

“The Work” of Byron Katie: A New Psychotherapy?

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ABSTRACT

This paper introduces “The Work” of Byron Katie, author of Loving What Is. It contends that “Inquiry”, as it is also called, can be thought of as a new psychotherapy, which may be as effective as or more effective than existing approaches, even though Byron Katie never introduced it as such. This simple, straightforward process, summarized by “Judge your neighbor, write it down, ask four questions and turn it around”, makes is broadly accessible and researchable. While Byron Katie has introduced this therapeutic process to hundreds of thousands around the world in the past 20 years, it has made few inroads into the field of psychotherapy even though many mental health practitioners have experienced the value of this process and have incorporated it into their practices. It is our hope that this paper will more broadly introduce “The Work”, and stimulate interest in researching this simple, effective process.

Introduction

Byron Katie is the author of Loving What Is. In 1986, after ten years of spiraling downward into, deep depression, despair and paranoia, she had a spontaneous remission in a powerful moment of awakening. In that moment, “The Work”, or “Inquiry”, as she also calls it, was born.

Since that time, Byron Katie has traveled all over the world transforming the lives of hundreds of thousands of people of all ages with this simple, powerful process. “The Work” has found its way into many places – churches, prisons, schools, businesses and therapists’ offices.

We are among the psychologists and psychotherapists that have incorporated “The Work” into their practices, even though Byron Katie did not develop “The Work” as a form of psychotherapy, and she had probably never read a book of psychology when this process came to her. We have used “Inquiry” with individuals, couples, and in groups for the past two to three years, and have found it to be as effective as and at times more effective than the approaches we have learned up to now in our forty-five years combined experience. In a number of instances where little or no progress had been made, introducing “Inquiry” led to rapid improvement.

It is a simple, clear process that lends itself easily to research. It has begun to be studied, and it should be carefully studied further, as it is likely to be an effective addition to the field of clinical psychology.

“The Work” can be seen as a simple, pithy form of psychotherapy that appears to synthesize elements of psychoanalytic psychotherapies, cognitive/behavioral psychotherapies and mindfulness based psychotherapies. “The Work” employs well-known psychotherapeutic methods such as guided imagery, role plays, and cognitive restructuring. “The Work” allows people not only to question their painful beliefs, but to gain insight into their unconscious projections without being blocked by the shame against which they usually need to defend.

Description

“The Work”, consists of four simple questions and a turnaround. As Byron Katie puts it, “Judge your neighbor, write it down, ask four questions and turn it around”. It is a process by which painful concepts, such as, “my dad doesn’t care about me” are investigated in the light of the four questions and then turned around to closely-related and opposite concepts. An example may go like this:

“My dad doesn’t care about me”. **1. Is it true?**

“Yes. If he cared about me he’d call me or send me emails and letters to ask about me, but I never hear from him”.

(When answering “no” to this question skip to question number three)

“My dad doesn’t care about me”. **2. Can you absolutely know that it is true?**

“No. I can’t absolutely know that he doesn’t care about me even if he doesn’t call or contact me.”

This second question is asked if the answer to the first question is, “yes”. It invites a deeper reflection about what we can really know to be true. At times people will answer “yes” to this question, even though it is impossible to absolutely know anything in reality. It is possible to simply move on to the third question without hampering the process even when this question is answered with “yes”.

“My dad doesn’t care about me”. **3. How do you react when you think that thought?**

“When I think this thought, I feel sad, lonely, and depressed. The feeling hits me in the chest and it travels to my shoulders. I feel worthless and I don’t want to be around people. I don’t answer the phone. I resent my dad but I never tell him so. Instead, I withdraw from him and I don’t contact him. I then hate myself for thinking, feeling and acting this way. I look for a way to distract myself from my misery by becoming a workaholic or by getting high. I feel that something is terribly wrong with me, and sometimes I just want to be dead.”

“My dad doesn’t care about me”. **4. Who would you be without that thought?**

“Without this thought I would not take my dad’s failure to contact me personally, and if I thought of him, I might contact him to tell him I was thinking of him instead of resenting him for not contacting me. I’d be a lot better off.”

These questions are an invitation to go within and take a look at what we truly believe and how we react/live with and without the painful thought.

The turnarounds are a way of taking the original concept in its exact words and turning it around to related and opposite concepts, by substituting the self for the

other to see if it feels as true or truer when the concept is applied to oneself. Thus, “My dad doesn’t care about me” turns around to:

- “I don’t care about my dad”.
- “I don’t care about myself”.
- “My dad does care about me”.

Again, the spirit of the investigation is to meditate and reflect on the new concepts to assess if they feel as true as or truer than the original concept. Adding the word “sometimes” can reduce the negative punch of the original reversed thought. For example – “I don’t care about my dad *sometimes*” may be more accurate and closer to the truth than “I don’t care about my dad”.

The turnaround is the process by which the unconscious becomes conscious, often in a flash of deep emotional insight. I (RH) cannot describe the sense of surprise that I experienced when I turned, “Eli (my step-son) should be more considerate of me” around to “I should be more considerate of Eli”. Up to that moment I had been blind to how inconsiderate I had been of my step-son for the previous 17 years, even though I had answered the question, “How do I react when I think the thought, ‘Eli should be more considerate of me?’” and I had seen that for the previous 17 years I had lectured him, glared at him, criticized him, shunned him, yelled at him, and tried to teach him to be more considerate as a result of my original belief that “Eli should be more considerate of me”. Surprisingly, it was not until I tried the turnaround, “I should be more considerate of Eli”, that I realized how inconsiderate my behavior had been of my step-son.

This experience provided a powerful insight into realizing how blinded we are by our beliefs (selective perception is real). I think of myself as a very considerate person. How could I see my lack of consideration, even when answering question number three, as long as I believed I was a most considerate person?

I was delightfully mystified by the total absence of a sense of shame about having been so inconsiderate of Eli for the previous 17 years. I just felt delighted and grateful for this important discovery. I now realized that I was just like my step-son. My own work was now clear. How could I ask/expect my step-son to be more considerate of me than I had been of him?

Freedom from the pain of the original stressful concept is achieved when the turnarounds are experienced as true as or truer than the original concept. When the new concept feels as true, belief in the original concept has lost its hold.

Our usual self-talk may go something like this: “My dad doesn’t care about me. Oh, come on now, you know that isn’t true. Stop thinking that way. Why do you keep thinking this thought when it is so obviously false? Stop thinking this way. I wonder what is wrong with me that I continue to believe this stupid lie. I must be stupid. There must be something wrong with me. I need to stop thinking this way.”

The problem with this approach is that what we KNOW, fails to change what we BELIEVE. Thinking that it should, when it doesn’t, leads to further difficulties -- feelings of inadequacy. While our typical self dialogue pulls us deeper into our depression to the point of despair, hopelessness and helplessness, “The Work” often leads to a sense of relief and joyous self-realization.

The Work as a psychoanalytic psychotherapy:

When I (RH) heard Byron Katie doing an interview with a young man who was troubled by his parents judging him and not understanding him, I was shocked by what I heard. In a matter of 30 minutes or so, this young man was able, with no shame and with deep insight, to see the pain of being judged and misunderstood by his parents as a projection of his own judgments and misunderstandings of his parents and of himself. It seemed to me that I had just witnessed a process that in 30-45 minutes resulted in the kind of deep emotional insight that I had all-too-often failed to achieve after months and even years using my best psychoanalytically-informed psychotherapy.

“The Work” of Byron Katie can be seen as a new “Royal Road to the Unconscious”, and it appears to be as available, reliable and unconditionally loving as Winnicott’s “holding mother”. Her process of “Inquiry” is a short, incisive way for people to introspect, question their thoughts and reliably come to see that their judgments of others are projections of their own self judgments. Like the attentive, attuned, reliable, holding mother, “Inquiry” just sits there waiting to be asked, neither pursuing, nor abandoning.

Byron Katie’s process of “Inquiry”, like psychoanalytic psychotherapy, invites “free association” in the form of the “Judge Your Neighbor Worksheet”. She invites the inquirer to write down their thoughts without trying to censor them:

“I invite you to be judgmental, harsh, childish, and petty. Write with the spontaneity of a child that is sad, angry, confused, or frightened. Don’t try to be wise, spiritual or kind. This is the time to be totally honest and uncensored about how you feel. Allow your feelings to express themselves without any fear of consequences or any

threat of punishment” (Katie, Byron with Stephen Mitchell; Loving What Is, Harmony Books, 2002) page 11-12.)

Like psychoanalytic thinkers, Byron Katie observes that we suppress, repress, attempt to ward off and otherwise defend against our painful, feared, thoughts and judgments. She commonly refers to these unwanted thoughts as “our rejected children” and she invites us to welcome our unwanted, rejected “children” back so we can meet them with understanding, instead of with our usual hostility, rejection and fear. Like some psychoanalytic writers, Byron Katie concludes that everything we experience is a projection.

One difference from psychoanalytic approaches is that “The Work” invites the free associations to be written down, where they can then be easily looked at and investigated. Katie calls this “stopping mind”, and she points out that the pole of mind that just needs to be right is so quick and fleeting, that unless we do this on paper, we are largely unable to analyze our thoughts and get to the other pole of mind, that simply wants to know what is true.

Another difference is that instead of the analyst making interpretations, the therapist asks the four questions, which invite the patient to reflect and introspect; that is, to self-analyze. The turnaround also replaces the analyst’s interpretation. It is the turnaround itself that yields the deep emotional insight, not the brilliant, well timed interpretation of the analyst, which can and is often rejected by the patient. Whereas psychoanalytic approaches are treating the pain of the client by creating new, plausible stories through interpretations, “Inquiry” is “undoing” existing painful stories.

The Work as a mindfulness-based psychotherapy:

Mindfulness-based psychotherapy is an emerging model of psychotherapy based on the age-old tradition of Buddhist psychology and meditation practice. Psychotherapeutic mindfulness may be defined as awareness of present experience with total acceptance. It is a unique way of relating to our experience that reduces emotional suffering and increases a general sense of well-being. Mindfulness is a skill that can be cultivated by the therapist to enhance the clinical effectiveness of the therapeutic relationship. It can also be applied in strategic exercises for the client, either formally in meditation or informally in skills for everyday living. Mindfulness teaches clients to recognize and accept their thoughts and emotions without necessarily reacting to them.

Research shows how sustained recovery from depression depends upon learning to keep mild states of sadness, and the thinking patterns they trigger, from spiraling out of control. In mindfulness based therapy, the clinician assists clients in developing a capacity to allow distressing feelings, thoughts and sensations to occupy awareness, without trying to change them. “The Work” goes beyond mindfulness practice and teaches a method of questioning the stressful beliefs. By investigating the stressful thoughts, they tend to lose their power and persistence. Byron Katie calls this “the great undoing”.

The Work can compliment mindfulness-based therapies. While the mindfulness-based therapies help to build awareness and equanimity, the work provides an additional tool to deal with the recurrent thinking and feeling loops that increase the chance of depression returning. In the experience of one of the authors (AC), “The Work” strengthened the meditation practice. It gave him a new, powerful way to deal with the

repetitive, stressful thoughts that would sometimes cause him enough frustration to get up from the meditation cushion.

The Work as a cognitive-behavioral psychotherapy:

While CBT has been shown by research to be helpful in a wide variety of clinical psychological problems, “The Work” is just beginning to be researched. Both, “The Work” and CBT share the basic premise that suffering is caused, not by people, places, conditions and things, but by thoughts about them. The goal in both is to identify the erroneous, irrational beliefs that are causing the stress. While the approach in CBT is to challenge, dispute or stop these thoughts, in “inquiry”, the goal is to “meet them with understanding” by applying the four questions and the turnaround.

CBT approaches take the stance that we can choose our thoughts and actions, and thereby change our stressful feelings. They employ methods like “cognitive restructuring”, “disputing”, and “thought stopping”. Byron Katie, however, notes that we cannot control what we think, or what we believe. Thoughts appear in the mind just as breathing happens. Yes, we can suppress, repress or distract ourselves from these thoughts, but if the beliefs are left unquestioned, they simply return at a later time. The goal in “The Work” is not to control our thoughts and actions, which is deemed futile, but to question the stressful beliefs with only one motive – to know, at the deepest level what is *really true* for us. When we find that what we thought was true is not, and that the opposite of what we thought is as true or truer, our feelings and actions change as a result of the new perception.

CBT and “The Work” can help to change how we think (“Cognitive”) and what we do (“Behavior”). How we think about a problem affects how we feel physically and emotionally and what we do. Unlike some other psychotherapies, both CBT and “The Work” focus on the “here and now” problems and difficulties. Instead of focusing on the causes of our distress or symptoms in the past, they look for ways to improve our state of mind now.

In cognitive-behavioral therapy (CBT), the client is taught to write down their irrational beliefs and to examine the pros and cons of each belief. In fact, the first 3 questions of the work are very similar to a CBT approach. The fourth question “Who would you be without that thought?” goes beyond CBT, into a new dimension – a territory of no thoughts. The fourth question allows us to really see thoughts for what they are – just random events arising and disappearing in awareness. In other words there is nothing “real” about them. Also, by following the third question, which invites the inquirer to closely examine how their life is affected by their belief, the fourth question provides a foil or stark contrast by inviting the inquirer to imagine how their life would be without the belief. This contrast allows for a potent, immediate experience of the power of our beliefs. With the belief we experience pain and stress; without the belief we are more peaceful.

Homework assignments are a standard practice of Cognitive-Behavioral approaches. “The Work” can easily be done by clients on their own at home. However, it is often not necessary to “assign”, “the work” as homework as clients tend to report using “The Work” on their own between sessions. This is probably because the benefits of doing

the work are so noticeable during the sessions, and the process is so simple that clients spontaneously start using “the work” in between visits.

Case Evidence of the Effectiveness of “The Work” as psychotherapy

Case I:

Molly, a 33 y/o married woman with a 2 y/o daughter had been in treatment for postpartum depression for four months with little improvement. Originally, she had looked forward to a large family and many kids but she had had a “pregnancy from hell” and she was told that she should not get pregnant again.

While she had no difficulty bonding with her baby, she lacked the energy or joy of mothering that she had expected and she felt overly irritable. This made her feel like an inadequate mother.

When introduced to “The Work”, Molly responded right away. She spent the hour examining the belief that she must not do anything wrong, the belief that she must lose weight, and the belief that she couldn’t find a better job. Her marked anxiety about doing/being wrong, abated somewhat during the session.

She got Byron Katie’s book Loving What Is and she continued practicing “Inquiry” in her life and in sessions. Her depression and anxiety gradually lifted. Over the following six weeks Molly unexpectedly got pregnant again and then miscarried. In spite of these traumatic events her symptoms only returned momentarily as she continued meeting her painful beliefs with “Inquiry”.

On one occasion she was quite inconsolable, but she was able to question her belief that she should not be afraid, or that she should “get over it”. She found the turnarounds that she should be afraid and that she should not get over it to be truer. This appeared to give her “permission” to be as afraid as she needed to be for as long as she needed to be and this appeared to comfort her in her inconsolable state.

Molly did not become depressed again. Over the next eight weeks Molly reported that she was generally feeling better and more hopeful. Her stress at home with her husband, at work, and with herself continued to decrease and her pleasant, cooperative, exuberant manner continued emerging. About twelve weeks after introducing “The Work” Molly felt confident in her ability to meet any stressful thoughts with the four questions and the turnaround and she discontinued her psychotherapy.

Case 2:

A fifty nine year old, married father of two grown children who had been seen for over five years for chronic, life-long depression had never been able to get over the deep hurt that “his parents had not wanted him”. When he was three or four his parents divorced and they sent him to be raised by his grandmother. While the psychotherapy and the anti-depressants had helped (he was no longer raging or suicidal) - they had failed to alleviate his depression sufficiently.

In his typical style he was skeptical and cynical when introduced to the “The Work” but guardedly open since he still had not found freedom from his hurt and anger. A few visits after introducing this approach he complained of feeling very stuck. In

inviting him to question his belief that he was stuck or that he should not be stuck, he responded to question number 4, “who would you be without that thought”, that he didn’t know why, but he always resisted this fourth question. This resulted in a flash of insight that, indeed, he was not stuck; he was actively resisting questioning his mind. As he sat with this self-realization he noticed that he was very reluctant to let go of his old sacred concepts because he feared that he would have no idea who he was without his old beliefs. He had seen himself as a helpless victim his whole life (being stuck is one way of being a victim). Without the identity of a helpless victim he feared not knowing who he was. Yet seeing himself as an individual that was actively resisting provided a new (empowered) identity of someone making choices. Suddenly, his whole life changed from a life as a helpless victim to a life of having made choices. Following this discovery he stopped resisting question number 4 and he began to actively use “The Work” in his daily life, with much yet not total satisfaction. A few weeks later he trusted “The Work” and he began considering leaving his weekly psychotherapy, feeling capable of resolving his confusion and suffering on his own with the four questions and the turnaround. He burst into tears of gratitude that his worst fear – that he’d never find relief from his suffering – turned out to not be true.

When “The Work” doesn’t work

In our experience “The Work” always relieves or eliminates painful affects, and it works for any problem, simply because all suffering is created by our thoughts. However, there are times when a person doesn’t want to “do ‘The Work’”. There seem to be two primary and opposing motives in Mind – to be right and to know

what is true. “The Work” is most effective when we do it for the love of truth. When we are more invested in being right than in knowing what is true, the four questions can feel aversive.

A minority of patients doesn’t want to hear the questions and they are either uninterested or they become annoyed when asked. At times it helps to begin by asking if they want to get clear or if they want to know the truth before asking the questions.

A woman who was being treated for life-long severe depression had taken to the work, but she tended to answer the questions intellectually rather than to use the questions as invitations to become still, introspect and reflect. Consequently, she found little relief from her symptoms. In spite of her lack of improvement, she commented on one occasion that she has been in therapy on and off for over twenty years, and that she has found nothing more helpful than “The Work”. It appears that individuals can find “The Work” helpful even when it is not resulting in immediate symptom improvement.

The greatest stumbling block to doing “The Work” may be people’s reluctance to write their thoughts down. In our experience this is quite common, and there appear to be any number of motives behind this reluctance: fear of our thoughts, fear of change, fear of disappointment, or the belief that “I can do it in my head”, to name a few. Writing the thought down appears to be a necessary practice for the more deeply entrenched, core, “sacred” concepts that appear repeatedly.

Conclusion

In our personal and clinical experience, “The Work” of Byron Katie can be used as an incisive, effective psychotherapy. It has helped our clients of all ages with a wide variety of presenting symptoms – from the simplest to the most complex and chronic. Many had not derived much benefit from other methods we had used.

The field of clinical psychology and the millions being treated by it stand much to gain by this simple, effective process. It’s simple, straightforward structure makes it easy to learn and to research. We hope that this article will stimulate the interest of many clinicians and researchers in the field.

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