

## CHAPTER 10

**1.** Cognitive-Behavioral theory is consistent with the Bible in that humans have the capacity to observe, analyze, and make conscious decisions. In Solomon's writings of Ecclesiastes and Proverbs, he questions various issues of life and comes up with advice that people can use to improve the outcome of their decisions. The Bible demonstrates through characters like Moses, Jacob, The Prodigal son and Paul that humans have the ability to evaluate and change their behavior, particularly with the help of God. A Biblical perspective supports that it is important to think on things that are good and positive in order to maintain a sense of peace and joy (Phil. 4:8). But evil thoughts can also be meditated upon to cause harm (Micah 2:1). Romans 12:2 suggests that believers renew their minds to be transformed rather than 'conform' to the patterns of this world.

However cognitive-behavioral theory conflicts with the Bible teaching from Prov 14:12 that says "there is a way that seems right to a man but its end is the way to death", as well as, Prov 3:7 "Be not wise in your own eyes; fear the LORD, and turn away from evil". These two verses bring up the issue of man's inability to independently solve all his problems or come up with the truth and reality of his world independently from God. We can self reflect and help one another to a certain point (Prov 20:5). But only God can reveal to us our deepest being and errors, especially those that are hidden from our own knowledge (Job 6:24; Ps 19:12). Also, after Solomon's extensive search for answers and much experimentation, his determination was clear. He says, "The conclusion, when all has been heard, is: fear God and keep His commandments, because this applies to every person" (Eccl. 12:13). This from the man who "had it all"!

4. Rational Emotive Behavioral Therapy attributes emotional disturbance to irrational beliefs learned from parents or significant people during childhood. However, this perspective does not consider the establishment of these thoughts as a product of repetitive exposure. Rather, people automatically and continually repeat the learned behavior and this is what causes harmful thought patterns. As a result of these faulty beliefs, people will then begin acting in ways that affirm those thoughts. Therefore, a self-defeating belief can be created out of something that may have happened just once in a child's life but left a lasting impression. However, because the person believes those thoughts to be true and has not questioned its validity, it remains active and continues to affect the person's emotions.

In addition to this, Albert Ellis believed that although faulty thinking negatively affects people emotionally and that blame is the key factor in emotional disturbances. Blame seeks to deny the reality of human imperfection and feeds the desire to have the world be what a person thinks it "should" be. These two concepts can lead a person to make demands on themselves, others, and life itself that are unrealistic and unhealthy. These unmet idealizations then produce disturbing emotions and dysfunctional behavior. Ellis suggested that there were three primary irrational beliefs that people have. These beliefs consist of thinking that to be loved and approved of by others they 'must' perform well and that others 'must' treat them with kindness and fairness, as well as that their world 'must' be satisfying and provide them with all their wants (Corey, 2017). Ellis concluded that people make themselves emotionally unstable because they continue to entertain and incorporate these faulty beliefs into their everyday thought patterns. Since these irrational beliefs have been so ingrained people can find it hard to recognize them and much less correct their way of thinking. Hence, the need for a therapist or intervention.

8. In REBT therapy the client is expected to cooperate and agree with the therapist in regards to the homework assignments that could help them change their thought patterns. Consequently, the client must be willing to complete the behavioral assignments and outside the therapeutic setting. Afterward, the client is to report how the homework was executed and share with the therapist their experience as well as any progress they believe they are making. Therefore, the client must be intentional at observing how these assignments are helping them and if not troubleshoot what adjustments need to be made. As clients near the end of their therapy, they are expected to be able to identify and dispute self-defeating thoughts. As a result, they must learn how to come up with strategies that will help them cope with these discoveries. Another thing clients are expected to do as part of therapy is to learn how to accept other people and themselves unconditionally. Overall clients are expected to replace their old irrational way of thinking with a new rational way of thinking.

In cognitive therapy, after each session, the client is to review key points and then expected to actively participate in creating their homework assignments. These assignments are developed more like experiments that can assist clients in trying out different ways of behaving to confirm if their beliefs are valid or not. Since cognitive therapy is also psychoeducational the client will be asked to read additional material that explains cognitive therapy methods and benefits; this may even include self-help books. Cognitive therapists believe that clients can independently come to their conclusions and therefore expect clients to be able to point out their improper ways of thinking and come up with creative ways on how they can replace those thoughts with productive thoughts. Although client collaborates closely with the therapist in treatment the client must still complete homework assignments and answer to the therapist.

10. One cognitive method used in REBT is called “changing one’s language”. This technique focuses on the client replacing statements they say that contain absolute words like ‘must’, ‘ought’, or ‘should’ with more accurate statements. The reason for this is that these words can lead the client to condemn themselves or make them feel like a helpless victim of their circumstances. By speaking differently the clients also learn how to believe differently about their situations. As a result of this also changes how they feel.

An emotive technique practiced in REBT is named “shame-attacking exercises”. This exercise encourages clients to take a chance to act out behavior that they feel intimidated by because they’re afraid of what people may think. The purpose of this technique is to show clients that they can confront their feelings of shame by not allowing other people’s opinions or disapproval to keep them from doing what they want to do. As clients see that nothing drastic happens they learn to approach life and activities with less fear, guilt, embarrassment or depression.

REBT uses various behavioral techniques. Therefore, it is hard to pick just one. However, Corey (2017) states that a preferred method used by therapists seems to be positive and negative reinforcements (operant conditioning). Most of the homework assignments given to clients will involve some sort of developing skills that can assist clients in practicing behaviors that will help them establish new beliefs. Behavioral techniques are pragmatic because they are implemented in everyday situations and serve to provide the client with a variety of challenges. It also helps the client to work independently and remain active in therapy outside of the sessions. The main advantage for therapists that use behavioral techniques is that they can record data that can be examined later to monitor progress as well as for empirical research.

25. Reality (Choice) perspective aligns with the biblical worldview of unity in a community (John 17:21) and God's primary desire of reconciliation (Matt 5:24; 2 Cor 5:18). God gave man free will and does not impose His will on anyone, nor does God support the oppression of people (Ps. 10:17-18), nor leaders lording over one another (1Peter 5:3). Reality (choice) theory coincides with this perspective as well. The Bible has countless verses as to how we are to value each other and treat one another with love and respect. The Christian perspective of being judged by our actions (Romans 2:6; 2 Cor. 5:10), also coincides with reality/choice theory because we must consider the consequences and outcomes of our actions. Indirectly, I think the Bible is consistent with reality (choice) therapy in that God often chooses to meet our emotional and psychological needs through our relationships with other people. It is also biblical to be accountable and take responsibility for our behaviors. Reality therapy does not take into account the past either. The Bible supports this perspective in that we should not dwell on the past nor bring past things to memory (Isa. 43:18).

However, the Bible views man as a holistic being and states that in God's eyes what a man thinks is just as important as what he does and feels, especially towards other people (1John 3:15, 4:20; Matt. 5:28). Also, even though God wants us to have good relationships, He doesn't support us depending on our relationships to the point that it becomes idolatrous. Reality (choice) theory also gives the impression that we change our behavior by choosing and will power. But as Christians, we profess that we can do nothing without Christ (John 15:5) nor can we meet all our own needs. Biblically actions are definitely necessary but so is what we believe (James 2:2) because they work together. No matter what we do if we're not convinced that what we are doing will work or don't agree with our actions this can lead to cognitive dissonance.

26. Reality therapy's belief when it comes to basic psychological needs is that people need to engage in satisfying interpersonal relationships to be healthy. For this reason, reality theory will work closely with clients to enable them to connect with the people they desire to be in their lives. The overarching characteristic of reality therapy is that the only person that the client has control over is themselves. Due to this therapist will train the client in "choice theory", which involves clients focusing more on being responsible but particularly for the choices they make. The therapist helps the client become more aware of the power they have to make choices that will enhance their feelings of well being. This, in turn, encourages the client to continue to do so more and more regularly. Reality therapist understands that although past mistakes may have influenced the present problem, that's not the issue and hence irrelevant. The therapist will not prohibit the client from sharing their past but will keep the client focused on what is necessary to address the current problem at hand. Their purpose is to move the client towards the future.

As for transference in reality therapy, the therapist is like a model for the client on how to interact with other people. For this reason, reality therapy rejects using transference claiming it will only interfere with the authenticity of both the client and the therapist. Therefore, reality therapists will bluntly address transference as soon as they see it manifesting in the therapy session. Reality theorists state that symptoms are also due to unsatisfying relationships and are it is a waste of time trying to address the cause of them. They see symptoms as a biological indicator that the client is making faulty decisions. For this reason, reality theory also rejects that people with psychological and biological problems are mentally sick. Reality therapists do not support the use of psychiatric medications and are against being overly dependent on the DSM-5 for diagnosing or treating clients.

29. The two main elements in the cycle of counseling are the counseling environment and the implementation of procedures that lead to change in the client's behavior. The cycle's purpose is to intertwine these two elements in such a way that clients can assess their lives and then learn how to make effective decisions for their life. Through a challenging but caring client-therapist relationship the therapist guides the client to explore what they believe, need and want. The client takes responsibility for evaluating their lives and if they desire to change they can plan on how that can happen for them. The therapist is there to provide feedback to the client in regards to what progress is being made and make suggestions when necessary.

For this to occur effectively the therapist must establish an environment that encourages creativity and is void of unnecessary criticisms, coercion and giving up on the client. Although the therapist may need to confront or challenge the client, it is to be done in a supportive and caring manner. The reality therapist believes that two things motivate a person to change. The first motivation is the conviction that what is being at the moment is not conducive to meeting our needs and secondly that we can choose to act in ways that can get us what we desire. By asking skillful questions the therapist brings clarity and reality into the client's situation. Taking into account specific behavior along with the cause and effect of that specific behavior enables the client to see their part and what they need to do differently if they want a better outcome. In this manner, the client is being led to focus on their behavior because it is the only thing they can have control over. Since this is the case, then it's up to them to decide and make the required decisions that will lead to change. The therapist then helps the client become aware of the numerous options available to them, so they can find the ones that are best suited to the client's needs.

30. Robert E. Wubbolding uses the WDEP system to guide reality therapists in the procedures for effective reality therapy. The first procedure involves exploring what a client wants (W), needs, and perceptions. The therapist accomplishes this task by skillfully asking the client open-ended questions that will help clients define exactly what they want to achieve in therapy as well as in their lives. The questions cover all areas of the client's life, such as identity, family, lifestyle, dreams, and goals. Yet it also includes an evaluation of possible obstacles and faulty perceptions. The main objective is for the client to gain more congruence between what they perceive externally and what they desire internally. This is done by assisting the client in moving from an external locus of control position to forming an internal locus of control.

The second procedure requires that the client looks at their current behavior. It is necessary for the client to first be able to see and identify their behaviors with clarity. This procedure focuses on the client becoming aware of "where they stand" and in what direction (D) they are heading at the moment. Although this process may involve emotions reality therapists will seek to use them to address what the client wants to do about them rather than just talking about them. Therefore, self-evaluation follows this step. After the client assesses what they are currently doing they must evaluate (E) whether that particular behavior is leading them towards the kind of life they want to live or have the kind of relationships they want. Again the therapist uses questions carefully to allow the client to reflect on the results of their behavior. Then the client can come to their conclusions about whether those behaviors are working for or against their overall well-being.

The final procedure revolves around making plans (P) and taking action. The most challenging part for clients is usually determining what they want to change. After this is

accomplished the therapist can then work with the client creating and implementing a plan that can produce the desired changes. Throughout the process of planning the therapist reminds them that they alone are responsible for their choices and to consider the effect those choices can have on other people. Once the plan has been executed the client must evaluate whether the plan was successful or needs to be changed. An important part of this process is ensuring that the plan is “simple, attainable, measurable, immediate, involved, controlled by the planner, committed to, and consistently done” (Corey, 2017, p.325). According to Wubbolding, if a plan is easy, simple, with structured processes repetitive (preferably daily), within the client’s capacity, appealing to the client, carried out promptly, reviewed by the therapist, and the client is committed to the plan, they will have a better chance at achieving better control over their life (Corey, 2017).