

*Supplement #2 etc in previous blog
Comments welcomed

Name- Goehler

Reading Guide #3 for 2nd third of the semester

Interpersonal communication: theories of helping (cognitive/behavioral)

In preparation for the class discussions, please complete the following before class.

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Look over pages 10-23, 168-169 in Supplement #2* (Cognitive Therapy by Judith Beck) & the Cognitive Distortions Supplement

1. What will you learn about in this reading guide?

COGNITIVE THERAPY

COGNITIVE DISTORTIONS

Conceptualizing difficulties in cognitive terms, determines therapy

As you read pages 10-11, keep in mind that as a paraprofessional in human services, you will not be a therapist, but you will be using theoretical approaches to helping.

1. What are the author's key suggestions for those learning cognitive therapy? In a nutshell; dysfunctional thinking is common to all psychological disturbances. Realistic evaluation and modification of thinking produce improvement. Enduring improvement results from modification of dysfunctional beliefs. The therapist seeks to produce change in the thinking and belief system in order to change behavior.

2. Connecting to past learning: How does this reading relate to self-awareness, self-development, metacognition, and emotional intelligence?

EI: Understanding yourself and relating to others, is a self-awareness built upon thinking about thinking. Cognitive awareness in self-development is a process wherein the experiential learning re-wires how you think and correspondingly, what you do. Self-reflection is key in CBT: Thinking about thinking.

Read pages 16-18

1. Define core belief The most fundamental level of overgeneralized superficial, global and rigid thought patterns. Core beliefs influence development of ↓

2. Define intermediate beliefs Rules, attitudes, assumptions related to core beliefs. These beliefs influence perception of the situation and correspondingly influence thoughts, feelings and behaviors.

3. Define automatic thoughts Cognitions closest to conscious awareness. Spring from beliefs and perception of events and influence behavior.

4. Describe the relationship between beliefs, thoughts, emotions, and behavior. Underlying beliefs influence thoughts influence emotions influence behavior.

Read pages 19-23

1. List Sally's core belief, thoughts, emotions, and behaviors.

Helpless, defeated, overwhelmed, incompetent; thoughts of negative beliefs about herself made her feel inadequate, depressed - made her hypervigilant to succeed.

2. Write a concise summary of the case example about Sally.

Living in the shadow of an overachieving older sibling and degraded by mother, created inferiority complex prompting ~~overcompensation~~ ^{low self-esteem} in personal ambitions - causing depression and loneliness.

Read the lists of beliefs in supplement #4 (p. 16): these lists provide examples of core beliefs.

1. How would you define the category "helpless core beliefs?" negative, self-defeating, disabling.

2. How would you define the category "unlovable core beliefs?" negative, self-defeating, disabling

3. Personal application: As it relates to the past or present, give an example of a helpless or unlovable core belief that to emotions and some type of behavior in your life. *NOTE- you may need to work backward by beginning with the behavior.

A. List the core belief I am defective

B. List the emotions Apathy - who cares!

C. Explain the behavior. Anything goes.

D. According to cognitive behavioral theory, how would you change the emotions and behavior?

Identify cause of core belief (exiled prisoner unwanted by society), re-consider helpless condition and re-determine course of actions necessary to reintegrate into society. Start with simple goals toward life goal.

Read the 11 cognitive distortions found in supplement #5 (p. 17).

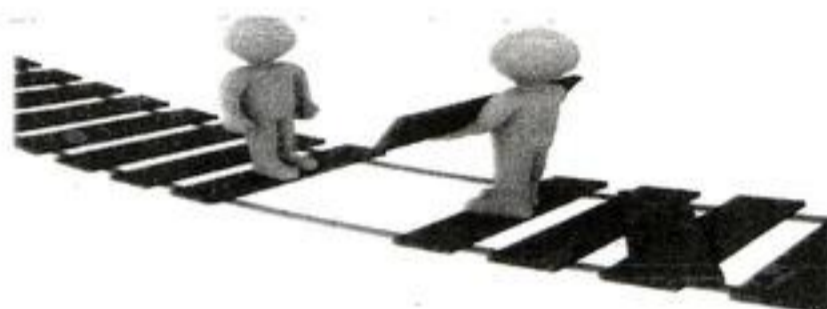
Complete the chart located on the following pages by defining the distortion, describing a time you experience or observed someone using the

Cognitive distortion	Definition/Description	A time you experienced or observed someone using this distortion	What is a true statement you can use to dispute the cognitive distortion?
All-or-nothing thinking	Viewing situations to one extreme or another.	A parent believing that its <u>entirely</u> their fault is their child is exiled from society.	There <u>are</u> many degrees between all or nothing, so try viewing the degrees of possibility.
Catastrophizing	Predicting only neg. outcomes.	A parent believing that their exiled child is forever branded an outcast.	There <u>are</u> many possibilities which can be prepared for.
Disqualifying or discounting the positive	Believing that the good things don't count.	A parent of a healthy intelligent criminal discounts the child's potential.	There <u>are</u> worse cases which have succeeded.
Emotional reasoning	Letting feelings overrule facts to the contrary	Elderly Release after 25 ^{yr} exiled makes a flicker of hope	Only a fool fools himself! re-consider the facts and observe the obvious.
Labeling	Giving a label without further discovery of facts.	"Elderly Release" gives hope	Research reveals otherwise.
Magnification/minimization	Emphasizing the negative / playing down the positive.	Elderly Release <u>is</u> a real consideration — yet... its real rare.	True enough! What's the harm in <u>preparing</u> for the possibility though?

Name: Goehly

Cognitive distortion	Definition/Description	A time you experienced or observed someone using this distortion	What is a true statement you can use to dispute the cognitive distortion?
Mental filter/tunnel vision	All one's attention on - or seeing only, the negative.	25 yr. to life is one thing, but consecutive 25 yr to life is definate!	Laws Change or Revolution ensues. Stay ready!
Mind reading	Believing you know what others are thinking.	A liberal socialist promoting LBJ's Great Society, resents Nazi's.	Your Doing what you are thinking. We all are!
Overgeneralization	Making overall neg. conclusions	National Socialist's strive to secure survival by excluding other nationalities	Natures Law is Survival of Self, then Family, then Groups, then Humanity. We all Survive accordingly.
Personalization	Attributing others behavior as something to do with you	People quit college class mistaking others agenda personally.	Do your best, never the less!
"Should" and "must" statements	A concrete idea of how others should behave.	People quit college class mistaking others agenda	The only one you can be responsible for is <u>YOU</u> .

The Helping Relationship & Theories of Helping



The Helping Relationship

- Human Service Professionals believe the relationship is **NECESSARY** for helping to occur
- Similarities to other relationships
 - 2 or more individuals are involved
 - Involves communication and interaction
 - Goes through developmental changes
- Differences from other relationships
 - Power and potential for facilitating change
 - One person is a professional helper, who utilizes skills and relational expertise



Healthy Relationships

client relationship development

- 1. Coming together: developing and building a helping alliance also called rapport
- 2. Exploring together: reconnaissance involves understanding the client's concerns, motivations, etc.
- 3. Acting together: intervention involves actions by helper and/or helpee that lead to change
- 4. Ending together: solidifying learning and making plans for ongoing growth ***NOTE- this is not in the book***

let's talk.

change

When is change needed?

How do people change?

What does the helper do?

Theories of helping



- Different perspectives on
 - Explanations of when change is needed/ when human behavior is healthy & unhealthy
 - How people change
 - The role and actions of the helper



Person-Centered Theory of Helping



- Creator: Carl Rogers
- Healthy vs. unhealthy:
 - Healthy people:
 - self-concept "the organized, consistent set of perceptions and beliefs about oneself" includes thoughts, values, and actions.
 - congruent self-concept: alignment of the real and ideal self
 - self-actualized (functioning as their optimum selves)
 - Unhealthy people:
 - disconnect between real and ideal self
- Time focus: present (here and now)

Person-Centered Theory of Helping

- Change: self-actualization occurs when people are in a relational environment that allows them to grow into their ideal selves.
- Role of the helper: create healthy environment
- Actions of the helper: use active listening to demonstrate facilitative conditions
 - Genuineness/realness/congruence
 - Acceptance/caring/prizing = unconditional positive regard
 - Empathetic understanding

“What a man can be, he must be. This is what we call self-actualization.”
Abraham Maslow

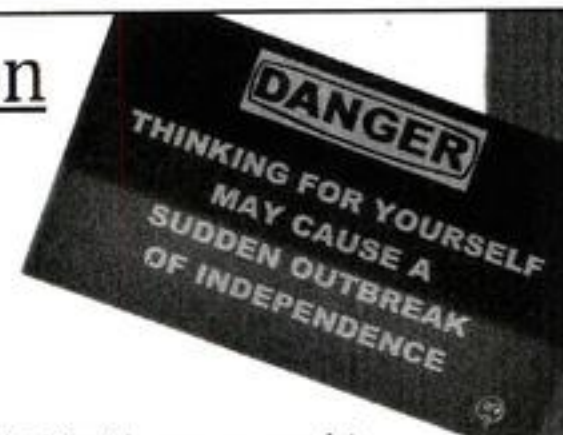


Reflection

- Reactions to this theory:
 - Feelings
 - Thoughts
- Application of this theory:
 - Explain a time when you witnessed this theory working.
 - Explain a time when you witnessed this theory not working
 - Describe a time when you experienced this theory as a helpee (with professional or personal).
 - What aspects of this theory might you use as a helper?

We do not learn from experience... we learn from reflecting on experience.

- John Dewey



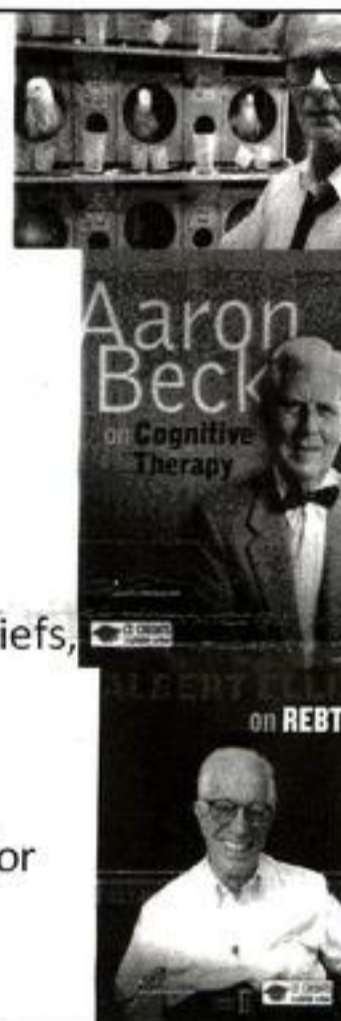
Behavioral & Cognitive Theories

Creators: B.F. Skinner, Aaron Beck, & Albert Ellis

Behavioral theories: behaviorism; behavior modification; emphasis on changing the environment to change behavior

Cognitive theories: evolved from and eventually incorporated aspects of behavioral theories

- Healthy vs. unhealthy behavior
 - Healthy: rational cognitions (thoughts, beliefs, and perceptions) → healthy behavior and emotions
 - Unhealthy: learned negative/irrational cognitions lead to emotional distress and/or problematic behavior; "stinking thinking"
- Time focus: present



Cognitive Theories

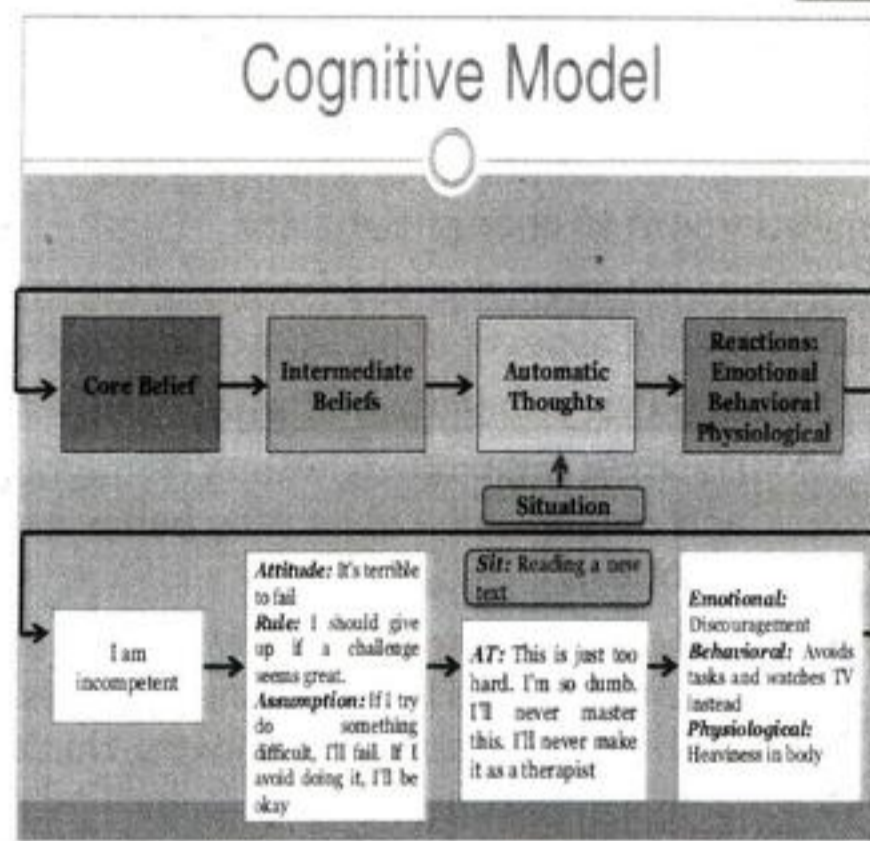
- Change: learn new cognitions and/or behaviors
- Role of the helper: help clients understand negative/irrational cognitions & practice changing cognitions
- Actions of the helper: educate about irrational thoughts; challenge irrational thinking; create small goals that allow for measurable change in thoughts and behaviors; encourage practice of new thoughts and behaviors by assigning homework, roleplaying, positive self-talk, exposure, etc.
- 2 cognitive approaches:
 - CBT
 - REBT



CBT: Aaron Beck & Judith Beck

Role of helper:

- create rapport
- facilitate goal creation
- educate helpee
- structure sessions
- questioning, guided discovery
- other techniques



CBT Approach: Core Beliefs

Helpless core beliefs

- I am helpless
- I am powerless
- I am out of control
- I am weak
- I am vulnerable
- I am needy
- I am trapped
- I am inadequate
- I am incompetent
- I am a failure
- I am disrespected
- I am defective (compared to others)
- I am not good enough (achievements)



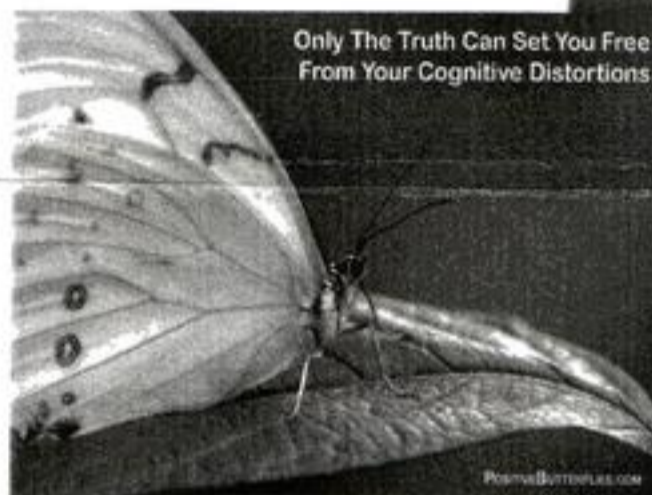
Unlovable core beliefs

- I am unlovable
- I am unlikable
- I am undesirable
- I am unattractive
- I am unwanted
- I am uncared for
- I am bad
- I am unworthy
- I am different
- I am defective
- I am not good enough
- I am bound to be rejected
- I am bound to be abandoned
- I am bound to be alone



COGNITIVE DISTORTIONS

- All-or-nothing thinking
- Catastrophizing
- Disqualifying or discounting the positive
- Emotional reasoning
- Labeling
- Magnification/minimization
- Mental filter/tunnel vision
- Mind reading
- Overgeneralization
- Personalization
- "Should" and "must" statements



Reflection

- Reactions to CBT & REBT theories:
 - Feelings
 - Thoughts
- Application of CBT theory:
 - Explain a time when you witnessed these theories working.
 - Explain a time when you witnessed these theories not working.
 - Describe a time when you experienced these theories as a helpee (with professional or personal).
 - What aspects of these theories might you use as a helper?

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