

# EXPLORING YOUR FULL SEXUAL POTENTIAL, PART 29: PARADOX PSYCHOLOGY



One of the greatest contributions to science by the late Joseph Nicolosi, Ph.D., was his revealing the existence of double-binds. Painstakingly, he demonstrated how men who experience same-sex attractions are often caught up in a set of totally contradictory feelings, more often than when one experiences opposite-sex attractions. Not only are they contradictory, they appear to be incompatible. A world of paradoxes comes into view which cannot be understood in a straightforwardly way. Paradoxes feel uncomfortable and yearn intensely to be resolved. This article aims to change the usual narrative and to come to peace with them. They are very private friends.



We can demonstrate Paradox Psychology with, for example, alcoholism. Imagine a client coming in to see his psychotherapist and starting up this conversation:

Ther.: *"You said you wanted to stop drinking".*

Client: *"I sure do".*

Ther.: *"It is hard. To do so, you must truly be motivated".*

Client: *"I am, to the bottom of my heart".*

Ther.: *"Would you like a drink?"*

Client: *"Have you got any?"*

The therapist is trying to raise the motivation issue but stumbles upon the client's paradoxical reactions. Does the client want to stop? He does, but he doesn't really. The therapist is heading for a straightforward answer, *"What 'll be boy, yes or no?"*. But the client is being perfectly honest.



Ther.: *"Shall we say you sort of want to, but not really?"*

Client: *"I don't know. I want to stop".*

Ther.: *"You are caught in the middle. Is that true?"*

Client: *"Jeez, I hate this mess. I need to sober up. I will talk about it with Dan".*

Ther.: *"Who is Dan?"*

Client: *"The guy I am seeing at the pub when we are done".*

To cope with this weird array of messages, a new kind of psychology comes in handy. After all, at the rate we see above, a straight-forward answer can take ages, if not years, to achieve. How to get him sober?



*Alfred Adler, psycho-analyst*

Alfred Adler recognized this phenomenon in 1937 and introduced Paradox Psychology. In Wikipedia, we read,

*"While there are many treatment theories that address separate aspects of behavior, emotions, and thinking, this approach focuses on the obvious fact that human's entire existence is a 'living paradox'. This paradox is evidenced by the fact that we live in an animal body, but we walk upright with our 'mind in the clouds'; our DNA is programmed to function via instinct, yet we prefer to assert free-will; we are smart enough to 'know better', but quite often repeat past mistakes. As such, it could be argued that the study of 'man as a paradox' is most closely aligned with our 'essence' as a human being."*

Paradox Psychology (PP) offers a way out. In PP, we recognize that paradoxes thrive abundantly in our lives, but that at the same time we always seem to be looking for a straight-forward answer to reality. When you think about it, you could say that a straight-forward answer is the one-dimensional view: you are either right or wrong, you are either *'this'* or *'that'*. But in PP, however, we embrace the paradigm that much in human life exists out of saying: I am *'this'*, but I am also *'that'*.

Mainstream psychology has cleverly created a workaround. If there are more ways than one to consider a predicament, it comes up with a brilliant invention called a scale of, say, three or five or seven intermediate points. You have to take your pick. Life issues are reduced to something somewhere in between extremes. Mainstream thinking knows for sure.

In PP, however, this is still viewed as one-dimensional where only one answer is considered to be appropriate, preferably somewhere nicely in the middle. PP has a different approach. It recognizes that there can be TWO truths, both existing at the same time at both extremes, and not somewhere in between! And existing in the same person!

PP does not divide the world into mono-dimensional groups to prove its point. Hence, it does not embrace the diversity of groups (as does LGBT-psychology), it embraces the diversity of thought itself. Pride flags are not to be found in PP. Because with every statement that an individual boldly mutters, PP also introduces a doubt.



### What is Paradox Psychology?

A therapist may ask, “*Who are you? What ‘ll be boy, yes or no?*” Well, in PP, it is a full-blown ‘Yes’ and a full-blown ‘NO’ at the same time in the same person. This is mind-goggling when you think about it.

- Step 1 in PP is accepting the fact that there may be more roads than one, leading to Rome.
- Step 2a and 2b is to investigate each extreme to fully understand its significance. After all, there is much to be said for both extremes.
- Step 3 is to see what new paradox now bubbles up in this process. It always does (the human mind is creative).
- Step 4 is to grab this new paradox by the horns and go back with it to step 1 to analyze these new extremes. You have now created a loop. If you have sincerely analyzed both extremes, you rise to the next level: *‘Gentlemen, round 2, ring the bell’*.

Let me demonstrate this with the chap we introduced above with his alcohol problem.

First step: He says: *"I want to stop"*. Okay, let us assume that this is a genuine answer. Why stop? Well, health reasons for one, money reasons too, or the creation of a false (drunken) reality to soothe the stuff that is going on. How about a nagging wife, she's bound to be around! Or a hangover at work in the morning until 11 a.m., the Monday morning blues that The Mamas And The Papas sang about (*"Monday, Monday"*); the aggressive moods that booze creates; the feelings of dissatisfaction that can come around; flabby love-handles that refuse to disappear. There are plenty of reasons to want to stop.



At the other extreme, however, he says: *"Have you got one?"* What is this, all of a sudden? Well, booze is nice, booze makes you calm; booze helps you sleep; booze is available everywhere; it is a way to create relationships with buddies; refusing booze is only for sissies; nice booze is a way to socialize; good booze makes you feel better. We can hear the client saying, *"Please take your anti-booze preaching elsewhere and say after me: 'life is short, you only live once: YOLO'"*.

Second step. In these paradoxical answers, let us take one new paradox that bubbled up and analyze it. The client says: *"I have aggressive moods with booze, I want to stop"* and he says: *"Booze makes me calm, I need it"*. But how on earth can you feel aggressive and calm at the same time? Only PP can tolerate the tension that these two statements provoke.

Let's dig into this question. Why are you aggressive? *"Well, there is this inner tension"*. What does alcohol do? *"Well, it relieves that same tension"*. What tension would that be? *"Trembling, nausea, a feeling of sickness, a feeling of unhappiness that I remember from childhood, the feeling that I cannot cope with everything around me. I need a drink to feel good, to relieve tension, to help me relax and sleep, to be who I am. To be one with my buddies. I feel so alone"*.

The other extreme: what happens if you do not drink? *"Well, the tension increases, the nausea increases, I feel hungry, I tremble, it feels like some sort of nervous breakdown. I need a drink, hurry up!"*

From a therapist's point of view, the symptoms *'hunger', 'nausea', 'trembling' and 'sleeplessness'* are what we call: withdrawal symptoms. Each time a heavily addicted client suddenly stops drinking, these symptoms emerge.

Therefore, by accepting all the paradoxes that the client expresses, we have come to see that the client has withdrawal symptoms if he/she does not drink. These symptoms appear quite suddenly and are very pervasive. They nag and nag and nag: nausea, nervousness, sleeplessness, trembling, depression.



We now have reached a new narrative: habitual drinking can be seen as a coping strategy to deal with the immediate emergence of withdrawal symptoms as soon as the alcohol blood level drops sharply. And those symptoms are caused by the body (they are somatic symptoms), they are not created by the mind.

Having understood what is going on, we can question-mark much of uni-dimensional therapy. Is the nagging wife the problem? (No). Is the money the problem (No). Are the 'Monday Morning Blues' the problem (A nuisance? yes; The ultimate problem? no). Are love-handles the problem? (Unsightly? yes; The ultimate problem? no).

What is the problem then? We have reached a new narrative, namely: the withdrawal symptoms. The alcoholic paradox can be seen as an immediate reaction towards a sharp drop of the alcohol level in the blood. This sharp drop always causes mild to severe withdrawal symptoms in a person who drinks habitually. But as soon as they appear, they are pervasive and nagging, to the extent that it creates tension. Booze is the ultimate relief.

Voila! PP creates a new narrative of alcoholism. One can view alcoholism as the fox who is chased by a pack of hounds called '*Withdrawal Symptoms*'. The hounds chase while the fox runs for sweet life itself.



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And that is how a good bottle of gin, beer, or Vodka, especially in company, feels like, the up-side: drinking alcohol has become the essence of a short moment of the love and celebration of life itself. Cheers! And all fellow-drinkers agree: we are one, we embrace the shortcomings of life, and we appreciate booze in the process.



But all are driven forward by the pervasiveness of mild or extreme withdrawal symptom, the down-side.

We have made a few loops of PP to reach this insight by examining one extreme and then the other. Suddenly, a new insight emerges. After a few loops, the original paradox just fades out of view, making way for more meaningful messages about the craziness of life. And the way it fades out of view is the way we like it.

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By the way, in this imaginary example, marriage counseling for the nagging wife is not going to help, a new set of friends is not going to help, improvement of social skills is not going to help, more motivation and spiritual guidance is not going to help, more misery is not going to help. It is the immediate relief of withdrawal symptoms when the alcohol blood level drops sharply, which constitutes a serious candidate for the medical doctor to consider in his therapy plan.

PP saves time, effort, and the needless blaming of bystanders and spouses. It can pave the way for timely interventions based on open-minded analyses of all available options.

In the coming parts 30 to 42 of this 24-part series (paradox there, sorry), we will scrutinize same-sex attractions (SSA's).

For example, here is Jeremy.

Ther.: *"How do you feel about men?"*

Jeremy: *"Which ones?"*

Ther.: *"The ones you like."*

Jeremy: *"I like all men".*

Ther.: *"Why?"*

Jeremy: *"Men are great".*

Ther.: *"Which ones do you not like?"*

Jeremy: *"Jeez, there are so many assholes walking around, I hate them. I am glad I am not like them".*

See any paradox there? He hates but he does not hate. These are two extremes. In PP, the truth is not in the middle but full-blown in both extremes at the same time in the same indivi-

dual. In PP, we do not hold the paradox against him; to the contrary, we are glad he is bringing it forward.

So, we investigate the first extreme, which for him is totally true. What do you make of this analysis?

Why love all men? Well, men are great, and maleness is awesome. Maleness is staggering, especially when you are using public transport. Don't know why, but it just is. When you have paid for a seat on the bus, tram, or train, that is when the fun begins. Will you have a look at that! Sure hope he does not notice my staring.

Waiting rooms have a knack for demonstrating the beauty of men, too. When it comes to public transport, I love waiting-rooms. I hate waiting, but I love the scenery.



The other extreme: *"I am glad I am not like them"*. Yep, a bunch of assholes. Insensitive, walking around as though they have all these privileges, they gawk their eyes out at women as though all women were some sort of private property of theirs. How come they even remotely think that a woman would like them and pay attention to them. Jerks, that is what they are: regular jerks. And then these women appear to like it! Would you believe it! Now, why on earth do women like jerks when there are sensitive and kind men like me around? By the way, I would feel awkward if she suddenly would get the hots on me and see me as a sex object. I don't like women who do that, and I don't like men who drool all over them too. I am glad I am not like them. Jerks, just sitting there at the bus stop. Wide-legged. Look at him, those thighs. How I love thighs, heavenly sent. I hope he does not notice my staring".

See any paradoxes there? The beauty of it.

Do not make up your mind. I know that this is contradictory to everything we are taught. In PP, making up your mind is like killing the goose that laid the golden eggs. By refusing to take a stance somewhere in the middle, you remain open-minded and as inquisitive as a 4-weeks-old kitten with its big eyes whose daily work it is to just take everything in.

### Shortlist

In PP, we do not try to resolve the paradoxes, but we just leave them in place for they are the essence of human life. We can even come to admire them and give them points. Here is my

shortlist:

- less is more.

Now, how the hell can less be more? In straight-forward or uni-dimensional psychology, less is less, and more is more. But less being more just doesn't make sense. Nope, it doesn't. Isn't it beautiful? I give it 9 points on a 10-point scale.

After a while, you get to like paradoxes. PP is extremely useful to explain incomprehensible stuff like religion. How about this one?

- the Lord made mankind in His image. On the other hand, man is a sinner.

Now, how the hell can this make sense? In straight-forward thinking, this means that the Lord is a sinner because He said so himself. The Lord is sinning, and He asking us to worship Him. What a pile of baloney religion is! But in PP, we learn to tolerate the tension that the two opposites create in the mind, and we learn to accept paradoxes as a fact of life. I would give this paradox an 8.

Every child is confronted with paradoxes and learns to accept them and deal with them. It is only later in life that he gets to unlearn them. For example, Mom does not agree with a certain issue, but when the kid turns to Dad, he gets away with it. Mom becomes furious and retaliates at Dad. But the kid goes to his room, proud of the way he can handle the paradox of having two parents. I would give the paradox of dealing with your parents a 7. Uni-dimensional psychology would insist that these paradoxes are '*harmful*' for the '*vulnerable*' child in his formative years. But the kid is having a great time in spite of the uni-dimensional psychologists and their zealous concern for a straight-forward approach.

Gay affirmative therapists insist that you are either gay or straight, and never the twain shall meet. These people cannot bear the pressure of both things being alive and real in the same person at the same time. But this mind-frame, the co-existence of incompatible extremes forms the heart of PP. A therapist cannot guide you further than he or she has come himself. Therefore, a uni-dimensional approach will never be sufficient to cope with the paradoxes of persons who experience same-sex attractions but who are not inclined to leave their current life or drift away into the sect of a uni-dimensional "*gay*" label.

These GAT therapists can wave all the fancy flags they like, but they fail to convince the doubting mind. The doubting mind also lingers in the direction of heterosexual fantasies and refuses to take a stance. Rightfully so, we say in PP. Keep it up. Defy them. Stay true to the paradoxes of life and love.

## Conclusion

In parts 30 to 42 of this 24-part series, we will dwell further into the world of paradoxes and reveal how the investigation of both extremes of each paradox leads to a new level. You can compare it to gaming, rising from level to level. The more you investigate levels 5 or 6, the less relevant or painful level 1 becomes. It just fades away in terms of importance, of pervasiveness, of mental torment. It doesn't disappear, but as they say: *"old soldiers never die, they just fade away"*.

And that is why it is good therapy, because in the process, you have retained an important degree of open-mindedness. Just like a kitten, you still take everything in.

To be continued.

Job Berendsen, MD.

