REASON AND EMOTION IN PSYCHOTHERAPY: THIRTY YEARS ON

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Albert Ellis founded rational-emotive therapy (RET) in 1955. His influence in the field of psychology is now such that in a survey of the American Psychological Association's clinical and counselling psychologists, published in 1982 (Smith, 1982), he was rated the second most influential psychotherapist (behind Carl Rogers, but ahead of Sigmund Freud). In another study (Heesacker, Heppner & Rogers, 1982), he was the most cited contributor of works published since 1957 in three major counselling journals over a twenty-seven year period, and a very recent study of Canadian clinical psychologists showed that Ellis was their most influential psychotherapist followed by Carl Roggers and Aaron Beck (Warner, 1991).

Reason and Emotion in Psychotherapy was Albert Ellis's first published book on RET as a system of psychotherapy. It appeared in 1962 and is still the most frequently cited reference on RET. Actually, the book is a collection of previously published papers and although Ellis worked on these papers to enable them to be published in book form, the text lacks the coherence of a work prepared especially for publication. Nevertheless, it is still recognised as a classic (Heesacker, Heppner & Rogers, 1982) and thirty years after its first publication merits detailed study. While many central features of RET theory presented in a book remain in place today, it is in the nature of the theory that it

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encourages flexibility. This quality has permitted a good deal of revision of the 1962 ideas - developments which have cleared up ambiguities and emphasised aspects of RET which Ellis only alluded to in 1962. This paper examines some major ideas presented thirty years ago, and points out developments which have modified and extended the theory of RET and its therapeutic applications.

RATIONALITY

In 1962, Ellis defined his theory's central tenet of rationality. He said that rational means that which aids and abets human happiness, is consistent with reality, and is logical. Rational thinking, therefore, tends to greatly minimise emotional disturbance. In 1962, Ellis also set out how rational-emotive theory views emotional disturbance. He said that emotional disturbance results when individuals acquire and re-indoctrinate themselves with illogical, inconsistent and unworkable values. These three criteria of rationality and irrationality and their implications for human emotional disturbance remain current and basically unchanged since 1962.

HUMANISTIC-EMOTIONAL EMPHASIS

Besides the well-known cognitive-behavioural roots of RET, a humanistic-existential view is found in its concept of humans. RET sees humans as neither superhuman nor subhuman, and it considers all people equal in their humanity. While RET believes that biological and, to a lesser extent, social forces determine our psychological makeup, it argues that we retain much free will and choice in forming our emotional well-being. Moreover, we can increase our emotional health and happiness by adopting a policy of long-range hedonism. Longrange hedonists make decisions and act to increase their happiness over time. Short-range hedonists, on the other hand, strive for immediate happiness and gratification, opting to satisfy current frustrations at the probable expense of achieving future and longer-term happiness. Of these humanistic-existential foundations of RET, all are to be found in the 1962 text with particular emphasis being placed on the importance of striving for long-range hedonism. Today, the humanistic-existential roots of RET are more prominent and better integrated with its cognitive-behavioural features than hitherto.

PSYCHOLOGICAL INTERACTIONISM

In 1962, Ellis noted that psychological processes such as cognition, behaviour and emotion are interrelated. This hypothesised interaction remains current in RET's understanding of human psychological functioning, although the complexity of relationships among these processes and their interaction with the environment is more to the fore now that it was thirty years ago (Ellis, 1991).

Frequently, people wrongly claim that RET maintains that cognitions cause emotions. This linear relationship, however, belies the complexity of the cognition—emotion interface, and RET has never considered it valid. Instead, certain cognitions and emotions are deemed in RET to overlap and are interrelated in such a complex manner that they become practically indistinguishable from each other.

In 1962, Ellis differentiated between cognitions which are calm, dispassionate appraisals of events, and those which are uncalm, strong, evaluative appraisals of events. The latter are called emotions. RET theory still considers this distinction applicable, but more modern terms are now used. Thus, calm, dispassionate appraisals of events are called cold cognitions, and uncalm, strong, evaluative appraisals of events are now termed hot cognitions. The concepts remain the same, but the descriptive terms are different. This distinction helps us to understand more clearly that it is hot cognitions which significantly overlap with emotional experiences.

Having made the point that from the outset Ellis stressed the interrelatedness of cognition, emotion and behaviour, it is also true that he has always stressed the central role of cognitive processes in this trinity. To quote one of my students, Michael Neenan: "in RET theory, cognition is often primus inter pares—first amongst equals—in this holy trinity".

THE ROLE OF EVALUATIVE THINKING

One of the most significant changes in RET theory over the last thirty years clarified what type of beliefs is at the core of emotional experiences. In 1962, Ellis stated that a person's attitudes, interpretations of events, or what events mean to them, largely determine emotions. Note how general these cognitions are. As we shall see, Ellis is now much more precise about the type of cognitions that is involved in emotions. In addition, he occasionally mentioned in the 1962 book that

situations or events themselves could directly determine emotions (e.g., "Married neurotics . . . tend to get upset by their mates' errors and stupidities" (Ellis, 1962, p. 208)). Given that Ellis was vague about the types of cognitions which are centrally implicated in emotion and given that he sometimes implied that cognitions are not important at all in determining emotion (i.e., by stating that situations or events can directly upset people), the reader of the 1962 book is bound to be confused about the precise determinants of emotional experiences. Readers of RET texts today are not likely to be confused by such contradictions.

Today, RET sees situations and a person's interpretations of events as less important in determining emotions than a person's evaluative beliefs. These evaluative beliefs are the hot cognitions discussed above. Ellis defines evaluations as judgements or appraisals about interpretations. So, for example, Mary says something unflattering about Jane, and Jane interprets this comment as insulting and becomes angry. According to current RET theory, Mary's comment does not cause Jane to become angry. Likewise, Jane's interpretation of Mary's comment, as insulting, does not cause her to become angry. Rather, Jane's evaluation of Mary's comment is the cognition that most clearly accounts for her anger. Jane's anger-producing evaluation probably goes something like this: "Mary absolutely must not say those things about me, and it is awful that she does. Further, her comments prove what a horrible person she is".

As seen, RET now differentiates between different types of thinking, or cognition. Current theory takes Ellis's original description of how people's cognitions determine their emotions, and further specifies it by dividing these cognitions into three levels (Wessler and Wessler, 1980). At the first level, descriptions occur. Here, for example, Jane notices that Mary spoke words and directed these words towards her. This type of cognition represents the descriptive level in that Jane only notes, or records, what occurs. At the second level of cognition, people make inferences about their recorded descriptions. For example, Jane determines what Mary's words mean about her (i.e. they are insulting). Note that up to now, RET hypotheses that this inferred insult does not fully explain Jane's anger. Her anger occurs at the third and final level of cognition called the evaluative level. At this level, Jane evaluates her inference of Mary's comment. She decides where it is positive, negative, or neutral, and as we shall see later, appraises the information flexibly or rigidly. So, compared to 1962, RET theory now more specifically delineates the cognitive processes

which are involved in people's disturbances and keenly discriminates evaluations from inferences and descriptions. It also stresses the central role that evaluations play in colouring the inferences which people make about themselves, other people and the world (e.g. Dryden, Ferguson & McTeague, 1989).

Ellis describes this process from inference to evaluation to emotion as the ABC's of RET. In this model, A stands for an event or a person's interpretation or inference of that event, and the evaluation of this A occurs at B. A person's B, or evaluative belief, represents his or her judgement or appraisal about A. B then leads to C which stands for the emotional and behavioural consequences of holding the evaluative belief. Again, RET theory now places much more emphasis on the complex interactions between A, B and C than it did in 1962 (Ellis, 1991).

EGO DISTURBANCE AND LOW FRUSTRATION TOLERANCE

Current RET theory distinguishes between two types of emotional disturbance and notes that these different types commonly interact. In 1962, Ellis noted that global, negative evaluations of the self lead to emotional disturbance. He later called this ego disturbance. Now, he and other RET therapists argue that an additional, central component of emotional disturbance exists called low frustration tolerance (LFT). People with a philosophy of LFT make themselves disturbed, for example, by believing that they cannot stand or bear frustration. They frequently sabotage their progress in therapy by not working to change themselves because they believe that such work is "too hard". A philosophy of LFT basically describes emotionally disturbing beliefs related to undesirable life conditions. Ego disturbance alone could not explain this area of emotional disturbance. The concept of LFT allows rational-emotive therapy to account for a much broader range of emotional disturbance than it could with ego disturbance alone. In 1962. the concept of LFT was mentioned only once (Ellis, 1962, p.419) and an alternative term "I can't stand it" also appears only once—"Oh my Lord! How terrible this situation is . . . I positively cannot stand it!" (Ellis, 1962, p. 76). LFT (or discomfort disturbance—to give it its other name) has a central role in RET's current theory of psychological disturbance and this marks a significant development since the publication of Reason and Emotion in Psychotherapy.

THE ROLE OF THE MUSTS

Throughout this article, I have noted that beliefs greatly determine emotional health. What do these beliefs contain, however, which lead to people making themselves emotionally disturbed? Ellis now states that evaluations lead to disturbed negative emotions particularly when they contain a must, and that these musts lie at the core of emotional disturbance. Musts are unconditional, dogmatic, absolutistic demands that the universe obey one's proclamations. They designate statements in which preferences and desires are transmuted to rigid commands which must, have to and absolutely should occur. Evaluative beliefs that are not rigid are preferential in nature and do not contribute to emotional distress, although they may lead to healthy negative feelings when one's desires are not realised, as we shall see later. Preferential evaluative beliefs also promote constructive behaviour leading to fulfilment of one's goals. RET currently states, therefore, that preferential evaluative beliefs maintain and promote emotional health. Escalating these preferences into musts results, however, in emotional disturbance. While this view appears in embryonic form thirty years ago, it is at the core of RET theory today.

In 1962, Ellis used the term "should" much more frequently than the term "must" to exemplify irrational beliefs, while the converse is true today. The reason for this shift concerns the fact that "should" has several different meanings while "must" clearly points to rigidity and demandingness. The word "should" can mean "preferably should", "empirically should" or "ideally should"; moreover, it can represent a recommendation and it can also point to demandingness. As Ellis saw more clearly that the essence of emotional disturbance was absolutism, rigidity and demandingness, he increasingly used the term "must" and decreasingly employed the term "should" to represent this essence.

AWFULISING

In 1962, Ellis hypothesised a process known as awfulising as a major cognitive determinant of emotional disturbance and references to this process in *Reason and Emotion in Psychotherapy* are more frequent than references to the role of musts in such disturbance. However, it is probably true that in 1962, Ellis maintained that musts and awfulising have an equal role in explaining emotional disturbance.

Sentences, therefore, such as: "I must be liked by everyone", and "It would be awful if everyone does not like me", would be seen by Ellis in 1962 as containing the same amount of power to produce emotional disturbance. Today, however, RET maintains that musts are primary in their ability to effect emotional disturbance and stemming from this "musturbatory" philosophy are secondary processes which people use to draw conclusions about themselves, other people and their lives. Ellis labelled the first conclusion or derivative as awfulising although he did not clearly define it in 1962. Currently, awfulising refers to evaluating an event as more than 100% bad—a magical and grossly exaggerated conclusion based on the musturbatory belief "This must not be as bad as it is". This distinction between musts and awfulising provides a precise and clear theoretical delineation of the nature of psychological disturbance and one that did not exist thirty years ago.

Ellis used the term awfulising less frequently than the word catastrophising in 1962. In fact, he saw awfulising and catastrophising as synonyms then. Today, however, RET therapists argue that human tragedies and catastrophes certainly exist. Just because they exist, however, does not require that people label them as awful. If they do, people make the unrealistic, illogical and self-defeating claim that something which does exist absolutely must not exist. This self-defeating escalation of a preference to a must leads to emotional disturbance rather than just intense, non-disturbed unhappiness over catastrophic situations.

SELF-RATING VS. SELF-ACCEPTANCE

Most psychological models of personality propose a model of the self, and attempt to show how disturbances in one's view of one's "self" lead to emotional disturbance. RET put forth its model of the self thirty years ago, and this remains virtually unchanged today, although this view of the self is perhaps more coherent and consistent now than it was then. For the last thirty years, the primary theme in RET's model of the self has centered on suspending evaluation of the self. Ellis stated in 1962 that rating people can only yield meaningful information if humans are static, non-changing organisms and then, as today, he argued that people are too complex for a single rating to represent them accurately. RET sees peoples as constantly developing organisms who grow and change. One cannot legitimately label something that grows and changes because the label soon misrepresents what it at-

tempts to describe. No label, therefore, can accurately represent humans because they grow and change. Concepts such as self-rating and self-esteem involve the use of such global labels and are thus clearly illegitimate and inhibit the emotional growth of complex human organisms.

Since 1962, RET has viewed humans as fallible creatures who, by nature, cannot be perfected. Ellis maintains that humans would do well to accept themselves as fallible and try to learn from their mistakes. People who learn from their mistakes decrease the amount of time they disturb themselves and increase the time they involve themselves in constructive emotional problem solving, thereby leading happier lives. Humans would do well not to expect to prevent all mistakes because as long as people breathe, think and act, they will make mistakes. While rating themselves increases the chances that people will disturb themselves emotionally, rating their traits and behaviours from a position of unconditional self-acceptance helps them to focus on and change aspects of themselves that inhibit self-actualisation. As Ellis noted in 1962, people cannot try to be better, but can attempt to act better.

While RET's view of the self, laid out above, has remained basically unchanged for thirty years, Ellis later cleared up a major inconsistency present in his 1962 book. There, he stated that "true self respect . . . comes . . . from liking oneself" (Ellis, 1962, p. 62) and again:

"An individual who has a good ego or true pride does not have to keep protecting himself about the views of others . . . Generally he *likes himself so much* that he can be comfortable even when others disapprove his behavior" (Ellis, 1962, p. 270—emphasis added).

If you like yourself, however, you are giving yourself a global rating. This smacks of theoretical inconsistency when one remembers that accurate self-ratings are not possible because (a) people are too complex to merit such ratings, and (b) they constantly change. To like yourself does not make sense according to RET's view of the ever-changing self, as Ellis himself notes in the 1962 book (pp. 150-1). Saying that you like mastering a task, for example, but can accept yourself whether or not you master it, however, more closely describes a healthy view of the self and its vicissitudes. For current RET theory believes that deriving enjoyment from mastering a valued task will increase a human's chance of being happy. If people enjoy mastering a task, this does not mean that they have to like themselves. Rather, it means

they rate their acts and through making such ratings can strive to improve their behaviour so that they can maximise happiness and minimise pain. Thus, rating aspects of ourselves is healthy but rating our "self" is not. This clarification makes RET's current view of the self more coherent and consistent.

PSYCHOLOGICAL HEALTH

Much of this article considers factors which lead to emotional disturbance, yet it is worth enquiring about RET's view of factors associated with emotional health. In 1962, Ellis delineated several criteria for psychological health. He stated that an emotionally healthy person demonstrates a health and enlightened self- and social interest, a commitment to creative pursuits and an adherence to long-range hedonism. Over the past thirty years, Ellis has added to this list of four criteria. Presently, this list additionally includes: self-direction, high frustration tolerance, flexibility, acceptance of uncertainty, scientific thinking, acceptance of self as a fallible human being, ability to take calculated risks, holding a non-utopian view of life, and taking responsibility for one's own emotional destiny. Ellis's expansion of his original criteria for psychological health reflects RET's commitment to extending the explanatory power of its theory.

HEALTHY AND UNHEALTHY NEGATIVE EMOTIONS

Many people seeking psychotherapy wish to get rid of their negative emotions. Current RET theory does not advocate, however, extinguishing all negative emotions, for RET now distinguishes between two types of negative emotions: healthy and unhealthy ones. Ridding the client of unhealthy negative emotions rather than all negative emotions is a paramount goal in RET. Helping the client to identify and accept healthy negative emotions also becomes a goal during RET. Briefly, unhealthy negative emotions result from irrational beliefs and healthy negative emotions stem from rational beliefs. Examples of unhealthy negative emotions include anxiety, depression, shame and demanding anger, while their healthy equivalents are concern, sadness, regret and non-demanding anger (or annoyance). In RET, counsellors encourage clients to feel healthy negative emotions

such as concern when facing an adversity. Emotions such as these serve as signals to people that they are in a situation they would do well to change. Healthy negative emotions act, therefore, as behavioural prompts and motivators to encourage people to maximise their happiness and minimise their hassles. Ellis did not clearly distinguish between these two types of negative emotions in 1962. Today, this distinction represents a more sophisticated account of negative emotions and provides therapists and clients with a guide as to which type of emotions to minimise, and which type to promote for profitable psychological adjustment and change to occur.

ACQUISITION AND PERPETUATION OF PSYCHOLOGICAL DISTURBANCE

Any useful theory of psychological therapy is able to provide an account of how people acquire and perpetuate emotional disturbance. As we have already seen, Ellis stated in 1962 that situations can play a large part in how people acquire psychological problems. Thus, in several places in the 1962 book, Ellis indicated that people can be taught to be emotionally disturbed. For example, in talking to a client, Ellis (1962) says "You thought you would be terribly hurt by a girl rejecting you merely because you were *taught* that you would be" (p.256) and "so you were taught that being rejected is awful, frightful" (p.257).

Today, Ellis would tell this client that he brought his ability to disturb himself to these teachings and was not made disturbed by the teachings themselves. Indeed, a close reading of the book indicates that Ellis, at the time he wrote *Reason and Emotion in Psychotherapy*, was much more influenced by psychoanalytic thought than he is today. Thus in working with a client called Caleb, Ellis (1962) showed him "the connection between his psychosomatic symptoms and his father's stroke" and related "his symptoms to his mother's tendency to baby him when was physically ill and to his dislike of having to take over his father's factory instead of pursuing his own chosen career" (p.206). Ellis would now pour scorn on such psychoanalytically-oriented interpretations.

Today, RET states that people bring their innate tendency to disturb themselves to events and are not passively made disturbed by events. Parents and culture teach children which superstitions and prejudices to hold. They do not, however, create childrens' original

tendency to unhelpful ritualism, spiritualism and dogmatism. Instead, Ellis maintains that children are *born* with these disturbance-creating tendencies. Today, RET adheres to the principle of constructivism which describes the idea that people create their own emotional disturbances (Ellis, 1990). Constructivism explains why Ellis has never articulated any elaborate theory of how such disturbances are acquired. For, experiences do not directly lead to disturbance, rather people bring their biologically-oriented demands to their experiences and disturb themselves emotionally in the process.

As seen, current RET theory places more emphasis on a biological explanation for human disturbance than on an environmental one. In fact, Ellis maintains now that biology accounts for 80% of psychological disturbance, while environmental factors contribute a role of only 20% (Ellis, 1978). In 1962, Ellis did not attempt to distribute the variance in this way. While the biological emphasis in RET theory was present thirty years ago, it is now more pronounced and an important paper published in 1976 showed Ellis's still current view on the extent to which biology influences acquisition of psychological disturbance (Ellis, 1976).

RET clearly regards biology, then, as the major factor in producing emotional disturbance. Ellis, however, gives people primary control of their emotional reigns in *perpetuating* this disturbance. To this day, and since its inception, RET maintains that people perpetuate their psychological disturbance because they lack three major insights concerning the nature of their problems. Insight number one states that unfortunate situational factors do not determine unhealthy negative emotions. Rather, absolutistic, musturbatory evaluations of situations lead to emotional disturbance.

People may have insight number one, but will still disturb themselves if they do not hold insight number two. This second insight maintains that people perpetuate their absolutistic beliefs by re-indoctrinating themselves with them in the present. Thus, a person may have disturbed himself in the past over some event. However, if he is still disturbed about it, it is because he is currently adhering to a set of irrational beliefs about the past occurrence.

While people may have insights number one and two, they will still disturb themselves if they lack insight number three. This final insight requires people to acknowledge that they must actively and repeatedly challenge and dispute their dogmatic beliefs if they are to overcome their emotional and behavioural problems. Unless people take up the Protestant work ethic and work, work and work at chal-

lenging and changing their irrational beliefs using cognitive, behavioural and emotive methods, they will continue to disturb themselves.

RET has always noted that people are not only highly adept at perpetuating their primary problems, but are also extraordinarily skilled at constructing secondary problems about their original problems. However, Ellis now places more emphasis on this disturbance-perpetuating factor than he did in 1962. An example of this factor occurs when clients make themselves anxious about their primary anxieties. Some people are even more talented at disturbing themselves. Thus, occasionally clients not only come up with secondary problems, but also tertiary problems (i.e. further problems about their secondary problems). For instance, a client came in because he was shoplifting (Problem 1). He was also ashamed of his shoplifting (Problem 2), and ashamed that he had to seek therapy over it (Problem 3). In addition, he berated himself for not working as hard as he believed he must to overcome his original problem (Problem 4). While Ellis alluded to clients' ability to disturb themselves about their original disturbances in 1962, this is given far more prominence in current RET theory and practice.

Since 1962, Ellis has identified other ways that humans perpetuate their psychological disorders. For example, RET therapists often ask clients to perform behaviours they are not used to doing (such as to act differently based on a newly acquired rational philosophy). Clients often report they cannot do these requested behaviours because they "feel like a phoney" or "I'm not like that, it's just not me". Some clients find it difficult to accept that it takes time for a person to grow accustomed to any "new" behaviour. Due to this, they do not perform the new, more constructive behaviour. Their refusal to feel like a "phoney" for a while, of course, perpetuates their problem.

Ellis also currently states that self-fulfilling prophecies perpetuate emotional disorders. For instance, an anxious person believes that she will make a fool of herself at a dance where she wishes to meet people. Due to her anxiety about acting foolishly, her thoughts freeze, she does not speak thoughtfully, and ends up actually acting foolishly. Needless to say, this serves to increase her anxiety because she then condemns herself for her foolish act. The role of self-fulfilling prophecies in the perpetuation process was not mentioned by Ellis in his 1962 book.

Finally, Ellis currently states that a philosophy of low frustration tolerance (LFT) perpetuates emotional disturbance. This philosophy was not emphasised in 1962. As mentioned earlier, people with a phi-

losophy of LFT demand that change must not be "too hard" for them. Change requires, however, very hard work on the part of clients. Due to this requirement, people with LFT do not readily or easily change. They, thus, perpetuate their psychological problems by refusing to do the work necessary to overcome them.

The addition of LFT, self-fulfilling prophecies, and the role of phoney feelings to the list of factors preventing change, more fully develops RET's theory of the perpetuation process. In addition, awareness of these factors further assists clinicians and clients to anticipate and attack directly these problem-causing irrational beliefs in therapy.

THERAPEUTIC CHANGE

In addition to providing an account of how psychological problems are acquired and maintained, a useful theory of therapy needs to account for therapeutic change. Currently, Ellis delineates various levels of therapeutic change which he did not articulate as comprehensively in 1962. He now distinguishes between philosophic (or evaluative) change, inferential change and behavioural change (Dryden & Ellis, 1988). In therapy, Ellis strives to promote philosophic change in clients whenever possible. Achieving profound philosophic change (sometimes called elegant change), requires clients to focus on their dogmatic or musturbatory ideas and to work steadily to change these beliefs to non-dogmatic preferences.

Ellis described another type of change, known as inferential change, which occurs when people alter their inferences about their experiences rather than their evaluations of these experiences. An example of inferential change occurs when a person decides, for example, that someone whom she thought was against her is, in fact, not against her. Rather, she concludes that the person concerned is either neutral towards her or, in fact, on her side.

Lastly, Ellis states that people can change their behaviour. Behavioural change often serves to alter the activating event—i.e. the A part of the ABC model. Dryden and Ellis (1988) maintain that achieving philosophic change frequently leads to inferential and behavioural change, whereas inferential and behavioural change less frequently lead to philosophic change. This explains why Ellis has always stressed the importance of trying to achieve philosophic change.

As already noted, Ellis did not differentiate these levels of change in

his 1962 book. Rather, he just focused on philosophic change, although he did not call it this. Over the past thirty years, RET has, in my view, succeeded more than other cognitive-behavioural therapies (CBTs) in outlining how to achieve philosophic change. Other CBTs have mainly concentrated on how to achieve inferential and behavioural change, and have done so quite successfully. In my following comments, I will primarily focus on RET's pioneering methods of achieving profound philosophic change.

To effect philosophic change, Ellis states that clients first need to realise that they create, to a large degree, their own psychological disturbances. Secondly, they need to recognise fully that they have the ability to change significantly these disturbances. Third, they need to understand that emotional and behavioural disturbances stem largely from irrational, absolutistic beliefs. Fourth, they need to detect their irrational beliefs and discriminate them from their rational ones. Fifth, they need to dispute these irrational beliefs using the logical, empirical methods of scientific reasoning. Sixth, they need to work towards the internalisation of their new rational beliefs by employing cognitive, behavioural and emotive methods of change. Finally, they need to continue this process of challenging irrational beliefs and using multi-modal methods of change for the rest of their lives.

While this elaborate process of change can be found in the 1962 book, it appears there in quite a rudimentary form. Some parts of the process, though, did receive heavy emphasis then. For example, in 1962, Ellis stressed the importance of work and practice to effect change as much as he does now. However, other features of the change process that feature now were virtually absent then. Thus, his 1962 book contained only a few cognitive and behavioural change techniques whereas numerous such methods can be found in the current RET literature (Dryden and Yankura, 1993). In addition, Ellis did not include then any emotive or imaginal techniques which now feature prominently in the RET therapist's armamentarium. For example, Ellis (1987) now advocates the use of humour as an important emotive technique, whereas the RET of 1962 seems quite humourless by comparison.

As stated, Ellis did not discuss many techniques that an RET therapist could use in 1962; he did list, however, those not recommended for use. These included: abreaction, catharsis, dream analysis, free association, interpretation of resistance, analysis of transference, hypnosis, reassurance, reciprocal inhibition, and positive thinking. Ellis still recommends avoiding these techniques. Today, however, some

RET therapists employ a few of these techniques as well as others derived from alternative therapeutic approaches, without adopting the theory which spawned these techniques. Methods borrowed from other orientations are used in a manner consistent with RET theory. Likewise, therapists do not employ techniques contraindicated by RET theory. This is an example of what I have called theoretically consistent eclecticism (Dryden, 1987a). In this form of eclecticism, theory guides technique selection which is not restricted to the limited number of techniques spawned by the theory itself.

THE ROLE OF FORCE AND ENERGY IN CHANGE

As noted above, in 1962, Ellis encouraged people to work, work, work at changing their irrational beliefs. In 1992, he still encourages such work. However, he states that people do better when they use force and energy to change their irrational beliefs and behaviours. Thus, Ellis argues that people will challenge their irrational beliefs more successfully by questioning them in a vigorous manner, and by accentuating forcefully more logical, rational beliefs as alternatives. In addition, Ellis recommends that clients expose themselves as fully as they can to their fears. He thus favours the use of flooding rather than the use of gradual desensitisation techniques. So, instead of recommending that a social phobic phone one friend per week, he encourages them to phone five. The more recent ideas of force and energy in behaviour change and the use of full in vivo exposure clarify a central tenet of RET and extend its clinical application.

THE THERAPEUTIC RELATIONSHIP

Of course, utilisation of any technique takes place within the context of a therapeutic relationship. In this relationship, client and therapist work together to help the client. How the therapist should act in this partnership is addressed in countless volumes in the literature on counselling and psychotherapy. Carl Rogers (1957) has described one of the most enduring and widely accepted models of how a therapist should interact with a client. In his model, he outlined a set of necessary and sufficient conditions for therapeutic change. Thirty years ago, Ellis said that Rogers' model was wrong. He maintained that

Rogers' core conditions of empathy, respect and genuineness are desirable but neither necessary nor sufficient to effect psychological change. Instead, he stated that a therapist needs to act as a model and teacher to help the client change. Today, RET therapists place more emphasis on building and maintaining a therapeutic alliance with their clients than they did in 1962 (Dryden, 1987b). The role of the therapist as model and teacher, however, remains unchanged.

SUMMARY

In summary, then, in 1962 RET displayed important features still current. These include the interrelatedness of cognitive, emotive and behavioural processes, the important role that cognition plays in psychological problems, its humanistic view of the self and the futility and dangers of self-rating. The emphasis on perpetuation rather than acquisition processes of emotional disturbance holds good now as it did then, and the core view of therapeutic change is essentially the same now as it was in 1962, despite further, more recent elaborations. Also, one can find the beginnings of a model of psychological health in 1962 that has been more fully developed since that time.

Significant change has occurred in RET since 1962 that updates several of Ellis's original ideas. These include the distinction between interpretations (or inferences) and evaluations, the primacy of musts in accounting for psychological disturbance, the clear distinction between healthy and unhealthy negative emotions and the greater role accorded to force and energy in the change process. Aspects of psychoanalytic theory, as well as conditioning theory featured in 1962 no longer appear, and a greater emphasis is placed on biological aspects of emotional disturbance now than thirty years ago. Finally, a greater range of cognitive, imaginal, emotive and behavioural methods are found in current RET literature than in *Reason and Emotion in Psychotherapy* where Ellis restricts himself to illustrating a few cognitive and behavioural techniques.

RET, then, has grown and developed over the past thirty years. In large part, this reflects the theory's flexibility and the competent people who have worked to make RET one of the most viable and widely used cognitive-behaviour therapies. Of these, I modestly include myself!

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