

EDPY 442
Introduction to Counselling

November 6, 2007

Behavioral, Cognitive, Systemic, Brief, and Crisis Theories of Counselling

Behavioral Counselling

- ◆ No single figure dominates behavioral approaches to psychotherapy the way Freud dominated psychoanalysis or Rogers represented person-centered therapy.
- ◆ Traditionally, learning theory was seen as the ideological foundation for behavior therapy although there was never agreement as to which learning theory (Pavlov's, Skinner's or others) was at the core.

Behavior Therapy: View of Human Nature

- ◆ Kazdin (1984) argues that the major characteristics of behavioral treatments are the following:
 - primacy of behavior- a concentration on overt behavior in particular
 - importance of learning –all behavior is learned both adaptive and maladaptive
 - directive and active nature of treatments
 - importance of assessments and evaluation

Behavior Therapy: View of Human Nature Cont'd

- ♦ Learning can be an effective means of changing maladaptive behavior
- ♦ Therapeutic goals are well-defined and rigorous assessment of "baseline target behaviors" and treatment process is imperative
- ♦ Maladaptive behavior itself is seen as the problem that needs to be changed, rather than looking for some elusive underlying cause
- ♦ Behaviorists stress the importance of obtaining empirical evidence and support for the techniques used

Behavior Therapy: Role of the Counsellor

- ♦ Typically behavior therapists are active
- ♦ The counsellor tends to act as the teacher, consultant, adviser, reinforcer, and facilitator
- ♦ The therapist is often involved in instructing or supervising support people in the client's life
- ♦ The client's role is to learn, unlearn, and relearn ways of behaving

Behavior Therapy: Goals for therapy

- ♦ The focus of therapeutic goals is to modify or eliminate the maladaptive behaviors that clients display, while helping them acquire healthy ways of behaving
- ♦ Unproductive actions must be replaced with productive ways of responding

General Behavioral Techniques

- ◆ Reinforcement
- ◆ Shaping
- ◆ Extinction
- ◆ Generalization
- ◆ Systemic desensitization
- ◆ Assertiveness training

Brainstorm????

*What are the some of the strengths
and limitations of behavior
therapy????*



Cognitive Therapy

- ◆ Cognitions are thoughts, beliefs, and internal images that people hold in their lives
- ◆ Big players in cognitive and cognitive behavioral therapy include: Aaron Beck, Albert Ellis, William Glasser, David Burns
- ◆ Successful clients of cognitive therapies tend to be:
 - average to above average intelligence
 - able to identify feelings and thoughts, and behaviors
 - not psychotic or cognitively delayed
 - willing and able to complete homework

Cognitive-Behavioral Therapies

- ♦ Two theories have a strong cognitive base- Rational Emotive Behavioral Therapies (REBT) founded by Albert Ellis and Reality Therapy created by William Glasser
- ♦ Note that both these therapies also emphasize behavior – therefore they are considered Cognitive Behavioral Therapy (CBT)

REBT

- ♦ Irrational beliefs are what get people into psychological difficulty
- ♦ By nature he believed that people are gullible, highly suggestible and are easily disturbed. He thought that people have within themselves the means to control their thoughts, feelings, and actions, but they must first realize what they are telling themselves
- ♦ Ellis saw his role as pointing out people's irrational beliefs and strongly "encourage" clients to utilize their rational processes to create a life that maximizes the pleasure and minimizes the pain of existence
- ♦ The therapist must listen carefully for illogical or faulty statements from the clients and challenge beliefs

REBT goals and techniques

- ♦ Primary goal is to focus on helping people realize that they can live more rational and productive lives
- ♦ Help clients stop "catastrophizing" and to help clients avoid having more of an emotional response to an event than is warranted
- ♦ Help clients change self-defeating habits of thought or behavior
- ♦ A main goal is to help people learn how "emotions are attached to thoughts" (this is a widely debated idea)

REBT Techniques

- ♦ Two main techniques is teaching and disputing
- ♦ Therapist teaches client how thoughts are attached to emotions and behaviors (very didactic)
- ♦ Therapist disputes thoughts and beliefs through *cognitive, imaginal, and behavioral deputations*

Questions to Consider...

When and how might a crisis arise in your own work?

What are some ways in which to handle these situations?

What is a crisis & crisis counselling?

- ♦ According to the text, a crisis “ is a perception of an event or situation as an intolerable difficulty that exceeds the person’s resources and coping mechanisms”
- ♦ Crisis counselling- is the employment of a variety of direct and action-oriented approaches to help individuals find resources within themselves and/or deal externally with crisis.

Main types of crises:

- 1) **Developmental**- circumstances that are considered normal (e.g., marriage, birth of a child)
- 2) **Situational**- uncommon and extraordinary events occur that an individual has no way of predicting or controlling (e.g., accident, physical diagnosis)
- 3) **Existential** – inner conflicts and anxieties that accompany important human issues of purpose, responsibility, independence etc
- 4) **Environmental** – natural or human caused disaster in which the person(s) find themselves, through no fault of their own in the aftermath of an event that has adverse affects (i.e., 911)

Crisis Counselling

Goals:

- revolve around getting client immediate help (psychological, financial, legal etc).

Role of the Counsellor:

- counsellors are often directive and active
- the role of the crisis counsellor is very different from other counsellor roles
- Crisis counsellors help the client recognize and correct “temporary affective, behavioral, and cognitive distortions”

Crisis Counselling Techniques

- ♦ Crisis counsellor needs to continuously assesses the client’s experience of crisis
- 1) Define the problem
 - 2) Ensure client safety
 - 3) Provide supportive listening
 - 4) Examine alternatives
 - 5) Make plans
 - 6) Obtain client commitment
