



The Lessons That Can't Be Taught

A guided journey to insight.

"You don't learn to walk by following rules. You learn by doing, and by falling over."
— Richard Branson

Lincoln Stoller, PhD, 2019. This work is licensed under a Creative Commons Attribution-NonCommercial-NoDerivatives 4.0 International license (CC BY-NC-ND 4.0)
www.mindstrengthbalance.com



Learning By Consent

This piece connects voluntary and involuntary learning. The first is learning by consent and the second is learning under threat. These may seem opposite but only the invitation is different. Voluntary learning is self-motivated; involuntary learning is motivated by injury or the threat of it. I want to make the point that illness is a form of learning, it's just at the far end of the spectrum. This is the meaning of the Chinese saying, "crisis equals opportunity." To better understand it we need to understand why we resist change.

Our personality determines how we react to things, and we build our personality to protect us. With it we decide what to say and hear, what to pay attention to and what to remember. Our personality introduces us to the world, cues our tastes, and triggers our distaste. It is our intention that no change will affect us except those we approve of, and we express this through the volition of our personality.

Learning is the dual process of engaging and incorporating new experiences. Learning changes our personality, even if only to strengthen it. This can be refined and enhanced—we can learn how to learn—but content itself cannot be forced through the process. Someone can offer, support, enable, and encourage but no one can actually teach you anything. Even conditioning a sea slug requires their consent to pay attention.

Teaching without consent is assault, and assault creates chaos.

Learning Under Duress

Illness presents a special learning problem because the learning required requires attention to the illness, and people rarely want to pay their illness careful attention. In my experience as a therapist, I find most clients in conflict with their illness. They resist the invitation presented by their illness and instead, through attention, intention, and interpretation of events, they attempt to teach their illness a lesson.

This resistance is understandable because illness assaults us; it is not a good teacher. Illness forces us to learn against our will, which is too bad because the confrontation is hardly a coincidence. With illness, as with ignorance, we are a collaborator. As a therapist, I try to present the material in a way that invokes untapped strengths and provides unrecognized benefits. I explain the process as something that offers rewards.

I'm given small credit for my efforts, which is as it should be as I want my client to play the larger role. Sometime I'm an irritant and other times a facilitator. Sometimes the problem is as it first appeared but most times it splinters into pieces as unresolved memories, emotions, and injuries make an unexpected appearance. Personality is a stuffed closet: try to rearrange a few items and everything can tumble out.

Deep Learning

Deep learning opens this closet. It is a process of expansion, not a reaction or a rearrangement. For example, deeply learning math is learning what math is, not how to do math. Learning from one's illness is learning what that illness is, not how to make it disappear. This applies to physical and emotional illness as much as to calculus and creativity.

Most of what is taught in schools, and most of what is taught in psychotherapy is a version of rearrangement, a kind of behavioral modification. The format of most school programs teach behavior: punctuality, obedience, and direction of attention. The content of most school programs is machine-based: the storage and retrieval of facts. These things were needed in the workplaces of the past. This kind of learning can now be done better by machine, and in the future it will be.

Deep learning comes with risks. Its outcome is unpredictable. Anything that can be taught programmatically can be better learned by a machine. Very little of what is taught in schools, is touched upon by school programs, or is within the imagination of teachers contributes to deep learning.

When a student is inspired by a topic the topic becomes the material. The material becomes the teacher because the other person becomes deeply engaged at a personal level. The material itself enmeshes with the contents of the closet of their personality. This is a transcendent experience that only they can manage. If this sounds religious it is: deep learning is life changing. The same thing happens when you fully engage with illness: the illness becomes the material, it becomes its own teacher and the process is life changing.

Stop Teaching

As doctors, teachers, and parents we can only facilitate and, in most cases, we cannot actually know what we are facilitating. We cannot actually witness the other person's experience. The doctor who believes they know the meaning of recovery, the teacher who believes they can measure success, and the parent who holds their children to their own standards are obstacles to learning.

Great teachers, therapists, and parents all recognize that once change begins they must move to the back of the room, or leave the room entirely. They become irrelevant. Only the student, patient, or child can understand their own personal growth. In all of the many educational programs real graduation occurs only when the teacher becomes irrelevant. When someone inspires you this happens in a flash, it is immediate.

The problem I see with doctors, teacher, and parents is that they are not open to their own growth. Doctors

are disinterested in substantially expanding their scope of practice. Teachers are aghast to hear they have more to learn from their students than to teach them. Parents are famous for always being parents.

The lesson here is not that you should enable your patients, students, and children to learn independently. The lesson is that if you do not change and grow yourself, then your lessons will assault you. Those assaults will come from your mental and physical health, and also from your patients, students, and children. To cope with this most professionals celebrate their celebrity and imagine these problems the inadequacy of others.

Be The Lesson

The lesson here is yours. You must always yourself be the patient, student, and child. Those attracted to the authoritarian role are usually those of us who eschew the perineal discomfort of learning, change, and uncertainty. And, as with illness, it is reasonable to be averse to these, but the responsibility to change oneself cannot be sold off, pawned off, outgrown, or refused by the authority of any office.

Nine times out of ten, when faced with the prospect of changing their lifestyle or dying, people with serious heart conditions do not change. Seventy five percent of children diagnosed with attention deficit disorder are “cured” by a change in the behavior of the people around them. The aphorism, “change or die,” has become part of our social fabric and it translates across all human activity. The term was popularized by Alan Deutschman who said, in a 2012 piece in the periodical [Fast Company](#):

“While the issue for heart patients is ‘change or die,’ the issue for everyone is ‘change or lose your mind.’ Mastering the ability to change isn’t just a crucial strategy for business. It’s a necessity for health.”

— Alan Deutschman

We don’t change because the benefits of remaining the same outweigh the benefits of change. Heart patients choose comfort at the sacrifice of life, psychotherapy patients choose continuity over the prospect of chaos, and students choose entertainment over the risk of adventure. These personal choices set the limits of what can be taught and cannot be countered with reasonable argument, but they can be countered through experience.

Hypnosis is experience, it has the same effect as experience. All experience occurs in your mind and, because of this, it is possible to have new experiences using your mind alone. This is the essential point that is missed by people who do not understand the meaning of psychosomatic medicine and is generally overlooked by people whose experience is limited to what is mediated by their rational mind. Hypnosis is not rational, but then neither is your personality, not at its root.

Changing you requires your engagement, focus, and attention. If you consent to these, then the only limit to your mental experience is the limit of what you can imagine at a fully immersive level. The result can be as enlightening as any experience. As an example, I invite you to listen to a piece I have recorded called “**What You Can’t Remember**.” It’s a 15 minute MP3 audio trance induction that asks you to recall a period of your own transformative change. It will cost you nothing, and you can hear it now or download it for later by clicking on the following button.

[Listen To What Your Can't Remember" Free Audio MP3](#)



To subscribe to this newsletter, click on **Newsletter-Subscribe**.
