

**Shrink Rap Radio #138, Febr. 15, 2008. MindMentor, The NLP RoboTherapist
David Van Nuys, Ph.D., aka "Dr. Dave" interviews Jaap Hollander, Ph.D.**

(transcribed from www.ShrinkRapRadio.com by Erik Roetman)

Excerpt: *The central personality is basically a NLP-therapist, very supportive, very positive, very sponsoring, and very loving, with lots of positive suggestions, guiding you through a NLP process. That is the projective element and the provocative elements are more or less added to them.*

Introduction: That was the voice of my guest, Dr. Jaap Hollander, describing MindMentor, an online robotic therapist using artificial intelligence. Jaap Hollander, Ph.D. is co-founder of the Institute for Eclectic Psychology, Holland's oldest and largest NLP institute. He introduced NeuroLinguistic Programming or NLP, provocative coaching and symbolic modelling in Holland. He developed MindMentor, the robot psychologist, together with his colleague Dr. Jeffrey Wijnberg. Hollander and Wijnberg performed a test-run with 1600 clients from all over the world. Results show that MindMentor, which incorporates principles from NLP, was able to reduce average problem severity by 47% in just one session, a score, they point out, that any real life psychologist would be proud of. Dr. Hollander is the author of six books on psychological subjects, ranging from NLP and provocative therapy to modelling trance rituals in Brazil. Now here's the interview.

Dr. Dave: Dr. Jaap Hollander, welcome to Shrink Rap Radio.

Jaap Hollander: Well thank you David, I'm very happy to be here. Well, it's a great honor to be interviewed by you.

Dr. Dave: Oh, thank you very much. Now you and your colleague, Dr. Jeffrey Wijnberg, have developed an online artificial intelligence therapist, which you refer to as MindMentor, the robot psychologist, but before we get into that - and that will be a major focus of our discussion - but let's start out with a bit about your professional background.

Hollander: Yes, I'm a clinical psychologist just like Jeffrey and so I've been working originally in psychiatry a lot. And so in the late eighties, when NeuroLinguistic Programming became popular, I developed a lot in that. So right now I'm doing a lot of teaching, training in NeuroLinguistic Programming, symbol work, stuff like that.

Dr. Dave: Okay you actually have...

Hollander: I have a training, a training institute here in Holland, which was actually the first NLP institute, so I could probably say the major NLP institute here in Holland.

Dr. Dave: ...oh, that's interesting, how did you first come to be exposed to NLP?
Which...just in case anybody that is listening and doesn't know what we're talking

about, NLP stands for NeuroLinguistic Programming. How did you first get exposed to that?

Hollander: Yes, well, I had some interns as a psychologist, in...- but I was still working in psychiatry, I always had four interns - and some of them suddenly came up with this book that they were very enthusiastic about it. I think it was called "The Structure of Magic".

Dr. Dave: Right.

Hollander: By Bandler and Grinder.

Dr. Dave: I have it on my bookshelf, right here.

Hollander: Right, so now I started reading it and it happened that just around that time, I think it was in 1981, I went to the first conference on Ericksonian hypnosis.

Dr. Dave: Mm-hmm...

Hollander: Somewhere in...oh it was in Phoenix, actually, Phoenix, Arizona.

Dr. Dave: Oh yes.

Hollander: And there, when I was there, I found some brochures. I said, "Oh wow, some people are actually doing this!", so I visited them and talked to them and invited them to come and teach in Holland. And that's how I got started in NLP. I was already, I was already doing a lot of Ericksonian hypnosis by that time.

Dr. Dave: Well that's great, you and I share that in common, I was also very much...

Hollander: Really?!?

Dr. Dave: ...yeah, I was very much influenced by the work of Milton Erickson and I took one of the first workshops I think that Bandler and Grinder offered, in Santa Cruz. I don't remember what year that was. But... I know it was a long time ago. (laughs)

Hollander: Yeah, yeah, it must have been around that time.

Dr. Dave: Yes. Well, so, then you teamed up with your colleague, friend Jeffrey. And... as you two came up with this program, that integrates I guess some of the key elements of NeuroLinguistic Programming...

Hollander: Mm-hmm...

Dr. Dave: ...into a kind of automatic, automated therapist if you will. Now let me ask you, were the two of you familiar with ELIZA, which, you know, is similar, but it works on a, on a more of a Rogerian premise rather than NLP?

Hollander: Yes, yes, we were familiar with that, this Eliza. That program has been around for a long, long time...

Dr. Dave: Yes, it has.

Hollander: ...as long as fifteen, twenty years, I think.

Dr. Dave: That's right, that's right. So, what made the two of you to decide to take another pass at this issue.

Hollander: Yeah well, ELIZA is a system that tries to more or less analyze, you know, whatever you say. And then, you know, respond back to have you clarify some of your ideas. What we realized is that there - for instance in NLP, but also in all kinds of different psychological approaches - there often are protocols or techniques. Or, you know, procedures that guide the client through a series of steps.

Dr. Dave: Yeah.

Hollander: And, so we thought, well, maybe it's possible to have a computer program lead somebody through a series of steps like that. Because basically what these steps do, is that there are - like Bandler and Grinder used to say - they are content-free, they are process-steps that can be applied to any content. So the computer would not even have to analyze any content. It could just guide somebody through those steps. So we and what was interesting for us, is that we realized if we could do that, if we we could make something like that, than we would basically have an unlimited supply of psychological help.

Dr. Dave: Yes, yes. So can you...

Hollander: There was the...

Dr. Dave: Yeah, go ahead.

Hollander: Sorry, yeah. No, go ahead.

Dr. Dave: The difficulty here is, we can't see one another (laughs), so there is no way to give a nonverbal cue of, "Okay now I'm about to say something"...(laughs) now you're...

Hollander: Right, right, exactly.

Dr. Dave: ...about to say something. Yeah...

Hollander: So that was, for us the, you know, the excitement, really. And as first we didn't even really know if it could be done. So...But we did realise if we could make something like that, that would be, you know, maybe not as good as a real life psychologist. Even though also of course in some cases better, but even if it wasn't as good as life, psychology would be available always for everybody, in unlimited supplies. So that was a very exciting idea, so one evening we sat down at the kitchen-table - and I have some experience in computer programming - so I played the computer, sort of saying things that I thought a computer might be able to generate and Jeffrey played the client. And suddenly we would realize we could get real far that way.

So...we had a programmer program a sort of a prototype. And then by the end of 2006 we had 1500 or 1600 people come in and do that MindMentor process. And then after they finished, there, you've probably seen that yourself, after you finish it, he asks, "How long do you wanna work with this solution?" And then, for instance you say, two weeks, or a day or a month and then after that, he sends you an e-mail and says, "Hello David, you worked on a problem, to what extent do you now feel this problem has been solved? Zero percent, it's totally unsolved, a hundred percent it's totally solved?"

And with that we got 47 percent. So that was... Yeah we thought...

Dr. Dave: 47 per...47 percent said, what after the first session that they felt it has been solved or after multiple sessions?

Hollander: No, after one session not 47 percent said it had been solved, but the average person said that it had been solved for 47 percent. So they only experienced half of their problem basically.

Dr. Dave: Oh, I see. Oh, I misunderstood, when I read that on the web.

Hollander: Yeah, most people, most people think that, you know, MindMentor solves 47 percent of the problems. While in a sense he does, but the exact formulation is that if you ask people for, for how many percent has the problem been solved, then that's 47.

Dr. Dave: Okay.

Hollander: But that... Yeah, so we were, you know, we were excited! Because, you know 47 percent, that's a lot! I mean after one session, that we found, that was amazing. So that really motivated us, to, yeah, to go on, so we, for a year, we, you know, spend a lot of time you know, having other people program it basically and make the illustrations and everything. So...now just in last December we were online again.

Dr. Dave: Yes, and now and maybe this wasn't the case when you first did it, there are three components or three therapist personalities that appear. One I would call

MindMentor, I don't know if that's what he is called, and then there is Robo-Rorschach and Provobot. So maybe...

Hollander: Yeah, exactly...

Dr. Dave: ...we could talk a bit about those, and what the rationale for each of those is.

Hollander: Yes, well... We thought that our first prototype was lacking a bit in depth, so to speak. And so we wanted to bring in, you know, not surprisingly (laughs), from an Ericksonian point of view, we would really like to bring in some unconscious process, so we looked for that, we looked into projective testing. I've always been a great fan of projective testing, by the way.

Dr. Dave: Okay.

Hollander: And so we..., I'm the...so the RoboRorschach - which is of course, you know, named after Herman Rorschach of the famous Rorschach-test - shows pictures and then you have to associate sort of in a not totally free associate, but associate from your problem-space, so to speak, on these pictures. And make a story out of your associations, in order to bring to the surface some unconscious information, in the beginning about your problem and in the end about your solution.

Dr. Dave: Yes, yes I noticed that and I liked that feature and so talk a little bit about the...there's the primary personality, which...is that personality called MindMentor? Does he have a...

Hollander: Yes, yes. Mm-hmm...

Dr. Dave: Okay, so he...

Hollander: That's MindMentor, yes.

Dr. Dave: ...yeah, he's therapist number one, and then he calls...

Hollander: Yes.

Dr. Dave: ...in these other two consultants: one is RoboRorschach and the other is ProvoBot. Say something about ProvoBot.

Hollander: Well, ProvoBot is a very American personality, I could say...

Dr. Dave: (laughs)

Hollander: He is a...he is based on a teacher of ours, called Frank Farrelly, from Medicine, the founder of provocative therapy - I don't know if you ever heard about him?

Dr. Dave: I did not hear, I did not know of his work but I saw a link on your website, and so I followed the link...

Hollander: Aha...

Dr. Dave: ...and I saw a number of principles listed here relating to provocative therapy. And is that also a spin-off of the Ericksonian approach? It looked like it might be.

Hollander: No, no, not really, this Frank Farrelly used to work in psychiatry a lot and it's really an interesting story in itself. Provocative therapy is becoming pretty popular here in Holland. And it has an American basis in, you know, in the person of Frank Farrelly who thought it up, who developed it for 40 years. He is very good at this, a great teacher in it too... But he is virtually unknown in the United States, which is a funny thing really. But so the essence of provocative therapy is that, you know, if you want the donkey to move forward, you have to pull its tail.

Dr. Dave: (laughs) I've never had to move a donkey, so I don't know if that is true or not.

Hollander: (laughs) No, well I don't either, that's the, an if, right?

Dr. Dave: Okay.

Hollander: But, so what you do in provocative therapy, in - of course it's just a very limited (laughs) rendering of it - but what you do in provocative therapy basically, is that you say to people on a conscious verbal level that they're suckers - that they are not okay, they will never amount to anything, that they are stupid- but at the same time at a nonverbal more unconscious level, you send out messages of, you know, acceptance and love. And this can be very..., very stimulating for people. They start to defend themselves, so we, also in MindMentor we try to put that element in, in the form of ProvoBot.

Dr. Dave: Yes I remember ProvoBot. Coming on the scene and mocking my solution. (laughs)

Hollander: Yes right...

Dr. Dave: It did, it did not...

Hollander: ...the most stupid solution I ever heard of...

Dr. Dave: Right, it makes it more lively and more interesting, I must say.

Hollander: Yeah, and this, well you see, people respond to different things. And, you know, some people hardly respond to ProvoBot at all, but some people respond very strongly to ProvoBot. Which is also I think some indication of how, you know, how

well, you know, how well, how interesting that whole system of provocative therapy is, because it's just a computer program, you know. But some people, you know, are really sitting there... I was talking to a journalist the other day and she was really going "Well I show that stupid Provobot!" And...

Dr. Dave: Yeah.

Hollander: ...you could really, you sort of feel the emotion, while it's just a picture on the screen. But it can have a real interesting psychological effect.

Dr. Dave: I saw that very phenomenon acted out by a guy who was almost my brother-in-law some years back...

Hollander: Mm-hmm.

Dr. Dave: ...who was interacting - we had a version of ELIZA - I don't know if you ever saw it, that was sort of an insult machine, so that...

Hollander: Oh, all right

Dr. Dave: ...whenever you said to it, it would kind of turn it back on you, as an insult, you know...

Hollander: Mm-hmm.

Dr. Dave: ...may a camel go up your nose and some things like that and this fellow, he took it so personally, he was swearing at the computer and he was in this battle with the computer! It was, it was fun to watch, it was funny.

Hollander: Yes, yes so in provocative therapy and also to a very minor extent in MindMentor, you try, we are trying to harness basically that energy for positive change.

Dr. Dave: Now, how would, how would you describe the central personality in MindMentor?

Hollander: Well, that's, the central personality is basically a NLP therapist, very supportive, very positive, very sponsoring. You know, very loving, with lots of positive suggestions, guiding you through a NLP process.

Dr. Dave: Okay.

Hollander: And through that there is added the projective element and the provocative elements are more or less added to them.

Dr. Dave: Now, one of the things that I think really helps to make this work, and it is definitely a step beyond what ELIZA did, is your use of graphical representations of each of these personalities - there are these cute little cartoon robot figures. How did you get the idea for this?

Hollander: Well, what I did, was take a robot picture, there was in some, you know, some 3D system called Poser and had that modified a lot. And then I gave this designer a photograph of Sigmund Freud and I said, "I want those glasses and that beard on him".

Dr. Dave: (laughs)

Hollander: So it took quite a while before I finally had that organized. Hoi-hoi...! That was my son leaving for the fitness-centre...

Dr. Dave: Oh, okay. (laughs)

Hollander: But, so, the reason why I wanted to have a robot is to have sort of a constant reminder that this is a mechanical personality. This is not a life psychologist sitting behind the computer but this is a - well, of you will - a, you know, a mechanical, electronical...

Dr. Dave: You felt people...

Hollander: ...entity.

Dr. Dave: ...you felt people needed to be reminded of that, that they would maybe lose track?

Hollander: I don't know. I thought it was a good idea to, to right from the beginning in that symbolization, to, yeah, to underline that in a subtle way...

Dr. Dave: Yes.

Hollander: ...and also I thought it would be very funny.

Dr. Dave: It is, and I like that little bit of a humorous touch. I mean in a way of kind of, it touches a similar place as ProvoBot does, you know, just giving it that little underline touch of humor which...which I think is good when people come in with some kind of a heavy problem. It doesn't hurt to lighten things up a little bit, I think.

Hollander: No, I think humor is a very healing force.

Dr. Dave: Yes. Yes, you know, I'm not sure there are there are two things I want of say to our listeners. (laughs) One is Jaap is in Holland (laughs) and I am in the US and we didn't say that, because we have such a good connection here - people might not know.

... Skype seems to be giving us some really clear connection. And it's just like you're in the room next door.

Hollander: Yes, sure it's being amazing.

Dr. Dave: Yeah, the other thing I want to suggest to listeners is that they really should go and try this out. This conversation that we're having, might have a lot more meaning for you, if you would have actually experienced MindMentor, which you could find at www.MindMentor.com, right?

Hollander: Hmm..., exactly.

Dr. Dave: And it's very reasonably priced, I must say. It's 4,95 euros. 4...

Hollander: Mm-hmm.

Dr. Dave: ...that's not 495 euros. There are therapists who would probably charge that much, for a single session, but we're talking, you know, like what I would call 4 dollars, 95 cents. How do you say that...

Hollander: Yes.

Dr. Dave: ... in euros? (laughs)

Hollander: 4 euros and 59 cents!

Dr. Dave: Oh, okay, (laughs) good. So it's very reasonably priced, so I would encourage listeners to do, do as I did, which was to try to get in touch with a real issue. I figured if I'm gonna put this thing... I'm gonna give it a fair test. I really ought to come up with something that's genuine from myself. So, I did and I'll talk a bit about that with listeners after the interview. I just want to encourage listeners to do that. So let's have you talk about what sorts of problems you think MindMentor is good for and what sorts maybe not so good for?

Hollander: People have asked that question a lot. And I really find it a little bit difficult to answer, because, you know, basically I think it is good for all problems to talk to MindMentor about it. But on the other hand that sounds a little vague and a little, you know, maybe arrogant. So I could say in a, it's very unlikely - let me put it like that - that MindMentor will solve very severe problems like, you know, severe depression, you know, multiple personality, hard drug addiction, psychosis, schizophrenia, problems like that. And it also says on the site that, you know, you absolutely need to find a more extensive treatment for that. And so I think, I think even though even these people would be suffering from these problems, might still get some benefit from MindMentor. But here you know a problem can be that, you know, if people think

"Well, now I'm doing this" rather instead of, you know, finding a real psychologist or a real psychiatrist. That would be really a pity, because that's not it's meant for it. It's really meant to, you know, to solve the daily problems that people have in their daily life. That they can't solve or they keep running up against, like for instance, you know, conflicts with colleagues, jealousy, you know, "Am I'm doing the right kind of work?", "My husband has left me and how do I find a new life?", "I don't sleep so well...", things like that.

Dr. Dave: Okay, now you've been talking about NLP as being the underline theoretical rationale. But we really haven't said much about NLP, so for the person who, let's say, is from another planet and never heard of NLP...

Hollander: Mm-hmm...

Dr. Dave: ...what are, what are the key principles that are being utilized here?

Hollander: Yes, so the major thing that MindMentor utilizes, is to analyze your thinking and your feeling in a very systematic way. And that way helping you understand, you know, how your thinking leads to certain emotions, certain behaviors. Well for instance, if I have a colleague that I'm having conflicts with, and I picture this colleague in a certain way or hear this colleague speaking in a certain way; and also my values if, you know, if for instance, I feel that the most important thing in life is that people respect me, then I have a sort of thinking that's very conducive to having more and more conflicts and more and more problems in that area. So if in, some of these elements are under my conscious control and some of these elements I can, you know, I can picture different things, I could say different things to myself. I can really think about, you know, "What are my values?", and make redecide that to some extent and that way I can, I can influence basically my model of the world. So I can make a change where I'm not happy with the way things are now.

Dr. Dave: So part of what's going on, is a values clarification process?

Hollander: Yes, for it's basically the idea that you have a view on the world, and your world view, your model of the world, will influence your possibilities and your impossibilities; and by changing the way you see things, basically, you will gain or lose, also possible, but you will gain more possibilities.

Dr. Dave: Okay. Now, it does - like ELIZA - it does depend upon what you've said and it kind of place back to you what you've said. Although it may position it in one way or another...

Hollander: Mm-hmm...

Dr. Dave: ...it...one of the things that I found challenging at times that I can see both positives and negatives around this, is that it would insist that I express some of my ideas in eight words or less.

Hollander: Yes.

Dr. Dave: Maybe you can talk about that a little bit.

Hollander: Yes, well...

Dr. Dave: Well, I want to have eight words!

Hollander: (laughs) Yeah.

Dr. Dave: (laughs)

Hollander: Okay.

Dr. Dave: I'm kidding, I'm kidding...

Hollander: No, one time! I'll take it, I'll take it. But I'll have to count at the same time as I'm speaking. But I'll count on my fingers. So: eight words...is...good...for...being...very precise!

Dr. Dave: Yes, it does force one to be explicit, and clear about what they're saying. That, that's what I see as a positive thing. At the same time it can be a little frustrating when you wanna say more than that.

Hollander: Yes, it, it is. Well, see another...there is also a technical reason for these eight words is, that MindMentor uses what you have said in later formulations. So, if you have, if you have something of, let's say, 25 words, being of course it's no problem at all to have people type in - if they like - a 1000 words, but how is he going to use that in the next, in the rest of the process?

Dr. Dave: Sure.

Hollander: So there, so you could, I don't know. We're still thinking about that because we've had that comment a lot. People say, "Well, it's 8 words, and you know, I can't really express myself and I finally wanna talk about my problem, I can only use 8 words!" And of course that's also different for different people. But some people really respond very frustrated to that. And so we've been thinking, well maybe, you know, let people speak as long as they like and then, you know, have them summarize it.

Dr. Dave: That's kind of how it's set up now, I wish, I should add that, that there were places where I could type in much more than 8 words, but in the program it would come back and kind of say, you know, "Now, what's the essence of this?"

Hollander: Yeah, right.

Dr. Dave: In 8 words... And...

Hollander: Yeah, so. Maybe, it's still a little bit like, you have this whole story and it goes like, "Uhhh (makes sound like a buzzer) 8 words!"

Dr. Dave: Yes. (laughs)

Hollander: So we maybe, we need to soften that process a little, "So well it's great that you are telling me all this and I'm very curious how you might, you know, put this into, you know, tight formulation."

Yes, so, we don't see...The reason why we haven't done that yet, is a sort of, you know, a little bit, how do you say, it seems a little fraudulent to, you know, have people type in all this text and then not do anything with it. Not analyze it or whatever. So, we're still thinking about that, how we, you know, what we can do about that. Our first step is to sort of explain more, why you ought to have different screens, explaining why MindMentor wants it in 8 words.

Dr. Dave: Well, I wonder if in the future, if you were to collaborate with, and I'm just thinking out loud here, but...

Hollander: Mm-hmm... Just, please do...

Dr. Dave: ...yeah, if you would collaborate with someone who really is trained in, you know, in artificial intelligence, I'm assuming that there are advances being made in the ability to parse natural language and derive meaning. I know that's a big challenge for the whole artificial intelligence enterprise, that I think that there are, there's some progress that's been made and perhaps by teaming up with, you know, with the doctoral student in that area or recent graduate, maybe there could be some forward strides, what do you think?

Hollander: Yes well, I'm certainly interested in that, although I have to say that about eight years ago we had a - in our project a little bit similar to MindMentor - and that worked with language analysis and after two years basically we gave it up, because, you know, we just couldn't do it. So one of the strengths of MindMentor (laughs), it sounds very strange maybe, but, was the strength of MindMentor that he doesn't do any language analysis. So he doesn't have all of these problems that are associated with natural language analysis. But, certainly if there is new insights or new procedures or whatever, we are, you know, more than excited to look into those.

Dr. Dave: Do you have any plans for improving it? What sorts of improvements do you foresee? If any?

Hollander: Yes, well, basically I think MindMentor has been a great hobby of mine, so to speak, and Jeffrey is also very excited about it, and so sometimes we have these wonderful results and wonderful responses of people, that really stimulate us to go on. So, I think, actually, I think it's gonna be a life work and so we, we have a whole, you know, notebook with at least a 100 different things that we might still add to it. Of course, we'll add, we'll add many different procedures and, you know, everything that is in it now, will be multiplied in different forms, so it will be different every time eventually.

But also, what I find very interesting, is, so say for instance, we have a couple of thousands people who have had good results, is also eventually to have different users communicate with each other. So that would be something like, now you will have a certain problem, everybody works in English, so we can, you know, easily analyze some content; or at least we are not, you know, hindered by the fact that everybody uses different languages. And then for instance so, he knows the problem and he knows the percentage it is solved. So he could start saying for instance, "Well, hey David, you had this problem with this and that, and you solved it only for 30 percent, but I have this, you know, I spoke to this accountant in Kuala Lumpur, and he had a similar problem, at least maybe you can check for me, whether you think that's a similar problem; I think it is, but you have to check that of course. And he solved it for 90 percent, so maybe you would like to speak to him about that?". And then somehow connect people that way.

Dr. Dave: That's a very interesting idea, yes.

Hollander: Yes, so that's one thing and of course there is this whole issue of, well like you said, if anything comes up in natural language recognition, that would be interesting...

Dr. Dave: Yes.

Hollander: ...although, personally I'm, you know, even, the last time I looked at it, which is about, you know, 8 years ago it was still a long way off from what we would need. But then of course there is a lot of personalizations also can be done, you know. Some people are more global thinkers, some are more specific, some are more motivated by problems and others are more motivated by goals, some people think very procedural, other people think very much in terms of options, so eventually we might we have MindMentor sort of adapt to the user, to the thinking style of the user and have him present, have him present his information in a way that, you know, appeals to that particular thinking style.

Dr. Dave: Yes, I remember Bandler and Grinder, years ago - and I don't know if NLP has stuck with this idea or not - but they talked about visual thinking styles and auditory thinking styles and so on. For example that a visual person might say, "I see what you

mean" and an auditory person might say , "I hear you". And so, it's conceivable that your software could be scanning for those types of words and then...

Hollander: Mm-hmm...

Dr. Dave: ...reading replies that would reply in that same modality.

Hollander: Yes, and I, yes we also have a test here in Holland, that we developed over the last ten years, that measures a lot of these things. It's called metaprofile analysis. But it's only available in Dutch, and German and French, right now. But we're working on a English version too; and so it's all validated and, you know, reliable and everything, so we were already measuring that, so we must thinking maybe have a, you know, have a sim...eventually have a simplified version of that built into, into MindMentor.

Dr. Dave: Oh yes, that sounds like a good idea. Now, what's been the reaction of your colleagues of the, in the psychotherapeutic professional world?

Hollander: Well, there've been, first of all there've been surprisingly few reactions of a..., and then, well some of them have been very enthusiastic and some of the..., some of them have been very, very critical of MindMentor.

Dr. Dave: Well...

Hollander: So the enthusiasm is about the fact that he is always available and often, you know, people are colleagues start very sceptical and once they do, "Oh this is not so bad, this is really interesting!". But there's also some people, although I must say, that, that I think, as far I could tell, they only looked at the first two screens. But they say, "Well this is rubbish, this is ridiculous", you know. Mostly, I think, they haven't been, haven't really tried it. They just, they just respond to the whole concept of a computer program working with people.

Dr. Dave: Yeah, some people would find that offensive, right out the box?

Hollander: Exactly.

Dr. Dave: Yeah.

Hollander: Just the whole idea is offensive to them and then some of these people who has been most critical about that, are people who would also have there own system of internet therapy. Which, I don't know, it's about 300 times as expensive and 24,000 times as slow. So...

Dr. Dave: (laughs)

Hollander: ...that doesn't really make (laughs) for much enthusiasm, I think. But even apart from that, even if people would not have that system, then I think they could still be critical, as sort of like, you know, an insult to, you know, talk about your problems to a computer program.

Dr. Dave: Yes, well as we wind down here, I wonder if you have any final thoughts you would like to leave our listeners with.

Hollander: Final thoughts?!? Yes well, go and see MindMentor, if you have a problem and give him a spin!

Dr. Dave: Okay, well Dr. Jaap Hollander, thanks so much for being my guest today on Shrink Rap Radio.

Hollander: Okay, Dr. Dave van Nuys, thank you very much for the opportunity to talk about this. And it has been a great honor to be on Shrink Rap Radio. And well, I hope to be talking to you again in the future and I'll certainly be downloading a lot of information from..., from your site.

(music)

Dr. Dave: I hope you enjoyed this conversation with NLP therapist Dr. Jaap Hollander. As you heard me mention in the interview, I did give MindMentor a try on my own. I may have been a little sceptical about it's value, but I decided I should approach it with as open an attitude as possible, and that to be fair, I should present a real issue.

So as it happened, I was feeling a bit down, depressed, pessimistic, tired, old and creaky. So that's what I presented. And MindMentor echoed some of this back to me and led me through a process of narrowing it down and getting to the heart of the problem. It's been a while now, since I did it, so I don't remember the whole process in great detail. But I think it also prompted me to recall a passed situation in which I had those same feelings. I think it asked me what the opposite of those feelings would be for me. At some point, I think it asked me, to recall a situation in which I was feeling the opposite sorts of feelings. At some point RoboRorschach came on the scene and showed me some images and asked me to identify in what ways those images might express what I've been feeling. And then at some point I think it showed me images and asked me to identify in what ways these new images might connect to good feelings I had experienced in the past. I was asked to imagine what I could do to bring back those good feelings. Somewhere around that point, I think, I was returned to the main MindMentor personality to discuss my proposed solution. And at some point, ProvoRobot came on the scene and provocatively challenged my proposed solution. Though I don't..., I don't wanna give the whole sequence away - and I'm not sure I even have remembered it correctly here - the key thing is that for one thing the cartoon representations of the three robot therapist personalities, tickled me at some level and I actually had some fun going through all this with them. And by the time the

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session was over, I was smiling and my spirits had picked up and I was feeling optimistic in that I knew what I needed to do to keep myself in better spirits.

So my assessment is, that this can be a useful tool for everyday run of the mill sorts of issues. I think it could be used as an adds-on too in personal therapy sessions. I don't think it would be a complete substitute for personal psychotherapy though to treat long standing or severe problems. But at 4 euros and 95 cents, what have you got to lose? It certainly won't do any harm. You might wanna check it out. Let me know what you think if you do.