

Announcer:

Bulletproof Radio, a state of high performance.

Dave Asprey:

You're listening to Bulletproof Radio with Dave Asprey. This is part two of a really impactful, just amazing episode series that I'm just so pleased to be able to do.

Dave:

This is with Dan Brown, and he's the author of 20 or books. He's actually studied molecular biology, religion, psychology, and he's been on the faculty of Harvard for 40 years as an associate clinical professor of psychology, and he teaches hypnotherapy, and has for many years. Along with multiple languages, Buddhist meditation master, translated original texts. And one of the most amazing people that you probably heard on the show, as well as just a master of how we get to be who we are, and things that are going on that we don't know about.

Dave:

These are the things that are likely to stop you from being bulletproof, but the things you might not even see until someone shines a light on them for you. And Dan has spent a lot of his life creating that kind of light. Dan, welcome back to the show.

Dr. Daniel P. Brown:

Thanks for having me back. Pleasure to be here.

Dave:

We're going to talk, in this episode, about some of the things we just couldn't fit in the first episode. And you talk about relational maps, about the ways people connect with each other. I want to go deeper with you on that. What is a relational map?

Dan:

There are two relational maps that develop. The first one develops around 18 months, which is prior to the emotional development of narrative memory. So it's called the attachment map.

Dan:

We have four types of attachment. Secure attachment with an interplay between healthy attachment to the caregiver. And the paradox with human attachment is the more secure you feel, in your attachment relationship, the more you become independent and explore the world. So, the more secure you are, not the less secure you are, the more you become independent and explore the world. That's called secure attachment.

Dan:

There are three versions of insecure attachment that could also develop. One is where the attachment system is taken offline. And that's called dismissing attachment in adults. And they don't do relationships. They might stay in a relationship, but they don't talk about themselves, they don't bring their feelings into the relationship. They can't be real in the relationship. They stay remarkably distant even if they're in a relationship. So they've deactivated the attachment system and they become sort of

pseudo-independent in life. So they sort of exaggerate the exploratory behavior, but not in the context of healthy attachment. What they can't do is explore in the context of relationships.

Dan:

The mirror opposite of that is somebody with anxious preoccupied attachment. And they have a weak sense of self, and they get over-involved in the state of mind of the other. So they get even chronic compulsive caretakers in relationships at the expense of themselves.

Dave:

Codependent types of people?

Dan:

Yeah, they get very clingy in relationships. So what they have is a weak sense of self development. So they've deactivated the exploratory system and they get over-involved in the attachment system. They get very clingy in relationships, and very jealous, and they can't let go of a relationship. What's missing is they can't grow and they can't develop a sense of self, in the context of a close relationship. So they've deactivated the exploratory system.

Dan:

The third type of insecure attachment is they've deactivated both the exploratory system and the attachment system. That's where you see with mostly people who have traumatic attachment. So it's an impossible dilemma for them is that the source of the detachment is also the source of fear and terror. So they can't have a soothing relationship. So they expect to be hyper vigilant and fearful of the attachment of relationships, but they can never settle into a relationship and develop a sense of some self.

Dan:

Those maps are in place by about 18 months.

Dave:

Wow.

Dan:

But that's prior to [inaudible 00:03:59]... We don't have insight into them. So that prior to what we call a narrative memory, but they're what we call an active memory. We live them in our relationships. One of those four types. Once that map develops, chances are it's very stable. We have 40 [inaudible 00:04:16] active studies showing that these maps, three out of four of these maps will stay the same for over 40 years without changing them. So if you have a dysfunctional insecure attachment, the likelihood is you're going to play that out one after the other in every relationship you're in.

Dan:

And there's a second map that comes up later. This happens in the third or fourth year of life where you're taking much more complex messages and emotional ideas, and develop limiting core beliefs about what's possible and what isn't possible in relationships. And that's called the CCRT map, the core confidence relational theme map. So the way that works is you take a history of all the intimate

relationships in a person's life, they maybe like 15 intimate relationships in course of their life. You sit back and read it like a musical score, and what you see is that all over the map is one or two essential themes, infinite variations on the same two themes. And so, it affects how we select relationships. We select relationships wanting something, and rather than getting that, instead we create the same core conflict over and over again. It's either one or two patterns usually.

Dan:

And so, there are two types of relationship dysfunction, attachment relapse and core confidence relation theme maps. The simple way of putting that is the difficulty with relationships or difficulty within relationships.

Dave:

Okay.

Dan:

So, if people have an attachment problem, that supersedes the other problem because they don't connect easily. But once they connect, even if they have secure attachment, the likelihood is very high you're going to keep selecting for the same old kind of dysfunctional relationship one after the other.

Dan:

Relationships are purposeful. We select unconsciously to play out the same old conflict over and over again rather than working it out. So in therapy, you want to build a new map, you want to build a new attachment map or core confidence relational them map. A positive map, that a person can make that as their basis of operation and operate out of that positive map. That's what we do in psychotherapy when a relationship disturbance exists.

Dan:

There's two main types of relationship disturbances. We have attachment disturbance and [inaudible 00:06:12] disturbance.

Dave:

What is the fastest way, typically, I know it can be individual, for someone to create a new map?

Dan:

We call it positive remapping.

Dave:

Okay.

Dan:

So if you just... This is from most of my Western psychology conflicts, where I have a background in Buddhism. And in Buddhism [inaudible 00:06:33] theory of mine that says that the techniques to work with positive states and techniques to work with negative states are not reducible to each other. So if we work with techniques to work with negative states and we're successful with that, we've got a relative reduction of or maybe even absence of negative states. But the absence of a negative is not a

positive. So too much of emphasis in the Western psychology is on trying to develop looking at dysfunctional maps, and if we do that, we can reduce the noise in the system but that doesn't make a positive map.

Dan:

So what we did is just move in a totally different direction. We have to really visualize ideal parents, if they have an attachment problem. If they have a disorganized attachment, or anxious preoccupied attachment, or dismissing attachment, have them develop ideal parents, that they do all the right things in attachment. That they do that visualization over and over again, once a week in a session, and maybe every day on their own. Is we make a recording of the session and they practice it, because any practice takes learning. It takes learning to practice it. We have to practice it many times. If they do that over and over again, between six months and two years later they've made a new relationship map, a positive map and it's stable. And they begin to make that the basis of operation, and then whatever dysfunctional patterns they've just developed, they don't go there anymore because the feedback from the positive state works much better.

Dave:

Wow. So it can be done pretty quickly.

Dan:

Yes, and the research on core confidence relational theme maps shows that you change it in about 30 to 50 hours. That's the average time it takes.

Dave:

All right, 50 hours is doable. There's kind of a reputation in the West, people say, I sat on a couch once a week for 20 years and not that much changed. But I felt better for a little while each week. And is that a problem with techniques?

Dan:

It's a problem with techniques. I did that. I spent nine years on the couch, four times a week. It's a problem with techniques. I did that. I spent nine years on the couch, four times a week, and by the eighth year I decided I can't go on. This is too expensive and too much time. So I told my analyst I was going to stop at the end of the year. And she didn't take that seriously at first, and then she began to take it seriously, and then she began to use all the things she'd taken notes on over the years. Explain it to me, and I said, "Why didn't you do this earlier? This would've been much more useful." We just finished another year.

Dave:

Is there an inherent conflict of interest when you pay someone per hour to help you get better?

Dan:

No.

Dave:

No? Okay.

Dan:

I don't think so.

Dave:

I don't feel like any healer I've ever met would ever consciously say, "Oh, I'm going to slow down your healing to make more money." But I've heard people say that, and I think it takes a lot of work and desire to become a therapist. It's actually hard work, even just to do your own therapy to become a therapist. So I don't think that's a real issue. But man, I sure hear people talk about it.

Dan:

Yeah, but the better therapists don't do that. I've done therapy ... I've taught therapy for 50 years now.

Dave:

Yeah.

Dan:

So now what's important for me is that there's a clear vision I have of where the person needs to get to, and I don't waste any time getting them there. So I move them along the map, because as soon as they get better and be on with their, it's better for me and better for them.

Dave:

Yeah. And plus you like to help people. Wouldn't you like to help more people, not less people?

Dan:

Yeah, that's true. I agree with you.

Dave:

So that makes good sense. I just wanted to ask that on behalf of listeners who've asked me the same thing. When you talk about being your best self, which is also a little bit different than some of the therapeutic, let's fix what's wrong with you, perspectives. You've done a pretty incredible amount of work there. So what does it take in order to be your best self?

Dan:

I trained in the 1970s and '80s. And I was at the University of Chicago in the 1970s and my mentor was Erika Fromm, the great hypnoanalyst. I worked with her for 36 years. And she died when she was 92.

Dave:

Wow.

Dan:

It was a long relationship. She was my main clinical mentor. And she did very short term focus work with visualizations and hypnosis, and got people better in short periods of time. But then when I did my first clinical placement at Michael Reese Hospital, a big south side hospital in Chicago, my clinical supervisor was Heinz Kohut, who pioneered, developed self-psychology.

Dave:

Wow.

Dan:

He came from an analytic background, and I spent nine years on the couch with a self-psychological analyst. It takes forever to do that work. And I was left with putting together two worlds, the short term world of visualizations with hypnosis, and the long term world of self-development. And at some point I tried to forge the bridge between those two worlds. And I read something about self-esteem development, it came from [Joe Samber 00:10:51] at the [Hempstead 00:10:52] clinic in London. And he said that self-esteem is the developmental linkage of positive emotions to the self-representation. That's a developmental outcome. What does it mean? It means that when we develop a healthy sense of self-esteem, if I conjure up a sense of Dan-ness during the day, will you conjure up a sense of David-ness? If you have healthy esteem, you conjure up against the backdrop of positive feelings. But I never developed to have healthy self-esteem, if I conjure up that sense of self, I conjure against the back drop of no feelings. Or I conjure against the back drop of a bunch of negative feelings.

Dan:

But what I can't do is conjure up against the back drop of positive feelings. That's what's missing. So where does that come from, developmentally? I began to look into that, and it came from what we call early [inaudible 00:11:33] great functions of attachment, which is what I call express delight. Healthy parents are totally effusive, all the time, about everything that their kid does. It's a positive sense of joy for them and delight. But they're not only delighted about their child, what everything the child does. They're delighted about the child's being, and they're constantly effusive about that. That gets internalized. So the child figures out, at some point, that all that positivity is about themselves, itself. That forces that link. And the reason why chronic self-esteem failure, which we call losses in the West, is such an epidemic in the West is that we don't do that. Because parents are too busy. So they involve themselves in the job of parenting, but not the joy of parenting. That's what's missing in this culture.

Dan:

And that's why narcissism is such a rampant disease in Western culture.

Dave:

What's the fix for that?

Dan:

We begin to think about how to make a positive emotion through the sense of self. We did that with the [inaudible 00:12:27]. Just focus on self-development. Then focus on self-development in the context of attachment. What we began to see, is if I say to you is [inaudible 00:12:34] scene. If you were really good about yourself, especially good about yourself, and have you imagine that scene now, you can do that. You associate it with some activity. You're doing something, and as long as you're doing that you can feel good about yourself. You can generate the feeling, and you can generate the feeling with some intensity and you can hold it for some period of time. So I have you do that many times over and practice it during the week. So you're actually intentionally generating positive feelings, that is directly associated with the self. That's how specific the protocol is.

Dan:

Once you can do that, readily, then we'd have you focus on generating a good feeling about yourself with the context of relationship. That's harder. You hold that. [inaudible 00:13:10] what we call skill development. Generate that sense of self, and a positive sense of self more quickly, more frequently, for longer duration, more immediately. Frequently and for longer duration. And the task is that you have to keep generating it, over and over again, and hold it for longer periods of time. Then we give you homework assignments to generate it during the day, and see how long you can hold it for. You would keep a journal, of how long during the day you can hold it for. And at some point, you would hold it more during the day than not. Then everything shifts at that point. You're holding a good sense of yourself, most of the time. Not all of the time, but most of the time.

Dan:

And then we'd at look at the times that they can't hold a good feeling about themselves. And rather than analyzing that and saying these are the negative patterns, we would positively rewrap right over those patterns. We'd say okay, now put yourself in a situation where you normally don't feel good about yourself, and hold a good sense of yourself and see how long you can hold it for, in that situation. So your demand becomes to hold it in situations that they're less likely to hold it in.

Dan:

And the last part of the protocol is what we call shifting from doing to being. Holding a good feeling about yourself, just in who you are, without you having to do anything to get it. Once they get that and they can hold it most of the time, they've repaired the esteem. Takes about six months to two years to work out that protocol. But if what we're talking about is repairing chronic self-esteem failure in that period time, that's worth it.

Dave:

Six months to two years, and you're doing, what, one hour a week of working with a therapist.

Dan:

Yeah, one hour a week. And then after a while, we cut it down to once a month.

Dave:

Okay.

Dan:

They do visualization more on their own. So they get the sense of they're doing it, rather than I'm doing something to them.

Dave:

So it's a dedicated practice, that someone chooses to do. And I've had friends who have gone through this, and you see a massive shift even in the first few months. But by the time it's done, they're ability to have relationships is very different than it was before. And they seem much happier. Much happier than people who, maybe, haven't focused on that kind of a path. And they're sort of saying, yeah, I go to a therapist for some times. But it seems like there isn't that training that happens outside of the room. And what you're doing there is, really teaching awareness. It sounds almost Buddhist. What's your mind doing right?

Dan:

Well we're teaching-

Dave:

What's your mind doing right now?

Dan:

We're teaching [crosstalk 00:15:18]. Yeah, well there's no more specific than just to being aware of it.

Dave:

But to change it and to put [crosstalk 00:15:23]-

Dan:

Whether you're putting a positive map, or you're making a positive maps. That's what unique about these protocols.

Dave:

Wow. How would someone go about finding a therapist capable of doing what you just talked about?

Dan:

We have a website called The Attachment Project. If you go on The Attachment Project there's a relations quiz. It's actually a self-report quiz that's widely used in the clinical field. It's called the express of close relationships. And they can take it and get a self-score. There's a much more accurate version than self-report. Because some self-reports are accurate. People have believing that they're securely attached, and they're really not. So the best way of doing it is what we call the adult attachment inventory, and that takes about two hours to administer and score. You need somebody who's trained and certified in that. But I do that a lot on this website. [inaudible 00:16:09]. I've done over a thousand of them, scored over a thousand of them now.

Dave:

Wow. It's something, if you're listening to this show and you're saying, all right, I don't have the best relationships. You might want to work on hacking that and getting the data, knowing what's going on. And for me, understanding that the stuff that happens in the first 18 months, and then at age three to four, that that is such a big explanatory factor for why you may think the things you think or feel the things you feel about yourself. I picked this up when I was about 30, I learned that. And I actually started crying at the time, because it was one of those things where, like it wasn't my fault. I had a lot of negative self-talk, and you realize, okay, it's changeable. So you're listening to this going, I've mastered my physical body, and I'm doing the Bulletproof diet, and I'm doing my breathing exercises. All of those are good things. But if this stuff is there, it's not like you chose these things. It's that they're in there.

Dave:

But knowing that it's changeable and it's not 25 years of suffering changeable, but it's changeable in a year or two. I find it pretty liberating, and Dan I think you're one the masters of getting into what's really going on in there, and mapping this out.

Dan:

Well in the last 20 years, there's been a movement in positive psychology. I happen to think that positive states are far more important to mental health than negative states. But the field has come from focusing entirely on negative states, and I don't think that's useful.

Dave:

It's kind of built into our society. You look at Google, their original tagline was, don't be evil. But they could have also just said be good. One of those is positive and one of those is negative. And I like the be good side of things.

Dan:

I agree with you. You focus on a positive map and then you get feedback that that's working for you. You don't go back to the negative map, because it doesn't work as well.

Dave:

Okay, here we go. Is there a visualization or some type of exercise that people could actually hear on the show, today?

Dan:

Let's just say more things about the sense of self before we do the visualization.

Dave:

Okay. Then let's talk some more about the sense of self.

Dan:

There's a line of self-development, it starts with self-definition, knowing who you are, knowing what qualities represent the best self. Then the next thing is what's called self-agency. What makes you feel like you have an impact on the environment around you, the world around you, in general. And then more specifically, that you have an impact on relationships with others. You're actually eliciting the kind of responses you want in relationship with others. So that's called self-agency. And the third is self-esteem, feeling good about yourself. So if we look at those three as developmental steps in a variance sequence, so the first would be know who you are. Second would be knowing who you're about, what you're about. And third would be feeling good about yourself. And those are separate developmental levels.

Dan:

So if we have somebody with a significant lack of self-development, a serious significant self-pathology, we have to find out where they are on the map. Some people, they have a sense of, they lack self-esteem but they have a good sense of agency and a good sense of self-definition. And what they'll do is they'll use agency to compensate for the fact they don't have any esteem. So they'll always having to do new things to accomplish things. They never hold a good feeling about themselves and it's just in their being. We see a lot of people like that, who are very successful in what they do. They can never feel good about themselves.

Dave:

So you can be really insecure, don't feel good about yourself. So you want to prove things to others. So you go out and become very successful in the world, because you're sort of fighting against that internal feeling you have.

Dan:

You're always trumping yourself up. No pun intended.

Dave:

I see that a lot. A lot of entrepreneurs, I think, have that. You know, that I'm going go out and prove to the world that I'm better than I think I am.

Dan:

Or they don't hold a good sense of themselves in their be. We say they have chronic self-esteem failure. They're always having to do. So they're unhappy because they're always having to do something new. And they're only successful to the extent that they were successful in any kind of project. But they can't just feel good about themselves and hold that as a back drop of their positive feeling, all the time. That's what's missing.

Dave:

Yup.

Dan:

So they're never self-content. They really feel good about themselves.

Dave:

Yeah, it's rough too. Because once you get on that path, if you're doing a whole bunch of work things, when are you going to find the time to do the work on yourself? And that tends to be the work that deprecated. So then you never get out of that trap, because you're just too busy to pay attention to yourself.

Dan:

And then there are people who have largely self-agency failures, and they'll be successful and loving the work. They don't get together and do things that have any impact on the world around them. And then we have people who lack self-definition, and they don't even know who they are. They never developed a sense of self, a strong sense of self in any way. Just lost. So those are three failures. Failure of self-definition, failure of self-agency or failure of self-esteem.

Dave:

What causes each of those failures? Is there an age or is there an experience? Why is this happening to us?

Dan:

Because it has to do with attachment.

Dave:

It's all about attachment. Okay.

Dan:

There are five great functions of attachment, and we talked a little about that last time. Safety and protection is the first. Careful attunement to one's behavior or one's state of mind is the second. Comforting, verbal reassurance and physical connection when they're feeling upset, emotionally upset. The fourth and the fifth are the ones that are relative to the sense of self. The fourth is expressed delight, which is related to self-esteem development. And the fifth is that we see the children who were healthy attached, the parents bring out the best in their self-development are the champions of the sense of self in the child. They know how to foster the right conditions for the children to explore, and to discover, and make little mistakes and discover who they are.

Dan:

The opposite of that is a parent who have agendas for the child. They've decided who the child is supposed to be, to meet their needs. What Alice Miller called the drama of the gifted child. So you have grown up to be, fulfill your parent's needs and you never develop your own sense of self sense, independent of them. So we have a lot of people out there who have needs to have their kids turn out to be a certain way. So that's what causes a failure to self-development. Or we have parents who let their children explore. But they get too busy to get involved in that. So their kids grow up with lack of esteem, and do things to prove themselves to the parents and everybody else. So it's a failure of attachment, ultimately.

Dave:

Wow. So either you got to explore, but you didn't have a parent exploring with you. Which is going to create a problem. Or you didn't get to explore because you were already on a path.

Dan:

But the message I want to give is these things are very fixable. We can [inaudible 00:22:35] precise, in terms of what's wrong and what [inaudible 00:22:36] visualizations, and we can correct them.

Dave:

That's why this interview had me so excited, why I wanted you to be on again. It is fixable, and it's fixable in a reasonably short period of time. So that if any of those three descriptions fits, you, listening to this show... Looks, it's sort of like, I have a problem with my shoulder. You'd go to a physical therapist and you fix the problem with your shoulder. This is a similar type of healing. Where it's diagnosable, it's quantifiable, and you do the work and you get better. Versus just living with the pain or the suffering all the time. And it's big work. I mean you change enough people who don't act this way, it changes all of society. It's a really big thing.

Dan:

But you see, we come from a tradition in psychotherapy, where most therapists don't get the training. We have 50 years of good outcomes research. That's what did Harvard Medical School in a continuation of the last 30 years. So I actually get paid to read all the outcome journals. So almost diagnostic category, we know exactly what to do. And maybe the exception is schizophrenia. We know exactly what, every other psychiatric diagnosis that we have, we know exactly what to do with those patients.

And we can get them there. But most people, they go into therapy and never read any of the literature. They just say, we'll just talk about feelings, and they think that's therapy.

Dave:

I'm so happy you're saying, so that I don't have to. Because you have the credentials to say that credibly. But it is exactly what my observation over, my much shorter, life has been. Is that talking about your feelings probably isn't going to solve them, if they're not doing what you want them to do. And so you have this map of what to do about it. Are you frustrated, that more therapists aren't using this set of tools?

Dan:

No, it's gotten better.

Dave:

It's gotten better.

Dan:

Well I think what always frustrates me is that people were very carefully, clinically trained do this on their own. They get all about supervision, they [inaudible 00:24:38] new things. But then what happened, about 15, 20 years ago, is that to make insurance cheaper, make treatment cheaper, they took the people, not with PhD but with Masters levels and they got them all licensed, across many states. So now they watered down the credentials, so they get cheap therapy. And that's what we're paying for now. So really, the good therapists was a smaller number. We can't discriminate anymore. The general public doesn't know how to tell the difference.

Dave:

Well, help listeners know, other than going to your website. It's attachmentproject.com. You have a list of people that you certainly have looked at. How would a lay person know? All right, I've got someone who's really, seriously-

Dan:

Get a consultation. Go to a senior therapist, who's got really good credentials, and get an opinion from him about who to see and what to focus on.

Dave:

How interesting. Okay. So even if you have to travel a little bit, or do something remote. But find someone who's incredibly well credentialed and say, look at these people I'm thinking of going to, and sort of get a referral out.

Dan:

Well let them do the intake and focus on the what the map is, somebody who knows how to do this stuff. And they'll say, this is the person you should see, and this is the approach you should take.

Dave:

The idea of getting a map, to know what type of therapist to see, is really cool and really useful. So thank you for offering that to people listening. And I'll just-

Dan:

In any city, there are well known therapist who are well credentialed. Everybody knows who they are. Go to one of the senior people, and then ask them for a hour just to do a diagnosis, an intake. And they'll connect with somebody. That's the best way to do it. Trust their seniority.

Dave:

That is so smart. Just getting the right diagnosis. I really wish I had known that when I was doing all of my work. Because what a lot of people end up doing, is they're looking at cost, or insurability, or they're sort of stumbling around. But even if you do pay out of pocket for one hour of someone's time, to help you know what type of person to go to, that may be in plan. That can make a big difference. Or maybe it's out of plan, and you do that instead of alcohol for a while or whatever else. But you make it work, because short period of time, relatively short. You know, a year isn't that short. But it's not that long either. And man, the difference in freedom that comes from knowing who you are, and having self-agency, and being able to have healthy relationships is life changing.

Dave:

What percentage of people, do you think, it takes having done this kind of work, having their attachments healthy, does it take to sort of shift the nature of society? You mentioned there's so many narcissists running around today. The world seems pretty crazy. Do we need 20% of the world to be self-attached, for things to shift?

Dan:

Well I teach a course on leadership. I teach a course, a few versions of it. I teach on performance excellence for the surgeons and primary care docs at the medical school. Which I've done for 30 years. One other version of that I teach for judges. Mostly the judges in Massachusetts, the superior court judges, the district court judges and the family court judges. And I have a third version of that for executives. I teach all around the world. So the issue of how we train leaders is important to me. I think we need to train leaders who are psychologically mature, who are not self-absorbed with themselves and they can see the larger vision in life. And lead us in a positive direction, for the sake of not their own self-importance. For the sake of the larger vision in life. Most people who are leaders operate under a larger vision in life. Maybe a spiritual vision, or some of them have a large civic vision of life. But there's a lot of research on developing a larger vision in life, and that's important.

Dave:

It's a leader issue. Then, getting our leaders to do this work. Yeah. Would you encourage senior executive teams, at larger companies, to actually pay for their executives to go do this kind of work?

Dan:

Yes, because... I used to work as a consultant for a large multi-national company, international company that own several large companies. I won't mention the name of it.

Dave:

Sure.

Dan:

But it was helpful to him. Because if he hires somebody to put in one of his parent companies, that's a lot of money. I remember a story where he was hiring somebody he really liked a lot, and the guy was a mover and shaker. But nobody else liked this guy. And he said he was a prisoner of war in the Korean war. And they'd want to know how fragile he was, because he talked about his prisoner of war background. But he definitely moved things. So I did an evaluation on this guy. We flagged all the self-report scales. So I said to the head of this company, I said, "I hate to bust your bubble here, but I don't think this guy's telling the truth. I think he's fabricated a whole story about his life."

Dave:

Wow.

Dan:

And he looked into it with private investigators, he said, "You know, you're right. He didn't even have any military history. He was never a prisoner of war. Thank you. You saved us a lot of money here."

Dave:

Wow.

Dan:

So that's the kind of thing I'm talking about.

Dave:

I ran into that early in my career. We had a guy who claimed he... Actually, the same thing. He was a special forces or Navy SEAL, or something like that, at a senior position in a company. And it was just not true, and I actually, I found out. And I'm 25, I'm like, what do I do? And this guy's like 10 layers up in the org. But with my sense of justice and all, I flagged the issue, confidentially, with a couple trusted members of the executive team. And said like, "I know this to be true, because I work in computer security. And computer security people know these things." And yeah, it actually happens. People completely-

Dan:

Absolutely. It took a certain courage, on your part, to persist with that. Most people would not do that.

Dave:

Well, I didn't get fired for it. But he didn't get fired either, which was a sign that our leadership was not healthy.

Dan:

Really respect what you did with that.

Dave:

Thank you. I was frankly scared shitless. But it was the right thing to do.

Dan:

But you're persistent, because it was the right thing to do.

Dave:

Yeah.

Dan:

Most people won't do that.

Dave:

Yeah.

Dan:

I appreciate that.

Dave:

Oh, well thanks. I'm not sure what motivated me to do that, thinking back on it.

Dan:

Because it was the right thing to do.

Dave:

It was the right thing to do. So I'll go with that. There was probably some ego in there, too. Like, you know, that's not right. But it was a sense of justice and it was the right thing to do. I am with you there, in that I believe that it is worth it for senior executives and companies to help support each other, and to help support leadership. But in this case, if you are hired to do work, or to do an analysis of this guy, how does that work with HIPAA and disclosures? I mean did the guy agree that he'd work with, and that he'd share with the boss?

Dan:

Yeah. I get that upfront. I have to get those [inaudible 00:32:24] upfront. Otherwise, I won't do the work.

Dave:

So you just have them sign a contract that says, yeah, you're going to talk with Dan and whatever you share is fair game, kind of a thing.

Dan:

That's what I do.

Dave:

Okay. Very cool.

Dan:

[inaudible 00:32:35] full consent. Invest in full consent is transparency.

Dave:

Yes, 100%. I really like that. And I do believe in investing in that. If you have someone who's great at what they do, and they're leaving bodies everywhere they go at work. Either you fire them or you help them get better. And if it's one of these problems, and it's an hour of diagnosis, if they're committed to doing the work, you work with them on doing the work. If they have the courage.

Dan:

One of my colleagues, we did several years of research together, was David McClelland, when he was at Harvard. He's now deceased. But he did work on motivations, said there's two types of people in the world. Those who are power motivated and those who are [affiliatory 00:33:10] be motivated. And the affiliatory motivated people are not interested in power. They don't take positions of leaderships, but they should. People who are interested in power and controlling aren't sensitive to other people's needs, but they like to be in positions of power. So we always select the wrong people. We should take affiliatory people and train them to be leaders. Because you know they have a big heart, and they would be much better, be more sensitive to leaders. But we always select people who are power motivated, and it doesn't work very well.

Dave:

I've heard of some smaller tribes in Africa, who would select their leadership that way. Where the people would select the person who least wanted to be the leader, because they were the most affiliatory. And the people who really wanted to be leader, like, no, you're going to lead us in the wrong way. We don't want a power monger there.

Dan:

You know exactly what I'm talking about.

Dave:

Yeah. I always approve of that, because it just feels sort of bad. Someone who really wants that, well why do you want that? I can't imagine a worse job than being president. But maybe that's just me.

Dan:

I ran two departments at the medical school in the 1980s. I hated it because I wasn't power motivated. I just never liked the job. But people, certainly, I treated them well [inaudible 00:34:19]. And they could be different from me, and they could disagree with me, and that was perfectly mine.

Dave:

I bet they liked it, even if you didn't. And I think that may be the-

Dan:

That's true.

Dave:

Inherit problem. Well, I'm not sure which of those two spectrums I fall in. I pretty much don't care greatly for the power of leadership. But I think it's important to create an organization of good people, who can do good work. But that means I have to hire people who are good at the power thing, to help manage all that. Otherwise, it becomes a little too much for me.

Dan:

You want to do an exercise. Right?

Dave:

Yeah. Let's do an exercise, about the best self-visualization. I really want people, who listen to this, to get just a drop of the feeling. Or maybe more than a drop of what we're talking about.

Dan:

Okay. So settle back into your chair.

Dave:

All right. And by the way, if people are going to participate along with this, I'm assuming they need to not be driving.

Dan:

Tune out the world, so you can't be driving, no.

Dave:

Okay, good deal. So if you're listening to this show while you're driving, or at the gym, or something, you probably want to save the rest of this episode for when you can sit down in a quiet place. All right, I'm going to go first. Tell me what to do again.

Dan:

Settle back and focus on your breathing. Just observe the natural rhythm of your breathing. When you breathe in the eyes will open, and when you breathe out the eyes will close. Just get used to that now. Completely absorbed in the rhythm of your breathing. And tuning out all of the distractions, just focusing on the breathing. And now, when you breathe out, put a little more emphasis on the exhalation. So you'll make each successive out breath a little longer, a little bit slower than the previous one. Just a little bit. As you begin to slow your out breath, you'll get increasingly calm and relaxed. And at some point it's totally natural to keep the eyes closed and focus more inward. And when you focus more inward, you'll feel even more calm and relaxed. Completely absorbed in that calm, relaxed state. Focused without distraction.

Dan:

While you're in this focused, relaxed state, free of distraction, bring to mind a time in your life where you felt, you operated out of your best and strongest sense of self. A time when you brought your best self to whatever you were doing at the time. Let's revisit that in your memory right now. And the more you reflect on this scene, the more you generate that feeling of that best self, that strong sense of self, right now, once again. So soon you'll begin to really feel it. Feeling it more clearly and more intensely, the more you focus on it. And notice that you're coming with a back drop of a good feeling. Your best

and strongest sense of self. And the more you hold this in your awareness, continuously, the more you see that there's certain qualities that you associate with this best self. And you can give voice to those qualities.

Dan:

Suddenly to yourself, as you identify each and every one of them. But most people can identify three, four, five qualities associated with their best sense of self. So begin to do that now. Your best, strongest, most independent sense of self. The more you reflect on this, you'll identify certain characteristics of that best self. And these will become more and more familiar to you than when you reflect on them. So see if you can identify three, four or five of these qualities of your best self. Soon the scene's going to change. You'll imagine something in your current life, it's important to you. You're going to imagine bringing that best of sense of self right into that situation. You operate under that best self, in that situation.

Dan:

So now imagine the scene, where you're bringing that best sense of self into this current situation. Notice how that changes everything about your experience, about that situation. Notice how your best self approaches but your ordinary self doesn't. Familiarize yourself with the best of sense of self in this situation, and all the influence that that has. How different that is from your usual sense of self, the ordinary sense of self. Now the scene's going to change again. This next scene, imagine yourself at some time in the future. A time in the future when you've developed this best sense of self, so it's even stronger and more independent. And you've flushed out all the qualities of that best sense, even more than you have done today. You're going to imagine a scene where you operate out of that best sense of self in the future. Notice how that affects everything in your life.

Dan:

So now create a scene, you operate out of that best and strongest sense of self, in all the ways that you can. Get a taste of what that feels like. Hold that sense of self, clearly in your [inaudible 00:41:28]. Take a deep imprint of it, in your mind. So you hold this as a vision, that you can grow and develop to. Now let it go, relax. I'm going to count from five to one, and you're going to awaken yourself, at which point you'll be fully awake and settled with your experience. You need to awaken now, five. Four, waking up more and more. Three, two, one. Fully awake and settled in your experience.

Dan:

So it's rather simple visualization. You imagine some situation where you operate out of the best sense of self, and most people readily identify that. Maybe your golf game, maybe your tennis game. Maybe something you did specifically with some group. Maybe some teaching that you do. Whatever. And then we transfer it to the current situation, where we want to bring that best sense of self into the situation. This is an exercise that I did with the judges, it's one of their favorite ones. They might be really on their game with golf or tennis, but they bring that state of mind onto the bench. They're much more present and they don't get bored as much. So imagine them, bringing their best sense of self into the courtroom more and rehearsing that, and developing over time. And they don't get so bored and they do a better job of being on the bench.

Dave:

That makes so much sense. It's funny you mention teaching. Because I've learned when I'm doing this kind of work, I always, you go with the first thing that flashes into your head. Even if it doesn't really make a lot of sense. Because your unconscious throws that up there for a reason. So I haven't thought of it in a long time. But the first time I got a standing ovation, at the end of teaching a class at the University of California. Which is a great honor, as a teacher, when your class is like, oh it was that good. That, all right, I'm there. So that was what popped into my head. And you mentioned teaching as one of the things. So there you go. You must be psychic on top of everything else. [inaudible 00:43:32] doing this for a while.

Dave:

Now this is an example of the kind of things that you can do in a therapeutic session. And I think there are some things you can do with audio files and various things online. Is that something that you do with The Attachment Project? I mean are there Dan Brown audio files? You can listen to you guiding people through this.

Dan:

There's a lot of them on the website. We're putting everything on the website.

Dave:

Got it.

Dan:

I did a two day course on performance excellence, and I have a seven day immersion course for executives.

Dave:

Well these are courses.

Dan:

But they're mostly structured visualizations. So you can do the whole set of them. We try to take the best of emotional growth and put it on... [inaudible 00:44:26] out of the office and put it on the website, where people can actually do the exercises.

Dave:

I think that's really powerful, in terms of doing a course and just doing the exercises separately. And maybe that's just built into the courses. After our first interview, I was so impressed and I said, "We got to do a second one." I asked your team if you guys would do a discount for Bulletproof Radio listeners, and you kindly said yes. So 20% of the online course at attachmentproject.com. Go to attachmentproject.com/dave. Because I think this is really worthy, and it's worth your time. If you're thinking about, what should I do, while I still have time at home? Or what should I do, even if I'm really busy? Attachmentproject.com/dave, and just use the code Dave. And if you have any of the things we've talked about now, and newflash, if you're alive and you haven't done a lot of personal development work, I promise you, you do. I know that I had a whole bunch of these things going on in my life. And I think I've succeeded in many of them, and there's still other ones where it's a continuous process of growth.

Dave:

So I'll tell you, if you've never done any kind of personal development stuff, you need to get going on that. And you need to get going on it because you'll be happier, and you'll like your life better. But maybe more importantly, everyone around you will like it as well, too. So it's your impact on the world changes, when you do the work.

Dan:

I'm trying to take 50 years of what we've learned in [inaudible 00:45:53] psychology, and put it on the practical exercises that people could do. In terms of structured visualizations.

Dave:

In fact, that's the best way to put it. You guys all know the ROI, the return on investment for this show. My deal with you is if you don't get more out of Bulletproof Radio, the hour or so you spent listening, than an hour's worth of time in value. You should unsubscribe. Just stop listening. And I mean that. Same thing, don't go to my blog if it's not worth your time. Because I'd rather you do something that's more useful. So same thing here. You want 50 years of knowledge and sorting out all this stuff, compressed into a very short period of time. It's a very high ROI on those courses, and the same thing if you decide to read one of Dan's books. One that's appealing to you. Same thing, it takes a very long time to write a book and a very short time to get the knowledge out. So in terms of you becoming enriched, that's how I'd recommend you do it. And Dan, I want to thank you for walking me through that exercise and for sharing it with listeners.

Dave:

And guys, that discount code is just there for you to save money. There's no financial arrangement or anything like that. It's just because it's worthy. And I think you're worth the time to listen to this episode, and to create this episode. I think you're worth the time to go out and do the work. And I just I really appreciate you, appreciate your work, and thank you.

Dan:

[inaudible 00:47:14] interview. I really enjoyed being with you.