Controlling the "Mini-Adult" and "Shoulds" in Our Lives

By Drs. Rosemarie Scolaro Moser & Christina Zebrowski

rom the time we learn to walk and talk, we are socialized to learn what we should and should not do. "You should always share your toys"... "You should never touch the stove"... "You should never talk to strangers." The first "shoulds" we learn are meant to protect us and guide us, because as children we are not yet ready to make independent decisions and we are still learning about the world. Those early shoulds become internalized, ingrained, automatic recordings in our brains. This repository of shoulds creates the "mini-adult" who accompanies us when parents are not there to provide oversight. Our mini-adult helps keep us safe as we navigate

Eventually, as we transition into adulthood, we become much less reliant on our mini-adult and are ready to make our own independent decisions and judgments. There are times we may reasonably choose not to share our possessions with someone, times we want to cook and use the stove, and times we choose to smile and greet strangers. At these points in our lives, our old internalized mini-adult is not useful, so we override it, and learn to say goodbye to it. But it is sometimes very difficult to say goodbye to an old friend.

Many of us often have problems appropriately overriding the important shoulds in our lives. "I should be nice" becomes "I shouldn't say no when my neighbor asks for a ride to work, even if it will make me late." "I should respect my elders" becomes "I should give my older sister a loan to go on a cruise with her friends, even though I know she will never pay it back and its hard making ends meet." "I should be a successful hard worker" becomes "I shouldn't miss a day from work even if I have the flu.'

We collect a long laundry list of shoulds as we travel through life: "I should get into the best college," "I should have the perfect wedding," "I should be happy in my job," "I should make more money," "I should have a bigger house," "I should have kids who get 'A' grades in school," and so on.

Too many shoulds weigh us down if we are not careful. Many of these shoulds make us think we are not good enough or that our lives are not good enough. We learn to not accept ourselves as human beings who try to do our best, but will never be perfect and will never make everyone happy. The unreasonable shoulds result in unhappiness, disappointment, guilt, anger, anxiety, and depression, and they are not logical. Cognitive Behavioral Therapy or "CBT"

can help us reign in the shoulds and say goodbye to the mini-adult we have outgrown.

What is CBT?

CBT is a form of psychotherapy that works by identifying dysfunctional thought patterns (or the unreasonable shoulds) that affect how one feels and behaves. Dysfunctional thought patterns prevent the individual from living life in a productive, successful way and contribute to emotional distress, depression, anxiety, guilt, worry, and everyday stress. As a result, individuals may feel stuck, trapped, or unable to achieve their goals.

Cognitive Reframing:

CBT, the therapist helps the individual see or view distressing life events and beliefs in a fresh, new light and with a new, more rational and positive perspective. It is called reframing, just as the right frame can transform the whole look of a picture.

How does CBT work?

CBT focuses on identifying inaccurate thinking styles and helping the individual challenge and "reframe" those dysfunctional thoughts. By learning to think differently and more logically, individuals can overcome their fears and find ways to cope with stress and the overwhelming demands of their daily lives. In CBT, the therapist encourages the individual to be an active participant in the treatment process by practicing new skills, learning stress reduction exercises, completing written homework to document daily events that provoke the shoulds, and trying out new behaviors in the "real world." CBT teaches you to think out of the box, to

challenge misconceptions, to acquire tools for personal change, and to feel confident moving forward

What kinds of techniques are used in CBT?

Some specific techniques the therapist may use include, but are not limited to:

- Challenging irrational beliefs
- Relaxation education and training
- Self-monitoring
- Cognitive rehearsal
- Thought stopping
- Communication skills training
- Assertiveness skills training
- Social skills training
- Bibliotherapy
- Homework assignments

How does one start CBT?

A CBT trained therapist will first meet with you to gather information about your history and background in order to understand you better and to help you identify your personal goals. A targeted treatment plan with clearly defined objectives helps to launch the treatment. To start, therapy is usually scheduled on a weekly basis. The duration of the treatment depends on each person and her or his needs. Ultimately, in CBT, your therapist is a partner on an educational journey to help improve coping skills and emotional well-being, while equipping you with the strategies needed to meet future challenges.



Dr. Rosemarie Scolaro Moser, right, and Dr. Christina Zebrowski provide psychological and neuropsychological evaluation and treatment at the RSM Psychology Center in Princeton. Visit www.rsmpsychology.com.