Changing Behavior

Immediately Transform Your Relationships with Easy-to-Learn, Proven Communication Skills

ISBN: 0983965994
ISBN-13: 978-0983965992 (NIWH)
Library of Congress Control Number: 2011938210
NIWH, Boston, Massachusetts
Published by SoulWork Press, Boston

For my children, Kimberly, Conor, and Ryan,
who make everything worthwhile,
and for Brian, always

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Foreword

If someone said you could transform your life and enhance your relationships by using a few simple communication techniques that can be applied in almost any setting, wouldn't you want to do that? Wouldn't you want to learn those skills? If the answer is yes, you've picked up the right book. This is an easy-to-read guide that is loaded with simple skills that have been scientifically shown to have a huge impact on your relationships!

When asked to write a few words about my experience of learning and applying Behavior Engagement™, I was honored and delighted to do so. Dr. Georgianna Donadio's years of experience in nursing, hospital administration, and health care practice, along with her passion for transforming lives through Whole Health Education®, has really resonated with me and has been an inspiration to integrate this same philosophy into my own career.

Over the past many years as a nurse and hospital administrator myself, I have seen amazing advances in medical technology and diagnostics. Yet chronic illness and disease are still on the rise. I believe Dr. Donadio's research addresses a critical component missing from our health care delivery system: engaging the whole person in a self-directed healing process and providing them with the knowledge and skills they need for lifelong health and wellness.

Behavioral Engagement is different from other behavioral change models in that it respects and honors all aspects of the whole person—their beliefs, feelings, thoughts, and values—as well as what each person innately knows is right for them. Behavioral Engagement offers a simple set of skills and tools that can be applied in a variety of settings, both clinical and personal.

These skills and tools have a dramatic effect on relationships with family, friends, and colleagues, and they can facilitate *sustainable* behavioral change. I know because I have personally had the opportunity to learn these skills from Dr. Donadio and have witnessed the results.

When applying the process of Behavioral Engagement in my own life, I have experienced many positive effects. As Georgianna describes, it all starts with being open to the process, clearing yourself of any preconceived ideas about the dialogue to come, and engaging in the conversation with the intent of applying the skills to be purely present to another person.

As a mother and wife, I have been amazed to see how this process has strengthened my relationship with my family and allowed for a complete connection, an easing of difficult discussions, a clearer understanding, and the creation of stronger relationships. As an administrator, I have seen difficult conversations becoming easier, and have even seen improvements in job satisfaction along with improvements in well-being. Now, who can argue with that?

The model is truly amazing. Based upon Dr. Donadio's pioneering and innovative research, creating an environment that is centered on the communication skills of respectful and mindful listening, complete openness, and Pure Presence can really change whatever environment you are in.

Deeply connecting with another person and being present with your whole self in a way that allows them to connect with their own inner knowledge and wisdom is what Behavioral Engagement is all about. By using the skills outlined in this book, which are both scientifically grounded and have been tested in a number of clinical settings, you will enhance your life and the lives of others around you.

I'm not saying this is easy, but if you have the intention to practice and apply the skills, it will become a natural part of who you are. If you want to transform your life and see dramatic effects in the relationships around you, this book is for you.

Thank you, Georgianna, for the passion you have demonstrated in creating a program that can offer such a transformation in our lives, as well as the world around us. And, congratulations to all who learn and apply the skills from this wonderful and compelling book!

Beth Borg, RN, MHA
Clinical Operations Administrator, Mayo Clinic

"We can't solve problems by using the same kind of thinking we used when we created them."
—Albert Einstein

A New Tool for Transforming Relationships

As an educator, I have a deep appreciation and profound respect for the potential of the union of knowledge and compassion to bring about change and eliminate conflict. The expression that *knowledge is power* is truly poignant. Knowledge can re-inform our beliefs and worldview, which in turn can allow us to shift our perceptions and behaviors. Compassion enables us to live more meaningful lives and achieve connections.

This book is the result of a unique health education and behavioral change program that was originally created to re-educate health care professionals in how they can more effectively demystify health information and communicate with their patients. The same hospital-tested relationship, communication, and behavioral change skills taught to the doctors and nurses are shared here for you to enhance and enrich your own personal relationships.

We start the discussion of behavioral change with an examination of the *challenge of being human.* This is a complex subject and one that is intertwined with our need for relationships, as well as our need to understand and resolve the conflicts that arise within them.

Part I presents the origins of behavior and the importance of relationships, then *cuts right to the chase* with a step-by-step "how to" chapter on applying Behavioral Engagement™, the behavioral change model developed and researched for more than thirty years in Boston hospitals and in medical centers around the country.

Part II provides a comprehensive look at behaviors and culture in the United States as well as addresses the statistics and data on our current health and relationship behaviors.

As you move through the book, it may feel like you are taking a course or training in relationship communications, and in a sense, you are. The information contained in these chapters will provide a new understanding of the challenges we deal with each day in our relationships, as well as easy-to-learn, proven communication skills for transforming those relationships.

There are personal inquiry questions at the end of the chapters that invite you to think about the information you have read and how it might be applicable to your own relationships. It can be helpful to think of this book as a *continuing education program*, which is exactly what it is for our health professionals, who receive continuing education credit hours for their studies.

It would not be a bad idea if we were all required to take continuing education courses in relationships, just as professionals are required to do in their area of expertise or practice. As *National Geographic* writer and explorer Dan Buettner, who traveled the globe in search of answers on longevity and happiness, said in his 2010 interview on National Public Radio, "*Relationships are really the key to lifelong happiness."*

Relationships are an important part of our lives, and the more knowledge and skills we have to apply to them, the better relationships we can develop. Positive relationships benefit all of us.

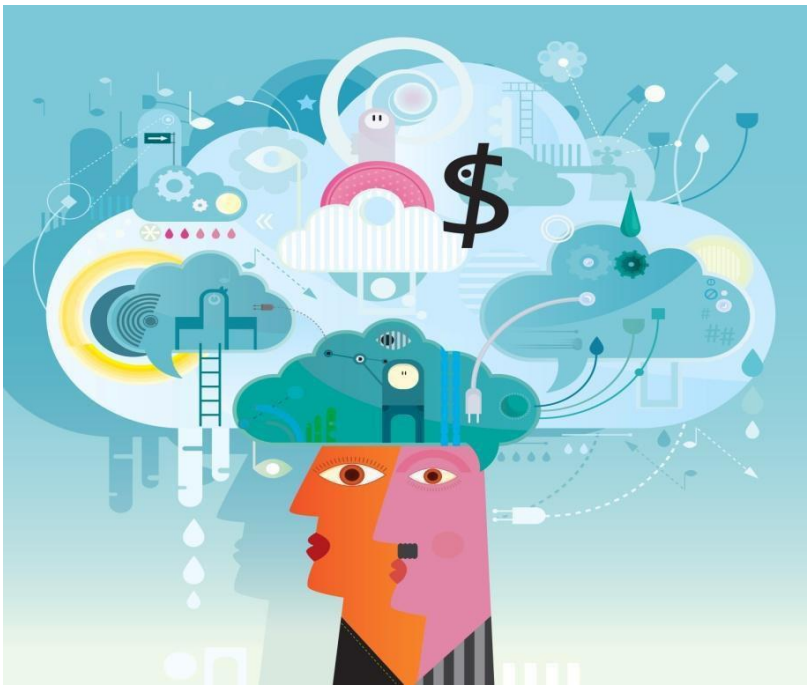
With all good wishes,
Georgianna

Changing Behavior

PART I

Chapter One

The Challenge of Being Human



"People are itchy and lost and bored and quick to jump to any fix. Why is there such a vast self-help industry in this country? Why do all these selves need help? They have been deprived of something by our psychological culture. They have been deprived of the sense that there is something else in life, some purpose that has come with them into the world."

—James Hillman, PhD

Little Acorns: A Radical New Psychology

We all want to be valued. And in the deepest part of ourselves, we know that. Yet it is forgotten when we encounter each other. What we then do is revert to the *pecking order* impulse and size up another person to establish either their comparative worth to us or our superiority to them, forgetting that each of us wears an invisible sign that reads, "*Notice me; make me feel important*."

We also forget this in our intimate relationships when our need to be valued can overshadow everything else. Many of us are unfulfilled in our lives, and many of us have *hungry hearts*. There is a way to change this and create healthy, fulfilling relationships, but most of us do not know how. Instead we continue to behave as we always have and continue to experience the same outcomes.

What we want in our relationships is for another person to listen, with genuine interest, to our story, our suffering, our hopes, and our dreams. We want them to care about our life—and not because of some self-serving agenda on their part. Being present to another person in a fully engaged and authentic way connects us with our true *self* as well as connects us with the other person. Being *purely present* to another person, or they with us, is a deeply fulfilling experience.

Our relationships give us emotional nourishment and can be the spark that motivates and inspires us to live more authentically, to re-direct and re-shape ourselves in a new and joyful way. To repeat Dan Buettner's earlier comment, *"Relationships are really the key to lifelong happiness."*[1] We want them, we need them, and we continually seek them.

Having the right skills to create healthy, thriving relationships is important. How to create these types of relationships is not something we are taught to do. We learn about relationships with our eyes and ears from observing our family members, our peers, and surrounding environment. Unfortunately for many of us, the skills we have learned do not result in successful and healthy relationships.

It is now well established that our relationships are intimately connected to our state of health. Experiencing the pain of repeated failed relationships can deeply undermine our well-being and self-confidence and lead to loneliness, depression, and chronic illness. Knowing this, it makes good sense to learn relational skills that can help us create more positive and successful outcomes.

By having a better understanding of why we behave as we do, and by learning new skills and knowledge that can facilitate the transformation of our behaviors and thus our relationships, we will improve our relational outcomes as well as the overall state of our health and well-being.

Changing behavior is not easy. The way we behave and why we behave as we do is as unique to each of us as our fingerprints or DNA. Although changing our behavior is challenging, the rewards can be enormous. By changing our relational behaviors we can re-direct all aspects of our life—enhancing our happiness, our work, and our personal fulfillment, and even increasing our longevity.

It's Complicated

To be a human being is a complex and challenging experience. We have basic physical, emotional, social, nutritional, environmental, and spiritual needs that require attention on a regular basis. We also have instincts, thoughts, feelings, beliefs, and impulses that interact with these basic needs. Collectively, they all influence how we view and experience the world around us. These multifaceted and compelling needs are unique for each of us and are the prime movers of our behavior.

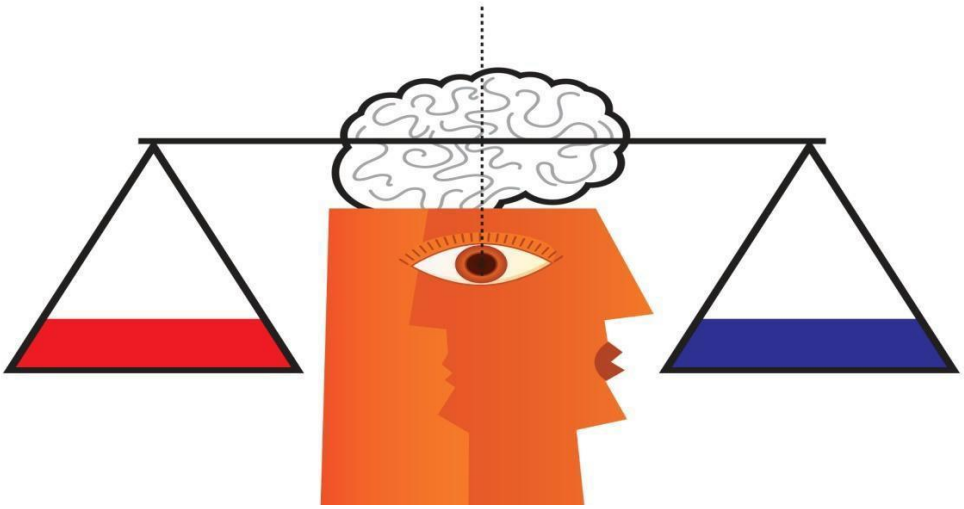
To develop the skills and behaviors necessary to create the type of relationships we desire, we need to start with an understanding of how these basic survival needs are integrated with brain functions that produce various kinds of behaviors. To understand how these aspects of ourselves are developed and connected to each other, let's take a quick look at where and how behaviors originate in the brain and nervous system.

Where *Do* Behaviors Come From?

Specifically, how do we learn to behave the way we do and why are our behaviors so persistent? These are age-old questions asked and partially answered by many who are tasked with addressing the topic. Psychologists, educators, scientists, and others have pondered and researched the topic of human behavior for decades. The current understanding of where behavior starts is at the primary site of development—in our central nervous system—with the perception of pain and pleasure.

This pleasure-pain perception is critically important to human survival as an adaptation mechanism that can be identified as early as the third trimester of pregnancy, when the specialized *thalamocortical* neuron connections in the brain are developing within the fetus.[2] The pleasure-pain perception allows us to respond to our environment by either moving away from what feels painful or moving toward what feels pleasurable. We will soon see just how important this mechanism is in connection with how we behave, as well as how this primal drive in human beings influences and informs our behaviors in relationships.

The Pleasure-Pain Principle



Freud's well-known *Pleasure-Pain Principle* says that people seek pleasure and avoid pain. Jeremy Bentham's classic *Principles of Morals and Legislation* found pleasure and pain to be "*the sole motivators and the only absolutes in this world."*[3] The principles are based on deeply embedded neurological mechanisms that help explain why it is so difficult to achieve sustainable behavioral change.

Situations or experiences that *threaten our perception* of personal survival are associated with pain and fear. Situations or experiences that *enhance our perception* of personal survival are associated with pleasure and the absence of fear. An example is the potential self-abuse associated with excessive eating, smoking, and drug and alcohol use. Although we can intellectually understand the potential health risks associated with such behaviors, the attachment to or avoidance of these excesses is greatly influenced by our conscious and often unconscious perception of their ability to produce either pleasure or pain.

The fear or anticipation of pain is often the major deterrent to making health-behavior or relationship-behavior changes. Even when behaving in a particular way leads to conflict, or the loss of a relationship, we will make only those behavioral changes that are within our pleasure-pain comfort zone.

Pleasure-Pain Imprints

When we first enter the world, our nervous system and brain are like a new computer with no data stored on its neurological hard drive. The process of placing data into this developing *computer-brain* occurs with sensory-motor input that comes from our immediate external environment.

The five senses of sight, sound, smell, taste, and touch communicate information from the surrounding environment to the brain, which in turn determines if we are safe or in danger, and if it is necessary to respond or adapt to survive. These sensory-motor recordings from birth to age five are deeply formative and persistent.

If, as a small child, we are bitten by a dog or stung by a bee, the sensory-motor pain-fear data that is sent to our brain when we experience the event is recorded in the neurological database. This becomes permanent information that the brain will identify as painful or potentially threatening to our survival. Even a *perceived* threat can trigger pleasure-pain memory and the fear that can accompany it.

How Survival Adaptation Works

The human sensory-motor communication system is the primal survival adaptation mechanism commonly known as the “fight or flight” response, which has developed over millions of years of evolution. The good news is that this remarkable mechanism, which allows us to discern and escape from danger, is what has saved us from becoming an extinct species.

The bad news, however, is that this same ability to enhance survival is also the basis of our emotional and instinctual behaviors. This “fight or flight” system, rooted in survival adaptation, can become a self-limiting and ironically a self-destructive responder to stimuli that is only *perceived* as threatening.

We will see the importance of understanding this most basic human reaction to the various types of stimuli in our lives and how this reaction can create the difficulty many individuals experience in making sustainable behavioral changes in the areas of their relationships, their health, and their habits, as well as in how they communicate with others.

Where It Begins

By the time we are seven or eight years of age, billions of sensory motor stimuli and messages have informed us how to respond and adapt to our environment in order to provide the best possible chance of survival. The rudimentary brain and nervous system are the first to develop in the fetus at approximately twenty-one to twenty-eight days after conception. The nervous system is essential for all communication to take place between ourselves and the environment we are in. We can only *feel*, experience, and interact with our world through this remarkable mechanism that is connected to every cell in our body.

From these neurological feelings or responses come our protective strategies of how to live and survive, what to believe and value, and ultimately, how we form our worldview. These psychological perceptions are drawn from what we experience within the environment we are raised in. Our environment is both external and internal, made up of incoming stimuli from outside the self, and internal stimuli—biochemical or physiological—that send messages to our brain. These developed adaptation patterns become integrated with *personality* and have a significant effect on our behavior.

They can create successful strategies or problematic behaviors. Finding successful, sustainable ways to move beyond problematic behaviors is the focus of all behavioral change models. One important component to this neurological adaptation is each individual's level of resilience. Resilience, the ability to adapt, is what distinguishes those of us who thrive from those who "fail to thrive."

Resilience develops through genetics and environmental conditioning. Today, it is well documented that resilience is an important factor in how well we survive or are able to adapt to stressful environments. Much behavioral change research is currently focused on understanding the mechanisms of resilience and how we can foster this important conditioning. To better understand the challenge of behavioral change let's take a quick look at our fascinating and amazing brain.

How the Brain Is Wired, Made Easy

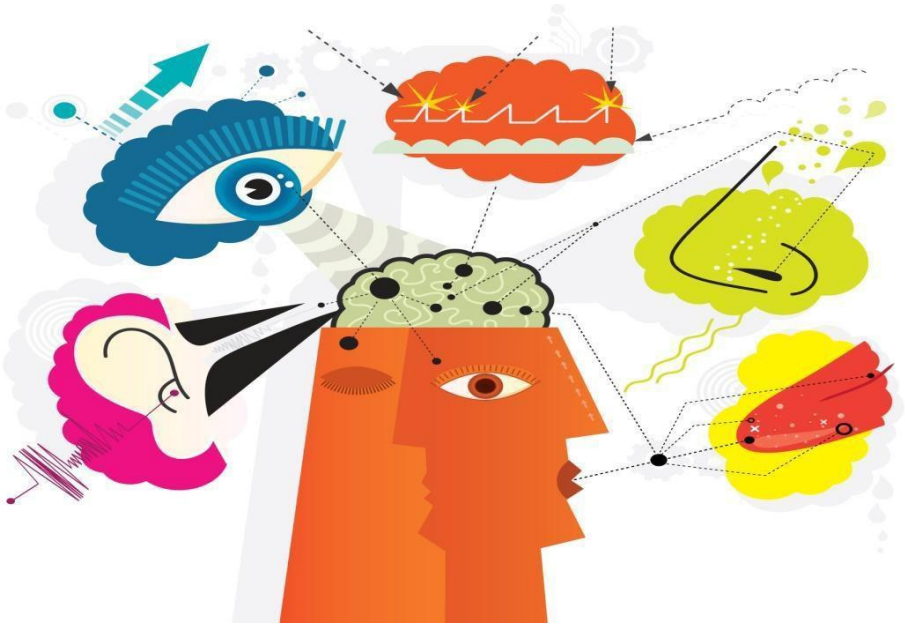
The Brain Stem

The human brain has evolved to a multi-compartmentalized structure from what is referred to as the *reptilian brain*, believed to be more than 500 million years old. This primitive neurological structure is the oldest part of the brain. It is also known as the *autonomic* or automatic component, as it is responsible for vital life support functions such as breathing, heart rate, blood pressure, and so forth.

This is the *coma* brain, which keeps our bodily organs functioning without benefit of the thought process. This part of the brain *thinks* in a different way from how the intellectual brain does, and it is this specialized *thinking* or interpreting of the sensory-motor information from the environment that is critical to our individual survival. The brain stem is the conduit for all sensory-motor information to and from the brain, as well as the conduit for all nerves that exit and enter the skull and body. This part of the brain is primarily involved in communicating incoming data to the thinking portion of the brain.

The brain stem could be called the *stimuli gatekeeper,* as it plays the important role of regulating the central nervous system. All sensations going to the brain and signals coming from the brain to the muscles must pass through the brain stem. Brain-stem injuries are a serious threat to survival, as this critical part of our neurological wiring affects all other parts of the brain and the body as well.

The Midbrain and the Amazing Amygdala



The midbrain is believed to be between 200 and 300 million years old. Because this brain structure is highly developed in mammals, it is referred to as the *mammalian* brain. It is strongly involved with emotional reactions related to survival and contains the amygdala. The amygdala is a highly sensitive arousal system that responds to sensory motor input and stimuli. The amygdala is often referred to as the *center of emotions.*

Visual (sight), auditory (sound), olfactory (smell), gustatory (taste), and somato-sensory (touch) stimulate this complex structure to produce a wide range of behavioral functions. It is widely connected to multiple parts of the brain and communicates reactions and various arousal responses and behaviors. The midbrain is considered the *emotional gatekeeper*.

The midbrain is affected by both neurological and hormonal stimulation. The adrenal hormone epinephrine, pituitary hormone regulator dopamine, nervous system neurotransmitter acetylcholine, and nerve impulse neurotransmitter serotonin act upon the amygdala to communicate physiological and psychological information important to individual survival. It is easy to understand why the amygdala is currently one of the most heavily researched and studied brain areas.

The Forebrain

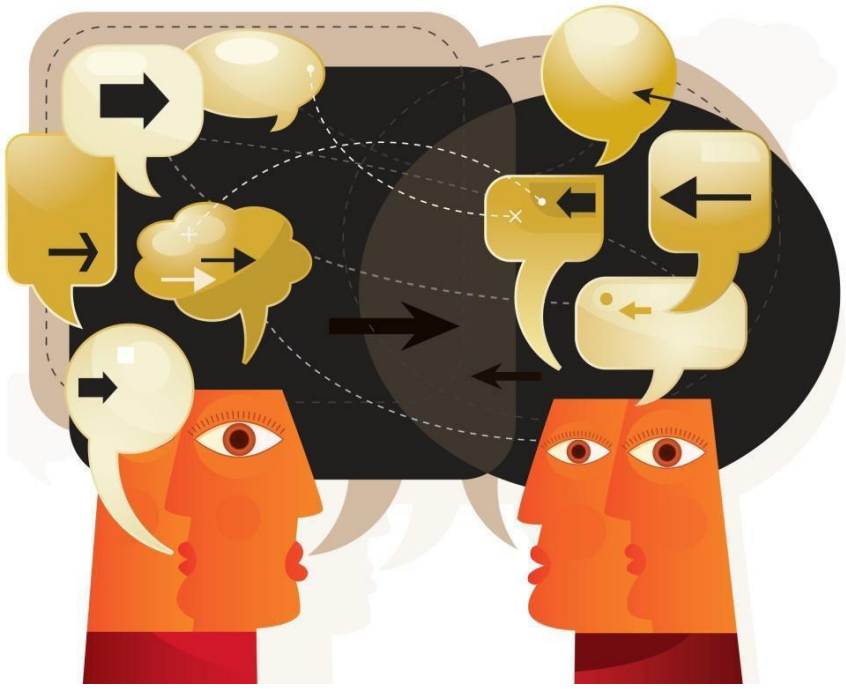
The forebrain is the *newest* part of the human brain. Our modern cortex is believed to be a mere 100,000 years old. It is the site of our intelligence, memory, personality, speech, and ability to move and feel. It contains the cerebrum, which could be thought of as the *gatekeeper of our thoughts*.

Our brains, like computers, become programmed by data input. This input informs us of our environment so we may react and behave accordingly—away from pain and toward pleasure. We respond positively to reward (pleasure) and negatively to punishment (pain).

Understanding the complexity, and at the same time the simplicity, of *brain function–nervous system–survival adaptation* helps us become more patient with and compassionate about our own behaviors. This understanding also translates into a greater patience with and acceptance of the behaviors of others.

As we become more aware of brain functions and the pleasure-pain mechanism, we can see why our behaviors may be more complex than we imagined. Many of us believe it is a matter of identifying a strategy to solve a problem and then implementing that strategy. Rational, cognitive approaches to behavioral change can provide structure and tools to work with. However, when it comes to making sustainable changes, emotions trump cognitive thoughts hands down.

Beliefs, Emotions, and Worldview



Emotions, beliefs, and worldview play a large role in our behavioral choices. Merriam-Webster Online defines *emotions, beliefs,* and *worldview* as follows:

> Emotion—a conscious mental reaction (as anger or fear) subjectively experienced as strong feeling usually directed toward a specific object and typically accompanied by physiological and behavioral changes in the body

> Beliefs—conviction of the truth of some statement or the reality of some being or phenomenon especially when based on examination of evidence

> Worldview—a particular philosophy of life or conception of the world.

These three components of the *self* strongly influence our behavioral choices as well as our attachment to those choices. New research out of the University of Michigan suggests that we base our opinions on our emotions, beliefs, and worldview and that when presented with contradictory facts, we adhere even more strongly to our original beliefs, which are rooted in our emotions.[4]

One would logically assume that factual evidence should clarify and influence a person's choices or their acceptance of, for instance, a political candidate or someone they know or their family members and so forth. Rather, the study shows that people *dig their heels in more deeply* and resist changing any of their beliefs, emotions, or views even when confronted with undeniable, overwhelming proof that runs against their position. This is another example of how our emotions and attachments to our beliefs and worldview influence our behavior more than intellectual thinking, rational judgment, or pragmatic reasoning.

Feeling and Thinking

Thinking does not change behavior. If it did, it would be easy for any of us to think we need to lose a few pounds and have our intellectual-thinking brain direct our body to make the behavioral changes necessary to bring about the weight loss. That is not to say that many individuals cannot do this for short periods of time, because we can and do lose weight or stop smoking for short intervals. Then, the majority of the time, what derails this desired change is a new stimulus of threat or fear that reactivates the stored data or unconscious memory of an event, as well as our personalized response to that data or memory.

This triggered *pleasure-pain* experience often returns us to behaviors—such as smoking, overeating, excessive drinking, or other self-soothing behaviors—we have just spent much time and effort to eliminate. This triggering is an emotional response to the perceived threat (pain) or fear. We often attempt to eliminate this fear through any number of self-soothing behaviors that will produce chemical reactions in the body that are intended to help reduce the anxiety.

At the Beckman Institute for Advanced Science and Technology at the University of Illinois at Urbana–Champaign, cognitive neuroscientists are researching and investigating emotional functioning—how interactions between various regions of the brain relate to mood, and the link between the mental process of *knowing* and our emotions.[5]

This is an exciting and fascinating area of research that will one day help us better understand how to address the emotional triggering that so often derails positive change. What is clear at this point about emotions is that this *feeling* component of our brain function is intimately and more powerfully linked to our behaviors than our knowing- or thinking-brain component.

Nature Versus Nurture

Although there are numerous theories relating to the origin and function of emotions, two of the most examined are evolutionary psychology, which views emotions as *adaptations* representing the *human psychological nature,* and the oldest but less favored nineteenth-century theory by scholars William James and Carl Lange. Known as the James-Lange theory on the origins of emotions, it says that "*emotions are feelings resulting from physiological changes.*"[6]

These two theories represent the classic *nature* (James-Lange theory) versus *nurture (*evolutionary psychology) debate. However, although there is currently no scientific certainty of exactly where in the mind or the body the physical sensation of emotion is experienced, the work of Klaus Scherer provides an excellent definition of the *function* of emotions.

Scherer says that *"the principal design and function of emotion in humans is to mediate relationships. Events which are the focus of emotions are predominately social. They connect primarily with others; those with whom we have conflict; those with whom we are attached and those with whom we love."*[7]

The James-Lange theory attributes emotions to physiology. We see that even within the womb, we are conditioned or nurtured by the hormonal, nutritional, emotional, social, and physical environment within which we are formed. Our personality, and the way we act in different situations, is also a form of adaptation—both physically and mentally. Often, individuals who did not experience a balanced or healthy upbringing may suffer from the pain of feeling they are not valued or worthy of love, or from a fear of inadequacy. They will adopt behaviors that both deny their fear or pain and create a means to elicit the pleasure and approval they need.

They may mask their feelings with such behaviors as being *the life of the party*, a great person to have a good time with, funny, charming, or easy to get along with. In actuality, their outgoing, superficial behavior is a protective adaptation to insulate them from re-experiencing the early fear of inadequacy, feelings of unworthiness, or risk of rejection through their attempt to please everyone they meet and have everyone like them.

This type of adaptation can be a successful coping strategy that produces pleasure and avoids pain. It can also prevent emotional intimacy. These are difficult behaviors to change. The pain-pleasure-reward-punishment conditioning of a prior psychological trauma, and the resulting adaptive behaviors to self-sooth the trauma, are anchored in the unconscious, survival-driven brain.

Psychology and the study of human behavior is a vast science that explores why particular experiences produce particular behaviors. There are many theories and models of therapy that offer interesting and complex explanations for human behavior. Yet the one constant in our behavioral motivation is our *primal pleasure-pain drive*. Unless we have developed an unhealthy pleasure in experiencing pain, we will always avoid it and move toward the sensation of pleasure. The unique stimuli our brain and nervous system receive define what our experience of pain or pleasure is. This pleasure-pain conditioning has a significant impact on adaptation behaviors and drives many of our relationship behaviors.

Our behavioral choices express how we have uniquely crafted our individual survival adaptations to avoid pain and pursue pleasure. The longer we live with these adaptations or behaviors, the more difficult it becomes to change them.

The Behavior of Others

Most of us are well aware of how behaviors can create both pleasure and fulfillment or dissatisfaction and conflict. Trying to resolve conflict and the desire to understand others in addition to having our own needs met are two compelling aspects of human relationships. Have you ever caught pieces of someone's conversation on a cell phone or gathered with coworkers around the water cooler?

Once the pleasantries are out of the way, what is generally the most common topic of discussion? It is about relationships and specifically about the *behavior of others* in those relationships. Rarely do we discuss our own behavior as a problem. It is usually the behavior of others we are concerned with.

If we are candid, most of us will remember those times in a relationship when, after the *honeymoon* period was over, we tried to make the other person change his or her behavior—especially once we saw their behaviors as flawed or not reflecting the feelings or appreciation we desire in a partner.

In his *Psychology Today* magazine column, psychologist Steven Stosny, PhD, talks about what couples are really arguing about in relationships:

[Cohabitating] couples don't fight about what they think they fight about. It's not "the big [issues]" they identify in surveys: money, sex, kids, or house-work. … Lovers fight when they believe their partners don't care about how they feel. They fight about the pain of disconnection.[8]

Most of our behaviors, as Stosny points out, are generated by our primal mechanism of wanting to be cared for and valued. As we explore human behavior in the upcoming chapters, consider how the underlying messages of our behavior in relationships stem from this primal mechanism. We don't stop and think, "How am I reacting to what she said?" or "Why am I behaving this way?" We react to the situation emotionally, *not* intellectually.

Health and Behavior

In November 1996, a fifteen-year study by the Harvard School of Public Health was published that showed that up to 70% of all chronic disease is generated by our behaviors.[9] Smoking, overeating, lack of exercise, and excessive use of alcohol are the leading contributors to heart disease, obesity, high blood pressure, type 2 diabetes, cancer, and stroke.

Many of us know that our lifestyle and health behaviors lead to the chronic conditions we suffer from, yet we cannot seem to change them. The same thing is true for our relationships. It appears that our survival adaptation behaviors for avoiding pain and seeking pleasure are so deeply embedded in us that, ironically, we avoid change to the point of endangering our lives.

Harvard psychology professor Robert Kegan, PhD, the William and Miriam Meehan Professor in Adult Learning, cites a recent study that concluded, *"Doctors can tell heart patients that they will literally die if they do not change their ways, and still only one in seven will be able to make the changes. They want to live out their lives, fulfill their dreams and watch their grandchildren grow up. These are not people who want to die. And, still they cannot make the changes they need in order to survive."*[10]