

Positive Disintegration Podcast
Episode 4: Depression and Anxiety in Development

Chris Wells, Emma Nicholson, and guest Bill Tillier
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Emma: Welcome back everyone. You're with positive disintegration podcast. A framework covering your authentic self. I'm your host Emma Nicholson from the Adults with Overexcitabilities YouTube channel and the Tragic Gift blog. My co-host is our resident expert, Chris Wells, Dąbrowski scholar, and researcher, and practicing therapist. Welcome back, Chris.

Chris: Thanks, Emma, glad to be here.

Emma: How's the weather treating you in Colorado?

Chris: It finally snowed for the first time. Well, it's December 10th, so it's been cold. How are things in Australia?

Emma: Not quite that cold, but they're not exactly the sunny summer that we're used to. We've had quite a bit of rain and it's been quite disheartening and sad really.

Chris: Well, I'm sorry to hear that.

Emma: It's okay. It kind of ties into our topic today because we're talking about depression and anxiety and being sad. I think depression and anxiety is something people will be familiar with. So, Chris, tell us what we're going to talk about today in relation to that

Chris: Today, we're going to discuss how Dąbrowski saw depression and anxiety in development. Lots of people know of course, if you've heard our first episodes, you know that Dąbrowski was a psychiatrist and a psychologist and that his theory was an alternative to the mainstream. And so he didn't see anxiety and depression as mental illnesses. He saw them as positive signs of development. He saw it from a very different way than his contemporaries. And so that's what we're going to discuss today. And we have someone here to help us.

Emma: Yes, we do. We've got Bill Tillier back, and you probably remember him from our last episode. Bill received a Bachelor of Science degree from the University of Calgary and a Master of Science degree at the University of Alberta. He worked as a forensic psychologist for over 20 years before retiring and he runs positivedisintegration.com, a Dąbrowski archive, which promotes and distributes Dąbrowski's original work. Welcome back to the podcast, Bill.

Bill: Thank you very much. Thank you for having back.

Chris: So Bill, in order to prepare for this episode, I reread chapter four of your book, the developmental process and psychoneurosis. I'm glad that you're here with us to talk about this. I think you did a beautiful job in this chapter of describing the history of neurosis and psychoneurosis, talking about how Dąbrowski saw them and situating it in a modern perspective too. I'm excited to have this conversation with you.

Bill: Well, thank you very much, Chris. Today we're going to try and introduce these complicated questions and issues to the audience, in terms that they will be able to relate to because it's such a very important part of the theory. I'd like to start by giving some important context. As we probably know, Dąbrowski used a bit of a different approach that both added complexity to his work, but also was very satisfying in giving a bigger picture of what mental health is all about. The first thing I'll mention is Dąbrowski took a multidimensional view. So when a client came to him, the focus was not simply on the presenting issue. Dąbrowski would look at different issues, including things like intelligence of the individual, their social life, their moral values, their religious emotions, their amount of inner psychic life, how volitional they are, how creative they are, as well as looking at things like depression and anxiety. That created a very broad view of the individual.

On top of that, Dąbrowski look at things from a multilevel perspective that created a hierarchical view that gave a deeper perspective of the individual. So, between having a broader and deeper perspective, we end up with a more subtle understanding of where the person is coming from and the context of the issues that they're presenting.

Chris: One of the things that I think is really interesting is that Dąbrowski didn't just diagnose his patients—it was something he did with the patient and a diagnosis was something that they developed together. That's something that we don't see in modern clinical work, I would say. I love his approach because by the time somebody comes to you and they're presenting with anxiety or depression it seems to me that they're already, in their head, thinking of themselves negatively. They forget the good things about themselves. When you have a client coming to you who's depressed, it's like they're

suddenly so focused on being depressed and all of the kind of negative feelings that go with that, that they don't, they don't have the capacity to have that bigger picture anymore. In Dąbrowski's approach, you're looking at their history, you're looking at where they are now and you're looking at all the positives about them. I think it's a wonderful way to approach clinical work.

Bill: That's a critical point because often the person becomes hyperfocused on their depression or on their anxiety and they lose sight of the perspective of their overall life.

Emma: And you too, having practiced psychology, do you find that people would have resistance to that approach? I mean, particularly if they're paying you by the hour, they might think, well, just get to my problem and address my problem. But I guess you're suggesting that it's deeper than just the problem at hand. It's about a more holistic view.

Chris: Well, from my perspective—I feel obligated to say that in my clinical practice, I see clients as a social worker, even though I have my PhD in psychology. So, my clinical training is from the world of social work, which is more about looking at the person and their environment and looking at the bigger picture. I do think that I was trained to look at people that way and I think that psychology is different. I didn't do a clinical psychology program, but there are different approaches. I feel like Dąbrowski's approach is great for me as somebody who was trained as a social worker because it goes hand in hand with, I don't know, it's more positive, less pathologizing.

Bill: As well, I found that my impression is that the client feels they you're more interested in them as an overall person.

Chris: It's true that people do come to you, and they want you to fix the problem at hand. And sometimes it can be frustrating.

Bill: That's one of the problems with psychology, Chris.

Chris: It is one of the problems and, of course, there are a certain number of people who will hope that some sort of medication will fix them without ever having to delve into their actual issues. That's how I came in, when I was young, and I first went to the psychiatrist. I was like, yeah, give me some pill that'll fix me. I had very little interest in actually talking things through and working them out when I was a kid.

Bill: There are many, many ideas presented in Dąbrowski and it's a bit like a spider web and these interconnected ideas link together with each other. And it's our challenge to understand these linkages without getting caught in the spider web. One of the linkages that is pertinent for today is the discussion of nervousness. I think it's important to know that Dąbrowski defined nervousness as overexcitability. So right there is a linkage between Dąbrowski's understanding or presentation of overexcitability and nervousness. We want to be careful not to get overwhelmed by the linkages, but at the same time to acknowledge them.

Now, the fourth thing I wanted to talk about by way of introduction, is the idea that you'll be familiar with Chris, that so many people come to us and say, I've read the introduction to the theory. And I'm very developed because I have overexcitability I can identify with, but we need to remember what developmental potential is. Its potential. And Dąbrowski made it very clear in the title of his 1970 book, *Mental Growth through Positive Disintegration*. Developmental potential is not enough. You have to have a disintegrative process in order to develop. And that's why we're having this discussion today—to understand the role of mental disequilibrium and development.

Dąbrowski made it very clear that he felt if an individual was totally stable, there was no motivation to change. There aren't very many people who have perfect lives, but there are quite a few people who have very stabilized lives. So, we end up with a situation where if you want to change something about yourself, you have to become disconnected from that stability. You have to feel anxiety. You have to feel that there's something wrong. You have to feel that things aren't right in order to give you motivation to look at what needs to be changed. And that brings us to the title of Dąbrowski's 1972 book *Psychoneurosis is Not an Illness*. It's not an illness to be thinking about anxiety and have anxiety and depression.

Chris: The kind of anxiety that you're talking about, the kind that leads to a feeling of disquietude toward oneself. The kind of anxiety that would produce dynamisms is what I'm saying here, is different than the kind of anxiety that you feel because you have a test coming up or the kind of anxiety that you feel over things like money or external things, is what I'm saying. There's a difference between feeling anxiety because of yourself, because of an inner conflict, and anxiety from some external source. It's interesting to me that when you think about developmental potential, a strong developmental potential is not only having the overexcitabilities, but also having evidence of dynamisms. With the strongest kind of developmental potential when there are several kinds of marked dynamisms present, whereas a weak developmental potential or no developmental potential is the lack of dynamisms. So, the lack of inner conflict.

Bill: And back to our spider web, Dąbrowski talked about dynamisms as emotions. So, to have strong dynamisms is to have strong emotions. Dąbrowski said that according to his theory, you can't have psychological development without having nervousness and psychoneurosis, without having external conflicts and without having internal conflicts.

You can't have development without having conflicts between what is, and what ought to be, (1972, p. 220).

Emma: So what you were saying about developmental potential and people perhaps sitting idly. It reminds me of a quote I saw from the director guy Richie and his quote was that I don't have a problem with imperfection. I think it's very important to be imperfect because perfect is an excuse not to do anything as far as I can understand. So, from what I'm gathering from that, it's that state of imperfection and turmoil and conflict is actually the thing that will propel you forward. Whereas if you think that you are perfect, you're not going to go anywhere.

Bill: Absolutely. I think that hits the nail on the head. If you don't feel an itch, you won't scratch. And it's as simple as that. If you think you have everything figured out, then I think that's a problem because most people may think they have figured out. But in actuality, that's a rationalization. Using a multilevel view, Dąbrowski talked about neurosis and psychoneurosis. Historically, our understanding of neurosis and psychoneurosis comes from Freud. I think it's interesting to note that Dąbrowski attended a lecture by Freud, and met Freud, and also studied psychoanalysis from the Polish doctor Wilhelm Stekel. And I think he spent about a year studying in Vienna with Stekel. The approach Dąbrowski used is basically using the categorization that Freud used. So what's neurosis? It's a relatively mild mental condition or often referred to as a mental illness that's not caused by a physical disease and that is differentiated from psychosis.

It usually involves depression, anxiety, obsessive behaviors, and or hypochondria. It's not a psychotic disorder because there's no loss of contact with reality. According to Freud, neuroses are often the product of conflicts within the self, between the instincts, the head and the self, the ego, or are the product of a very stern, superego that is putting unrealistic demands on the person to behave in ways that the person finds difficult. Now, let's take a minute and look at a couple of other views. Carl Young saw neurosis as a fragmentation of the self. Maslow saw neurosis as a deficit. What he called a hole in the self. Dąbrowski took a different view altogether, remembering that Dąbrowski associated nervousness with overexcitability.

Dąbrowski said that high levels of nervousness, anxiety, of rumination, of depression were positive indicators that the person was focusing on their inner life and the idea again, was that this focus would lead to an identification of what the person felt was lacking in their development and lead to the formation of a hierarchy values and personality ideal that would help them outline what they wanted to do, the person they wanted to become. And that would allow the person to be able to develop concrete ideas and steps towards achieving that. Again, according to the multilevel viewpoint, neurosis are a lower feature, focused on somatic processes. So again, what does that mean? Well, somatic simply means relating to the body. So examples of neurosis would be things like the digestive system, the hockey player who throws up before the game or the public speaker who gets an upset stomach.

Another example is in the cardiovascular system where a person may have a task, like maybe a musical performance. And just before the show, they may think that's an example of something called syncope. Another example is dermatological. So again, the person may feel that they have something on their skin that is irritating them, and they'll scratch and scratch until the skin becomes excoriated. Those are examples of the lower forms of neurosis.

Chris: Another thing that sets apart the neuroses compared to the psychoneuroses is the awareness. Neuroses are less conscious or they're outside of one's awareness compared to the psychoneuroses. But that's another thing that I think is really worth mentioning, that at the lower levels there's a lack of awareness.

Bill: At the lowest level, I mean, you have things that bother you, that you're not really aware of, or you're not conscious of. An example might be a teenager who always feels uncomfortable around his uncle when he visits on holidays. He doesn't really know why he feels uncomfortable, but whenever he is around his uncle, he gets sick to his stomach and he gets terrible anxiety. Later he discovers that his uncle molested his brother and through some discussion, it sounds as if when this youngster was visiting his uncle, he might have also been molested, that unconscious kind of anxiety is an example of a very low-level neurosis that the person is not really even aware of, but that may have an impact on their thinking and feeling.

Now, I want to mention one more thing. Another term that's important in our discussion of neurosis and psychoneurosis is asthenia. Asthenia simply means a weakness, many people that have neurosis become exhausted and fall into states where they can't really do very much, where they become almost paralyzed. And this is referred to as neurasthenia literally a weakness of the nerves. And these people fell into depressions where they couldn't get out of bed and were diagnosed with neurasthenia. Today neurosis still carries a very negative connotation in the general psychological literature. It seemed today that neuroticism, one of the big five personality traits in the five-factor model, where it's associated with anxiety, depression, self-doubt, and other negative feelings. It's related in that approach to low emotional stability. So, if you had a prospective employee take that test and they had a high level of neuroticism, the HR department wouldn't want to hire you.

Emma: I suppose you can see why that negative connotation sticks around because there's plenty of memes on the internet about depression, people being unable to get out of bed. It was a triumph for them to actually get up and do anything today and society at large and particularly as you're giving that example of employers, they see that as a liability. Why do they want to hire someone who potentially struggles to just get on with

their daily function, let alone do the more demanding parts of their job, or be able to cope with stress?

Bill: And that's understandable from a consumerism perspective where the focus on business, is what a person can produce, not on the intrinsic value of the individual as an employee.

Emma: That's a good point.

Bill: Let's take a minute and look at psychoneurosis. Essentially psychoneurosis is focused more on psychological aspects. For example, it's more internal, it's more focused on depression. It's more focused on conscious internal struggles and internal frustrations. So for example, anxiety that is related to the idea that you're not achieving what you ought to be achieving in your life or that you're not living up to the ideals that you feel you ought to be. Let me make a contrast. I gave the example before of a hockey player who threw up before a game, or let's say a person who's facing an important test. A psychoneurotic reaction would be more anxiety. It wouldn't be as physical.

So for example, the person taking the test might spend the night dreaming about the possible questions on the test. They would be thinking about how well they studied or the parts that they maybe didn't study enough. Again, the difference is that it's not expressed physically, it's expressed through thinking and feeling.

Chris: Or it might be rumination or obsessions.

Bill: That's an important distinction because it's the idea that when you become self-conscious—conscious of what you're thinking, conscious of how you're feeling—that's what creates the opportunity to make development volitional, to bring development under your control. The shift from feeling anxiety in your stomach, to feeling anxiety as a mental idea, or a mental frustration that you can focus on by thinking about it is a huge shift in control. If you are thinking about it and you're aware of how you feel, it gives you leverage to make changes, to identify how you are versus how you feel you ought to be.

That is a critical part of the whole process. You cannot develop if you don't have those feelings of self-conscious anxiety and depression. Now, again, why am I depressed? Because I don't feel that I'm able to be the person who I feel I ought to be. And that makes me sad. I have anxiety because I feel as if every day that goes by is a lost opportunity to be a better person, to be the person I want to become. Now, that's completely different than feeling depressed because I lost my job or feeling anxiety because my car won't start and I'll be late for my job. It's a completely different experience. And in a way, it's an unrelenting experience because when I wake up

tomorrow, I'll still have that feeling that I need to become who I want to be. It's not going to be resolved overnight by getting a new job or by getting my car repaired.

It's a long-term process. That may sound depressing itself but Dąbrowski would say that development is a slow process that occurs as he used to say little by little. And that as we develop, we move from lower issues to higher issues. And as we do, we are able to learn through the dynamism of auto psychotherapy, how to better and better handle these issues. It's the type of thing that becomes easier as you go further ahead.

Chris: That's exactly what's been on my mind, is that once you have that conscious awareness and once it's in your awareness, that's when auto psychotherapy becomes possible because when it's somatic and in the body, you're before the point where you can do autopsychotherapy because until you have that consciousness of what's happening with you, how are you going to work with it? I mean, you can't. So, that's a critical moment when it comes to being able to actually take charge of your own development.

Bill: And I think it's worth emphasizing when you look at the levels of the theory that at the lowest first level, you don't have internal anxiety. You don't have mental disequilibrium. You don't have depression. That's intrinsic. You may have conflicts in life with your boss or with your spouse, but you don't have internal mental stress because you think everything's okay. And it takes disintegration to break that allowing this self-awareness to take place.

Chris: One of the benefits of depression or anxiety is that even though they're uncomfortable, that process of disintegration is providing the space for you to create or to change, to become someone else.

Bill: As Dąbrowski emphasizes, it's creating the opportunity for you to take control of your life. And let's not forget Dąbrowski defined personality as a self-chosen set of values that define your unique essence and self. It's not something that comes onto you. It is something that you create. And again, as you say, Chris, you can't create it if you're not aware of it. Now, in the theory Dąbrowski would also say that those people who are able to achieve a harmony at the highest level again would not have internal mental disequilibrium because they are living their values. Their behavior is in harmony with their values. Now, again, those people may have great conflicts and great struggles with society. With the people around them. They see things that upset them.

Chris: They get upset with the injustice of the world. Their concerns are alterocentric in Dąbrowski's terms. Like they care about the greater good in other people. They're not focused on themselves. And so that's what they're upset about injustice.

Bill: Exactly. I'll give you an example, at the lowest level, I'm really upset because my neighbor is over there beating his kid up and the kid is screaming and I can't hear the hockey game. At the highest level I hear my neighbor beat the kid, I'm going to go over there and say, what are you doing? Stop that. I'm going to phone the police because I can't sit by and let that happen. It's against me and my values. It's against what I believe ought to be the way people treat each other. That's a good illustration of the differences we see between the lower and the higher levels.

Chris: I think that this will really help people understand a little better where Dąbrowski was coming from. I know that often I tell people that his essential thesis was psychoneurosis is not an illness. And it's easy for me to say that and expect people to understand what I mean, but I really am glad that you were able to talk with us today about what it means because it's not simple. Because there's so much history behind these concepts. Dąbrowski saw them in a different way than everybody else thinks of. And of course, now we have our modern conceptions of mental illness, which are based on all of that. But especially from the diagnostic—Dąbrowski did not approach treating people from diagnostic categories, like the DSM, that is not how he looked at people. He would not approve of the way that our current mental health system works.

Bill: And Chris, we live in a culture today that's focused on hedonism, and focused on egocentric satisfaction. So, why do I want to stop it, I want to be able to fix that. And the idea of development through disintegration in our culture has become more and more of a counterintuitive idea because people just can't relate to the idea that to be unhappy is how you must discover where you belong in life. And that it's a means to an end. But we live in this culture of quick fixes and what I would call superficial treatment.

For Dąbrowski, the whole idea of disintegration and feeling uncomfortable is the opportunity that we all have to be able to live with until we're able to enact the changes that are going to make us feel really truly better from inside. And that's the real lasting true happiness, is to be able to go to bed at night thinking, today I faced a challenge and I handled it the way I felt, I thought to handle it. I didn't let myself down. I did what I felt I had to do. And although that may have caused external conflict, I felt I had to do it that way. And I'm satisfied that that was a small victory today. I look forward to tomorrow.

Chris: It's a process.

Bill: Development is a process.

Emma: What you were saying Bill about the little by little, I think people perhaps find that daunting as well because of an expectation of quicker fixes. But as you were saying, the reward for doing the job properly and permanently fixing some values and some ideas within yourself is great. I think once people start down that path of doing it, even though it might be a very long road, even the initial rewards that they get can spur them on to continue the journey. Because once you start working on yourself and you see that it works, that little bit of reward for the first issue that you solve helps you compound that. And then you can look back at your journey and that's when you have those moments of, shit, look how far I've come.

Bill: As well, I've heard someone say to me, Bill, I'm 35 years old, what's wrong with me? Why haven't I found it yet? Why am I still struggling at 35? I would remind this person of what Dąbrowski said—the more potential you have, the longer it takes to develop. If you find yourself feeling broken apart and disintegrated, and if you find yourself feeling that it's hopeless, if you find yourself feeling that you can't take another day, I would simply encourage you to keep going because you won't discover the diamond on the surface. You have to dig down and find it. And I'm reminded of Saint-Exupéry, one of Dąbrowski's favorite authors. He was an early pilot, and they were flying over the African desert. He and his mechanic and the plane crash, the motor had ceased, and they were 60 miles from the coast.

They had a discussion. The mechanic said, let's wait here and die. Exupéry said, no, we must set out for the coast. The mechanic said, at 60 miles, we cannot survive. We'll die on the way. Exupéry said, we must take one step at a time. Although each step is exactly the same as the previous one, we must keep moving. And as it turned out, they did set out for the coast. They were discovered by a band of veteran and were rescued. But again, I'm going to emphasize that 10,000 step feels like agony because you don't feel like you've made any progress. And it feels like the last step that didn't leave anywhere, but you cannot give up. You must have faith. You must have hope. You must reach out and ask for help. You must reach in and find the strength and keep going. Life's too precious to give up.

Chris: Well said, Bill, never give up. The first time I was ever in the hospital, there was a little sticker on the window like where you walked in, that said never give up. I just always have an image of that in my mind.

Bill: I feel for these people that we talk to, that are stuck in the middle, and they want to give up and we've gotta help them.

Chris: I know. I feel like I'm always getting a little better with clients. When people write to me and say that they want to give up that they feel terrible about themselves. That it's the conflict within them that is crushing them. I know that it's a good sign and I

just have to help them find a way out of that. But that's the hard part, is to help them see that it's not me helping them up. It's them making the moves to change. It's the transformations that they make that's going to get them to where they need to be.

Emma: I've been in that place many years ago where I wanted to give up. Now when I look back on that, I am so glad that I didn't and no matter how hard things got or how things get, and it's very hard to fathom that when you're in the moment, it's so hard to grasp because every bit of pressure set just seems to be on top of you. But the feeling when you get past that and the realization when you look back, it makes you so happy that you persisted and you pushed through. And on the other side, there's something better than you ever could have expected waiting. When Bill says, keep digging for that diamond, you might even amaze yourself of how beautiful and awesome and big and rewarding that diamond is.

Bill: One of the problems I see often is that people get overwhelmed by their feelings and turn to drugs and alcohol to dull their feelings. And this becomes a really negative feedback loop where they can't escape from the cycle of using drugs or alcohol to try to modulate their feelings. I'm very, very lucky because I never have been drunk. I've never taken drugs and I was able to handle it on my own without these artificial diversions. I feel that they're diversions. I often have the analogy in my mind that I'm driving a car with my foot stuck on the gas pedal at 100 miles an hour, and the road is very icy. And at any second, I'm about to go off into the ditch. To me getting drunk or taking drugs at that moment is sort of like saying, well, I'm just going to take my eyes off the road and make some lunch for myself. It's a distraction, but it doesn't remove the ice from the road.

Emma: You're making me think though, that I think that eventually we'll have to do at least one episode and maybe more about using drugs and alcohol and all of that. Because I mean, I personally have a lot to say about that because we all have different experiences of how we've dealt with our overexcitability or where it's led us.

Bill: And I can hear people being frustrated with our conversation. They're saying, well you didn't tell me how to do it. And that's part of the problem is that the path that we have to discover is unique. I can't tell you how to cope with your anxiety or your feelings. Only you can figure that out.

Emma: Didn't Joseph Campbell say something along the lines of, if you see a path in the forest, don't follow it because it's not yours.

Bill: Bergson said, the path well followed is not your path. You must forge your own path. So that's true.

Emma: That's some really intense food for thought. I think that's going to resonate with a lot of people out there listening today. Thank you, Bill, for once again joining us on the podcast. That was really insightful.

Bill: You're welcome. Thank you very much. And I'd be happy to try and answer questions. If anyone would like to submit a question or share an experience, I'm very open to that.

Chris: Thanks, Bill.

Emma: It's a very generous offer. And Chris, thank you to you too. It's always a pleasure.

Chris: Thank you. It is always a pleasure. And I look forward to our next episode.

Emma: And, thank you, listeners. Thank you for tuning in. And as Bill said, if you do have any questions or anything you'd like to hear us talk about or any feedback on any of our episodes, please contact us. And you can do so via email at PositiveDisintegration.pod@gmail.com. Or you can drop a comment on Twitter or Instagram. Until next time keep walking the path to your authentic personality.