The Power of Belief
By Edwin H. Friedman

One evening a man came home and announced that he was dead.

Immediately, some of his neighbors tried to show him how foolish this notion was. He walked, and dead men cannot move themselves. He was thinking his brain was functioning, and he was breathing; and that, after all, is the quintessence of living. But none of these arguments had any effect.

No matter what reason was brought to bear against his position, no matter how sensible the argument, the man maintained that he was dead. He parried their thrusts with ingenious skill.

He seemed to have a way of constantly putting the burden of proof on the other. He never quite came right out and said, "Prove it." But that was the message implied, not so much by how he answered as by how he avoided giving any answer at all.

Every now and then someone thought, "Now, I've pinned him down," having brought evidence so obvious no one could deny it. But then he would use his trump: "If I am dead, you do not exist either, since surely the living do not traffic with the dead."

Eventually most of his friends and neighbors quit arguing and the handful who were left, including his own family, became increasingly afraid.

Several reached the same conclusion: He had gone mad or, at the very least, was suffering from some erratic mental process. Exhaustion from work, perhaps? A brain tumor? He needs a rest, we'll call a doctor, perhaps a psychiatrist, maybe the family physician, or minister.

The man, however, was not upset by these suggestions. He shrugged them off without reply and finally said, "I don't know what's the matter with you all. It is just absurd to think of a dead man as tired, let alone sick."

His wife, almost literally beside herself, took to carrying on a dialogue within. ("If he believes this, then how can he say that? If he does that, how can he think this?")

As the mixture of fear and frustration thickened, it was finally agreed that outside help must be called. A psychiatrist was invited over to interview him.

After some preliminary greetings and a few routine questions, the doctor asked to see the man alone. He readily agreed. The two went into another room and closed the door. Now and then an elevated voice broadcast itself over the transom, although nothing could be understood. It was clear, however, that the voice they heard getting louder always belonged to the clinician.

Some time later, both men emerged. The doctor had his jacket over his arm, his necktie had been loosened and his collar opened (in fact, the button was no longer there). As for the man, he seemed totally unchanged. "Hopelessly psychotic," muttered the psychiatrist. "You will have to have him committed. He has lost all awareness of reality. If you want, I'll call the hospital and see if they have room."

"Now, really," said the man calmly, "what kind of therapy would you prescribe for a dead man? Surely, sir, if it were known that you had tried to cure a man who was not even alive . . . talk about losing one's grip on reality."

The doctor started to answer, caught himself, and then, with measured calm, said to the others, "I haven't finished dinner yet. If you want me to call the hospital, give me a ring."

A clergyman was sought. The family minister was unavailable. Which type would be best? The modern kind who had some sophistication about psychological problems? Or perhaps a good old fashioned fundamentalist? "Let's fight fire with fire," said someone. As it happened, that evening a well known evangelist was in town to speak at a
nearby theater. When he heard about the problem he rushed over, thinking how his success might be used to introduce the show. Once again, the group was left to strain after the voices behind a closed door. Again, nothing that was audible, again the rising tone, again never the man's voice rising. This time the clergyman came out alone, stopped, looked at everyone, nervously kissed his little black book, and bolted out the door. Several cautiously peeked into the room; the man was fast asleep.

It was now decided that the family doctor should be called. He had known the man since he was a little boy, and besides being a physician with a reputation for patience and skill, he was respected everywhere for his homely wisdom. He came quickly, and after one or two questions in front of everyone, asked the man in a no nonsense way, "Tell me, do dead men bleed?"

"Of course not," said the man.

"Then," said the doctor, "would you allow me to make a small cut in your arm, say above the elbow? I will treat it; there's no reason to worry about infection. I'll stop the flow immediately, and we can see, once and all, whether you are dead."

"Dead men do not get infections, nor do they bleed, doctor," said the man, as he proceeded to roll up his sleeve.

With everyone watching anxiously, the doctor deftly slit the flesh, and blood came spurting out. There was a gasp of joy throughout the group. Some laughed, others even applauded, though a few seemed rather to be relieved.

The doctor quickly dressed the wound and turned to everyone, saying, "Well, I hope that puts an end to this foolishness." Everyone was congratulating the physician when they suddenly realized that the man was headed for the door. As he opened it, he turned to the group and said, "I see that I was wrong." Then, as he turned to leave, he added, "Dead men, in fact, do bleed."

Moral: The way to cure an ostrich is to make him afraid of the dark.

I. Behavior
   1. Would you describe the man in this tale as persistent, rigid, stubborn, idealistic, delusional, contrary, deceived, principled?
   2. What might the man do if his family decided not to take his seriousness so seriously?
   3. What's the difference between unassailable beliefs and cherished beliefs?
   4. How do rigid people get more flexible people to doubt their own sanity?

II. Change
   1. At what point can you be sure that reason is not going to change another's mind set?
   2. Why are irrefutable positions suspicious?
   3. What do you do when an entire organization is under the influence of what you perceive to be incorrect beliefs?

III. Solution
   1. How would you go about proving that this man is wrong?
   2. How should the family go about demonstrating this man is wrong?

IV. Reflection
   1. Can you name one or more of your cherished beliefs?
   2. How did you come to hold these beliefs with conviction?
   3. What kind of evidence would it take to change your most cherished beliefs?