

FOCUSING ON MONEY & HAPPINESS IN CLINICAL PRACTICE

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INTRODUCTION

Thank you.

This presentation is on Focusing On Money And Happiness In Clinical Practice.

I will divide it into two sections with a break for discussion after each section

The first section will be about what I call Money & Relationships Counseling, and Psychotherapy, and the second section will be about Happiness, Its Relationship To Money And Its Role In Clinical Practice . Since this is about a work in progress I will tell the story both of my journey and the point I have reached so far.

PART I:

Money and Relationships Counseling and Psychotherapy

In 1985 Roger, a man in his twenties came to me for treatment. His concern was that he was about to graduate from an MBA program, and he was conflicted over whether to seek a very highly remunerative but stressful job as a stock trader or a lifestyle job that would pay less.

We started the treatment with my trying to help him express the pros & cons of each possible choice. But, before long the underlying conflict began to be revealed.

This man grew up in a family where the mother was the main breadwinner and the father worked at a poorly paid and low prestige job. This was in stark contrast to the other families he knew where the men were successful and the main breadwinners. Roger had felt ashamed of his father and, because he loved him, he felt guilty for feeling ashamed.

He believed that if he made a lot of money he would be humiliating his father, a possibility he abhorred at least consciously

Another part of the conflict resulted from his father's defensive expression of disdain for anyone who was very interested in money, as shallow and materialistic. Roger feared that if he took a high paying job his father would disapprove of him and, because he partly identified with his father's values, he might agree with his father's judgment

A related issue was that he saw the role of breadwinner as masculine, but it was his mother who was the breadwinner. He seemed to have some confusion over what it meant to be masculine. If he

made a lot of money he would be like other fathers in his neighborhood. But he would also be more like his mother than his father.

There are all sorts of psychoanalytic issues reflected in Roger's concerns. There were oedipal rivalry and superego issues reflected in his unconscious wish to best his father and in his hesitation to humiliate him. There were superego issues related to his sense of what was good or bad with regard to focusing on money. There were gender identity issues. There were issues of reality testing having to do with his fantasy about what he would do to his father and what this would do to his relationship to his father. And I'm sure you can identify others.

All of these issues had been sub-conscious at the beginning of treatment. Over time they were brought into consciousness and he was able to work them through. He was able to test reality and realize that his father would be ok and would still love him if he were to make a lot of money. Roger was able to resolve his original conflict by finding a challenging, and well remunerated position, which was not as stressful as a stock trader's job would have been, although not as highly paid either.

So that was my first clear view of the importance of money in the intrapsychic and interpersonal realms of our patients' lives. But I didn't suddenly become a full blown specialist in what I have come to call MONEY AND RELATIONSHIPS COUNSELING AND PSYCHOTHERAPY.

And, as an aside I should explain briefly the distinction I make between counseling and psychotherapy. I use the term psychotherapy when I am treating a condition to which I assign a diagnosis of pathology, and where the goal is to alleviate or cure a mental disorder. This is the medical model. I use the term counseling when that is not the case. One might also use the term Life Coaching for what I do in some cases.

There are many people who come for help with problems or concerns that may cause normal anxiety or worry that are not necessarily neurotic, although we can always find neurotic elements if we chose to look for them. The above case is an example. Roger's wish for help in resolving conflict over a career choice did not necessarily imply pathology. Certainly he experienced some anxiety in facing this choice. And certainly there were underlying neurotic elements. I gave him a diagnosis of Adjustment Disorder. But I could as easily have said that he was suffering from the normal developmental anxiety which accompanies any major life transition.

Well now, coming back to my own transition, it took a while before I fully recognized the importance of the role that money plays in everybody's psychological and interpersonal lives. How I got from that point to where I am today is part of the story

But first let me mention another influence on my thinking. Somewhere around the mid or late 1990s I read a collection of 24 articles about money which came out as a book called THE LAST TABOO: Money As Symbol & Reality in Psychotherapy & Psychoanalysis.¹ This book got me thinking about the idea that money is a taboo subject and I ended up writing an article called THE MONEY TABOO: Its Effects In Everyday Life And In The Practice Of Psychotherapy.² The thesis of this article is stated in the abstract as follows:

A cultural taboo regarding discussion of money affects psychotherapists as well as the lay public. As a result, the psychological literature regarding money is sparse, while issues relating to money are seldom addressed in our training, our self analyses or the treatment of our patients.

The case study of Roger, the man I described above was first published in that article.

What is a money taboo? How do we know it exists? And how does it affect us and our patients?

All you have to do to know that there is a money taboo in this culture is to imagine yourself at a party and having someone come up to you and ask “How much money are making?” If you are from this culture, and over 35 years of age, you would consider that to be a very inappropriate and personal question. This would not be so in all cultures. I recall having dinner with Dan Birger (the moderator of this seminar), who is from Israel, another physician from Norway and a Swiss woman and talking about them Money Taboo. They all agreed that asking how much a person is making would not be an inappropriate question in their countries. I also remember Dan telling me that, when he first came to this country, he did go to a party and, asked such a question, and quickly learned how inappropriate it is considered here.

Why is there a money taboo? In his paper on Character And Anal Erotism,³ Freud suggested an equation Feces = gold = money. Since shame is the emotion associated with the anal phase of development, this suggests a powerful motive for reticence in money matters. A preoccupation with “filthy lucre” is experienced as unseemly. Similarly, identification of money with other issues that may

become conflicted, such as power, sex, love or narcissism, may also result in inhibition of thinking or communicating about money. The problem with this kind of argument is that it should apply across all cultures which, as Dan can tell you, is not the case.

A sociological explanation for the money taboo works better. It explains why this taboo is especially strong in the United States. It was offered in a column in the New York Times Magazine⁴

“In a society that claims to be a classless meritocracy on the one hand and a capitalist paradise on the other, there is no acceptable level of wealth. We have to pretend to be equal even as we know ourselves to have vastly different opportunities depending on our income. This contradiction necessitates that we speak of money euphemistically or keep quiet.”

There is certainly a class issue involved. For example, rich people are often very discreet about their money because they fear becoming the targets of wealthism.

Wealthism involves being treated as an object rather than an individual

- as a potential source of gifts or favors
- Or as a narcissistic mirror
- And often with hostility

With regard to hostility, I recall being told by a nurse of her observation of a colleague who was treating an old and sick woman very badly. When asked why she was doing this, the colleague answered, “Because she is rich and I hate her.”

Rich people are often surrounded by sycophants, and they often fear that they will never be loved for themselves. Like many other minorities (and the very wealthy are a minority) they become socially isolated; not just because of their own fears and attitudes but because they are stereotyped by others. They find it difficult to trust others, including psychotherapists. And sometimes when a therapist is not aware of his own feelings about money as well as the potential for creating counter-transference problems, they have reasons to be afraid of the therapist.

Here is a case example. A psychologist, who attended one of my workshops, was on a managed care panel. She spoke of her resentment toward a very wealthy client who insisted on paying only the co-payment authorized by the network. She felt that, since this client had so much money, it was selfish of her to refuse to pay her out of network fee which was much higher than the in-network co-pay. Aside from the ethical consideration involved, her willingness to charge a patient who was in network more than the network allowed, this therapist had no awareness that she was being a wealthist. She had no recognition or empathy for the possibility that her patient might fear being taken advantage of or valued for her money rather than for herself. Her failure to empathize was likely to undermine her ability to establish a good rapport. Similar problems can occur with any client when we can not understand or appreciate their experiences, feelings, and beliefs about money.

How does the money taboo affect us as therapists? Let me read you a short description of a group psychotherapy session. It was reported in the New York Times by one of the group's former patients:

Recently I was engaged in a therapy group that put a premium on unexpurgated revelation./

"Be specific" the psychologist urged us. "We don't want miscommunication."

One day a doctor in the group began worrying about taxes. "How much money are we talking about here?" I burst out, unable to control myself. "What are the exact numbers?"

The doctor glanced at the therapist, alarm engraved on his vast forehead. The other members of the group scowled at me: the woman who had shown us the scars from her cutting rites; the man who had recounted a graphic nightmare involving his mother and a boa constrictor; the woman who had given us a detailed account of her seduction of a married man.

They were all appalled by my unseemly questions.

"Carol, the issue here is feelings, not dollar signs," the therapist intoned. "Let's leave those details to the I.R.S." ⁵

Whether or not the writer should have gotten an answer to her question is hardly the point. The point is that the therapist should have explored her interest in the question and why the other group members were so alarmed and disapproving of her for asking it. But even the therapist could not get past the cultural taboo against inquiry about money. In fact, in this instance, the therapist was acting as an enforcer of the taboo. I suspect that, had the doctor been complaining about his wife's sexual demands, no one would have had the same kind of reaction to questions about how much sex was involved.

One of the effects of any taboo is that it inhibits discussion, and therefore also inhibits thinking. The result of the money taboo is that we often don't address money issues in our training in our own self analyses or with our patients.

In 1913 Freud recognized the money taboo, and the importance of confronting it, when he wrote, *"...money questions will be treated by cultured people in the same manner as sexual matters, with the same inconsistency, prudishness and hypocrisy. [The analyst] is therefore determined beforehand not to concur in this attitude, and in his dealings with patients to treat of money matters with the same matter-of-course frankness that he wishes to induce in them toward matters of sexual life."*⁶

That, not surprisingly, was written as part of his advice on handling of fees, which is harder to avoid discussing than other issues. But even Freud was not immune from avoidance when it came to his own money issues. He remained as blind about his own relationship to money as many of us are today about ours. According to Peter Gay, when Freud talked about his father's financial setbacks, he admitted that he preferred to suppress rather than explore their impact on him.⁷ This is surprising from a man whose own self analysis and exploration of traumatic childhood memories was a linchpin of early psychoanalysis. It illustrates the difficulty with which we are *all* faced when dealing with money issues.

We must overcome the money taboo ourselves if we are to help our patients with money related issues. In my experience patients will rarely bring up money concerns unless the therapist is willing to focus attention on them his /or herself. On the other hand, if we are attuned to the importance of money as a psychological issue, as well as a practical one, and are willing to ask questions at appropriate times most patients are willing to explore this subject.

We have to understand the meaning of money to understand problems with money. Money is very powerful in our culture, and yet it doesn't mean anything at all. What I mean by this is that it is an abstraction. It's something that we assign meaning to. Take a piece of metal, inscribe the king's face on it, and say it is worth so much and we assign a mutually agreed upon value to it. But it is still just a piece of metal and we can invest it with all sorts of personal meaning. This leads to all sorts of problems. Our projections of meaning onto money cause: envy, greed, disdain, hostility, insecurity admiration, fear sexual attraction, competitiveness and disgust.

Most of the meanings we project onto money are interpersonal. And I include here relationships with external and internal objects. For this reason I have created what I call a psychological definition of money. It is as follows

Money, psychologically speaking, is our projection onto coins, bills, bank accounts and other financial instruments, of our beliefs, hopes and fears about how those things will affect who we are, what will happen to us and how we will be treated by others or by ourselves based on six possible conditions. We think of these six conditions as follows:

- 1) *I do have enough money*
- 2) *I don't have enough money*
- 3) *I have too much money*
- 4) *He or she does have enough money*
- 5) *He or she doesn't have enough money*
- 6) *He or she has too much money.*

In Roger's case, he was afraid that, he would make too much money to be able to retain his father's love and respect. Here are some other examples:

1. One patient told me that he didn't have enough money to buy drugs and, therefore would be okay because he would not become addicted.
2. A wealthy inheritor had enough money so that he did not have to worry about being diplomatic with clients.
3. But for this same man this was too much money because he lost business and the accompanying sense of purpose which meaningful work provides.

I believe that, if one begins to ask what is enough money, not enough money or too much money, and also asks the question, "Enough for what purpose?" he will begin understanding the psychological importance of money.

The question of purpose leads to the question of values, which have a great deal to do with a person's identity. So in exploring money issues we have to ask whether a person's money related behavior and attitudes are consistent with his stated values and his ego ideal. Because of the money taboo values are usually easier to talk about than money. Because of this, Judith Stern

Peck, a family therapist and Director of the Money And Family Life Project at the Ackerman Institute, recommends focusing on values first, to put the importance of talking about money into an acceptable context.⁸

How do I ask Patients about money? To begin with I try to include questions about the importance and meaning of money in the intake interview. For example, “How did money affect your family when you were growing up and how important is it now?” This is a good time to ask such questions because the intake interview is a survey of many areas and questions about money do not seem to be out of context or invasive.

But I also try to remain attuned to what the patient is saying during treatment, so that I can tune- in to money related material.

I have three questions I often use to understand what money means to my patients. One is simply to ask for a word or phrase association to the word “Money.” Typical answers include things like: power, security, prestige, comfort, freedom, pleasure and the root of all evil. These answers tend to reflect the patient’s concerns and life view.

Then there is the three magic wishes question which is usually used in child psychotherapy but which I use with adults as well. It goes like this: “If you had three magic wishes, what would you wish for?” In very many cases money is one of the three things wished for. But it is the follow up questions that reveal the importance of money.

And thirdly, I ask patients for their earliest memory involving money. I know you will understand that the answer can be a screen for many significant childhood experiences that affect the adult psyche.

To give you an idea how some of these questions work, I will give two short case examples; One involving the three magic wishes question, and the other involving the request for the earliest money memory.

The first case was reported in my Money Taboo article. It gives an example of how the three magic wishes questions revealed a great deal about a patient. He was a very passive 17 year old who hated school, was always bored because he had no compensating interests, and had no idea

what he wanted to do with his life. His three magic wishes were for enough money to last for a lifetime, a house, and an island. He said he never worried about money as long as he knew he could get more

Exploration of his fantasies revealed that he would live all alone on his island, having a constant flow of visitors, mostly girls, but no permanent connections to anyone in particular. He wouldn't miss anyone.

Clearly, for this young man money represented a substitute for the richness of meaningful object relations and an interesting life. Viewed in terms of psychosexual development, enough money to meet his needs for all of his lifetime was both a sign of passive oral dependent needs and a repudiation of them since it would allow him the pseudo-independence of living alone without anyone, yet having all of his needs met without having to do anything.

In object relations terms, money was a breast; a need fulfilling part-object; a breast that would never run dry.

The next case, which is described in my book, is about the usefulness of asking for the earliest memory about money. In one session a very anxious patient told me she was worried because her widowed mother was giving her generous cash gifts. She knew there was something called a gift tax and feared that, if she accepted too much, and didn't pay taxes on the gifts, she would be penalized by the IRS. (In fact it is the giver that is responsible for paying a gift tax, but neither she nor I knew that at the time) I said that she should ask her accountant about this. But to understand her concern better I asked for her earliest memory involving money. She remembered her father holding a dollar bill in his fist telling her that, if she could get it, she could keep it. When she found she couldn't get it any other way, she tried biting his hand to get him to open it. He got very angry and spanked her.

The interpretation I was able to make, based on this memory, was that, because she was punished for trying to get her father to open his hand to get his money, she now was afraid to accept her mother's open handed monetary gifts for fear that she might be punished.

PART II:

Now let me tell you about my interest in happiness. How did I get from Money and Relationships Psychotherapy to focusing on happiness? And what does happiness have to do with psychotherapy anyway? Freud certainly didn't think it was our job to make people happy. If I recall

correctly, he believed that the best we could do was to relieve people of their neurotic misery so they could have common unhappiness. [Question: Where is that written?]

One thing that changed my focus to include happiness as an issue of concern was that the writing of my book involved several stages and revisions of my material.

I knew I had good material that should be interesting to most people, because several editors told me so. But I also knew that getting a book published and sold is a very competitive process. I had to think about what was most important to my audience and would make a publisher want to take on such a book. Around this time I became aware that there was a new field of psychological studies called Positive Psychology & the wider interdisciplinary area of Happiness Studies. Positive Psychology. These have become quite popular. I often see article about one or another of its researchers in newspapers. And a whole slew of books on happiness have been published in recent years. Just last month in the Science Times was an interview with Daniel Gilbert,⁹ the Author of Stumbling on Happiness

And this month The Harvard Mental Health Letter has a three page article called *Positive psychology in practice*¹⁰

I realized that, while money is hugely important, and motivating in our society, the Buddhists are probably right when they say that, after relief from misery, what man wants most is happiness.

So I decided that combining money and happiness would be twice as compelling for a book subject, and would probably be useful in my practice as well.

I decided to read about happiness to see what it would contribute to what I doing with my patients and what I was writing about. As it turns out, research in this area has produced some interesting results which have importance to how we view our work and our patients. It even provides us with some understanding of what people can do If they want to be happier.

What does research from happiness studies tell us? I will list just some of it's findings here

1. Having more money does not lead to greater happiness unless one does not have enough to buy adequate food and shelter. In that case – having more money makes a great difference. But even those on the Forbes list of richest people are only slightly happier than other people on average. There is actually some doubt about this finding. In my book I contend that money used wisely can support the foundations for a happy life. Jonathan Clement recently retired from the NY Times In his final Column he wrote this about money

- Money can give you the freedom to pursue your passions
- Money can buy you time with friends and family, and
- If you have money You don't have to worry about it [But, in fact, plenty of rich people do worry about money]

2. A focus on affluence and materialistic values undermines health and wellbeing. It is associated with lower self esteem, fewer positive emotions, more negative emotions

And more , aches and pains and other illnesses. And teens who are materialistic tend to smoke, drink and use illegal drugs more; to skip school more often , carry weapons and be involved in vandalism.

3. A person's affect level is 50% to 80% determined by genetics. Each person has an inborn setpoint or emotional thermostat . When events raise or lower his affect it will return to his inborn set point.

4.. There are certain activities that if practiced regularly can keep one at the higher end of his affective range. examples are:

- Making a regular practice of expressing gratitude
- Regularly practicing kindness and forgiveness
- Engaging in activities that one is good at, enjoys, and which are consistent with one's values, and

- Spending time with friends and family

In regard to this last item the interview with Daniel Gilbert mentioned earlier quotes him as saying that this is the best predictor of human happiness, and is significantly more important than money.

5. Happiness follows a u-shaped curve. People at the younger and older ends of the age spectrum tend to be happier than people in middle age.

6. Pleasure is ephemeral. Enjoyment tends to be eroded by a process called adaptation This is kind of like smelling perfume. After a while you can't smell it anymore.

7. There is a phenomenon called the hedonistic treadmill. If we are seeking hedonistic sources of happiness, we will constantly have to seek more and better rewards to maintain our level of happiness.

8. A different kind of happiness is called life satisfaction. This is at least partly based on living up to one's values so that one can be proud of who he is and how he is living or has lived his life.

In my book *MONEY AND THE PURSUIT OF HAPPINESS* I show, not only how misunderstanding and misuse of money can undermine happiness but also how it can be a support for what I call *The Two Pillars Of Life Satisfaction: love and work*. I think we all know to whom that famous phrase is attributed.¹¹

At this point I'd like to present one more brief case study and then I will offer some questions that can lead into a general discussion. This case does focus on both money and happiness. So it will illustrate how my new interest in happiness affects the treatment. Chapter One of my book begins with the case of Sandy. Here I will be giving you more details than are contained in the book

Sandy a thirty something corporate employee, caused his own suffering through his efforts to become rich and famous. He came to see me, devastated because he had lost his girlfriend and had also become isolated from his friends.

A big part of the reason for this was that he was very disappointed that he had not achieved the salary level that he thought he should have reached by this time in his life. And so, outside of his day job, he had become so obsessed with working on an entrepreneurial project, which he hoped would make him rich and famous, that he no longer had time for friends or other enjoyments.

He had moved in with his girlfriend and was letting her pay the rent, while he invested whatever money he made in this project. He had assumed that she would be happy to share in his dream and would want to spend her life with him. Once he had put this into words he could see what he had been doing. He realized how isolated he made himself and he moaned, "How could I have become so greedy that I forgot about my friends and didn't pay attention to what my girlfriend needed?"

Although he didn't give up this project, or the dream of becoming rich and famous, Sandy became less obsessed by them and, with time and treatment, he began to change. With a bit of encouragement he began reaching out to the friends he had been ignoring and he started allowing time in his life for recreation. This encouragement was meant to help him find both pleasure and social connection to counteract his misery. Encouraging patients to do things that will make them

happier is not a psychoanalytic technique, but it is therapeutic. When he started dating women again Sandy didn't assume they would want the same things from a relationship that he did. And began asking what they wanted. This did not automatically make him happier. He complained to me that the women he was meeting were all looking for a man to support them financially rather than sharing this responsibility. He did recognize, however, that not all women would be like the ones he was meeting.

One of the things, I pointed out to him was that he found the project on which he was working, inherently interesting and it provided an opportunity for him to express his creativity in a way that his day job did not. It might or might not lead to his becoming wealthy, as he hoped it would, but focusing on an activity he enjoyed and that was good at made him happier than focusing on becoming rich. This kind of intervention comes directly from the teaching of the Harvard Positive Psychology professor Ben-Shahar.¹² He accepted this viewpoint and began to talk about his entrepreneurial activities as an interesting learning process through which he was becoming more and more competent.

As part of the treatment we did, of course, explore Sandy's history. His cousin and many of the kids he went to school with came from wealthier families than his own. He was never part of the in-crowd and at times he felt demeaned by his cousin, although he lost a fair amount on poor investments. And when it came time for Sandy to go to college he would not pay for him to go to the school of his choice, so Sandy had to go to a state school, which he resented.

In elementary and high school Sandy wasn't a good student and thought he was not as smart as others. The one thing he was good at, and for which he got his father's approval, was thinking up schemes to make money. He would be the first one out shoveling snow for his neighbors. He designed a T shirt that his school mates bought. He bought an old boat, learned how to fix it up, and sold it at a profit. So we can see that Sandy was trying to repeat a pattern of success when he started an entrepreneurial project hoping to be successful.

What also became clear was that his desire to become rich and famous was a reaction against his feelings of rejection by his wealthier and more popular cousin and schoolmates. This reaction involved a revenge fantasy. At one point he was able to express the hope that he would become so much richer and more well know than his cousin that he would now have to admire Sandy and to feel as envious of him as Sandy had of his cousin. By being able to recall and to tell me about the emotional traumas associated with money, their sting was diminished. And, by making the

changes described above, Sandy was already creating a richer life, without having made a penny more than he had previously.

Now I'd like to raise some questions and offer some thoughts for your consideration. Then we can have a discussion which many include these or your own questions or comments. They are as follows:

Should psychoanalysts or psychotherapists be in the business of helping people to become happier in their lives? Psychotherapy is, by definition intended to treat symptoms of mental illness and, therefore, to overcome some causes of unhappiness. Certainly no insurance company or government regulator would agree that happiness should be a goal or treatment. But can we argue that helping our patients to become happier can be a strategy for counteracting negative symptoms? Positive Psychology advocates this position. And there is some evidence that it does help especially in relieving depression¹³

For Psychoanalysis the issue is slightly different than for psychotherapy. In its purest form, psychoanalysis is simply a technique, involving free association and interpretation of resistance and transference, used for the exploration of a person's psyche in its relationship with the world. It is not a therapy, although it may be used as one. The techniques does not imply any requirement either that the client be disturbed or that he may not use the process as an aid in the pursuit happiness. So, is there any reason why our skills should not be used to examine blocks to maximizing psychological wellbeing? Should our practices be limited only to relieving the misery associated with diagnosable mental illnesses, or should we also be facilitators in our clients' efforts to find meaning and fulfillment in their journey through life? And here notice that I use the term client rather than patient, since I am not talking about treatment of illness.

What are the risks if we go beyond the circumscribed role of clinician and become gurus, coaches, mentors or facilitators in the pursuit of happiness? Would embracing such roles involve a degree of personal or professional arrogance? Does our professional training prepare us for such a role?

Those are my thoughts questions. Now I'd be glad to hear your questions & comments.

END NOTES

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- ¹² Personal communication from Tal Ben-Shahar, 1/9/08
- ¹³ Positive psychology in practice, Ibid