

Personal Emerging Counselling Framework

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Throughout this course I have had the opportunity to explore and learn a variety of counselling theories and approaches. No matter which theory or approach I was investigating or learning about, I always found myself comparing it to rational emotive behaviour therapy (REBT). Before this course, I had a very limited understanding of counselling and was quite surprised to learn that the core assumptions of REBT were already those of one's I already felt completely married to. I already employ the basic concepts of REBT causes of major problems and change with my children as a parent, with my students as an elementary special education teacher, and can deem how these concepts will guide me in my role as a school psychologist in the future.

### **Philosophical Assumptions**

#### **Nature of Humans**

According to Bernard, Froh, DiGiuseppe, Joyce, and Dryden (2010), REBT depicts the nature of human beings as involving dual biological tendencies which operate in opposition of one another. These dual biological tendencies are deemed as involving self-defeating tendencies, which are referred to as irrationality, and self-enhancing tendencies, which are referred to as rationality (Bernard et al., 2010). REBT portrays humans as being social beings, who possess the potential to be self-preserving and aware of their prospective to grow, learn, and change; as well as being self absorbed, intolerant, repetitive in making the same mistakes, and avoiding their potential for growth and change (Ellis, 1996). This tendency to be both rational and irrational thinkers influences the way individuals think, feel, and behave (Bernard et al., 2010; Dryden & David, 2008; Ellis, 1996; Rosner, 2011).

## **Nature of Healthy Functioning**

REBT theory depicts that individuals who act and think rationally are more effective within their lives, and therefore, happier (Rosner, 2011). Rational beliefs, which are deemed by REBT as being fundamental for healthy functioning, are flexible, consistent with reality, logical, and enhancing to the individual themselves as well as to the relationships they are in (Dryden, 2005). According to REBT, negative emotions can be experienced in a healthy or unhealthy manner. Healthy negative emotions (HNE), such as sorrow or annoyance, may vary in strength according to an individual's rational beliefs, but are still healthy in nature (Ellis, 1996; Guterman & Rudes, 2005). In REBT theory, there are four types of rational beliefs which promote healthy functioning in individuals: flexible preferences, non-awfulizing beliefs, high-frustration-tolerance (HFT) beliefs, and acceptance beliefs (Ellis, 1996).

### **Flexible Preferences, Non-Awfulizing Beliefs, and High Frustration Tolerance Beliefs**

Flexible beliefs promote an exchange of demands type irrational beliefs into a rational preference (Dryden, 2005). Flexible preferences are less emotionally intense, therefore, an individual is able to function healthier as the belief is only a preference, and not an absolute must, should, or have to, type of demand. Non-awfulizing beliefs support individuals in evaluating events as non-extreme or in an unexaggerated way (Bishop, 2000; Rosner, 2011). Non-awfulizing beliefs allow an individual to recognize that external events, even when devastating, are tolerable and can be 'lived through' with a healthy outcome. Healthy Frustration Tolerance (HFT) beliefs are rational in the sense that they are generally flexible and not overly exaggerated (Bishop, 2000; Dryden, 2005). HFT beliefs acknowledge that though an unmet preference may not be obtainable, the results are tolerable and manageable. HFT, flexible

preferences, and non-awfulizing beliefs are all constructive to healthy functioning in that each belief assists an individual in taking an effective action and make healthy adjustments when negative events occur or when negative situations cannot be changed (Dryden, 2005).

### **Acceptance Beliefs**

Healthy functioning is promoted when acceptance is applied in an unconditional, global, and positive way (Dryden, 2011). The adversary of acceptance is conditional acceptance of self, others, or aspects of life (Dryden, 2011). An example of conditional acceptance would involve believing in and putting value on oneself only if others do, implying that acceptance of self cannot be achieved unless others accept you first. Therefore, emotionally healthy functioning individuals are able to develop an unconditional acceptance of themselves, others, and aspects of life, even when reality is very devastating or unpleasant (Dryden & David, 2008).

Unconditional self acceptance (USA) promotes the acceptance of ourselves as being of the same worth as any other individual, even though we are all fallible in nature (Dryden & David, 2008). An example of USA would involve an individual acceptance of themselves even when they make a devastating error or if another individual is prejudice against them for who they are. Unconditional others acceptance (UOA) endorses the principle of accepting all individuals as being of equal worth. UOA depicts that even when an individual is treated unfairly, it does not make them less worthy than another individual (Dryden & David, 2008). An example of UOA would involve an individual of a different minority religion or culture being accepted and treated as being of equal worth, even when others are in disagreement with their cultural or religious beliefs. Unconditional life acceptance (ULA) addresses the fact that unavoidable and even traumatic events occur in life, whether they are global or individual, but such events can be

survived and overcome (Dryden & David, 2008). An example of ULA was the ability of many individuals to accept, overcome, and survive the devastating earthquakes that occurred in New Zealand and Japan in the 2011.

### **Major Causes of Problems**

According to REBT, major problems within an individual's life are actually caused by irrational, rigid, and dysfunctional beliefs, thoughts, feelings, and behaviours (Bernard et al., 2010; Davis, 2006; Dryden & David, 2008; Ellis, 1996; Guterman & Rudes, 2005). When individuals hang onto irrational beliefs, which are deemed to be illogical, rigid, and dogmatic, they acquire unhealthy negative emotions and dysfunctional behaviours (Bernard et al., 2010; Davies, 2006; Dryden & David, 2008; Ellis, 1996). Such behaviours may include anxiety, depression, self-pity, guilt, aggression, avoidance, and substance abuse (Bernard et al., 2010). Similar to rational beliefs, but opposite in nature, are four types of irrational beliefs which are depicted as being the root of most individual's problems or emotional disturbances. Irrational beliefs include: rigid demands, awfulizing beliefs, low-frustration tolerance (LFT) beliefs, and depreciation beliefs (Bishop, 2000; Dryden, 2005).

### **Four Types of Irrational Beliefs**

Rigid demands involve an individual's reaction to external events as being 'demandingness' in nature (Bishop, 2000; Rosner, 2011). Rigid demands may include individuals believing they or others *should* be or *must* be something other than they are not, or that an event *should* or *must* not occur (Bishop, 2000; Rosner, 2011). An example of a rigid demand would be a mother believing they *should* be or *must* be the parent the children need in order to be functional, safe, and correctly cared for. Awfulizing or catastrophizing beliefs and

thinking evaluate external events in an exaggerated and negative way (Bishop, 2000; Rosner, 2011). An example of an awfulizing belief would be an individual who is fired from their job and cannot overcome the absolute awfulness of the situation. LFT beliefs involve an individual believing they are unable to 'stand' the events or outcome of an external event (Bishop, 2000; Rosner, 2011). The stronger an individual's unmet preferences are, the more difficult it is for them to tolerate a specific situation. An example of a LFT is an individual who has a phobia of flying and will not fly in fear that if they do, they will die. Depreciation beliefs involve a lack of acceptance of oneself or others, which may include global self-downing where an individual is unable to determine any worthy qualities within themselves (Bishop, 2000; Rosner, 2011).

### **Activating Events, Belief System, and Emotional Consequences (ABC)**

REBT promotes an ABC model of causation of psychological disturbances and problems (Dryden, 2005). According to REBT, it is actually an individual's belief (B) about an activating event (A) which influences their emotional consequence (C), which can be emotional, behavioural, or cognitive in nature (Dryden, 2005; Guterman & Rudes, 2005; Rosner, 2011). This is contrary to the misconception that it is an (A), whether it is an actual or inferred event, which causes (C) and (B) (Dryden, 2005). Therefore, it is an individual's rigid, absolute, and dysfunctional irrational belief about an (A), which causes a destructive, problematic consequence for the individual, not the (A) itself (Dryden, 2005, Guterman & Rudes, 2005). An example of this model would be if an individual possesses an irrational belief of a rigid demand involving they must be on the honor roll each term of their high school year (B), may feel anxiety or depression (C) when they receive a perceived low mark on an assignment (A).

## **Nature of Change**

As mentioned earlier, REBT theorizes that psychological and emotional disturbances are not due to external events and circumstance, but by irrational beliefs and thoughts which accompany those events and circumstances (Dryden, 2005; Ellis, 2011; Rosner, 2011). Since human beings possess a biologically-based tendency to think both rationally and irrationally, it is possible for psychological change to occur (Dryden, 2011). However, since thinking and emotion are linked, irrational thoughts must be extinguished and replaced by rational thoughts (Rosner, 2011). Through the disputation of one's irrational beliefs, REBT posits that individuals are able and capable of developing more rational and realistic ways of thinking; which in turn, will produce more functional and healthy changes to their emotional consequences to activating events occurring within their lives. (Davies, 2006; Dryden, 2011; Dryden & David, 2008; Rosner, 2011).

## **Counselling Experience**

### **Personal Definition of Counselling**

My definition of counselling has greatly changed since our first classes within this course, and I'm continuing to expand and adapt as I am exposed to other counselling literature and research. I have had very little experience with counselling, and the experiences I have had were very brief. Before taking this course, I truly believed that counselling and therapy involved having a counsellor inform an individual exactly what their problem was and how to 'fix' it. Though it was many years ago, my family attended family therapy to address an addiction within the family. I remember the sessions I did attend, feeling quite confused because we didn't always address how the addiction problem was going to be 'fixed' or 'cured'. I was also

confused because I didn't feel this family member or us as a family were completely 'fixed' or healed when the counselling therapy sessions were completed. However, I do recall how we modified and changed the way we interacted as a family throughout this process.

At this current time, my definition of counselling is that it provides an opportunity for individuals to facilitate change in their daily lives and functioning by gaining a new perspective on their beliefs, thought processes, behaviours, emotions, and relationships through the interaction and guidance of a trained professional adhering to a specific counselling theory. I've come to realize that counselling can empower individuals who have the courage to address areas within their lives they deem as preventing them from living a more healthier and functional life. Counselling provides an opportunity for individuals to become more self-aware, clarify the cause of struggles and problems within their life, and identify the steps required to determine a plan to enforce changes or solutions within their lives.

I appreciate the importance placed on the unconditional acceptance, empathy, and collaboration a therapist should have for their clients (Ellis, 1996; Ellis, 2011; Mukangi, 2010). I especially connected with the theories which promote assisting clients in becoming aware of how their belief systems influence their emotions and behaviours. I've always been of the philosophy that what one believes or thinks depicts how they behave and react to situations. As a future school psychologist, I want to assist individuals in learning how to obtain consistent healthy living and functioning in their current and future daily lives, as well as how to maintain this state when inevitable difficulties present themselves in the future, by assisting them in changing their irrational beliefs into rational beliefs.



## **Counselling Process Beliefs**

### **Counsellor-client relationship**

Similar to other psychotherapies, REBT does stress an unconditional acceptance of, empathy for, and collaboration with clients (Ellis, 1996; Ellis, 2011; Mukangi, 2010). Though a warm relationship between the client and counsellor is desired, it is not deemed as necessary condition for effective change to occur (Ellis, 1996; Ellis, 2011; Mukangi, 2010). The theory behind this thought is that USA is so vitally important for the healthy functioning of an individual, that clients are actively encouraged to accept themselves unconditionally; therefore, it is not absolutely necessary that a warm relationship occur between themselves and the counsellor (Ellis, 2011). As a matter of fact, a desire for a warm relationship between a client and counsellor may actually encourage transference by feeding a demanding irrational belief a client may have regarding their therapist *must* having to like them (Corey, 2009; Ellis, 2011). If transference or evidence of irrational beliefs presents itself during sessions, the REBT counsellor will most likely confront, challenge, and dispute it as a means of making the client aware of how their irrational beliefs influence their emotions and behaviours (Corey, 2009; Ellis, 2011).

When an individual or client recognizes that there is trust, respect, and unconditional acceptance within the therapeutic relationship, changes to an irrational belief can be made by attacking and challenging the theory behind it. To me, this allows the client to become aware of how such an irrational belief has had power over their lives, and that by learning to change that belief into a rational belief allows them to overcome such obstacles they have placed before themselves.

**Roles of the client and the counsellor**

The role of the client and counsellor should be clearly understood at the beginning of any therapeutic relationship. REBT views the counsellor's role as that of a teacher, who directs the client in recognizing and gaining insight of persistent embedded irrational beliefs which are interfering with their daily functioning and overall well being (Dryden, 2011). Ellis (1996; 2011) theorized that such strong convictions could only be addressed and changed through a direct, forceful, and energetic approach. Ellis' style, which has been copied and enforced by many REBT therapists, seemed to be of a blunt, and sometimes perceived rude style; however, Dryden (2011) has indicated that Ellis' style did not have to be imitated to be forceful and energetic. Dryden's (2011) view of employing forceful and energetic approach in a variety of ways. Each counsellor should portray such an approach in their own style and be viewed as being 'passionate' in one's methods of assisting client's in the process of recognizing and changing their irrational beliefs to more rational beliefs (Dryden, 2011).

This view of a 'passionate' approach is more suited to my comfort level as a counsellor than one demonstrated by Ellis and other REBT counsellors. Though I am considered to be forthright, direct, and even at times blunt individual, I am always aware of how others are responding to such a style during our interaction. Personally I have found most individuals, whether they are adults or children, respond positively to such a direct approach to problem solving. However, I am aware that others who may observe such interactions are concerned about such a direct approach. I must also admit that a clear understanding between the individuals I often interact are confident that I have no judgment on their situation or past behaviours before I engage in blunt, direct discussions with them. My purpose is to not confront

them personally, but to confront their thought processes, beliefs, or behaviours as a means of changing their current situation to more acceptable, productive, and confident in nature.

The role of the client is to not passively receive guidance from an REBT counsellor in the process of therapy, but to take an active role themselves in the recognition, confrontation, and transformation of their irrational beliefs to rational beliefs (Dryden, 2011; Rosner, 2011). REBT counsellors teach and guide clients through the process of the ABCDE model; however, clients are expected to practice and use this model on their own at some point so that they are not dependent on others to 'fix' their problems for them. As a teacher and mother, this form of guiding another to employ strategies and tools to become an independent problem solving skills is innate in nature to me. My personal view of the purpose of teaching is to provide others with the tools to become self sufficient so they are not dependent on others for their successes, achievements, or failures.

### **Emphasis on the past-present-future**

REBT acknowledges that irrational thinking is often rooted in the past experiences with one's family, culture, and society; however, these irrational thoughts continue to be reinforced by an individual's current ways of thinking (Rosner, 2011). REBT deems that individuals create and maintain many of their emotional disturbances from their current irrational beliefs and also possess the ability to abolish them, no matter what past experiences they are stemmed from (Guterman & Rudes, 2005). Acknowledging past events and experiences, or how a belief system developed, is beneficial in the sense that it provides some background information which may assist in the awareness of how to cope with such events if they occur again in the present or future. However, what was done in the past cannot be changed, only the present and future can

be addressed. REBT focuses on examining and replacing the current irrational beliefs of faulty assumptions and misconceptions with effective rational beliefs (Guterman & Rudes, 2005; Rosner, 2011).

Counselling theories which delve and concentrate on one's past do not seem to promote present and future changes to me, as they seem to address 'coming to terms' with events that cannot be changed. For certain clients and therapists, this may be a needed and effective approach. However for me, I view past experiences and events as influential in the formation of beliefs which we may adhere to in the present, but which can be changed and transformed into other more effective and rational beliefs if needed. Although we cannot change the past, we can change how we allow past events and experiences influence the way we perceive things today and in the future. For me, REBT is an optimistic approach to functional living, solving problems, and coping with upcoming struggles in the future.

### **The interrelationship of beliefs, emotions, and behaviours**

According to REBT, it is an individual's belief system about an activating event which influences their emotional consequences (Dryden, 2005). Therefore, even though beliefs, emotions, and behaviours are separate aspects of human nature, they are intertwined together. REBT also depicts that irrational and rational beliefs are different in nature, and therefore cannot exist together at the same time (Dryden, 2011). For example, it is not possible to hold to the irrational belief that 'my co-worker *must* like me' and the rational alternative of 'wanting my co-workers to like me, but if they don't, I'm still a worthy being' at the same times. Irrational beliefs promote self defeating tendencies, whereas rational beliefs promote healthy functioning.

Similar to this thought is theory that unhealthy negative emotions (UNE), which stem from irrational beliefs, and HNE, which stem from rational beliefs, are also different in nature, and therefore cannot exist together at the same time (Dryden, 2011). For example, it is not possible to engage in the UNE of uncontrollable depression for an extended period of time when a loved one passes away, and also engage in HNE of healthy grieving at the same time. It should be noted that even though empirical data on REBT's qualitative theory of emotions is currently unclear (David, Montgomery, Macavei, & Bovbjerg, 2005), it does provide a contribution to the REBT understanding of how emotions and behaviours are influenced by an individual's underlying cognitive belief system (Dryden, 2011)

### **Change Process Including Resistance**

REBT acknowledges that each individual is unique in their reactions to events and experiences, and therefore, an understanding of which irrational beliefs are obstructing them from pursuing and achieving their goals is essential to the therapeutic process (Dryden, 2005). Assisting clients in recognizing and acknowledging how they maintain, and why they maintain these irrational beliefs, is an essential feature of REBT. Dryden (2005; 2011) discussed specific causes of obstructions or resistance to change by individuals. Some individuals simply lack the insight that their disturbances are caused by their irrational beliefs, and not by activating events. An REBT counsellor should also be aware that a client who lacks the intellectual insight of their irrational beliefs may be resist to making changes in their lives due to the forceful and energetic approach towards change employed by REBT. Other individuals believe that just by recognizing the irrational beliefs supporting their struggles will alone lead to change, and do not persistently work to change their irrational beliefs or exchange them for alternate rational beliefs. Therefore, even though they are aware of how their irrational beliefs cause disturbances within their lives,

they continue behave in ways that are consistent with their irrational beliefs. Creating any kind of change is extremely difficult for most individuals, and at times individuals may find the payoffs of irrational beliefs outweighs the advantages of the alternative rational belief. Some individuals even live in environments which support their irrational beliefs, and attempting to exchange them for alternative rational beliefs is not conducive to the expectations and beliefs within environment.

Throughout my own experiences as a teacher, I have witnessed each of these obstructions to change in a variety of families and children I have worked with. When an individual is unable to or willing to, for whatever reason, change the way they view themselves or things, the chances of them creating long term effective changes within their lives is quite low. It takes practice, guidance, reminders, assistance to make change, and when the individual is not able to work persistently on their own to create rational beliefs; the process will most likely not be permanently successful in creating the changes the client desires.

From a parenting experience, guiding our own teenage daughter in the realization that she will not 'die' of unpopularity if she is not allowed to attend every 'important' peer outing has been a continued process in our household. I can see how her exaggerated statements could easily turn into an irrational belief if allowed to go unchecked, and we often discuss how such a devastating event of being a 'social outcast' would certainly and understandably be upsetting, however, she would survive any possible worse case 'consequence' of not being allowed to participate in certain social events. I work with an individual who experiences self downing tendencies and anxiety each time a social event occurs, in fear that they will not be accepted or invited to attend. It causes stress on her, as well as on others who may have inadvertently not thought to specifically invite her on a spontaneous social event. This self awareness and ability

or willingness to change an irrational belief into an alternative rational belief has always been evident to me, and I recognize the change process can be extremely difficult and easy to resist, no matter what age or position in life you are in.

### **Interventions**

REBT is conducive to a many forms of individual and group psychotherapies, as long as the focus is on assisting individuals on developing insight into the irrational beliefs which are causing maladaptive functioning in their daily lives (Ellis, 2011). Most REBT interventions are conducted through individual therapy (Ellis, 2011). Individual therapy provides an opportunity for clients to receive one-on-one assistance in addressing and changing irrational beliefs through the ABCDE model. Depending on the client, most individual REBT sessions occur on a weekly basis, for approximately five to fifty sessions (Ellis, 2011), with homework assignments and practice often being assigned between sessions. REBT is also compatible in design for brief therapy (Ellis, 2011). Individuals who indicate a very specific problem and are generally functioning well within their lives, often can be taught and guided in the use of the ABCDE model between one and ten sessions. However, even for those individuals who demonstrate long-standing and debilitating difficulties can also be assisted through REBT brief therapy. By listening to taped recordings of sessions with their therapist and following an REBT Self-Help Form between sessions, the therapeutic process involving sessions with a counsellor may be decreased (Ellis, 2011). Group therapy provides supervised opportunities for clients to assist others and gain more practice on the procedures taught in REBT. REBT is also compatible with marriage and family therapy, whether seen in as a whole family, in subsystems, or individually, as a means of addressing irrational beliefs and its influence within relationships (Ellis, 2011).

### **Techniques and strategies**

As REBT deems that cognitive processes, emotions, and behaviours are intertwined though separate entities of one another (Rosner, 2011), REBT therapists employ a variety of techniques and methods in intervention to address these three areas of human functioning. REBT counsellors usually incorporate direct, forceful, and energetic methodologies in the therapeutic process as a means of gaining insight into their irrational beliefs. Dryden (2005; 2011) deemed that the most effective way to instil permanent emotional and behavioural changes is to change the way one views or thinks about things.

### ***Cognitive Techniques***

Though there are a variety of cognitive techniques available for an REBT to employ, Corey (2009) discussed four possible cognitive techniques. One technique is the (D) in the ABCDE model, which is the active disputation of irrational beliefs and guiding the client in challenging this belief on their own. This is done by the client challenging the assumed 'facts' of their irrational belief repetitively until it has been disproven time and again of its inaccuracy of being the truth, and no longer exists as an obstacle in the client's ability to address the disturbances affecting their lives. Another technique involves reframing one's own language regarding the causation of the irrational belief. Reframing provides an individual with the precise rational language to change the irrational belief from a demand to a preference. REBT counsellors also emphasize psycho-educational methods, by educating clients about the nature of their disturbances and how intervention is likely to proceed (Dryden, 2011). Psycho-educational methods empower the client to learn how their irrational beliefs are affecting their lives and how particular techniques are employed to change these beliefs into alternative rational ones. A final



cognitive technique Corey (2009) and Ellis (2011) discuss is cognitive homework. Cognitive homework assignments are one means of tracking how irrational beliefs are influencing their daily lives and functioning. This technique encourages clients to work on and practice the techniques they are learning in sessions to real life experiences outside of their guided sessions with their counsellor. Personally, I have used each of these techniques in teaching situations with elementary school children, but feel I will most likely employ the technique of psycho-educational methods after I become a school psychologist. Empowering and providing information regarding possible learning and emotional struggles and probable interventions to employ to address these difficulties will be a huge aspect of my role as a school psychologist. Providing alternative rational beliefs regarding any struggles a child may display will be vitally important in the future functioning of that child and their family in regards to their struggles.

### ***Emotive techniques***

Corey (2009) discussed a variety of emotive techniques an REBT therapist may employ to further dispute irrational beliefs and change thoughts, emotions, and behaviours. One emotive technique is rational emotive imagery which encourages the client to imagine themselves in a certain situation which would provoke UNE. This technique allows the client to experience UNE and then guides them in changing their feelings about the disturbance to a HNE. Eventually, the desired outcome is that the client will automatically experience HNE in difficult situation, rather than allowing their irrational beliefs to cause UNE. Shame-attacking exercises guide the client in USA and that often what they deem as being shameful is simply the way they define reality for themselves. Shame-attacking exercises encourage the client to place themselves in safe, law abiding situations which may cause them shame, such as wearing colourful unmatched clothing or singing loudly in the park, to provoke possible shameful

emotions from themselves. By experiencing these situations, clients are assumed to realize that even though they may be judged by others, there is no rational reason why they should feel shame. REBT therapists often view emotional disturbances as stemming from clients taking themselves too seriously; therefore, employing humour can be beneficial in acknowledging the absurdity of some of a client's irrational thoughts. Personally, I employ humour when addressing irrational beliefs on a regular basis. Having the ability to face the struggles of difficulties in a 'lighter tone' sometimes removes the shames, biases, or judgments one may feel regarding their irrational thoughts or struggling behaviours. This does not minimize the seriousness of irrational beliefs, just how much power we allow it to have on our belief that it can be changed.

### ***Behavioural techniques***

Corey (2009) explains that behavioural techniques are often used as a means of developing more effective ways of thinking and behaving in situations which may provoke an irrational belief. Such techniques may involve relaxation methods, guided imagery, meditation, journaling, modeling, and systematic desensitization. Behavioural homework assignments are provided in a systematic manner, recorded, and analyzed on its effectiveness. Similar to cognitive homework, behavioural homework provides the client with an opportunity to practice these techniques in real life situations outside of the sessions with a counsellor. Personally, I currently practice behavioural and cognitive techniques with my students in a safe and nonjudgmental environment over and over again and encourage their families to practice such techniques in 'mock' situations at home before providing them with an opportunity to practice such techniques in real situations. I encourage families to assist in these 'homework activities' so that they as well have an opportunity to practice with their child the techniques they are

attempting to employ as a means of changing their thought processes and behaviours. I view it as changing irrational beliefs regarding the child's situation for the whole family, not just the child, which I would suppose is an integrative approach of family therapy and REBT.

### **Success**

My definition of success involves an individual being able to gain insight into their irrational beliefs, how these beliefs influence their emotions and behaviours, and being able to develop alternative rational beliefs to replace the irrational beliefs. Finally, and perhaps the true sign of success would be when those new alternative rational beliefs become so instilled and innate that they are the guiding factor in an individual's ability to address and cope with situations which may be disruptive to their lives. There are many concepts within REBT that resonate with me, and one of them is the unconditional acceptance of self, others, and life. Of course we as individuals, others we encounter, or events in life are not always going to be perfect. We are fallible and make huge mistakes, are mistreated by others, disagree with what others believe or do, and of course, experience unavoidable devastating and traumatic events. However, these fallible aspects of ourselves and others should be accepted, its part of the experience of being human in our world. However, our belief systems and perceptions of such events can deem how much influence they will have on our daily functioning and well being.

### **Contextual Factors**

The basic tenet of REBT is that one's belief systems influence and affect their emotional aspects, whether they are of a UNE or HNE in nature (Ellis, 2011). This would appear to be a universal concept, and not dependent by different social economic status (SES), culture, and religion. A study conducted by Banks and Zionts (2009) indicated that SES did not seem to

influence children's ability to process and succeed through the ABCDE model of replacing irrational beliefs with rational beliefs as a means of changing their behaviours and emotional upsets within a school system. Ellis (2011) explains how REBT has always been conducive with a multicultural position in that REBT promotes both flexibility and open-mindedness to varying family, religious, and cultural customs. REBT assists individuals in disputing grandiose irrational beliefs which interfere with their daily functioning, not their cultural goals, values, or ideals (Ellis, 2011).

Personally, I would have to agree with the statement that REBT could work with a variety of individual, no matter of their SES, cultural, or religious background. I have promoted and assisted children from varying religions, cultures, and SES in changing their USA, UOA, and ULA, and none of these contextual factors seemed to obstruct in the changing of irrational beliefs to rational beliefs in these areas. What I have found to be difficult to work around was when one's family or environment is staunchly against changing a belief system that is having a negative influence on their daily emotional and behavioural functioning. It is very difficult for anyone, let alone a child, to overcome environmental support of irrational beliefs; however, even in such a situation, it is not impossible to do so.

### **Reflection**

#### **Weaknesses of My Personal Counselling Position**

One weakness of REBT is that individuals who are psychologically fragile, such as borderline personality disorder, may not be able to tolerate the assertive, forceful, and energetic style of REBT counsellors employ (Rosner, 2011). Individuals who are deemed psychotic, dangerously violent, or suffering from organic brain diseases (such as Alzheimer's Disease) may

not have the mental capacity to carry out the required concentration, attention, and active cognitive participation depicted necessary for REBT (Rosner, 2011). The cognitive functioning required to gain insight into one's irrational beliefs may not be possible for some individuals with intellectual and mental disabilities (Mukangi, 2010). Therefore, since REBT contends it necessary for individuals to challenge their irrational beliefs and replace them with rational beliefs, cognitive functioning is a necessary aspect for REBT, and therefore, not an available option for every individual.

### **Why I am Drawn to this Theory**

Throughout this course I have had the opportunity to become aware of a variety of counselling theories and approaches. No matter which theory or approach I was investigating or learning about, I always found myself comparing it to REBT. REBT's ABCDE model has especially resonated with me. I have always been a big believer in the philosophy, 'If I believe it can be or is, then it will be so'. We have all experienced moments of self doubt, unworthiness, and a belief that we are incapable of doing something. However, it is possible to change these beliefs so much so that we can live a healthier and functional life.

I have had the opportunity to coach figure skating in big and small centers, and I have always been dumbfounded when I prepare a skater for the beginning lessons of a double or triple jump, and they stare at me like I'm joking or crazy. These girls had an irrational belief that it was impossible simply because of the level of jump and that no one from their club had ever achieved one before. The shock on their faces when I skate around and attempt one, whether I land or fall, is often the beginning stages of breaking that belief. Like anything in life, attempting a new jump is a process; there will be both big and small errors and fallbacks, but if

the skater is willing to persevere, they almost always achieve the element in the end. I have always viewed life this way as well.

The concept of USA, UOA, and ULA also resonates with me. We are all humans, and of course will make mistakes. This doesn't mean we are unworthy or hopeless, just sometimes in the process of developing where we need to be in life. Unforeseen or unavoidable events occur in life, there is often very little we can do to stop them; this doesn't mean life is doomed or not worth enjoying and living. The concept of unconditional acceptance will provide me with a framework to build from as I interact with families and children in the capacity as a school psychologist. There may be results from psycho-educational assessments, background information, and other data which point to a child having some form of disability, which can be both a relief and quite upsetting for many families. Relief, in the sense that they knew something was not quite right with how their child was functioning, and upsetting because what does such a diagnosis mean. By interacting with families from the point of USA, UOA, ULA, and rational beliefs influence on emotions and behaviours, families may be more likely to accept a possible upsetting situation in a more unbiased, open-minded, and positive manner.

### **Conclusion**

Going through the process of this assignment has allowed me the opportunity to review and confirm my personal counselling position as REBT. The depiction of how it is one's belief systems, whether they be rational or irrational, influences the way an individual reacts and feels about an activating event completely resonates with my own personal philosophy of human functionality. Many view school psychologists as the 'tester', believing we simply work with an individual for a few days, ask them some questions, test their cognitive and academic abilities,

and even measure some of their basic social emotional functioning. However, I simply do not view the school psychologist's role as only involving assessment and 'diagnosing'. It is also the school psychologist's job to explain what such assessment results may indicate for that individual in their lives. The REBT approach seems compatible for me in performing this role. Possible upsetting results may be effectively accepted and understood when provided in a manner which is unconditionally accepting of the individual, family, and of how things appear to be in life for that individual. Having a disability is not the end of the world, though many individuals first respond in that way upon hearing their child presented as having one. By presenting the results through rational belief statements and providing information on how they can obtain success through this information, can only contribute to the healthy functioning of that individual.

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