

Unit 2 – Model & Theories

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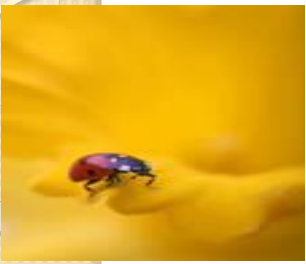
KMC 1083: Basic Helping Skills





Something to ponder upon:

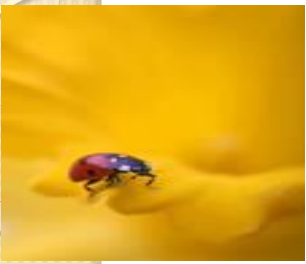
- ✓ Why do we need to learn about model and theories?
- ✓ How can we use theories and model in process of helping others?



DASIE Model

It is a systematic five-stage model or framework or set of guidelines for helper choices to manage problems.

The use of acronym is deliberate; it is intended to assist beginning helping service trainees to remember the five stages when faced with the anxiety of working with clients for the **first time**



DASIE is not only a five-stage model for managing problems

The model also assumes that where possible helpers work with underlying skills weaknesses that predispose and position helpee for further problems

DASIE Model Stages

Stage 1: **D**evelop the relationship, identify and clarify problem

Stage 2: **A**ssess problem and redefine in skills terms

Stage 3: **S**tate working goals and plan interventions



Stage 4: **I**ntervene to develop self-helping skills

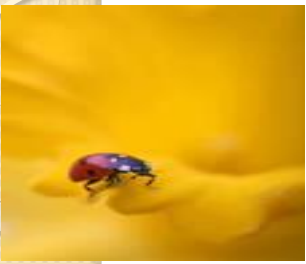
Stage 5: **E**nd and consolidate self-helping skills

DASIE Model Overview



Life skills helping has preventive and development as well as problem management goals

Being an educational approach, life skills helping lends itself to both individual and group training interventions



DASIE Model

As far as possible, in addition to managing presenting problems, life skills helpers assist clients to alter underlying patterns of problematic skills

Many problems occur in repetitive cycles

For example, individuals may not only require assistance in finding employment, but also in identifying and developing job-seeking skills for future use

Person-Centered Theory

- Introduced by Carl Rogers.
- The job of a counsellor is to reflect the consellee's responses back to him and thus set up catalytic atmosphere of acceptance.
- Such an environment is supposed to allow the client to get in touch with the innate resources within himself or herself for successfully dealing with life and developing self-esteem.

The Views of Human Behavior

Human are rational, good and capable of assuming responsibility for themselves

People are constructive, cooperative, trustworthy, realistic and social

This is a “self” theory

Based on a belief that people act in accordance with their “self-concept”



The major person- centered constructs:

- Self-concept comprises the individual's perceptions of himself or herself based on interaction.
- The phenomenal field is the individual's reality & consists of his or her self-concept & perceptions of his or her world.
- Individuals behave in whatever ways will enhance their self-concept.
- Problems arise out of in-congruencies between the individual's self-concept and life experiences that become threatening and cause the individual to use defense such as denial or distortion of experiences. These in-congruencies lead to disorganization and pain.
- Only by receiving unconditional positive regard (acceptance)

Empathy, Respect, Congruency

Empathy

Refers to the counsellors' ability to feel with the client and convey this understanding back to the client. When the client perceives the counsellor as being understanding and appreciative of his or her predicament, then only will the client proceed with his or her self-exploration.

Foundation of person-centered therapy is the **creation of an empathic relationship between therapist and client** that will encourage the client's self-exploration and experience of spontaneity, genuineness, and here-and-now feelings.

Respect



- Respect

- Respect of Positive Regard where the client will feel safe when the counsellor genuinely and positively accepts the client as a person regardless of what the client is telling the counsellor. Such positive regard will make the client feel valued regardless of how bad or negative his or her self is.

- Congruency

- Congruency refers to the counsellor's genuine behavior and non-verbal language that is free from pretension.




The person-centered helper uses:

- minimal leads such as: “Mm-hmm”, “I see”, and “Yes” (connoting acceptance);
- reflection (a verbal statement mirroring the client’s statement);
- summarization (which synthesis a number of the client’s statements)
- confrontation (a verbal statement that non-judgmentally challenges a client’s statement).

Cognitive Behavior Therapy (Dr Aaron T. Beck)

- **It is a way of talking about:**
 - how you think about yourself, the world and other people
 - how what you do affects your thoughts and feelings.
- In other words, it emphasizes the important role of thinking in how we feel and what we do.
- Therapists use the Cognitive Model to help clients overcome their difficulties by changing their thinking, behavior, and emotional responses.

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- CBT can help you to change how you think ('Cognitive') and what you do ('Behaviour'). These changes can help you to feel better. Unlike some of the other talking treatments, it focuses on the 'here and now' problems and difficulties. Instead of focusing on the causes of your distress or symptoms in the past, it looks for ways to improve your state of mind now. It is a form of psychotherapy in which the therapist and the client work together as a team to identify and solve problems.
 - CBT has been shown to help with many different types of problems. These include: anxiety, depression, panic, phobias (including agoraphobia and social phobia), stress, bulimia, obsessive compulsive disorder, post-traumatic stress disorder, bipolar disorder and psychosis. CBT may also help if you have difficulties with anger, a low opinion of yourself or physical health problems, like pain or fatigue.


- **How does it work?**


- CBT can help you to make sense of overwhelming problems by breaking them down into smaller parts. This makes it easier to see how they are connected and how they affect you. These parts are:
 - A Situation - a problem, event or difficult situation. From this can follow:
 - Thoughts
 - Emotions
 - Physical feelings
 - Actions
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- Each of these areas can affect the others. How you think about a problem can affect how you feel physically and emotionally.
- All these areas of life can connect like this: 5 Areas
- What happens in one of these areas can affect all the others.
- There are helpful and unhelpful ways of reacting to most situations, depending on how you think about it. The way you think can be helpful - or unhelpful.

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- An example:
- The Situation
- You've had a bad day, feel fed up, so go out shopping. As you walk down the road, someone you know walks by and, apparently, ignores you. This starts a cascade of:

	Unhelpful	Helpful
Thoughts	He/She ignored me – they don't like me	He/she looks a bit wrapped up in themselves – I wonder if there's something wrong?
Emotional: Feelings	Low, sad and rejected	Concerned for the other person, positive
Physical	Stomach cramps, low energy. Feel sick	None – feel comfortable
Action	Go home and avoid them	Get in touch to make sure they're OK

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- The same situation has led to two very different results, depending on how you thought about the situation.
 - How you think has affected how you felt and what you did. In the example in the left hand column, you've jumped to a conclusion without very much evidence for it - and this matters, because it's led to:
 - having a number of uncomfortable feelings
 - behaving in a way that makes you feel worse.
 -
 - If you go home feeling depressed, you'll probably brood on what has happened and feel worse. If you get in touch with the other person, there's a good chance you'll feel better about yourself.
 -
 - If you avoid the other person, you won't be able to correct any misunderstandings about what they think of you - and you will probably feel worse.

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- This 'vicious circle' can make you feel worse. It can even create new situations that make you feel worse. You can start to believe quite unrealistic (and unpleasant) things about yourself. This happens because, when we are distressed, we are more likely to jump to conclusions and to interpret things in extreme and unhelpful ways.
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 - CBT can help you to break this vicious circle of altered thinking, feelings and behaviour. When you see the parts of the sequence clearly, you can change them - and so change the way you feel. CBT aims to get you to a point where you can 'do it yourself', and work out your own ways of tackling these problems.
- (<http://www.rcpsych.ac.uk/expertadvice/treatments/cbt.aspx>)

Overview of the Cognitive Behavioural Therapy



Cognitive-behavioural therapy to helping deal with rationality, the thinking processes and problem solving.

Cognitive therapy focuses on the systematic errors in reasoning that underlie psychological problems.

They are instructive, directive, and verbally oriented (as opposed to an approach like Gestalt, which is more nonverbally oriented).

- 1. CBT is based on the Cognitive Model of Emotional Response.

Cognitive-behavioral therapy is based on the idea that our thoughts cause our feelings and behaviors, not external things, like people, situations, and events. The benefit of this fact is that we can change the way we think to feel / act better even if the situation does not change.

- 2. CBT is Briefer and Time-Limited.

Cognitive-behavioral therapy is considered among the most rapid in terms of results obtained. The average number of sessions clients receive (across all types of problems and approaches to CBT) is only 16. Other forms of therapy, like psychoanalysis, can take years. What enables CBT to be briefer is its highly instructive nature and the fact that it makes use of homework assignments. CBT is time-limited in that we help clients understand at the very beginning of the therapy process that there will be a point when the formal therapy will end. The ending of the formal therapy is a decision made by the therapist and client. Therefore, CBT is not an open-ended, never-ending process.

- 3. A sound therapeutic relationship is necessary for effective therapy, but not the focus.

Some forms of therapy assume that the main reason people get better in therapy is because of the positive relationship between the therapist and client. Cognitive-behavioral therapists believe it is important to have a good, trusting relationship, but that is not enough. CBT therapists believe that the clients change because they learn how to think differently and they act on that learning. Therefore, CBT therapists focus on teaching rational self-counseling skills.

- 4. CBT is a collaborative effort between the therapist and the client.

Cognitive-behavioral therapists seek to learn what their clients want out of life (their goals) and then help their clients achieve those goals. The therapist's role is to listen, teach, and encourage, while the client's roles is to express concerns, learn, and implement that learning.

- 5. CBT is based on aspects of stoic philosophy.

Not all approaches to CBT emphasize stoicism. Rational Emotive Behavior Therapy, Rational Behavior Therapy, and Rational Living Therapy emphasize aspects of stoicism. Beck's Cognitive Therapy is not based on stoicism.

Cognitive-behavioral therapy does not tell people how they should feel. However, most people seeking therapy do not want to feel they way they have been feeling. The approaches that emphasize stoicism teach the benefits of feeling, at worst, calm when confronted with undesirable situations. They also emphasize the fact that we have our undesirable situations whether we are upset about them or not. If we are upset about our problems, we have two problems -- the problem, and our upset about it. Most people want to have the fewest number of problems possible. So when we learn how to more calmly accept a personal problem, not only do we feel better, but we usually put ourselves in a better position to make use of our intelligence, knowledge, energy, and resources to resolve the problem.

- 6. CBT uses the Socratic Method.

Cognitive-behavioral therapists want to gain a very good understanding of their clients' concerns. That's why they often ask questions. They also encourage their clients to ask questions of themselves, like, "How do I really know that those people are laughing at me?" "Could they be laughing about something else?"

- 7. CBT is structured and directive.

Cognitive-behavioral therapists have a specific agenda for each session. Specific techniques / concepts are taught during each session. CBT focuses on the client's goals. We do not tell our clients what their goals "should" be, or what they "should" tolerate. We are directive in the sense that we show our clients how to think and behave in ways to obtain what they want. Therefore, CBT therapists do not tell their clients what to do -- rather, they teach their clients how to do.

- 8. CBT is based on an educational model.

CBT is based on the scientifically supported assumption that most emotional and behavioral reactions are learned. Therefore, the goal of therapy is to help clients unlearn their unwanted reactions and to learn a new way of reacting. Therefore, CBT has nothing to do with "just talking". People can "just talk" with anyone.

The educational emphasis of CBT has an additional benefit -- it leads to long term results. When people understand how and why they are doing well, they know what to do to continue doing well.

- 9. CBT theory and techniques rely on the Inductive Method.

A central aspect of Rational thinking is that it is based on fact. Often, we upset ourselves about things when, in fact, the situation isn't like we think it is. If we knew that, we would not waste our time upsetting ourselves.

Therefore, the inductive method encourages us to look at our thoughts as being hypotheses or guesses that can be questioned and tested. If we find that our hypotheses are incorrect (because we have new information), then we can change our thinking to be in line with how the situation really is.

- 10. Homework is a central feature of CBT.

If when you attempted to learn your multiplication tables you spent only one hour per week studying them, you might still be wondering what 5 X 5 equals. You very likely spent a great deal of time at home studying your multiplication tables, maybe with flashcards.

The same is the case with psychotherapy. Goal achievement (if obtained) could take a very long time if all a person were only to think about the techniques and topics taught was for one hour per week. That's why CBT therapists assign reading assignments and encourage their clients to practice the techniques learned.

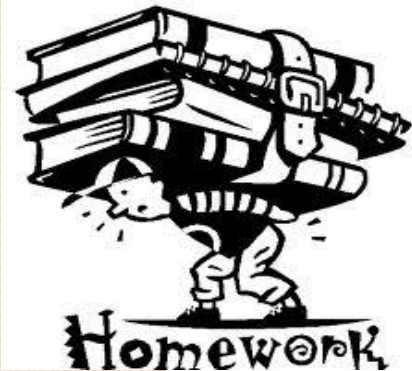
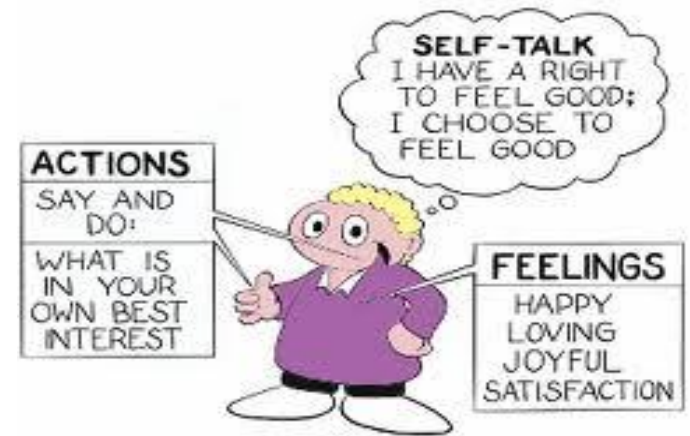
(<http://www.nacbt.org/whatiscbt.htm>)

The THREE Major Stages of Cognitive Behavior Therapy

Eliciting thoughts, self-talk, the client's interpretations of them.

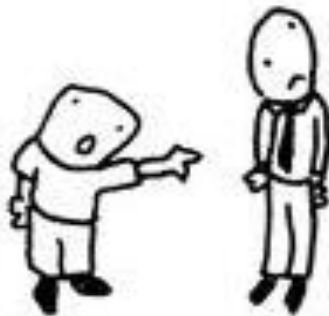
Gathering with the client evidence for or against the client's interpretations.

Setting up experiments (homework) to test the validity of the clients interpretations.



Activity in class

- Please discuss what is the model or theory that you prefer to use during the helping process?
- Please states why you choose the model or theory.



well, my dad says
homework is just a
theory and shouldn't
be taught in school,
so that makes us
even