# **Information Handout**

Professional Version | US English

# Magnification And Minimization



## **Description**

The Magnification And Minimization information handout forms part of the cognitive distortions series, designed to help clients and therapists to work more effectively with common thinking biases.

### A brief introduction to cognitive distortions

Cognitive distortions, cognitive biases, or 'unhelpful thinking styles' are the characteristic ways our thoughts become biased (Beck, 1963). We are always interpreting the world around us, trying to make sense of what is happening. Sometimes our brains take 'shortcuts' and we think things that are not completely accurate. Different cognitive short cuts result in different kinds of bias or distortions in our thinking. Sometimes we might jump to the worst possible conclusion ("this rough patch of skin is cancer!"), at other times we might blame ourselves for things that are not our fault ("If I hadn't made him mad he wouldn't have hit me"), and at other times we might rely on intuition and jump to conclusions ("I know that they all hate me even though they're being nice"). These biases are often maintained by characteristic unhelpful assumptions (Beck et al., 1979).

Different cognitive biases are associated with different clinical presentations. For example, catastrophizing is associated with anxiety disorders (Nöel et al, 2012), dichotomous thinking has been linked to emotional instability (Veen & Arntz, 2000), and thought-action fusion is associated with obsessive compulsive disorder (Shafran et al., 1996).

Catching automatic thoughts and (re)appraising them is a core component of traditional cognitive therapy (Beck et al, 1979; Beck, 1995; Kennerley, Kirk, Westbrook, 2007). Identifying the presence and nature of cognitive biases is often a helpful way of introducing this concept – clients are usually quick to appreciate and identify with the concept of 'unhelpful thinking styles', and can easily be trained to notice the presence of biases in their own automatic thoughts. Once biases have been identified, clients can be taught to appraise the accuracy of these automatic thoughts and draw new conclusions.

### **Magnification and Minimization**

Magnification and minimization is a cognitive distortion in which people exaggerate certain aspects of themselves, other people, or a situation while simultaneously downplaying others. This typically involves magnifying negative elements (e.g., the mistakes they have made) while minimizing positive aspects (e.g., successes or achievements). Burns (2020) describes it as a 'binocular trick':

"It's like looking at things through a set of binoculars. From one end, your problems seem much bigger and more terrifying. But if you look through the opposite end, your positive qualities look small and insignificant".

Beck (1963) notes that magnification and minimization is often linked to an 'inexact labeling' of events. For example, a client might state that they were attacked by their partner for missing an important date, but in reality, this 'attack' might refer to a displeased remark or expression. This distortion also overlaps with Ellis' (1980) concept of "awfulization", wherein the client believes that "a bad, unfortunate, or inconvenient circumstance is more than bad, it is the worst it could be – 100% rotten" (Ellis & Joffe Ellis, 2011). In other words, magnification often involves exaggerating the unpleasantness of a situation while minimizing actual or potential positive elements.

The content of magnification and minimization tends to vary depending on the difficulty an individual is experiencing. In depression, it is likely to manifest as underestimating one's achievements or abilities, while inflating one's flaws or problems (i.e., negative magnification) (Beck, 1963). The opposite is true of bipolar disorder: here, individuals are likely to exaggerate their abilities and optimistic expectations (i.e., positive magnification) while minimizing the obstacles they will encounter (Beck & Alford, 2009).

# Description

Magnification and minimization are also apparent in anxiety disorders, contributing to the sense of vulnerability underlying these difficulties (Beck et al., 1985). Anxious individuals tend to magnify the threats they are facing while simultaneously minimizing their personal resources and ability to cope. In social anxiety disorder specifically, negative aspects of the self are exaggerated in social situations, and positive aspects of the self or social experiences are downplayed (Weeks et al., 2008).

Other difficulties associated with magnification and minimization include:

- Addictions (Toneatto, 1999).
- Anger and violence (Eckhardt & Kassinove, 1998).
- Panic disorder (Clark & Beck, 2010).
- Phobias (Burns, 2020).
- Relationship problems (Dattilio, 2002).

Examples of magnification and minimization include:

- Exaggerating negatives and minimizing positives
  related to the self (e.g., "I'm so disappointed that I
  blushed and mixed up my words I made such a bad
  impression on that person"), or to others (e.g., "I don't
  care if she's kind she's a selfish person for not cleaning
  the dishes").
- Exaggerating situational negatives and minimizing positive elements (e.g., "Giving this speech is going to be dreadful – I won't enjoy a single thing about it").

People who often magnify and minimize may have 'blind spots' when it comes to:

- Accurately judging themselves, other people, or the significance of situations.
- Thinking realistically and optimistically about the outcome of events.
- Tolerating discomfort and distress.
- Recognizing their own or other people's strengths and resources.

As with many cognitive biases, there may be evolutionary reasons why people magnify and minimize. Clark and Beck (2010) propose that magnifying potential threats and minimizing personal resources may have helped humans focus their attention on the dangerous aspects of a situation (e.g., the proximity, probability, severity of these threats), thereby supporting their survival. Gilbert (1998) also highlights the benefits of self-referent minimization such as downplaying one's strengths and positive qualities: these benefits can include avoiding complacency, avoiding envious attacks, reducing the burden of others' expectations, and enhancing one's attractiveness by signaling modesty.

### **Instructions**

### **Suggested Question**

Many people struggle with magnification and minimization, and it sounds as though they might be relevant to you as well. Would you be willing to explore it with me?

Clinicians might begin by providing psychoeducation about magnification and minimization, and automatic thoughts more generally. Consider sharing some of these important details:

- Automatic thoughts spring up spontaneously in our minds, usually in the form of words or images.
- They are often on the 'sidelines' of our awareness. With practice, we can become more aware of them. It is a bit like a theatre – we can bring our automatic thoughts 'center stage'.
- Automatic thoughts are not always accurate: just because you think something, it doesn't make it true.
- Automatic thoughts are often inaccurate in characteristic ways. One common type of bias in automatic thoughts is 'magnification and minimization': we sometimes magnify aspects of ourselves, other people, or situations (usually the negative things) and simultaneously minimizing others (usually the positive things).
- Signs that you are magnifying and minimizing include exaggerating how bad something is ("Failing the exam means I'm dumb") while downplaying the good things that might be happening ("My other high marks don't mean I'm smart").

 In some circumstances, it is useful to magnify and minimize. Magnifying can help our minds stay focused on potential threats, prepare us for danger, or help us to avoid doing risky things. You might also believe that downplaying your positives helps you in some way (e.g., it makes you modest, motivates you, or lowers other people's expectations of you). However, magnifying and minimizing too much or too often can cause distress and give you an inaccurate impression of yourself, others, or situations.

Many treatment techniques can be used to address magnification and minimization, including:

• Decentering. Meta-cognitive awareness, or decentering, describes the ability to stand back and view a thought as a cognitive event: as an opinion, and not necessarily a fact (Flavell, 1979). Help clients to practice labeling the process present in the thinking rather than engaging with the content. For instance, they might say "I'm blowing things out of proportion again" or "I'm minimizing again", whenever they notice these thoughts.

### Instructions

 Cognitive restructuring with thought records. Selfmonitoring can be used to capture and re-evaluate magnification and minimization as it occurs. Useful prompts include:

### **Suggested Questions**



- If you took the 'magnifying and minimizing' glasses off, how would you see this differently?
- What aspects of this situation might you be exaggerating or 'zooming in' on? Is it really as bad as it seems?
- Are there good things that you might be minimizing right now? What positives are you dismissing or discounting?
- What evidence makes you think this thought is true? What evidence makes you think this thought is not completely true? What would be a more balanced way of seeing this situation?
- If an objective observer were looking at this situation and knew all the facts about you and what had happened, what would they think?
- Imagine putting this thought on trial. Would an objective jury agree it is 100% true? Why not?
- Let's make a note of all the positive things that are relevant to this issue. After looking at this list, how do you see the situation now?
- What thought or attitude would help you take into account the negative and the positive aspects of this situation?

- Acknowledging the good and bad. Magnification involves selectively attending to and exaggerating the negative aspects of situations while downplaying the positives. Help the client overcome this bias by identifying both the good and bad aspects of events. Often, even the most difficult situations have positive elements or the potential to be constructive (e.g., "My partner may have overspent this month, but we can use it an opportunity to cut down on other unnecessary costs").
- Continuum work. The aim of continuum work is to help clients to see their belief/situation in context, or in relation to other possible outcomes (Greenberger & Padesky, 1995; Beck et al, 2004). Place a situation or belief on a continuum (represented by a line) and then work with the client to elaborate the other extremes of the continuum ("if you think you're awful, think about some other completely awful people and put them on the line too where would they go?", "what about some people that are the opposite of awful, where would they go on the line?").
- Positive data logging. Starting a daily log of positive experiences can help clients overcome habitual minimization. Depending on what the client tends to minimize, positive data logs can focus on recognizing personal strengths, positive actions by themselves or others, or other positive events. Note that the client is likely to find this task challenging, so practicing in the session beforehand is often essential.

## Instructions

- Metaphors. Burns (2020) describes magnifying and minimizing as akin to using a pair of binoculars: problems seem bigger from one end, while strengths and resources seem smaller from the other. Encourage the client to set aside their 'binoculars' when they magnify or minimize and look at events with perspective and objectivity. Other useful metaphors include the 'see-saw' of magnification and minimization (some thoughts are pushed up while others are pushed down) and the 'fairground mirror' (what you see is expanded or contracted depending on which mirror you use).
- Testing beliefs and assumptions. It can be helpful to explore whether the client holds beliefs or assumptions which drive magnification and minimization, such as "errors and imperfections are most important" and "strengths, achievements, and positive experiences are unimportant". If assumptions like these are identified, clients can assess how accurate and helpful they are. Their attitudes toward healthier assumptions can be explored, such as "It is helpful to appreciate strengths and weaknesses". Assumptions can also be tested using behavioral experiments, including surveys (e.g., "Let's see if other people would see this situation in the same way I did").

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When we feel strong emotions – such as fear, sadness, shame, or hopelessness – we have often just had an *automatic thought*. These thoughts can happen so quickly and effortlessly that we are not even aware we've had them. It can take practice to notice them as they arise. Automatic thoughts often feel convincing, but they are not always 100% accurate.

They are often exaggerated, biased, distorted, or unrealistic. There are different types of biases, which psychologists call cognitive distortions or unhelpful thinking styles. We all think in exaggerated ways sometimes, but it can become a problem if your thoughts are distorted very often or very strongly.

**Magnification and minimization** is a style of thinking where you exaggerate negative aspects of yourself, other people, or situations, while downplaying the positive aspects. As result, bad things get blown out of proportion and seem worse than they are, while good things seem unimportant. This can stop you recognizing your strengths and positive experiences in life and make you overly aware of imperfections and vulnerabilities.



Failing the exam makes me dumb.
The other tests
I've passed don't matter.

So what if my wife loves me — forgetting my birthday makes her selfish.

Giving this speech is going to be dreadful. I won't enjoy a single part of it.

my manager might say I do good work, but he's always criticizing things that I do, and that matters most.

Magnification and minimization can contribute to a range of problems:

Addictions

Anger

Anxiety

Bipolar disorder

Depression

Panic

Phobias

Relationship problems

Social anxiety

### Overcoming magnification and minimization

## **Noticing and labeling**

The first step in overcoming magnification and minimization is catching it. Practice *self-monitoring* so that you get better at catching these thoughts as they arise. When you notice one, say something to yourself like:

- "I'm blowing things out of proportion again."
- "I'm minimizing again."

## Find the exceptions

Magnification and minimization can make it hard to notice and remember your positive qualities, or the positive things that happen to you. You can break this habit by starting a 'positive data log', where you record the positive experiences that you might otherwise ignore or discount.

- "I'll write down five good things that happen to me every day, no matter how small."
- "I'll record an example of a positive characteristic I show each day (e.g., being brave or thoughtfu)."
- "I'll log one good thing someone else does for me each day."

## **Evaluate your thinking**

There are lots of ways of judging a situation. You can practice putting your thoughts in perspective by asking yourself these questions:



- "What aspects of this situation am I discounting or 'zooming out' on?"
- "Is there a balanced way of seeing this? What would an objective bystander think?"

## Put your judgment on a scale

When you magnify or minimize remind yourself that things are often not so extreme. Try putting your thought on a scale instead.



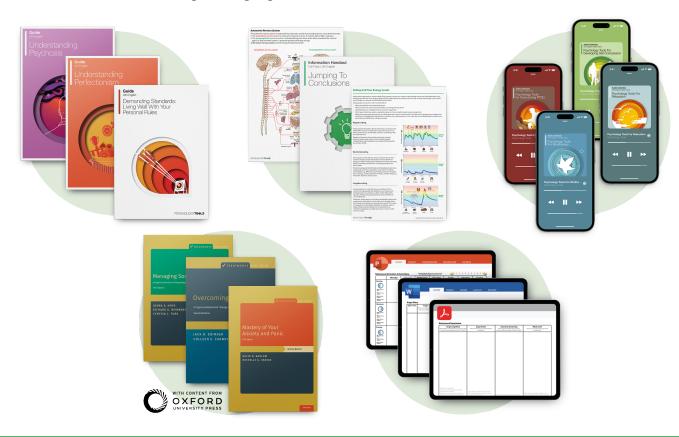
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