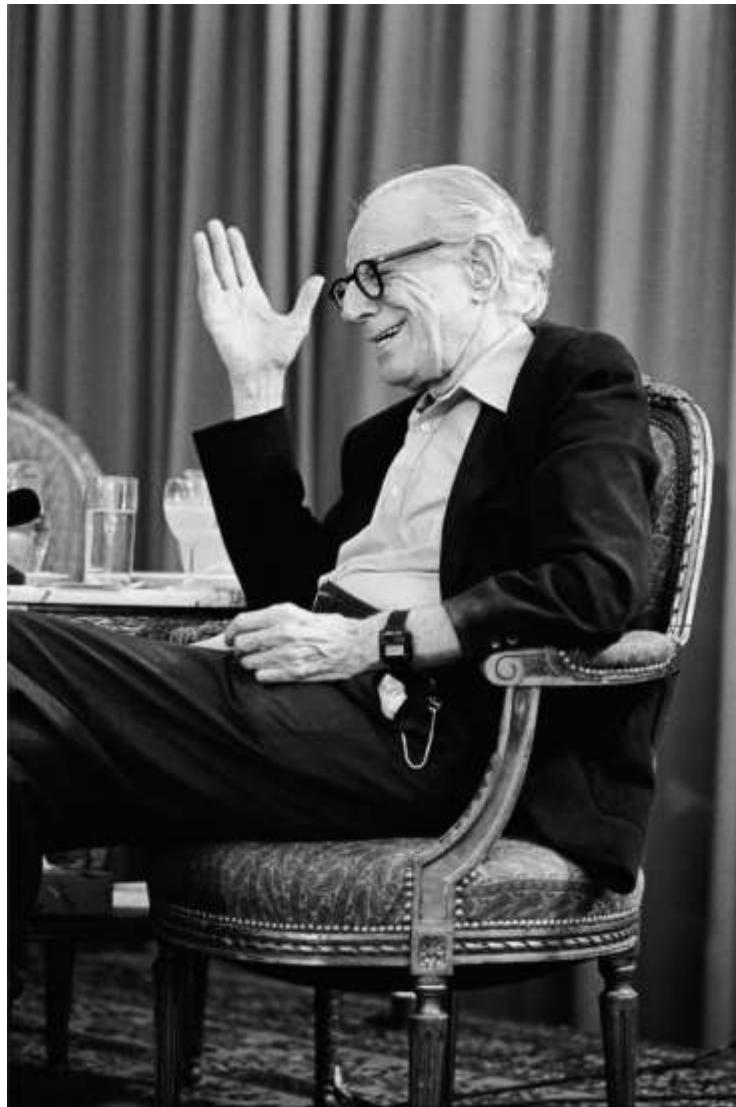


Distinctive Features of REBT

*Ray DiGiuseppe, Ph.D.
St. John's University
and
The Albert Ellis Institute*

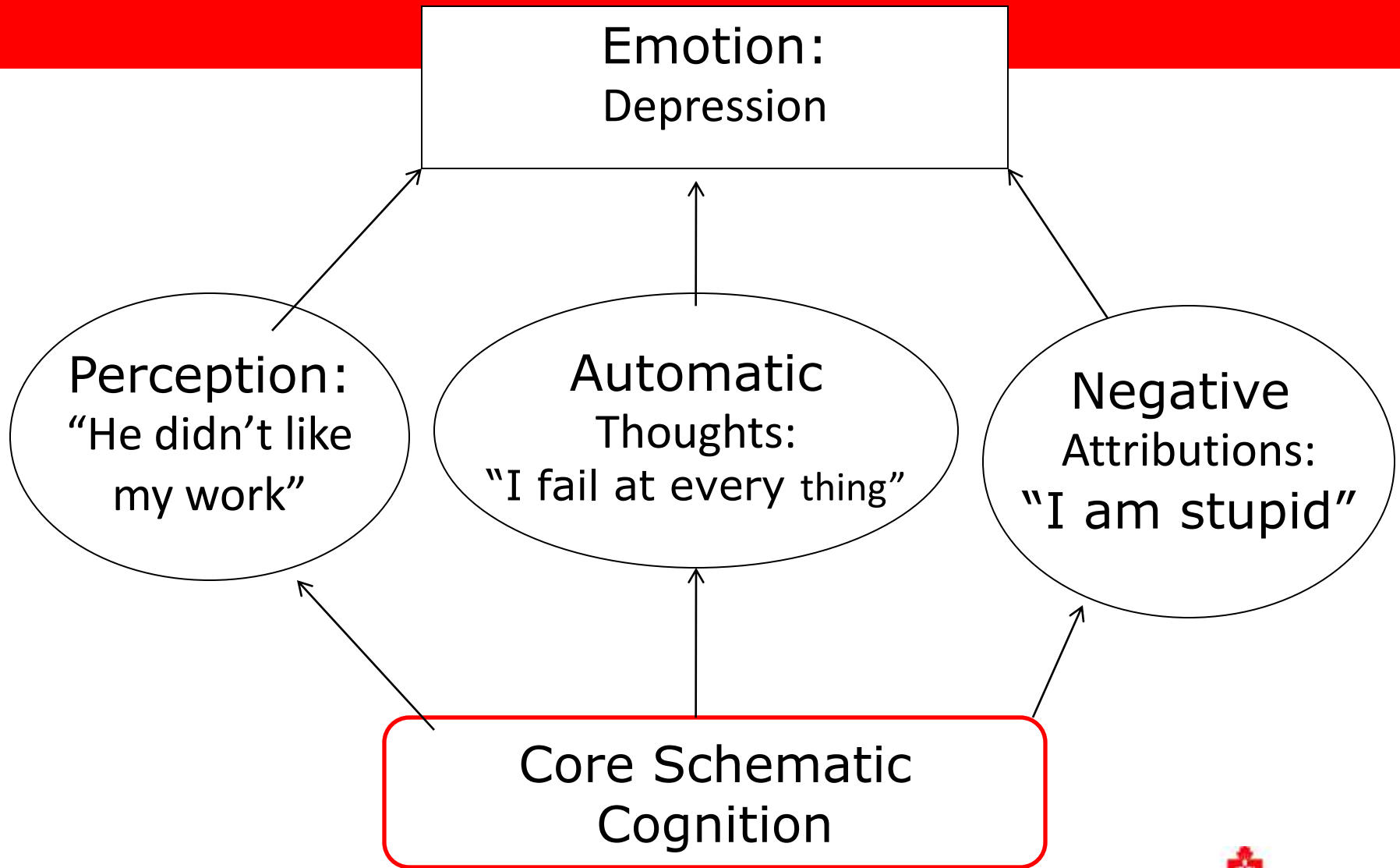
Dr. DiGiuseppe



Dr. DiGiuseppe



- **Post-Modern Relativism**
- **REBT's Position on Human Nature and Other Theoretical Emphases**
- **REBT's Distinctive ABC Model**



ESSENCE OF ALL EMOTIONAL DISTURBANCE

- All serious emotional disturbance is caused (or strongly influenced) by:
 - Cognitions
- And these Cognitions take the form of:
- A **Demand** (e.g. “I must be successful”
 - And one of the **Derivatives** (“It is Horrible”, or “I Can’t Stand It”, or “I’m a Rotten Person”).

Rational vs. Irrational Beliefs

IRRATIONAL

Demandingness

Awfulizing

Frust. Intolerance

Self-Downing

Others-Downing

RATIONAL

Preference

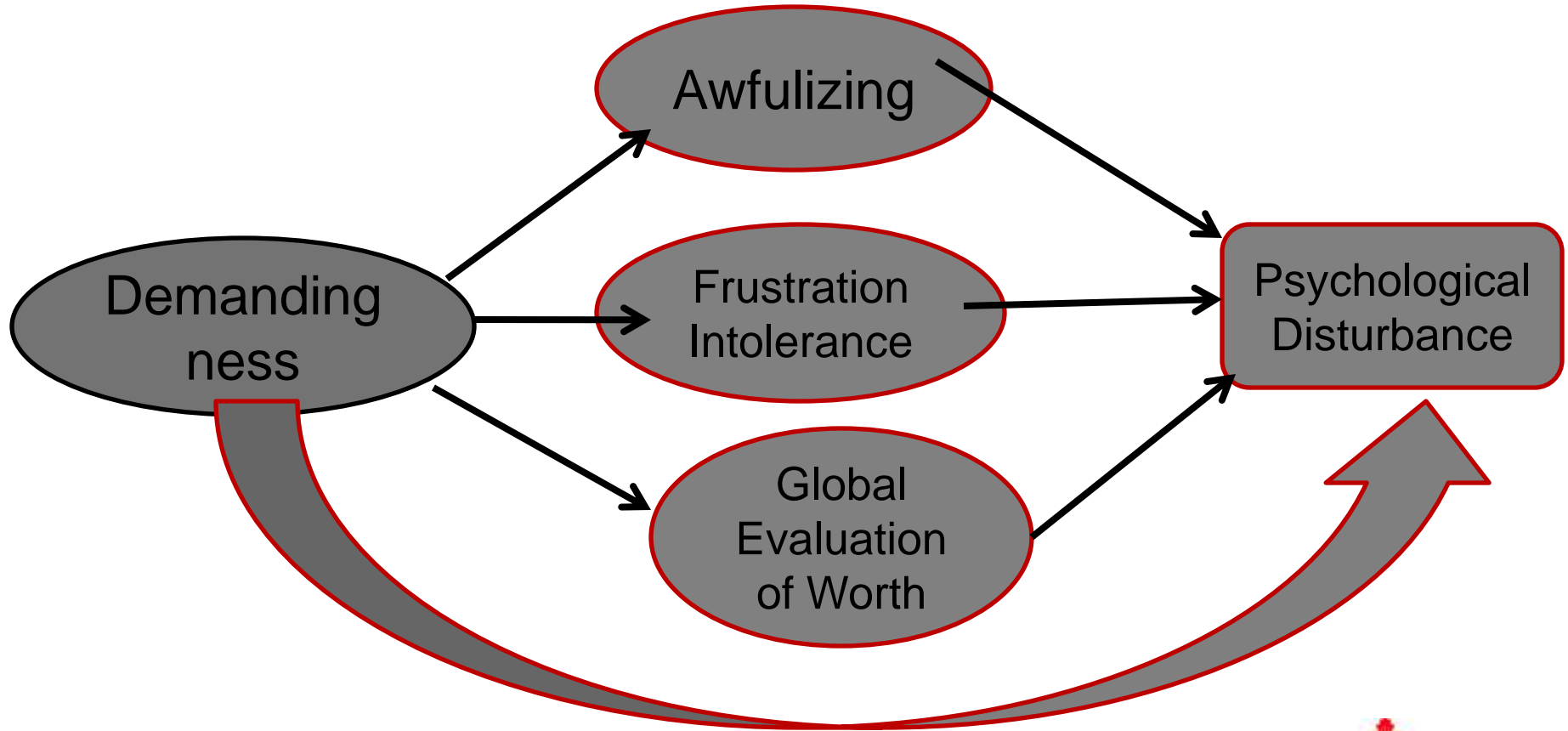
Unpleasant

Tolerance

Self-Acceptance

Accepting Others

Ellis' Model: Demandingness as core



THE ESSENCE OF EMOTIONAL DISTURBANCE

- **The Essence of Emotional Disturbance:**
DEMANDINGNESS
- Demandingness takes the forms:
 - “I must” , “You must”, “It must’
 - “I have to”, “You have to”, “It has to”.
 - “I got to”
 - “I need”
 - “I should”

DERIVATIVES OF THE DEMANDS

- Catastrophising: “It’s Horrible, Terrible & Awful”.
- Low Frustration Tolerance: “I Can’t Stand It”.
- Self/Other Rating: “I’m no good, rotten, bad, worthless”.

ESSENCE OF ALL EMOTIONAL DISTURBANCE

The Self

“I MUST”

(And if I do not)

- 1. IT IS HORRIBLE ,
TERRIBLE
AND AWFUL!**
- 2. I CAN'T STAND IT!**
- 3. I AM NO GOOD!**

Others

“YOU MUST”

(And if you do not)

- 1. IT IS HORRIBLE ,
TERRIBLE
AND AWFUL!**
- 2. I CAN'T STAND IT!**
- 3. YOU ARE NO GOOD!**

The World

“IT MUST”

(And if it does not)

- 1. IT IS HORRIBLE ,
TERRIBLE
AND AWFUL!**
- 2. I CAN'T STAND IT!**
- 3. IT IS NO GOOD!**

Demand & Preferences

- Demand:
- “I Must”
- Catastrophizing:
- “It’s Horrible”
- Low Frustration Tolerance “I Can’t Stand It”
- Self Rating:
- “I am a Rotten Person”
- Preference: “ I’d really like to but no reason I Must”
- “It’s bad, but not HTA”
- “I don’t like it, but I can stand it”
- “I’m a disadvantaged person. But not RP”

Theory (ctd)

- **Focus on Meta-Emotional Disturbance**
- **The Biological Basis of Human Irrationality**
- **Choice-Based Constructivism and Going Against the Grain**
- **Position on Good Mental Health**
- **Model of Emotions**

REBT Theory of Emotions

Difference Between Functional Versus Dysfunctional Emotions.

The difference is qualitative not just quantitative.

Anxiety is qualitatively different from concern not just quantitatively different.

REBT Theory of Emotions

Four Aspects of Every Emotion

Phenomenological - How it Feels.

Social Expression - Communicates Our Goals and Upset to Others.

Physiological Arousal - Stress Response.

Behavioral Predisposition - emotions are important signals that we must act on a problems. They lead to behavior coping strategies.

REBT Theory of Emotions

Of these four elements only physiological response is a quantitative variable,
The others are qualitative.

Models of Emotional Arousal

- Wolpe's SUDS/Traditional Model

Functional 0-----100 Dysfunctional

- REBT Model

Functional 0-----100

Dysfunctional 0-----100

- Dryden's revised REBT Model

- Functional 0-----50/75

- Dysfunctional 0-----100

Distinctive Practical Features

Skills In REBT

REBT posits that it is best to go for the emotional solution first because:

Therapy is more elegant when there is no practical solution.

Problem solving to accomplish the practical solution is done better when the client is less upset - Yerkes Dodson Law.

Clients will learn better practical solutions if they are less upset.

Emotional Goals

REBT does not state that one only goes for the emotional solution and never learn to make life better. Rather the practical solution part of therapy is done after the emotional solution.

Motivational Syllogism

Pre-requisites to Disputing Irrational Beliefs

The Present Emotion Is Dysfunctional - Socratic questions help the client see that the present emotion is dysfunctional for them.

Alternative Acceptable Emotional Goal - Teach the client an alternative emotional scripts that is more adaptive.

Beliefs Lead to Emotions - Teach the B ---> C Connection.

Therefore, Change Beliefs to Change Dysfunctional Emotion.

Motivational Syllogism

- 1) The present script is dysfunctional.***
- 2) An alternative script is better.***
- 3) Therapeutic tasks can help me change from the dysfunctional script to the new script.***
- 4) Therefore, engaging in the therapeutic tasks is best.***

Repeat the steps of the motivational syllogism each time the client presents a new anger episode or when you change to a new therapeutic task.

Core Irrational Beliefs

Irrational beliefs have 2 components

- 1) The irrational thinking process
- 2) And the content of the belief

Core Irrational Beliefs

Irrational processes:

- 1) Demandingness
- 2) Global evaluations of human worth
- 3) Awfulizing/ catastrophizing
- 4) Frustration intolerance

WHAT IS THE PROCESS OF REBT?

- The Therapist Tasks are to:
 - 1. Identify the persons maladaptive cognitions (the Demands and the Derivatives).
 - 2. Actively and persuasively challenge the clients maladaptive cognitions.
 - 3. Give the client practice in actively challenging their maladaptive cognitions.
 - 4. Give the client homework which helps them identify, evaluate and/or challenge their maladaptive cognitions.

Core Irrational Beliefs

Belief content:

Approval: acceptance or rejection

Achievement: success or failure

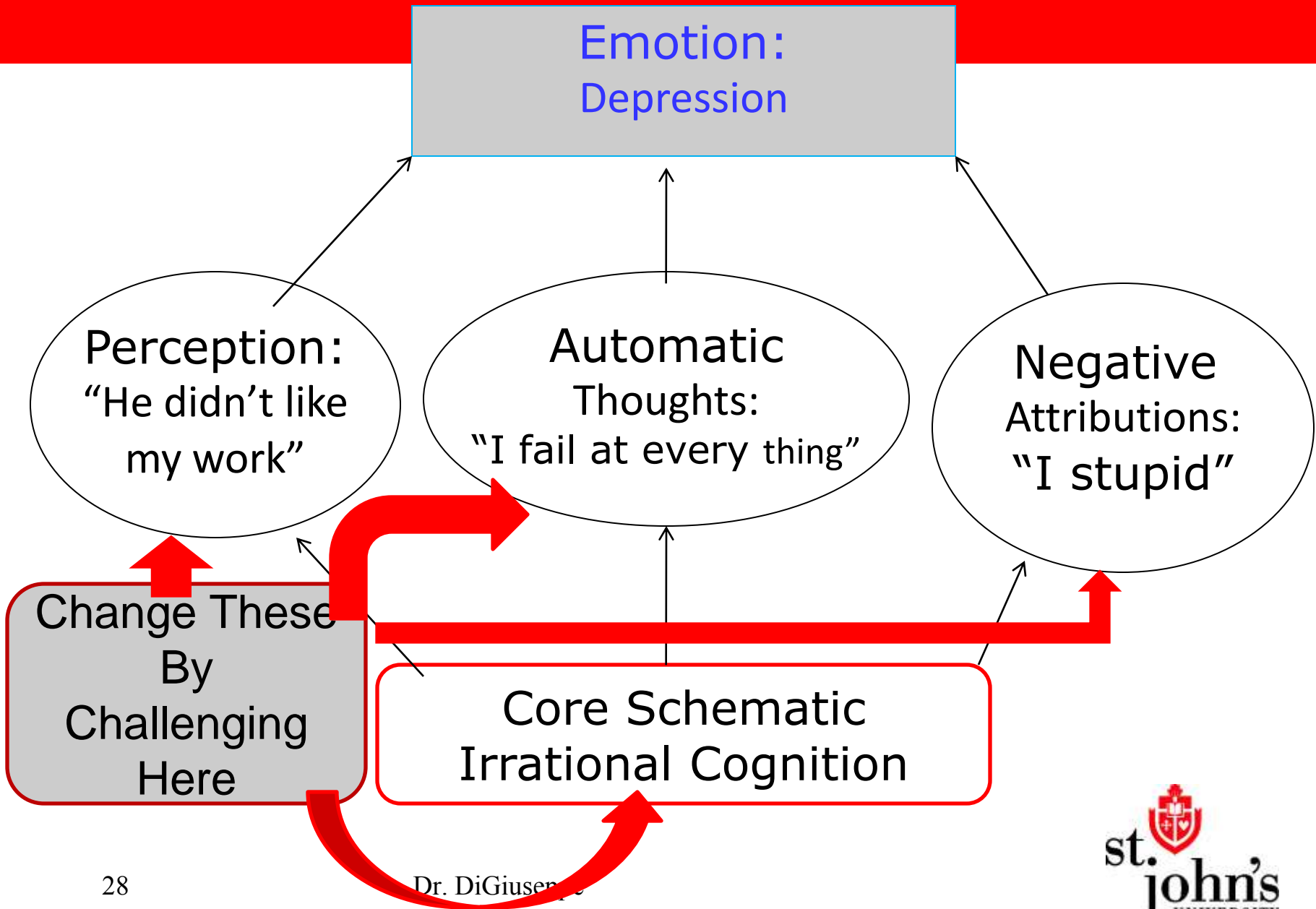
Comfort

Power

Idiosyncratic Issues of Clients

Core Irrational Beliefs

- REBT challenges the core irrational beliefs first and then the automatic thoughts.
- The theory posits that negative automatic thoughts are generated by irrational beliefs.



Challenging Schemas

Demands or schemas are cognitive expectancies about reality.

Expectancy - reality - discrepancy leads to emotional arousal.

Assimilate - keep the schema intact.

Accommodate - change the schema.

Emotional disturbance results from Assimilation

Emotional flexibility results from Accommodation.

Challenging Schemas

Not all schema accommodations lead to anger.

The most problematic is the schema concerning the existence of things we want.

We confuse what we want with the reality of what is.

Thought Experiment

1. Imagine someone who you love and have known for a long time, a parent, mate, a sibling child, friend.
2. Is there something that they do regularly that really angers you?
3. Imagine that person engaging in that act.

Thought Experiment

Have you ever had these thoughts while angry with this person?

“I cannot believe that he or she did it again.”

“ How could he or she do it again?”

Thought Experiment

These cognitive responses show shock.

Count how frequently the person has done the act.

Multiply by how much time you know them.

They have done the act you are angry at hundreds of times, yet you cannot believe they have done it again!

Thought Experiment

My spouse leaves the milk out on the counter every morning before work.

How often? About 5 times per week.

How long? We have been married for 13 years.

She has done it $5 \times 52 \times 13 = 3,380$ times.

So, why are you still surprised?

Challenging Core Schema

Demands are schemas about the reality of preferences or desires.

Thus, we are two cognitions here.

The desire that something occurs.

#he expectancy that it will.

"How ridiculous and how strange to be surprised at anything which happens in life!"

Marcus Aurelius Antoninus Augustus (often referred to as "the wise"; Roman Emperor from 161 to 180.

Challenging Core Schema

If you challenge this belief, the client often feels invalidated.

Clients fail to separate the desire (preference) and the expectancy or demand.

As a result, a challenge to the expectancy can be misinterpreted by the client as a challenge to their preference.

Challenging Core Schema

1. Teach the client the distinction between the preference/desire and the schema/expectancy that something will or must occur.
2. Posit or reinforce the preference/demand.
3. Third, challenge the schema/expectancy/demand that the preference must occur.

Challenging Core Schema

4. Develop a rational replacement idea.

Just because I want X to happen does not mean that it must.

This realization is often followed by problem solving to attain X or cope with no X.

Global Evaluation of Human Worth

- All humans have equal worth
- Any description of worth is culturally limited and Time sensitive.
- This has been said by:
 - Ellis
 - Emmanuel Kant
 - Jesus Christ

Global Evaluation of Human Worth

- Low Self worth leads to depression, shame/guilt.
- High self worth could lead to anger. Mental health professionals only focus on low self evaluations as problematic.
- Dichotomous high or low self Worth: the Madonna-Whore or Lucifer Legacy.

Catastrophizing

- What does this mean?
- What is terrible or catastrophic?
- Ellis says more than 100% bad?
- This is the most poorly defined irrational belief.
- L. Roher says such beliefs are arbitrary evaluation.

Catastrophizing

- Challenging this belief can lead to alliance rupture because the client concludes the therapist does not understand them.
- Use this when the stimuli evaluation is an extreme evaluation, not for real trauma.

Frustration Intolerance

- A belief in one's intolerance to survive or stand discomfort.
- Perhaps Ellis' most creative contribution.
 - "I can't stand it."
 - "It's too bad."
 - "I have had enough of your sh#@."

Frustration Intolerance

- Ellis uses the term Low Frustration Tolerance or LFT.
- This can be invalidating to those who have experienced greater pain than most other.
- They may have high frustration tolerance but not sufficient to achieve their goal

Frustration Intolerance

- People believe that they are born with a quota of hassle or grief. When they have reached their quota they should not have to have any more.
- But the world does not care.

Frustration Intolerance

- This is a difficult issue with people who have survived trauma.
- They may have suffered more than most people.
- Do they define themselves as depleted and weak, or as survivors and strong?

Assessment

REBT is more active & directive in the assessment phase than most therapies.

Use hypothesis driven interviewing with Popper's philosophy of science.

Most behavioral science and models of psychotherapy use logical positivism and induction.

Popper: Induction is flawed a human cannot help but think deductively.

Assessment

- Consider diagnosis an ongoing activity.
- Risk making hypotheses and attempt to disconfirm them.
- Only diagnosis for treatment utility.
- A diagnosis without treatment implications is not worth making. – Assessment should have treatment utility.

Assessment

Use the clients' responses to interventions as information in the diagnosis.

What information do we routinely collect at the AEI?

Biographical Intake

MCMII3

PDSQ

OQ45

Measures of Irrational beliefs.

Assessment

- Assess the "A" or the "C", what ever the client gives you first.
- When you have an "A" or "C," then go for the other one.
- Once you have the "A" and the "C", go for the "B".
- Many therapist do not. They continue to look for more As or Cs.

Assessment The Schema

- **Inductive Awareness**- the client becomes aware of the core irrational belief.
- **Inductive Interpretation**- the therapist inductively discovers the core schema and then offers it to the client.
- These work but we view them as less efficient.
- Many therapist prefer them because they involve self discovery. This is a value adopted by most psychotherapists.

Assessment The Schema

- Inference Chaining – Assess automatic thought and hypothesize it is true. This involves more self-discovery.
 - Sentence Completion
 - Conjunctive Phrasing

Assessment of the Schema

- Deductive Assessment Using Popper's model the therapist creates a hypothesis based on:
 1. Knowledge of the person.
 2. Knowledge of psychology and psychopathology.
 3. Clinical experience.

Assessment of the Schema

- What is the differences between an interpretation and a hypothesis?
- Rules for offering hypotheses:
 1. Use suppositional language.
 2. Give up narcissistic epistemology.
 3. Ask the client for feedback.

Techniques of REBT

Elegant or philosophical solutions vs. Inelegant solutions.

An example of an emotional episode.

Changing perceptions is the inelegant solution elegant??

An intervention at the level of perceptions is called reframing -e.g., The glass is not half empty it is half full.

Techniques of REBT

These types of interventions are inelegant because the person may be wrong the glass may be on the empty side.

Techniques of REBT

Challenging the inferences or automatic thoughts is not elegant because the automatic thoughts may not be distortions of reality.

The reality might be really bad.

These intervention only work if the person is distorting reality.

They provide no coping skills if reality is bad.

Techniques of REBT

Elegant interventions can be used in the widest range of activating events even if the worst thing happens. REBT suggests that therapists target core irrational beliefs or schema rather than automatic thoughts or erroneous inferences. Identifying core irrational beliefs as soon as possible.

Disputing of Irrational Beliefs

1. Logical

2. Empirical

3. Heuristic or Functional –

Therapists believe this is most effective.\

4. Teach New Rational Beliefs.

Research suggests this is most important.

5. Challenge the New Rational Belief

Disputing of Irrational Beliefs

- 6. Compare and contrast the IB and RB. Discuss the logical, empirical, and functional comparisons of both beliefs.**
- 7. Create Cognitive Dissonance With a strongly Held Value: Compare the IB with a strongly held belief in another arena of the client's life, and show how the IB is inconsistent with the value.**



Disputing of Irrational Beliefs

Style of Argument

1. **Didactic** – direct teaching of the error and the replacement.
2. **Socratic** – teaching through asking questions.

May vary over the course of therapy. Challenging a belief related to a target may start out didactic and end up Socratic. .

Disputing of Irrational Beliefs

Level of Abstraction of the Targeted Irrational Belief

Concrete vs. Abstract Disputing.

1. The concrete IB is the thoughts related to a specific event. "My kids must respect me when I tell them what to do."
2. A moderate/intermediate level of abstraction provides for some generalization. "My kids must respect me in all things."
3. An abstract IB covers many things. "People must respect me."

Disputing of Irrational Beliefs

Ellis noted that he based REBT on General Semantics Theory of Language. A Principle of General Semantics is that communication teaches best when the speaker goes up and down a ladder of abstraction.

REBT recommends that you:

1. First challenge an IB related to a concrete A.
2. Then challenge an intermediate IB.
3. Then a hypothesized concrete one.
4. Then go back up to a higher level abstract IB.
5. Then back down to a hypothesized concrete one, etc.

Component of A REBT Session

1. Orient the client to the structure of the session
2. Set the agenda for the session
3. Review homework from last session
4. Work the agenda items.
5. Give periodic summaries
6. Agree on homework

Successful Agenda Setting

- Work Collaboratively
- Prioritize the Agenda - Work on the most important items first. These may be those that could get clients to lose their job, get arrested, lose a loved one.
- Always review homework
- Be realistic about what can be done
- Keep treatment goals in mind.

Successful Homework Assignments

- Work collaboratively
- Be specific and concrete
- Tie the assignment to work in the session
- Anticipate obstacles
- What cognitions will support homework

Use Homework to Link Sessions

- Assessment of homework drives the next session.
- If the client has successfully done the homework reinforce them and check how they did it. Encourage they use this strategy again.

Use Homework to Link Sessions

- If the client has failed to complete the homework, ask why. What beliefs got in their way. Structure the therapy session around the issues that blocked completion of the assignment. Then try again.
- Look for FI.