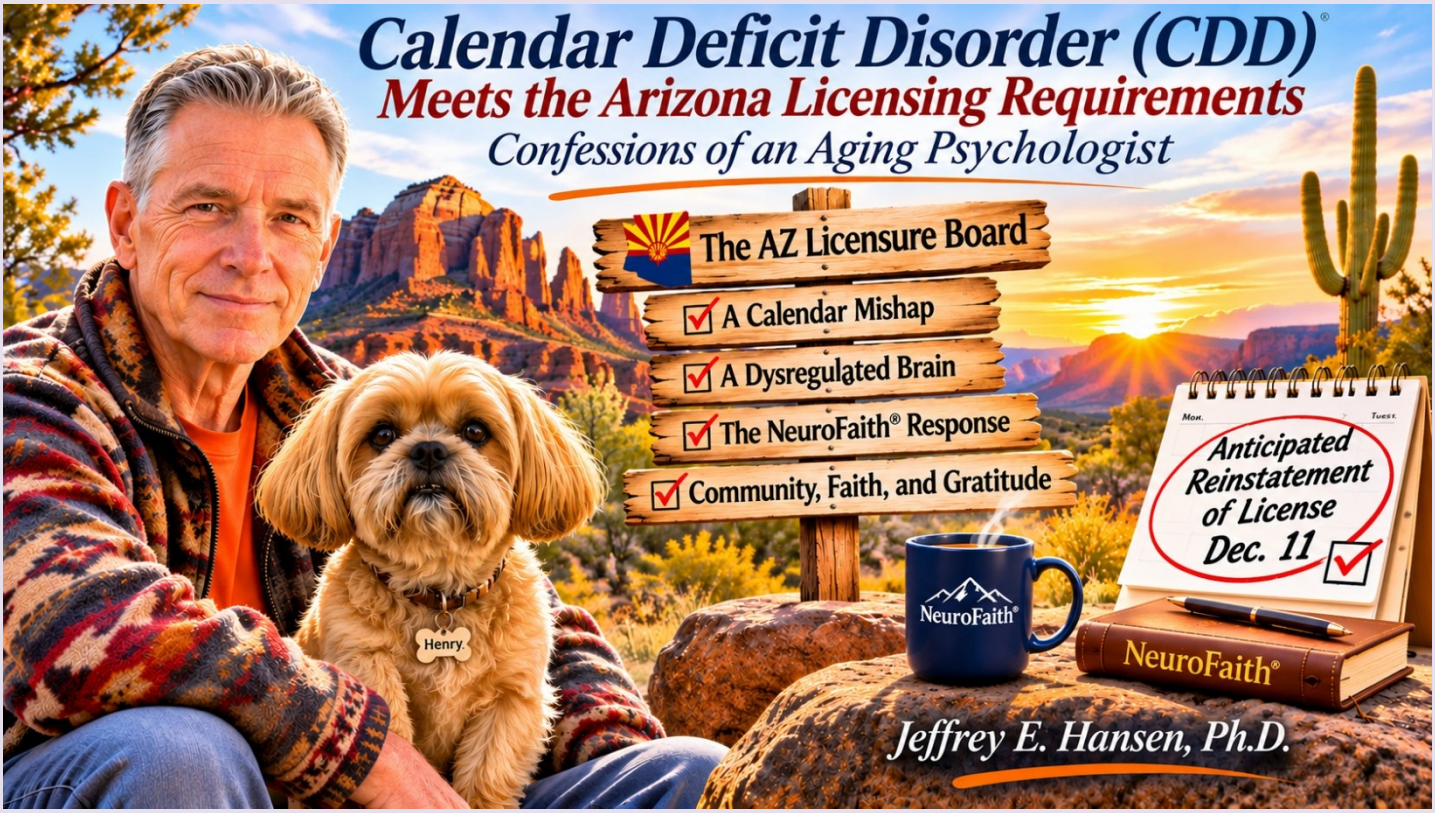


Friday the 13th and the Great Defrocking

It was Friday, November 13, 2026. I am not particularly superstitious, but if the universe wanted to remind a 72-year-old psychologist that he was not quite as administratively competent as he imagined, Friday the 13th was an inspired choice. I had two patients scheduled that morning and was going about the ordinary business of helping people navigate life when an email from Psychology Today caught my eye. It concerned my professional license information. I assumed it was about Washington, where I had renewed my license but had not yet updated my profile. No big deal. Right?

Wrong. I hold psychology licenses in Washington and Arizona. Washington renews mine annually on October 31, my birthday. Halloween. Trick or treat! Arizona renews every two years, and in the increasingly cluttered filing cabinets of my brain I had confidently filed the next renewal under 2027. Unfortunately, Arizona had filed it under 2026. My license had expired almost two weeks earlier. Oops. The discovery was no small matter: I had to stop seeing Arizona patients immediately.

I began thinking of myself as professionally defrocked. Traditionally, defrocking involves removing a clergyman from his office and the garments that signify it. Psychologists have their own ecclesiastical apparel: a license. Mine was still perfectly respectable in Washington, where I remained licensed and in good standing, but no longer authorized practice in Arizona. So I was properly dressed in Washington and professionally naked in Arizona. Geography had become unexpectedly important to my wardrobe.

I assumed the fix would be uncomplicated: paperwork, a fee, perhaps a well-earned administrative scolding. In Washington, provisions exist for late renewal. Arizona, I discovered, had a more elaborate program in mind. I entered the board's online reinstatement system, uploaded continuing education through CE Broker, and completed the Arizona jurisprudence course. Its content mattered, but taking it while trying to resurrect my license was not my idea of an enjoyable Friday. I suspect somewhere in the course there was a lesson about renewing on time. To add to the fun, the completed course did not readily upload because I was already past the deadline. Apparently, even the computer felt compelled to reprimand me.

Then came the news that review could take two to three months. That caught my attention. At my age, retirement income provides a financial base, so losing practice income would sting without putting Leah and me on a steady diet of canned beans. But the interruption to my patients was another matter. Therapeutic relationships involve trust, momentum, and people who have already carried more than their share of hardship. Having to stop seeing them was the consequence that bothered me most.

The reinstatement application then presented its defining question: Had I provided services between expiration and reporting? Yes. Before discovering the lapse, I had seen nine patients, seven once and two twice, for eleven encounters. I had believed my license remained active. Still, the form asked a plain question, and I knew the answer. I also knew that clicking "No" might have made my life much easier. Who would know? Probably no one. But I would know, and it would be a lie.

I clicked "Yes." I would rather explain an uncomfortable truth to a licensing board than explain a convenient falsehood to my own conscience. Integrity can be a royal pain in the backside, but it is worth keeping. That decision complicated the process, and I accepted that. The Arizona license governed my authority to practice, not the sum of who I was. My brain, however, had some opinions about that distinction.



At that point I also arrived at a diagnosis for my condition: Calendar Deficit Disorder, or CDD. Not to be confused with a shortage of calories, a problem I certainly do not have the luxury of claiming. CDD is a devastating impairment in the ability to distinguish this year from next year when the

distinction actually matters. Its chief symptoms include misplaced confidence, selective blindness to renewal dates, and the sudden discovery that an otherwise functioning adult can be defeated by a twelve-month grid. I am preparing a submission for inclusion in the DSM-6. Surely the profession should recognize a condition that can render a perfectly competent psychologist temporarily incapable of practicing in Arizona while leaving him fully credentialed in Washington.

According to the entirely fictitious Merrick Manual, the disorder is chronic, progressive, and incurable. Treatment is strictly remedial: multiple calendar alerts, an attentive spouse, a responsible office assistant, and perhaps a large sign taped to the bathroom mirror reading, "CHECK YOUR LICENSE, YOU IDIOT." Prognosis improves with humility, but there is no known cure for the aging psychologist who remains convinced he has another year. I am, of course, kidding about the diagnosis. But the predicament taught me something serious about the value of humor: it allowed me to own what happened without turning an embarrassing oversight into the final verdict on my life.

When the Body Started Keeping Score

Over the weekend, as I contemplated weeks or possibly months of waiting, I thought of psychiatrist Bessel van der Kolk's book The Body Keeps the Score (van der Kolk, 2014). I have spent much of my career studying trauma and the interplay of emotion, stress physiology, and physical symptoms. Stress is not confined to thought. It affects arousal, muscle tension, sleep, and the way pain is processed. I knew all that. What I had not anticipated was my own body's enthusiasm for demonstrating it.

I have an old back injury from my Army years, along with occasional sciatica and another nerve problem affecting the front of one leg. They are real physical conditions, usually quite manageable; the sciatica rarely visits. Yet suddenly my back hurt, the sciatica returned, and the other nerve pain decided it would be rude to miss the reunion. Sleep grew restless as well. Every old vulnerability seemed to have received an invitation, and not one had the decency to decline. Well, Bessel, my body apparently keeps meticulous records, and it had chosen this particular weekend for an audit.

The timing was striking. Sustained uncertainty can heighten muscular tension, amplify existing pain, and disturb the sleep that helps us recover. The pain was real, and so was the context in which it flared. I recognized the pattern I have discussed with patients for years: mind and body are not rival explanations of suffering. They are in constant conversation, sometimes rather loudly.



Then came the humiliating evidence on my walks. We have three dogs, none of whom had been informed about my lumbar difficulties. I noticed my pace slowing, and later, while walking with Leah, actually heard myself ask her to slow down. This from a former gymnast, an Army veteran, and a fellow who still spends a good deal of time in the gym. I half expected the dogs to look back with pity and suggest a recliner. The psychologist in me found the whole experience fascinating. The patient in me would have preferred considerably less back pain.

The deeper lesson was that knowing the neuroscience does not exempt us from having a nervous system. My prefrontal cortex could accurately assess our finances, my professional history, and the steps already taken. But threat circuits are not impressed by résumés. They respond to uncertainty, interrupted purpose, and the prospect of losing control. And that brought the next member of this traveling circus into view.

My Default Mode Network Formed a Committee

Enter the default mode network, or DMN, the brain's remarkable meaning-making machinery (Buckner et al., 2008). Its major hubs include the medial prefrontal cortex, posterior cingulate cortex and precuneus, and angular gyrus, working with medial temporal regions such as the hippocampal formation. Together these interconnected systems contribute to autobiographical memory, self-reflection, imagining the future, and constructing the story of who we are. The DMN is not the villain. It lets us revisit a cherished memory, consider our purpose, imagine tomorrow, or contemplate the people we love. Most of the time, my internal storyteller is a welcome companion.

But give that storyteller enough uncertainty and it can turn into a rather grim novelist. What if the board takes months? What about my patients? Will this follow me? What does it say about a psychologist who cannot keep track of his own renewal? Research has also linked patterns of DMN activity with rumination (Hamilton et al., 2011). A useful effort to make meaning can become rumination: the same unwelcome possibilities revisited again and again, with each

rehearsal feeling a little more convincing. I could feel my thinking shift from "Here is a problem to solve" toward "Here is a verdict on who I am." That was the moment to challenge the story.

A deadline was missed; my character and competence had not vanished with the date on a license.

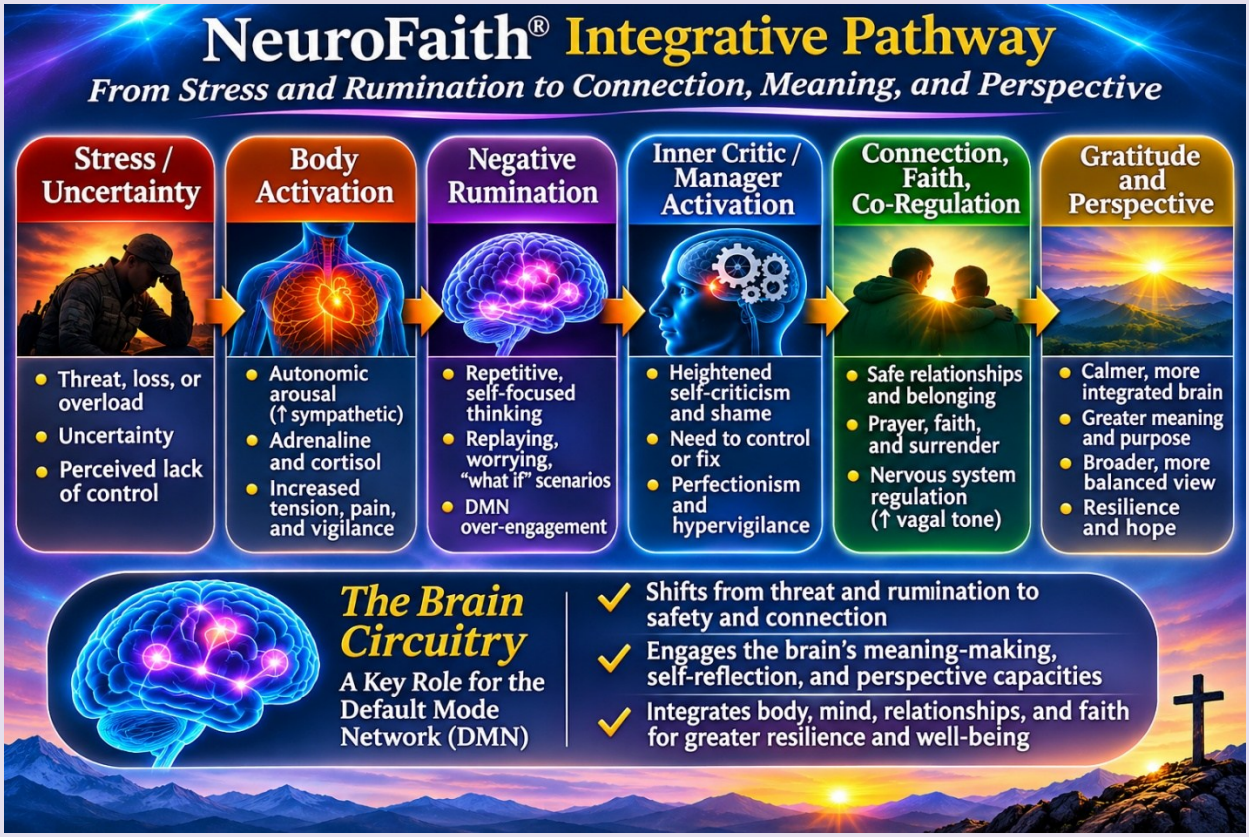
Then my inner critic arrived. In the Internal Family Systems model developed by Richard Schwartz, we speak of parts, including protective managers (Schwartz & Sweezy, 2020) that try to keep us safe through vigilance, planning, control, perfectionism, and sometimes criticism. Mine had an especially fine line of commentary: Really, Jeff? Forty years teaching executive functioning and you cannot manage a renewal date? The critic can help us own a mistake, but after that it is often just kicking a man who is already down.



The neuroscience and the psychological model gave me two useful lenses on the same experience. The DMN kept spinning self-referential stories; my critical and managerial parts supplied the urgency and emotional color. Soon they had formed a committee. It met around the clock, required no refreshments, and produced absolutely nothing useful. By Monday morning, after poor sleep and a weekend of physical complaints, my manager wanted action. Send an email. Make a call. Try another office. Perhaps the next message will relieve this dreadful uncertainty. Responsible advocacy was appropriate; compulsively trying to manage away every uncomfortable feeling was something else.

I recognized the temptation. I did not have to believe every scenario, obey every inner accusation, or place another call simply because discomfort demanded one. I could thank the

committee for its concern and decline to let it run the institution. Somebody had to be the adult in the room. At 72, I suppose it was finally my turn.



Connection, Faith, and a Surprising Abundance of Gratitude

The antidote was not another email. It was connection. One of the central convictions of NeuroFaith® is that human beings are relational creatures: we develop through connection, we can be wounded in relationships, and we often heal in the presence of safe, loving others. Polyvagal-informed work gives me a helpful language for this, particularly co-regulation and the capacity for social engagement associated with a ventral vagal state (Porges, 2007). Research on the social regulation of threat offers another reason to take connection seriously (Coan et al., 2006). A steady voice, genuine concern, prayerful presence, and the reassurance of being known can help quiet the alarm inside us. My nervous system did not need another committee meeting. It needed my people.

So, I told my inner circle what had happened. I asked colleagues, friends, and family, many of them people of deep Christian faith, to pray for me. I did not dress up the story or pretend to have it all under control. They responded with kindness, wise perspective, humor, and an astonishing generosity of spirit. Even the patients whose care had been interrupted were gracious and understanding. Their compassion touched me deeply precisely because they had

every reason to be disappointed. They offered me a reminder I will not forget: being loved does not require us to be flawless.

And I want to say something directly to those people. To my colleagues who have walked alongside me, to my dear friends and family who prayed and encouraged me, and to my patients who met a difficult disruption with extraordinary grace: thank you. This essay is for you. It is certainly one old psychologist's attempt to make sense of his own craziness, but it is also my way of acknowledging what you gave me. You did not magically renew my license or erase the paperwork. You gave me something better. You reminded me that I was not alone, that the years of relationship mattered more than the embarrassment of the moment, and that a person can be accountable without being reduced to his worst calendar entry.

Faith brought that lesson home. I have spent years exploring the intersection of neuroscience, psychology, and Christianity, but there is a considerable difference between teaching trust and actually having to practice it. My DMN wanted an answer to every “what if.” My inner critic wanted perfection. My manager wanted control. God was inviting me to something quieter and harder: trust. I had done what I could do. I had told the truth, completed the requirements, and asked for help. The rest was not mine to control. And regardless of the outcome, He had me.

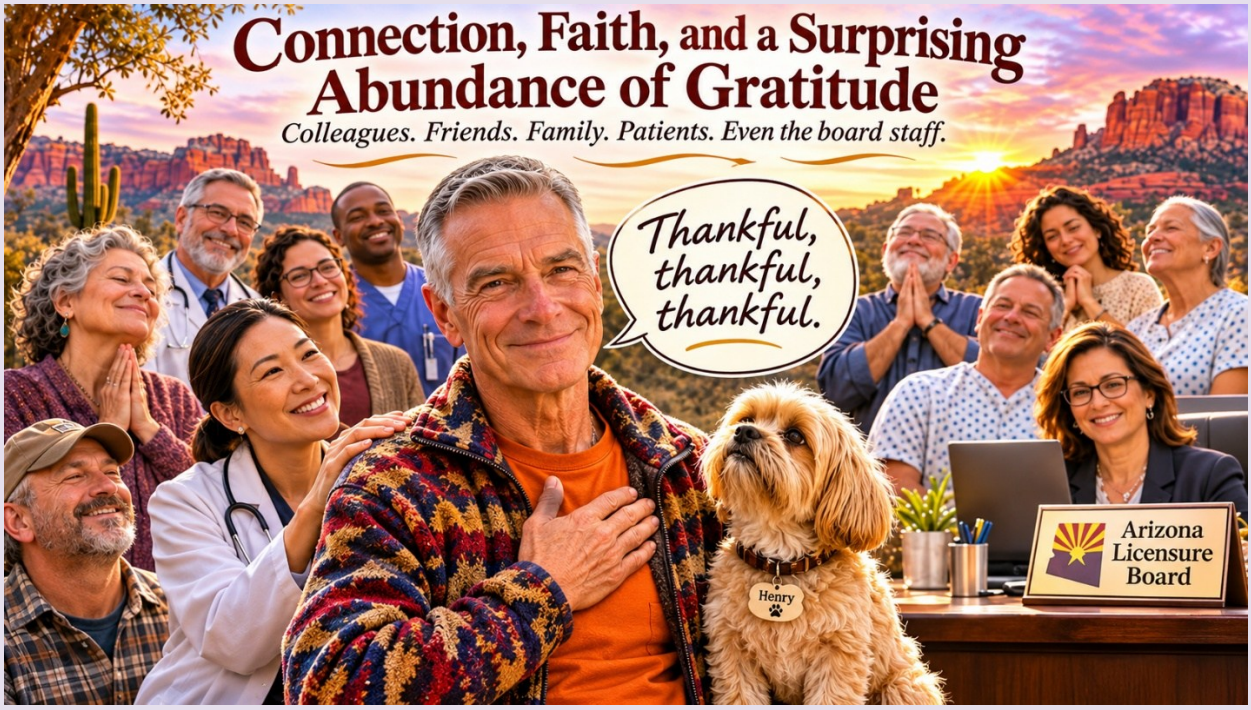
That realization did not excuse the consequences. There would be about four weeks without clinical income, and patients had endured an interruption I regretted. But it interrupted the much less useful suffering I was creating by mentally rehearsing catastrophe. My faith gave me a way to correct the negative stories of my DMN. My identity is not finally established by a licensing board, a résumé, or the embarrassing work of an aging calendar. It rests in the God who knows me and loves me. Apparently, He even forgives an old psychologist for being an idiot occasionally. I am deeply grateful for that provision.

The board's subsequent correspondence gave me further reason for confidence. The language was “when your license is reinstated,” not “if,” and I understand my December 11 appearance as the remaining formality. I am confident that chapter is heading toward resolution. But the most important outcome has already occurred. My back and my worried thoughts had reminded me that I am human; my inner circle reminded me that I am loved; and my faith reminded me whose I am.

And before closing, I want to express my particular gratitude to Krishna Poe, Projects Specialist II with the Arizona Board of Psychologist Examiners. Now, I could easily have viewed Ms. Poe as an adversary, the person standing between me and the reinstatement of my license. But I chose to see her differently. Her meticulous attention to detail, careful examination of my continuing education records, and thorough review of every requirement reflected a remarkable commitment to her responsibilities. That eagle-eyed lady apparently doesn't miss a thing! And while I may not have appreciated every detail she uncovered, I certainly appreciate the professionalism and diligence she brought to her work. I chose to see her not as a foe, but as a friend doing her job exceptionally well. For that, Ms. Poe, you have my sincere gratitude. And

perhaps there is another lesson here: sometimes the people we initially perceive as obstacles are simply people faithfully carrying out their responsibilities. They deserve our respect, too.

So, the word I want to leave with is gratitude. Gratitude for colleagues who supported me without flattery, for friends and family who prayed with such faithfulness, for patients whose kindness humbled me, and for a God who stayed close when my own mind was making a terrible racket. Gratitude that the NeuroFaith® principles I teach were not merely ideas on a slide, but lived realities. Gratitude that the body could sound its alarm without getting the final word. Gratitude that I could laugh, learn, take responsibility, and rest in grace.



I have come to believe that humor is one of the most useful ways to recover perspective. It does not minimize a patient's disrupted care, magically restore lost income, or excuse my responsibility. It simply allows me to see the whole picture rather than stare so intently at one miserable corner of it. Psychologists have long studied humor as a form of coping and cognitive reframing (Martin, 2007). In my own case, being able to laugh at my supposed Calendar Deficit Disorder loosened the grip of the inner critic and made room for something better: gratitude. The situation was serious. I did not have to be solemn about myself every minute of the day.

And if the Lord has another lesson in humility planned for me, I have only one small request: perhaps next time He could put it on my calendar.

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