The Multicultural theory and the Rational Emotive Behavior Therapy

Seattle University

Luisa F. Zapata

COUN 511

Abstract

After carefully examining all of the theories of counseling inside and outside of class, I have chosen to work with two theories that will complement each other in preparation for my work with clients. These theories are the multicultural theory and the rational emotive behavior therapy. My goal as a therapist is to externalize all the negative messages people from different backgrounds and different beliefs have internalized from society. I also want to work to make individuals aware of the oppression they have experienced so they can stop blaming themselves for their circumstances and empower them to be part of the solution to better their lives.

**Introduction and Rationale**

As the class has advanced, my opinion has changed often in regard to a theory that will best work for my future clients. After reading and learning about each theory, I have decided that the multicultural approach and the rational-emotive-behavior therapy (REBT) will complement each other in helping clients with diverse backgrounds. The multicultural theory is crucial in counseling due to a fast increase in populations coming from different cultures and sexual orientations. According to Laungani (2005), when persons leave their own cultures and emigrate to another, they do not leave behind their cultural norms and values (p. 250 ) for this reason, it is crucial to use techniques of therapy that stimulate an open communication where the counselor is able to recognize each client’s persona and attributes in order to achieve a respectful relationship. The multicultural counseling therapy (MCT) stresses the importance of the environmental –contextual factors such as the family, culture, community, and societal factors that affect how clients see the different types of problems they encounter in their lives (Ivey, D’Andrea, &Ivey, 2011, p. 497).On the other hand, “REBT is an approach that focuses more on dysfunctional thoughts and rational problem solving” (Ellis, 2001, p. 17). Clients with irrational beliefs will act according to these beliefs, making it difficult to change their behavior. The responsibility of the therapist is to change that thought process that in turn will change their behavior and help clients gain insight into their cognitive processes.

I chose these two counseling theories because I believe individuals’ decisions, reactions feelings, and behaviors are connected to a broader range of factors outside their own person and by ignoring them, we are only helping them partially. From their environment, messages of racism, sexism and some other stereotypes get internalized by the individual and it is at this point where irrational thoughts govern the individual’s minds and affect his behavior. These two theories are compatible with the way I think because I would like to actively help my clients find what is keeping them from moving ahead in a positive direction. According to Johannes and Erwin (2004) “the days where it was believed that the theories and practices that were best for one group of clients would be just as good for another are gone” (p. 330) with the arrival of the multicultural approach, a deeper understanding of the cultural beliefs and values of individuals has been considered by counselors in a greater extent. On the other hand, REBT according to Ellis and Grieger (1977) is “an excellent theory of mental health and philosophy of life” (p. 259). Many different psychologists such as Zimbardo, Bandura, Lazarus and some others have appeared to support the view that, in general, human emotion and behavior include cognitive mediation and for the most part have important cognitive origins. (Ellis, & Grieger, R. 1977, p. 37).

**Health, Dysfunction and Multiculturalism**

According to Ellis, and Dryden (1997), in the multicultural approach, dysfunctional individuals blame themselves for their circumstances without realizing the outside factors that contribute to their conditions; they have internalized messages of oppression and believe they are not worthy of helping themselves (p.10 ) . On the other hand, what constitutes a healthy individual is a person that knows that social influences have not allowed him to ameliorate his situation. The individual then goes through a liberation process, which permits the person be part of the solution to better his life. An example could be immigrants been liberated from the fear of institutions such as schools, and hospital, which do not allow them to self-advocate (Ponterotto, Casas, Suzuki, &Alexander, 1995, chapter 4).

In REBT however, humans strive to meet different life goals and purposes which leads to a more content life. Nevertheless, if these life goals take longer than what the individual is expecting, irrational beliefs occur in the individual’s mind. These irrational thoughts are expressed in “must’s” “should’s” and “ought’s “. These thoughts lead to negative emotions which interfere with goal pursuit and attainment. (Ellis, and Dryden, 1997 p. 6) which in turn causes dysfunction in an individual. According to Ellis and Dryden (1997), REBT suggests that at the heart of neurotic disturbances lies the tendency of humans to make absolutistic evaluations of different events in their lives (pg. 14); all the must’s, should’s and ought’s are the thoughts that interfere with our goals. To make an individual healthy, the counselor has to help them diminish these demands and irrational thoughts.

REBT suggests that the origin of the dysfunction in clients is the creation of irrational thoughts about an event that occurred to them, without the realization that the root of these thoughts is the beliefs they hold about the event and not the actual event itself. According to Ellis (1977), blaming the activating event for the consequences that follow, does not let the clients look at their belief system (p. 7). An example that Ellis provides is losing a job; if an individual is not at risk of losing his job, but the false idea comes to mind, the beliefs about the possibility of losing the job could drive this individual to depression. Ellis and Grieger explain that “a philosophy of relativism or desiring is a central feature of psychological healthy humans” (pg.29), only when these desires and wishes become demands, the clients will become psychologically disturbed.

**Process of Change**

In the multicultural approach, the first step for change is for counselors to focus on the issues of racism, sexism, and other forms of cultural oppression and social injustice perpetuated in society (Ivey, 1995, p. 66). As briefly discussed before, the process of change is associated with individual’s liberation; a liberation that helps individuals learn to perceive social, political, and economic contradictions (Ponterotto et al., 1995, p. 213). The book by Ponterotto et al.(1995) uses the process of change within the clients stated by Paulo Freire. The first step comprises clients that enter therapy and blames themselves for their circumstances. The second step is for the counselor to listen and to use imagery as a tool to help the clients review critical life events; this is to move them to a more conscious level. At the third stage, clients are likely to become angry with the idea of an oppressive environment that has made them believe they are the ones to blame for their circumstances. The fourth stage consists of having the counselor teach culturally-appropriate assertiveness training. This means teaching the client to be more confident in speaking up for his rights or expressing his point of view to someone they might see as an authority. The fifth stage involves individuals who become weary of being resentful against society and others, and are also aware of external issues that affect them. In the next stage, it is primordial to help the client develop a cultural identity which could be attained by using feminist theories in the case of a woman.

The process of change in REBT is a positive one due to our capacity to choose working against irrational thoughts. In Ellis and Dryden (1997), it is said that the long-lasting changes involve philosophic restructuring of irrational beliefs (p. 24). The first step according to Ellis and Dryden (1997) towards change consists of making the clients aware that they create their own psychological disturbances. Ellis does not disregard the environment; nonetheless, he says it is not the primary source for having irrational thoughts. The second step is helping clients understand that they have the ability to change their own disturbances. The third step is to have them understand that emotional and behavioral disturbances exist largely from irrational, absolutistic, beliefs. Next, the counselor detects the irrational beliefs and differentiates them from the rational ones. After doing this, the counselor disputes them by using realistic and logical methods and therefore, acting against them. Once these irrational thoughts are externalized, the internalization of new and effective beliefs takes place. Moreover, the counselor employs other methods of change such as behavioral and cognitive strategies. Subsequently, the clients have to remain aware of irrational beliefs and employ different methods in their everyday life.

I believe that the process of change in these two theories is similar. Both require making the client aware of the thoughts and messages they have internalized in their mind that are not allowing them to think and behave in desirable ways.

**Therapeutic Goals**

The therapeutic goal of the multicultural approach is to observe the individual in a larger context; acknowledging their uniqueness, but also understanding that they are part of a larger group, such as a particular race, social class or religion. The multicultural approach helps clients view their problems in context and sometimes allows family members to participate in the treatment process. According to Ivey et al. (2010), “the major goal is to create consciousness of how different power arrangements affect marginalized groups by taking away privileges and disempowered them”(p. 118). Not using western theories is another goal of this approach since they look at the clients’ problem as if it they lie within them and disregard the environmental influences.

On my research, I was able to find a couple different goals set for REBT. According to Ellis and Dryden (1997), the major goal of REBT is to help clients pursue their long range basic goals and purposes and to help them do so as effectively as possible by fully accepting themselves and tolerating unchangeable uncomfortable life conditions. Ellis and Grieger (1977) express that the another goal of REBT is to leave clients with a minimum of anxiety, anger, guilt, depression, and self-blame and to give them a method of self-assessment that will not allow them to have these feelings for the rest of their lives (pg. 189) The last therapeutic goal I found, is for Ellis to assign homework to the clients toward the end of the therapy to ensure that the client is taking action as a result of participating in therapy. For example, as Ivey et al. stated, since Ellis supported gay and lesbian clients who wanted to be more active within the community, he would give these clients homework to help them build awareness of the gay pride (p. 333).

**Therapeutic Alliance**

In the multicultural approach, an egalitarian relationship with the client is very important; however, this relationship has to be modified when working with individuals from a traditional culture. According to Sue and Sue (1998) there are cultures that see therapists as experts, in these cases, therapists have to sit back and take the lead role. There has to be an empathetic and respectful relationship between the counselor and client in order to connect at a deeper level; this will help them develop the tools they need to analyze factors that contribute to their sense of disconnection and marginalization which will help them take an active role in their lives.

In REBT, the relationship with clients is not a significant factor. Nevertheless, according to Johnson (1980), one of the goals is for therapists to accept their clients unconditionally as human beings that often act self-defeating because of their thoughts, but also as humans that are essentially good. However, Ellis’s therapeutic style came across as rude; he did not spend a sufficient amount of time building rapport with clients and he did not mind if clients could alienate themselves from the therapy.

When I first studied this theory, I knew that I could never be discourteous to clients if I wanted to gain their trust. However, research indicated that therapists do not have to act the same way with clients as Ellis did. According to Johnson (1980), “counselors who are more supportive and less confrontational can also effectively use REBT principles (p. 49). Johnson argues that new counselors should not try to imitate Ellis’s style, but should try to adapt the different REBT techniques to their own personalities. At the same time, Ellisand Dryden(1997) advised therapists to not be extremely friendly and emotionally charged with a hysterical client, or overly directive with clients whose sense of autonomy is easily threatened (pg. 29). The counselor needs to accommodate the different techniques in REBT depending on each individual.

**Role of Counselor and Client**

Because the multicultural approach looks at the individual in context, the role of the counselors is not to just work with the individual but also with the extended networks, such as schools and greater communities where culturally diverse clients are part of. For example, if I am working with a client in a school setting who is not doing well academically because she believes she does not fit in given the fact that she is from a different ethnic background, I would want to talk to her teacher or even observe the class just to see how she is being helped. I would want to know about her culture and her family and how all of this affects her academic work.

One very important role is for therapists to become aware of their own assumptions about human behavior, values, biases, notions they have about a certain culture and their limitation. According to Sue and Sue (1998) counselors need to understand how oppression, racism, discrimination, and stereotyping affect their clients’ lives and their personal lives as well (pg. 38). For a counselor to be able to help a client from a marginalized group, he needs to possess specific knowledge and information about this particular client. Learning some of the cultures and beliefs this client holds can be extremely beneficial for the therapy. By knowing this, they will develop appropriate intervention strategies to truly help the client and eventually should be able to eliminate biases, prejudices, and discriminatory practices.

Conversely, REBT counselors have a more active and direct role where they discover the source of the clients’ psychological problems. Also, the counselor shows them that they can confront and change those irrational thoughts that do not let them enjoy life. Even though this form of counseling may appear authoritarian, its purpose is to encourage and help the client attack those thoughts. Ellis and Dryden (1997) state “the therapist strives to teach the client how to be his o o wn therapist once formal therapy has ended” (pg. 27). The therapist shows the client that he is, in fact, not self-determined but that he does have the choice to work on his disturbances. Therapists strive to help clients obtain the skills they can use to prevent the development of future disturbances.

**Techniques and Approaches**

In the multicultural approach, there is a technique called the Person-in-Culture-Interview (PICI) used to avoid stereotyping (Ivey at al. 2010, p. 115). This interview is designed to provide a cross-cultural experience that is sensitive to cultural issues without stereotyping any particular individual. According to Ivey et al. (2010), it is a one-on-one, open-ended, 24-item-interview with the purpose of exploring individuals with culturally different backgrounds by asking each person to share their worldviews with each other. According to Ponterotto et al. (1995), “the philosophy behind the interview is that there are basic needs in all humans and that the method by which those needs are met is culturally derived” (p. 341). Another technique used by therapists is psychoeducational/life-skills training interventions such as stress management, family planning, career education and conflict resolution classes, to meet the needs of all people from different populations. The RESPECTFUL counseling model is a tool that can be used to assess the multidimensional nature of clients, their development and challenges (Ivey et al. pg. 119). By doing this, therapists can assess the interaction of the factors contained in this model, find the strengths and challenges of the client and as a result develop a treatment plan. The treatment plan can include inside and outside activities for the individual to perform. “This approach may include designing a strategy of empowerment” (Ivey et al. pg. 120)

For REBT, as mentioned earlier, homework is a behavioral technique that Ellis tended to use for all of his clients. This would assure him that the clients were trying to change their irrational thinking. According to Ellis and Dryden (1997), the major cognitive technique is the dispute of irrational beliefs. There are three subcategories of this technique: the first one detects the must’s, should’s and ought’s within the person; the second one consists of debating, where the therapist asks numerous questions that are designed for the client to give up such irrational beliefs. Lastly, the third subcategory is based on discriminating, where the therapist helps the client differentiate between his nonabsolutistic values such as his needs, wishes, desires and his absolutistic values such as his demands. REBT also uses rational-emotive imagery techniques where clients gain practice at changing their unhealthy negative emotions to healthy ones while maintaining a vivid image of the negative event. Different emotive techniques include humor, self-disclosure where they admit they have problems that they can overcome by using REBT; therapists have clients use vigor when they are in the role of their rational “self” to dispute the irrational beliefs articulated by the irrational “self”.

**Multicultural Considerations**

In REBT I was able to connect with multicultural considerations; however, this theory receives many critiques. In my opinion, when working with clients from a different background and identity orientation, there should be a dispute regarding all the irrational beliefs these clients have about their lives. REBT can externalize all the negative messages that have been publicized by social institutions and society in general to marginalized clients. According to Ivey et al. (2010), the critiques from the multicultural approach address Ellis failure to advocate for environmental changes; it discusses that REBT does not apply to every culture since there are cultures that would not appreciate a confrontational therapist. REBT may conflict with religious or spiritual beliefs and their connection with family and culture (pg.338).

**Social Justice**

The multicultural approach is the first step into facilitating empowerment in clients, not only at a personal level but also at a community level. When clients realize that they can be part of the solution to their problems, they will most likely be aware of situations where they are being oppressed. If they lack the capacity or the strength to advocate for themselves, they can look at their communities and different organizations that can guide them. One of the goals of this theory is to wake clients up from a nightmare where they find themselves to be responsible for their problems and where their voice does not count, to a reality where practitioners help them develop skills to deal with the different obstacles they face in their lives that do not allow them to move ahead in their lives. According to Sue & Sue (2008), social justice holds the assumption that the interaction between the person and the environment is very important when treating problems (p. 288). Clients are not perceived as a single entity; instead, they are viewed as part of a larger society where they are surrounded by their families, social groups, communities and institutions. The multicultural approach is very much connected to social justice and change because the person is seen within a context. Sue & Sue (2008) explains that “social justice and counseling therapy are aimed to produce conditions that allow for equal access and opportunity for education, health care, employment, and other conditions” (pg. 293). Depending on the situation, I will have to balance my in-office and out-of-office interventions. There will be times where I could be visiting other schools to either gain or give ideas to implement support groups for teenagers in marginalized communities.

As previously mentioned, REBT is the beginning of a process that can lead to social justice. Because the theory does not promote social change but promotes internal change within the individual, it cannot be expected to work for social justice alone. This is why both REBT and the multicultural approach will complement each other in my work with diverse populations.

**Critique**

Even though the multicultural approach incorporates social justice, there seem to be certain limitations about it. This approach asks for a highly competent therapist that is knowledgeable about traditional counseling, who also develops an understanding of the multicultural approach, and becomes knowledgeable of the specific needs, wishes, and developmental histories of many different diverse groups (Ivey at al. 543). Another limitation is that it may seem easy for a counselor to leave every bias behind when helping marginalized clients; however, in reality it is complicated to do. The strength of this theory, however, is that it makes us deal with the reality of diversity and take action.

For REBT, some of the limitations are associated with the therapist holding the power during a therapy session. We decide what is rational or irrational and expect the clients to accept what we say. The problem with this, as mentioned above, is that we are not taking into consideration their cultural values; many individuals make decisions based on their religion and cultural values. According to Johnson (1980), one of the strengths of REBT is that the ABC approach of REBT can be used by therapists that do not necessarily use REBT in a very deep level. The biggest limitations with REBT are related to multicultural critiques which were discussed earlier in this paper.

**Application**

I intend to work in a school setting with high school students. I would like to pay special attention to marginalized groups and create a sense of belonging for students that may be thinking of dropping out of school. This usually is seen the most within the Hispanic community. Instead of blaming them from their lack of interest in school, I want to understand in depth their thought process and if stereotypes about the Hispanic community are to blame for their circumstances. In an article written by Gonzalez et al. (2004) it is stated that REBT works very well with children and adolescents in that it is equally effective for children with and without an identified problem, therefore this study suggests that REBT may be useful for both intervention and prevention (p. 232). With the multicultural approach, I feel that I will be able to be active in promoting activities that will benefit these teenagers such as clubs or classes and curriculums that address cultural differences and respect towards others. REBT seems to be a theory that requires spending quite some time with each client in order to see progress but I believe it is possible. In the study by Gonzalez et al., “REBT had its greatest impact on children’s and adolescent’s disruptive behaviors” (Gonzalez et al. 2004, pg. 233))

**Reflection**

Writing this paper helped me reflect about the role I want to play as a school counselor when I start practicing. After studying all the theories throughout the class, I was finally able to find the two theories I feel connected with the most and that fit my objectives and personality. I was able to picture myself helping clients in my own personal way while applying the different techniques. At the same time, I found this assignment very helpful and fun; I found it intimidating in the sense that it sets what I am going to focus on for the next two and a half years of my life. I was definitively able to learn a great deal of information about these two theories that we did not discuss in class.

**Future Direction**

Even though I read about both REBT and the multicultural approach, in my opinion, practice is elemental in order to successfully help clients. Theory is indispensable but can be overwhelming when attempting to memorize all the techniques without being able to practice. I have to focus on truly learning each technique and combine them in order to be successful during therapy.

**References**

Ellis, A. (2001). *Overcoming destructive beliefs, feelings, and behaviors.* New York: Prometheus Books.

Ellis, A., Dryden, W. (1997). *The practice of rational emotive behavior therapy.* New York: Springer Publishing Company.

Ellis, A., Grieger, R. (1977). *Handbook of rational –emotive therapy*. New York: Springer Publisisng Company.

Gonzalez, J. E., Ron Nelson, J. J., Gutkin, T. B., Saunders, A., Galloway, A., & Shwery, C. S. (2004). Rational emotive therapy with children and adolescents: A Meta-Analysis. *Journal of Emotional & Behavioral Disorders*, *12*(4), 222-235.

Ivey, A. (1995).Psychotherapy and liberation: Towards specific skills and strategies in multicultural counseling and therapy. Ponterotto, Casas, Suzuki &Alexander (Eds*.), Handbook of multicultural counseling* (pp. 53-88). Thousand Oak, London, New Delhi: Sage Publications.

Ivey, A. E, D’Andrea, M.J, Ivey, M. B. (2011). *Theory of counseling and psychotherapy: A multicultural perspective.* (*7th Edition*). LA, London, New Delhi, Singapore, DC: Sage Publication.

Johannes, C. K., & Erwin, P. G. (2004). Developing multicultural competence: Perspectives on theory and practice*. Counseling Psychology Quarterly, 17(3), 329-338.*

Johnson, N. (1980). Must the rational emotive therapist be like Albert Ellis?. *Personnel & Guidance Journal, 59(1), 49.*

Laungani, P. (2005). Building multicultural counseling bridges: The holy grail or a poisoned chalice?. *Counseling Psychology Quarterly, 18(4), 247-259.*

Ponterotto, G, Alexander, C.M., Grieger, I. (1995). *A multicultural competency checklist for counseling training programs.* LA: Sage Publication.

Sue, D. W., Carter, R. T., Casas, J.M., Fouad, N.A., Ivey, A.E., Jensen, M., LaFromboise, T., Manese, J.E., Ponterotto, J.G, Vazques-Nutall, E. (1998). *Multicultural counseling competencies.* Thousand Oak, London, New Delhi: Sage Publications.

Sue, D.W., Sue, D. (2008). *Counseling the culturally diverse: Theory and practice.* New Jersey: John Wiley & Sons, INC.