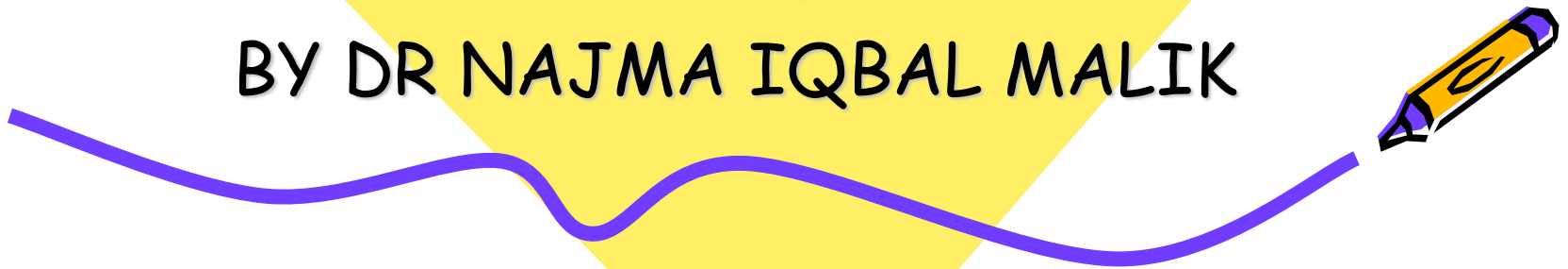




GESTALT THERAPY

FOR ADCP

BY DR NAJMA IQBAL MALIK



GESTALT THERAPY



"I am not in this world to live up to other people's expectations, nor do I feel that the world must live up to mine."

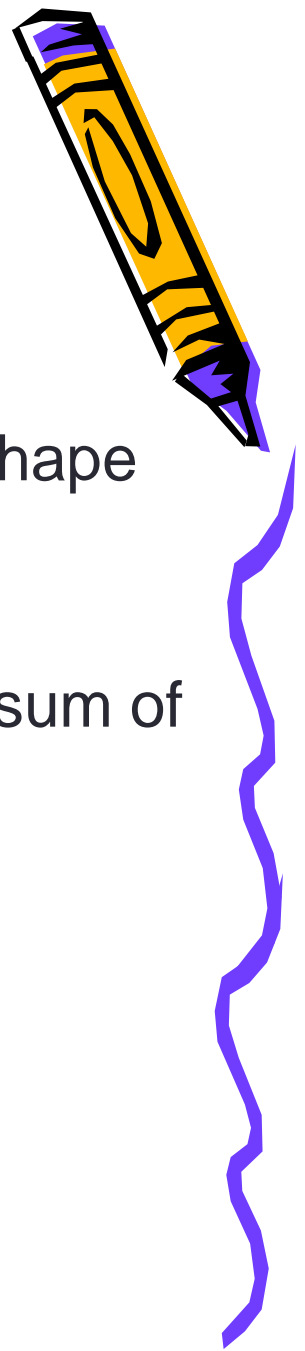
--Fritz Perls



Gestalt

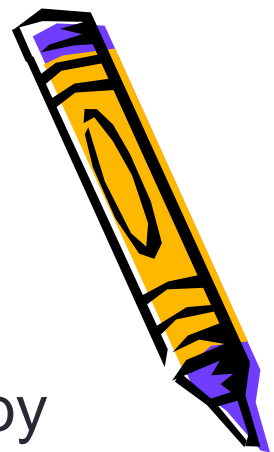
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- Gestalt is a German word which refers to the total shape of something.
- A *gestalt*, or whole, both includes & transcends the sum of its parts.
- It cannot be understood simply as a sum of smaller, independent events.

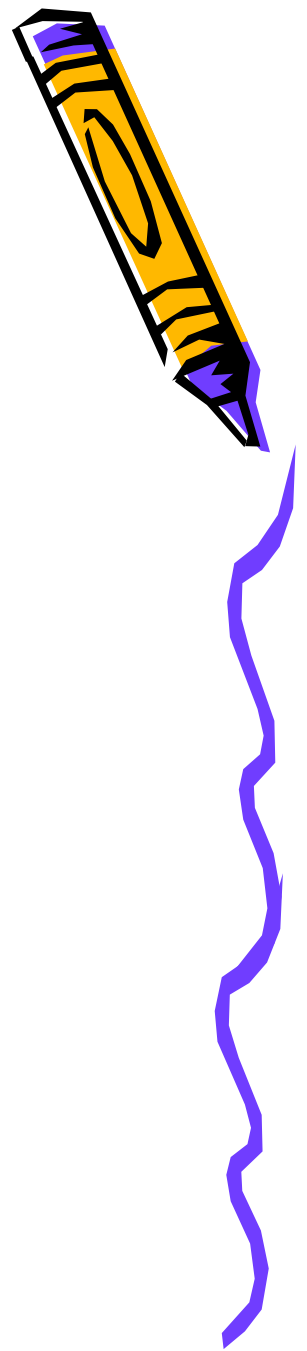


Theory of Personality

- A person exists by differentiating self from other & by connecting self & other
- These are the two functions of a **boundary**
- The boundary between self & environment must be permeable to allow for exchanges, yet firm enough to enable autonomous action
- When the boundary becomes unclear, lost, or impermeable, mental & emotional disturbance results



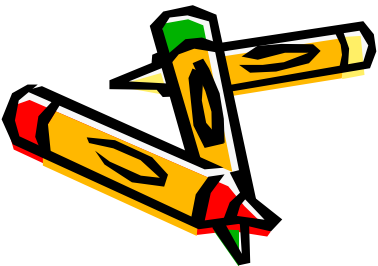
Gestalt Therapy



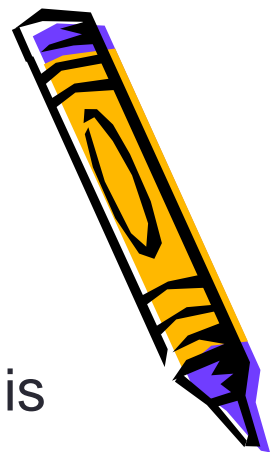
- **Main originator & developer of Gestalt Therapy**

Fritz Perls(1893-1970) / wife Laura Perls(1905-1990)

- It is an existential/phenomenological approach
- Therapists try to **increase clients' awareness**
- It is grounded in the client's **“here and now”**



Key concepts of Gestalt Therapy



Gestalt Therapy is another type of counseling that is based upon the existential framework. Key elements include:

- **Phenomenological Basis**

You are seeking to focus on the client's perception of reality

- **Experiential**

The client is being asked to come to understand about what and how they are thinking, feeling, and doing as they interact with the therapist and the other people in the world



Key concepts of Gestalt Therapy



- **Existential**
- The person is to take responsibility for their destiny and identity
- **Awareness**
- A key element in this theory is helping the client come to an awareness of what he or she is doing and experiencing



Key concepts of Gestalt Therapy



- **Unfinished Business**

Feelings about the past are unexpressed

For Example: hatred, pain, anxiety, grief etc. These feelings are associated with distinct memories & fantasies

Result:

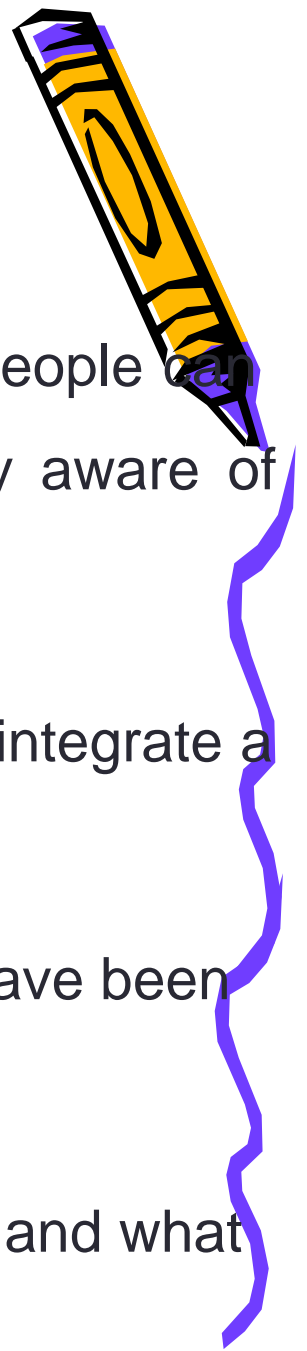
Unexpressed feelings can result in physical symptoms

For Example: Preoccupation, compulsive behavior & self-defeating behavior etc.

So Gestalt therapists emphasize paying attention to the bodily experience



Gestalt View of Human Nature



- Gestalt's basic understanding of the human being is that people can deal with their problems, especially if they become fully aware of what is happening within oneself and outside of oneself
- Change happens in a person's life when he or she can reintegrate a **disowned** part of the self back into the mix of identity
- Gestalt is a process of "**reowning**" parts of the self that have been disowned
- Change takes place when a person is more aware of who and what he or she is



Gestalt View of Human Nature

- Living with “**masks**” and does not promote change
- Problems begin when a person tries to be who or what he or she isn't
- In fact it promotes stagnation of the personality
- According to Gestalt, the more a person tries to be who they are not, the more they stay the same



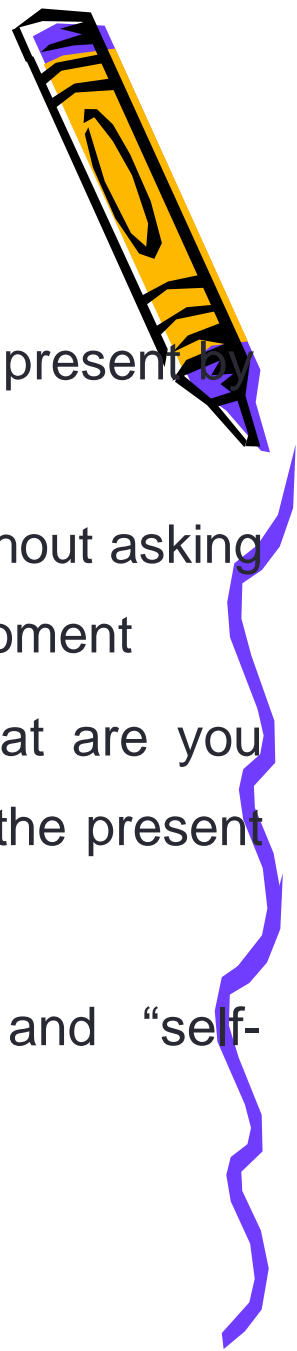
Therapeutic Goals



- Move towards increased awareness of themselves
- Gradually assume ownership of their experience
- Develop skills and acquire values that will allow them to satisfy
- their needs without violating the rights of others



Therapist's Function and Role



- Therapist encourages the present time, Bring the past into the present by re-enacting it in the present.
- Therapist should focus on the “**what**” & “**how**” of a person without asking the “**why**” questions. This is to promote an awareness of the moment

Questions such as “What is happening now?” or “What are you feeling in this moment?” are used to intensify the experience of the present & create awareness

“Why” questions lead only toward rationalizations and “self-deceptions” away from the immediacy of the moment

- Pay attention to the client's body language.
- Focus on the language



Therapeutic Methods/ Techniques



- **Experiments**

The therapist designs experiments to increase the client's awareness of what he or she is doing, experiencing, and how he or she is doing it.

- **Role-play**

Role-play can help individuals to experience different feelings and emotions and better understand how they present and organize themselves.



• The 'open chair' technique

The open chair technique involves two chairs and role-play, and can give rise to emotional scenes. The client sits opposite an empty chair and must imagine someone (usually himself/herself or parts of him or her) in it. They then communicate with this imaginary being - asking questions and engaging with what they represent. Next, they must switch chairs so they are physically sitting in the once empty chair. The conversation continues, but the client has reversed roles - speaking on behalf of the imagined part of his or her problem.

This technique aims to enable participants to locate a specific feeling or a side of their personalities they had 'disowned' or tried to ignore.

This helps them to accept polarities and acknowledge that conflicts exist in everyone.



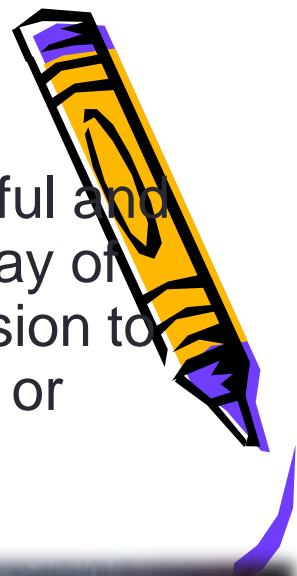
- **Dialogue**

A gestalt therapist will need to engage the client in meaningful and authentic dialogue in order to guide them into a particular way of behaving or thinking. This may move beyond simple discussion to more creative forms of expression such as dancing, singing or laughing.

- **Discussing dreams**

Dreams play an important role in gestalt therapy, as they can help individuals to understand spontaneous aspects of themselves. Fritz Perls frequently asked clients to relive his or her dreams by playing different objects and people in the dream. During this they would be asked questions like:

"What are you aware of now?" to sharpen self-awareness.



- **Attention to body language**

Throughout therapy, a gestalt therapist will concentrate on body language, which is considered a subtle indicator of intense emotions. When specific body language is noticed, the therapist may ask the client to exaggerate these movements or behaviors. This is thought to intensify the emotion attached to the behavior and highlight an inner meaning.

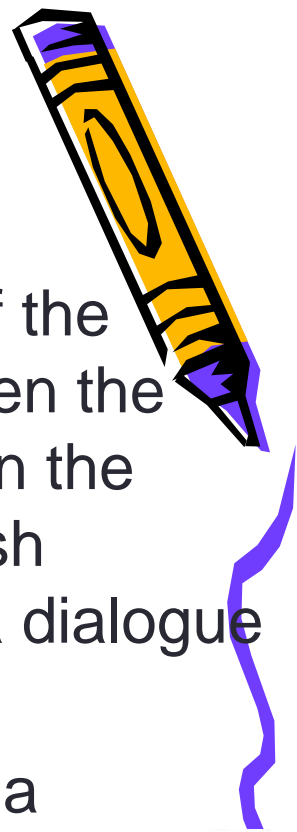


- **Topdog — Underdog**

A commonly utilized Gestalt technique is that of the topdog-underdog dialogue. This technique is used when the therapist notices two opposing opinions/attitudes within the client. The therapist encourages the client to distinguish between these two parts and play the role of each in a dialogue between them (Patterson, 1986).

The tyrannical 'topdog' demands that things be a particular way whilst the 'underdog' plays the role of disobedient child.

The individual becomes split between the two sides struggling for control.



- **Fantasy**

Fantasy is used in Gestalt Therapy to increase clients self-awareness of their thoughts and emotions and to bring about closure to unfinished business (Seligman, 2006).

Therapists use guided imagery techniques (fantasy) to encourage clients to imagine situations such as what they would do in a certain situation or by projecting themselves into different roles.



- **The Body as a Vehicle of Communication**

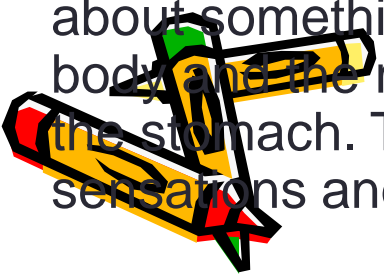
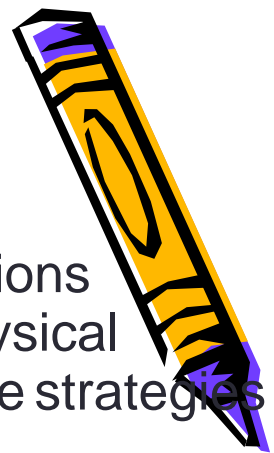
Gestalt Therapy sees that not only are thoughts and emotions important to creating a feeling of “wholeness” for the client, the physical sensations are also important. Seligman (2006) has identified three strategies to help with focusing attention on the physical sensations:

- **Identification**

Gestalt Therapists should be able to recognize physical signs of their clients. For example, a client might be tapping their feet on the ground. The therapist may say “Become your leg and give it a voice?” This creates awareness of the client’s physical sensations and emotions.

- **Locating emotions in the body**

Gestalt Therapists may ask clients where they are experiencing the emotion in their body. For example, a client may say they are feeling nervous about something. The therapist may ask where this is coming from in the body and the response from the client may be that the feeling is butterflies in the stomach. This helps the client to bring about more awareness into sensations and their emotions.



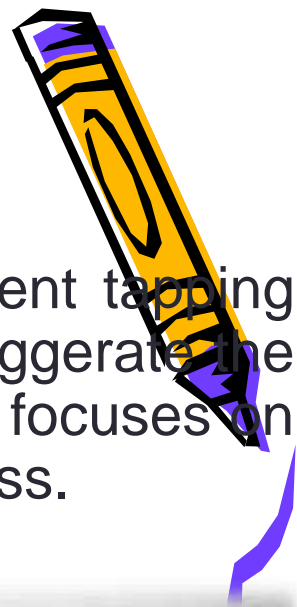
- **Repetition and exaggeration**

If there is repetition such as the example of the client tapping their feet on the ground, the therapist would get them to exaggerate the movement and talk about feelings that come up. This in turn focuses on the emotion and should help to release the blocked awareness.

- **Confusion**

The technique of dealing with confusion of the client is about drawing attention to the client's hesitation in talking about something unpleasant.

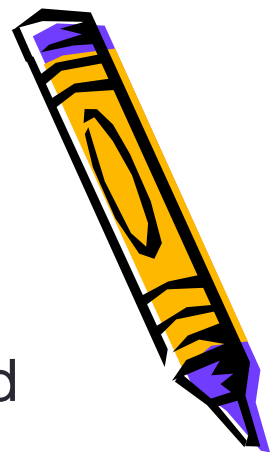
The hesitation can be shown through avoidance, blanking out, verbalism and fantasy. By drawing attention to the hesitation, it creates self-awareness for the client and allows the client to work through the issue.



Applications

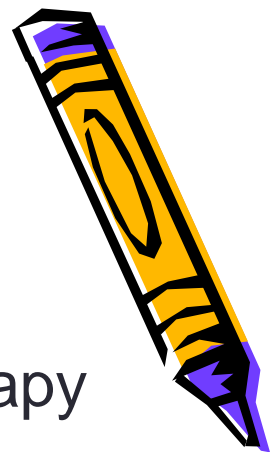
S

- It can be applied as a long-term therapy or as a brief and focused approach.
- Originally Gestalt Therapy was predominantly used to treat individuals who were anxious and depressed and who were not showing serious pathological symptoms.
- Personality disorders such as borderline personality disorder.
- Managing tension
- Addiction
- post-traumatic stress
- It is also effective in counseling groups, couples, and families.
- Overall, people who participate in gestalt therapy tend to feel more self-confident, calm and at peace with themselves.



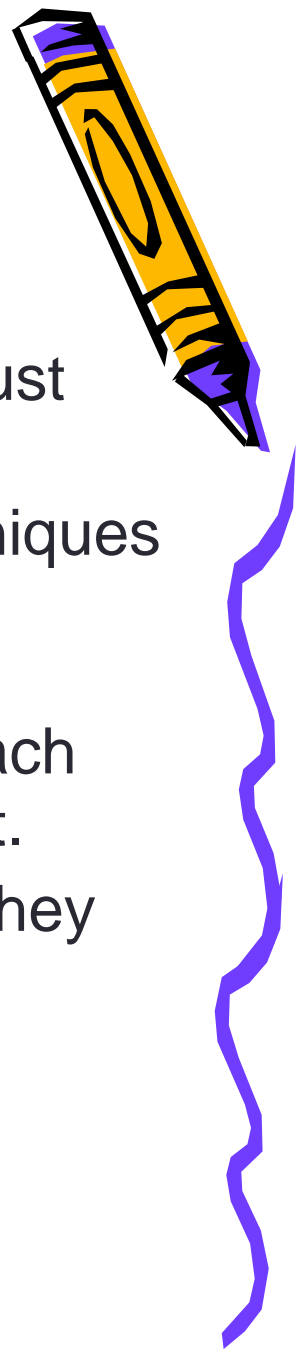
Strengths

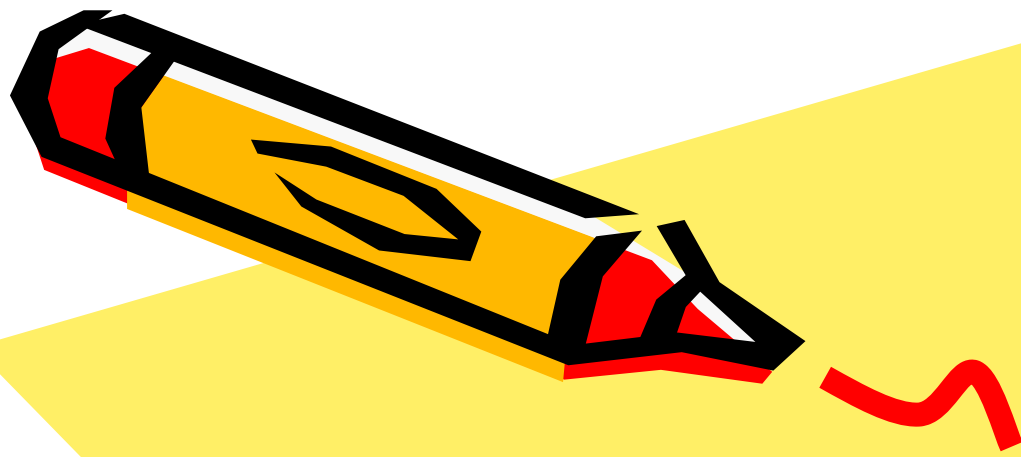
- There is empirical research to support Gestalt Therapy and its techniques.
- Gestalt Therapy is equal to or greater than other therapies in treating various disorders, Gestalt Therapy has a beneficial impact with personality disorders, and the effects of therapy are stable.
- Works with the past by making it relevant to the present.
- Versatile and flexible in its approach to therapy. It has many techniques and may be applied to different therapeutic issues.



Weaknesses

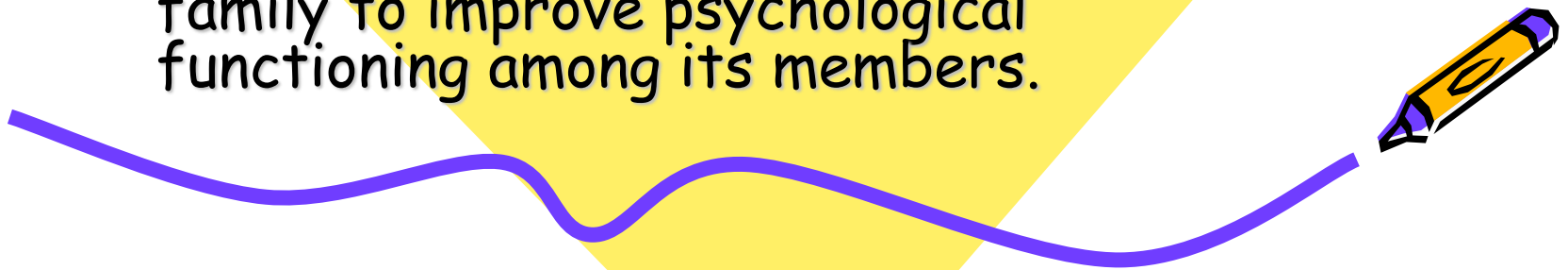
- For Gestalt Therapy to be effective, the therapist must have a high level of personal development .
- Effectiveness of the confronting and theatrical techniques of Gestalt Therapy is limited and has not been well established.
- It has been considered to be a self-centered approach which is concerned with just individual development.
- Potential danger for therapists to abuse the power they have with clients (Corey, 2005).
- Lacks a strong theoretical base.
- Deals only with the here and now.
- Does not deal with diagnosis and testing.

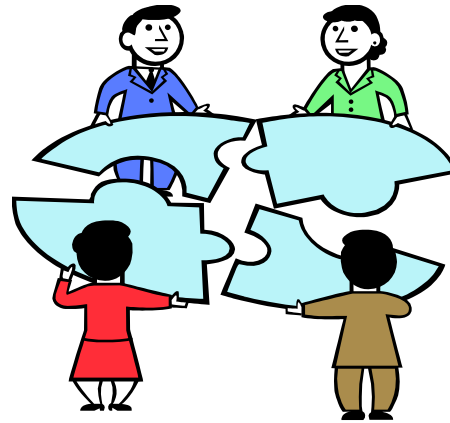




FAMILY THERAPY

Any psychotherapeutic treatment of the family to improve psychological functioning among its members.





What are the advantages of treating a family rather than an individual?



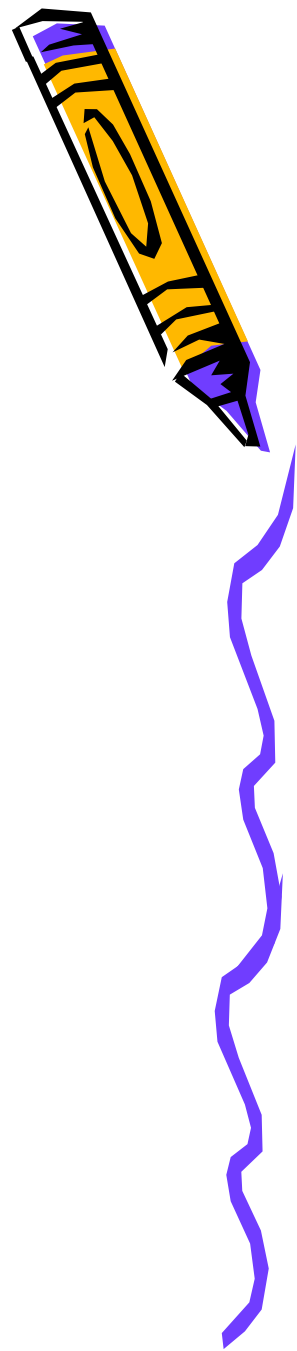
Perspective

- If we are always arriving and departing, it is also true that we are eternally anchored (secure). One's destination is never a place but rather a new way of looking at things.

Henry Miller



Adopting a Family Relationship Framework



"Everyone has a context"

Milan Group





- All clinicians must deal with marriages in some way, because everyone is either married, planning to be married, or avoiding marriage.

Jay Haley (1976, p. 161)



INFLUENCES ON FAMILY SYSTEMS THERAPY



- The first major influence on family systems theory is observations made of the communication styles in schizophrenic families.



Double bind:



- A view that when an individual receives an important message with two different meanings and is unable to respond to it, the individual is in an impossible situation.
- If such messages are repeated over time, individuals may begin to show signs of schizophrenia.



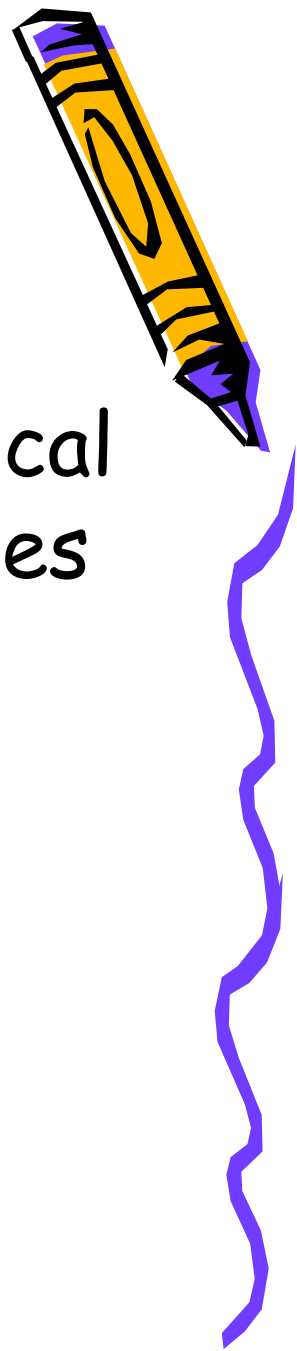
Marital schism:



- A situation in which one parent tries to undermine the worth of another (parent) by competing for sympathy or support from the children.



Marital skew:



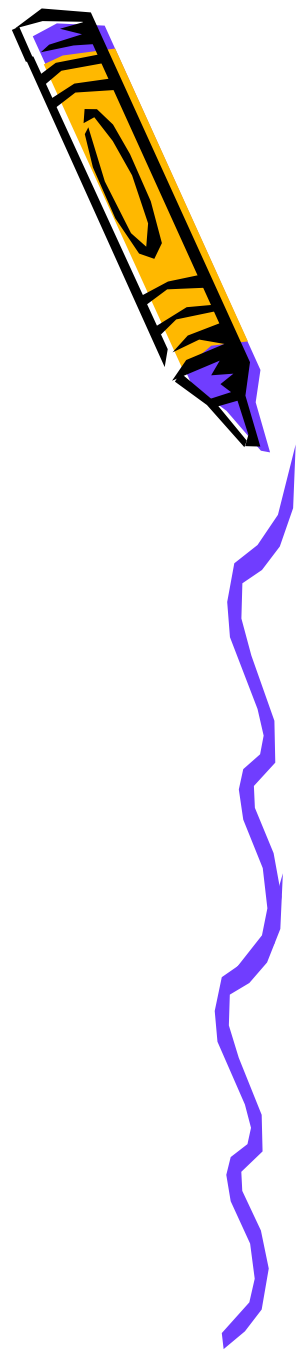
- A situation in which the psychological disturbance of one parent dominates the family's interactions.
- An unreal situation for family members is created so that the family can deal with one member's disturbance.



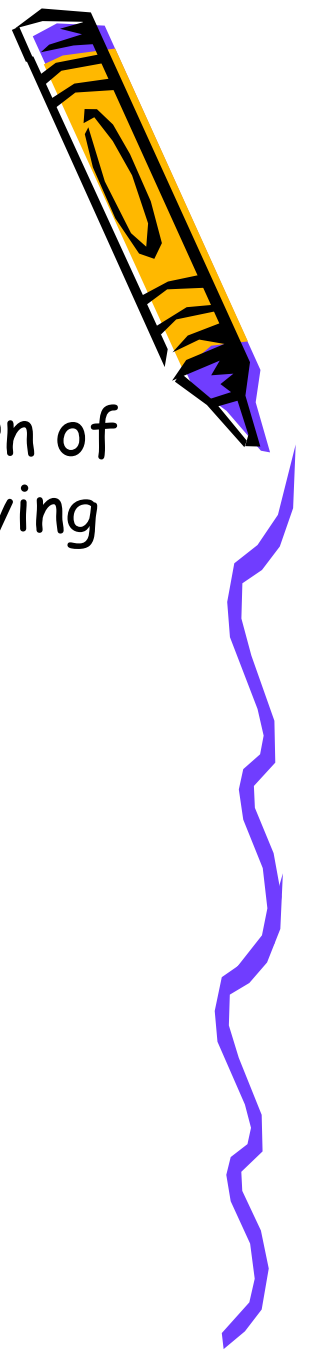
Pseudomutuality:

Presenting an appearance of open relationships in a family so as to conceal distant or troubled relationships within the family.

- Members develop roles that they play rather than relating honestly.



General Systems Theory



- Bertalanffy - Focused attention on the pattern of relationships within a system, instead of studying parts in isolation.



- Early family therapists, seeking a scientific model, were attracted to the notion that they attend more to the transactions taking place between family members than to separate qualities or characteristics of each family.



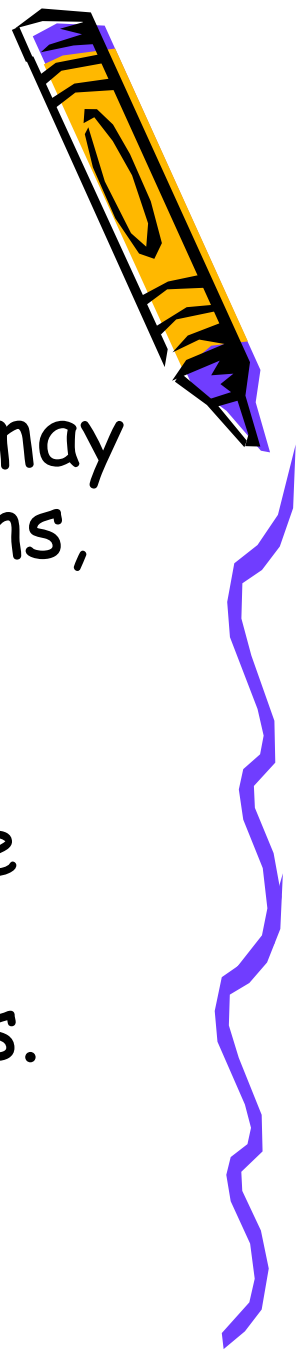
General Systems Theory



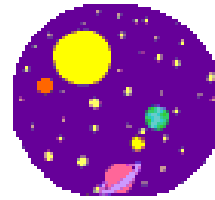
- A system represents a set of units that stand in some consistent relationship to one another.
- A system is organized around relationships.
- Elements (units) interact with each other in a predictable, "organized" fashion.
- Units, once combined form an entity - a whole, greater than the sum of its parts.
- Therefore, no element can be understood in isolation.



General Systems Theory



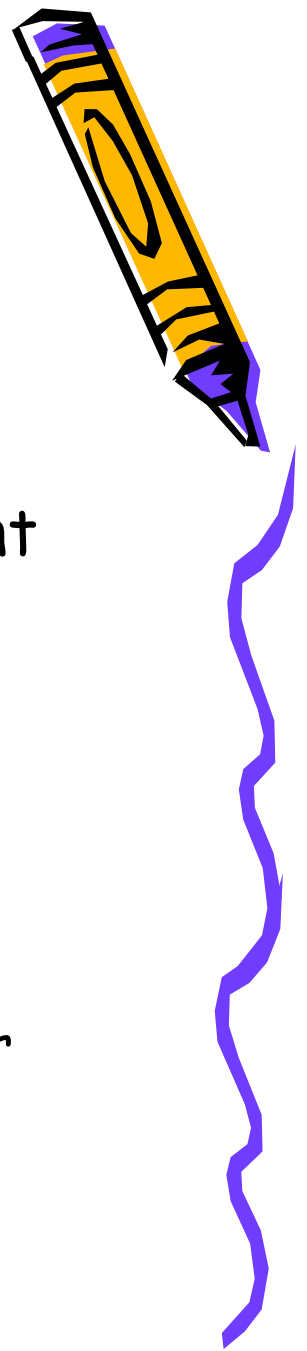
- The organization of relationships may include factions, alliances, coalitions, and tensions.



- The organization gives clues to the system's consistent or repetitive interactive patterns...known as rules.



General Systems Theory



- Family rules:
 - Family interactions follow certain persistent patterns - rules (Jackson, 1965)
 - Redundancy principle - a family interacts in repetitive behavioral sequences.
 - Rules may be
 - Descriptive - metaphors describing patterns of interaction.
 - Prescriptive - directing what can or cannot occur between members.



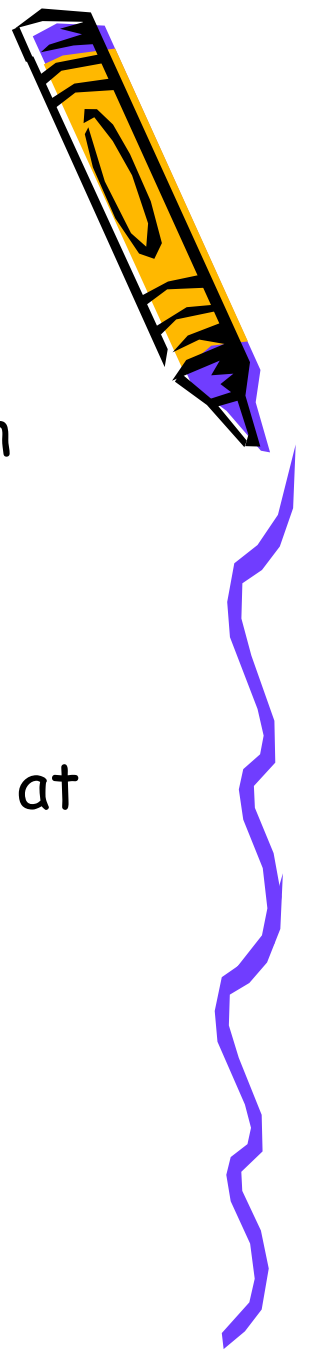
General Systems Theory



- How changes in one family member can bring about changes in another, by looking at the entire family as a unit.
- *Feedback*: the reinsertion into a system of the results of its past performance, as a method of controlling the system.
- *Negative feedback*: Information that flows back to a system to reduce behavior that causes disequilibrium.
- *Positive feedback*: Information that leads to deviation from the system's norm, bringing about change and a loss of stability.
- *equifinality*: the ability of a system to arrive at the same destination from different paths.
- *Homeostasis*: A dynamic state of balance or equilibrium in a system, or a tendency toward achieving and maintaining such a state in an effort to ensure a stable environment.



STRUCTURAL FAMILY THERAPY



- Minuchin looked at alignments and coalitions in the family.
- Focusing on current behavior, Minuchin looked at
 - family boundaries (permeability)
 - enmeshment vs. disengagement



STRATEGIC THERAPY



- Goals: To remove the symptoms that families bring to therapy.
- Therapist devises tasks to be preformed by the family:
 - Straightforward
 - Paradoxical



Important Terms in Structural-Strategic Therapy

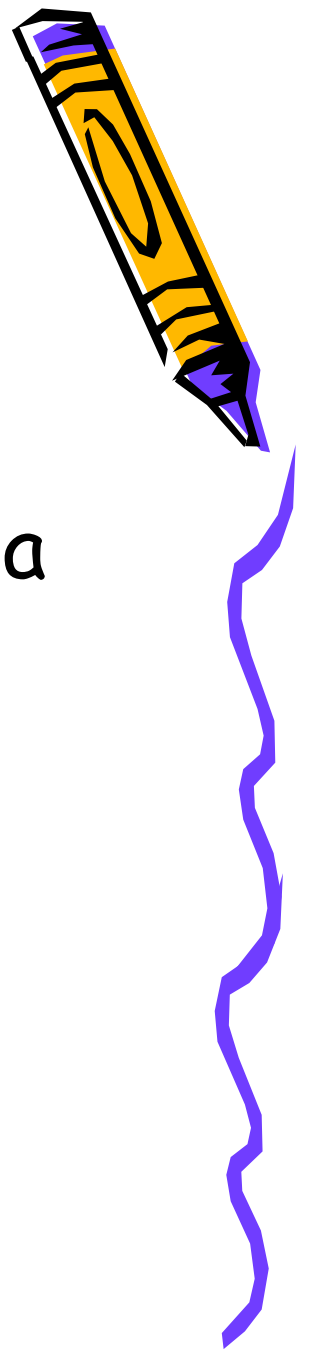


- *Subsystems.*

Grouping of family members that come together to perform various family functions.



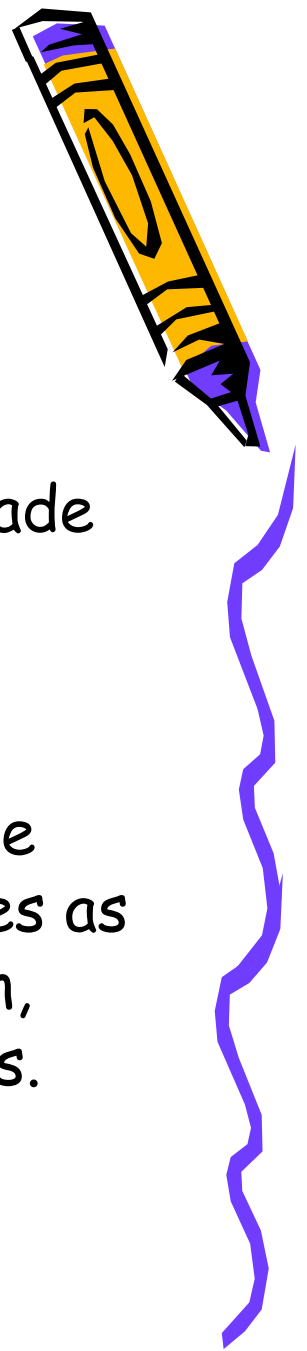
Hierarchy



A role- and generation-sensitive description of the organization of a family, especially in regard to the expression of love, authority, and caretaking.



Hard and Soft Hierarchy



- The hard side of hierarchy refers to the contribution to the organization of a family made by such activities as protection from others, setting the rules, and enforcement of consequences.
- The soft side refers to the contribution to the organization of a family made by such activities as soothing, expression of empathy and affection, initiating good times, and providing good things.



Marital Hierarchy



- The perceived balance of influence and contribution between spouses. In other words, each spouse's perceptions of whether each is contributing equivalently and whether each is appropriately open to the other's influence.



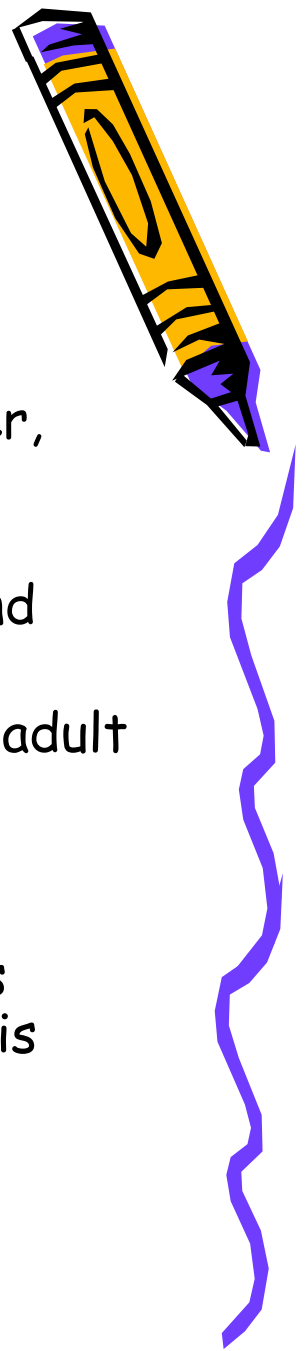
Boundaries



- The degree of emotional connection, dependence, support, and influence between different subsystems with the family, and between these subsystems and other social systems.



Overt role and function



- Overt roles are the self-proclaimed family roles (father, mother, child, etc.).
- Flexibility of the family is restricted when subsystems perceive significant contrast between the overt role and the actual function of a family member.
- An example might be a child who is required to take an adult level of responsibility for a younger sibling when such organization is not the cultural norm.
- IN such an example, the child has significant adult functioning; yet the overt role as defined by the child's emotional needs and ability to influence other matters is that of a child.



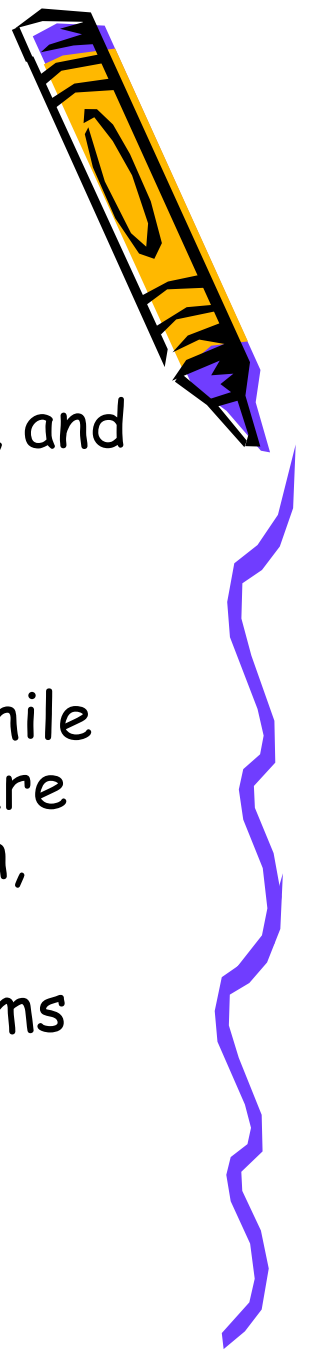
Subsystem overdependence



- A situation in which
 - (1) the fulfillment of interpersonal needs is primarily dependent upon a specific subsystem that is unable to consistently meet these needs over time; and
 - (2) alternative subsystems are not maintained in such a way that they can be easily accessed, should support from the primary system become unavailable.

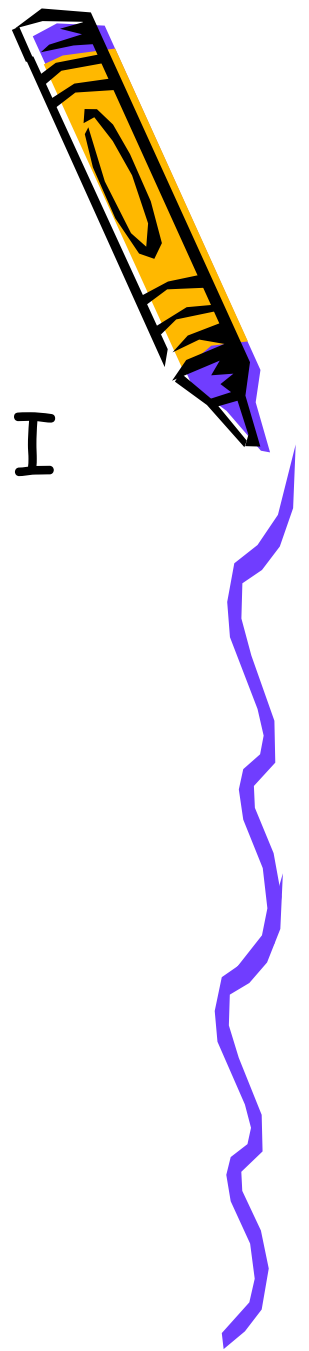


Enmeshment



- A situation in which the intimacy, dependence, and influence between specific subsystems is so intense that it
- (1) creates an overdependence between subsystems to fulfill some emotional needs, while handicapping access to outside systems that are necessary for subsystem growth, individuation, and development; and
- (2) reduces the ability of the family subsystems to adapt collaboratively to change.



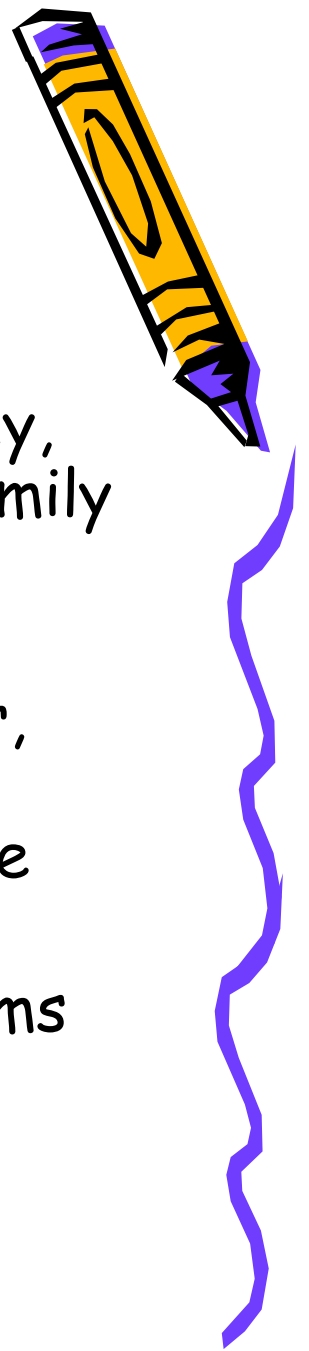


- "The curious paradox is that when I accept myself just as I am, then I can change."

Carl Rogers



Disengagement



- A situation in which the weak levels of intimacy, dependence, and influence between certain family subsystems
 - (1) prevent subsystems within the family from getting emotional needs met from one another, and creates an overdependence on other subsystems and outside systems to meet these needs; and
 - (2) reduces the ability of the family subsystems to adapt collaboratively to change.



Conflict Avoidance



- If we conceptualize boundaries between subsystems as a continuum in which one end is characterized by overinvolvement and the other by under involvement, then these concepts appear to be at opposite ends, serving opposite purposes.
- If, on the other hand, we draw this continuum of boundaries as a circle, the two ends touch. At the meeting point, they serve the same purpose - conflict avoidance. In effect, fighting, or the lack of it, is a collective attempt to remain at a level of intimacy that is known and comfortable.
- To resolve the conflict would result in a change...incurring the loss of the known, albeit unhappy, comfort zone for an unknown, less certain future.



Better to be quarreling than lonesome.
Irish Proverb



- Marital misery requires quarreling in such a way that nothing is changed and the quarreling must be repeated again and again.

Jay Haley (1996, p.126)



BOWEN'S INTERGENERATIONAL APPROACH



- Key concept = differentiation of the self
- Fusion vs. differentiation
 - A merging of thoughts & feelings in family members vs. knowing and accepting differences in yourself & family members



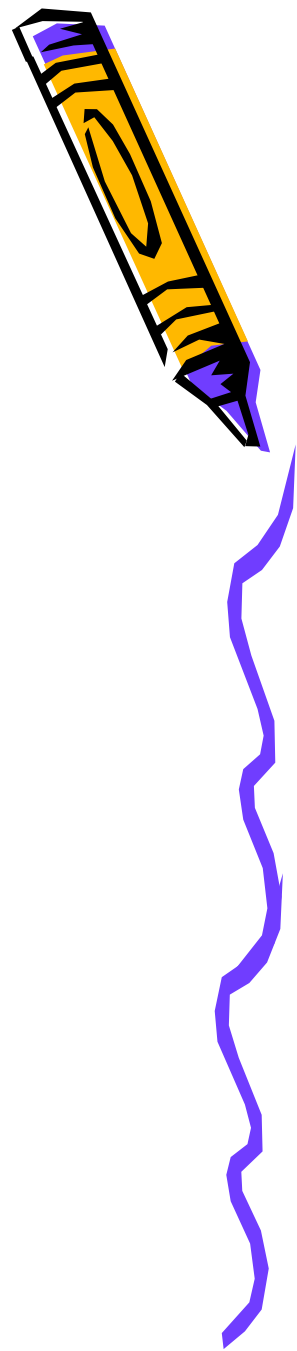
BRIEF FAMILY SYSTEMS THERAPIES



- The Mental Research Institute Brief Therapy (MRI) Model
 - Complimentary communication:
 - Symmetrical communication:
 - Punctuation:
- Long Brief Therapy of the Milan Associates
 - Circular questioning: An interviewing technique designed to elicit differences in perceptions about events or relationships from different family members.
 - Invariant prescription: A single directive given to parents, designed to create clear boundaries between parents and children.



EXPERIENTIAL & HUMANISTIC THERAPY



Narrative Family Therapy



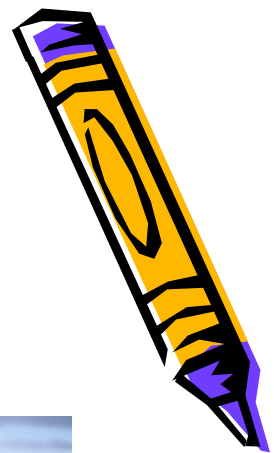
- If the therapist must have a theory of personality, then the most helpful one is that of an identity as a mental, abridged anthology of stories, any one of which can be replaced by a story from the total collection.

Therapy thus involves editing the abridged edition of perceptions of the present and past. A change in these perceptions is a change of shared perceptions is a change in the relationship.

Insoo Keim et al., (1990, p. 247)



Adopting a Family Relationship Framework



"Everyone has a context"

Milan Group





Reality Therapy:
CHOICE THEORY

Background

- William Glasser (originator)
- Developed in reaction to ineffectiveness of psychoanalysis
- Originally a non-theoretical, practical approach to problem solving
- Glasser proposed that two basic needs which are important
 - To love and to be loved





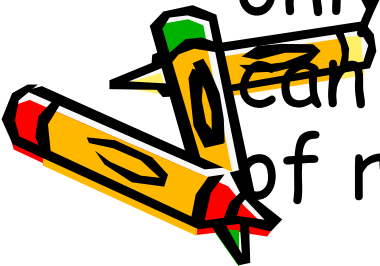
- Satisfaction leads to a success identity
- Non-satisfaction leads to a failure identity
- Influence of past experience
- Reality - the reality of one's behavior. Is your behavior getting you what you want?
- That is, is it allowing you to satisfy your needs for love and worth in a healthy way?.



PICTURES OF REALITY




- The perceptions and images that individuals have of the world around them influences how individuals' needs are met.
- We cannot know reality itself but only our perceptions which we then can compare to others' perceptions of reality.



NEEDS



- To satisfy needs that we have, we develop pictures of our reality.
- These are perceptions of people, objects, or events.
- Glasser believes that the perceptions we use to satisfy our needs are primarily visual.



The four basic psychological needs according to Glasser are *belonging, power, freedom and fun*



Belonging:

- The need to love, to share, and to cooperate with others.



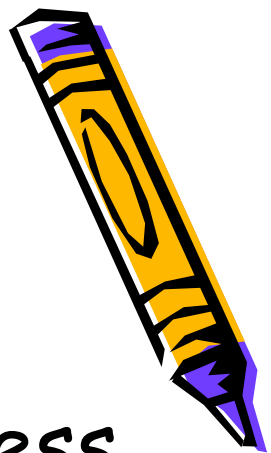
Power:

- The need to control others and be better than others.



Freedom:

- How we wish to live our lives, express ourselves, and worship.
- Included in freedom are also choices about who we associate with, what we wish to read or write, and how we wish to create or behave.



Fun:

- Included are hobbies and things we do for amusement such as sports, reading, collecting, laughing, and joking.



Needs often conflict with each other.

Friendship/belonging vs. fun



CHOICE



- Often choices are made without awareness that we are choosing.
- According to Glasser, we choose to be depressed.
- He prefers to say a person is not *depressed* but *chooses to depress* or is in the act of *depressing*.
- These choices are made without awareness.
- However, Glasser believes individuals can control their choices to depress, to anger, or to be anxious.



BEHAVIOR



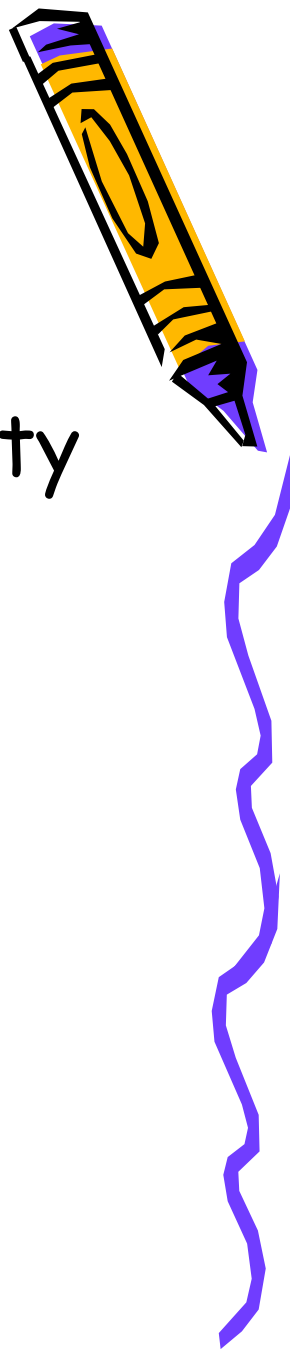
- For Glasser, behavior is how we act to deal with ourselves and the world around us.
- Individuals respond in very creative ways, sometimes very positive such as through music or art, and sometimes in negative ways such as through suicide or murder.



Total behavior:

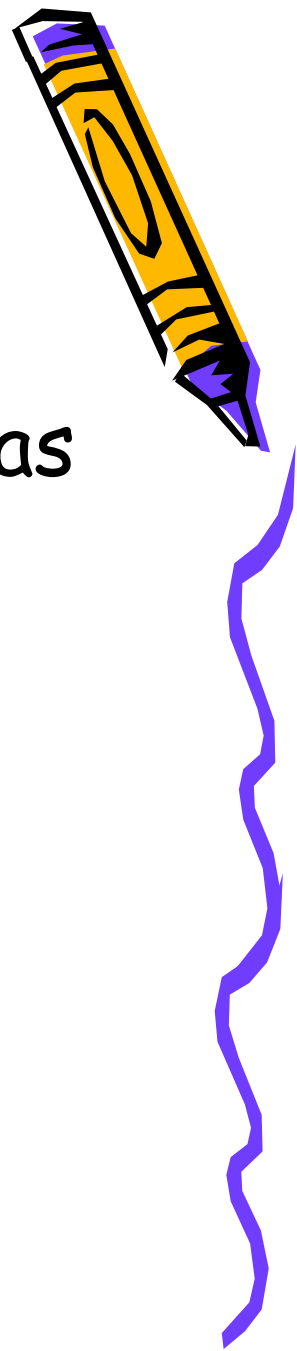
- Refers to four components in reality therapy:

Doing, thinking, feeling, and physiology.



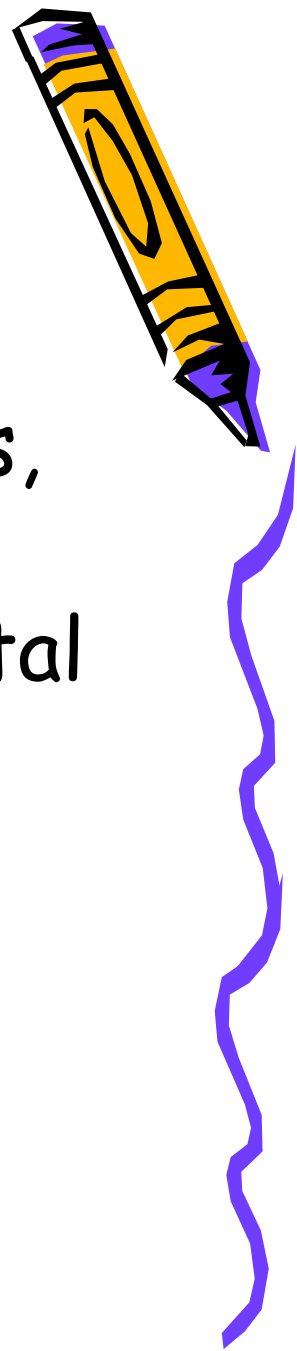
Doing:

- These are active behaviors... such as walking, talking, writing, or eating.



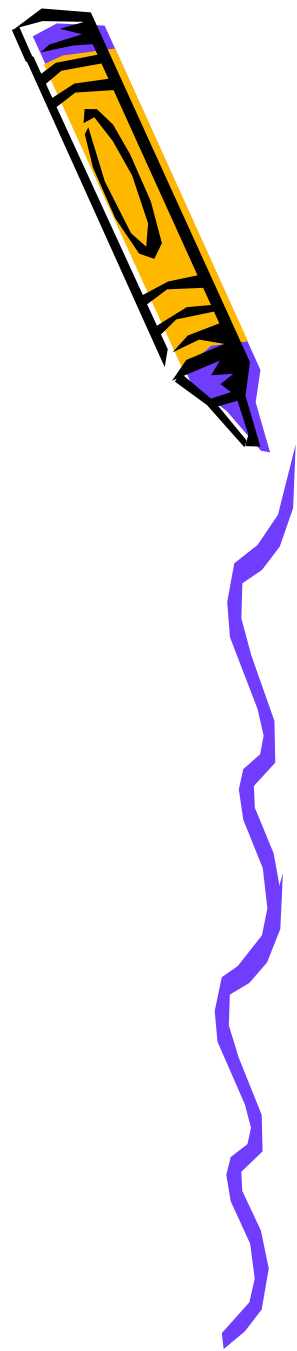
Thinking:

- Voluntary and involuntary thoughts, including daydreams and night dreams, make up this aspect of total behavior.



Feelings:

- Included are emotions such as happiness, sadness, anger, etc.



Physiology:

- Voluntary and involuntary mechanisms such as sweating, fight or flight stress responses, immune responses, etc. make up this aspect of total behavior.
- For Glasser, the key to changing behavior is in changing our doing, in particular, and also our thinking. These will bring about emotional and physiological changes.



CHOOSING BEHAVIOR

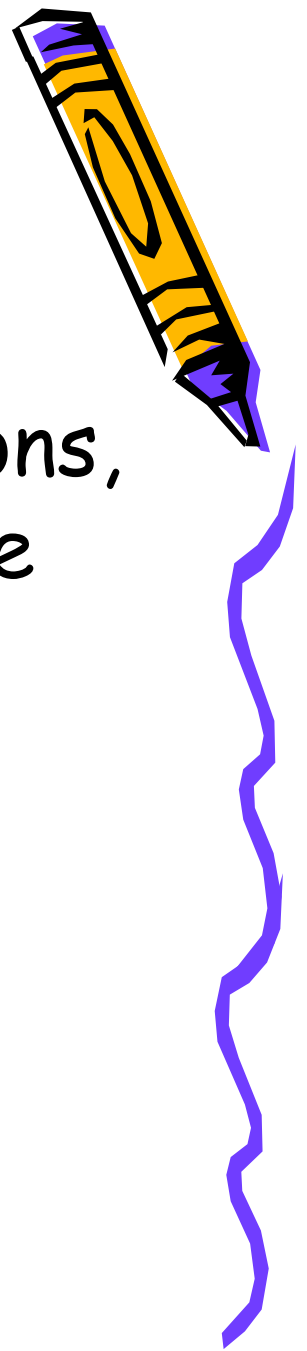


- Why would someone choose to depress, to be anxious, or otherwise to be miserable?
 - 1. By choosing to depress or anxietize, individuals can keep angering under control.
 - 2. People may choose to depress or anxietize to get others to help them.
 - 3. Choosing pain and misery can excuse an individual's unwillingness to do something more effective.
 - 4. Choosing to depress or anxietize can help individuals gain power or control over others.



CHOOSING BEHAVIOR

- Glasser sees hallucinations, delusions, and/or active behaviors as creative ones. These are behaviors that individuals choose (without awareness) to deal with various aspects of their lives.



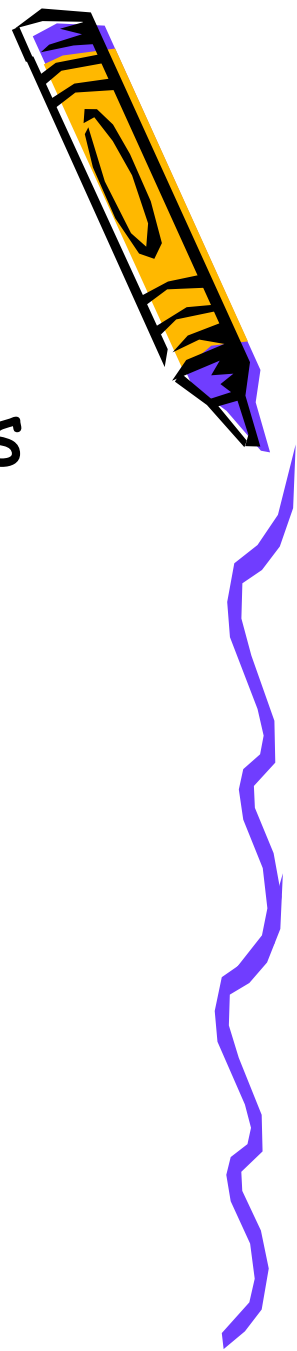
THEORY OF REALITY THERAPY



- Reality therapy puts the responsibility of choosing goals and following through with them on clients.
- A good relationship with clients ensures that clients see that therapists are there to help them make changes which will make positive improvements in their lives.
- Techniques are directed toward changing behaviors and focusing on strengths and accomplishments.



GOALS OF REALITY THERAPY



- The basic goal of reality therapy is to help individuals meet their psychological needs for belonging, power, freedom, and fun.
- These goals are met in such a way that they do not infringe on the needs of others.



The focus is on responsibility and choices

ASSESSMENT



- Reality therapists ask their clients what they want, what they “really want.”
- A persuasive answer is likely to be challenged by reality therapists.
- They would want clients to consider their future.



8 steps of Original Reality Therapy



1. Develop a relationship with client.
(Involvement)
2. Focus on behavior. Ask “what are you doing”?
3. Client evaluates his/her behavior. Ask “is your behavior helping you or getting you what you want”?
4. If not, make a plan to change your behavior.



5. Get a commitment to carry out plan. Perhaps sign contract. Sometimes just a hand shake.

6. Accept no excuses when plan is not carried out. Simply remind client of plan. Perhaps revise plan

7. Do not punish. Clients who fail already have a failure identity. Punishment does no good

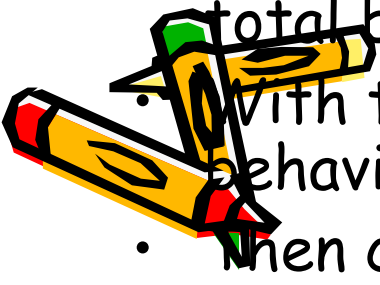
8. Never give up.



PROCESS OF REALITY THERAPY



- When changing behavior and making plans to change that behavior, the therapist establishes him or herself as someone wanting to help with that process.
- A friendly approach that shows the counselor is concerned and wants to be helpful continues throughout therapy.
- That provides an opportunity to explore client wants, needs, and perceptions.
- This then further provides an opportunity to examine total behavior, especially doing.
- With that as a basis, plans can be made to improve behavior.
- When commitment to plans can be obtained.



FRIENDLY INVOLVEMENT



- The therapist is open to talking about anything that the client and the counselor can consider changing.
- There should be an atmosphere of openness, optimism, and honesty.
- There would be more emphasis on what the client is doing rather than what the client is feeling.
- However, counselors do attend to the client's feelings and will not ignore them.
- Friendly involvement builds the relationship and establishes a commitment to counseling and planning.



EXPLORING TOTAL BEHAVIOR



- In exploring Ahmed's total behavior, which of the following questions are you most likely to ask?
 - 1. What did you do when your teacher asked you to get back into your seat?
 - 2. How did you feel when your teacher asked you to get back in your seat?
 - 3. What did you think when your teacher asked you to get back in your seat?
 - 4. How did you feel physically when your teacher asked you to get back in your seat?
- A reality therapist might ask about doing than thinking, feeling, or a physiological state.



REALITY THERAPY STRATEGIES



- Reality therapists do not emphasize specific techniques.
- However, they are more likely to use some techniques than others.
- Because of the focus on exploring and evaluating behavior, reality therapists are likely to ask many questions.
- They may also listen to client metaphors and make use of them when talking to clients.
- Because much of reality therapy focuses on making plans and commitment to them, using humor and being positive can be helpful in encouraging clients.

Confrontation helps therapists deal with clients when they do not follow up on plans.

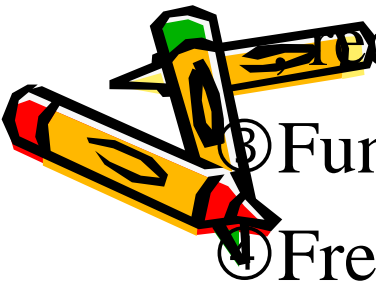
Paradoxical techniques are ways to help clients when they may be resistant to carrying out plans.



Basic Idea Generation



- Human behavior is purposeful and originates from within rather than from external stimuli
- The most fundamental needs that drive human behavior and are innate:
 - ① Belonging and love
 - ② Power (competence, achievement, self worth/esteem, recognition)
 - ③ Fun
 - ④ Freedom (independence/autonomy)



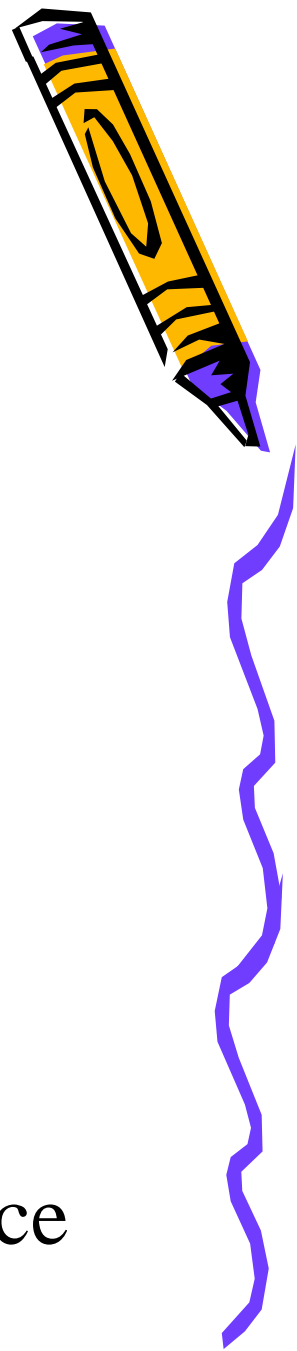


- Our brain serves as a control system for the satisfaction of these needs
- We work to control the world in order to fulfill these needs (mental pictures)
- As we do this, we choose our total behavior- doing, thinking, feeling, physiology



We create mental pictures of what we perceive will satisfy our needs






- The difference between what people want (mental picture) and what they are getting (reality) motivates and produces specific behavior
- This discrepancy often brings people to counseling

• In the new reality therapy (control or choice theory), the therapist . . .

1. Establishes a relationship by listening, being



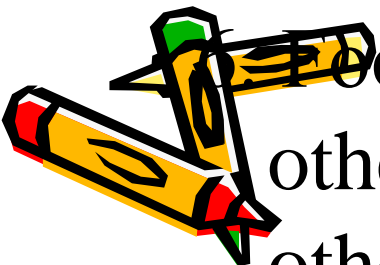
- 
- Asks: What is it you want? (mental pictures)
Are wants realistic? If not, may need to change mental picture
 - Asks: What do you really want? If you had what you want, what would you have?
(Uncovers basic needs)

3. Talks about reality approach - total behavior, choice, car analogy, and what therapist wants from client.





4. Determine level of commitment: Are you willing to work hard at the problem?
5. The therapist explores doing behavior. What are you doing? Clients may be asked exactly how they spend their time. Be specific - how did you spend yesterday?



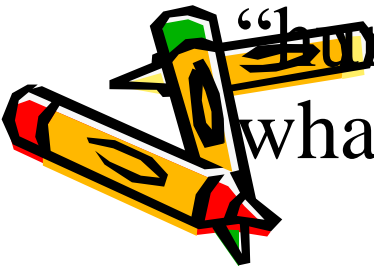
Focus on client's behavior not on how others are behaving. You cannot change others only yourself





7. Focuses on doing behavior as opposed to feeling behavior. Feelings are seen as the natural accompaniment of the doing aspect of behavior the client has chosen. (car analogy)

8. Seeks an evaluation from client. Is your behavior helping or hurting you in getting you what you want? Obvious answer is “hurting, not helping”. Again may ask - Is what you want realistic or obtainable?





9. Therapist helps the client to make a plan to change “doing” behavior. Plans should be simple, realistic, attainable, specific, and well thought out

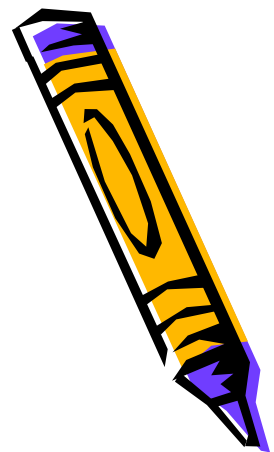
10. Client may be asked to write down plan or repeat it verbally. Perhaps sign contract

11. Client returns to talk about implementation and how it went

12. Accept no excuses, do not punish, never



QUESTIONING



- Questions can be used to help clients explore their wants, needs, and perceptions.
- They are also good approaches to understanding how the client thinks, to gather information, to giving information and making sure it's understood and in helping clients



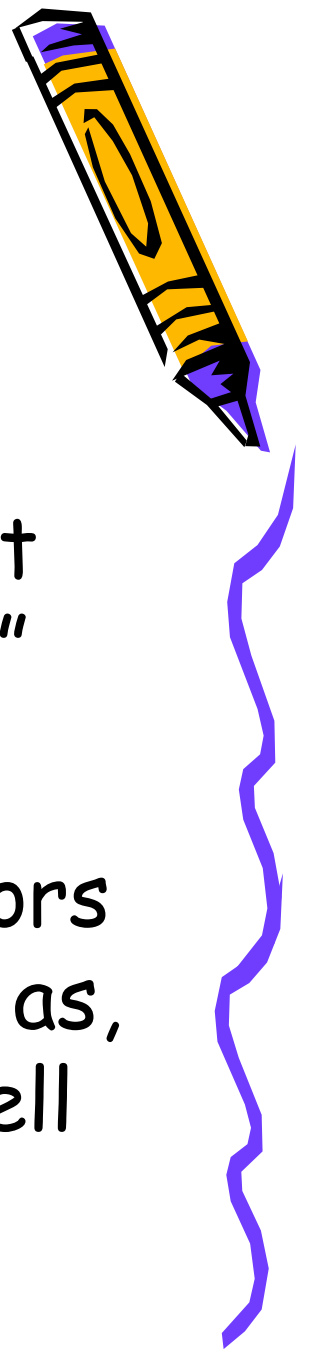
BEING POSITIVE



- Reality therapists take many opportunities to reinforce the constructive planning of their clients and their success in following through on the plans.
- Reality therapists may turn negative occurrences into positive ones by taking advantage of opportunities to communicate hope to clients.



METAPHORS



- When clients talk, they sometimes use metaphors such as "When I got caught, the whole world fell apart."
- Therapists listen to those metaphors and respond to the metaphor such as, "What happened when the world fell apart?"



HUMOR

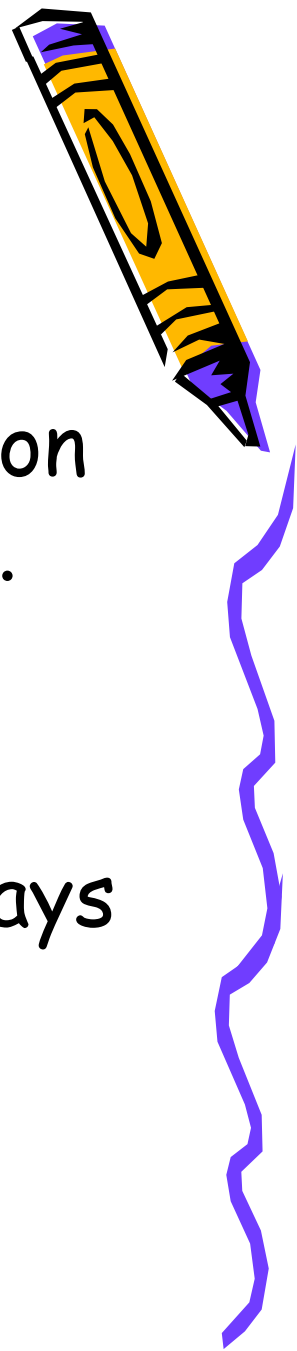


- Because humor is spontaneous and idiosyncratic, it can only occur at the moment so that it can fit in naturally.
- Humor is a part of friendly involvement as therapists can sometimes laugh at themselves which encourages clients to do the same.

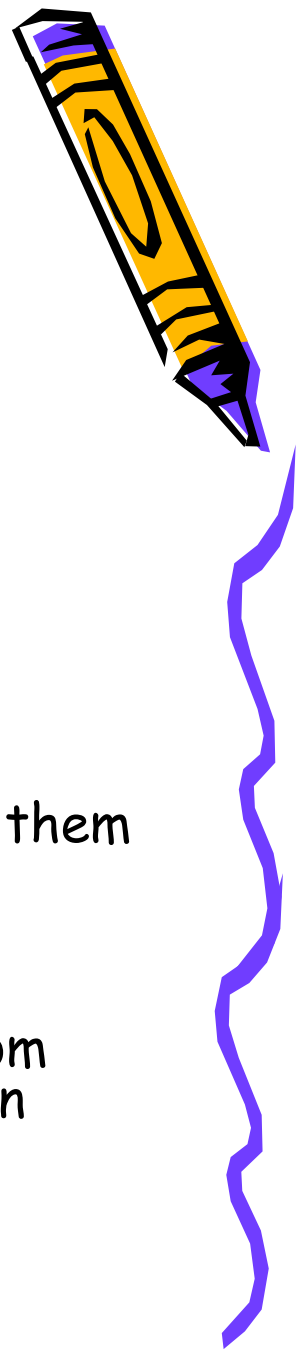


CONFRONTATION

- When clients don't follow through on plans, confrontation is unavoidable.
- Not accepting excuses, being positive, and using humor can be ways of confronting clients.



PARADOXICAL TECHNIQUES



- When clients are reluctant to carry out plans or resist making plans, sometimes paradoxical (inconsistent) techniques can be used.
- They are among the most difficult techniques for therapists to use because they are counter-intuitive.
- Reframing the way clients think about a topic can help them believe a previously undesirable behavior is desirable.
(like "spitting in the client's soup")
- Another paradoxical technique is to prescribe a symptom such as telling an anxious person to schedule times when they are anxious.





PEANUTS

AL / TUESDAY, APRIL 14, 1992 **D6**



ALL RIGHT, YOU STUPID BEAGLE, I WANT THAT BLANKET BACK!

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AND I DON'T MEAN NEXT MONTH, OR NEXT WEEK OR TOMORROW...



I WANT IT BACK TODAY!

WHAT TIME TODAY?

E. Seltzer

