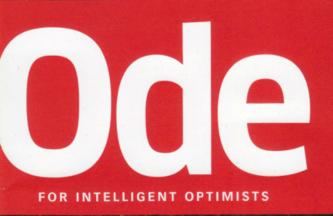
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Great expectations

How hope therapy can help banish mild mood disorders and boost happiness. By Catherine Ryan

THINGS WERE GOING PRETTY WELL FOR

Melanie. After struggling with being overweight, she had recently dropped a significant number of pounds. She felt great and looked great, too. People noticed. Despite this success, though, a familiar sense of depression crept back. Once the numbers on the scale were stable, Melanie (not her real name) felt she didn't have the same focus and direction that accompanied her weightloss goals.

After meeting with a psychologist, she defined a new mission: to increase her strength and endurance. During weekly meetings over several months, Melanie and her psychologist discussed applying goal-setting tactics and the fact that fresh efforts changed her outlook. As she worked daily on toning exercises and stamina-building drills, the feeling of accomplishment returned. By identifying and striving toward a new ambition, Melanie created a new sense of purpose, her psychologist says.

Conventional psychotherapy has tended to focus almost exclusively on relieving the symptoms of a mental health ailment, such as anxiety or depression, and declaring success. But increasingly, psychologists like the one who worked with Melanie are offering an alternative—hope therapy, a process of identifying goals, then planning the strategies and sustaining the motivation to reach them. An offshoot of the positive psychology movement, hope therapy aims to help people help themselves by working with their strengths.

"People's emotions often are determined by their expectations for the future," explains David Feldman, assistant professor of counseling psychology at Santa Clara University in California and a practitioner of hope therapy. "People who believe they can move toward their goals will feel positive emotions; people without anything to work toward feel hopeless."

Hope, as defined by psychologists, is the belief that you have the skills and energy to make your dreams a reality. But can a sunny buzzword be turned into a technique to help those feeling adrift, ineffective or uninspired? To paraphrase a hopeful refrain from Barack Obama's presidential campaign: yes, it can.

Hope therapy has shown itself to be an effective tool to combat mild mood disorders, anxiety, lack of enthusiasm and the general sense of feeling unmoored. In fact, the U.S. surgeon general estimates that about 14 percent of U.S. adults suffer from a mild to moderate mental disorder in any given year. For these cases, hope interventions offer relief without antidepressants and other medications or the intensive—and expensive—weekly sessions on the psychoanalytic couch.

THE TECHNIQUE ISN'T INTENDED TO SUP-

plant proven treatments for severe mental illnesses. But hopeful people do tend to be physically healthier, more content, better able to cope with stress and disappointment, and better endowed with social ties than their lower-hope counterparts. In short, hopeful people are happier.

It sounds like common sense, and

"People who believe they can move toward their goals will feel positive emotions; people without anything to work toward feel hopeless"

David Feldman, assistant professor of counseling psychology, Santa Clara University in California

perhaps it is. But it's also a drastic departure from therapy as usual. "Often when we think of mental health, it's as an absence of mental illness," explains hope therapy practitioner Jennifer Cheavens, assistant professor of psychology at Ohio State University in Columbus. "But there's a dimension of mental health above neutral, when people are flourishing and utilizing their strengths. We aim to help people realize their full potential."

Hope therapy takes place in either group or individual sessions, and begins with the psychologist helping the client identify a goal. As easy as that may seem, many people struggle to pinpoint what they want, rather than what their boss may demand or their spouse may need.

Part of the difficulty entails setting a specific and achievable target. For instance, aiming to be healthier is too general, whereas running a marathon may be too ambitious. Taking one small step at a time—say, resolving to walk for 20 minutes daily—builds momentum toward the end goal. Hope therapists suggest settling on a personally meaningful objective—learning to play the piano, making more friends—instead of myopically focusing on problems to be solved.

Once clients set targets, they must overcome the deeply ingrained habits impeding their progress. People with low hope have been thwarted often enough that they learn they'll probably fail, so they stop trying. Anticipating these obstacles and planning alternatives—an ability called "waypower"—is a hallmark of high hope individuals.

But where there's waypower, there has to be willpower as well. Low-hopers tend to give up easily, caving in to self-doubt. ("I'm not qualified for the job, so why bother applying?") High-hopers change misgivings

into positive, encouraging affirmations. ("Even though this is tough, I have the skills to persevere.")

Reaching a goal, even one as seemingly small as speaking up in a meeting at work, creates a positive association with striving, Cheavens believes. That taste of success encourages people to set more and everhigher objectives, which teaches more high-hope skills and buoys motivation. Researchers have learned that the positive emotions generated by achieving goals banishes the depression, anxiety and purposelessness that send clients to therapy in the first place.

HOPE THERAPISTS DON'T ADVOCATE DIS-

regarding negative emotions or ignoring signs that your efforts aren't going well. On the contrary, high-hopers are quick to experiment with alternative approaches when things go wrong. But contrary to popular belief, building high expectations doesn't necessarily set you up for a harder fall.

Determination and flexibility make people who aim high more likely to succeed than low-hopers who settle on a simple project, according to C.R. Snyder, a clinical psychologist and author of *The Psychology of Hope: You Can Get from Here to There* before his death in 2006. His studies found that hopeful people are invigorated and inspired by a challenge, and even when a goal isn't met, they rebound better from disappointments. The ability to

see the way forward after a letdown gives high-hopers more resilience in the face of traumatic events, such as job loss or the death of a loved one.

Of course, the idea that hope helps isn't particularly new. Psychologists, social workers, teachers-and, yes, even vour mother-have used the wisdom of hope for generations, explains Jennifer Teramoto Pedrotti, associate professor of psychology and child development at California Polytechnic State University in San Luis Obispo. "Your mother might not have done the research, but she was right," she says. A small study by Cheavens, Feldman and others demonstrated that in just eight weeks, participants who used goal-setting and motivational techniques increased their self-esteem and sense of meaning in life while decreasing symptoms of depression and anxiety.

Research from the University of Wisconsin-Madison revealed that people who actively pursue their goals were more likely to have strong relationships with others, a rewarding sense of purpose and the idea that life is good. Another study showed that college students who learned visualization techniques in a one-hour hope workshop were more likely than their peers to achieve a goal within a month. Through hope therapy, even terminally ill patients have found realistic and meaningful missions, such as living pain-free or making amends with estranged friends, and they reported feeling more satisfied and hopeful despite their diagnosis.

Many of hope theory's tenets can be applied without a counselor. But for those who want some guidance, finding a therapist isn't necessarily easy. To date, few psychologists call themselves hope therapists. Yet talking with professionals in your area will help you determine if their expertise fits with what you're seeking. As Lisa Edwards, counseling psychology professor at Marquette University in Milwaukee, Wisconsin, says, "Hope therapy is useful for everyone."

CATHERINE RYAN, who sees the glass as half full, writes about positive psychology, nutrition and health.