
BEYOND
PIPE DREAMS
— AND —
PLATITUDES

*Insights on Love,
Luck, and
Narcissism
from a
Longtime
Psychologist*

Geraldine K. Piorkowski, Ph.D.

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Insights on Love, Luck, and Narcissism from a Longtime Psychologist

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Introduction

WHEN I RETIRED as a clinical psychologist after more than fifty years of practice, I wondered: “What have I learned from all those varied experiences?” I had worked with people of various ages, races, cultures, sexual orientations, socioeconomic levels, professions, and geographical locations. In the mix of clients over the years was a nine-year-old pickpocket with a wide, girlish grin that lit up her face; a slew of lawyers, a number of whom were suicidal; a circuit court judge with family problems; a few physicians trying to resolve their romantic lives; a beautiful, light-skinned African-American model who was rejected by her family for not having dark-enough skin; a fifteen-year-old boy who accidentally shot and killed his brother; alcoholics of all kinds; and a politician running for statewide office whose wife accused him of domestic abuse. While such differences in descriptive trappings may seem profound, the communalities are what stand out for me.

Among the settings I worked in were mental health clinics, psychiatric hospitals, a home for delinquent girls, medical schools, private practice, and universities. In these diverse places I performed many functions, such as teaching, writing, administering tests, directing programs, supervising students, and counseling individuals as well as couples. I worked on

the East Coast and the Midwest; in small towns, medium-sized ones, and big cities; in small clinics as well as giant hospitals that stretched over many miles. In all these varied worlds, no matter the differences in local culture, skin color, tattoos, or garments, people were more alike than different.

Besides the obvious physical similarities, psychologically people have the same needs, fears, defensive strategies, hopes, and dreams. While each of us has a different viewing lens for perceiving the world, a lens shaped by unique biological, familial, and cultural factors, we are fundamentally the same. We all want to be loved, appreciated, and understood. We want to matter to our friends and family and be special in some way to all those with whom we come in contact. We want to be self-sufficient and competent. We want space and time to be autonomous in pursuit of our dreams. We want to belong to a group, neighborhood, church/synagogue/mosque, or community—a place of welcome and acknowledgment. All of us want to feel safe in the neighborhoods where we live and be reasonably stress free. We also want some challenge in our lives, some novelty to reduce the boredom of ordinary days. And we want to feel good about ourselves; we want to walk around with our heads held high and a liveliness in our steps.

People everywhere are afraid of the same kinds of things. We are afraid of being assaulted, either physically or verbally. Because both physical and psychological dangers are threatening, one to our lives and the other to our identity, both kinds of peril create fear, tension, and anxiety. Contrary to the old children's rhyme we used to chant, "Sticks and stones may break my bones, but names will never hurt me, names, especially insulting ones, hurt a lot. Betrayal, bullying, criticism, humiliation, manipulation, and rejection, all of which bruise

our fragile sense of self, also hurt a great deal.

We are also afraid of having our inadequacies and our failings brought to light. When we are teased, taunted, or made fun of, our imperfections are made visible for all the world to see. We feel exposed as inadequate in some way and feel very vulnerable; we are not as strong, smart or “in control” as we would like. Because vulnerability is scary and psychological assaults hurt, people develop fears about these threats and build self-protective mechanisms to feel safe.

Trying to be safe, we may hide in our rooms or in our heads; lie to ourselves or others; counterattack the assaulters or carbon copies of them in person, by mail, e-mail, or social media; keep others at a distance by obnoxious behavior; or pretend we are very talented, wise, good-looking, or famous. The hiding can be literal, as when a teenager spends all his free time in his room, or symbolic, as when a doctor, lawyer, or engineer keeps her personal self out of sight and remains ensconced in her professional role. Rather than acknowledge hopes, dreams, failings, and inadequacies to close friends and family, professional recluses rely primarily on work-related skills to navigate erratically the world of intimacy and relationships. In this manner, they hide from their vulnerability in an attempt to feel safe and in control.

Hiding in our heads is a way of viewing the world from a vantage point above the fray. We can think all kinds of negative thoughts there, and nobody is the wiser. In this aerie in our heads, we are safe from counterattacks and free to be ourselves. Intellectuals, writers, academicians, and other creative souls are often in this group, because thinking feels a lot safer to them than feeling. Emotions are often intense, chaotic, and unpredictable, whereas thoughts tend to be logical and manageable.

Other ways of hiding include addiction to computer games. There, ensconced in technology, we avoid the unpredictable world of people by focusing on dragon slaying and war games. In that way we maintain a pseudo-connection to others with computer identities that do not risk much vulnerability and yet, satisfy our desires to be winning and in control. Addictions of all kinds are reliable hiding places that often last until physical dysfunction appears on the scene.

Other protection strategies include power-hungry maneuvers such as boasting, bellicose rants, and dictatorial strategies. Braggarts fill the conversational air with their accomplishments in hope that no one will notice how empty they feel. Similarly, bullies and dictators try to convince their worlds that they are powerful, when underneath it all they often feel helpless and insignificant. Angry, belligerent people who are adept at keeping people away are more comfortable with solitude, because closeness to others is fraught with emotional danger. Being betrayed, criticized, disappointed, insulted, and/or rejected are just a few of the perils they try to avoid.

While all the preceding observations have been underscored many times in my clinical and personal worlds, several new insights have emerged from my experience, some of which are counterintuitive, and others run counter to the prevailing culture in the United States. A new insight gleaned from my years of clinical practice contradicts the American culture's focus on the power of positive thinking. In contrast to this popular notion, I think it is safe to say that positive thinking is not always helpful. Platitudes (trite remarks used too often to be interesting or thoughtful) and happy talk do not prepare us for disasters lying just ahead. Every cloud does not have a silver lining, nor is there a pot of gold at the end of every rainbow.

Because the world is filled with all sorts of unhappy events, from disappointments and failures to losses, thinking only positive thoughts is delusional. Trying to maintain a happy face while tragedy engulfs us is unnatural, akin to trying to laugh when our hearts are breaking. Like Pagliacci, the clown who was intent upon making others laugh while tears streamed down his cheeks, we shortchange ourselves when we fail to deal with negative events and emotions.

Whenever there is heartbreak, no matter where it is coming from, the best way of getting through it is by acknowledging the sadness, disappointment, humiliation, or anger and then working through it. In a healthy person, the processing of negative feelings goes through phases, much like the waves of emotion that accompany grief, until we arrive at a personal resolution that uniquely fits us. The problem arises when people get stuck in negativity and can't move beyond it. In chapter one, titled "Positive Thinking Isn't All It's Cracked Up to Be," the limitations of positive thinking will be examined.

Another example, which was conveyed dramatically in a few words by a patient, jarred me when I first heard it. After weeks of catatonic behavior (severe motoric immobility that appears robotic and trance-like) followed by a psychiatric hospitalization, an African American man, who was forty years old, intoned, "Madness is better than sadness" as his first words upon recovering. When he was asked what he meant, he responded, "When you're mad you can do something, but when you're sad you can't do anything at all."

At this time in our culture when violence permeates the American scene in so many ways—there is video violence, domestic violence, street violence, school violence, and workplace violence—it is difficult to see how madness can be better than sadness. However, what the patient was

communicating clearly is that anger is energizing and leads to action, while sadness is immobilizing and induces helplessness. Most of us would prefer to feel alive, in charge of our lives, and full of options, rather than depleted, stuck, and without possibilities. In chapter two, titled “When Is Madness Better Than Sadness?” the differences between daily, run-of-the-mill anger, narcissistic rage, and chronic anger will be explored.

Another cultural misdirection is our culture’s obsession with romantic love. By way of scores of dating sites flourishing on the Internet, we run blindly toward the Promised Land of Eternal Love. We buy romantic novels, read manuals devoted to orgasmic ecstasy, and watch sophomoric movies filled with hormone-saturated teenagers groping their way to fulfillment. And yet, all this cultural energy devoted to love’s arousal and maintenance doesn’t alter the reality that romantic love (sexual feelings and emotional closeness) is basically an illusion. Because it is fueled primarily by fantasy, novelty, and emotional arousal, romantic love is almost impossible to sustain. Unless it is replaced by a quieter respect, admiration, or affection or contains some of those ingredients to start with, romantic love quickly dies and fades away in the light of reality. Chapter three, titled “Romantic Love Is Mostly an Illusion,” will look at the fragility of romantic love.

Another idea that has emerged for me over the years is that vulnerable people are easier to relate to than assertive, self-confident ones. Vulnerability is an openness about feelings, successes, failures, strengths, and inadequacies as well as hopes and dreams. While our society imbues self-confidence with high status and desirability, and it is clearly invaluable as a personality factor, vulnerability is more appealing and more likely to foster intimacy. Vulnerable people are more

readily trusted, nonthreatening, and likeable, whereas super-confident individuals earn our respect and admiration. We look up to confident people (they are our role models), but we are less likely to regard them as our best friends. Chapter four, titled “Vulnerable People Are More Likable Than Super-Confident Ones,” will focus on the reasons why we are so conflicted about vulnerability, even though it is an appealing personality stance.

Other new understandings gained over the years that will be covered in subsequent chapters include the following:

Chapter Five: You Can’t Make Anybody Do Anything. While punishment and torture work to some degree, they tend to create long-term resentment. In addition, all of us possess a degree of autonomy that cannot be manipulated under any circumstance.

Chapter Six: Luck or Chance Has Been Badly Underrated. Most of life (one’s family, schoolmates, friends, teachers, roommates, romantic partners, and job prospects) is a function of timing and chance. Talent and hard work play significant roles in our achievements, but luck or chance is at least as important, if not more so at times.

Chapter Seven: A Smidgen of Narcissism Adds Joy and Spice to Life. Healthy narcissism embellishes personal achievements with delight and enhances lovability with charm. It provides the *joie de vivre*—the joy of living—that adds just the right amount of zest to ordinary life.

Chapter Eight: Empathy and Healthy Religion Go Hand in Hand. Empathy enables us to relate to others with care and compassion, while religion at its best provides a unifying, other-centered philosophy of life that reinforces our place in the universe alongside, not in opposition to, other people.

Positive Thinking Isn't All It's Cracked Up to Be

WE LOVE POSITIVE people. The optimists are among our most admired, cherished friends. Seeing the world half full of joys and pleasures and not half full of disappointments is a blessed personality trait that makes it easier to get up in the mornings. As for the people at the opposite end of the continuum—the whiny, complaining ones, we avoid them whenever we can.

One of my all-time favorite humorous stories is about identical twins, one of whom was an optimist and the other a pessimist. Psychologists studied them to determine whether optimism and pessimism are influenced by the environment in any way. As part of their experiment, the psychologists put the pessimistic twin in a room full of toys and the optimist in a room full of horse manure. After an hour, one of the psychologists opened the door to the room with the pessimistic twin and found him crying in a corner. When asked why, he said he was crying because he was thinking of all the poor children in the world who had nothing to play with. When they opened the door to the optimist's room, they found him

whistling and burrowing through the manure. When he was asked why he was so happy, he said, "With all this horse manure, there must be a pony in here somewhere."

For parents, other relatives, and teachers, the optimistic twin would be a delight to be around, while the pessimistic one would require lots of tending. In addition, children prefer being around their optimistic peers, who are popular and well-liked. Being able to see the positives in any dark, dismal situation is clearly an asset for individuals and those around them. If it rains on a carefully planned picnic or parade, for example, the person who has an alternate plan can save the day. Optimism is correlated with creativity, popularity, and self-esteem, among other factors.

LIFE IS NOT A BOWL OF CHERRIES

What is wrong with all this optimism and positivity? Nothing at first glance, except for the fact that optimism and positive thinking do not deal with all aspects of reality, and not dealing with reality can have negative consequences. Life is neither "a bowl of cherries" nor an endless stream of sunny days and happy moments. Reality has a dark side that needs to be confronted when we suffer pain, rejection, disappointment, loss, disease, death, and/or catastrophe, and for these things, happy talk, whistling in the dark, or putting on a happy face do not work. They interfere with problem-solving and action.

While optimism and positive thinking are correlated, they are different. Optimism can be defined as the tendency to put a positive spin on people and events; that is, anticipating and/or seeing the world through a good pair of rose-colored glasses. Believing that things will eventually turn out all right—that

there are silver linings to most clouds—is a wise and healthy perspective. However, when we believe that only positive thoughts are worth having and that negative ones will lead to depression, we are caught in an untenable, self-limiting bind. Like a politician painting a rosy, unrealistic picture of the future and a salesman hustling to make a sale, we are deluding ourselves and others.

SUZY SUNSHINE AND HILARIOUS HARRY

The perpetually smiling individual who is super-saturated in positives is great for laughs but hard to be around when disappointments strike. Typically filled with platitudes, the super-happy person relies on stock phrases to offer encouragement in times of stress. “Don’t worry; there are lots of jobs out there” is meant to cheer up the recently fired friend, but it typically falls on deaf ears, and the rosy job forecast may not be true. “He’s in a better place” said to a grieving friend who just lost her husband can come across as hollow and insincere and often does little to comfort the friend. Unless the bereaved is a staunch believer in an afterlife and the departed husband was a saint, such platitudes can be discordant, jarring, and difficult to absorb. One woman who had just lost her daughter to suicide was so upset by her friend’s thoughtless remark about the daughter being in a better place that she ended their relationship on the spot.

Because people who are always positive are basically inauthentic, they are hard to relate to. Their cheerfulness in the midst of our despair further compounds our unhappiness. Not only do we feel down and discouraged because of life’s disappointments, but being around Miss Susy Sunshine results in further questioning of our self-esteem. Feeling misunderstood,

we wonder why we can't be as resilient or as positive as our perennially cheerful friend or neighbor.

Men who have a need to be funny, the Humorous Harrys of our social world, try to cheer us up with wisecracks when we are feeling down. While their humor can bring a smile to downcast faces, Humorous Harrys are not easy to talk to about job problems, social rejections, or physical ailments. When the world is not funny, the court jesters' attempts to distract us fall flat. Their intentions are honorable but their antics questionable.

The super-positive people who read self-help books on improving relations with others learn that everyone loves a compliment. Armed with this insight, these individuals dispense compliments like candy wherever they go. While the compliments initially feel great, they tend to be indiscriminately dispensed and as a result are gradually distrusted. When a compliment is given for a dirty T-shirt or a messy hairdo, the compliment loses its veracity and credibility. And with the loss of credibility is a loss of trust in the honesty of the compliment giver. The need of super-positive people to be liked clouds their judgment and reduces the likelihood of their becoming lifelong friends or partners.

THE LIMITS OF POSITIVE THINKING

Life is full of daily doubts, disappointments, and minor mishaps. From the spilled cup of coffee to the twisted ankle, life offers a daily smorgasbord of pleasures and frustrations, some obviously more serious than others. The spilled cup of coffee or the missed bus on the way to work are frustrations worthy of an emphatic "darn" without further ado. The minor mishaps do not warrant further attention;

they are just an inconvenient part of life, akin to a rainy day spoiling our outdoor plans or a long-awaited, personal phone call coming through just as we're sitting down to a business meeting.

As for the more serious obstacles or tragedies, ignoring them or forcing positive thoughts does not erase the frustration, sadness, disappointment, fear, or anger. Because strong emotions have much energy accompanying them, the emotions need to be dissipated or worked through, or the emotion gets locked into habitual ways of thinking and being. When strong emotions occur, they prepare the body physiologically for vigorous action, and when action is not possible or desirable, strong emotions ordinarily fuel negative thoughts or they spill over into tears.

Working through feelings means experiencing the emotions, not wallowing in them, and letting all the accompanying thoughts pass through awareness until we arrive on the other side. In this manner, negative emotions lose some of their energy, and we become open to other, more positive viewpoints. Self-awareness followed by praying, crying, and/or talking to others is the best way of getting through difficult feelings and moving beyond them. Unless negative feelings are processed, that is, experienced, thought about, and resolved, they can create psychological symptoms, poor judgment, chronic irritability, and/or low frustration tolerance. Road rage, which is sweeping the highways of the United States, is one current example of misdirected anger that results from unprocessed feelings that belong elsewhere.

PSYCHOLOGICAL SYMPTOMS: THE PRODUCT OF UNRESOLVED FEELINGS

One young woman in her mid-twenties came into psychotherapy complaining of panic attacks that began shortly after a one-night stand ended badly. She was intoxicated at the time and her sexual partner, an admired acquaintance, left abruptly in the middle of the night without saying a word. While she had strong feelings about her partner and his rejection, she denied that his behavior meant anything to her. Every time she saw him at a bar with his friends, though, she had a full-blown panic attack, or at the very least, a milder episode of “nerves.” Her tendency to deny stressful, negative feelings had a long history going back to her mother’s death of cancer when she was ten years old and her father’s remarriage to a cold, rejecting woman at the time the patient was in her early twenties. Psychotherapy was beneficial in helping her identify triggers and resolve her negative feelings.

Similarly, a young man in his mid-thirties had strong, negative feelings that he was unable to process at the time about his wife’s alcoholism and her affair with a coworker. Later, however, when he was divorced and dating another woman he was strongly attracted to, he began to feel upset and distrustful about his new love for no apparent reason. Only after he began counseling sessions and acknowledged the pain of being betrayed by his former wife did his anxiety symptoms and distrust of his new love abate. Currently he is happily married to his second wife with an “and they lived happily ever after” ending.

In another situation, an elderly woman in her eighties could not tolerate negative events and feelings. Often commenting that talking about such events left her depressed, she

would change the topic to a happier one whenever a negative subject, such as pain or mortality, came up in conversations. Her inability to tolerate the dark side of life left her agoraphobic (highly fearful of crowded streets and other public places) and quite depressed on occasion, even when there were no apparent causes. In addition, her Pollyanna attitude interfered with her judgment, resulting in her making poor decisions about important life events, such as the ongoing care of her mentally impaired son. She could not acknowledge the negative aspects of his condition, and as a result failed to get him the kind of medical care he needed. Her difficulty in dealing with that tragedy inadvertently led to his untimely death.

GRIEF: A NORMAL TIME FOR NEGATIVE THOUGHTS

With profound grief, which is often experienced after the death of an important parent, sibling, child, or romantic partner, it takes at least six weeks at minimum, and more typically a year, before there is an enduring resolution. Even after that, memories will be triggered throughout life by reminders of that person.

During the time we're in mourning, many different images, thoughts, and feelings, both positive and negative, about the deceased person will be experienced as we go through different stages of grief.¹ Whether we're in denial, anger, bargaining, or sadness about someone's death or our own potential demise, as when facing a serious upcoming surgery, the natural, psychological rhythm of loss keeps us moving from one feeling or stage to another. As our minds and bodies

1 Elizabeth Kubler-Ross, *On Death and Dying*, New York: Simon & Schuster/Collier Books, 1970.

start to heal, the character of our thoughts and feelings will gradually change, becoming more accepting over time. With a healthy or resilient person, there is no need to superimpose positive thinking on the process. It will occur naturally and be of our own making.

Trying to maintain a happy face while tragedy swirls around us requires super-human strength or an uncanny ability to maintain a public persona no matter what is going on personally. While such extraordinary effort is tiring, it also robs us of the needed personality resources to cope with the disaster. When all our psychic effort is geared toward pretense and not healing, we wind up in a shallow, superficial spot. We can talk “the power of positive thinking” but feel none of it. Walling off the negative feelings, we have less available energy to use healthy, adaptive coping strategies.

Clearly there are times, especially in our professional worlds, when the mask of sanity needs to prevail, no matter how heartbreaking our personal losses. When this occurs, it is important to be aware of the emotional turbulence beneath the surface and allow times at the end of the day for self-soothing and emotional expression.

UNRESOLVED GRIEF

Unresolved grief can take its toll by keeping us up at night. Insomnia, depression, and other psychological symptoms are often the residue of an aborted grief reaction. One college student came to the university counseling center complaining of intense panic reactions upon seeing middle-aged men of a certain body build on the street. The strangers resembled his father, who had died suddenly a year earlier. While the student said he felt nothing at the time of his father’s death, it

was shortly thereafter that his symptoms began.

Markedly ambivalent toward his father during his life, the college student became immobilized emotionally when his father died and was unable to sort through the myriad feelings his father's death unleashed. Ranging from relief to anger to sadness, his feelings were a complex mixture that was difficult for him to process. Eventually, through counseling, he was able to experience the feelings of grief he had buried, and along with this awareness the surge of anxiety toward paternal look-alikes disappeared.

Besides people whose significant relatives have died suddenly, recent amputees are another group with major difficulty working through grief. Whether the limb loss was necessitated by diabetes, circulatory problems, a war-time injury, or a vehicle accident, the amputation is often sudden and life-changing. Their lifestyle, athletic prowess, autonomy, and independence are all changed dramatically as a result of the amputation.

Fearing that negative emotions will be overwhelming and permanent, recent amputees, especially men, try hard to focus on their present-day challenges, such as learning how to maneuver with only one leg or walk with a prosthesis, rather than deal with grief. They do not want to succumb to "a pity party," which will further erode their self-worth, because most of them believe that men don't cry nor should they complain about life's injustices. In the face of tragedy, men are supposed to suck it up, at least that is what they have been told or led to believe.

Harry, a seventy-five-year-old amputee, talked positively during his first week of hospitalization about his amputation and the abundant family support he was receiving. But during the second week, he experienced an impulse to jump out the

window, saying that the only thing that stopped him was his fear of heights. While the impulse to jump seemed to come “out of the blue,” it was a residual of the unacknowledged grief and hopelessness he was experiencing at some level. Fortunately, compassionate staff members at the rehabilitation facility where he was an inpatient helped him come to terms with such moments of despair. While sadness and other negative feelings, such as anger, humiliation, and inadequacy, are common after a person experiences amputation, such feelings need to be worked through, or else they result in chronic depression.

DEPRESSION: AN OUTCOME OF UNRESOLVED GRIEF

The primary danger of not dealing with grief is the kind of severe debilitating depression that robs the joy out of everyday life. The severely depressed person has no energy to handle any of life’s challenges, no curiosity about any new experience, and no interest in daily pleasures, including eating. Sleeping excessively throughout the day and looking forward only to the next pain pill often define the daily life of depressed people. Their difficulty in facing grief can be compounded by their relatives’ inability to deal with negative emotions. As one recent amputee said, “No one wants to be around you when you’re sad. They only love your chipper self.”

Even well-meaning friends and relatives feel helpless when their grief-stricken friend is depressed, angry or guilt-ridden. Relieved when there is any sign that their old friend is back to “normal,” friends and relatives often prematurely reinforce the fledgling moments of positivity and inadvertently

block the grieving process.

For the grief-stricken person who is guilt-ridden, depression accompanied by suicidal thoughts and feelings can be a serious outcome. With guilt-laden depression, the grieving person feels responsible for the loss. In the case of amputation, for example, the amputee may believe that smoking caused the circulatory problem that triggered the amputation. Or if the amputation was the direct result of excessive alcohol or drug use, the amputee feels to blame for the chronic substance abuse. When the amputation was caused by diabetes, diabetics may feel guilty because they were not careful or consistent enough with dietary restrictions in their lives.

When there is grief related to the death of a significant person, guilt frequently occurs because of real or imagined actions that bereaved people believe contributed to the death. If only they had not been angry when they last saw the person or been kinder or visited more frequently, their friend or relative would still be alive. Very often these guilty deeds are minor transgressions in the eyes of the world, but to the guilt-prone, they are real sins of omission or commission. Regardless of how the behavior is judged by others, the depressed person feels guilty and worthless.

With guilty depression, suicide is a risk. Feeling that their mistakes are unforgiveable, depressed people, especially those who take on too much responsibility for life's accidents, tend to be self-blaming. In the face of catastrophes, they may see suicide as their only option. Whenever this happens, professional help, including medication, is needed because the suicidal person is stuck in a downward spiral of negative thinking and emotions.

LIFE'S ORDINARY TRAGEDIES

The heartbreaks of daily life—the unrequited love, the disappointing academic or sports performance, the failure to get a job promotion, the betrayal by a friend, and /or the sickness of a parent—strike regularly and often without much notice. They are part of human existence. There is no way around them; getting through them intact is what is important.

We have all been disappointed when we didn't get the academic grade we wanted, were turned down by the college we had dreamed about, were ignored by the attractive person sitting right next to us, or were passed over for the job we felt ideally suited for. While all these disappointments can be painful, they are equal opportunity destroyers of happiness. Without exception we are all victims of life's misfortunes at one time or another.

The best way of getting through ordinary tragedy is by processing the event; that is, acknowledging the sadness, disappointment, humiliation, or anger, and letting the corresponding thoughts work their way through our consciousness. As the negative emotions dissipate, we can then become open to other perspectives. For example, we may begin to see that we are not defined by our recent failures and that life tomorrow is full of other possibilities, no matter how difficult today's disappointment is.

Self-awareness of negative thoughts is often the jumping-off point for the development of a broader, richer worldview. And when this nuanced perspective is arrived at by the person himself, it is not a cliché but a deeply felt understanding that leads to resilience² in the face of tragedy. Resilience is that

2 E.E. Werner, *Vulnerable but Invincible: A Longitudinal Study of Resilient Children and Youth*, New York: McGraw-Hill, 1989.

ineffable quality that allows some people to come back at least as strong as before after being knocked down by life. Being able to bounce back after misfortune is a gift that resilient people appear to possess in abundance.

When the natural, healthy flow from negative feelings/thoughts to optimism about the future is bypassed in favor of platitudes, however, a superficial adaptation without much depth is likely to occur. Suzy Sunshine dancing through the tulips is unlikely to be an Oracle dispensing much wisdom. Repression of negative thoughts and feelings eliminates creativity, resiliency, and resourcefulness from its landscape in favor of superficiality.

For others trying to adopt a positive stance, the hackneyed platitudes may sound empty. The silver lining in every cloud and the pot of gold at the end of the rainbow appear too insubstantial to hang onto for any length of time. If the cliché is too flimsy to grasp, we are left empty-handed, trying alone to make sense out of an unbelievable loss or an unimaginable disappointment.

THE CHRONIC COMPLAINER

With pessimists who see disaster lurking behind every corner, their negative thinking is a way of life—a habitual means of viewing the world. For the Chicken Littles of the universe, every sunny day is viewed as a temporary respite from the dark gloominess of life. Seldom finding pleasure in a glorious sunset or a magnificent piece of art, they tend to judge most things as imperfect—as flawed fundamentally. Their unhappiness permeates most aspects of life, coloring their world a dark gray. Their negativity is chronic, almost ingrained, and palpable.

When we meet a chronic complainer on the street, we hesitate to ask our culture's most common question, "How are you?" We hesitate because of how predictably the complainer, without much regard for our time or interest, responds with a stream of maladies. We are thus conflicted about how to greet this person. When we finally inquire about the complainer's well-being, we are bombarded by a lengthy discourse, in which we learn more than we ever wanted to know, for example, about the intricacies of esoteric diseases. Every ailment the complainer is experiencing is given its due with much detail and flourish.

Chronic complainers adopted negativity long ago as part of their personalities. Their dark viewing lens was shaped by imitation of role models, many catastrophes, or a lifelong pattern of failing to deal with anger. In the first instance, parents and other caretakers were embittered by life's disappointments, passing on their cynicism and bitterness to their children. In many daily occurrences, these parents conveyed to their children a negative, hopeless perspective on life.

In other cases, complaining became habitual as a result of one disaster after another. For example, the father in a family may have lost his job, leaving the family struggling financially, while at the same time, the mother may have become ill and unable to care for the children. As a result of such extreme misfortune, the children would be highly stressed trying to handle neglected parental duties along with their own school responsibilities. Juggling cooking, household chores, and baby-sitting with schoolwork can create bitterness that finds its outlet in nonstop complaining.

In still other situations, chronic complaining and cynicism began as a response to repressed or suppressed anger. Unable to express anger directly in their families, these children spent

their time daydreaming angry scenarios, participating in video war games, and/or reading crime stories. The parents in these families were often bitter themselves, but they refused to allow their children to show anger. Often constrained by childrearing and religious beliefs, these parents were unaware of the contradictions between their behavior and their expectations regarding their children's conduct. They punished their children for expressing anger while doing so with much anger. By behaving in this way, they modeled the very behavior that they were punishing.

IN SUMMARY

For chronic complainers and other chronically negative people, exercises in positive thinking are often useful. Focusing on the positives in their lives—the people and experiences that are beneficial—can be a way of changing the habitual course of their thinking. In addition, being grateful for life's blessings is a healthy pursuit for all of us that can create humility and goodness in the world.

However, positive thinking is not the cure-all for all of life's disasters. When positive thinking bypasses the processing of negative events, it can limit our thinking and stifle internal resources. Happy talk, for example, often short-circuits our ability to plan for disasters that are lying just ahead. In addition, not working through negative feelings can lead to anxiety, depression, other psychological symptoms, alienated relationships, and impaired judgment.

Poor judgment occurs when the negative aspects of a situation are ignored rather than addressed, for example, when a starstruck lover pays no attention to the repeated rebuffs by his beloved and continues to pursue her relentlessly, or a

parent turns a blind eye on the excessive drinking and/or poor health of a family member rather than upset anyone. Denial of negative symptoms also leads people, especially men, to ignore bodily signs of illness, which results all too frequently in disability or early death.

Instead of excessive reliance on denial, realistic thinking, which includes self-awareness of negative feelings and thoughts as well as positive ones, is the healthiest perspective to adopt in the long run. Because realistic thinking acknowledges the depth of sadness that can accompany major losses and disappointments, it can facilitate the resolution of grief and other trauma-related emotions for those of us not permanently wearing either rose- or dark-colored glasses.

Realistic thinking can also provide a blueprint for change, whenever change is possible. Even with unchangeable events like death, realistic thinking is often the catalyst for the initiation of worthwhile activities, such as memorial funds, scholarships, or political movements. Many of the parents who lost their children in the Sandy Hook mass killings in 2012 in Newton, Connecticut,³ for example, became anti-assault weapon activists and devoted their lives to this cause. Acknowledging and processing negative feelings—not walling them off—is the most reliable means of resolving them, which then allows us to move onto other, more positive perspectives and actions.

3 Peter Schworm and Melissa M. Werthmann, "Profiles of children killed at Sandy Hook Elementary School," *Boston Globe*, Dec. 18, 2012.