

Wisdom therapy group manual

Michael Linden¹ & Ariane Mossakowski^{1,2}

¹ Charité University Medicine Berlin, Department of Psychosomatic Medicine, Research Group Psychosomatic Rehabilitation

² PPT-Berlin, Institut for Psychological Psychotherapy and Counselling Berlin

Abstract

Wisdom is a multidimensional psychological construct, similar to social competence. Wisdom can be defined as a spectrum of capacities for solving unsolvable problems. Wisdom therapy aims to teach people specific wisdom skills. It is not about supporting patients in solving their problems, but about teaching how to cope with complex life situations. Wisdom therapy is part of cognitive behavioral therapy.

Wisdom skills include factual and problem-solving knowledge, contextualism, value relativism, change of perspective, compassion and emotional empathy, self-distance, self-relativization, relativization of problems and aspirations, emotion perception and acceptance, emotional serenity, humor, long-term perspective, distance from the past and forgiveness, uncertainty intolerance. Additional to a number of established psychotherapy methods specific wisdom therapy techniques are used, such as the method of unsolvable life problems.

In this article, a short introduction to wisdom psychology is given and then the objectives and the technical procedures in group wisdom therapy are described.

Keywords: Wisdom, wisdom therapy, group intervention coping, resilience

Kurzmanual für Weisheitstherapie in Gruppen

Zusammenfassung

Weisheit ist eine komplexe mehrdimensionale psychische Fähigkeit, wie das Konzept der sozialen Kompetenz. Vereinfacht kann Weisheit definiert werden als ein Spektrum an Kompetenzen zur Lösung unlösbarer Probleme. Die Weisheitstherapie zielt darauf ab, Menschen gezielt Weisheitskompetenzen zu vermitteln. Es geht dabei nicht darum, Patienten bei der Lösung ihrer Probleme zu unterstützen, sondern um die Vermittlung basaler Fähigkeiten zur Bewältigung komplexer Lebenssituationen. Die Weisheitstherapie ist dem übergeordneten Verfahren der kognitiven Verhaltenstherapie zuzuordnen.

Zur Förderung von Weisheitskompetenzen, wie z. B. Situationsbeschreibung, Emotionsregulation, Perspektivwechsel, Anspruchsrelativierung oder Vergebung stehen eine Reihe etablierter Therapiemethoden zur Verfügung. Darüber hinaus kommen spezifische weisheitstherapeutische Techniken zur Anwendung wie die Methode der unlösbaren Lebensprobleme.

In diesem Beitrag wird eine kurze Einführung in die Weisheitspsychologie gegeben und dann, unter Bezug auf die einzelnen Weisheitskompetenzen, die Zielsetzungen und das technische Vorgehen in der Gruppen-Weisheitstherapie beschrieben.

Schlüsselwörter: Weisheit, Weisheitstherapie, Gruppenintervention Coping, Resilienz

1 Introduction

Mastering stressful life events and dilemmas, such as psychological trauma, loss of a beloved one, insults, injustice, or breach of trust requires detachment from what has happened, to no longer look back in anger or despair, to learn from what has happened, and to come to a reconciliation with the events. It must be an active desire to let the past behind and an orientation towards the future. Furthermore, there are also dilemmas in life with no right or wrong answers ("should I stay at home with

my sick child or go to work"), which similarly need complex considerations and decisions, while the inevitable negative aspects must be endured and overcome. In these cases, there is no "simple solution". To cope with serious negative life events, but also everyday dilemmas, people have "wisdom skills".

2 Wisdom Psychology

Many people think of wisdom as a philosophical concept, or as a characteristic of special individuals. The philosopher Gert Scobel describes wise people as educated, peaceful, serene, having intuition, pity, as discreet, sensitive, non-judgmental, good listeners, with the ability to reflect, to understand and to regulate emotions" (Scobel, 2008). Psychological research has described wisdom as a multidimensional psychological capacity, similar to social competence. Several subdimensions can be distinguished, as summarized in Table 1. As a rule of thumb, wisdom can be defined as a spectrum of competencies which are helpful to solve unsolvable problems (Baumann & Linden 2008, Linden 2014, Zacher & Staudinger 2018).

3 Translation of wisdom psychology into psychotherapy

Wisdom research has shown that it is possible to increase the degree of wise behavior (Bruya & Ardelt, 2018). It is sufficient to consult with someone or even to imagine explaining the problem to someone before reacting to a situation. Sometimes it is enough to just let some time pass. The "e-mail-paradigm" is good example. If you get an email, especially an annoying or frustrating one, write an answer immediately but then save it for later. The next morning, one will in most cases change the text significantly. The difference between the initial draft and the submitted text can be understood as a result of wisdom. It is one of the popular wisdoms that one should first think and then act or that one should sleep on it for a night in difficult decision-making situations.

When looking at the subdimensions of wisdom, it also becomes apparent that there are many psy-

View on the world	
1. Factual and problem-solving knowledge	General and specific knowledge of problems and problem constellations, of what constitutes problems, and of available problem-solving possibilities
2. Contextualism	Knowledge of the temporal and situational embedding of problems and the numerous circumstances in which life is integrated
3. Value relativism	Knowledge of the diversity of values and life goals and the need to look at each person within their value system without losing sight of one's own values
View on others	
4. Change of perspective	Ability to describe a problem from the point of view of other people
5. Compassion and emotional empathy	Ability to feel how other people feel and to understand their emotional experience
View on oneself	
6. Self-distance	Ability to recognize and understand how other people see and evaluate you
7. Self-relativization	Ability to accept that you are not always the most important person in the world and that many things do not run according to your own will or are not oriented towards your own interests
8. Relativization of problems and aspirations	Ability to be humble and to accept that one's own problems should not be taken too seriously compared to many others in the world
View on one's own experience	
9. Emotion perception and acceptance	Ability to recognize and accept the full spectrum of one's own feelings
10. Emotional serenity	Ability to control one's emotions according to situational needs, and acquire an inner serenity
11. Humor	Ability to uphold ones humor even in difficult situations
View on the past and future	
12. Long-term perspective	Distinction between short- and long-term consequences, and knowledge that every event and behavior can have negative and positive consequences
13. Distance from the past and forgiveness	Ability to let the past behind, to let things rest, to accept what has happened, and to free oneself from the desire for revenge
14. Uncertainty tolerance	Knowledge of the uncertainty inherent in life regarding the past, present, and future and the need to act nevertheless

Table 1
Dimensions of Wisdom

chotherapeutic approaches which can help to improve reality checks, emotion perception and regulation, change of perspective, and forgiveness.

Wisdom therapy aims to teach such specific wisdom skills (Schippan et al. 2004, Linden 2014). It is not about solving problems of patients, as it is the goal in "problem solving therapy" (Cuijpers et al 2018). Patients should learn skills of coping with complex life situations. Wisdom therapy has been developed under the framework of cognitive behavior therapy (Linden & Hautzinger 2015, Matu 2018). Therapists should be familiar with basic strategies of behavioral therapy. They should know how to establish a therapeutic relationship, to make a behavioral description, and contingency analysis, to analyze cognitive schemas, to do cognitive rehearsal and Socratic dialogue, or how to do exposure therapy.

In addition, there are also specific therapeutic techniques for teaching wisdom skills. This includes the "Method of Unsolvable Life Problems" (Linden 2017). Example problems are used (e.g. a man leaves his wife because of a younger woman). Patients learn a change of perspective by looking at the problem from the point of view of all three parties involved (husband, wife, new partner). The work on an example dilemma is recommended, since it is difficult for patients to look at their own problems from a distance and be creative in developing new perspectives. It is much easier to give advice and comment on problems of other people. Patients are asked to step aside from their own problem for a moment, and consider how people in general react in difficult situations and what can be learned from that. Many people in the world are confronted with difficult problems and therefore it is wise and can be worthwhile to see what can be learned from others.

Using fictitious life problems, the facts, circumstances, and feelings when identifying first with the victim, then the perpetrator, and finally the beneficiary are analyzed. What are the differing views of everyone involved? It can be discussed how to make the problem even worse or what experts in life management would advise (e.g. lawyer, pastor, grandmother). Long-term consequences of different reactions are discussed (what results will this action or situation have in the future). It can be assumed that patients transfer this to their own life situation. Patients are made to recognize that people in different situations are subject to different constraints. The same situation can be an impertinence in one context, and possibly a stroke of luck in another context.

The use of wisdom skills helps to change the view of what has happened, of the presence and the future in such a way that possibilities can be seen to free oneself from stressful life events or embitterment. It is important to broaden the view on the world and other people, to change the attitude to oneself and previous experiences, and to discover

new perspectives for the future, which is a form of "reframing" (Karamoy et al. 2018).

The different wisdom dimensions are interrelated. Contextualism is based on the description of facts. It is leading to value relativism, to accepting that other people hold other views on the world, and have their own emotions, etc. Therapeutically, however, it is advisable to first deal with the wisdom dimensions separately, one after the other, in order to help patients understand what is at issue and make a complex psychological ability easier to understand.

4 General structure of group therapy

Wisdom therapy can be implemented as individual and group therapy. Group therapy has the advantage that participants can talk about problems that do not necessarily affect them personally. The setting allows group members to witness what efficient or strange ways are possible in dealing with problems. It is possible to discuss what are reasonable goals, what one can do, how to make a profit with a long-term perspective, etc. in a playful manner. Wisdom therapy should be fun. One does not focus on problems, but discuss problem solutions, stupid and clever ones, under a short and long-term perspective. Patients sometimes love to discuss "stupid" behavior, which can result in cheerfulness in the group. It is "only" about an example problem. So you can also get silly. The message is still understood.

Strategically, the group can be run thematically open. Patients raise topics or problems they would like to talk about. This can then be taken up, shortened, generalized and alienated by the therapist by reducing it to three participants (perpetrator, victim, beneficiary). It should be presented as insolvable (the infidelity of the partner has happened, even if he is coming back) and stimulate pity for the victim at first glance. The wisdom dimensions can then be targeted one after the other: What are the facts? What does everyone involved think? What feelings does this trigger in whom? Which demands can be made by whom, which can be fulfilled? What are short-term, what are long-term solutions, what is good or bad? What would a lawyer, grandma, a pastor advise?

The group can also be structured in a thematically closed manner. Patients are informed that wisdom consists of many different competencies. Today, the topic is factual knowledge, long term perspective, aspirations, or whatsoever. An example dilemma is presented. Then it is discussed what relativization of aspirations means for the presented problem. Is a spouse entitled to eternal fidelity? How realistic is a partnership without conflicts? Can one demand that the unfaithful begs for par-

don? Why is it not allowed to happen to you, if it is quite common elsewhere? How would other persons see the problem? The advantage of the capacity-centered approach is that the participants understand that it is about learning skills in dealing with difficult life situations. This not only helps to structure the example problem, but the skills also help the patient to cope with his current problem and to react in future difficulties with more wisdom.

5 Technical procedures in wisdom therapy and training of wisdom skills

5.1 Factual and problem-solving knowledge

If you face a problem, it is wise to first understand what the problem is in detail. This includes the background, the current overall situation, the relevant legal aspects, the social component, and realistic options for action.

For many people, it is difficult to make a rational assessment of the problem situation. The "perception of the world" is distorted by strong emotions, which can lead to errors in thinking. A rational description and acknowledgement of facts is replaced by wishful thinking and restricted perception of the world.

A first goal of wisdom therapy must therefore be to teach down-to-earth and unemotional descriptions of problems and available problem solving options and procedures. The "behavior description" is a good and regularly practiced model in behavioral analysis (Tuschen-Caffier & van Gemeren 2018).

It has to be learned which questions must be asked when there are problems. Which processes have contributed to the development of the problem? What happened at what time? What reactions did each person involved show and when and what happened afterwards? What can be done in the future? What questions would prototypical problem solvers ask and which possibilities of action would they discuss? The example dilemma can be extended by additional "information". It can also be asked what additional information one should know and obtain in order to come to a conclusion.

5.2 Contextualism

All problems arise under certain context conditions, which were already described in detail during the description of the facts. This has direct significance for the evaluation of the problem. If you live in a simple house, you may be happy if you are the only one who still has a roof over your head,

while the neighbors have to live in tents. The same situation may be unbearable if everyone else lives in magnificent houses. If somebody has a severe car accident, but is in contrast to another person not seriously injured, this may cause feelings of relieve and happiness. However, if your car gets a little scratch when driving through the garage door, this can lead to great annoyance and resentment. The context can put life events in a very different light.

Patients often have a hard time with this contextual view of the problem. The paint of the car is scratched, that's the problem. A relativization in the sense that "only" the paint is damaged and no dent has been caused is not the first thought. How does the significance of the damage change when you consider whether the owner has money and a repair does not hurt him or whether he is poor. How old is the car actually? Is that the only scratch? How many more will follow? Such contextual questions rarely come to people spontaneously. But they can be practiced. The group can be asked questions about the fictitious scenario such as: Under what conditions would the event be more or less dramatic or even good? How old is the wife of the unfaithful husband? Was she herself already unfaithful? Is she financially protected? Let the imagination run wild. The point is not to say that everything is not so bad, but to show the contextual relativity of life.

5.3 Value relativism

Each person has his own "views of the world" and "convictions", or "basic assumptions", "basic beliefs", or "cognitive schemata" (Matu 2018). Some of these are innate, such as the belief in justice. Some are learned, such as belonging to a religious community, including the rules associated with it. There are many differences in this regard from person to person. Such basic beliefs also define societies, as a comparison between different countries may show, for example the different rules of living in Saudi Arabia and Western Europe. Persons strongly believe in their own world perception and evaluate something as wrong what deviates from one's own basic assumptions (e.g. women and men have the same rights, versus women have to obey their husbands). People feel attacked when one's own worldview is called into question. This is the reason, for example, that there are fierce discussions and mutual degradation on talk shows, discord in families and even war between countries. A balance of interests and functional problem solving requires wisdom, which includes respecting the values of other people without having to give up one's own attitudes. This apparent paradox can be illustrated by the example of language. If a person speaks a certain mother tongue, loves it, and wants the children to also learn it properly, he or she can still appreciate and admire another language. Those who believe in the Western ideology of equal

rights and self-determination of the sexes can still respect the Islamic worldview.

"Value relativism" is extremely difficult for many people and must be specifically targeted. This can easily be done by using a fictitious problem. It can for example be discussed what is "important" to the wife who has been left, to the husband, or his new girlfriend. In which cultures is the inviolability of marriage mandatory and where is it not? Would things look different if the woman had become unfaithful instead of the man? What are the worldviews which determine the individual reaction? Who is right or wrong?

5.4 Change of perspective

A change of perspective means being able to understand what other people think and how they see the world. This includes seeing the world from a different perspective and accepting that other people can have an alternative point of view. The change of perspective does not mean taking over the view of the other person, but better understanding and assessing the other person and thus also being able to predict his reactions. This makes it easier to resolve conflicts and even puts you in an advantageous position. However, people tend to see only their own perspective, for example themselves as "victims". As a result, thoughts, motives, and intentions of the other person are only assumed and highly dependent on one's own perspective, which may or may not be true.

Some people are unable to look at a situation from another person's point of view because they believe that "understanding" is synonymous with "justifying". It is commonly believed that "understanding and being able to understand something" is synonymous with accepting and consent. It is important to recognize that being able to understand and comprehend something does not mean that you have to find it right. A teacher can still give a student a bad grade in an examination even though, or even because he fully understands what the candidate is thinking.

The fictitious dilemma is a simple way to teach change of perspective by looking through the eyes of all participants, one after the other, and thus learning that different people have different views. Change of perspective can be practiced. While value relativism is about fundamental positions and responsibilities of the participants, the change of perspective asks about the situation-specific considerations.

Patients often find it easier to adopt the role of the victim and resist to take the position of the culprit. This explains why many patients have problems with understanding the views of their counterparts in their real lives. The fictitious dilemma, which is "only" a thought exercise, can help patients to make a role change. They can learn that it is help-

ful for the victim to know what is going on in the other person. It has to be learned that it puts you in an advantageous position if you understand what an opponent thinks and it would be a mistake not to know that.

5.5 Compassion and emotional empathy

In the psychotherapeutic literature, the term empathy (Drimalla et al. 2019) has different meanings. Therapeutic empathy means to be able to see the world through the eyes of another person, which includes on one hand to understand what another person thinks (= change of perspective, as already discussed), and on the other hand to understand how he feels.

This must be differentiated from pity, which is "projective empathy", in the sense of having emotions, which oneself may experience, if one would be in the situation of the other person. Anyone who sees a high-wire artist and is afraid, projects his own fear onto the artist. One is assuming that the other person is feeling similar emotions, which can be true or wrong. In most cases the artist will be confident and relaxed instead of anxious.

Wisdom includes the ability to recognize the emotions of other people and not to confuse them with one's own prevailing emotions. This is an art that needs to be learned. Usually, people expect the other person to feel the way they should feel. The culprit "should" be ashamed or feel sorrow. However, this is often not the case. He could be happy because he has won. Participants must be taught the ability to recognize and describe other people's emotions, especially if they do not meet their own expectations. Using the fictitious dilemma, different emotional experiences can be activated by role change. Patients are explicitly encouraged to describe how a husband might feel when he is with his new girlfriend. Is he ashamed, is he happy, or is he just in love? Who has ever experienced something like this? Who can contribute to this question? How can one find the truth?

5.6 Self-distance

It is common knowledge that self-perception and external perception can sometimes differ. While you think you are a cheerful and entertaining person, others experience you as exhausting and looking for attention. While oneself feels insecure inside, one is experienced as strong and powerful from the outside.

Looking at yourself from the outside can help to address problems more realistically. Such a distance to oneself helps to realize that one can also influence the effect one has on others. What do I know about how I affect others? Many people don't

know exactly how they are seen by others. It is an important element in coping with problems to be aware of the impression you have on others, and how other people see you. This helps to understand how other people react to you. This ability to see oneself through the eyes of other persons is part of wisdom.

The fictitious dilemma can help to learn how to recognize what other people think about oneself and how they experience you. From any position, be it wife, husband, lover, a description of the other persons can be made. Discrepancies between internal and external perception can be described. It can also be shown that there is no right or wrong, but only perceptions from different perspectives. How other people perceive you doesn't have to be "true", but it's still important for the interaction with others and for problem-solving.

Another important topic is what you can do to change your "impression formation", so that other people perceive you in a more advantageous way. What does the abandoned wife have to do so that everyone else thinks she is sovereign, strong, and can withstand what has happened? What does she have to do to give the husband the impression that she is devastated? Again, it is not about what actually is, but what others should perceive.

5.7 Self-relativization

A change of perspective, empathy, contextualism and value relativism already lead the participants to experience that their own worldview is not the only possible one. It implicitly follows, that as a person you are only part of a larger whole. Self-relativization involves realistically realizing and accepting one's own role in the world (Lavelock et al. 2017, Worthington et al. 2018). While the own point of view is important and correct, this does not mean that others or the world have to follow it. In some situations, one is even unimportant to others. Wisdom includes to realistically assess one's own position in a social structure, not overestimating oneself, but also not seeing oneself below value. However, it is a characteristic of humans to see themselves in the center of the world and to expect that other people should take oneself into account. You hear people complain again and again: "One shouldn't have done that to me". But the question is why not?

If the fictitious dilemma is that a boss lays off a long serving employee and replaces him with a younger and cheaper person, then it can be discussed what is more important, the employee or the future of the company. Who has which responsibilities? Who costs how much? Who works and achieves how much? Many such questions can be asked. In group therapy, self-relativization can also be promoted by asking yourself the question which other person you would want to exchange with, or which life situation or characteristic you would

want to take over from one of the other people and which not. It becomes apparent that no one is "perfect" and it cannot be expected that the wishes of the victim are more important than everything else.

5.8 Relativization of problems and aspirations

People with problems in life often have rigid and also high aspirations and demands on themselves and the world. They hold on to the fact that they have been deprived of something that is due to them. This is partly accompanied by a high striving for perfectionism. Psychological research on aspiration levels (Heckhausen 1955) has shown that they form and increase in comparison to earlier achievements or what others have, in adjustment to reality, performance, values, avoidance of failure, securing success, convenience. That way, aspirations can change. If you have never shot with a bow and arrow, you will be happy when you hit the target. But if the arrow has landed twice in the middle, disappointment follows when it "only" hits the edge of the target the next time. If the sister gets a piece of cake, then the own piece must not be smaller.

People are entitled to have aspirations in regard to themselves, their partners, or life in general. The wish that the child should study can lead him to university. However, problems arise when aspirations are higher than the possibilities. If the academic parents think that a university education must be achieved, but the child has performance problems, then there are burdens and disputes. Many people suffer from their own aspirations rather than the world itself. They have problems in coping with life events because of rigid and too high aspirations regarding themselves and the world.

Modesty and contentment are important parts of wisdom and have always been regarded as virtues. It is important to acknowledge that there are things that you cannot achieve. The aim of therapy is to help the patient to bring aspirations and what is achievable and feasible in a balance, and to accept that not all wishes can be fulfilled.

Using the fictitious dilemma, it can be checked which aspirations of whom are realistic and which look exaggerated. Why does the long serving employee think that he may never be dismissed? Such a wish is understandable. However, is it realistic? A legal consultation can come to a completely different conclusion. Who is entitled to what and why? Is the older employee still "up to date" and can he cope with the new tasks? Isn't the young employee much better? Asking such questions occasionally leads to amazing answers, which are certainly not always easy to accept. However, they can lead to de-emotionalization and better problem solving.

In this context, gratitude psychology may be helpful, which is coming from positive psychology (Arnout & Almoied 2021). If you think you earn too little, you can still be glad that there is enough to live on. This can also be discussed using the fictitious dilemma. Does the dismissed employee now have to starve? What would such a person experience in other countries? If the husband has left his wife, there is possibly still a reason to be grateful for many beautiful years together? And by the way, is it always a disadvantage to get rid of the husband, now that he is getting older? Gratitude has many facets. In the group, there are no limits to creativity in the discussion of justified, exaggerated and unjustified aspirations, and gratitude.

5.9 Emotion perception and acceptance

Emotion psychology has shown that there are few basic emotions from which an infinite number of emotional nuances can be generated, similar to few basic colors and numerous color shades (Niedenthal & Ric 2017). Emotions arise "endogenously" without external cause, but are also triggered by external stimuli. Resulting are "emotions of higher order". There is always a mixture of different feelings at the same time.

Emotions can be pleasant but also painful. People try to free themselves from negative emotions. If this is not successful, a vicious circle may start. The attention is focused on negative emotions, which then increases their rate and intensity. Another problem is that many emotions are politically not correct. Even if your philosophy is that homeless people are respectable persons, a feeling of disgust and reluctance in their presence is "unacceptable", which again causes further negative feelings like shame and anger.

According to the "Schachter paradigm" (Schachter 1964), emotions influence our perception and interpretation of the world. Those who are in a bad mood will experience the environment as bad and negative. Those who are in love may even find negative things about their partner sweet. We judge the world through our emotional eyes. Emotions also directly influence one's behavior. Feelings of love lead to rapprochement with another person, anger to aggressive feelings and acts. Finally, the own emotions also influence how other people react. Anyone who looks discouraged triggers displeasure in the other person.

It follows from emotion psychology that it is important in problem solving (a) to be aware of the full spectrum of own emotions, (b) to accept prevailing emotions, even if they are unpleasant or undesirable, (c) to be aware that they can distort the perception of reality, and (d) that they cause reactions by others.

The first problem is that most persons cannot describe their emotional pattern because of a lack of terms, not unlike difficulties with the detailed description of colors. This prevents a differentiated perception of emotions. So the first step is to practice naming emotions using the fictitious dilemma. What emotions could the abandoned wife or the dismissed employee have: anger, disappointment, shame, revenge, despair, uncertainty, hope, aggression, joy, helplessness, happiness and much more and all at the same time. This exercise should be given time. The emotions can be listed on the board. The participants should name what they felt when they had one or the other emotion. The goal is to differentiate the many qualities of each emotional state.

It can then be considered what follows from which emotion. How does it change the view of the problem when the abandoned wife is sad because she has been left behind or if she would feel happy because she now can live on her own?

In essence, it is about accepting the feelings that are there. Mindfulness therapy (Wolf-Areholt & Beckmann 2018) describes the principle of "defusion" (Masuda et al. 2014) as a way to handle emotions. This means to be aware that a) emotions are only partially under one's own control, that they are b) as they are, that c) they do not reflect the real world. Dialectical behavioral therapy (Schmidt & Russo 2019, Valentine et al. 2020) describes the concept of radical acceptance to get out of the fight against one's own emotions.

5.10 Humor

A special approach to emotional and situational control alike is humor. To keep your humor is a therapeutic goal of its own (Fry & Salameh 1987). Humor has already been described in detail by Sigmund Freud (1954) as a way to preserve one's mental health when confronted with difficult challenges of life. He describes humor as a kind of triumph "against the disadvantage of real conditions". It is a way of consciously choosing to turn away from suffering.

Humor implies to see the many layers of life. Yes, there is the existing problem. But also, yes, there is this funny part. In TV shows like "candid camera", people are experiencing most queer and often very difficult and provoking situations. Viewers then can see that people react very different to the same situation. One feels deeply insulted and reacts angry, others start laughing.

Humor, even in difficult situations is a way of situation control. If there is an adversary, show your teeth and start smiling. Humor is a mixture of distancing and reframing a situation and gives a feeling of control and assertiveness.

The fictitious problem gives the opportunity to train humor. Let us try to look at the funny side of

life. What is funny about a husband who runs after a young girl? What is funny about seeing a university graduate sitting on your chair and doing your work?

5.11 Emotional serenity

Emotions can take over a person. When people are under stress, they can lose self-control because their emotion regulation strategies are insufficient. If feelings get out of hand, then there is the danger that people will be carried away to ill-considered action. The ability to control one's own feelings in such a way that they help to achieve a positive result is scientifically described as "emotional intelligence" (Kotsou et al. 2019). This is especially necessary when emotions are extremely strong, lead to misalignment or maladaptive behavior, and have other negative consequences. In contrast, emotional control is needed in everyday life of all people (Gross 2013, Barnow et al. 2016). To "let oneself go" in an uncontrolled way violates etiquette and puts the person in a bad light. Even if a person cannot get rid of their dysfunctional emotions, they do not necessarily have to be shown to the outside world. Successful problem solving requires to control emotions in order to avoid negative consequences.

Wise people are characterized by emotional serenity even in difficult life situations. However, this does not mean that they do not have feelings or not react emotionally. To suppress negative or unwanted emotions, is not so much possible on the primary emotional level, but rather on the level of emotional modulation (Lammers 2015). Wise individuals do not experience negative emotions as a threat, but are able to endure and control them.

In wisdom therapy, the participants should learn that it does not make sense to act immediately, impulsively and "blindly" with strong emotions. Psychology has described a lot of strategies to control emotions and dialectical behavioral therapy (Schmidt & Russo 2019, Valentine et al. 2020) lists a number of special methods or "skills" for dealing with dysfunctional emotions. Examples are distraction, distancing, re-evaluation, acceptance, problem solving, deliberate induction of alternative feelings, explicit self-instructions, remembering beautiful things, conscious attention to the environment, imagining the other person in a changed situation (the teacher in underpants), describing in detail one's own inner state (legs, abdomen, back, heart, etc.), internally subtracting seven from hundred in series, changing the direction of view, pressing on acupressure points, changing body position and posture, reading a text, listening to music, talking to friends, buying shoes, eating something nice, jogging, sucking an effervescent tablet, scream loudly from the bottom of your heart in a lonely place, take cold showers and much more.

When would what be conceivable and could help when obsessed with overburdening emotions?

Another method is to think about which emotion you "want" to show. Does the abandoned wife want to make her husband feel guilty, make fun of him, be relieved that she has got rid of him, or express that she wants to continue to be friends with him? Which emotional expression would be useful for what? You can do facial expression exercises in a group, which is also fun. The intended and acted out expression of emotion can be quite independent of one's own experience. Nevertheless, such flaunted emotions also have an influence on one's own emotional feeling.

5.12 Long-term perspective

Long-term perspective is of importance in political, social, and personal life. The point is, what I do today will have consequences tomorrow. This is true for the ecology, but also yourself. Those who smoke today, may have health problems many years later. If you don't get up today and go to school because it's early in the morning and cold, you may earn less money in future days. Long-term perspective means to judge current actions under their long-term consequences.

Wise people have the ability to align their behavior with long-term positive goals and not to be seduced by the here and now. It can be called a "eudaimonic" perspective (Vitterso 2016), which tries to do the right thing instead of a "hedonic" approach, which tries to get happy now. Long-term perspective includes self-control, i.e. resilience to current difficulties in favor of long-term positive consequences. Psychologically, a distinction is made between short-term or long-term "behavioral reinforcers" (Höchli et al. 2018).

The fictitious problems are ideal for training a long-term perspective. The question is what the employee or wife, but also the boss, the young employee, the husband, or girlfriend can do to get short-term benefits and what is best, to gain in the long run. What is dysfunctional, impulsive, and ill-considered and leads to further problems, what is helpful and advisable? Especially the question of what the wife or the employee can do to make things much worse (yelling at the boss, sabotaging machines, etc.) is often very popular with the patients. At the same time, it also becomes clear that a long-term perspective is more sensible. Kindness towards the boss (even if you are deeply upset) may lead to higher severance compensation. Not insulting the wife can still pay off as you may need her again in the future. What would you want to tell your grandchildren later in life about how you mastered the current situation? It is all about different consequences, i.e. short-term-positive/long-term-negative but also combinations of negative/positive; negative/negative; positive/positive. The aim

is to raise the awareness that in complex life situations there are often no clear but always multi-level and mixed developments. Short-term and long-term consequences can contradict each other. One can emerge from a present defeat as a winner later on.

5.13 Distance from the past and forgiveness

Negative experiences and life events stick in the memory. When bad things happened, people will again and again have to think about it. Memories evoke the feelings, which were associated with the original event. Trauma psychology has extensively described that emotionally charged memories have a tendency to force themselves into memory again and again (Lyadurai et al. 2019). They come automatically and the more emotionally laden they are, the more frequent they will be. The thought of having been betrayed by the husband can evoke feelings of insult, embitterment, or anger even after many years.

This results in self-punishment by remembering, and the afflicted person remains in permanent stress and suffering. In the end, the problem is no longer what happened, but what happens continuously. People are stuck in the past and ongoing self-inflicted harm. This does not hurt the culprit or does not help to cope with the problem. The victim is a double victim. The goal must therefore be a detachment and to be free from the past.

However, this is not easy as suffering can also be addictive. People are obsessed with self-pity. The idea is that the marital infidelity wasn't so bad, if one would not feel bad. Let the world see what it has done to me. Revenge fantasies can also contribute to clinging to memories ("revenge is sweet") because you can enjoy ideas of punishing the culprit, rewrite in your mind what really has happened and by this make you feel good.

Wise people have the ability to let the past rest. They can learn from the past. They can forgive and forget. Patients need to be trained on how to draw a line and let things be as they are, and to accept what cannot be made undone. "Forgiveness psychology" (Webb & Toussaint 2019) has defined forgiveness as a form of coping that allows to distance oneself from past injustice or unsolvable dilemmas. Forgiveness should not be confused with enduring unjust behavior or surrendering to the perpetrator. Forgiveness also does not mean ignoring or relativizing terrible things, talking things nicely, apologizing to the perpetrator, re-establishing contact with him or even refraining from punishment. Forgiveness is not synonymous with reconciliation or forgetting. Forgiveness is selfish. It allows to conclude with the past. What has happened is now in the past. One can learn from the experience, while fighting back only costs energy. The goal is to free

oneself from the past and bad memories, so that one no longer is constantly reminded of what happened and that the past is no longer important and leaves you cold.

In therapy, the aforementioned distinction between forgiveness and justification, exculpation, understanding, pardoning, reconciliation and forgetting must be introduced. What does that mean for the people in the fictitious problem? People often confuse forgiveness with justifying, exculpation, or even reconciliation, like letting the unfaithful partner back into the house. Patients are regularly amazed that to forgive does not include pardoning the person who has harmed them, or that one can still condemn what has happened. It should become clear that forgiveness is not important for the other, but for oneself. It is a prerequisite for freeing oneself from what happened. Forgiveness is an active and deliberate act.

In the fictitious problems, it would be helpful if all participants would be able to no longer look back and instead turn to the future. It would be helpful if the employer, the old, and the new employee could meet without resentment and even spend the Christmas party together. After the separation of partners, it is in your own interest and that of the children to learn to bring the past to a close and even to spend a holiday together. Those who can conclude with negative past experiences have high wisdom skills.

5.14 Uncertainty tolerance

Uncertainty is an unconditional anxiety provoking stimulus. Hear a noise in the house and knowing it is the cat is fine. Hearing a noise, but having no explanation causes unrest and anxiety. Uncertainty is a constant companion in life. The ability to endure uncertainty varies from person to person, just as there are more or less anxious people (McEvoy et al. 2019). Anxiety provoked by uncertainty can paralyze active coping. If one cannot bear the fact that a partnership is never secure, one cannot begin a partnership. At the same time, uncertainty intolerance leads to an increased need for control. The children must constantly communicate where they are, which not only causes stress to everybody, but can also lead to further problems (Hebert & Dugas 2019). Wise people can live with the fact that they do not know what tomorrow will bring. That does not stop them from looking forward to the next day with serenity. The aim of wisdom therapy is to increase uncertainty intolerance.

Using the fictitious problems, it can be discussed what could happen to the participants further on. It is important that not only negative but also positive developments are discussed. Everybody can become seriously ill. What would that mean? One can find a new perfect partner or job.

There is a lot that can happen and nobody knows or can exclude anything.

What are the consequences? One thinks of the best development and takes those actions today which increase the possibility of a good outcome. Whether the betrayed woman will ever find a new partner cannot be predicted. However, today she can stand up, dress herself, and go to the cinema. The chance of feeling comfortable and possibly even making an acquaintance is higher than if she sits at home ruminating about the past. Psychologically, this corresponds to the paradigm of "idealized self-imagination" and "time projection" (Lazarus 1968). Every long journey begins with the first step. If you don't know for sure what the future holds then you do what seems best from the current situation. Good will also counts. One has to seize the opportunities in the here and now and trust that everything will develop somehow in an acceptable way. You go through the open door and not through the wall.

Patients often want a quick and definite solution for their problem. To accept that it needs time to find new roads and make positive developments needs uncertainty tolerance. It takes years for a tree to cast shade.

The knowledge of the uncertainty and unpredictability of life also has another consequence for one's own present behavior. If I know that many things are not under control, then it is wise to make provisions for various possible outcomes. "I can't influence whether it rains but I can take an umbrella with me". If I know that marriage may end in a breakup, I will take care of my relationship and will do more to keep it alive. The abandoned woman may now also have better chances in new relationships.

6 Conclusion

It can help to give the patients summarizing mnemonics. These can be:

In case you are confronted with problems in life or dilemmas, it is wise to clarify,

- what exactly happened
- what can be done
- what impact the context has (on the development and evaluation)
- which values are involved
- what others think
- what others feel
- what others think about you
- what aspirations you have
- what emotions you feel
- how to control your emotions
- how to keep your humor
- how to come to terms with the past
- how to forgive

- the difference between short and long-term consequences
- how to tolerate uncertainty

7 References

- Arnout, B. A., & Almoied, A. A. (2021). A structural model relating gratitude, resilience, psychological well-being and creativity among psychological counsellors. *Counselling and Psychotherapy Research, 21*, 470-488.
- Barnow, S., Reinelt, E. & Sauer, C. (2016). *Emotion regulation. Manual and materials for trainers and therapists*. Berlin: Springer-Verlag.
- Baumann, K., & Linden, M. (2008). *Wisdom skills and wisdom therapy*. Lengerich: Pabst Verlag.
- Bruya, B., & Ardelt, M. (2018). Wisdom can be taught: A proof-of-concept study for fostering wisdom in the classroom. *Learning and Instruction, 58*, 106-114.
- Cuijpers, P., de Wit, L., Kleiboer, A., Karyotaki, E., & Ebert, D. D. (2018). Problem-solving therapy for adult depression: an updated meta-analysis. *European Psychiatry, 48*, 27-37.
- Drimalla, H., Landwehr, N., Hess, U., & Dziobek, I. (2019). From face to face: the contribution of facial mimicry to cognitive and emotional empathy. *Cognition and Emotion, 33*, 1672-1686
- Freud, S. (1955). *Gesammelte Werke*, Bd. 14, S.383-389
- Fry Jr, W. F., & Salameh, W. A. (1987). *Handbook of humor and psychotherapy: Advances in the clinical use of humor*. Professional Resource Exchange, Inc.
- Gross, J.J. (2013). Emotion regulation: taking stock and moving forward. *Emotion, 13*, 359-365.
- Hebert, E. A., & Dugas, M. J. (2019). Behavioral experiments for intolerance of uncertainty: Challenging the unknown in the treatment of generalized anxiety disorder. *Cognitive and Behavioral Practice, 26*, 421-436.
- Heckhausen, H. (1955). Motivation analysis of the level of entitlement. *Psychological research, 25*, 118-154
- Höchli, B., Brügger, A., & Messner, C. (2018). How focusing on superordinate goals motivates broad, long-term goal pursuit: a theoretical perspective. *Frontiers in psychology, 9*, 1879. <https://doi.org/10.3389/fpsyg.2018.01879>
- Lyadurai, L., Visser, R.M., Lau-Zhu, A., Porcheret, K., Horsch, A., Holmes, E. A., & James, E. L. (2019). Intrusive memories of trauma: a target for research bridging cognitive science and its clinical application. *Clinical Psychology Review, 69*, 67-82.
- Karamoy, Y. K., Wibowo, M. E., & Jafar, M. (2018). The Implementation of Self-Instruction and Reframing Group Counselling Techniques to Im-

- prove Students' Self-Confidence. *Journal Bimbingan Konseling*, 7, 1-6.
- Kotsou, I., Mikolajczak, M., Heeren, A., Grégoire, J., & Leys, C. (2019). Improving emotional intelligence: A systematic review of existing work and future challenges. *EmotionReview*, 11, 151-165.
- Lammers, C.-H. (2015). *Emotion-focused methods. Techniques of behavioral therapy*. Weinheim: Beltz
- Lavelock, C. R., Worthington, E. L., Jr., Griffin, B. J., Garthe, R.C., Davis, D. E., & Hook, J. N. (2017). Humility intervention research: A qualitative review. In E. L. Worthington, Jr., D. E. Davis, & J. N. Hook (Eds.), *Handbook of humility: Theory, research, and applications* (pp. 274-285). Oxford: Taylor & Francis.
- Lazarus, A. A. (1968). Learning theory and the treatment of depression. *Behaviour research and therapy*, 6, 83-89.
- Linden, M. (2014). Promoting resilience and Well-being with wisdom and wisdom therapy. In: Fava, G.A., Ruini, C. (eds), *Increasing well-being in clinical and educational setting. Interventions and cultural context* (p. 75-90). Heidelberg: Springer, Heidelberg.
- Linden, M. (2017). *Verbitterung und Posttraumatische Verbitterungsstörung. Fortschritte der Psychotherapie*. Göttingen: Hogrefe
- Linden, M. & Hautzinger, M. (eds.) (2015). *Verhaltenstherapiemanual*. Berlin: Springer
- Masuda, A., Hayes, S.C., Sackett, C. F., & Twohig, M. P. (2004). Cognitive defusion and self-relevant negative thoughts: Examining the impact of a ninety year old technique. *Behaviour research and therapy*, 42, 477-485.
- Matu, S. A. (2018). Cognitive therapy. In A. Vernon & K. A. Doyle (Eds.), *Cognitive behavior therapies: A guidebook for practitioners* (pp. 75-108). Hobokon: Wiley.
- McEvoy, P.M., Hyett, M. P., Shihata, S., Price, J. E., & Strachan, L. (2019). The impact of methodological and measurement factors on transdiagnostic associations with intolerance of uncertainty: A meta-analysis. *Clinical psychology review*, 73, 101778.
- Niedenthal, P.M., & Ric, F. (2017). *Psychology of emotion*. New York: Psychology Press.
- Schachter, S. The interaction of cognitive and physiological determinants of emotional states. In: L. Berkowitz (ed.): *Advances in experimental social psychology*. New York: Academic Press, 1964.
- Schippan, B., Baumann, K., & Linden, M. (2004). Wisdom therapy. Cognitive therapy of post-traumatic bitterness disorder. *Behavioral Therapy*, 14, 284-293
- Schmidt, H. III, & Russo, J.C. (2019). The structure of DBT programmes. In M. A. Swales (Ed.), *The Oxford handbook of dialectical behaviour therapy* (pp. 121-146). Oxford University Press
- Scobel, G. (2008). *Wisdom. About what we are missing*. Cologne: Dumont
- Tuschen-Caffier, B., & van Gemmeren, B. (2018). Problem and behavior analysis. In: *Lehrbuch der Verhaltenstherapie, Band 1* (pp. 287-297). Berlin: Springer.
- Valentine, S. E., Smith, A.M., & Stewart, K. (2020). A review of the empirical evidence for DBT skills training as a stand-alone intervention. In: Bedics, J.: *The Handbook of Dialectical Behavior Therapy*. Oxford: Elsevier.
- Vitterso J. (2016) *Handbook of eudaimonic well-being*, Cham: Springer
- Webb, J. R., & Toussaint, L. L. (2020). Forgiveness, well-being, and mental health. In: Worthington, E.L., Wade, N. G.: *Handbook of forgiveness*. Oxford: Taylor & Francis.
- Wolf-Areholt, M., & Beckmann, C. (2018). *Mindfulness Training: A Training Manual for Psychiatric Patients*. Stuttgart: Kohlhammer.
- Worthington, E. L., Jr., Davis, D. E., Hook, J. N., & Provencher, C. (2018). Humility. In J. E. Maddux (Ed.): *Subjective well-being and life satisfaction* (pp. 168-183). Oxford, Taylor & Francis Group.
- Zacher, H., & Staudinger, U.M. (2018). Wisdom and well-being. In Diener, E., Oishi, S., Tay, L.: *Handbook of well-being*. Salt Lake City, DEF Publishers.



Prof. Dr. Michael Linden

Charité Universitätsmedizin Berlin, Medizinische Klinik m. S. Psychosomatik,
Leiter der Forschungsgruppe Psychosomatische Rehabilitation (FPR)
CBF, Haus IIIA, Raum 15/16, Hindenburgdamm
30, D 12200 Berlin
michael.linden@charite.de



Dipl.-Psych. Ariane Andrea Mossakowski

Psychologische Psychotherapeutin
Charité Universitätsmedizin Berlin, Medizinische Klinik m. S. Psychosomatik,
Institut für Psychologische Psychotherapie und Beratung Berlin e.V.
Jenaer Straße 7, 10717 Berlin
ariane.mossakowski@charite.de