talk you out of being resistant. But what it all comes down to is the belief that if you're showing therapeutic resistance, it's because something is wrong with you.

TEAM therapy is very different, and says that resistance occurs because of what's *right* about you, not because of anything that's wrong. This is another element that helps make TEAM therapy as powerful as it is.

In this section of the *User's Guide*, we're going to look at the several individual steps you'll take to overcome therapeutic resistance. Going through this sequence increases both the speed of recovery and the number of people for whom TEAM therapy is life-changing.

Miracle Cures and Magic Buttons

Addressing resistance begins with defining what you hope to accomplish in this session, which is done by asking the *Miracle Cure* question. Here, your therapist will ask you if a miracle happened today, what you would like that to be. (If you're working by yourself, you can still ask this question and write down the answer.) This step helps you identify realistic goals. For example, let's say that you're worried about being infected with the Covid-19 virus. You might want your miracle to be an end to this pandemic, but that's not something you can accomplish with TEAM therapy. What you could accomplish, in contrast, would be decreasing your anxiety about Covid-19 enough so that you could stop feeling panicky and overwhelmed so often.

After you're defined what you'd like to accomplish, your therapist will ask what you would do if you could press a button, or wave a wand, that would magically make all of your negative feelings and negative thoughts disappear without any effort on your part. In *Feeling Great*, this button is called the *Magic Button*. If it was that simple to make your negative feelings and thoughts go away, would you want to press the Magic Button?

Most people say yes to the Magic Button question. Nobody likes having their life filled with negative feelings, and nobody likes thinking negatively about themselves. Wanting to change your feelings is the reason you're working with a therapist.

One problem with pressing the Magic Button, however, is that it won't change anything in your life that's contributing to your negative feelings or negative thoughts. For example, let's continue with the example of being worried about a Covid-19 infection. If you pressed the Magic Button, Covid-19 would still be just as much of a problem. The only difference is that you'd stop worrying. Is that a good idea? Maybe not, because you might also stop doing all the things that are keeping you safe. Many people who get a Covid infection can feel quite sick (including a smaller percent of cases with very severe illness), and some people have serious long-term side effects. Being worried about getting infected is a reasonable way to feel, and motivates you to take sensible precautions.

The Miracle Cure question and the Magic Button question are the first steps that bring you to another of the important discoveries in TEAM therapy – which is that your negative feelings and negative thoughts reveal things about you that are beautiful and awesome. This discovery enables ways of thinking that will help melt away your resistance.

Positive reframing: Finding out the good things depression and anxiety reveal about you

Before moving on to the next step in melting away your resistance, let's take a moment to look at the surprising idea that your negative feelings and thoughts reveal positive things about you. Here are two examples of how this works:

- Let's say you have a severe case of obsessive-compulsive disorder (OCD). You might be washing your hands so often that your skin is raw. You might also be terrified of things like touching door handles or stair rails, or the buttons on elevators. Some people with OCD spend hours each day in rituals that interfere with their ability to lead a happy life.

What could these behaviors, which are making your life so difficult and unhappy, possibly reveal about you that's good and beautiful? Here are some possibilities: You really care about your health because you value life so much. You also care about the health of those you love and you don't want to risk spreading any diseases to them. At the same time, you're being honest about yourself, and admitting that your obsessive behavior is a problem interfering with leading a happy life. You're able to be self-critical, and think about whether these behaviors are rational.

- Or let's say that you've been deeply depressed for several years about the death of a loved one and just can't get back to any feelings of happiness. You might even be telling yourself that the person who died would want you to feel happiness again, and this makes everything even worse because now you feel guilty about still being unhappy. Let's also say that you've tried different types of therapy and antidepressants and none of them has helped. So, on top of everything else, you're feeling like you're broken and helpless, and that everything is hopeless.

Once again, what could these behaviors, which are making your life such an unhappy one, possibly reveal about you that's awesome and beautiful? Here are some possibilities: Your unhappiness is an expression of your love for the person who died. You care about the beauty of life, and believe that it's something sacred and special.

You care about others, and value their company. You don't want to be alone, and are honest with yourself about your desire to be close to others. You also know that you want to experience happiness again, and want to learn how to do this. And feeling hopeless also can keep you from being disappointed if the next therapy you try doesn't work.

Those are just some examples of the beautiful and awesome things about you revealed by your negative feelings and thoughts. There are many more that you'll be able to identify as you learn to do this. When you identify your positive virtues, you're going to write them down in your DML, right by where you've written your negative thoughts. It may take a few tries to get the hang of doing this, but your therapist will help you. There are also lots of useful tips in *Feeling Great* (pages 182-198) on how to identify positive virtues revealed by your negative thoughts and feelings.

Filling out this part of the DML will look like this:

Negative Thoughts	% Now	% After	Distortions	Positive Thoughts
1. <i>My obsessive hand-washing means I'm broken and defective</i>	100%			<i>I value life. I want to keep my loved ones safe from disease. I'm honest about my flaws.</i>

When you work with the DML, you start out by writing down your negative thoughts and how much you believe they're true. Then you identify the positive virtues revealed by that negative thought.

The identification of beautiful and awesome things about you revealed by your negative thoughts and feelings is called *positive reframing*. It's a powerful way to learn about the many virtues that are easy to ignore when you're depressed or anxious. You're creating a new internal story that says that you're not broken or defective.

Learning how to do positive reframing is another way that TEAM therapy uses your slow analytical thinking to learn something new and modify your nerve cell networks. When you do this, you're solving a novel problem that requires your attention and awareness. Your curiosity will be stimulated by learning something new. You'll be learning good things about yourself, which is a positive and enjoyable experience. Moreover, the way in which your therapist will work with you will let you discover these positive virtues by yourself, which makes the learning more effective.

You carry out positive reframing by asking three questions about the negative emotion or the negative thought:

1. *Is the feeling or thought appropriate?* Some negative feelings and thoughts may be healthy ones. If you're sad because of the death of someone you loved, for example, being sad and grieving is a healthy response.
2. *What does the feeling or thought show about my core values that's beautiful or awesome?* To use the same example, they might show your ability to love others, and your desire not to be alone.
3. *How might the negative feeling or thought be of some benefit to you?* Keeping with the same example, it keeps alive the memory of the person who died.

Positive reframing gives you the information you need to melt away resistance

The association of positive virtues with your negative feelings and thoughts is another reason why pressing the Magic Button is not such a good idea. If all these awesome things about you are connected to your negative thoughts, then maybe all those good things would also disappear if you pressed the Magic Button.

What TEAM therapists think could be happening in therapeutic resistance is that your subconscious mind recognizes that your negative feelings and thoughts are connected to many of your best characteristics. Perhaps your subconscious mind recognizes that just getting rid of the negative feelings and thoughts might also get rid of what's best about you.

Another way to think about therapeutic resistance could be that the purpose of your negative feelings is to protect you from harm. This is the job of your amygdala, and or other parts of your limbic system, which are parts of your brain that protect you from potential danger. Although it may not always feel this way, your limbic system loves you. It's not trying to make you miserable. Instead, it's sending out signals that something seems wrong.

Negative feelings are information that your amygdala and limbic system use to get your attention. If you ignore those warnings (which you experience as negative emotions) your limbic system will generate even stronger negative emotions until you pay attention. This will cause more stress, which will make it harder to use your prefrontal cortex and do the slow analytical thinking needed to learn new information and modify your nerve cell networks.

Fortunately, TEAM therapists have discovered ways to solve these problems, and to change your negative emotions without giving up any of the positive virtues connected to them.

The most important question, though, is whether you still want to change your emotions now that you know that your negative feelings and thoughts reveal wonderful things about you. Your therapist will ask you what you'd like to do, and suggest that maybe you'd prefer to keep holding on to the negative thoughts and feelings.

How do you feel about that choice? Most people come to therapy to decrease their negative feelings. Seeing the beautiful things about you associated with your negative thoughts and feelings might make you wonder about whether to do this. You can talk about this question with your therapist, and you also can see how you feel if they try and convince you not to change.

If you still want to change, then you can move on to the next step. You might also decide that you'd rather work on something else. The choice is up to you, and your therapist will support you for whichever choice you make.

Using a Magic Dial to decrease the intensity of your negative feelings while keeping all your positive virtues

What if you could learn how to decrease the intensity of your negative feelings but still keep all the virtues they reveal? Is that a choice you might like?

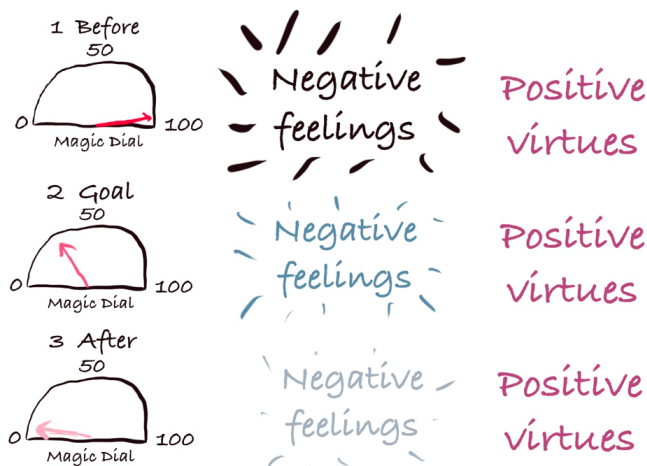
If you do decide to go ahead and work for emotional change, your therapist will ask you if you'd like to use a *Magic Dial* instead of a Magic Button. The Magic Dial is different from the Magic Button because it doesn't make the negative feelings and negative thoughts just disappear. Instead, it lets you decrease their intensity to a level that makes sense to you. When you do that, you still get to keep all the positive virtues you identified by doing positive reframing.

Basically, it's like saying to your limbic system that you're paying attention to the warnings and you're figuring out what your limbic system is trying to tell you. Because you're paying attention to the warnings, it's okay to turn down the volume of your alarm system.

To use the Magic Dial, you choose the intensity of feelings that make sense to you, and write those down as your goals. You can set those goals at any intensity of emotions that feels right for you. When you do this, you're creating a new internal story. Instead of believing that your emotions are something you're stuck with, you learn that you actually can choose the intensity of these emotions.

The Magic Dial introduces still another element of surprise, which is finding out that you can actually dial down the volume of your negative feelings while keeping any important information they provide. This once again is a surprise associated with attention and the generation of positive feelings, which all enhances your ability to learn these new ideas.

using the Magic Dial helps decrease the intensity of your negative feelings. 1. At the start of the session, your negative feelings are powerful. 2. As you continue the session, you'll choose goals for emotional intensities that are less powerful, and that feel right for you. 3. When you've completed TEAM therapy, the intensity of your negative feelings will decrease to the level of your goals, and usually even more. During this whole time, you'll always also get to keep the positive virtues revealed by those negative feelings.



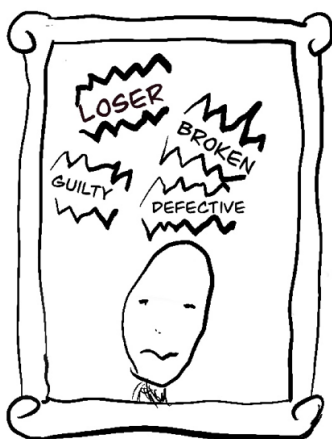
TEAM therapists have discovered that when you change your thoughts in this way, your resistance will start to disappear. It's as though you've done a deal with your subconscious mind to let it know that you're paying attention to the warnings and that you're keeping all the good stuff. When you do this, your subconscious no longer has to be resistant to change.

There are also other reasons why people may have some resistance to changing their emotions. For example, it can seem disrespectful to claim that rapid emotional change can occur if someone is sick with a terrible illness, like cancer or motor neuron disease, or if they've been in therapy for many years. It can seem like the emotional trauma they're feeling, and their serious medical problems, are being minimized or ignored. This can create or increase resistance by making people feel like their very real needs are being dismissed.

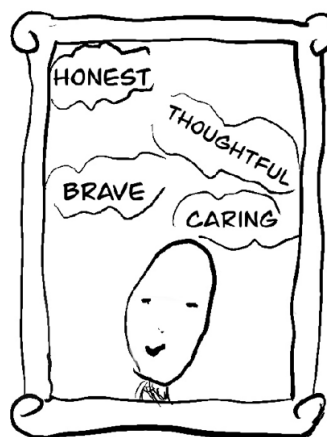
If identifying the positive virtues revealed by your negative feelings and thoughts isn't enough to eliminate resistance, then TEAM therapists are trained in multiple other ways to help solve this challenge. Learning how to recognize the wonderful things about you revealed by your negative feelings and thoughts is critical, however, in making TEAM therapy so effective.

Identifying the positive virtues revealed by your negative feelings and thoughts also has other benefits. For example, along with getting the Magic Dial, you're also being given a Magic Mirror. When you're depressed or anxious for a long time, thinking about yourself is like having a mirror that only lets you see parts of yourself that you don't like. Now your mirror will work differently. The way in which you think about yourself is going to change dramatically because you'll start seeing that there are many good things about you.

*Positive reframing gives
you a magic mirror.*



*When you're depressed
or anxious, you're filled
with negative thoughts
about yourself.*



*With TEAM CBT, you'll
learn about the awesome
and beautiful things about
you revealed by your
negative thoughts.*

When you're learning to recognize the positive traits revealed by your negative feelings and thoughts, you're also modifying the nerve cell networks that are your negative feelings and beliefs. You're doing this by attaching them to other networks that are your positive thoughts.

Soon, because what fires together wires together, whenever you think of your negative thoughts, you'll also activate the networks associated with your positive virtues. Every time you do this, the connections to your positive virtues will get stronger. Because what's wired together fires together, doing this will become a way that you automatically think. This new way of thinking will become part of your fast thinking habits.

As you go through the steps of addressing resistance, you'll create new habits of thinking that always remind you of the beautiful and awesome things about you revealed by your negative feelings. Instead of just feeling like you want to get rid of them, they become interesting clues that reveal what's good and right about you.

Still another benefit of learning positive reframing is that you're also going to be in a great place to really enjoy practicing between sessions. Your therapist might call it homework, but instead of feeling like it's something you don't want to do, it's practicing something that will lift your spirits and change your life. You're learning how to take a new look at yourself. You're learning that you can dial down the volume on your alarm system without losing the benefits of having a

warning system. No other homework was ever this much fun, or had this much ability to change your life.

And there's still more fun to be had in the next step.

One of the discoveries that makes TEAM therapy so effective is the finding that your negative feelings and negative thoughts reveal awesome and beautiful things about you. Identifying those positive virtues has the surprising effect of enabling you to decrease – and even eliminate – therapeutic resistance. Addressing resistance in this way helps TEAM therapy work more quickly and for larger numbers of people.

There's a sequence of steps developed by TEAM therapists to help you change your internal story by finding out that you're not broken or defective. The Miracle Question, the Magic Button, positive reframing and using the Magic Dial let you discover that you can decrease your negative feelings and still keep all the positive virtues that are associated with them.

By going through this sequence, you're firing together nerve cell networks that represent your negative thoughts with ones that represent your positive virtues. Doing this will wire them together and create new habits of thought that reveal ways in which your brain is working correctly and show you that you're not broken.

Step 7: Are your negative thoughts accurate?

Our brains are amazing, but they're not perfect. We all have lots of flaws in our thinking. Sometimes we believe something because it makes us feel good. We might believe something because our friends or family believe it. Or we might believe it because we've thought it was true for a long time, or for many other reasons that don't have anything to do with whether it's accurate.

At the same time, the ability of the brain to help keep us alive is based on choosing the most accurate interpretations of the world. Correct interpretations lead to more accurate predictions, and accurate predictions increase the likelihood of staying alive.

Fortunately, one of our special human talents is the ability to analyze our thoughts using slow analytical thinking. This is part of how we carry out a quality control check on our interpretations. Every advance in science, in engineering, and in medicine (including the development of TEAM therapy!) is because of asking if our interpretations are accurate. If we find out they're not, that can be disturbing – but it's also the path to more accurate beliefs and interpretations.

Analyzing the thoughts of people with depression or anxiety reveals that a lot of their negative thoughts are not accurate. This discovery is another of the keys to the effectiveness of TEAM therapy.

In general, the amount you believe in your negative thoughts depends on whether or not you think they're correct. After all, if you analyze a thought and decide it's not correct, then it's less likely that you'll keep believing it.

That's why the next step in TEAM therapy is to find out if your negative thoughts are based on flawed reasoning. This is an easy skill to learn, particularly because there are only a dozen thinking errors that keep showing up in people with depression or anxiety. These thinking errors

also occur in all of us. We've all probably experienced every one of them at one time or another. But they occur more often in depression and anxiety.

In TEAM therapy, and in *Feeling Great*, the thinking errors are called cognitive distortions. Other people might call them irrational thinking, and others use other descriptions. What we call them isn't important. The question that matters is whether or not your negative thoughts are based on patterns of thinking that are not accurate and that don't lead to helpful answers.

The way you do this next step is to pick a negative thought to work on and see if you can find any distorted reasoning in that thought. This is the quality control step that we discussed in the first part of this guide, in the section on how your emotions are generated.

The list of the kinds of thinking errors that occur in depression and anxiety is found at the end of your Daily Mood Log, and is also shown below. All of Part II of *Feeling Great* is focused on explaining these distortions. In addition, discussion of cognitive distortions occurs in almost every feelinggood podcast, with some podcasts focusing the entire session on understanding a single distortion⁸.

1. All-or-Nothing Thinking. You look at things in absolute, black-and-white categories.
2. Overgeneralization. You view a single negative event as a never-ending pattern of defeat.
3. Mental filter. You dwell on the negatives and ignore the positives.
4. Discounting Positives. You insist your positive qualities don't count.
5. Jumping to Conclusions. You jump to conclusions not warranted by the facts. <ul style="list-style-type: none"> • Mind-Reading. You assume that people are reacting negatively to you. • Fortune-Telling. You predict that things will turn out badly.
6. Magnification or Minimization. You blow things way out of proportion or shrink them.
7. Emotional Reasoning. You reason from your feelings: "I <i>feel</i> like an idiot, so I must <i>be</i> one."
8. Should Statements. You use "shoulds," "shouldn'ts," "musts," "oughts," and "have tos."
9. Labeling. Instead of saying, "I made a mistake," you tell yourself, "I'm a jerk" or "I'm a loser."
10. Self-Blame and Other-Blame. <ul style="list-style-type: none"> • Self-Blame. You blame yourself for something you weren't entirely responsible for. • Other-Blame. You blame others and overlook ways you contributed to the problem.

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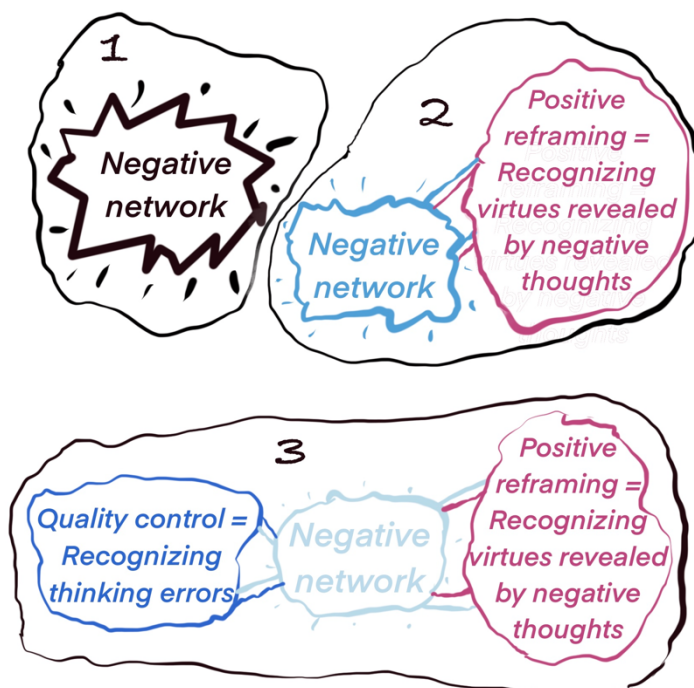
Most thinking errors are straightforward and easy to understand. They include errors like all-or-nothing thinking, where you think that something (including yourself) is either perfect or it's no good at all. Another common thinking error in depression and anxiety is mind-reading, where you're convinced that other people are thinking bad things about you. There's also fortune-telling (where you predict that something bad is going to happen without any evidence the prediction is accurate), discounting the positive (where you ignore anything good that is happening) and several others. If you have questions about any of these thinking errors and how to identify them, your therapist can help you understand anything you're not sure about.

What happens when you identify cognitive distortions in your negative thoughts is powerful. By identifying ways in which your negative thoughts are based on irrational thinking, your brain will automatically compare the less accurate negative interpretations and predictions with the more

⁸ For example, the list of all podcasts is found at <https://feelinggood.com/list-of-feeling-good-podcasts/>, and podcasts 188-192, 194-195, 203 and 205-206 are each focused on a different cognitive distortion.

accurate positive interpretations and predictions you were revealing during positive reframing. As it does this, it 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 organized in a way that makes it easy for your brain to do its job and check whether your interpretations need to change.



Working with the Daily Mood Journal modifies your nerve cell networks so that your negative thoughts become wired together with your positive virtues and with the ability to identify distorted thinking. In **Step 1**, you'll identify negative thoughts connected with your negative feelings. This will activate nerve cell networks that need to be modified, and that represent powerful negative thoughts. In **Step 2**, positive reframing modifies the negative networks by attaching them to networks representing your positive virtues. In **Step 3**, you'll learn to identify distorted thinking in your negative thoughts. This attaches your negative thoughts to nerve cell networks used for quality control of your interpretations. After you've done this a few times, you'll be able to easily identify positive virtues revealed by each negative thought and negative feeling. You'll also be able to identify thinking errors in your negative thoughts. As you go through these steps, your negative thoughts will become less intense and your belief in them will decrease.

	Negative Thoughts	% Now	% After	Distortions	Positive Thoughts
1.	<i>My obsessive hand-washing means I'm broken and defective</i>	100%		AON, OG, MF, DP, ER, Should, Self-blame	<i>I value life. I want to keep my loved ones safe from disease. I'm honest about my flaws.</i>

Working with the DML lets you look at all the information about a negative thought at one time. The thought, the positive virtues revealed by that thought and the cognitive distortions in the thought are all easy to look at together. This makes it easier for your brain to do the quality control analysis needed to change how much you believe in the negative thought. (AON = all-or-nothing thinking; OG = over-generalization; MF = mental filter; DP = discounting the positive; ER = emotional reasoning)

As you work on this step, your therapist will ask you how much you still believe that the negative thought is true. Most often, your belief in that negative thought will have decreased - 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 start on, then you'll move to the next one and do the same thing.

Once again, TEAM therapy uses surprise to enhance your learning. Before you started this work, you believed in your negative thoughts completely. Now, you're learning how to figure out if they're flawed, and you're finding out that most – and perhaps all – of them contain multiple thinking errors.

If your belief in the negative thought that you're working on stays high, there are several possibilities to consider. For example:

- You might re-examine the thought from a different perspective. Go back to empathy and share what you think is important about that thought.
- Sometimes it helps to break the thought down into smaller pieces and work on them individually.
- You can approach the thought with different methods, something that you'll hear happen frequently in live sessions. Sometimes this is done by first explaining the method, and sometimes it's done in such a smooth way that it sounds like the normal flow of the conversation. Not everybody responds to the same methods, and the advantage of having so many to work with is that you will eventually find one that works for you. The methods you'll choose are not random, and specific techniques are better suited to particular kinds of problems. A guide as to which techniques are particularly useful in different situations is found in *Feeling Great*, on pages 106-107.
- Perhaps working on that thought is making you anxious, and is activating your defense mechanisms. As we've discussed, this would suppress the prefrontal cortex, and make it harder to analyze that thought. If you're focused on defending yourself, then you're also going to be resistant to change.
- Whatever the reason is for the difficulties in changing your belief in that thought, you can also choose to change the focus and revisit it later, and work on something else right now.
- It's also important to consider the possibility that the negative thought is a healthy one. For example, you might start out believing 90-100% that if you go out to meet some friends that you're going to get infected with Covid-19. If you've been fully vaccinated, are careful about wearing a mask, and are outside, then it's unlikely that you'll get infected. But it might not be healthy to drop that belief to 0% and act like there is no risk at all that you could get COVID-19. It would still be healthy thinking to recognize there's some possibility of infection, and to act appropriately. Another example of a healthy

negative thought might be that you're sad about the death of someone you loved. Your sadness may be a celebration of your love for the person who died. If the negative thought is a healthy one, then maybe you don't want to decrease your belief in it, but instead need to look at it from a different perspective.

Once your brain carries out its quality control check on your interpretations and predictions, and chooses the more accurate positive interpretations, you've set the stage for rapid emotional change as a part of your normal brain function. Emotions are reactions to interpretations and predictions; change the interpretations and predictions and your emotions will change. That's what our brains are built to do.

Given a choice between interpretations and predictions that are emotionally positive and are more accurate *versus* interpretations and predictions that are emotionally negative and are less accurate, our brains will choose the positive and accurate ones. That's also what our brains are built to do. The power of TEAM therapy lies in using carefully constructed steps and slow analytical thinking to bring those comparisons into the open. When you do this, the normal functions of your brain create emotional change.

Learning how to identify cognitive distortions also will make homework practice even more fun. When you identify wonderful things about you revealed by your negative feelings and thoughts and you also identify cognitive distortions in your negative thoughts, your feelings will change. Once you see that you can change your belief in one negative thought, you'll realize you can do this for other negative thoughts. If you do this for fifteen minutes a day, your brain will learn to automatically change your interpretations and change your emotions. You'll learn new patterns of thought that become a much healthier type of fast thinking. That's the best homework ever!

Some brief comments on the meaning of "should statements":

Once you learn how to identify cognitive distortions, it's always easy to find thinking errors in your negative thoughts.

There is one distortion, however, that's worth a few comments because many people find it puzzling – and that is *should statements*. Why are these distorted thinking when they sound harmless, and people use them so often?

It turns out that should statements are one of the most powerful causes of unhappiness. We convince ourselves the world "should" work in a certain way and we're unhappy when it doesn't. We tell ourselves that there's something wrong with us or with someone else. "I should have done better," for example, is the same as "I'm not good enough." "They should not have done that to me" is the same as "they're bad because of what they did to me."

Should statements are confusing because we use the same word to talk about some things that are true and some things that are opinions. There are three valid kinds of *should statements* that are true. One is a "physical law of the universe" should statement, such as "If you drop an apple, it should fall to the floor because of gravity." There are also legal should statements, such as "You should stop at a stop sign, or you're going to get a ticket." There are also moral should statements that almost everybody agrees on. For example, almost everyone agrees that you should not murder someone.

Aside from those three kinds of should statements, all of the others are just different opinions. People have different opinions on a lot of topics, such as appropriate or attractive ways to dress, who it's okay to love, and many other topics. When we talk about these kinds of should statements, we could easily say "I think it would be preferable to wear this choice of clothes," and that would be more accurate than "I should wear this choice of clothes". In contrast, it

makes no sense to say “I think it would be preferable if a dropped apple falls to the floor.” That’s what the apple is going to do no matter what anyone thinks.

With these simple steps, you’ve used the natural laws of learning and the brain function of slow analytical thinking to modify nerve cell networks central to understanding the cause of your unhappiness. Remember that part of learning occurs because “what fires together wires together.” You learned that your negative thoughts and feelings reveal many beautiful and awesome things about you. With that step, you’re using your slow analytical thinking skills to connect networks that represent your negative thoughts to other ones that represent your positive virtues.

By learning how to identify cognitive distortions in your negative thoughts, you’re also modifying these nerve cell networks still more. This time, you’re attaching them to the networks that let you identify cognitive distortions.

By firing all of these networks together, you’ve wired them together. Now, when a negative thought is activated, it’s connected to positive thought networks revealing what’s awesome about you. It’s also connected to other networks that decrease your belief in the negative thoughts even more by finding the distorted thinking in them. You have built new and healthier patterns of fast thinking.

Another law of learning is that what’s wired together fires together. By using your new skills on multiple negative thoughts, you’re making connections between all these networks even stronger. This means that every time you have a negative thought, those networks will fire together with the networks representing your positive virtues and your new ability to identify cognitive distortions.

The goal of TEAM therapy is to free you from the maze of depression, anxiety, or other emotional challenges. Modifying your nerve cell networks by combining positive reframing and identification of cognitive distortions will help you leave the darkness of your maze.



Positive
reframing
→
Identify
cognitive
distortions



The goal of TEAM therapy is to free you from the maze of depression, anxiety or other emotional challenges that prevent you from enjoying your life. By using tools such as positive reframing and identification of cognitive distortions, you’ll be able to leave your maze. You’ll be able to walk away into the sunshine.

Combining positive reframing with identification of cognitive distortions is a bit like getting ready to fly in a lighter-than-air balloon. Positive reframing is what inflates the balloon that can carry you on your flight over beautiful landscapes to new lands. Identifying the cognitive distortions is how you throw off the ballast bags and ropes that keep you on the ground even when the balloon is inflated.

Step 8: The Methods of TEAM enhance rapid progress, personalize your therapy, integrate all the information you've learned thus far, and help prevent relapses

You've accomplished a lot at this point, and you may even be starting to feel pretty good, but we're not done yet. The goals of TEAM therapy are to enable recovery that is complete and that will last. Your TEAM therapist wants to be the last therapist you'll ever need. The next step is important in achieving these goals.

The next step involves a focused use of Methods, the M in TEAM. For many people, emotional change is already in full swing by the time they've completed the DML. You've brought information you need to conscious awareness and you've modified multiple networks of nerve cells.

You've learned a lot already, but this next step will make comparisons between correct and incorrect thoughts even easier. If your emotions haven't changed yet, then this step can help bring you across the finish line. And even if you're already feeling pretty good, learning some of the TEAM methods is a chance to put what you've learned into practice so that you're ready to respond if you hit a bump in the road later on.

The Methods of TEAM are important in multiple ways:

- *Tuning therapy to your unique needs:* The TEAM therapy toolkit includes over 100 different techniques, taken from multiple fields and approaches.⁹ These include multiple novel techniques that Dr. Burns and his colleagues have developed over many years of working with people with a broad range of different needs and personalities. Moreover, TEAM therapists love coming up with new methods and sharing them with each other, so the list of techniques is constantly growing. The only criterion for whether a method is included is whether it's helpful.

Having so many different methods means that TEAM therapy can be tailored to the unique needs of every individual. This is another important aspect of TEAM therapy. If you work with a therapist who's aligned with a particular school of thought, and that approach doesn't work for you, you'll likely need to find a new therapist. This is much less of a concern if you're working with someone trained in TEAM therapy because any technique that is useful can be integrated into the TEAM approach.

- *Solving challenges:* The Methods of TEAM therapy are used in multiple ways to help solve challenges and to dive deeper into your thoughts and emotions. They can be incorporated into therapy sessions at any time they're needed. Sometimes they're introduced as a method, but often they're just integrated into the flow of the session. From the beginning of a session until its completion, the methods of TEAM are used to help in therapeutic progress.

⁹ Fifty of these are discussed in detail in *Feeling Great* Chapter 33, and you can learn many more by listening to podcasts. Whatever your level of interest, the podcasts are invaluable. If you're interested in the origins of many the techniques, this is discussed at (<https://feelinggood.libsyn.com/website/184-what-comes-first-negative-thoughts-or-feelings-solving-the-chicken-vs-the-egg-problem-and-more>)

- *Consolidating and amplifying what you've learned:* The most exciting use of methods, however, is to consolidate the gains made in the DML. They are the way you practice your new knowledge. Using various methods at the end of your therapy session to consolidate and amplify what you've learned are also an important reason why TEAM therapy is so powerful.

Whether or not they've been used earlier, various methods always are used at the end of treatment to consolidate and strengthen all the changes that have taken place during cognitive reframing and identification of cognitive distortions. They're also used in relapse training, where you learn how to rapidly defeat any unhappiness that might occur in the future.

- *Experiencing joy:* One of the most impressive things about the methods of TEAM therapy is that they can be fun to use. You'll hear that in live sessions on the www.feelinggood.com podcasts, and you'll hopefully experience it when you use the methods yourself. Using the methods of TEAM can be filled with joy, which makes this part of the journey still more positive and rewarding at the same time it reinforces that you're not broken or defective.

So, what are these wonderful methods? I'm sorry to say that one challenge of having over 100 methods to consider is that a document like the *User's Guide* is too short to dive into them individually. Fortunately, we don't have to do that because *Feeling Great* has descriptions of 50 different powerful methods to use in Chapter 33, there are multiple podcasts devoted to particular methods, and every live session podcast uses appropriate methods as needed.

Thus, I'm going to restrain myself here, and refer to you the many other resources available to you, and to your therapist (if you're working with one – if not, I'll circle back to using the methods on your own at the end of this section).

We do have time, however, to take a moment to look at what the methods might do from the perspective of brain function. If something works, it's because it's aligned with how your brain works. What are the methods doing from this perspective?

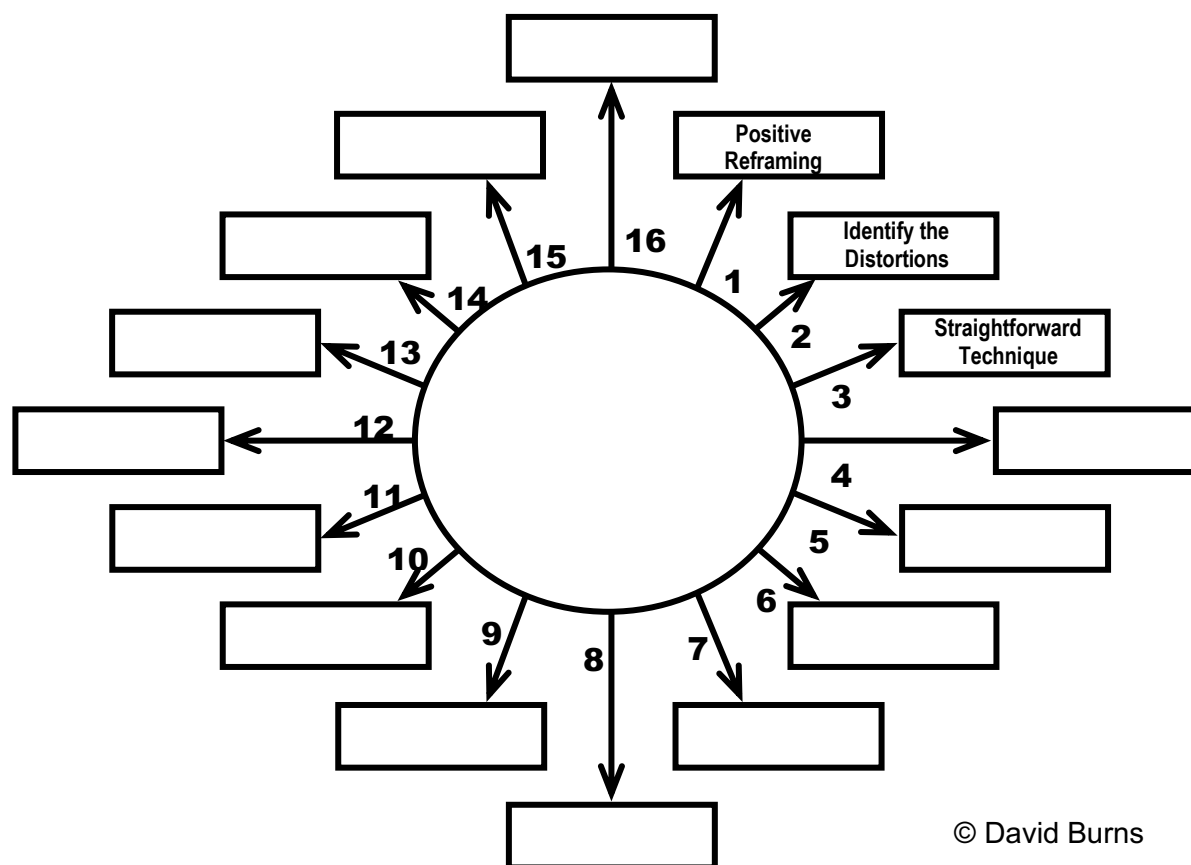
From the perspective of brain function, no matter how different they appear, the methods of TEAM all share certain features:

1. All of the methods promote comparison between your flawed, negative, and mean-spirited thoughts and your more valid and compassionate thoughts. All of the methods help your brain carry out the quality control step that is so important in changing your interpretations and predictions. This is the step that will automatically change your emotions.
Regardless of when the Methods of TEAM therapy are used, or which ones are used, their power depends on their ability to accentuate comparisons between stronger positive interpretations and weaker negative interpretations. Once this comparison is set up, emotional change is the natural consequence of choosing interpretations that yield accurate predictions and let you feel better about yourself.
2. The methods all amplify and solidify what you've learned, and extend the changes that have occurred thus far.
3. If you still have emotional monsters that are troubling you, there are methods to help you master them.
4. The methods of TEAM will build and strengthen new networks by the principle of what fires together wires together. Once these new nerve cell networks have been strengthened, then the principle of what's wired together fires together increases the likelihood that they'll continue to work together. Whether you're again wrestling with depression and/or anxiety, or just dealing with the many different stresses that can weigh each of us down, you will have created an emotional defense system that can neutralize harmful thinking before it becomes toxic to your health.

5. As with so many other components of TEAM therapy, the methods of TEAM can lead you to many positive surprises as you see how they work, and learn powerful new ways of responding to your negative thoughts.

Building your Recovery Circle

In working with Methods at the end of a session, the starting place is to use what's called a Recovery Circle (*Feeling Great*, pgs. 203-205). To use this circle, choose a negative thought to work on and put it in the center of the Circle.¹⁰ On the outside of the circle, you list the techniques you think might be useful, and work your way through them.¹¹ If the first technique doesn't work then you move on to the next one until the belief in the negative thought is reduced to zero (or at least close to zero). It's rarely necessary, but if you need to then it's possible to work through fifteen techniques in a half hour or so.¹²



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¹⁰ <https://feelinggood.com/2018/07/02/096-the-recovery-circle-a-case-of-public-speaking-anxiety/>

<https://feelinggood.com/2019/04/08/135-smashing-shyness-part-2-of-2-consecutive-shows-on-social-anxiety/?highlight=recovery%20circle>

¹¹ *Feeling Great* contains a handy table that indicates which method(s) may be particularly useful for each kind of cognitive distortion (pg 106-107).

¹² For more information on high-speed evaluation of different methods, recommended podcasts are <https://feelinggood.com/2018/06/18/093-fifty-ways-in-fifty-minutes-part-1/> and <https://feelinggood.com/2018/06/25/094-50-methods-in-50-minutes-part-2/>

In comparison, people who try antidepressants are usually encouraged to take them for at least several weeks before making a decision on whether they're having an effect, and it takes several months to personally evaluate three different antidepressants.

Having multiple techniques to draw on is an optimistic message that also is important in understanding the power of TEAM therapy. Displaying multiple methods right in the beginning of this part of the therapeutic journey shows you that it's not a problem if a particular approach isn't working, because there are plenty of other options. Moreover, the confidence that there's a well thought out plan is also promoted by knowing that if a particular method doesn't work, the goal is to find that out as quickly as possible and then move on and identify the right one for you. It's okay if a method doesn't work for you, because we're all different in our personal experiences. If a particular method doesn't work, you just move on to the next one.

The straightforward and rapid way in which the success or failure of a method is determined is another positive aspect of TEAM therapy. If you're using a method to solve a knotty problem on decreasing belief in a negative thought, for example it's easy to tell if the method worked or not because you're quantifying how much you believe in that thought. If the belief in the negative thought in the center of the circle goes down, then the technique is working. If your belief in the negative thought stays high, then move on to another technique. If your belief in that thought decreases to zero, or close to zero, then you can move on to the next negative thought.

Working by yourself:

When you're using the methods of TEAM therapy by yourself, the most powerful approach is to write everything down as though you were working with a therapist. As discussed earlier, writing has special effects on your thinking, and will help clarify your thoughts in useful ways. Writing out the conversation you'd be having if you were working with someone, with what you'd say in each role, is the quickest way to become proficient at these methods.

For those methods that use role playing, another way that people work on Methods by themselves is to say each role out loud. You can do this however you like. You can put one role on your left shoulder, and one on your right and let them talk in turn. You can shift your body language between the different roles, speak in different voices, or whatever works for you. The goal is to get the information you need out in front of you. Any way you do this will build the nerve cell networks and patterns of thought that enable you to do this successfully time after time.

Step 9: Relapse training

Another aspect of TEAM therapy that differs from other approaches is the way that the problem of relapses is handled.¹³ Relapses in the treatment of depression and anxiety, with the return of the feelings that made you seek out therapy, are a frequent problem. Symptoms can return in stressful situations, or they can return without a known cause. For most people, relapses are frightening experiences that can cause you to doubt yourself so much that you conclude that you really are defective and hopeless. You may feel that the success you had was just a delusion, that you're so defective that nothing is going to really help, and you may feel helpless and afraid. These feelings are even more severe because you've had some time when you were feeling pretty good about yourself.

¹³ More information on relapse training can be found in Section IV of *Feeling Great*, and in multiple other podcasts, such as <https://feelinggood.com/2017/07/31/048-relapse-prevention-training/>

The goals of TEAM therapy are not just to achieve complete recovery but to also prevent relapses in the future. To achieve recovery that lasts, TEAM therapy provides specific training to prepare you for the future. Psychotherapy is not like taking antibiotics for an infection, where the goal is to eliminate the pathogen. It's more like taking care of your bicycle or car. You don't repair your bike or your car once with the expectation that you're done forever. It's important to pay attention to maintenance, and relapse training teaches you how to do this.

For most types of psychotherapy, and for medication-centered treatment, relapses are considered challenging to treat. It's generally believed that each new episode will be more severe than earlier ones, and therapeutic strategies are uncertain. If your therapist is also worried about the consequences of a relapse, this will probably increase your fear of such an event.

TEAM therapy has a very different view of relapses, and actually treats a relapse as a positive event. In fact, relapse training generally begins with an introduction along the lines of "I've got some good news, some great news and some really great news. The *good news* is that at some point you're going to have a relapse. The reason this is good news is that it shows that your brain is working normally. Life has ups and downs for all of us, and no one is entitled to seven happy days a week. So, the fact that you might feel down again just shows that you're human. The *great news* is that the techniques you used today will work for you every time you need them in the future. And the *really great news* is that now you're able to do this on your own. These techniques are part of your new skill set. And if you need a refresher, you can do some review work with *Feeling Great* or check back in with your therapist for a quick tune-up."

Instead of being afraid of a relapse, people trained in the techniques of TEAM therapy welcome the chance to test out their skills. It's exciting instead of frightening, because you know you're going to come out of it okay, and you can enjoy what you're now able to do. You're not helpless, because you now have powerful techniques you can use whenever you need them. The situation no longer feels hopeless.

Moreover, every time you successfully defeat a relapse, the principles of "what fires together wires together" and "what's wired together fires together" work in your favor to make all of your new skills even more powerful. Doing this also will give you examples of how you overcame the relapse, making it even easier to do this if you have to do it again.

Defining a relapse

One of the ways that TEAM therapy helps you defeat relapses is that it defines a relapse as one minute or more of unhappiness, whenever it occurs. Every life has its ups and downs, and nobody gets to be happy every minute of every day.

Defining a relapse as one minute or more of unhappiness also is part of why TEAM therapy is so powerful. Defining a relapse this way accomplishes two important goals:

- *Taking away the fear:* Defining a relapse in this way decreases the fear by presenting it as just a normal part of being alive. It takes away the feeling of being ambushed by something unexpected. Now, having a relapse is a prediction that every life has some unhappy moments. Other approaches treat relapse as a fearful process that can drag you even further into the depths than you were when you first sought help. In contrast, TEAM therapy treats periods of unhappiness and self-doubt as a part of life that you now know how to handle. You're prepared to react because you were warned in advance, and you know what to do.
- *Early treatment is more effective:* Defining even a minute of unhappiness as a relapse encourages you to apply the TEAM therapy techniques you've learned as quickly as

possible, with the goal of preventing further progression. If you define a relapse as occurring as soon as you start being unhappy, then unhappiness is a reminder to use techniques that will prevent it from becoming severe. Basically, you're fixing the wobble on the wheels of your brain when the wobble first starts. This is just like you'd do with a bicycle or a car, and your brain is a lot more important than your bicycle or car.

TEAM therapy differs from other therapies by training you to respond quickly and effectively to possible relapses. All the skills that helped you the first time will be just as effective if you need them again. In addition, by defining a relapse as a minute or more of unhappiness, you'll make those skills even more effective by using them as soon as you need them.

Step 10: Evaluation: how did the session go?

How do you know what progress you've made? Whether improvements are going to last? How do you know what changes to make so that your therapy more effective? One of the unique features of TEAM therapy is that these questions are addressed in a way that enables accurate analysis of each one. This is still another way in which every step in TEAM therapy has been thought out with great precision.

Every TEAM therapy session ends with filling out two forms that are very quick to use. Both forms also help your therapist know how well they're helping you. These forms also demonstrate additional important differences between TEAM therapy and other treatments:

- The first form to fill out is the Brief Mood Survey again, to find out how well the therapy session went.
- The second form is an Evaluation of Therapy form. This is also used after every session. It just takes a couple of minutes to fill out, and it provides critical information to your therapist on multiple topics to improve their ability to be helpful to you.

On a general level, the information in the Brief Mood Survey helps you chart your own progress, and helps increase your awareness of your emotions. But there are multiple other reasons why returning to the Brief Mood Survey is important:

- Filling out the Brief Mood Survey at the beginning and end of every session is essential in determining whether you are experiencing rapid change and whether these changes are maintained from one session to the next.
It only makes sense to check this information at the beginning and end of every session if there is an expectation of making progress during each session and of retaining the improvement from one session to the next. These expectations represent big differences from other therapies.
Achieving more rapid recovery than occurs in other forms of psychotherapy is one of the goals of TEAM therapy. The recovery in a single two-hour session that you can listen to on podcasts is something that requires years of experience with TEAM therapy, and such single-session treatment is not a realistic goal for most therapists. Rapid recovery, however, is the goal of all TEAM therapists.
- When you fill out the Brief Mood Survey at the beginning and end of every session, you'll hopefully see real evidence of change. When people fill this survey out at the end of a successful session, they're often amazed at how much their emotions changed. Seeing change in such a clear way will strengthen your feelings of hopefulness and optimism and your belief that it's possible to gain control over your emotional state.
- The use of measuring tools for your emotions (and also your beliefs) takes TEAM therapy out of the realm of ambiguous questions like "How are you feeling?" and ambiguous answers like "Pretty well, I guess, but kind of down and a bit anxious." The

tools of TEAM therapy put numerical values on your feelings and beliefs, which makes it possible to see how much each one has changed.

- The information in the Brief Mood Survey is also critical in seeing what adjustments are needed in your therapy. This information is important in evaluating how treatment is going. It also identifies specific goals to be addressed. The tools used for depression, anxiety, relationship issues, habits and addictions have lots of similarities, but they also have important differences. If your scores are changing in one area but not in another, then knowing this information can help your therapist adjust the therapy precisely according to your needs.

The Evaluation of Therapy form is another unique feature of TEAM therapy. This form has multiple ways of providing feedback to your therapist:

- The empathy part of the Evaluation of Therapy form is one way that you give feedback to your therapist. There is a 20 point scoring range for the evaluation of therapy, and the only passing grade is a perfect score of 20 points. That is a tremendous challenge for any therapist to meet, but it's the only way for your therapist to know if they're understanding your needs. This is like giving your therapist a grade at the end of the empathy session, but now you're able to reflect on the entire session.
- The Evaluation of Therapy form also has sections on helpfulness of the session, satisfaction, your commitment, negative feelings and difficulties with the session. Every one of these topics requires a perfect score to be considered a success for the therapist.
- This form also asks what you liked least and what you liked best about the session. These questions give you the opportunity to provide specific feedback.

Dr. Burns has described multiple sessions, in his books and podcasts, in which he wrongly thought he had done a wonderful job. It was only by reading the end-of-session feedback from the patient that he found out that he had actually done a terrible job. This information allowed him to understand how he failed, and to do better. There have also been times of feeling he had done a terrible job, yet the patient was thrilled. But the times he failed were the most useful because this is when there was the chance to find out where he'd gone wrong. This feedback was what created the chance to change direction and improve.

The closing evaluation of your emotions and of the therapy session at the end of every session are unique features of TEAM therapy that also help explain its effectiveness. The information in these forms is what enables fine tuning of your therapy for your individual needs. These forms provide precise information on your emotional state. They also provide precise information on the way you feel about each and every session.

For every other branch of medicine, having precise information is essential. In fact, all of science is based on our ability to measure outcomes. Without such information, all interpretations are just guessing. They are influenced by a person's own internal stories, their moods of the moment, and other factors. In other branches of medicine, the idea that you could monitor someone's recovery without accurate testing would be considered insane. For psychotherapy to be carried out in a scientific way, the need for accurate measurements is just as strong.

Once you start using the quantitative evaluation tools used in TEAM therapy, it becomes difficult to imagine why anyone would do anything else. Similarly, once you start working with quantitative

feedback at the end of every session, it's difficult to imagine ever working without this.

Was it magic?

TEAM therapy sounds so simple when you're listening to a podcast, or observing a live treatment session. There are no high technology approaches, and no use of powerful drugs. It just seems like an interesting conversation. Yet, it's so powerful, and that's the essential clue that there is far more going on.

When TEAM therapy works, it seems like magic. But the only magic that's occurring is the same awesome magic that enables wounds to heal, hearts to keep beating day in and day out, the energy of sunlight to be converted by plants into the foodstuffs on which all forms of life ultimately depend, and every other wonder in our daily lives.

It is the magic of the world working properly. What the years of work with thousands of patients has led to is the discovery of powerful techniques that enable our brains to do their jobs. The magic feeling of rapid emotional change is a magic that we all experience but usually pay little attention to. The generation of different emotions when our interpretations change is simply what our brains are designed to do. The magic of TEAM therapy is to help that journey proceed the way it is meant to.

In the end, the key to understanding TEAM therapy is that it's good science and good medicine. The magic is the magic of biology, and the job of the healer is to enable biology to do its job. TEAM therapy does this effectively, and has much to teach us, not only about how to treat emotional maladies, but also about the most fundamental aspects of how our brains work.

Part III: Additional information on twelve frequently asked questions

1. Can I skip over any of the parts of TEAM therapy?

One of the purposes of this guide is to make it easier to see how the pieces of TEAM therapy fit together. Every piece has its purpose, and if you leave a piece out then you won't get the full benefits of this approach. You may get some useful benefits, but it will be harder to achieve rapid and complete recovery.

If you're working with a TEAM therapist, or you are a TEAM therapist, then skipping over any part of the TEAM structure is weakening the therapy. If you had a bacterial infection, you wouldn't say "Well, I really only need to take half the amount of antibiotics because that will work just as well." If you had a broken leg, you wouldn't say "Oh, I really only need a cast to cover half the break." If you had a cut, you wouldn't say "Oh, I just need to put a band-aid on part of the cut. That will work just as well." If your roof was leaking you wouldn't say "It's fine if we just fix half of the leak."

If you're a client and steps are being skipped, then ask your therapist why and tell them you want to the full TEAM experience.

If you're a therapist and you're skipping steps, then ask yourself why you're doing this. You've studied TEAM therapy because you've seen how powerful it can be. Why are you reducing the dose of antibiotics, when you know you need the full dose to achieve recovery?

Talking with therapists and clients about this problem, it seems that one part of TEAM therapy that is often skipped is when a therapist does not insist on the requirement for homework. A client may say they're too busy, or they're too stressed. The therapist may not want to push too hard, and agrees that the homework can be skipped.

The problem is that if you skip the homework, it's harder to make rapid progress.

If you're not making rapid progress, then it's tempting to stop using the Brief Mood Survey at the beginning and end of every session. That's because having quantitative scores that show that not much is changing can make the client feel bad about themselves. Could the lack of change mean that they're really broken and defective? The therapist may also feel frustrated and guilty and incompetent, because they've been taught that rapid progress is the goal of TEAM therapy.

Then you each may tell yourself a story that you don't need the information provided by the using the Brief Mood Survey at the beginning and end of every session - but that's a story you're creating so that you don't have to do something that's causing you to feel unhappy.

The truth is that you need the Brief Mood Survey the most when you're not making rapid progress. You need this information the most because this provides the path to improving the therapy.

If you're a therapist and have gotten stuck with a patient, then it's important to be part of a discussion group with other therapists to look at ideas for how to move forward. There's a lot to learn in TEAM therapy, and gaining from the experience of others is just as helpful here as it is in any other complex discipline.

"TEAM-lite" is not as effective as TEAM-full strength. In fact, "TEAM-lite" should not be considered as TEAM therapy. If any of the components are left out, what's left is not TEAM therapy.

The above idea notwithstanding, incorporating components of TEAM into other approaches may make them more powerful. Therapists who do this (and their clients) will likely be pleased with the outcomes if they incorporate such TEAM components as e.g., working on a moment in time, positive reframing, extensive testing, and end-of-session evaluations. Of these, testing is the most important. Without it, it's like traveling somewhere without accurate information about how far you've gone, how much further you need to go, how much fuel is left or even whether you're going in the right direction.

Achieving complete recovery over a relatively short time-span, however, requires using every component of TEAM therapy.

2. Are there differences between working on depression and anxiety?

Treatment of depression and anxiety by TEAM therapy has many similarities, but there are also some additional challenges that need to be addressed in many people with anxiety-related problems.

If you're interested in anxiety, in yourself or others, there's a great resource available in the book *When Panic Attacks*, which was written by Dr. Burns in 2006. This book benefitted from 25 years of additional experience since the writing of *Feeling Good*, including multiple other books, years of research, and thousands of treatment sessions. Several of the most important advances in TEAM therapy (e.g., the focus on a single moment, positive reframing) are already present in *When Panic Attacks*. Some of these ideas are still further refined in *Feeling Great*. For example, the importance of early use of positive reframing had not yet been recognized when Dr. Burns wrote his book on treating anxiety. Nonetheless, *When Panic Attacks* provides a detailed road-map for the treatment of even the most severe forms of anxiety. And, just as for all the books by Dr. Burns, it's written to be useful for anyone in need.

One of the challenges in treating many types of anxiety is the importance of identifying *hidden emotions*. These are emotions that may not seem of particular importance when you're telling your story, but that are critical targets for enabling effective treatment of anxiety.

A second challenge in treating anxiety is that the only way to cure anxiety quickly is to use some form of exposure therapy. The most critical principle in carrying out exposure is a simple one, which is that if you expose yourself to whatever you fear, you'll find that there's nothing there to harm you. There are multiple different ways of doing this, including gradual exposure, jumping right in to the most frightening circumstances you can imagine with intense exposure (a technique called flooding), not allowing yourself to respond (a technique called prevention), and distraction. All of these are discussed in Part III of *When Panic Attacks* and in *Feeling Great*, pgs. 272-274 and 488-491. In addition, exposure techniques are discussed in the podcast at <https://feelinggood.com/2017/03/06/026-scared-stiff-the-exposure-model-part-4/>.

For some people, gradual exposure is the most useful technique, and it's one that's easy to use even if you're not working with a therapist. With this technique you describe what most frightens you and then make a list of small steps to take towards confronting that fear. For each step, spend 15-20 minutes a day letting it bother you, and you'll quickly find that the anxiety associated with that step disappears. When that happens, you then move on to the next frightening step and do the same thing, until you've conquered your fear. For examples of how to use gradual exposure, see *When Panic Attacks*, pgs. 254-257.

If you want more rapid change, however, then intensive exposure (i.e., flooding) is the way to achieve this. Flooding techniques are one of the most dramatic ways to create an "Aha" moment, where your problem can suddenly melt away, leaving you wondering why you'd been so frightened.

It's also important to stress that there are other interesting medication-free approaches to treating anxiety-related problems. They're not as rapid as TEAM therapy, but they can be worth a look. I particularly recommend the work of Dr. Judson Brewer, which can be found at drjud.com. His approaches are actually very aligned with many of the ideas of TEAM therapy discussed in this guide.

3. Can TEAM therapy be used for other problems, like relationships, addictions and unhealthy habits?

TEAM therapy is successfully used for the treatment of relationship problems, addictions, unhealthy habits, post-traumatic stress disorder, obsessive-compulsive disorder, borderline personality disorder and many other problems.

For any of these challenges, specialized techniques will be used. Some of these are described in *Feeling Great*. For relationship problems, the book *Feeling Good Together* is a critical resource. The book *Ten Days to Self-Esteem* was written by Dr. Burns for use in a program where he was treating many people with borderline personality disorder.

The easiest way to find out more about any problem that interests you is to use the search function at www.feelinggood.com to find podcasts that address your interests.

4. Does TEAM therapy work for everybody?

As with all of the questions I'm considering, it's important to be specific.

All of the following thoughts are in respect to full-strength TEAM therapy ((See Questions 1 and 5). Effectiveness will be decreased if someone leaves off testing, or homework, or exposure for anxiety, or any of the other steps discussed in this guide. If the person-in-need commits to doing TEAM CBT homework (e.g., with the DML) for 20-30 minutes a day for several weeks, the odds of recovery are so high that the research of Dr. Burns suggests every person is likely to experience striking improvements. The odds of recovery are also improved by working with a skilled therapist (but you still have to do the homework to practice new habits of thought). The specific needs of each person are also relevant, of course.

The first question is what does it mean for a therapy for depression or anxiety "to work." How much of a recovery counts as "working?" How fast does the recovery need to be to count as "working?"

The goal in TEAM therapy is to achieve complete recovery, which is quite a different goal from other therapies:

- It's standard practice in treatment of depression or anxiety to consider a 50-60% reduction in symptoms (i.e., negative emotions) as a success, even if the reduction is restricted to a subset of negative emotions.
- In contrast, the goal in TEAM therapy is to achieve complete, or almost complete, reduction in negative emotions in multiple categories.
- It's also standard practice with other treatments not to even score happiness (i.e., positive emotions).
- TEAM therapists have a goal of also increasing happiness. As discussed in this guide, a decrease in negative feelings does not guarantee an increase in positive feelings. For TEAM therapists, a failure to improve in positive feelings would be a clear indication that there is more work to do.

The goals regarding the speed of recovery also differ in TEAM therapy as compared with other therapies:

- Some TEAM therapists frequently can provide complete recovery in a few weeks of treatment (so long as the client is going to do their homework).
- Having such rapid outcomes requires a great deal of skill and experience, however, so a more realistic question would be to ask what are the goals of TEAM therapy as compared with other approaches to psychotherapy, use of medications, or both.
- The expectation with other approaches to treating depression or anxiety is that treatments will continue for multiple months or, frequently, multiple years.
- The goal of TEAM therapists is to complete treatment within a few months and, if possible, within a few weeks. (This assumes, again, that the person being treated does all their homework.) Considering that more than 50% of people who did the exercises in *Feeling Good* for four weeks as their sole treatment recovered so much that no other

treatment was needed¹⁴, it seems that a goal of recovery in a few weeks can be achieved by a high proportion of people (if they do the homework!).

- It is possible to achieve even more rapid recovery, as evidenced in the live session podcasts at www.feelinggood.com. Most (but not all) of the people treated in these sessions have some (or a lot of) familiarity with TEAM therapy, however, which may be helpful. (If that is the case, then reading this *User's Guide* and gaining some familiarity with TEAM therapy will hopefully help increase the speed of recovery for many people.)

With the above stipulations, the next question is whether TEAM therapy works for all disorders of thinking. The answer is that this is not yet known, but we can make some inferences from studies on CBT.

As TEAM therapy was designed to be more effective than CBT, it's reasonable to suggest it will be useful in all situations where clinical studies of CBT have shown benefits. These include, for example:

- Addiction
- Anxiety
- Borderline personality disorder¹⁵
- Chronic Pain
- Depression
- Disease-associated depression and anxiety
- Unhealthy Habits
- Irritable Bowel Syndrome
- Obsessive-compulsive disorder
- Panic disorder
- Pediatric depression, anxiety, OCD, PTSD, etc.
- Phobias
- Post-partum depression
- Post-traumatic stress disorder
- Suicidal intent

From previous work with CBT, we might also conclude that this approach won't cure schizophrenia but can help schizophrenics lead happier lives by learning new ways to think about the voices they might hear. For people with bipolar depressive disorder, the conclusion seems to be that benefits can be high for the depressive phase and that the manic phase requires medication. For narcissism, the question is whether the narcissist is willing to admit that there are problems in their lives that they are causing (in contrast with the more prevalent view in narcissism that all their problems are the fault of others). For people, including children, with autism, this approach seems to be helpful in dealing with anxiety and also with getting an improved understanding of other people.

Another way to be more specific is to ask whether TEAM therapy as practiced by most therapists works for everybody. It's routine for TEAM therapists to find that the speed of recovery of their clients improves as they become more experienced. Talking with therapists about these changes in the speed of recovery, the feeling is that the difference is due to

¹⁴ These studies are summarized in *Feeling Great*, pgs. 465-466.

¹⁵ In specific respect to the important category of borderline personality disorder (BPD), it's worth pointing out that multiple aspects of TEAM therapy were developed in specific response to the challenges of treating BPD. Recognition also needs to be given to the work of Marsha Linehan, who developed Dialectical Behavioral Therapy (DBT) as another approach to treating the rapid emotional changes that can make life so challenging for people with BPD.

changes in their skill level and not in a change in their client base. This seems an interesting observation, as it's not something you would expect to hear from a therapist who thinks that treating clients for years is just how therapy works. It's also interesting that it seems very unlikely that a TEAM therapist will ever use the phrase, frequently used in the medical profession, that "the patient failed therapy." The ethos of TEAM therapy is that if recovery is not occurring, then the therapy (and the therapist) is failing the patient, and the explicit goal is do better for the person-in-need.

There's also another way of thinking about this question that is related to the concept that there are no therapies that work for everyone. So, let's set a more realistic goal.

Let's say TEAM CBT works for 75% of people who try it. The numbers seem to be higher than that, but 75% is enough to make the point. If your choice was between the following two options, which would you prefer?

- A therapy where there was a 75% chance of benefit, with no side effects, where you could see benefits quickly, that could also give you the tools to prevent relapses, that can be personalized to your individual needs, and that you could use on your own

versus

- A therapy with a lower chance of benefit, a risk of side effects, where whatever benefits occur often don't occur for weeks (at least), where the odds of any particular drug working are not high, where the odds of relapse seem to be high and that you cannot use on your own.

5. Do I have to do homework?

(Make sure to read the answer to the next question also.)

One of the most important factors that will influence your speed of recovery, and the change in your scores between sessions, is how much homework you do. The homework makes an enormous difference in the speed of recovery.

In fact, when Dr. Burns studied the question of what was the most important predictor of rapid recovery (or, indeed, of any recovery at all), it was whether or not someone did their homework. If you want to speed up your recovery, make sure to do your homework. (See *Feeling Great*, pg. 462 for more information on this topic.)

So, yes, you have to do homework. If you're going to obtain the benefits of TEAM therapy, this is not negotiable.

If you want to learn to play tennis, or a musical instrument, or a new language, you have to practice. With TEAM therapy, you're building new habits of thinking. Doing this requires repetition – just like achieving your current state of unhappiness required years of repetition of errors in your thinking. The good news is that using TEAM therapy to learn patterns of thought that will enable your happiness can happen fairly quickly. Much more quickly, in fact, than learning to play tennis, a musical instrument or a new language.

6. What kind of homework works best?

There are many different ways to approach homework. In general, if you're modifying your nerve cell networks in ways that increase your positive feelings, then you're on the right track.

That's a pretty non-specific answer, however, so let's look a bit deeper. All of these approaches make sense, and you can also mix them up if you want. You don't have to stay with just one approach. That said, bringing curiosity and awareness to the mixture – as discussed in this section - is always a good idea.

One possibility is to pay attention to the emotions you have after you've done the homework, because the last emotions we have about something are the ones that have the greatest impression on us. Positive emotions will motivate you to move towards something, and to repeat experiences that let you feel good. Negative emotions will motivate you to move away from something and to avoid experiences that make you feel bad. Thus, if you plan your homework so that you'll end up feeling better about yourself (i.e., experiencing positive emotions), then you're learning that homework is something that feels good to do.

Thinking of homework in the above way, several ideas come to mind:

- Homework focused entirely on identifying negative thoughts may not be enjoyable because you're writing down the beliefs that cause your negative emotions. (See the next paragraph after these bullet points, however, for another way to think about this.)
- It might be more enjoyable if you structure the homework so that you always include positive reframing, and you conclude by identifying beautiful things about you revealed by your negative thoughts and feelings.
- If you combine positive reframing with identification of cognitive distortions, then you can feel even better because you're finding ways in which the negative thoughts are flawed. You can feel that even though you make mistakes in your thinking, that's okay because you can recognize the mistakes and correct them.
- In contrast, if you just combine identification of negative thoughts with identification of cognitive distortions, this may work for you or it may not. This strategy is the way CBT homework sessions have been structured for many years. However, incorporation of positive reframing has been critical in making TEAM therapy as powerful as it is.

Another powerful strategy is to incorporate the positive emotions of awareness and curiosity right from the beginning of every homework session. Now you can take information that feels negative and experience it in a different way. If you're writing down your negative thoughts, for example, and interpret doing this as showing many things that are wrong about you then you may end up feeling worse about yourself. You can approach this in a different way, however, and use this exercise as a way to become aware of your internal stories. You can be curious about what these stories are. You might be curious about identifying pieces of the story you did not know about before. You can then be curious about where these ideas come from, and why you believe them, and whether they're accurate.

If you do something during your homework that's particularly painful, you can treat this as a clue that reveals something that may speed your progress on the road to joy. And always remember that the pain that you feel is just nerve cells firing. Our limbic system does not do a good job of distinguishing real events from events in your imagination. It's like imagining that you hit your thumb with a hammer. That sounds pretty painful, and maybe your imagination is so good that you can even feel the pain. Still, it's just nerve cells firing. There's no hammer. Your thumb is fine. As soon as you stop thinking about it the pain will go away.

If you're doing homework every day and it's not helping you, it's likely that you need to incorporate methods into the homework. If you're working with a therapist, talk with them with to explore methods you can try. If you're working by yourself, there's descriptions of 50 different methods in *Feeling Great*. You can also find detailed information on most methods by searching for the method by name on the www.feelinggood.com podcast website.

There are so many tools in the TEAM toolkit that you can almost always discover methods you haven't tried before. It's the experience of most people that once they find the right method, then recovery will follow.

7. How much homework do I need to do?

If you're depressed or anxious, then it's almost certain that you're spending a fair amount of time each day thinking about whatever is upsetting you. You're also likely to be doing things (like watching television, or playing video games) to distract you from whatever is upsetting you.

Here's a bigger better offer for you: Take part of that time each day and use it for therapy homework. Why? Because doing the homework is going to improve your life. Worrying, watching television, playing video games and other activities like this is not going to improve your life. Does improving your emotional life seem to you to be a bigger better offer?

Most people seem to do homework for 15-20 minutes a day. If you structure your homework to make sure that you're practicing your "personal micro-neurosurgery" and modifying specific nerve cell networks, then you may even benefit from 10 minutes a day of practicing your new skills. Such practicing is the goal of homework, so that these new patterns of thought become habits of thought that are part of your fast thinking response.

8. Does TEAM therapy work if I use *Feeling Great* without a therapist?

The answer to this is not yet known for *Feeling Great*, but previous studies with *Feeling Good* suggest this is very likely to be beneficial. The exercises in *Feeling Good* were so well designed that others began conducting experiments examining the effects of doing these exercises for four weeks, in patients with clinical levels of depression. The results were striking, and more than half of the people using this book benefited so much that they didn't require any additional treatment. Moreover, when examined three years later, people were still healthy, and if they felt down they just used the techniques in *Feeling Good* again. These studies, led by Dr. Forrest Scogin, are summarized in *Feeling Great*, pgs. 465-466.

9. Is brain function as simple as it's described in this guide?

It's possible to write about a great deal more complexity in the brain, and also to write in a far more complex manner. The brain is a complicated tissue, with thousands of papers published every year on different aspects of brain function. There are many studies on aspects of brain function that excellent scientists think are relevant to understanding depression, anxiety, and many other emotional challenges.

The problem is that it's not clear which additional aspects of brain function will help understand the fundamental challenge to neuroscience posed by the successes of TEAM therapy. How is it possible for someone who has not benefited from years (or decades) of other therapies, including medications, be successfully treated in a single two-hour session of TEAM therapy with Dr. Burns, or in a few sessions with multiple other TEAM therapists? Understanding the answer to this question strikes me as one of the most profound questions in all of neuroscience, which is why I began trying to understand this problem.

My own approach to trying to understand the neuroscience underlying TEAM therapy began with three fundamental rules:

- Start from simple principles that have been rigorously tested and have held up for a long time.
- Introduce additional complexity only when it's required.
- Only introduce complexity that offers testable hypotheses and that helps you better understand whatever problem you're working on.

The reason it's important to start from well-tested principles is because most scientific ideas turn out to be wrong (usually in the sense that they're a step to a more accurate idea), but it takes time to find out which ones are wrong. In physics, it takes about 45 years for about half of the ideas that are treated as facts to turn out to be wrong. In psychology, the time is even shorter – and it's only a little over 7 years before half of what are thought of as facts turn out to be wrong.

The ability to keep testing ideas, finding out which ones are wrong and moving on to a more useful analysis is the reason science continues to change and grow and become more powerful. There are a lot of ideas that look attractive - but most of them don't last very long as they continue to be tested and the specific predictions they make turn out to be wrong as science progresses further.¹⁶ If an idea doesn't hold up, it gets replaced by a more powerful one. The short half-life of ideas in psychology creates a major challenge to understanding the neuroscience of successful treatment, because the foundation for your hypotheses is likely to be overthrown in the relatively near future. Where then is the safe harbor from which to start this journey?

Fortunately, the fact that most ideas end up being wrong doesn't mean that's always the case. Some scientific ideas are so insightful that no matter how often they're tested, they keep making correct predictions. For example, Archimedes' discovery that you can calculate the volume of an irregular object by measuring how much liquid it displaces allows you to make predictions that are as accurate today as they were in ancient Greece.

If you start out with simple principles that make specific predictions and that have held up under repeated testing for many years, you're starting your explorations from a strong foundation.

In psychology, the idea that our emotions come from our interpretations of the world, rather than the events that happen, has been tested over and over for nearly three thousand years. Several hundred years before the Buddha, the great thinkers of India had been working on this problem. Their discoveries led to the development of analytical meditation, which has principles strikingly like cognitive and behavioral therapy (CBT). The same is true for the Stoic philosophers of ancient Greece. These ideas continued to be tested by great thinkers of

¹⁶ This is a very different concept than the reason why ideas can be long-lived in religions. Scientific ideas have to be testable, which means that there's a way that they can be shown to be wrong. In addition, the validity of scientific beliefs is independent of the personal beliefs of the person testing them. No matter your gender, age, spiritual or political beliefs, if you conduct the experiment in the same way you'll get the same answer. Core principles of religions, in contrast, are matters of personal belief that cannot be tested and thus cannot be shown to be wrong. In fact, it's central to a religion that its core beliefs are stated in such a way that they can't be shown to be wrong, or else that religion would be at risk of disappearing. This is particularly true for claims about deities.

This is actually an interesting difference from Buddhism, which in many ways functions more like a branch of science (and, particularly, a branch of psychology). Buddhist leaders teach that the Buddha said it's important for others to test his teachings, and to reject them if they were wrong. Moreover, Buddhism differs from religions in that Buddhism does not place importance on the existence of gods or goddesses, and principles of Buddhism do not depend on believing in such deities.

different times and places. Although it's correct that Albert Ellis and Aaron Beck (and David Burns) played critical roles in the development of CBT, they all have recognized that the core principles of this discipline have roots that extend far into the past. Moreover, the core principles developed so long ago have proven so profound that, like the discoveries of Archimedes, they remain unchanged.

In order for TEAM therapy (and CBT in general) to be able to treat the wide range of emotional maladies for which they're used, these approaches must work on principles of brain function so fundamental that they apply to many different situations. Moreover, there do not appear to be any cultural limitations in utility of the techniques of CBT, so it's important to start at a basic level that lets us eliminate differences that might be caused by gender, race, culture or anything else that varies in different patient populations. If our goal is to generate an understanding of psychotherapy that's going to be useful in different people, cultures and times, then it's necessary to focus on brain functions that transcend such limitations.

How much does it change any of the suggestions in this guide to know that different regions of the prefrontal cortex have different functions, that there are multiple other brain regions that are interesting in depression and anxiety, or that each neurotransmitter can bind to several different kinds of proteins? If you're trying to figure out the details of brain function, then this information is interesting. Yet, even though I'm interested in this level of detail, and can think of a large number of experiments it would be interesting to conduct, I'm not yet convinced that such information will cause a fundamental change in the framework that I'm proposing. (I have no doubt that some of my colleagues in the world of neuroscience will be eager to tell me why I'm wrong about this. I'm looking forward to their criticisms and their thoughts about insights that are particularly helpful in understanding how high-speed medication-free psychotherapy works, particularly in patients for whom medications have failed to provide benefit even after years of treatment.)

10. What about medications?

First, I want to stipulate that nothing that I say in this section should be construed as medical advice. I am a scientist, and not a doctor. If you're taking medications, or thinking about taking medications, this is something you should discuss with your doctor.

It's clear that TEAM therapy is a different process than a medication-based solution to depression and anxiety. We considered some of these differences earlier in the *User's Guide*, but there are still others to consider. For example:

- In most cases, there is no need to use medications in TEAM therapy. Many therapists actually find they make successful treatment more difficult. This is true for depression, and is even more the case for anxiety.
- In fact, many of the podcasts you can listen to involve people who were treated with drugs and other therapies for years before coming to Dr. Burns. This is also true for many of the cases discussed in *Feeling Great* and other books by Dr. Burns. Despite years, or even decades, of previous lack of recovery, all of these people were successfully treated with TEAM therapy without medications.
- TEAM therapy is also built on the principle of solving specific problems. Medications, in contrast, flood your body with chemicals. This is part of the reason for many of the side effects of medications, because the chemicals that are being changed play many roles in our bodies. In addition, medications don't teach you anything about the specific reasons for your unhappiness.
- As we've discussed in this guide, TEAM therapy is based on the idea that your unhappiness is revealing what's right about you. Medications are based on the belief

that there is something fundamentally wrong with you. These views help create very different internal stories. The internal story that goes with medications is that you're fundamentally sick and defective. The internal story that goes with TEAM therapy is that you're fundamentally fine but you need to learn some new thinking skills.

It's also necessary to ask the question about how helpful medications are (as compared with placebo effects). A large number of scientific studies indicate that the percentage of people helped by antidepressants is very similar to the percentage helped by placebos.

For drug therapy, there is a lot of contradictory information available:

- You'll encounter some sites that tell you great things about drugs and how beneficial they are.
- You can also find information from people who found drugs were very helpful for them.
- You'll find information from other people claiming that drugs don't work well at all.
- You'll also find many thoughtful criticisms of the idea that depression and anxiety are caused by chemical imbalances.
- You'll find a lot of information about side effects of different drugs, including people describing their personal experiences.
- You'll also find many studies that claim that drugs are no more effective than placebos (i.e., sugar pills), except that the placebos don't have the side effects.

It's easy to be overwhelmed by all the information that's available. In addition, we're exposed a lot to the idea that chemical imbalances are important in depression and anxiety, but that doesn't mean this idea is correct. Drugs are easy to prescribe, and their use fits with our internal stories that the way to treat a medical problem is with a drug. In addition, there are many companies that make enormous amounts of money by encouraging people to buy antidepressants and anti-anxiety drugs. In contrast, there are no companies making money from TEAM therapy or other types of CBT. As you can see, there are multiple reasons why believing that drugs are useful for treating depression and anxiety is part of our internal stories.

It's hard to figure out what interpretations are most likely to be correct when you can find information to support any belief that fits with your internal stories. What can you do?

The question of how well the use of medications for depression and anxiety is scientifically supported is discussed in *Feeling Great* Chapter 31 and in multiple www.feelinggood.com podcasts (including podcasts 20, 89, 90 and 218). In addition, the following reading may be of interest to you:

<https://feelinggood.com/2017/12/12/do-depression-and-anxiety-result-from-a-chemical-imbalance-in-the-brain/>

<https://feelinggood.com/2017/02/24/a-drug-rep-speaks-out/>

<https://feelinggood.com/2017/03/09/the-placebo-effect/>

https://feelinggood.com/wp-content/uploads/2019/10/bmjebm-2019-111238.full_.pdf

<http://www.cbc.ca/news/health/antidepressant-drugs-may-not-be-best-treatment-robert-whitaker-1.2667410>

Despite the above concerns, it's clear that some people can feel much better when taking the correct dose of their prescribed anti-depressants or anti-anxiety drugs. If you are among those who have found antidepressants to be an unequivocal benefit, nothing that is said in this guide is intended to argue against your continued use of such medications.

Many people do not feel the way they want to when taking these medications, however, or they experience side effects that they do not like, and therefore are seeking different treatment options. For many people, more medications are added on and doses get increased. That's not been a successful paradigm.

Another problem is that some people can feel pretty awful for a little while when they're stopping antidepressants or anti-anxiety medications, and it is recommended to come off them slowly and with the support of a medical professional. It's totally normal to feel poorly when stopping your antidepressant or anti-anxiety medication, and it doesn't mean anything is wrong with you. It just means your brain is resetting itself for normal function. You and your TEAM therapist can use the techniques discussed in this guide to help you with that transition.

If you're using antidepressants or anti-anxiety drugs, and you want to stop, talk about this with your therapist and the doctor/psychiatrist who prescribed them. The techniques of TEAM therapy can help you through this process. Even if you are happy with your medication regimen right now, TEAM therapy can help boost your recovery and potentially offer you the opportunity to come off medications (if that is a desired goal for you).

The topic of whether depression and anxiety might be caused by organic problems in brain function will take a lot of space to explore in detail. There are a lot of questions on this topic that I hope to write about in the future.

At the moment, here are some additional thoughts about these questions:

- As discussed earlier, TEAM CBT is used to treat many individuals for whom different drugs and other therapeutic approaches have failed to provide benefit for years, or even for decades. That suggests that whatever TEAM CBT does is more powerful than the effects of, e.g., drugs that modulate levels of chemicals in the brain.
- There is also a general concern that relates to the topic of treating specific issues (which I think of in terms of specific patterns of thought and networks of nerve cells) versus treatments that flood the body on a more general level. As an analogy I don't think it's a sensible approach to turn off the electricity for the whole city just to turn off a light in one room of one home in that city. For me, that analogy helps illuminate important differences between medication-based approaches and the specific nature of TEAM CBT (and other forms of CBT, as well as aspects of Stoic and Buddhist philosophies).
- There's another concern about specificity, which relates to the ability to distinguish signal from noise. For example, let's say that the current view is right that dopamine is an important part of how the brain creates a sense of positive anticipation. In normal brain function, that anticipation is to something very specific happening (e.g., seeing someone you like or love, eating a piece of chocolate, listening to music, etc.). The release of dopamine increases joyful anticipation of that specific event. Those specific events are the signals. Just generally increasing dopamine levels doesn't teach you anything about specific life events – it's more like taking cocaine or any other transient inducer of general happiness. It does not help you create an improved way of interacting with the world. Instead, it seems like what it does is increase the background noise and make it difficult to identify the specific signals.

- The above concern applies to every neuromodulator, and reveals a stark difference between the understanding of brain function useful in explaining the efficacy of TEAM Therapy and the understanding of brain function that researchers apply to the investigation of drug-based therapies. The whole basis of TEAM Therapy (and of all CBT) is specificity. The whole basis of drug-based therapies is that treatment requires flooding the system.
- It's also important to remember that the interpretation of the action of every neurochemical that's been studied has already gone through multiple changes to reach the current interpretations as to what it does. At each previous step in this process, people were just as confident that they had the "correct" understanding of what that chemical does as they are today. What are the odds that what we think is a "correct" understanding is going to change again? Historically, you'd have to conclude those odds are pretty high.

The still changing understanding of the role of different neurotransmitters in emotional regulation seems like a shakier foundation on which to build hypotheses than the view of brain function that emotions are based on our interpretations of events. The discovery that our emotions are a consequence of our interpretations seems to have held up just as well as, e.g., the discovery by Archimedes that you can tell the volume of a solid by measuring how much water it displaces. In contrast, ideas on the role of specific neurotransmitters in understanding emotions seem to be changing every few years.

- Nonetheless, there is a chance here to test specific hypotheses about, e.g., neurotransmitter levels, or other aspects of brain function and their relationships to depression and anxiety. If someone wanted to rigorously test their hypotheses about the importance of changes in, e.g., dopamine levels or interactions between the amygdala and the prefrontal cortex, they could work with a skilled TEAM therapist and arrange to take whatever measures they wanted before and after therapy. If a person showed excellent recovery (based on describing their emotional state,) and these other measures changed according to current predictions, that would be interesting. If the emotional state changed and the other measures did not change, then we'd have to consider the possibility that the other measures do not mean what people think they mean.
- This ability to test specific hypotheses also applies to the use of such drugs as ketamine, ayahuasca, psilocybin and other agents being examined as part of treatments for depression. It is already clear that these drugs need to be given in the context of a structured therapeutic setting to increase the possibility of therapeutic utility. Moreover, the ability of some of these drugs to help people re-think their interpretations of the world seems very similar to what happens in TEAM Therapy. In fact, Dr. Burns has spoken on multiple podcasts about the frequency with which people who achieve rapid recovery experience sensations of bliss and enlightenment – sensations that often are associated with some of these drugs. Some TEAM therapists are also trained in ketamine therapy, for example, and it will be interesting to see how these two approaches might interact. It seems a rational hypothesis to suggest that, at a minimum, the use of TEAM Therapy approaches, including (and especially?) the DML might make these other therapies much more effective.

There's another approach to thinking about this problem that I think deserves some consideration, which has to do with something called the Number Needed to Treat (NNT). The NNT is the number of patients that you need to treat to see an improvement compared to the

effects of a placebo¹⁷. For example, let's say you're testing a drug and find that 50% of patients get benefit from an inert placebo and 60% of patients get benefit from the drug you're testing. To oversimplify somewhat, that would mean you need to treat 6 patients to see one real response (i.e., a response that you didn't get with a placebo). In this case, your NNT would be 6.

This is a very important issue in respect to evaluating drugs used for depression and anxiety, as medications do not outperform placebo by very much, if at all (as discussed in *Feeling Great*, Chapter 31).

There are shortcomings with using the NNT to evaluate efficacy because you have to further define the extent of recovery that you'll use in your calculations. What's the comparison between a 50% recovery and a full recovery? Do both count equally? How quickly does the response occur? How long does the response last?

If the difference between placebo and medication is not large, which appears to be the case for antidepressants and drugs used to treat anxiety, then the NNT will be large. While you can't really do a placebo study with something like TEAM therapy, you can compare it with other therapies. This is in fact what is going on when someone who has received no benefit from other types of therapy, including medications, is treated with TEAM therapy. This is the most difficult treatment situation imaginable, as these are people for whom nothing else has worked. Yet, TEAM therapists routinely treat people for whom other therapies did not work, and TEAM therapy is so successful in these circumstances that the NNT looks like it would be under 2, and potentially pretty close to 1 (which is a perfect score).

11. Does the success of TEAM therapy mean that depression and anxiety are “all in your head?”

We discussed on Podcast 275 the concern that people might misunderstand TEAM therapy, and the ability to obtain high-speed medication-free recovery as indicating that depression, anxiety and related problems are somehow not “real” problems. Nothing could be further than the truth. Depression and anxiety steal the joyful life of millions upon millions of people, and these are very serious issues.

The way that I think about this question, which I mentioned in the podcast, is that the medical profession mistreated stomach ulcers for a very long time. Ulcers were considered to be a psychological problem, or they were treated by dietary regimens of various sorts. The discovery that stomach ulcers could be caused by infection with the bacterium *H. pylori* ushered in a new era of rapid treatment with antibiotics. But that doesn't mean that ulcers don't really exist as a medical problem. Similarly, the fact that headaches respond to simple anti-pain medications (such as aspirin) does not mean headaches don't really exist.

From my current perspective, it seems that the most urgent questions may be to find out what proportion of people with depression and anxiety benefit from TEAM therapy and to develop ways of making this approach more widely available (such as the app being developed by Dr. Burns and his colleagues, as discussed in <https://feelinggood.com/2020/02/17/180-feeling-great-the-book-and-the-app/>). Then we can ask the question of how to better treat individuals who are not responsive to TEAM therapy. CBT is already considered to be the front-line

¹⁷ A brief overview on the meaning of the NNT can be found at <https://www.psychiatrist.com/jcp/assessment/research-methods-statistics/numbers-needed-treat-harm-nnt-nnh-statistics-tell/>

treatment for anxiety and depression¹⁸, and TEAM therapy looks like it is considerably more powerful than traditional CBT.

12. Are there any publications on analysis of TEAM therapy treatments in the scientific literature?

Dr. Burns and his colleagues are currently in the midst of analyzing large amounts of data on TEAM therapy. He has an outstanding record of past publications of CBT, and therapists working with TEAM therapy are enthusiastic about these analyses. Information will be provided at www.feelinggood.com as soon as it becomes available.

Additional resources

Feeling Great is the latest book by David Burns, and is a self-help book for people who want to use the techniques that are used by TEAM therapists. It can be used with a therapist, or by yourself. The same is true for other books by Dr. Burns, beginning with *Feeling Good*. These books are on such topics as anxiety (*When Panic Attacks*), social anxiety (*Intimate Connections*), self-esteem (*Ten Days to Self-Esteem*), relationships (*Feeling Good Together*). More information on all the books by Dr. Burns can be found at <https://feelinggood.com/books/>.

More information on TEAM therapy is available for free at Dr. Burns' website, www.feelinggood.com. You can find weekly podcasts on a wide range of topics, recordings of live treatment sessions with people facing many different kinds of challenges, tools for dealing with your own challenges, information on other books by Dr. Burns, and much else.

In addition, *The Antidepressant Book*, by Dr. Jacob Towery, is an excellent resource for teenagers interested in learning how to apply the skills of TEAM therapy to their own lives.

For myself, there are many researchers and therapists whose work I have found of great interest. As a starter, I recommend podcasts/lectures, articles and books by (in alphabetical order) Lisa Feldman Barrett, Aaron Beck, Judson Brewer, Albert Ellis, Andrew Huberman, Daniel Kahneman, Jennifer Kolari, George Lakoff, Joseph Ledoux, Gabor Maté, Michael Rousell, Robert Sapolsky and Julia Shaw.

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¹⁸ That recommendation does not address, however, the need for well-trained therapists, rapid availability of treatment, coverage by insurance and other issues that make it hard to use CBT as frequently as is recommended. Such difficulties increase the likelihood that people will be treated with drugs when they might be much more effectively treated with medication-free treatments.

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*.¹⁹

¹⁹Podcasts on TEAM therapy from the perspective of how the brain works are at <https://feelinggood.libsyn.com/episode-100-the-new-micro-neurosurgery-a-remarkable-interview-with-dr-mark-noble> and <https://feelinggood.libsyn.com/167-feeling-great-professor-mark-noble-on-team-cbt-and-the-brain>. The newest podcast is #275 in this series. The chapter in *Feeling Great* is Chapter 30.