

Introduction for Clients to REBT - CBT treatment Sessions.

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Introduction:

The following will help you understand better the psychological, the emotional and the behavioural changes that the therapy is aiming to bring about. You may find it difficult to understand it at the first reading, however, keep it with you, as you are likely to find it very useful once you have started your therapy. Essentially your therapy is based on Rational Emotive Behaviour Therapy (REBT) and the other Cognitive Behaviour Therapies (CBT).

What is REBT - CBT?

REBT was originated by Dr Albert Ellis of New York in 1955 and it is the original CBT. Other approaches followed, but there are limited differences between their theoretical approaches. The psychological approaches of REBT-CBT are based on scientific principles and research has shown them to be effective for a wide range of problems. You and I will work as a team to identify and understand problems in terms of the relationship between thoughts, beliefs, feelings and behaviour. The approach usually focuses on the present difficulties, and relies on us developing a shared view of your problems. This then leads to the identification personalized, time-limited therapy goals and strategies which are carefully monitored and evaluated.

REBT-CBT not only works with individuals, but is also found to be very effective with couples, families and group therapies. Moreover, the approaches can be used to help anyone irrespective of ability, culture, race, gender or sexual preference.

What will happen in your therapy?

In the sessions, you and I work together to:

1. develop a shared understanding of your problems.
2. identify how these problems affect your thoughts, beliefs, behaviours, feelings and daily functioning.

Based on the understanding of your problems we will then work together as a team to identify goals and to agree on a shared treatment plan. The focus of therapy is to enable you to generate solutions to your problems that are more helpful than the way you have been dealing with them so far. This also involves using your time between therapy sessions practising your therapeutic gains (i.e. homework tasks).

Therapy is organised over an agreed number of sessions (usually between 8 to 16). The number of sessions needed will differ, depending on the nature and severity of your problems. Typically, sessions are weekly and last an hour. After the completion of treatment I usually advise a limited number of follow-up sessions or a booster session, to maintain the therapeutic gains and achieve more progress.

What kind of methods will be used in the therapy?

Essentially you will learn many important cognitive and behavioural skills during your therapy which will be used by you to overcome your psychological, emotional and behavioural problems. These will be very useful in preventing any more disturbances in the future and will help to capitalise on your therapeutic gains.

The ABCDE model explained:

The most important instrument for self-care that I hope you will learn during your therapy is the ABCDE model.

The model is a simplified version of human cognition (i.e. thoughts and beliefs) aiming to help people to assess their target problems carefully, investigate their thoughts and beliefs about their target problems and disputes any found irrational thoughts and

beliefs that are found, as they are assumed to be the main causes of emotional and behavioural disfunctions in human beings.

After analysing the problem and disputing the irrational cognition, the model will lead you to create an alternate rational cognition that can help you to develop healthy emotions and behaviour, which are most likely to help you in activating your goals in life.

What do these letters ABCDE stand for?

***A = activating events**

Usually you, as any other human, will become aware that something is going wrong in your life when you are not achieving your goals.

Basically speaking, most human beings, if not all, will have two major goals to achieve in their lifetime. The first is to survive as long as possible and the second is to be happy as much as possible, as being alive is hardly enough for most people. Yet, there are many events in life that can and will block one or both of those basic goals at different stages in our life. Unfortunately, some of these events will be so severe that they are likely to activate our irrational cognition, which in turn is likely to lead us into emotional and behavioural disturbances.

However, or what event will activate the irrationality and at what stage will differ greatly between one individual and another. For example, not all people will develop irrational cognition and depression if or when they have lost their job. Why? Because we all have different thresholds, which are mainly based on our biological make-up, life experiences, levels of education and so on. Therefore, knowing your A's will help you to know where your threshold lies.

***B = Beliefs**

Beliefs is about what you believe about the interpretation that you gave to the bad events that happened for you at A. For example, you may have lost your job and in order to make sense of this event you may interpret it as an act against you. Now you

are left with the choice between believing that your interpretation is true or untrue.

Basically, when it comes to beliefs, we need to know if our beliefs are rational (rBs) or irrational (iBs). Usually rBs are flexible, realistic and undemanding, whereas iBs are rigid, unrealistic and demanding.

For example, if you are holding rBs about losing your job, you may say something like this to yourself:

"It is really unfair that I had to lose my job, but the world is an unfair place to be and I have had the misfortune to experience that kind of mishap. It's very bad to lose my job at this stage of my life, yet I can be grateful that I did not experience something far worse than that. It's hard to go out there and look for a new job, but I am overall a capable person and I can find a way of bringing back an income and comfort into my life, even if it is not an easy task".

On the other hand iBs would be something like this:

"It is really unfair that I lost my job, but it absolutely should not have happened to me. It is a real disaster. Who will ever want to employ a useless person like me? How will I ever be able to bring some income and comfort into my life without a job? I am doomed, my life means nothing without my job".

The rBs and iBs coexist side by side as you can see on the graph below. However, as stated earlier, much depends on our threshold which will determine which set of our beliefs will be the one to overrule the other.

***C = Consequence**

As stated earlier, the way that we will feel and act after experiencing a bad event in our life will be heavily dependant on our personal A+B (i.e. our interpretation of the events and our beliefs about our interpretations).

If we have been rational overall after experiencing a bad event it is likely that we will feel bad, but not disturbed, and that means that we will act to promote happiness in ourselves after recovering from the initial shock. However, if we have been irrational overall, that means that we will become too disturbed to act in a self-helping way.

In REBT-CBT we see two kind of negative emotions: one we call healthy negative emotions and the other we call unhealthy negative emotions.

Many studies now show that the more unhealthy negative emotions the person has, the more irrational the person is. It is not clear yet if the emotions are the cause of the irrationality or vice versa. However, what is clear is that when people suffer from unhealthy negative emotions, they no longer suffer from them or reduce them, once they have replaced their irrational cognition with rational cognition.

The following emotions are regarded by REBT-CBT as healthy negative emotions: sadness, concern, healthy anger, regret, disappointment, concern about relationship and healthy envy.

Whereas the following emotions are regarded as unhealthy negative emotions: Depression, anxiety, unhealthy anger, shame, hurt, jealousy, unhealthy envy.

*D = Disputing irrational beliefs.

At this stage you will know what your Bs are and now you need to test them to see if they are rBs or iBs.

There are three systems by which you can do this:

1. "Empirical" disputing, where you ask yourself questions such as;
 - Where is the evidence that shows that my beliefs are true?
 - Where is the universal law that shows that my beliefs are true?

2. "Logical" disputing, where you ask yourself questions such as:

- Is it sensible to demand all that I will for?
- Is it logical to turn my desires into demands?

3. "Pragmatic" disputing, where you ask yourself questions such as;

- Have my beliefs helped me so far?
- Have my beliefs been able to help me find solutions to my problems?

*E = Effect

At this stage you will be able to create your own rBs which will replace your iBs. You will learn to use cognitive and behavioural modifications techniques that will reinforce your rBs, which in turn will effect your moods and actions for the better over time. That is to say, are you not only going to feel better but will become better.

Now don't think that this kind of therapy is an easy fix, it is not. In order to feel the therapy's full rewards you will have to work on yourself, (using the skills you have learned with me) well after the therapy has ended. After all, you will need to change the cognition of a lifetime to the new cognition and that is not easy. However, just because it is not an easy option it doesn't mean it's impossible. In other words, don't only think about the short term gains that you may have from the therapy, but also think about the long term gains that you can give yourself by adopting your new rBs.

"People are not disturbed by things, but by the view they take of them"

(Epictetus, 55 AC to 135 AC)