The Lighter Side of Changing Negative Scripts: The Benefits of Humor and Laughter Robert Brooks, Ph.D.

At an all-day workshop I conducted several weeks ago I discussed the theme of negative scripts, a concept I have addressed previously in my monthly web site articles. I explained that a negative script involved saying or doing the same thing over and over again with family members, friends, co-workers, or employees even though our previous efforts did not result in a positive outcome. I noted that we persist with this behavior, believing that we have right on our side and that others should change their actions. I would guess that most, if not all of us, have engaged in negative scripts—who knows, perhaps someday a negative script gene will be discovered.

As I usually do at my presentations, I offered several humorous examples not only of negative scripts but also of the ways in which people attempted to alter these scripts. A woman in the audience approached me during a break and joked about some of her own negative behavior involving her children. She said she planned to change these scripts immediately, which she realized was easier said than done. She observed that many of the examples I offered about parents, teachers, and mental health professionals (including myself) engaging in and/or changing their negative scripts were quite humorous. She added that given the sadness since September 11 it felt good to laugh.

I told her that I found making presentations very therapeutic, often lifting my spirits even in the midst of some periods of noticeable sadness since September 11. It was therapeutic for me to feel that my presentations might be helping others and I agreed with her that it was healthy to be able to laugh, especially about common human vulnerabilities to which we could all relate.

I shared with her that at a couple of my workshops immediately following the tragedy of September 11, I began my presentation by mentioning to the audience that my style was to capture the humorous side of our behaviors as a way of assisting us to reflect upon and change our negative scripts; I emphasized that in using humor I did not intend in any way to deny the pain, anger, and anxiety we were experiencing but rather to recognize and appreciate our strengths and human qualities and to help us feel more

receptive to learning new things. I offered this explanation to those in attendance since I did not want anyone to interpret my use of humor as a sign of disrespect to the many victims of the horrible events we had recently experienced. When I finished telling this woman what I had said, she responded with an obvious but powerful remark, "As long as humor is used in a compassionate, caring way, it brings people together rather than pulling them apart."

Her comment resonated with me. Many years ago I wrote a chapter about the therapeutic use of humor. I emphasized that as long as humor does not border on sarcasm or is not used in anger, it serves to create an environment in which people feel more relaxed and less defensive, and more willing to make changes in their lives. Research indicates that the use of humor is implicated in both our emotional and physical well-being and has also been found to be an important feature of resilience. In a documentary that Dr. Sam Goldstein and I completed in association with our book "Raising Resilient Children," Dr. Emmy Werner, a renowned researcher on the theme of resilience, observed that while humor is not something that parents can actually "teach" their children, what they can do is to serve as models. Children will learn more about humor from us in our role as models than any formal lessons we might provide.

While changing a negative script does not always contain a humorous component, I have been impressed with how often it does. The "startle" quality of the change frequently results in disbelief on the part of other people involved, a disbelief that triggers laughter. However, not only does a change in script contribute to others feeling more comfortable, what I have personally experienced and what others have reported is that the individual changing the script also feels better. Why would this be?

I believe when people modify a negative script they are displaying insight and courage. They are saying, in effect, "What I am doing is not working. Before I can expect others to change, I have to recognize that I have control over only one person in my life and that is myself. I must make the first changes." The recognition that "we are the authors of our own lives" is a liberating, empowering experience. As I described in my web site articles about "stress hardiness," a focus on what we have control over is a hallmark of feeling less stressed. If we continue to search for happiness by expecting

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someone else to change first, we can almost guarantee that we will remain stressed and unhappy.

In addition, this liberating feeling is reinforced when we actually alter our behavior and see that we need not remain shackled to old scripts. Trying on a new script, perhaps a little awkward initially, soon nurtures an enhanced sense of self-worth and a greater ability to laugh at oneself but not in a deprecating way. A mother who changed her script by becoming less critical of and more complimentary towards her children said to me with a twinkle in her eye that her "kids didn't know what to make" of her new behavior. One of her children even asked, "Are you taking something we don't know about?" She jokingly said to me, "Hey, my kids have driven me crazy for years, now it's my turn to drive them a little crazy." In a more serious tone she added, "When you change the script and use humor, it gives you a better perspective of what is really important." Obviously, the positive aspects of her change of script were reinforced by the love she demonstrated towards her children and their recognition of this love.

There are a few caveats associated with modifying our behaviors that we should be aware of since they can lessen both the effectiveness of our changes and the humor that often accompanies these changes. One caveat is not to use humor when you are angry, since it will be experienced as sarcasm. A second caveat is that we should not attempt to change our script to such a significant degree that we are unable to become accustomed to the new script, feeling "it just doesn't seem like me and never will." In other words, our new scripts should be realistic, achievable, and comfortable. A third caution is that we should not expect other people to respond immediately, enthusiastically, and positively to our changes. As a matter of fact, some parents report that when they alter the unsuccessful ways in which they have responded to their children, their children's behavior actually worsens. This is not unexpected. Children love to test our resolve; if we persevere with the new script, typically our children "begin to see the light" and change theirs.

Select one or two scripts to change in your own life and as you begin the process of re-writing these scripts see if you can include some lighter, humorous elements even if the topic is more serious. Dr. Steve Sainsbury noted in an article, "The ability to find humor in stressful situations can dramatically lighten everyone's load. For example,

while suturing a patient, I routinely tell jokes and ask them to do the same. By the time the procedure is completed, we have laughed and smiled together with a minimum of tension."

As you reflect upon the lighter side of changing negative scripts, let me share a few from my life and clinical practice. I do so not to poke fun at others ("people living in glass houses should not throw stones") but to capture the vulnerabilities, strengths, and resilience we possess and the fun that we can have when we take the first step towards modifying our behaviors.

A mother called me a day after attending an evening presentation I had given for parents. She was laughing as she told me that as she was driving home from my talk she reflected upon how negative she had become in her relationship with her two teenage sons. She said that the morning routine had turned into a predictable "horror show" with her reminding her sons about everything they had neglected to do or had done wrong. "By the time they left for school, I was angry and frustrated and kept wondering when would they finally change. I thought about what you had said and realized that I was expecting them to change without making any changes of my own. I wondered what I could do differently."

After they had gone to bed, she wrote each a "love note," which she placed on the kitchen table so that they would immediately see the notes at breakfast. In the notes she voiced regret about the level of tension that had developed in her relationship with them. She added that she had neglected to tell them how much she admired and loved them. As she told me what she had written, her joy was evident. She started to laugh again. I asked what was so funny. She answered, "Their reaction." After reading the notes, they came running to her room and with smiles on their faces they asked her, "Are you looking for a nice Mother's Day gift?" They all began to laugh. She said to me, "Why didn't I think of this before? I haven't had this much fun with my sons in a long while." A few weeks later she called to say that she was still having a good time.

A teacher told me that the staff room at her school had become a place for people to "moan, groan, and complain." She observed that rather than serving to "let off steam," the complaining reinforced a negative attitude. "All we do is talk about uncooperative kids and uncooperative parents. A few of us realized that we felt worse rather than better

after spending time in the staff room." This teacher, who had attended one of my workshops, said, "We were really stuck in a negative script." She discussed the situation with several colleagues and they decided to try an "experiment" that fortunately, was agreed upon by the entire staff (she said she felt some went along to indulge her). On two designated days a week no one could utter a negative comment in the staff room; in addition, on those two days staff would take turns bringing in a cartoon to hang up. They also agreed that if anything negative were said, the guilty party would be assessed a 50 cent fine.

I wish all changes of scripts would prove so effective and accompanied with so much fun. She said that after a few fines were collected, the staff became increasingly positive. Cartoons began to appear even on the three days that had not been designated as days for positive talk and cartoons. Before long, a third positive day was "officially" added and consideration was being given to include all five days of the workweek. "People walked in and out of the staff room with smiles on their faces. I wonder what the students thought was going on." Then in a more serious note, she said, "It was such a simple change but what a difference it has made."

In a similar fashion, a division head at a corporation began to write brief notes of appreciation to his staff. He called to tell me, "Just like you warned, it was obvious that some of the staff wondered what my ulterior motive was. I walked by three of my staff and when they saw me they became quiet. I knew they were talking about me, probably wondering what I was up to. I just smiled and walked by. The atmosphere has really improved even if some might still be wondering why the change."

I attended a national conference for children with special needs and met with the heads of chapters from different cities and states. Raising a child with special needs can at times be a trying and exhausting experience. Parents can fall into the trap of focusing on their children's problems rather than their "islands of competence." It can also lead parents to question their own parenting skills. One chapter reported a way to combat this possible negativity. Rather than use their meetings to talk exclusively about their and their children's problems and frustrations, they changed the script and developed a regular practice that they titled, "A Buck a Brag." Parents had to pay a dollar to say something positive about their child.

While one might wonder if this were simply a gimmick, what it accomplished was to prompt parents to take what I call a "helicopter view" of their children's lives; from this new perspective they could more easily notice not only their children's struggles but also their strengths. They could gain realistic hope. Apparently, parents were soon vying to pay \$5 to offer five brags about their children. It became a solid fundraiser. As the "Buck a Brag" practice was described, obvious joy filled the room. Several parents told me later, "What a wonderful idea."

As a final illustration, I want to share one of my favorite anecdotes of changing the script that involved my role as a therapist. It occurred a number of years ago (someone in hearing the story half-jokingly said, "It took place in your young and reckless days"—perhaps some truth to this statement since for a few years I did not have the courage to tell any of my colleagues about the event fearing they would question my sanity).

I was referred a 14-year-old boy (I will call him Jim) who had gotten in trouble with the law and had a choice of going to a detention center or seeing a therapist. Jim's parents and lawyer convinced him that seeing a therapist was the wiser decision. I did not expect him to greet me with open arms and say, "I've been waiting all my life to meet you and to be in therapy." However, I was not prepared for his opening comment.

"You are the ugliest looking shrink I have ever seen." His parents had warned me that he could be very provocative although they noted that his provocations represented his attempt to maintain control of a situation. They said he actually had a warmer, more humorous side that he often hid. My work with Jim occurred at a time in my career when I was becoming increasingly intrigued by the concept of negative scripts and the power of humor to change such scripts. Thus, I felt what did I have to lose as I responded, "My looks are really that bad, huh?"

Jim endeared himself to me when he answered, "Worse than bad!" Not to be thrown off kilter, I said, "Well, because you think I'm ugly and we have to work together, would it help if I went into the closet so that you wouldn't have to look at me?" (I should note that I had a large closet, complete with light and chair.)

Jim looked a little surprised (wouldn't you be surprised if your therapist went into the closet during a session) and then a smile crossed his face. He said it would help a

great deal, prompting me to go into the closet. On three or four occasions during the next 45 minutes he asked if I were still in there (it was unclear where he thought I might have gone; perhaps he thought there was a secret door). While sitting in the closet I imagined all of my former supervisors saying, "How creative Bob is. He certainly knows how to avoid a power struggle with an angry, resistant adolescent."

At the end of the session I opened the door and said it was time to go. Jim departed with an amused look of his face. The following session Jim informed me that I was still ugly and requested I return to the closet. I asked if his judgment might be inaccurate and whether we should seek a second opinion. He said no to both questions and I went into the closet. Now I imagined my former supervisors saying, "Bob had so much promise. Look what's happened to him. I hope he has a good malpractice insurance policy."

Prior to the third session I wondered if I should just tell Jim the closet was off limits. Jim "saved" me when he said, "You know, you're not quite as ugly as I thought you were at first. You don't have to go into the closet." I breathed a sigh of relief. Therapy progressed. His parents were correct—Jim did have a warmer, more humorous side. No doubt I could have formed a relationship with Jim without going into the closet and please understand, I am not suggesting that therapists (or others) use this particular strategy. Given the same situation today I'm not certain I would go into the closet again (as I mentioned earlier, someone said it was during my younger, more reckless days). However, knowing that Jim had a sense of humor and wishing to avoid a power struggle, I saw it as a viable way of changing the script and bringing some humor to therapy.

I should emphasize that I felt a little better about my journey into the closet when a few months later I read an article about humor in therapy written by a senior clinician. He noted that he went into his closet after a woman patient complained that she could not "stand his face." His maneuver was even more daring than mine since his closet was small and dark, while mine was large and had the luxury of a lightbulb.

There are many other stories I can tell. Perhaps for a future article. One of the main points I wish to make is that each of us should search for humorous ways to change negative scripts in our personal and professional lives. I am not suggesting that we deny our feelings of sadness or run from difficult situations but rather that we also place the

spotlight on positive change and laughter. In this regard I read an article quoting psychiatrist Donald Black who said, "The ability to appreciate humor and to laugh are generally signs of emotional well-being, and might be as good for us physically as they are mentally. For years people have been writing about the benefits of physical exercise and how people can improve their health through this. Maybe the same effects would be found with laughter if it were studied."

Humorist Art Buchwald, never at a loss for words, noted, "Dr. Black cites many studies that indicate what takes place physiologically in the body when we laugh, but there is still a lot of scientific work to be done before the Food and Drug Administration will permit it to be used in large doses."

My best wishes for a happy and satisfying 2002 filled with times of humor and laughter. We all need such occasions.

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