

SKILL TRAINING IN COUNSELLING AND PSYCHOTHERAPY

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Abstract

Although Rational Emotive Therapy (RET) pioneered in some aspects of skill training, it recognizes some distinct disadvantages in making that approach the *modus operandi* of counselling. Both the advantages and disadvantages of a skill-training approach are discussed in order to clarify RET's position on the topic.

Résumé

La thérapie rationnelle-émotive a fait oeuvre de pionnier dans certains aspects du développement de compétences. Cependant, on reconnaît qu'il y aurait des désavantages à rendre cette approche le *modus operandi* de toute consultation. On discute tant les avantages que les désavantages de cette approche afin de clarifier la position de la thérapie rationnelle-émotive sur ce sujet.

Cliff Christensen, in the January 1976 issue of the *Canadian Counsellor*, has raised a very important question regarding the place of skill training in counselling and psychotherapy when he states that "clearly there is a trend toward the counsellor functioning more as a teacher who helps the client re-examine values, learn interpersonal skills, and develop understandings. This then becomes the content of counselling."

Let us assume that Christensen describes the current situation correctly, and that counsellors today, in opposition to the Rogerian trend of "nondirective" relating of the 1950's and 1960's (Rogers, 1951, 1961), and to the somewhat later trend of counsellor "empathizing" of the 1960's and early 1970's (Truax & Carkhuff, 1967), "are now actively developing and researching a skills approach to counselling" (Christensen, 1976, p. 46.) Certainly, a good deal of evidence supports this contention — as shown by the popularity of skill training in such diverse fields as sex counselling (Ellis, 1976a; Masters & Johnson, 1970); assertion training (Alberti & Emmons, 1974; Lange & Jakubowski, 1976); values clarification (Simon, Roths & Harmin, 1966); and micro-counselling (Ivey, 1977).

The question arises: Does this new trend in counselling mainly lead to good or bad results? Granted that skill training has become enormously popular, and granted that it has a great deal of precise and convincing research to confirm its effectiveness, does it truly have more advantages than disadvantages? Or, stated differently: Do we, as counsellors and therapists, lose a significant amount of our beneficial influence on our clients

when we resort mainly to teaching them coping skills?

Naturally, the writer has a biased view when attempting to answer these questions. Rational-emotive therapy (RET) pioneered in some aspects of skill training and has been used with disturbed and problem-plagued clients ever since it was originated in 1955 (Ellis, 1957, 1962a, 1962b, 1973, 1977). As the writer pointed out, to the great horror of most psychoanalytically oriented and Rogerian inclined therapists a good many years ago, RET practitioners frankly and openly show their clients how their irrational ideas create their disordered emotions and dysfunctional behavior; *instruct* them how to discover for themselves and to actively dispute their self-defeating cognitions; *teach* them how virtually all people needlessly upset themselves and how they can choose alternate methods of thinking, emoting, and acting; and *assign*, with these clients' consent, activity homework (usually in vivo behavioral pursuits) through which they can practice new forms of thought and action.

Theoretically, then, RET not only has no objections to various kinds of skill training, but has always espoused some of them. Along with Salter (1949) and Wolpe (1958), for example, it has stressed assertion training or interpersonal encountering exercises, and has vigorously coached many of its clients in practicing such skill-acquiring methods (Ellis, 1962a, 1962b). As a result of this active-directive emphasis of RET, critics have often accused the writer and his associates of foisting their values onto clients, when really they help the clients: to clarify their

own values; to get them to distinguish between their self-actualizing and their self-defeating philosophies and actions; to assist them in enhancing the former and diminishing the latter (Ellis, 1976; Morris, 1976).

For all its longstanding and strong prejudice in favor of values clarification and other forms of skill training, RET recognizes some distinct disadvantages in using this procedure as an important aspect of counselling and therapy. An outline of some of the main advantages and disadvantages of a skill-training approach to counselling would make the RET position in this connection quite clear. The advantages are as follows:

1. A skills approach comprises a distinctly cognitive, and a very important cognitive, method of resolving emotional problems. Perhaps lower animals or very young children become "conditioned" to disturbed ways of reacting by external environmental influences. But older children and adults, as RET centrally holds, cognitively or self-talkingly accept the irrational beliefs that others "indoctrinate" them with and rarely give them up without cognitively understanding and continuously disputing them in their heads and in their actions. Perhaps fifty or sixty major cognitive methods of therapy exist, all of which RET at times employs. One of them, skill training, *teaches* people how to communicate more effectively, both with themselves and others, and supplements other effective cognitive counselling approaches.

2. Skill training indirectly leads to profound ideological or philosophic changes in clients' attitudes toward themselves. Thus, as the writer has shown, and as other leading cognitive-behavior therapists have indicated (Beck, 1976; Goldfried & Davison, 1976; Lembo, 1976; Lazarus, 1971, 1976; Mahoney, 1974), people who have not *yet* done something adequately or well, frequently convince themselves "I can't do it, and therefore I am hopeless," "Since I have failed so far, I'll *always* fail,) or "Because I can't do what other people do, I am a rotten person who doesn't really deserve anything good in life." As we show in RET, these self-statements or irrational philosophies lead to enormous harm; and since they consist of nonsequiturs or beliefs which our clients cannot back up empirically, we can teach them how to dispute or refute them, and how to prevent themselves from creating new self-defeating ideas of this nature. One way, albeit sometimes inelegant, of showing clients the falseness of such beliefs lies in training them to do what they "can't" do; helping them to succeed when they have "always" failed; and showing them that they can perform, often, as well as "other people" can.

Skill training, in other words, brings about

behaviors that contradict people's cognitions about the "impossibility" of their doing something about their "inadequacies." It therefore often leads to cognitive restructuring or profound philosophic change. In learning how to assert themselves, succeed at sex, or achieve other desirable goals, people frequently change their basic attitudes toward their abilities and toward their "selves." This kind of attitudinal change, in fact, rather than the acquisition of the desired skill itself, may represent the main therapeutic element of skill training.

3. RET holds that no matter how often or how vigorously humans dispute their irrational philosophies they are unlikely to substantially change these views unless they literally act, move, or behave against them. Philosophic change almost always requires behavioral change (and vice versa). For that very reason the writer, as an RET practitioner, invariably not only shows shy, non-encountering individuals that they don't *have to* succeed at social relations or view it as *awful* and *terrible* and themselves as *worthless persons*, if they fail, but simultaneously gets them to try various ways of relating so that they will *see* how they can bear failure and not put themselves down. In skill training, even though trainers may not specifically go through the cognitive restructuring part of RET with their clients, they often *implicitly* do. A trainer's basic attitude includes the idea that clients *can* succeed and if they don't, well they simply don't: the world will hardly come to an end. The trainer communicates this attitude *along* with the training. Moreover, as noted above, clients *discover* by succeeding and by failing that their world *doesn't* come to an end; and they give up the idea that it will. So the behavioral *practice* that skill training procedures encourage and assign often creates or abets profound attitudinal change on the part of the client.

4. What we call *feelings* or *emotions* distinctly ameliorate or change as we *act* against them. Thus, if the therapist shows the shy, non-encountering client referred to in the last paragraph, that she need not put herself down or feel worthless if she fails to get along well with a male whom she wants to relate to, she will "intellectually" often agree. But she may still "feel" so uncomfortable that she won't do the encountering and the therapist encourages her to do and thereby "feel" comfortable while doing it. But if the therapist gives her, through role-playing, modeling, in vivo exercises, and other skill training methods, instruction in how to encounter males, and if he actively pushes her into trying some relating skills, she eventually will tend to relate much more easily, freely, and "spontaneously." She will probably also "forget herself" or "lose herself" when going through the exercises, and do

much better than she at first *thinks* she can do. Through this kind of activity-oriented modeling and in vivo homework, her "emotion" of nervousness and inhibition will often tend to disappear and perhaps get replaced by other "emotions", such as feelings of comfort, absorbing interest, excitement, and enjoyment. The skill training methods, consequently, not only help her change ideologically or philosophically (as noted above) but also emotionally. Active practice at a task that she thinks she "can't" do or "can't do well" helps her think *and* feel radically different about her abilities and her "self".

5. Skill training, unlike individual or regular group psychotherapy, can often take place in large groups — of from thirty to two hundred (or even more) people. The therapy that occurs during such a process, therefore, has great practical and economical advantages. One or two counsellors or therapists can help many people at once; and even if this doesn't represent complete psychotherapy (since some of them may still require individual and group counselling, too,) it certainly may serve as an important part of the counselling process and involve relatively little cost.

6. Skill training leads to the invention and use of superior teaching methods, including the use of audiovisual aids, reading materials, and other educational techniques. It links counselling with the very important field of schooling and general learning and encourages counsellors to make themselves aware of and to effectively employ many timetested educational methods that may well add to the efficiency of the counselling process.

7. The use of skill training honestly and openly acknowledges what really goes on, often unconsciously and hypocritically, in individual and group counselling. Psychoanalysts, experiential therapists, and relationship therapists tend to deny that they actively teach their clients how to act in the therapy situation or in their day to day lives. Nonsense! When we listen to their tape recordings or read their verbatim transcripts of sessions, we invariably find that they constantly teach, instruct, explain or otherwise directly educate their clients or engage in some forms of behavior (e.g., getting along well with other people) and to desist from other forms (e.g., fighting regularly with others). When counsellors and therapists consciously and openly resort to skill training, they often overtly do what they had previously covertly done, anyway. For such members of the helping profession to do what they do openly and honestly rather than slyly or covertly seems to me a healthy process that will help the entire profession.

8. "Nondirective" or "relationship" therapy frequently upholds the myth that only through

this type of procedure can clients truly get involved in the therapeutic process and thereby authentically help themselves. But a great deal of evidence from other types of therapy, such as RET and classical behavior therapy, shows that clients often become *more* involved with homework assignments and with relating to people outside of therapy (rather than mainly to their therapists) can they do in relatively passive forms of counselling. In skill training, client involvement frequently reaches unusually high peaks; and the kind of involvement that people achieve, moreover, seems directly related to what they want to accomplish in their own lives, outside of therapy, than what they want to accomplish with one particular counsellor or one particular therapy group. The writer doesn't recall any Ph.D. studies on this subject, but surmises that if and when they get done, experimenters will find that clients who participate in more active, homework assigning therapies, such as skill training, tend to get even more involved in changing themselves and improving their life conditions than do those involved in less active and what we might call more indulging therapies. That, at least, constitutes the writer's hypothesis.

We can see, from the above points, that skill training, as an integral part and parcel of counselling, has pronounced advantages. But what about some of its actual or potential disadvantages? Some of these are listed below:

1. When skill training sticks strictly to its own last and does not involve some of the specific cognitive restructuring that cognitive-behavior therapies like RET involve, limited or inelegant change tends to result. Thus, if a therapist works with the shy, non-relating woman mentioned above and only teaches her techniques of encountering and relating better to males, and if she follows these teachings and works at effectuating them in her own life, she will almost certainly make some distinct philosophic changes, too. But these may occur at a somewhat superficial level; and she may easily, especially under stressful conditions, fall back to her old self-defeating ideas.

Thus, if she strongly believes as most inhibited people do, that she *has to* succeed in relating to others and that she is an inferior *person* if she doesn't, perhaps she will partly give up this idea when she learns to relate better. But if she then falls in love with a particular man with whom her relating techniques simply do not happen to work and if he unequivocally rejects her, she will very probably return to thinking along these lines: "I didn't learn how to relate well *enough*; and what proves I'm no damned good!" "I failed with him in spite of my using good relating techniques; so there must be something essentially rotten about *me*." "Now that I've learned such good methods of

communicating and relating, he *should* appreciate me; and if he doesn't, there's something wrong with him and he's no good!"

In other words, the skill training that is given to this woman will help her to get along better with many others and she will therefore put herself down *less* than she previously did. But it won't really get at some of the philosophic roots of her self-castigation, and to some degree will cover them up. Therefore, by this training, she has only been given limited help. Some RET or other forms of cognitive restructuring must also be added!

2. People who gain better techniques of presenting themselves and achieving what they want in life through skill training can feel good about themselves for the *wrong* reasons, and still have severe emotional problems. Thus, if any skilled trainer helps John Jones to use the sensate focus and other behavioral sex techniques to overcome his problem of impotence, John may feel great or have increased self-esteem because he tells himself, "How marvelous! I can now succeed admirably at sex, where previously I kept failing practically all the time. This means that I'm truly a fine person, better than other men are, and more deserving of leading a happy existence."

If John believes this, he increases his "self-esteem" mainly or only by doing well. Which means, of course, that as soon as he starts doing poorly again — at sex or almost any other important performance—he will quickly begin to down himself. For if he considers himself a "fine person" when he performs well, how can he help considering himself a "rotten person" when he once again performs badly? His "self-esteem" hardly equals what in RET we call full "self-acceptance" — meaning, the determination to accept oneself *whether or not* one does well or poorly and *whether or not* other people accept one for doing well or poorly (Ellis, 1971, 1972, 1977; Ellis & Grieger, 1977).

Skill training alone, in other words, may help clients feel better but not get better — or feel better for mistaken ego-centered reasons that mask their still remaining feelings of real inadequacy. Pride, remember, often goeth before a fall; and the pride that skill training often encourages, unless accompanied by something like an RET-oriented mode of cognitive or philosophic restructuring, has enormous dangers as well as impressive gains.

3. Perhaps the worst disadvantage of skill training arises from the fact that it seems a little too easy and often leads too quickly to perceived results. The writer, can, for example, teach almost any sexually inadequate individual whose inadequacy arises from psychological problems to do much better with his or her partners in a matter of a few sessions — often one, two, or three sessions.

The writer merely shows him or her, as described in *The American Sexual Tragedy* which was published in 1954 (before Masters and Johnson even started their researches), how to define sex as any kind of mutual stimulation leading to arousal and orgasm, and how to concentrate on pleasuring one another instead of striving mainly for perfect performance. This kind of skill training works very well, as indicated by literally hundreds of "cured" clients during the last thirty years.

Unfortunately, however, unless these clients are persuaded to change some of their basic self-downing ideas, they often "succeed" so quickly that they prematurely say goodbye to the therapist and quite gratefully go off to a life where most of the time, they still rate themselves on their sexual and nonsexual performances and still have a considerable degree of emotional disturbance. Similarly, the writer has spoken to literally hundreds of people who think they have benefited immensely by a few workshops on assertion training but who still feel exceptionally hostile to others (sometimes *more* hostile than before) and who are still very self-castigating when they fail.

Still training, then, leads to too easy a "victory" for the many people who "succeed" at bettering their performances; and because they now do better or feel better they wrongly think that they have fully conquered their emotional difficulties. For this reason, the writer, personally no longer does his original form of sex therapy without *first* helping his clients do some goodly degree of anti-musturbation and anti-awfulizing. The clients are shown, in a typical RET manner, that they don't *have to* succeed at sex (or anything else) to accept themselves and lead a happy existence; and that *nothing* proves *awful* or *terrible*, but only highly inconvenient, when things go wrong. With this kind of philosophic background, they not only learn the skill training somewhat better but they realize that it doesn't by any means solve all their emotional problems, and they usually tend to go on to more pervasive and long-lasting philosophic solutions.

4. Skill training when done in a classical non-RET-oriented manner, almost always leads to significant slipbacks and retrogressions. If we show people how to go about losing weight, many of them will soon learn this — and then later gain the weight back. If we teach them how to improve their communication or have better sex with their mates, they will make great improvements for a period of several months — and then slide back to using their new-found skills only rarely, and sometimes practically never. Some people become habituated to the new skill and keep it up forever; but many others do not. With cognitive restructuring, however, counsellors can show clients that (1) they do tend to fall back because of their human tendency to do so; (2) they can accept

themselves *with* their retrogression and refuse to condemn themselves for falling into it; (3) they can almost invariably start practicing their skills again and get back to their original level of improvement; (4) they had better, to a large extent, accept the idea that skill training comprises an ongoing, continuous, ever-renewing process: that steady and continued discipline finally wins the race — and keeps it won.

Skill training *temporarily* helps people overcome their lack of discipline or low frustration tolerance — and that constitutes one of its main advantages. People, probably because of their innate tendencies to give in to inertia and to do many things the easy rather than the hard way, refuse to do many tasks that they fairly easily can do and that they would find rewarding if they did. Skill training shows them how to do such tasks in a systematic, one-step-at-a-time manner; and it often, at least in the beginning, carries with it an enthusiasm that helps people to get going and to keep going. In the final analysis, new skills often become routine and relatively boring to continue; these skills either fall into disuse or find only sporadic employment. If, therefore, those who learn such skills do not also acquire a philosophy of higher frustration tolerance, and the willingness to consciously sacrifice some present pleasures for future gains, the temporary boost that they get from skill training may eventually erode.

5. Skill training, like the process of counselling itself, may easily become an end in its own right, rather than a means toward the end of human health and happiness; and both trainers and trainees may overdo it and turn it to foolish extremes. Almost anyone, for example, may learn the skill of casting horoscopes; millions of people, alas, do become proficient at this ostensibly valuable but actually useless and often pernicious "skill." Countless others, today, also get enormously skilled in Yoga, food faddism, hot rod car driving, drug taking, and other pursuits whose benefits and disadvantages have hardly been checked by hardheaded research. Skill training techniques like microcounselling provide us with distinctly improved methods of training counsellors to give their clients empathy and warmth (Ivey, 1977). But do we really know whether saving client's souls with massive amounts of empathy and warmth will result in emotional health — or increased whining and dependence?

Many years ago, Robet S. Lynd (1939) asked a very trenchant question: *Knowledge for what?* Granted, he said, that we now know how to educate people fairly well in many important respects, what do we want to educate them *for*? To compete better with each? To produce more material goods? To lord it over others who have less knowledge? Or — perhaps! — to help them

make themselves, as humans, happier and more self-fulfilling?

An extremely relevant question! — and one that no one, including the leaders of the skill training movement in counselling, as yet seem to have answered. In RET we have our own answer. Let us not, we say, teach or train people merely to function better — for hell knows to what peculiar or nefarious ends they may turn their better functioning (as, for example, did Hitler and Stalin). And let us not, we rational-emotive therapists again say, mainly teach people to live individually and socially happier lives only or mainly by the principles of reinforcement, and especially by those of social reinforcement. For this kind of conditioning or teaching largely depends on human suggestibility and gullibility: on their doing *x* because others approve or their refusing to do *y* because others disapprove. By this kind of training, overconformity and underindividuality easily results.

Let us, instead, more forthrightly encourage people to *choose* the kinds of basic values and goals that they personally want; and to *select* self-training in the kinds of skills that will probably most appropriately and efficiently abet their chosen values. But this kind of choosing and selecting involves a more comprehensive kind of skill training process than we (as counsellors or other kinds of instructors) usually provide: a training method that involves, at every stage of the way, continual thinking and rethinking, a constant readjustment of both ends and means, and a self- and other-directed learning process that includes many complicated information gathering techniques and feedback loops.

In RET, we see this process of human living and adjusting, as well as the primary *modus operandi* of counselling, as inevitably and triumphantly cognitive. Just about all skill training, as noted above, primarily rests on a cognitive base. But in an even broader sense, skill training in the field of counselling had better include teaching clients the more complex cognitive skills of viewing their fundamental goals and values, clarifying and assessing the ramifications of these values, noting the practical results (both beneficial and pernicious) to which they led, at times willfully and intentionally changing these goals and values, and constantly reconsidering and modifying the specific skills and the specific skill training methods that seem to promote human health and happiness.

This kind of cognitively arrived at, appraised, revised, and constantly rerevised skill training will, in the writer's opinion, add to the usefulness of this highly effective counselling method and, will hopefully, minimize some of its present day limitations and dangers.

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