

Dear Student,

The book, *Right Weight, Right Mind: The ITC Approach to Permanent Weight Loss*, by Robert Kegan and Lisa Laskow Lahey, provides readers with tools to help them bridge the gap between **what they want to do** and **what they can do** in transforming their relationship to food, diet and exercise and, most importantly, their selves.

The enclosed excerpts selected as required reading for this course are pulled directly from this forthcoming eBook.

In addition to the enclosed readings, the full book includes additional self-assessments, tools and compelling case studies to help us overcome our immunities to change and transform our mindset and lives.

You may learn more and find the full eBook on Amazon.com.

BEST OF LUCK WITH THE COURSE!

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Excerpt 1: From the Introduction of *Right Weight, Right Mind*

We have found that people are prepared to work hard to lose weight (or to keep it off). But people are not necessarily prepared to “work right.” They know how to follow a diet regimen or an exercise regimen (and it would be fine to do either or both while you are working your way through this book). But, as we said at the start, this is not a diet book. No diet has a demonstrated track record of delivering *lasting* change—and it is actually not a criticism of any diet to say so.

A diet is a perfect example of a “technical fix.” It goes directly at changing the behavior alone, and not the underlying challenge. To illustrate: Dr. Ronald Heifetz distinguishes between “technical” and “adaptive” challenges. The first can be met by new information, and changes to our behavioral routines or skill-sets alone. Adaptive challenges are different. They often require technical inputs as part of the solution (we need the information that teaches us what a “proper portion” is; we need some healthy, sensible diet that will spell out a new behavioral routine), but technical inputs alone will not enable us to meet any adaptive challenge because at their core, adaptive challenges require changes not just in our skill-sets but in our *mind-sets*. They require not just information but *transformation*.

For a lucky and tiny minority of us, losing weight and keeping it off may be a technical challenge. These are the people who decide to change the way they eat, lose the weight once, and never regain it. (Don’t you love those people?) For the other 99% of us, losing weight is an adaptive challenge. **We will have to get the mind right to get the**

weight right. Heifetz says our most common error is to try to meet adaptive challenges through technical means. For 99% of us, expecting dieting alone to get us to our goal is a form of that most common error.

The bridge we will help you build in the pages ahead will ensure that you address your adaptive challenge *with adaptive means*. That is what the immunity-to-change approach is meant to do. And the cynical publisher we quoted right at the beginning of this book is wrong: this approach is really not so hard once you understand what you are trying to do, and what to expect.

We know we just ended with uplifting introductory remarks. But if we were betting folks, we'd wager that most of you will approach this book in similar ways to how you've previously tried to lose weight or become healthier—by using a “Diet Model.” In this scenario, you've got the book in front of you and you are excited about the promise of *this* finally being the answer. You'll want to speed read through it so that you can find the gold nuggets and start following them immediately! And you hope to see the changes immediately! Ok, maybe that's an exaggeration, but you get our point: to experience the benefits of this different approach to change, you need to take a different approach to it! We know, from experience, that the same work you are currently doing preventing your change can be turned to furthering it. Nothing extra is required. But it does take a proper stance.

It is true we are not going to move immediately toward changing your behavior or losing any weight in the first week. That is the appealing seduction of the technical approach. We are not going to put you on a path where you make linear incremental progress toward a goal of losing weight. We are first going to put you on a path where you make steady progress toward better understanding your own mind, and getting it right, so

that you lose weight not temporarily but permanently; so that you change not just your weight but your whole relationship to food and eating. If you find yourself feeling impatient about the pace of things in the pages ahead, it is worth reminding yourself that you are embarking on a different course. If you envisioned taking a train from point to point it may feel like a waste of time that you are just sitting at the gate while the vehicle is being de-iced. The engine isn't running and it doesn't seem like you are getting anywhere. But when you finally get lift-off and you see you are not traveling by train at all, you will be glad you spent time de-icing the wings. You will be soaring at a different altitude, one that not only enables you to lose weight or keep it off, but one that reduces your suffering, one that brings you a new freedom.

PART ONE: MAKING YOUR MAP

Well, we have kept you in suspense for long enough, and as promised we are now going to coach you to create your personal immunity-to-change (ITC) map. If you have been intrigued by the success stories that describe what others learned about themselves and the ways that they were undermining their own weight loss goals, you may already be anticipating the way it will feel to discover something equally important about yourself. It's worth remembering: making these discoveries was *the* critical first step toward accomplishing their goals. It will be yours too!

We'll offer lots of examples of how other people – who were also trying to finally lose weight for good – came to their own answers. We'll suggest lots of things you can do that will help you arrive at the best answers for yourself.

Ready to get started? Let's go!

Excerpt 2: from Chapter 5, ‘Practicing Self-Observation’, *Right Weight, Right Mind*

I'm getting better at handling stress. When I have time to think, I ask "what's the worst that could happen?" Probably nothing. So I let it go. Before I would just assume that something really bad was going to happen. When I think about it, I see it's not a big deal. You know... say my kids go to the dentist a week late. So what? Before, as soon as something would come up, I would assume it's not good. I realize now when I'm doing that. I can slow that process down. I can cut it off before I get to that point. A friend talked me into doing this program, and I'm glad. Because it actually has changed my life. I have lost weight, and my health improved. My stress reduction has really improved. Now, I've just gotten better at seeing these things coming and talking to myself. Instead of trying to over-prepare and control everything, it feels like it will be ok. It is what it is. If it is something I can do something about, I will. When I handle stress better, I cut back. I am not overwhelmed. I can take care of myself, eat better, feel better.

— Jeri

One of the most important habits for you to practice throughout the entire ITC process is self-observation. What does it mean to be observing yourself? It means that you are watching not only your behaviors, but the ways you think and feel about food, exercise, and weight loss. In these moments, part of you is doing the kinds of things you do every day (overeating at dinner, making an excuse not to go to the Zumba class you enrolled in, buying unhealthy food when you go the supermarket), and another part of you is sort of standing aside and watching yourself. The typical ways we go about our day-to-day lives may be automatic, unconsciously mechanical – we have solidified our routines. The goal of self-observation is to become more conscious of your typical and routine reactions, paying more attention to what you do, why, and with what results.

But, as you will see, we have a very specific approach to “self-observation.” It is not just about trying to observe everything, or even everything related to food or weight. We are going to train you to become better observers of your Big Assumptions. If it helps, think of these exercises as collecting information that you will need to interpret and report to someone to help someone make sense of your Big Assumptions.

The Self-Observation Exercises

You may have already done some self-observation when you were filling out your ITC map. For example, in order to identify the types of behaviors that undermine your weight loss goals (the behaviors you listed in Column 2), you may have been paying more attention to the things you actually do and don't do. As you observed yourself, you may have noticed the specific things that are your trouble spots (such as eating at night or eating more when you visit your mom). You may have become more aware of the things you don't do that you should (such as taking the stairs instead of the elevator at work). And, of equal importance, you may have noticed the ways that you think or talk to yourself that get in your way (such as when you criticize yourself by calling yourself a “slob” or a “failure”).

You may also have been observing yourself to identify the fears, worries, hidden commitments, and Big Assumptions you listed in your map. For example, on Wednesday morning, you may have noticed that you were eating more than you had been eating earlier in the week and recognized that the donuts and bagels that are provided at every Wednesday morning meeting are hard for you to resist. Remembering the ITC map you had been working on, you could then ask yourself, “So, what if I were to get up and move

that platter of food to the side of the room, so that the donuts and bagels are not on the table in front of us all? What uneasiness arises for me as I sit here and imagine doing that right now?" The ability to observe yourself can lead to some pretty amazing insights as you come to see yourself more clearly and understand your feelings and ideas more deeply.

If you haven't been engaging in this kind of self-observation up to now, we urge you to start making it a habit. And now that you have read our description of how observations can be so helpful, you may begin to notice additional entries you can make to Columns 2, 3, and 4 of your own ITC map. (Remember what we said in the last chapter about "switching back" in order to forge ahead?)

Now we want to offer some explicit directions about how to observe yourself as you begin to overturn your immunities. To help focus your observations, it helps to know what you will be looking for. That's why we recommend that you choose just one Big Assumption as the focus for now. Sometimes you'll have a few Big Assumptions that are very intertwined with each other so that focusing on one almost inevitably means that you'll be including the others as well. That's fine. Other times the Big Assumptions may be more diverse and unrelated. If that's the case for you, look back at your map and see if you can find one that feels like it is holding you back the most. If you were really able to change one of your Big Assumptions, which one seems like it would make the most difference in overturning your immunity?

Question 1: Look at your list of Big Assumptions. Are there one or two that feel like they are the most powerful for you? Choose the one you want to focus on and enter it into your Change Journal.

Take the next week and try to notice all of the situations you face where your Big Assumption is at work, shaping how you think and feel as well as what you do. Again, we recommend that you *not* try to change any of your behaviors or your thinking, tempting though that may be. For now we hope you are still just observing. You might want to plan ahead and identify the types of situations that you're likely to face in the next week or two where your BA might be likely to be in play. For example, if you know you are going to be visiting your in-laws, where food is often plentiful and where you usually eat more than you intend, make a point to observe yourself in that setting. If you weigh yourself regularly on Monday mornings, pay special attention to whether and how your Big Assumption may be relevant to how you think and feel when you stand on the scale.

So what form should these observations take? What should you actually do? Ask yourself the following question:

Question 2: How is my Big Assumption getting in my way in these situations? In other words, can you notice when your Big Assumption has led you to do things like those you listed in Column 2 of your ITC map that undermine your column 1 goal?

Try to identify at least four or five such situations and describe each one in the left hand column of the following chart in your Change Journal. Write what happened as well as what you were thinking and feeling.

Describe the situations when your Big Assumption got in the way of your weight loss goals (including your thoughts & feelings).	When it got in your way, what specific problems or negative results did your Big Assumption cause you?
Self-Observation #1:	Self-Observation #1:
Self-Observation #2:	Self-Observation #2:
Self-Observation #3:	Self-Observation #3:
Self-Observation #4:	Self-Observation #4:
Self-Observation #5:	Self-Observation #5:

After you have collected a few observations, read over your description of each situation you wrote about in the left hand column. For each situation, ask yourself these questions:

When you think about what happened, do you see any ways that your Big Assumption was not helping you but instead actually caused you problems? In what ways did your Big Assumption lead to something bad or prevent something good from happening? Describe these in the right hand column.

Ron looked at his list of Big Assumptions:

- I assume my friends will tease me if I change the way I eat.
- I assume I can't tell my friends to cut it out.
- I assume that if I did, they'll think I'm weird.
- I assume how I eat with them matters a lot to my friends.
- I assume that if I am the weird one, I am not fitting in, I am not one of the guys.
- I assume (no matter what my friends do) that I'll feel less a part of things and that I am missing out on the full experience if I am not eating like my friends are eating.

Ron realized that when he made his map, he had focused mostly on one group of his close friends. While he also saw that the assumptions he had listed were closely related, he decided to observe for the last assumption ("no matter what my friends do I'll feel less a part of things and that I am missing out on the full experience if I am not eating like my friends are eating"). As soon as he began to observe himself, he realized that these same assumptions applied not only to his close group of friends. They applied to many other relationships such as those he had with work colleagues. They even applied to some acquaintances such as restaurant employees! In the course of one week, Ron observed

three key situations when his Big Assumptions guided his choices about when and how much to eat and drink.

<p>Describe the situations where your Big Assumption got in the way of your weight loss goals (including your thoughts & feelings).</p>	<p>When it got in your way, what specific problems or negative results did your Big Assumption cause you?</p>
<p>Self-Observation #1: We go out to eat as a family – usually go to the same restaurant. The owners know me. They know what I like and really enjoy suggesting a new appetizer we should try or new deal on dessert. I feel like they want me to eat a lot too. It’s like I’m the guy who likes their food. It makes me feel good that they know me, that they make me feel a part of things.</p>	<p>Self-Observation #1: On one hand, I like being the guy who likes their food and is known there. I don’t like that I can’t eat whatever I want anymore. But that’s true now, and so now I’m the fat guy who eats too much. That’s not so good.</p>
<p>Self-Observation #2: Went out with the guys last night. I ate and drank whatever I wanted – more than they did. I felt I was a part of things and that felt good.</p>	<p>Self-Observation #2: I woke up with a hangover and felt tired all day. I don’t know why I have to eat and drink the most of anybody.</p>
<p>Self-Observation #3: Birthday party at work for Janice. She brought in a fabulous homemade cake. My favorite kind so I ate two pieces. Everybody knows what kind of cake I like, what kind of food I like. It’s not like it was my birthday. So then I ate the cake, and I talked about how great it was. I feel like people want me to do that, like I’d disappoint them if I didn’t make a fuss. I felt like I was in the “in” crowd.</p>	<p>Self-Observation #3: It kind of makes me mad-- it’s not like they are going to get fatter, so I have to eat the cake. I mean, the cake is good, but sometimes I feel like they don’t even give me a choice.</p>

MIRIAM'S OBSERVATIONS

Miriam looked at the list of her Big Assumptions and decided the one that was holding her back the most was:

- I assume if I don't criticize myself really harshly, I'll slack off too much.

She then spent two weeks observing herself to see when this Big Assumption was shaping her decisions and the ways she was interpreting her experiences. Miriam identified several situations (#1-#4). Because she was trying to learn from observing her Column 2 behaviors, she also discovered lots of occasions when she overate that had nothing to do with that Big Assumption. She decided she would enter those into her journal to see if she could figure out what was going on. What she discovered was a new assumption: "I assume that every time I feel stressed or emotional, I must eat to make myself feel better" (#1, #4 - #6).

Describe the situations where your Big Assumption got in the way of your weight loss goals (including your thoughts & feelings).	When it got in your way, what specific problems or negative results did your Big Assumption cause you?
Self-Observation #1: I had several stressful days and have been making some bad food choices. Haven't exercised at all. I made and ate cookies yesterday. I criticized myself for all of it.	Self-Observation #1: I gained a few pounds. I felt crappy – physically and mentally. I beat myself up.
Self-Observation #2: I was having lunch at a Mexican restaurant with my best friend Ellen. They gave us chips and salsa, which we weren't really eating. After we were already done with our meal, we were still talking, and I started to eat the chips. I don't know why I was doing it. I just ate one but then kept eating more and more – very quickly – until suddenly the	Self-Observation #2: Once I start eating, there's a part of me that knows I'm doing something stupid and sabotaging my plans. Sometimes I feel like I want to hurt myself. Maybe I'm not good enough to be thin and healthy, like I don't deserve it. I criticize my lack of self-discipline. But somehow I think criticizing myself will help me the next time. Weird.

<p>basket was empty!! I ate ALL of them!!! I felt horrible, physically and emotionally.</p>	
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<p>Self-Observation #3: Several times, I noticed that I was feeling tired at work and wanted to eat. There are many work-related things which I have on my plate to finish. I am feeling out of control. My stomach has been hurting. I tried not to eat junk, but I was so tired, that I cannot convince myself. Then we had a meeting where I was given more work without any acknowledgement of how much I have already been doing. I could imagine Paul complaining to me again, and I felt hopeless and stressed and lonely. After the meeting, I began eating. I felt no energy to make good choices. I felt no desire to make good choices.</p>	<p>Self-Observation #3: My mood leads me to eat. I eat to feel better, and I eat to celebrate feeling happy. Eating doesn't really help my mood – in fact, I just felt more stressed and more out of control and thinking that I am such an idiot to be stuck in this pattern. I used the self-criticism to get me going though. Once I dug into my work, I started to feel better until it was time to go home, and I hadn't finished enough of it, and I knew I couldn't stay late. Then I felt like crap again.</p>
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<p>Self-Observation #4: In yoga class, there are mirrors all around. I started out relaxed, and then I noticed one of my fat rolls, and from there it was downhill. I became fixated on all the things I don't like about my body, all the things that are not the way I want them to be. I felt like quitting right there and then. But then I tried to look at the floor instead of the mirror. I tried not to look up until class was over so I could put on my baggy sweats. As soon as I was out, I headed straight for my chocolate stash.</p>	<p>Self-Observation #4: I have to work really hard to keep from criticizing myself. I could do it for a while, but then I caved in and ate a ton of chocolate. So I had new reason to be self-critical. It's exhausting whether I criticize myself or keep from criticizing myself!!</p>
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<p>Self-Observation #5: Paul (my husband) told me he thinks the extra hours I'm putting in at work are negatively impacting the kids. As soon as he said this, I started thinking he's right to criticize me. I felt blindsided. And I</p>	<p>Self-Observation #5: I feel guilty. I love my job and love that I'm being given extra responsibility there. But then I feel like I'm being a bad wife and mom. I immediately start to think Paul is right to criticize me. I feel like he sees</p>
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<p>proceeded to eat basically the entire big bag of M & Ms.</p>	<p>everything that is wrong with me. I hate this feeling and want to eat as a way to make that bad feeling go away.</p>
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<p>Self-Observation #6: I had a disagreement with my daughter, and I felt like she was judging me. I got very defensive and felt like I had to justify myself and pick at her, show her how she was all to blame. I felt terrible, like I couldn't stand to feel so terrible, couldn't stand to be in my body, to be myself and went right to the kitchen.</p> <p>I grabbed some ice cream from the freezer and a spoon, and just started shoveling it into my mouth. But as I was eating, I thought to myself, "This ice cream is so cold, my tongue has gone numb. I can't even taste what I'm eating." I also thought about how disgusted I would feel later and how poorly I would sleep. But still I kept eating because I was just so angry at myself.</p> <p>Then I could hear Paul coming down the hall towards the kitchen. In a complete panic, I dropped the spoon into the ice cream container and shoved it all back into the freezer. I dreaded him seeing me so out of control.</p>	<p>Self-Observation #6: I felt like a terrible mom and so guilty for yelling at her. Once again, I feel bad and then overeat. Then I feel bad about eating. Ugh. It is so hard to see this about myself – how insecure and silly I am. I wish I didn't have to do this. It's a lot of effort. It's more than I can cope with. I'm not doing as well as I was when I first started. I get really consumed by this and I can't turn it off. Sometimes, I'm overwhelmed and I can't take it. I do feel like there's something I am dealing with emotionally but not necessarily consciously. I feel like my life has been stalled for so long. I'm stuck in a rut ...</p> <p>My upset about the disagreement, about feeling guilty, about feeling like a bad mom, about overeating, and that sugar all meant that I didn't sleep well at all that night. That next morning, I felt more exhausted than when I went to bed.</p> <p>When I heard Paul coming, I could barely contain my panic because I felt so terrified and ashamed. I hadn't even had a chance to beat myself up about it; how could I face him?</p>
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So what is the point of this sometimes painful or scary exercise? Not to help you immediately accomplish your goal, obviously. The point is that you are beginning to build muscles that will help you to have *a new relationship* to your assumptions, rather than to be *unmindfully run by* them. Remember your barking dog? The one who automatically thinks

there really is some danger at the door? We said the first step to putting yourself in charge (vs. your dog) is noticing that the barking creates an opportunity to observe and question, rather than immediately to go into action. Your Big Assumption is your barking dog.

Excerpt 3: From Chapter 6, “POP! Developing your Picture of Progress”, *Right Weight, Right Mind*

At first I thought that success would mean that I wouldn't be embarrassed to wear fitted clothes. I thought it would mean others would compliment me on my figure. That was the first stage, and I lost 10-12 kilos. But the more I did this work, the more I learned, and I began to add more more things to my map. You see, I began to realize that I didn't want to be doing all this work for anybody else. Just myself. I think this took a while to dawn on me and become part of an overall way I was seeing everything differently. Success became about being who I wanted to be – a healthy human in a healthy body. I lost another 12 kilos.

- Elaine

Albert Einstein had a great deal of wisdom to share about what it takes to think deeply, solve problems, and discover new territory. We've already passed along his good advice about the importance of really understanding a problem before you try to solve it. Now we're going to borrow another of his commonly-quoted observations. Einstein believed that if you really want to achieve something amazing, you have to do some mental work in advance – you need to fully picture what you want to happen, and you have to begin believing that you can pull it all off. And if you can do that mental work, you will be able to reach your goal. In other words, “Imagination is everything. It is the preview of life's coming attractions.”

More than half a century after Einstein's death, brain science has proven many of his speculations true. Today, top performers in all kinds of professions such as sports and the arts also know that creating a vivid picture of what it will be like for them to perform at the top of their abilities, and to succeed in their goals, helps them make that dream a reality.

They begin to make a new future more real for themselves right now. They begin to develop not only a belief that they can reach their goals, but also to imagine how they will be thinking, acting, and feeling in order to reach their goals.

DOING, THINKING, FEELING: IMAGINE YOUR PICTURE OF PROGRESS

Creating a Picture of Progress gives you a structured way to imagine what it will be like to reach your weight loss goals by overturning your Big Assumptions. It helps you imagine your new behavior, yes, but also your new thinking and feeling. We are helping you here to create optimistic expectations for what you will be able to achieve. This type of visualization has been shown to help individuals set and reach higher goals of all sorts, helping them also to predict and overcome the obstacles they will face along the way. What you are trying to do is imagine the specific ways you will be changed and will be making changes. Imagine yourself making these changes through persistent, vigilant, and deliberate work.

Creating this picture will show you how the energy you invest in this change process will pay off, and how the changes are likely to show up. If it helps, imagine you are presenting this document as an official report to the research organization that hired you, as a way to show how you and people like you will deal with your Big Assumptions if you find out that these Big Assumptions are actually inaccurate.

The template for your POP is just as straightforward as the one for your ITC.

Column 1 Commitment and Big Assumptions	First Noticeable Steps Forward	Significant Progress	Full Success
_____→	_____→	_____→	_____→

Write your Column 1 Commitment here, as well as the Big Assumptions that you are focusing on.	Imagine that you have begun to take <i>First Steps</i> toward overturning your immunities and reaching your Column 1 weight loss goal by altering your Big Assumptions. What are you doing differently? Thinking differently? How are you feeling differently?	Imagine that you have made Significant Progress in overturning your immunities and toward reaching your Column 1 weight loss goal by altering your Big Assumptions. What are you doing differently? Thinking differently? How are you feeling differently?	Imagine that you have been completely successful in overturning your immunities and reached your Column 1 weight loss goal by altering your Big Assumptions. What are you doing differently? Thinking differently? How are you feeling differently?
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A thoughtfully completed POP can lead you to insights equally powerful as those that arose in your ITC map. In the following pages, we'll walk you through how to complete a POP step-by-step. But to give you an idea of what you are working toward, we want to show you a completed one. Here is what Ron's completed POP looked like:

Column 1 Commitment and Big Assumptions	First Noticeable Step Forward	Significant Progress	Full Success
I'm committed to getting better at eating healthier when I'm around other people – at the bar, at parties, at meetings where there is food. I assume that I am	I think about my reasons for eating or drinking something. I think about if I want that thing really or am just doing it because people want me to. I look at people who don't eat or drink as	I tell my friends that I'm trying to lose weight and get healthier. I start to say "no thank you" sometimes to food. I eat more fruit and vegetables. I find out	I eat what I want to eat, not because I think other people want me to eat something or eat more of something. I feel good about making my own choices. I can still feel like a part of things and

<p>making other people happy when I eat.</p> <p>I assume that my only choices are to either make people happy by overeating, or make them unhappy by eating less or eating healthier.</p>	<p>much as I do to see how they can say “no thank you” without making people mad.</p> <p>I make plans to do things with my friends that don’t mean we have to eat or drink together. I pay attention to enjoying this different kind of time spent with them.</p> <p>I don’t like it when I see how much has to change, how far I have to go, but I try to remember that I am further than I was before and Rome wasn’t built in a day. Stay the course. Then I feel recharged.</p>	<p>which ones I like and take pleasure in eating them.</p> <p>I get up early and go running before work.</p> <p>I go to the bar less often but don’t mind because I’m doing other things I like by myself or with my friends.</p> <p>I feel good that I am actually doing things that I have wanted to do for a while.</p> <p>I tell myself that what I eat and drink is up to me. If I eat well, good on me. If I overeat or eat junk, there is only myself to blame. You reap what you sow.</p>	<p>having a full experience even when I eat less than my friends.</p> <p>I don’t talk about food all the time. I feel excited about new things in my life.</p> <p>I feel like I am in control. I feel like I can make my own choices.</p> <p>I lose weight and exercise regularly. I feel better – healthier and more energetic.</p> <p>I am not worried that people like me just because of what I eat or don’t eat. They just like me.</p>
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WHAT A PICTURE OF PROGRESS IS **NOT**

A Picture of Progress is *not* intended to be a *plan* for change. It doesn’t give you “marching orders” or tell you *how* this progress is going to unfold. Once you create it, you are not then supposed to “execute” it. All this would pull you back into the more linear, incremental, technical approach to change. We have just one approach for creating change, and that is all about getting your mind right. The POP helps with this not by consciously and deliberately providing you a road map to follow, but by unconsciously helping you begin to create new images and neural pathways for the changes to come. What you are *not*

trying to do is daydream and create some lovely fantasy world in which you are thin and beautiful, or pretend that the type of changes you hope to make will happen magically or overnight. This type of daydreaming may lead you to mentally enjoy some idealized future world, but it actually has been shown to *decrease* motivation and investment in what is involved in making those changes. It *does not* help people prepare for upcoming obstacles or setbacks.

You are also not focusing on (or even including) any hoped for changes that are not within your own control. For example, you should not imagine that your own weight loss will inspire others to lose weight. You should not make plans for how losing weight will suddenly make your boss nicer to you. Someone else might get inspired to change their behavior, but ultimately, that is up to them and is not something you can personally engineer. Similarly, you should not imagine that losing weight will change circumstances around you. We are sorry to be the ones to tell you this, but losing weight will not guarantee you extra money to buy a new, sexy wardrobe. It will not make you less bald. It will not prevent you from getting older. Yeah, we know that's hard to accept.

Our point is that we want you to dream *but not* create an unattainable romantic fantasy. We want you to imagine what could really happen for you — *not* lose all contact with reality. Specifically, we want you to try and sketch out a picture of what life can be like if you are able to make progress on your weight loss goals by overturning your Big Assumptions. With those parameters in mind, feel free to close your eyes and build an image.

NOTE: Some people find this exercise extraordinarily difficult to do because of their Big Assumptions. If I have a Big Assumption “I assume that I will fail again like I have

always done before,” trying to visualize success will be particularly hard. Give it your best shot! If you are working with a partner, check in with him or her. It can be much easier for someone other than ourselves to imagine what it could feel like to no longer be captive of our personal Big Assumptions. But if you get stuck here and your ITC progress begins to stall, better to skip this exercise (at least for now) and move on to the next chapter. As we have said, some exercises can be done in any order, and people have experienced success with our approach even if they don’t necessarily do all of the exercises we recommend.

EXERCISE 1: FULL SUCCESS

In this exercise you will fill out the left-most and right-most columns of your POP chart in your Change Journal, leaving the intermediate columns for later. So the first step is to copy out your original ITC Column 1 commitments and your BAs in the left-most column of your POP.

The first picture we’d like you to develop is your vision of what it would be like to have complete, full success in reaching your Column 1 goal. When we first ask people to visualize their own success, they usually offer some specific details about their goals: they hope to wear a smaller dress size, reach a particular number on the scale, describe how they would like to look in a bathing suit, recite measurable health improvements (e.g., cholesterol numbers, blood pressure, etc.), and/or describe increased physical ability (distance/speed at which they can walk or run, etc.). These concrete details are common to what people are most likely to imagine and we encourage you to pay attention to these aspects of your goals. But, as you may have guessed, we’re going to ask you to focus your

imagination a bit differently. We want you to imagine what it would be like to change your Big Assumptions.

If you were to alter your Big Assumptions, what kinds of amazing things might you be able to do? What might you be able to believe? How might you think differently than you currently do? What might it feel like to be released from your Big Assumptions? How might it physically feel different to have a healthier, fitter, smaller body? Review your ITC map to remind yourself of your immune system and your Big Assumptions, focusing particularly on the one that feels most powerful to you.

QUESTION 1: Imagine that you have been completely successful in overturning your immunities and reached your Column 1 weight loss goal *by altering your Big Assumptions*. Write your answers to the following questions in the “Full Success” section of the Continuum of Progress exercise in your Change Journal.

- Imagine what your new **behaviors** are. What are you now able to do? What old behaviors are you able to cut out? (For ideas of what might change, look back at Column 2 of your ITC map.) How do you think you will be able to start doing these things (and stop doing others)?
- Imagine how you might **think** differently when you have fully succeeded. What do you now believe? What are you thinking about? How does the way that you think support the new ways you are able to behave?
- What does it **feel** like to have completely reached your weight loss goals? What does it feel like to have changed your Big Assumptions? What does it feel like to

be living in a body that you have been able to transform? What does it feel like to be behaving and thinking in new ways?

Give yourself lots of time to generate a detailed picture in your mind and on the page.

When you feel like you have a full description, enter these specific ideas into the column that is **farthest to the right**. (We'll come back to the *First Steps Forward* column and the *Significant Progress* columns after completing *Full Success*. Trust us. It's easier this way.)

RON – FULL SUCCESS

Here is what Ron came up with when he imagined what he'd be *doing* differently, how he'd be *feeling* differently, and how he'd be *thinking* differently:

- I eat what I want to eat, not because I think other people want me to eat something or eat more of something. I feel good about making my own choices.
- I can still feel like a part of things and have a full experience even when I eat less than my friends.
- I don't talk about food all the time. I feel excited about new things in my life.
- I feel like I am in control. I feel like I can make my own choices.
- I lose weight and exercise regularly. I feel better – healthier and more energetic.
- I am not worried that people like me just because of what I eat or don't eat. They just like *me*.

EXERCISE 2: FIRST STEPS FORWARD

Now that you have a clear idea of what Full Success might be like for you, it should be easier to imagine the journey from here to there. So we recommend that you imagine what the journey will look like when it has just begun. What might it look like to take some first steps in this journey? What would you be doing differently? How would you be feeling and thinking differently? These steps will take you in the direction of Full Success, but they are first steps, and they will likely involve a bit of work and some new learning, as well as exciting developments that mean you are no longer at the starting gate but are measurably on your way. Think about these entries as things that you feel like you realistically can and want to do right now. We often recommend that people think about adding things like these:

- I tell someone else about what I am working on.
- I find others who have succeeded in working through similar immunities issues by doing something like reading books on this topic, talking to others I know, or joining a support group.
- I pay attention to the times when I do things I listed in Column 2 of my ITC map.

We offer those ideas to start you thinking, but we want you to come up with a picture that makes sense for your own personal journey. What kinds of new behaviors might be important as you start out? What might you learn first about yourself and your BAs? What will it feel like to begin to see real progress and also see what still lies ahead? What kinds of things would you be able to do now that move you out of the starting gate?

QUESTION 2: Imagine that you have begun to take *First Steps* toward overturning your immunities and reaching your Column 1 weight loss goal by *altering your Big Assumptions*. Write your answers to the next set of questions in the “First Steps” section of the Continuum of Progress exercise, second from the left, in your Change Journal.

- What are your ***behaviors*** at this point in the process? What have you been trying to do (and trying not to do)? What are you doing that helps you make these changes to your behavior?
- How are you learning to ***think*** differently? Have you begun to question or challenge your Big Assumptions? What are you thinking about? How do you practice thinking that can support the behaviors you are starting to practice?
- What does it ***feel*** like to be taking First Steps Forward, to be behaving and thinking in new ways? What does it feel like to set off on a path to learn about and change your Big Assumptions?

RON 'S FIRST STEPS FORWARD

Ron struggled a little to come up with ideas for this stage of his journey. But we emphasized to him it isn't necessary to get everything perfect. The benefits accrue from taking a best shot at imagining the start, and then continuing to a next column. He could come back to this: “what comes up for now?” He relaxed, and eventually came up with Doing, Thinking, and Feeling entries.

- I think about my reasons for eating or drinking something. I think about if I really want that thing or am just doing it because people want me to.
- I look at people who don't eat or drink as much as I do to see how they can say "no thank you" without making people mad.
- I make plans to do things with my friends that don't mean we have to eat or drink together. I pay attention to enjoying this different kind of time spent with them.
- I don't like it when I see how much has to change, how far I have to go, but I try to remember that I am further than I was before and Rome wasn't built in a day. Stay the course. Then I feel recharged

EXERCISE 3: SIGNIFICANT PROGRESS

By now you are probably getting the hang of this exercise, and you can most likely tackle the last "imagining" without much further prompting from us. You know what just getting started might look and feel like. You know what complete success might look like and feel like. What will this place in the middle (Significant Progress) be like for you?

QUESTION 3: Imagine that you have made Significant Progress in overturning your immunities and toward reaching your Column 1 weight loss goal *by altering your Big Assumptions*. You're not just starting, but you're not fully there yet either. Write your answers in the "Significant Progress" section of the Continuum of Progress exercise in your Change Journal.

- What **behaviors** have you adopted at this point in the process? What are you now able to do? What old behaviors are you able to cut out? What are you doing that helps you make these changes to your behavior?
- What kind of progress have you made in **thinking** differently? What do you now believe? What are you thinking about? How do you practice thinking that can support the new ways you are able to behave?
- What does it **feel** like to be making Significant Progress (but not yet reaching Full Success)? How might you have changed your Big Assumptions? How do you keep those Big Assumptions from feeling like they are 100% true? What does it feel like to be behaving and thinking in new ways? What does it feel like to be transforming your body?

RON – SIGNIFICANT PROGRESS

Ron looked back at his improvement goal, his first steps, and his picture of full success. It was starting to seem almost logical to imagine the intermediate steps that would bring him to his goal. He wrote down how it would look when he had made “Significant Progress.”

- I tell my friends that I’m trying to lose weight and get healthier.
- I start to say “no thank you” sometimes to food.
- I eat more fruit and vegetables. I find out which ones I like and take pleasure in eating them.
- I get up early and go running before work.

- I go to the bar less often but don't mind because I'm doing other things I like by myself or with my friends.

Then he asked himself how he would be *feeling* differently and *thinking* differently in order to be doing these things. He added:

- I feel good that I am actually doing things that I have wanted to do for a while.
- I tell myself that what I eat and drink is up to me. If I eat well, good on me. And I enjoy what I eat. If I overeat or eat junk, there is only myself to blame. You reap what you sow.
- I don't particularly feel I am missing out, and I don't feel like my buddies think I'm a weirdo.

Excerpt 4: From Chapter 7, “Charting the Biography of your Big Assumption”, *Right Weight, Right Mind*

I knew my Big Assumptions were connected to my past. I have very addictive behavior that shows up in how I eat. But they have shown up in every other area of my life too. I can be very needy, very co-dependent. I am always asking for attention. I knew I needed to figure out where these things came from. I began to find out why I always felt unhappy with my work, my marriage and my family. ITC helped me recognize what I was doing and generate new distance from my assumptions. I have a new relationship to food and a new understanding of my relationships.

— Ulrich

We’re going to ask you to jump into this exercise without providing you with much upfront explanation. Just play with us here, and you’ll see where this exercise gets you after you do it. We think that when people jump into the exercise without thinking much about what they are trying to uncover or learn, their experience tends to be more powerful. This happens because they uncover things they never would have unearthed if they hadn’t approached the exercise with a very open mind, free of expectation. Ready to try it yourself?

QUESTION 1: If you cast back in memory over the first 15 or 16 years of your life, and are asked to capture a handful of negatively-tinged experiences, what comes to mind? See if you can identify five or six memories that were disturbing, embarrassing, upsetting, infuriating, or scary, for example. They don’t have to be events that were momentous; it may even be better if they are not. They may now even seem like tiny, mundane, common early-life experiences, the sorts of things that now seem like the normal bumps and bruises

of growing up. Nonetheless, they stick with you because these are what came to mind.

Record these events in Column 1 of the Biography table found in your Change Journal.

Events (the headlines)	What I was thinking (at that time)	What I was feeling (at that time)	Lessons learned/ conclusions drawn (at that time)

Once you have listed the headlines of these events “vertically” in Column 1, start with the first headline and work “horizontally” across Columns 2-4. Column 4 is asking what you think you (as a child who was 4 or 7 or 13) concluded at the time about yourself or “the world,” adults, or your parents, in particular. What lessons did you take away then from those experiences? Then work across the columns for each of your memories until the whole table is filled in.

When your biography chart is complete, look at the collection of lessons learned in Column 4 to see if there are any connections you can make between them and your Big Assumptions in Column 4 from your immunity map.

Question 2: What connections, if any, do you make between the fourth column on your Biography Chart and the fourth column on your ITC map? Write your answers in the space provided after the Biography table in your Change Journal. If you want to see an example first, read on to see Ron’s biography table and his further reflections.

RON’S BIOGRAPHY

Events (the headlines)	What I was thinking (at that time)	What I was feeling (at that time)	Lessons learned/ conclusions drawn (at that time)
Big family meals as a kid – every Sunday, every holiday. Everybody ate a lot, and you were always told to eat more.	If I eat, people like that.	If I eat, people seem happy. That’s good. I feel connected to my family.	People want you to eat. They want you to like their food and to eat a lot of it. That makes them feel good, and then they like to tell everybody how much you ate. Like they were proud of me. I learned to feel good at making them happy this way.
In high school, all my friends were on the football team. One guy stopped playing because he wasn’t really big enough or good enough to play much. After he quit, we didn’t really hang out with him so much anymore.	He isn’t like us. It is ok to be different but then you might not have the same friends.	Glad I’m still on the team.	People really like you to be like them. Your friends are your friends because you have things in common.

<p>In my 20s, I started to drink a lot. I ate a lot too, but I never gained weight. My girlfriend always said how lucky I was. She would always say, "I wish I could eat like that, but I'd look like a whale."</p>	<p>Guys are lucky – we can eat whatever we want usually.</p>	<p>I like to do what I want without having to worry about being fat. She always seemed kind of sad and annoyed not to eat what she wanted. I always told her to eat more, but I admit I didn't really want her to be fat. I don't think I really believed that would happen to me too. I wish I still could be like that.</p>	<p>Some people are lucky. Guys are lucky because they don't have to diet. Dieting is not fun and other people will feel sorry for you.</p>
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When Ron looked at the situations in his Biography and considered them all together, he quickly saw the connection between his lessons learned and two of his Big Assumptions—that he'll feel less a part of things if he isn't eating like his friends, and that he makes other people happy when he eats. His big insight from reflecting on these long ago events is how much he tied making people happy by eating with feeling included and a part of things. He also felt a twinge of remorse. "I liked being that guy," he mused. "I really enjoyed being able to eat a lot and not worry and the way that people always kind of envied me for that. And I guess I feel like I would still be that guy if I could. The thing is, I can't. I wish I could. But I can't. It's time to grow up."

Once he looked clearly at his BAs compared with the evidence of his adult life, he realized that he had already begun to chart his course toward a healthier existence. He could now begin to move beyond being controlled by his BAs.

As you have seen, this Biography exercise invites you to look back to get some clues where your Big Assumptions came from, and to see how long-standing are their origins.

Our Big Assumptions, typically, have been living with us for a while (sometimes for a very long while), and have become part of our skin without our realizing it. Many of the people we work with can trace their Big Assumptions back to the time when they were children, trying to find their places in and make sense of their roles in their families. The exercise helps us locate pivotal experiences, which may or may not have anything to do with food or eating habits, but which contributed to the formation of our Big Assumptions (many of which *do* have implications for our relationship to food). They may have been formed without our realizing it, when we were quite little, or teens, or adults. They may have been formed in our homes, at school, or at work. As you think back over your own life, see if you can further identify the types of situations, people, events, or contexts that may have led you to develop your Big Assumption in the first place. Then see if you can identify other experiences in your life that also led you to form or believe in your Big Assumption.

Excerpt #2:

Charting the Biography of your Big Assumption can be helpful to your progress in a few important ways. First, we often have a much clearer understanding of why we have been holding this Big Assumption in the first place. Many clients have been looking at their Big Assumptions and seeing them only as the things that are in their way, holding them back from their goals. They look at their Big Assumptions and feel frustrated and annoyed by them. If that's the case for you, exploring the biography of the BA can help you to be a little more forgiving toward yourself. (We call this self-compassion.) There are usually very good reasons why we have developed our BAs. They may have helped us survive in situations that were unsafe. They may even have helped us to succeed in certain ways.

The biography can also be very useful in providing you with a clear set of situations to compare and contrast with your current life. Are the reasons why you developed your Big Assumption still relevant to your life now? As an adult, Gabriel knew that his own family was actually economically comfortable. He had no need to worry about having food to feed his family in the ways that his father had when Gabriel was a boy. So even though his Big Assumptions still felt very real to Gabriel, he knew they were not very relevant to his current life. In understanding how and why our Big Assumptions came to be, we may begin, often without even intending to or realizing it, to change our relationship to them.

Excerpt 5: Chapter 8, “Designing Tests”, *Right Weight, Right Mind*

I used to start a new exercise program and tell myself “I’m going to do this.” And I would do it for a while, but when I would start to slip I’d say “I’m done with that.” I assumed it was an all-or-none thing. Now, there are times when I slip, but I know I can get back to it because I’ve done it before. I know it’s not an all-or-none thing. Also, I used to think that I wasn’t going to be able to find time to exercise like I should, but now I know there are ways to find time to exercise without causing problems in other areas of my life. I used to say “forget it, it’s not going to happen,” and now I try to take advantage of opportunities where I can exercise. I’m exercising more now than ever. I look at exercise from a whole different standpoint now.

— Scott

Everything you have been doing up until now has put you in a position to design, run, and make sense of the exercises that will test your Big Assumptions. If your tests raise questions about the validity of your BAs, you will be able to revisit and reconsider your BAs, and eventually even overturn them.

Expect to run multiple tests. It is rare that any Big Assumption can be sufficiently explored and either confirmed, revised, or overturned after running just one or two. Your first tests are deliberately quite safe and modest, and then each successive test grows more ambitious and provides new possibilities for learning.

WHAT IS A TEST? WHY ARE WE RUNNING THEM?

Tests of your Big Assumptions basically involve doing things differently than you would normally do ***to get important information about your Big Assumptions (not to take one step closer to your goal)***. When we design and run a test, we are acting as if our BAs might not be true. We are imagining the possibility that they are not as absolutely

true as we have previously felt them to be. For example, if I have been certain that I will feel less happy and more confined if I limit my eating to “proper portions,” I will continue quite intelligently, reasonably, and faithfully to overeat and undermine my sincere and urgent goal to lose weight. To test this BA, I might set out to eat proper portions for a week to learn “did I, in fact, feel confined and controlled, as my Big Assumption tells me I must?” I am acting as if my Big Assumption might not be true to see what happens. What happens will help me see whether I should continue to hold my Big Assumption in exactly the same form. Changing my Big Assumption, even a little, can permit big changes in my “immune system.”

Notice that we didn’t say that I would be eating proper portions *in order to lose a couple pounds*. I may, or may not, lose a couple pounds if I run that test, but that is not the purpose of a test. ***The purpose of a test is to see what happens when you intentionally alter your usual behavior in order to learn about the accuracy of your Big Assumption.***

We cannot emphasize this enough: The purpose of a test is to get *information*, not immediately to improve or get *better*. It is so easy to focus on whether you can successfully change your behavior and consistently eat proper portions, and whether eating proper portions leads you to lose weight. These are not unimportant. But you didn’t need this book to try to bring about change this way. That approach is something you already know how to do. This book is teaching you a whole new approach for you to try to see what results it brings. As we’ve been saying throughout the book, unless you learn more about the beliefs that got you into your current situation, you will be unable to sustain changes in your behavior.

You already know how to make temporary changes. Any diet will help you lose weight...temporarily. ***Our goal in running tests is to see whether you can disprove the Big Assumptions that have been getting in the way of the changes that will help you stay healthy for a lifetime.***

PLANNING YOUR TESTS

Every test must be directly connected to one of your Big Assumptions. (Some tests will connect to more than one, but don't try to include more than two.) The Big Assumption you choose should feel like one that has a strong hold on you and that if changed would make a big difference. If you have been actively taking part in the prior exercises, you likely know exactly which Big Assumption you want to test. Something we haven't yet discussed, however, is that your Big Assumption needs to be one that can be safely tested. This part is really important, so let's consider a couple of examples.

Let's say your Big Assumption is "If I were to fail to lose weight and keep it off again, then I would not be able to face myself." Designing a test of this Big Assumption as it is currently framed would mean that you would have to fail in order to see if you actually could or couldn't face yourself. Clearly, this test is not safe to run. We are quite happy to say (and would guess you are too!) that we hope you'll *never* find out what you'll do if you lose weight and fail to keep it off again.

In a case like this, you can unpack the Big Assumption a bit, to see if there are other assumptions within it or related to it. For example, imagine the Big Assumption worded somewhat differently: "I cannot tolerate *any* more failure when it comes to my weight." While it may be possible to design a safer test of this assumption, it is still not clear how

helpful it would be. Think more about your original Big Assumption and focus on what seems most powerful there – is it the fear of failing? That might lead you to reconsider your assumptions about how failure happens. You may be assuming something like, “If I slip up and am not very strictly keeping to my diet for a day or two, that proves that I will fail again. I assume that in making changes to lose weight I must have an all-or-nothing mentality.” Or, it may be the consequence element of the assumption that is most important to explore: “I assume if I fail again at this *then my family will lose all respect for me.*” It’s important to unpack these assumptions because whichever one you decide to explore will lead to very different tests.

Here is another example. One of the fears that arose for Clara when she was making her ITC map was that any attempts she made to end her addiction to overeating would lead her to resume other addictive behaviors such as binge drinking, drug use, or cigarette smoking. This led her to the following Big Assumption: “I assume that if I do replace my food addiction with another, even more destructive addiction, I will end up killing myself.” Okay, as it is written, that assumption is clearly not testable. But by now, you can probably begin to identify other, related assumptions that Clara could test. Here are a few possibilities we see:

- I assume that if I work to end one addiction, I will necessarily replace it with another.
- I assume that I cannot successfully treat the underlying cause of my addictive behaviors.
- I assume that I cannot take good care of myself – physically or psychologically.

- I assume that I cannot take control of my life.

You can probably identify several more possibilities for Clara. In fact, we find it is almost always easier to see the assumptions other people are making than it is to see our own. So if you are having trouble identifying a Big Assumption of yours that is safe enough to test, ask your partner if you are working with one. Otherwise, it might be a good idea to ask a trusted friend or colleague for help.

As you're choosing which Big Assumption to test, keep these suggestions in mind:

Be sure that the assumption you have chosen is one that feels **quite powerful to you**. Ask yourself which BA jumps out at you as the one that most gets in your way. Or, imagine that you can change any single Big Assumption in your map. Which one would make the biggest, most positive difference for you?

The Big Assumption you choose must be **safely testable**. Can you imagine some kind of information or data that would help you see that this BA is not true? Is yours so catastrophic that you could never test it? Hint: a BA with words like *die, be fired, or have a nervous breakdown* isn't ready to be tested yet. However, there may be other assumptions that are part of that BA that are safer to test.

If your BA is too extreme to test, try reworking it so that testing it will be a safer, more informative exercise. For example, if your BA says, "I assume if I lose the weight my wife will go into a deep depression," you could change it to the more testable "I assume my

losing weight would be threatening and disturbing to my wife.” You could test this by *asking* her!

Designing Your First Test

Once you have chosen which Big Assumption to test, write it down in the left hand column in the template below. The next step is to design your first experiment to challenge it. Turn to the “Designing a Test” portion of your Change Journal and write your answer there to this question and the following ones in this chapter.

My Big Assumption Says:	So I will (Change my Behavior This Way)...	And collect the following data ...	In Order to Find Out Whether ...

When you plan a test, it makes sense to think first about what could happen that could disprove your Big Assumptions. To illustrate, let’s imagine how a client named Patricia could test one of her BAs: *I will feel less happy and more confined if I limit my eating to “proper portions.”* Patricia’s goal for designing a test is to imagine the possibility that she might find out she will *not* feel less happy and will *not* feel confined by

eating proper portions. Her next step is to imagine a test she could design that might lead to that revelation. What could she do? Well, an obvious answer would be: she could simply try and eat proper portions for a week and see how she feels.

That wasn't hard, right? But let's consider it more carefully. How confident can Patricia feel that in making that simple change, she will discover that she doesn't feel less happy at all, that she doesn't feel confined? Hard to say. Maybe she will. Maybe she won't. Remember, the goal is to give the world a fair chance, even a best shot, to show that the BA we are testing is in some way "off." Patricia's goal is to find out if there is some way that she could feel perfectly happy and not at all confined. So, is there any way to add to or change this test that will make it even more likely that she'll feel that way? Here are some ideas Patricia could incorporate into her test design, as she would write them in Column 2:

- I will make sure that every meal I eat is made with high-quality, fresh, and healthy ingredients. Does that lead me to feel satisfied eating properly sized portions?
- Every day, I will allow myself half a portion of one "indulgent" food – such as a healthy dessert or snack. Does that lead me to feel satisfied eating properly sized portions?
- I will eat slowly and mindfully, paying attention to how my food looks, feels, and tastes. Does that lead me to feel satisfied eating properly sized portions?
- I will stop after eating a healthy-sized portion and assess how I feel. I will assess how I feel again 20 minutes after the meal. Does that lead me to feel satisfied eating properly sized portions?

After making these additions to her test, Patricia will have increased the chances she will discover she doesn't feel less happy at all and that she doesn't feel confined. Whatever test you design, challenge yourself to increase the chances that you will be able to find that your Big Assumption is not 100% right.

Excerpt 6: from Chapter 9, “Running and Interpreting Your Tests”, *Right Weight, Right Mind*

I've disconnected food from my feelings. I know I don't have to eat to be social. I am no longer turning to food when I feel stressed and am finding a new way to deal with the stress. Immunity to Change has been a really good thing for me. I didn't think I'd say that. I started off encouraged, but as it got harder, then I thought I'd need to quit because I was worried I wouldn't do it perfectly. But that was actually my Big Assumption, "If I can't do something perfectly, I should stop. I shouldn't do it." I was starting to play that assumption out, but then it just jumped out at me, and I understood what I was doing! Wanting to quit ITC was just another example of the BA "I'm not going to do it at all if I can't do it perfectly."

Deep down I've known a lot of this stuff mentally, but I haven't been willing to let go of those fears and BAs. By being able to focus through these small tests, I had that opportunity to really question them. It's one thing to feel you know something isn't true and another to actually believe it about yourself.

— Dana

Finally, your test is ready! Go ahead and run it, and make sure you have a good way to keep track of what happens, such as by taking written notes. Basically, you'll want to record what you actually did, what happened as a result, and what you felt and thought about it. You'll find these questions in the “Running and Interpreting Tests” portion of your Change Journal.

Question 1: What was the Big Assumption that you were testing? What did you *actually* do to test your Big Assumption? This may be what you planned to do, or you may have done something else (which is fine, as long as you learn from it).

Question 2: What happened as a result of what you did? Record your data, including what you saw and heard other people do or say, as well as what you felt inside of

yourself. To the extent possible, record only your data and not your interpretations of it.

INTERPRETING YOUR FIRST TEST

So, did you run a good test? Were you able to behave differently than you usually do? Sometimes you don't end up running the exact test you planned, but you still learn important information about your Big Assumption. If you feel like your test was too flawed to be useful, no problem. You may still be able to run the test you had originally planned, or you can design a new one. If you conclude that the test you ran was sound, you are ready to look at your "data" for the sole purpose of understanding what it suggests about your Big Assumption. **Remember, the purpose of running a good test is not to see whether you improved, i.e., whether your behavior change "worked" (although this is not unimportant), but rather to use the test results to inform your Big Assumption.** As we keep saying, a big difference in this approach is that we are taking action *not* to get better (immediately), but to get *information*. You will know you are on track if you can see what aspects of your Big Assumption, if any, are confirmed by the data, and what aspects, if any, are disconfirmed, or called into question.

When you begin to interpret your data, you may be more likely to see the information that "proves" your Big Assumption, and not the information that casts doubt on it. You may quickly focus on the ways your data supports your Big Assumption and not consider other ways you could be interpreting that very same data. Big Assumptions that have a powerful hold tend to direct attention to whatever will keep them alive and well. So, we suggest that you try to imagine at least one other way that you could be interpreting

your data. (If nothing comes to mind, try this: imagine someone else, a real person, who happened to be in that exact situation, and the same things happened. How might you show this person how the results cast some doubt on his or her Big Assumption? If that doesn't get you anywhere, and you are working with a partner, ask him or her to offer an interpretation. Otherwise, find a person you trust to suggest his or her interpretation.)

Creating other interpretations is especially important if you feel your test did not go as well as you had hoped. Maybe you weren't able to change your behavior; others didn't welcome the new behaviors; or your new behaviors didn't lead to the hoped-for results. You may even be disappointed to learn that your Big Assumption seems to be accurate in the particular context in which you ran your test. But all of these scenarios can still help you learn about your Big Assumption – under what conditions it is and isn't accurate. And they can also suggest ideas for new tests.

Here is an example of how generating alternative interpretations can be useful to overall progress. Jason's Big Assumption was that following healthy eating habits would be boring and would make his life feel too routine. He was used to "life in the fast lane," where he and his wife were always out at parties, meeting friends for drinks, or trying out a new local restaurant together. To test his assumption that being healthier meant giving up fun and excitement, he planned to start a support group for people he knew who were also trying to eat healthier and exercise. He imagined they could plan lots of fun activities together – like long biking and hiking trips. He looked into hiring a fitness instructor to come and give the group individualized workout sessions. He contacted a friend who loved cooking and asked her if she would cater a "healthy summer fun" party that would feature smoothies, low-calorie snacks, and include recipes that they could all try to make

themselves at home. As Jason developed these plans, he got very excited about the possibilities that a healthier lifestyle could still be as full and exciting as he wanted.

But two weeks later, he was annoyed and disappointed when two couples emailed him to say that they couldn't come to the party, and that they would not be able to participate in all of the group activities Jason was planning. Jason worried that his test was now failing and that his plans for a healthy, but still exciting new lifestyle might not be possible. What should he do? Give up? Work even harder? Design a new test? As he was explaining his predicament to his wife, he admitted, "I was starting to think that my Big Assumption was true and that it was just going to be too hard to keep this up. I'd either end up living a dull but healthy life, or I'd go back to all my old habits, just so I could have some fun again!"

Jason's wife suggested that he get back in touch with the two couples who had cancelled to see why their initial enthusiasm for the group had changed. Jason agreed, and what he found out gave him a completely different interpretation of his test results. Both couples explained that they were still very enthusiastic about the idea of a healthy lifestyle support group, but they were concerned that Jason's plans were going to end up costing a lot more money than they were willing to spend on parties and trips. To them, it sounded like Jason was going to expect everyone to be paying quite a bit to participate in all the activities he was planning.

"Well, I wasn't thrilled to hear that," Jason later explained. "I mean, it is much easier to have fun if you're willing to spend a little money. But, I do see their point." He paused for a moment and then added, "I mean, really though, I was whipping up all these elaborate plans because I was so excited by the possibility that living more healthily could still be fun,

but I didn't need all those things to happen right away. So, we worked out a more reasonable budget, and as a group, we try to do something once a month or so. And not everyone has to do everything."

Jason continued, "In terms of that test, my wife helped me see that I was making an interpretation that the test was failing and my Big Assumption was true without really exploring whether that was truly the case. It wasn't the case. I just kind of panicked at the thought that my plans might not work out perfectly and thought NOTHING would work." As Jason learned, it can be hard to think clearly and calmly during a test of a Big Assumption. Remembering to look for other ways of interpreting your data can lead you to develop more reliable conclusions.

Sometimes, even when a test goes well and allows the person to redefine her Big Assumptions, it is not because she necessarily got only positive results. For example, Amy was running tests on the following Big Assumption: "I assume that eating less, eating only healthy foods, and having to plan my meals will feel *boring* and will be *too much hard work*." Over the course of about six weeks, Amy ran several tests in which she made and brought her home-cooked, healthy lunch to work every day and was cooking healthier meals at home for her family. She had been reading several food blogs that offered nutritional guidance and healthy recipes, and she was surprised to find out how much she was learning and how interesting the subject of nutrition and food preparation had become to her. She was even more excited that she was losing weight, and none of her old clothes were fitting anymore. Now she had an excuse to go shopping after work and was so proud to be wearing smaller sizes. Her Big Assumption – that she would be bored and feel she

was working too hard – seemed silly to her now. On the contrary, she could hardly contain her excitement and pride.

Amy's test was designed to gather information about whether she would feel bored or that she was working too hard. Her test enabled her to collect data that cast doubt on her Big Assumption. Unfortunately, her test also produced a different result in that Amy's family and co-workers were less than supportive. Rather than sharing her excitement about her new cooking and eating habits, her new learning about nutrition, and her new, smaller-sized wardrobe, they seemed mostly annoyed. Her children complained that they missed the meals they were used to having. They rolled their eyes when Amy started explaining about the nutritional content of their meals. Her co-workers stopped complimenting her on her weight loss and new clothes and began cutting her off when she brought up the subject of her weight loss success. Amy was puzzled. Why wasn't her family more interested in eating healthy? Couldn't they see how much difference it had made for her? Were her co-workers jealous of her success? Why weren't people more excited for her? Amy felt hurt. Did people really want her to go back to the way she was before? "My test was a disaster!" she told us.

You may already be developing your own interpretations about what was happening in these situations. Maybe Amy's excitement sounded too much like bragging to her coworkers. Maybe her children actually were proud of her but weren't excited to have to change their eating habits too. Maybe her coworkers actually were jealous of her success and so were finding it hard to be as supportive as she wanted them to be.

But whatever is going on, the first thing Amy needs to be clear about is this: from an ITC perspective, her test was anything but a disaster! It helped her take a big step away

from a constraining Big Assumption which is huge progress! The idea that she will feel bored or working too hard in changing her diet has almost no power anymore. It's true she is also experiencing some unexpected fallout in the wake of her success, and she will need to look into this and decide what to do about it, but if she is clear about the purpose of her experiment she should see this is a whole different issue that has no bearing on the ITC results of her experiments.

Now it's your turn again. Take some time to write your responses to the next two questions in your Change Journal.

Question 3: What did you learn about your Big Assumption? How are you interpreting your data?

Question 4: Can you imagine interpreting your data differently, leading you to a different conclusion? What would that tell you about your Big Assumption?

INTERPRETING RON'S FIRST TEST

Interpreting Your Test Results	
My Big Assumption Says:	I assume (no matter what my friends do) that I'll feel less a part of things if I am not eating like my friends are eating. I will feel like I am missing out on the full experience.
So in Order to Test it I Changed my Behavior This Way:	I told Don that I'm trying to get healthier by cutting out desserts and snacks. I told him to be watching me so I don't screw up. I cut out desserts and snacks for two weeks.
This is What I Observed Happening:	Telling Don was pretty easy. He agreed to help and then asked me what he should do if he caught me screwing up. He started making lots of jokes about stuff he could do or say – pretty

	<p>ridiculous ideas – and that got me a little nervous. I was afraid that I had just asked him to make me look like an idiot, basically. I let him joke for a while, but then I got more serious and said how about if I had to give him \$5 for each time he caught me. But he couldn't tell anyone or all bets are off. So he said ok. I probably should have thought about all this before I talked to him, but then I think it worked out ok. And there is no way I was going to give him \$5, so I didn't screw up even once.</p> <p>Nobody offered me food, but I really made sure that didn't happen. I ate at my desk instead of eating at the cafeteria at work. There weren't any parties or anything like that at work. I guess the only place I had to turn down a snack was at home. Obviously, my wife and kids know I'm cutting back. They were easy to tell and really want me to get healthier. So nobody suggested we go out to eat, and my wife gave kids dessert after I left the table. Just one day my kids offered me some of their Pop Tarts because they know I like them. But I had already eaten breakfast, so it would have been a snack. I just said, "That's a snack! Can't do it!" And we all laughed.</p>
<p>And This is What the data Tells me about my Big Assumption:</p>	<p>It was fine to tell Don, and I don't think he is treating me weird. I mean, I guess with him at least, I can feel like things are the same. I didn't feel "not a part." Even goofing with me about what he would do – that's a lot better than if he kind of took it too seriously or tried to talk me out of it or something. I knew Don would be the easiest friend to tell, and how that all went makes me think I could probably tell the others.</p> <p>And, I learned I can avoid the offers of food if I want. I didn't feel I was missing out on anything. When I started to write down what I learned from this test, I was kind of proud of avoiding that. But, the fact that I didn't have to refuse any offers, unless you count my daughters, is only because I avoided the whole thing. I don't know how long I can keep that up because somebody is going to offer me food, and also, I don't really like eating at my desk every day, which makes me feel strange. So, I have to try harder on being in situations where I get offered food and learn to say no.</p>

Excerpt 7: From the Conclusion of *Right Weight, Right Mind*, “Owning Your Bridge”

This process is very deep. It is not a Sunday afternoon project.

— Ula

Now I am in a position where I cannot justify not going for anything I want. I have begun asking myself, “what would I do if I knew I couldn’t fail?” This process accelerates following your inner compass. It is a fantastic tool to go about this in a conscious way and make it happen much faster.

— Tomas

In most cases, if you told the authors of a book that you “couldn’t put it down,” that you read it from cover to cover in a few days, they would be happy and flattered.

But we wouldn’t.

We weren’t trying to transport you to another world the way great fiction can, or to stimulate your mind alone with a set of new ideas. On the contrary, we were trying to bring you *closer in* to the real world you are living in today, to *apply* a set of ideas-- so that you live in your world with the greater satisfaction of accomplishing a goal that has been as elusive for you as it has been important.

Specifically, we wrote it so you could be *lighter*. Lighter in body *weight*, yes; but you want to *stay* lighter — and that can only happen by becoming lighter in *mind*, as well.

Right Weight/Right Mind.

We wrote this book to help you *offload*--not just the pounds or kilos--but those constraining Big Assumptions you may not even have known you were carrying around, day after day, week after week, year after year. They have been weighing you down. They

are the source of the pervasive “ordinary suffering” we have been witness to, the resignation and self-contempt that sets in from repeatedly failing at personal change goals despite our smartest plans, our most heartfelt intentions, and our most strenuous and sincere efforts.

We are crossing our fingers that you didn’t just read this book through in a couple of sittings, so let’s imagine together for a moment what the experience would be of someone who did. At the best, he or she might have learned some new ideas about what prevents us from changing, or making changes that last. By reading the stories and examples she or he might even see these ideas “come to life” enough to do a passable job explaining to someone what the book is about.

These readers might know now what “the immunity to change” is, but there is no chance they are going to succeed with their improvement goals because they haven’t really explored *their own* immunities to change, and they haven’t done the work involved in offloading them.

If you *have* actually done that work on your own immunity it should now be many weeks since you first picked this book up, and you have put it down, many, many times. You put it down to engage in the set of practices and exercises we offered you. You put it down to *do things*, things in your head and things out in your world. We congratulate you for doing all that hard work, and getting to this point!

We want to use this Conclusion to help you get even more out of the hard work you have done. We will first invite you to step back a bit from your hard work and take a look at it, to make sure you see what you have actually done, what you have actually *built*. We think this will increase the chances that you will see the book was not just an itinerary for a

single trip. In taking your journey in this original way you have really created a new kind of vehicle you can use to reach *any* destination that has proven difficult to get to (or difficult to stay there once you have first arrived).

The Idea of the Bridge

What have you actually done? The exercises have gotten you into the *particulars* of *your own unique* Big Assumptions. You are, at best, only a few months into working on a new relationship, not to “Big Assumptions” as an abstract category, but to your *particular* self-limiting beliefs. So it would be completely understandable if you did not yet fully appreciate that what we have been helping you develop can be useful to you in many other ways.

You haven’t been reading and working with this book all by yourself. Thousands of others have been going through the same exercises you have, working on getting free from *completely different* beliefs, perhaps, but those of you who have succeeded with these tools have all developed the same new strengths. You have all built the identical thing. What is it?

We have talked throughout the book about a “bridge” that wasn’t there for you when you began reading this book. There are many ways to see this bridge, and to talk about it. We can do so quite metaphorically, but we can also root it in the two well-researched sciences of the mind and of the brain.

At the simplest level, when it comes to accomplishing personal change goals, like those around eating and fitness, people have a clear (and often agonized) sense of Where I Am, and a (hopeful or despairing) sense of Where I Want to Be. What they lack is a sense of a trustworthy bridge that enables them to cross from one side to the other. They may become intrigued with a new fad diet or procedure they think will get them there, but then

the bridge collapses before they have crossed over. Or it seems like the bridge has gotten them there, only to discover that it comes with an invisible “rubber band,” and before you have spent much time on the other side you are pulled back over the bridge to the place you began.

If you are beginning now to feel some freedom from some of your Big Assumptions (the sort of thing you heard people say in the later chapters, such as “that just seems silly now,” or “there is almost no situation where I any longer believe that is true”), it is important that you see you are not just freer of *that particular assumption*. You have built the *vehicle* by which you can get freer of other assumptions as well—not automatically; you still have to do the work and you still have to *cross over* the bridge again. But the point is, *there is a bridge now*, and it doesn’t have a rubber band, or a big toll booth, and you can cross over it any time you want.

How did you do this? Basically, we helped you see that the picture you were creating in your mind of how the world works was not 100% accurate. Instead of just looking through the camera lens of your mind to take pictures, you needed to make some important alterations to your camera lens so that it would take better pictures. At the same time, you were making some new connections among the parts of your camera lens so that these parts are working well together and not causing friction. These processes are explored and explained more fully in two important research communities – that of developmental psychology (the science of the mind) and that of neuroscience (the science of the brain). We’re going to briefly layout the fundamentals of these ideas here, for those of you, like us, who find such things fascinating. However, if it bores you to tears, feel free to just skip on to the next section about exploring the width and length of your bridge.

The central idea from the science of the *mind* is that our mind develops (enabling us to see more deeply into ourselves and our world) through our gradual and successive ability to step back and *look at* the lenses we were formerly *looking through*. When we are choicelessly, unmindfully looking at ourselves and the world through a particular lens (thinking what we are really seeing is “the world” and “ourselves” when it is just the world and ourselves *as this lens renders them*) then we could say the lens “has us” (we are captive to it). But when we can *look at* our own lens, make choices about whether we want to see things through that lens, then the lens has become more of a “tool,” something “we have.” When we overturn our immunities we make this type of shift – to our hidden commitments and to our Big Assumptions.

When your self-protective commitment (e.g., “I am committed to never feeling bored or unstimulated”) creates unwanted behaviors (e.g., frequent snacking) often without your even realizing why, that self-protective commitment “has you.” When you make the commitment itself less hidden, and begin to examine its source, you begin to “have it,” and there is more of a chance you can do something about it. The exercises you have been doing help you move your self-protective commitments from a place where they have you to a place where you have them. This starts the construction of your bridge. You still can’t cross it, but it’s a start.

When your self-limiting belief (e.g., “if I get thinner it will throw my wife into a tailspin”) is narrowing your options without your even realizing it, this mere assumption has become what we call a Big Assumption (an assumption taken unquestioningly, unmindfully as true). It has you. But when you identify it as such, consider it may *or may*

not be true, and give the world a chance to show you whether you should modify it, then you start to “have it” and you begin to build more layers on your bridge.

Your whole immunity to change then starts to become something “you have,” rather than it “having you”. As you, more and more, are “working on it” rather than it “working on you,” you are creating a more and more robust, reliable bridge for crossing over from **Where I Am to Where I Want to Be. Where I Want to Be** becomes less and less a place of mere hope (“maybe this cleansing thing will finally do it”), or dispiriting despair (“I’ll never get there”), or bewildering scam (“I thought I got there, but now I’m back where I started”).

Nerdy academicians that we are, we can’t resist letting you know that in our terms, the work you have been doing to help strengthen this mind-shift in your way of knowing has been all about helping you move aspects of your thinking and feeling from a place where you are *subject to* them (they run you) to a place where they become an *object* for you (you can make choices about them). This subject-object structure is the very root of our epistemologies, the *ways* we know. One way of understanding the bridge you have built is to see that it starts with the well-anchored pillars on either side of “subject” and “object.”

The central idea we are taking from the science of the brain is that there are different parts of the brain performing very different kinds of jobs, and that we are much more effective when they are not working too independently of each other, or at cross purposes.

In particular, the neo-cortex is the seat of judgment, the place where we can analyze and reflect, the place that develops the greater complexity and insight we were just talking about in reference to the mind. The amygdale, a prehistoric inheritance, performs a very

important function too. It is continuously scanning the world for possible danger and when it goes into Red Alert it overrides the neo-cortex and other brain functions as well.

The amygdale is the part of the brain we have been referring to as your big, faithful dog that barks ferociously whenever anyone—*anyone!*—approaches the house. If you immediately grab a rifle without thinking and start shooting out the window whenever your dog starts to bark then your dog is running you. As ridiculous a picture as that presents, the humbling evidence from brain science is that that is exactly what we are doing most of the time in the face of threats the amygdale perceives. We don't always "shoot"; that would be the automatic "fight" response. Sometimes we "flee"; we just as automatically withdraw--physically, or more often emotionally and intellectually. This can be very subtle; we feel a lack of energy, bored, even slightly depressed. The key point though is the "without thinking about it;" the neo-cortex is over-ridden and we automatically lose a connection to the more thoughtful, reflective side of ourselves.

Diagnosing and overturning our immunities to change helps us establish these connections:

- When we let the amygdale persist in its overriding of the neo-cortex, there is no bridge between the two.
- When we do not ignore our "barking dog" but don't let it take over either, when we recover from that first burst of adrenaline and alarm and decide to take a look for ourselves out the window before picking up the gun, then we "have the dog" rather than the dog having us.
- When we can do this more regularly, especially around a particular imagined threat (e.g., my spouse going into a tailspin if I lose weight) then we have further built the

bridge (with respect to this issue) that will help us cross over from **Where I Am** to **Where I Want to Be**.

The exercises you have been trying on in this book are as rooted in brain science as the science of the developing mind. A cutting-edge area of brain research today called “reconsolidation” (using rats as subjects) deals exactly with the possibility of taking brain activity that has been living in the amygdale (where it cannot come under the governance of the neo-cortex) and moving it into the neo-cortex where it can be modified. “Reconsolidation” is really about “bridge-building” in just the way we have been talking about it, and, in a general sense, the work you have been doing with this book is helping you strengthen your bridge through a kind of “reconsolidation.”

You can see this most vividly in the third column of your ITC map and what happens in moving from the Worry Box to the Hidden Commitments. What you are trying to capture in your Worry Box is as close to the activity of the amygdale as possible. We ask you, in imagining your doing the opposite of the behaviors in your second column, *what would be most disturbing* about that (e.g., you listed, in the second column, “I don’t eat proper portions. I just keep eating what is on the plate”). If you really vicariously placed yourself in the position of *setting aside* half the serving, or *eating no more* even though you are enjoying the food, your amygdale should be sounding all kinds of alarms (“Oh no, I will be unhappy!” or “Help! I will feel trapped and controlled.” Or “Grrr, that is just like my mother taking away my cookies”). These are the feelings you are trying to capture in your Worry Box. They are automatic; there is no way to prevent them, and you don’t need to in order not to be run by them.

When we next invite you to reframe these raw worries as “commitments” (“I am committed to never again feeling like I am in ‘food jail’ and my mother is the warden”) we are helping you connect—build a bridge between—your amygdale and your neo-cortex. The raw anger that first came up is the province of the amygdale. Once we convert this into something more abstract like a *motive*, or *intention*, or *commitment*, we have reconsolidated it into the province of the neo-cortex, and, as you hopefully have experienced, this opens up a whole new vista of possibilities for change. That vista comes into view because you have gotten up onto a reliable new bridge.

Exploring the Width and Length of Your Bridge

Now that you have a better understanding of what you have created—the bridge itself--we want to make sure you do not shortchange yourself, and take full advantage of its width and length.

As you have made progress with this book, have you had any thoughts or experiences even a little like this?

“My ITC map, and my exploration of my Big Assumptions, are definitely helping me with my Column 1 improvement goal, but this is turning out to be about a lot more than food and diet.”

This is something we hear a lot, and it is a reflection of the potential “width” of the bridge you built. You may remember Clyde in Chapter 8, the fellow who was concerned about his wife, Bev, possibly going into a depression if he lost weight, or in particular, her being upset if he went off on an exercise run without her after she decided as usual that she

didn't want to go. Here is an excerpt from an e-mail he wrote one of us, many months after we had stopped working with him:

I want to thank you for the way the approach has helped me take off, and keep off, the weight I wanted to lose. But, as I was thinking about all that I learned, I wanted to pass on a much bigger kind of thanks, because this has really gone way beyond diet and way beyond just my relationship with Bev.

My fear about people possibly getting upset, I now realize is a huge life-theme. It has been around forever, and once I started to see how it works with Bev, I began to see it everywhere—at work, with friends, with the guy who repairs my car, for God's sake. What has been most liberating is not just that they rarely are upset or will get upset, it's that I don't automatically think it's necessarily my fault, my responsibility, even my problem, if they do! This has been a real life-changer.

I learned the Big Danger I had been protecting myself from was not really that someone would be "mad at me." It was more about *what I would do to myself* if they were! I would end up feeling so bad or guilty, beat myself up. I don't do that so much anymore. The dog still barks. I get alarmed for a moment when I think they are going to be upset with me, and I start beating myself up. But then I step in and stop it. "Is this their thing or mine?" I ask myself. The best thing of all is really coming to see that the *sense of* danger is not the same thing as a *real* threat. One doesn't have to mean the other. I'm not sure I ever made this distinction before.

Sometimes people do not take the full advantage of the width of their bridge because they are so focused on the food-related improvement goal. You may find it useful to ask yourself,

- “Have I derived all the possible learnings—and beneficial changes—from my current ITC map?”
- “If I look at the Big Assumptions that no longer have such a grip on me, have they been holding me back in *other* areas of my life? Can I now consider seeing and behaving differently in these other areas?”
- [If you don’t have immediate answers to the prior question:] “Would it be useful for me to re-do the Observations exercise--with respect to those assumptions that no longer feel right--but this time be looking for the way they influence me in *other* areas of my life?”
- “What about other Big Assumptions in my ITC map that I didn’t end up testing [probably because you were able to make progress on your food-related improvement goal without pursuing these]? Might there be benefits in *other* parts of my life by testing these, now that I’ve gone to the trouble of surfacing them?”

If there is more to be derived from further exploring your *current* ITC map, there are even bigger possibilities in *future* maps. You didn’t just learn how to create your current map. In the process, you learned a set of practices that can help you bridge from **Where You Are** to **Where You Want to Be** for a host of other improvement goals. This speaks to the *length* of your bridge. We have learned it can span across a myriad of aspirations. Nearly any improvement goal that does not yield to a straight-ahead, incrementally advancing, behavior-change focused, “technical” approach is a candidate for ITC.

Your next map might stay connected to your goals around weight but involve the next challenge after you have taken it off—namely, *keeping* it off. Your immunity to change around keeping it off may implicate a different set of Hidden Commitments and Big

Assumptions. For example, once Ron succeeded in losing weight and getting in better shape, he noticed a tendency to tell himself he could ease up. He started weighing himself less frequently (which for him had been helpful; we are not saying everyone needs to weigh themselves regularly). He began to find excuses for not exercising. He decided to create a new map and start the ITC process all over again, this time more tightly focused on the issues surrounding maintenance vs. regaining. The map interested him because some of the third and fourth column themes were different. He enjoyed working his way through the activities again (he didn't do all of them this time), and most importantly, he found that it helped him stay in shape and not regain the weight he had taken off.

Ron's New ITC Map

1. My Improvement Goal	2. "Doing and Not Doing"	3. Hidden Counter-Commitments	4. My Big Assumptions
<p>I'm committed to maintaining my new healthy lifestyle (better eating and better exercise).</p>	<p>I tell myself I can ease up more than I used to.</p> <p>I don't weigh myself regularly, especially when I have eaten more than I should.</p> <p>I find excuses to not exercise daily.</p>	<div style="border: 1px solid black; padding: 5px; margin-bottom: 10px;"> <p>Worry box: I fear being an annoying fanatic. I fear getting bored or being boring as a one-trick pony. I loathe the idea of becoming a robot, of losing my spontaneity.</p> </div> <p>I am committed to not being seen as only about my health and weight, and to not feeling myself that I am</p>	<p>I assume that if I maintain my new healthy lifestyle--others are going to start to find me annoying; I am going to feel like this is too big a way that people now see me; I am going to feel like I have become a fanatic; I am going to be less spontaneous and fun.</p> <p>I assume that keeping my new lifestyle will always</p>

		<p>becoming a fanatic.</p> <p>I am committed to not losing a relaxed, spontaneous, fun way of being--in life and with others; to not becoming a robot, or mechanical slave to my regimen.</p>	<p>feel like a bit of an ordeal; that how it feels now is the way it will always feel.</p> <p>I assume it is black or white; all in or I become a fat slob again.</p>
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