RATIONAL SELF HELP: AN ALTERNATIVE APPROACH TO THE TREATMENT OF SELF DEFEATING BEHAVIORS

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ABSTRACT

The major purpose of this paper was to answer are Rational Self Help workshops effective in educating people to recognize the irrational thinking that leads to Self Defeating Behaviors? There were 18 volunteers who were participants in the RSH workshops. The background of the persons identified were people with SDB. The results indicated that the RSH workshops were effective in educating people to recognize their irrational thinking.

ACKNOWLEDGMENTS

Without the encouragement and support of the following people, this project would not have been completed. I extend my heartfelt thanks to: My mother who was there for me whenever I needed a helping hand or a loving heart and never letting me give up my dream; My father who used his well-honed computer skills through hours of revisions of programs and papers and for never letting me give up no matter how upset I got; Wynne Hemingway, for without her cooperation and help this project would not have been successfully completed; and Illana Damian Ph.D., for introducing me to the world of counseling and leading me through my initial growth.

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CHAPTER I INTRODUCTION AND PROBLEM

Introduction To The Study

For more than fifty years, Alcoholics Anonymous, and more recently, other Anonymous groups, have been the organizations that people have turned to for their self-defeating behaviors (SDB). These programs, however, have been known not to work for everyone (Gasbarro, 1991). As reported by Gasboro in his 1991 artical on Rational Recovery (RR) Jack Trimpey stated that "more than fifty percent of new members relapse within thirty days, seventy-five percent within a year and ninety percent within four years." Statistics also show that more than 70-80 percent in the self help programs will relapse (Comer, 1992).

As one can see from these statistics the anonymous groups are not for everyone. Because of this other self help groups have been established. Most of them, however, focus only on drinking and nothing else. Due to this fact in December 1992, Wynne Hemingway left RR, in which she was on the national board, and started Rational Self Help (RSH). She left RR because she felt there were other SDB that people had besides drinking are just as important to address. She also thought that it was important to focus on the thinking of the individual that led them to partake in a SDB (Hemingway, 1993). RSH uses the theory and techniques of Rational Emotive Behavioral Therapy (REBT) that was established by Dr. Albert Ellis, in 1955, to help people eliminate their addictions and other

SDB's. RSH is a self help program that helps people with emotional and behavioral problems. Wynne believes that eighty percent of the people who are involved in RSH have substance abuse issues; however, the focus of RSH is on the thinking and how REBT can improve a person's thinking and eliminate or decrease their SDB.

Background Of The Problem

In the United States the growth of self help programs for the treatment of SDB has increased. Most self help programs, however, focus only on the addiction. Most self help programs believe that once one has a SDB one will always have it and must avoid the behavior or practice in other words, abstinence. In the United States the anonymous groups are the predominant influence on the treatment of SDB. The anonymous groups do help people. Almost all of these groups follow the 12-step process and they believe that the only way a person can overcome their SDB is by working the 12-steps (Ellis & Schoenfeld, 1990). The fallout rate in these self help programs is extremely high. In the 12-step groups there is a strong emphasis on the "Higher Power." One common reason that the fallout rate is so high is that most people can not grasp the idea of being powerless or having to rely on a "Higher Power" in order to illuminate their. In fact some people believe that more harm than good is done due to emphasis on the "Higher Power" that is part of the program (Ellis & Schoenfeld, 1990). Due to this fact there needs to be an alternative to offer people in the treatment of SDB.

RSH and REBT believe that by telling a person the only way they will recover is through the intervention of a "Higher Power" is destructive to the treatment process. By depending on the "Higher Power," the anonymous programs show that there is no confidence that a person with a SDB can enhance his/her own growth and development and help themselves. Anonymous programs maintain the idea that a person is powerless, helpless, and will always remain that way (Ellis & Schoenfeld, 1990).

Statement Of The Problem

Irrational thinking enables a person to rationalize the use of SDB (Self Defeating Behavior) as coping mechanisms. RSH (Rational Emotive Behavioral Therapy) workshops are designed to educate people to recognize the irrational behavior and thinking that leads to SDB, but to date there has been little or no assessment of effectiveness.

Purpose Of The Study

The purpose of this study is to evaluate the effectiveness of the RSH workshops in educating people on how to recognize their irrational thinking that leads to their SDB's.

Research Question

Are RSH workshops effective in educating people to recognize the irrational thinking that leads to SDB?

Rationale For The Study

Many people relapse because they, and most self help programs, focus on abstinence and the addiction itself, instead of focusing on why the person chooses to partake of the SDB and what is their thinking that led up to partaking in this SDB. RSH focuses on the thinking more than abstinence and the SDB. Therefore this study will look at the effectiveness of the RSH workshops in educating people to recognize their irrational thinking that leads to SDB.

Significance Of The Study

This study is important to therapists and researchers in the field of addictive disorders and to people with SDB to study the effectiveness in educating people to recognize their irrational thinking that leads to SDB's. Equally affected are the self help programs that focus only on the SDB instead of the person's irrational thinking.

Operational Definitions

<u>Self-Defeating Behaviors (SDB):</u> Any behavior that inhibits a person to lead a productive and healthy life.

Rational Recovery (RR): A group started by Jack Trimpey in 1986, which uses Rational Emotive Behavioral Therapy (developed by Albert Ellis) as a mean to achieving and maintaining sobriety.

Rational Self Help (RSH): A group started by Wynne Hemingway in 1992, which uses Rational Emotive Behavioral Therapy (developed by Albert Ellis) as a mean to achieving and maintaining sobriety.

Rational Emotive Behavioral Therapy (REBT): A psychotherapy technique developed by Albert Ellis in 1955, that provides people with the tools to restructure their philosophical and behavioral styles.

Alcoholics' Anonymous (AA): A self help program that was developed by Bill Wilson and Dr. Bob Smith in the 1940s that focuses on the addiction and curing the alcoholic by using a 12 step program.

<u>Irrational Beliefs:</u> Beliefs and thinking that stifles one's ability to reach set goals.

Rational Beliefs: Beliefs and thinking that helps people achieve one's goals.

Activating Event (A): Activating events in your life that precede your SDB.

Beliefs (B): A person's beliefs or what they tell themselves about A's.

Consequences (C): A person's feelings and actions that stem from A's and B's.

Assumptions And Limitations

An assumption of this study is that since this is a self report test, every person will answer truthfully when filling out the questionnaire.

Another assumption is that the group leader will hand out the questionnaires at the specified time.

Another assumption is that every person will not tire of answering the same questions four times over the specified test period.

A limitation of this study is that RSH is a new self help program therefore there are few members who attend the workshops.

Another limitation is that people might only attend one workshop.

The researcher is a coordinator for the RSH (Rational Self Help) program and would be known by most participants and trusted. The researcher has not conducted RSH workshops for those person's participating in this study; however, some participants may have attended the free seminars conducted by the researcher.

Organization Of The Remainder Of the Study

<u>Chapter Two:</u> Chapter two is comprised of the following sections:

<u>Section One:</u> A review of literature which pertains to Rational Emotive Behavioral Therapy.

<u>Section Two:</u> An explanation of the ABC model used in Rational Emotive Behavioral Therapy and Rational Self Help.

Section Three: What are SDB's and why people participate in them.

<u>Section Four:</u> A review of literature which pertains to Rational Self Help.

Section Five: The content of the Rational Self Help workshops.

Section Six: Treatment Goals for SDB's

<u>Chapter Three:</u> Chapter three consists of an introduction reviewing the purpose of the study, a description of the methodology used, information about the sample and population, a description of the data collection procedures and information regarding the way data will be analyzed.

Chapter Four: Presentation of the Data

Chapter Five: Summary, Conclusions and Recommendations

CHAPTER II

LITERATURE REVIEW

Following is a review of literature on Rational Emotive Behavioral Therapy, an explanation of the ABC model, and what Self Defeating Behaviors are and why people participate in them. In addition this chapter will review literature on Rational Self Help, the content of the Rational Self Help workshops and the treatment goals of Rational Self Help and Rational Emotive Behavioral Therapy for Self Defeating Behaviors.

Rational Emotive Behavioral Therapy

The assumption that rational beliefs and irrational beliefs are important elements in emotional and behavioral disturbance has been implied by philosophers such as, Confucius, Socrates, Plato, and Lao-Tse to name a few. In modern psychotherapy this belief was strongly held by certain therapists such as Adler, Dubois, Herzberg, and Wolberg (Ellis, 1990).

"Whereas most of these therapists have been rather vague as to what constitutes rational and irrational beliefs, and as to which precise irrationalities presumably contribute significantly to human disturbance, REBT has been quite precise in this regard" (Ellis, 1990, 223).

Albert Ellis developed REBT in 1955, because he felt psychoanalytic training was inadequate in dealing with his clients (Corey, 1991). Over the past two decades REBT has offered additional techniques to clinical psychology. This

model is influenced by a person's beliefs as the main and intervening factor between environmental events and emotional distress (Jacobsen, Tamkin & Hyer, 1988). In 1977 Gorman and Simon conducted a study which found that the irrational beliefs of a person were related to the maladaptive behaviors and feeling of guilt, anxiety, and depression. These irrational beliefs are associated with one's general mental health (Himle, Thyer, & Papsdorf, 1982; Jacobson et al., 1988; LaPointe & Crandell, 1980).

REBT (Rational Emotive Behavioral Therapy) is based on a biological foundation. It believes that not only are people influenced by the environment, but that people are born with two very powerful biological tendencies that are constructive and destructive. People are also born with strong inclinations to act both well (self-helpfully) and badly (self-defeating). People also have a choice as to how they will conduct themselves (Ellis, 1991).

REBT is a scientific and humanistic form of psychotherapy that firmly believes that if a person works at it they can have control over their emotional destiny. They can refuse to make themselves depressed, self-pitying, enraged etc., about anything (Ellis, 1987). REBT assumes that when a person has these disturbed feelings, along with SDB's, the individual created these feelings themselves. A person creates them by consciously or unconsciously thinking irrational or rational beliefs that they have about undesirable activating events (A) which occur in our lives daily. The result of these disturbed feelings and behaviors are consequences (C) (Crawford and Ellis, 1989).

Consciously or unconsciously people increase their desires for happiness, achievement, comfort, to name a few, into absolute necessities. They consciously or unconsciously insist that always they must, for instance, perform either completely perfect or outstanding; be loved and approved by everyone; and hardly ever experiencing discomfort. Once a person becomes disturbed about these events in their lives they will often use SDB to decrease the negative emotions that they are experiencing (Ellis, 1987).

ABC Model:

REBT uses the ABC model, which was adapted by Ellis from the writings of early philosophers. This model enables people to become more aware of their self-defeating thinking, emotional reactions and behavior (Ellis, 1991; Ellis & Velten, 1992). People start with goals, standards, and values and then they encounter activating events (A) and conditions. The consequences (C) are a result of how a person chooses to react to the A. This reaction can be disturbed or non-disturbed. The consequences are also affected by the beliefs (B) a person has about these A's. When the B is rational or functional the result is a self-helping C, however when the B is irrational or dysfunctional, then the C often leads to destructive individual and social consequences (Ellis, 1991).

REBT theorizes that if a person's B is rigorous with their desires and preferences, then they usually generate helpful C's. However, if a person adds to their beliefs with dogmatic shoulds, oughts and other unrealistic commands then this will lead to self-sabotaging beliefs that lead to destructive individual and social

C's (Ellis, 1991; Ellis, 1987). When people hold these commanding shoulds, oughts, musts, REBT believes that they will always make and keep themselves emotionally disturbed (Ellis, 1987). One's "irrational beliefs that accompany and create your inappropriate feelings and self-defeating behaviors stem from your human tendency (which is partly inherited and partly learned) to take strong preferences and wishes and to grandiosely convert them into powerful, rigidly held commands" (Crawford & Ellis, 1989).

The ABC process takes a person from irrational thinking to rational thinking and from inappropriate emotions to appropriate ones. This process allows you to control the emotional triggers that lead a person to SDB.

Specific Self Defeating Behaviors

According to Peele and Brodsky (1992) SDB (Self Defeating Behaviors) are habits that are ingrained in a person that they believe they can not change.

Cudney and Hearty (1991) further state that

true self-defeating behavior is an action or attitude that once worked to help an individual cope with a hurtful experience but that now works against the individual to keep him or her from responding to new moments of life in a healthy way. (12)

These SDB can hinder a person's health, relationships, work, and self-respect.

SDB are difficult to change, because a person has relied on them for so long as coping mechanisms. Some SDB involve drugs (such as drinking, smoking, caffeine), some do not (like shopping, eating, sex, exercise).

Self defeating negative and counterproductive thoughts and behaviors come in many forms. These forms do not have to be a particular behavior, they can

consist of moods, attitudes, or personality traits. Some of the most common behaviors consist of, but are not limited to, depression, shyness, abuse of alcohol and other substances, relationships, overeating and smoking (Cudney & Hearty, 1991).

The most common SDB are the abuse of alcohol and other substances. The desire for intoxication is worldwide. Alcohol and drug abuse in our society are rampant. Ten million people have an alcohol problem, seven million abuse alcohol in some way and five million abuse drugs (Comer, 1992). Since prehistoric times' people have used psychoactive substances as coping mechanisms to modify their sensations, feelings, fears, and behaviors (Comer, 1992). Because chemicals cause mood changes, they are favored by people who go overboard in striving to alter their consciousness. People have been creative in figuring out ways to addict themselves to various substances and behaviors. They have persisted in creating addictions, often against enormous odds. Many have given up their lives even though they knew how dangerous the indulgence might be (Ellis & Velten, 1992).

Ellis and Velten (1992) believe that "the desire for altered consciousness and moods is at the bottom of addictability. The desire is probably part of human nature and stems from life-preserving instincts to avoid pain and seek pleasure (64)." People prefer certain pleasurable feelings and relief from discomfort.

Addiction is a system of choices in which we may get some good results. The person will experience more bad results than good results from the SDB as time goes by. People condition themselves into SDB because they believe that they

have to have positive feelings and relief from negative feelings. In other words they need coping mechanisms in order to handle the negative feelings and experiences (Comer, 1991).

Rational Self Help

RSH (Rational Self Help) was established in December 1992, by Wynne Hemingway. This program uses the theories and techniques of REBT to help people to eliminate their SDB. In this program people learn how to effectively utilize the REBT principles to combat self-defeating thoughts, emotions, and behaviors. It also emphasizes the importance of learning new ways of looking at oneself and others and educating a person to lead a more effective and enriched life (Hemingway, 1993).

Research shows that people who are disturbed hold a much greater amount of irrational beliefs than those who are not disturbed. RSH and REBT recognize that by challenging and disputing their thinking a person can surrender their irrational beliefs by substituting them with rational ones and live a more productive life (Hemingway, 1993). The goal of RSH is to educate people on how to control their emotions and learn to be happier with themselves and others (Cudney, & Hardy, 1991; Ellis & Velten, 1992; Hemingway, 1993; Peele & Brodsky, 1992).

Content Of The RSH Workshops

RSH workshops are available for people who are interested in educating themselves to recognize their irrational thinking that leads to SDB. These

workshops cost ten dollars each, are two hours, and they are led by individuals who are experienced in the different techniques of REBT. People can also attend these workshops as many times as they want (Hemingway, 1993).

The meetings begin with the group leader going around the room and asking each person: how they are doing, what brings them to the workshops, and what do they hope to gain by attending the workshop. Then the leader will ask if anyone has a particular situation they would like to discuss, if not the group leader has a subject prepared. The group will then discuss this situation and use the REBT techniques to educate them on the irrationality of the thinking that leads to the SDB. At the end of the workshop each person is given a homework assignment that might consist of: reading assignments or ABC worksheets (Hemingway, 1993).

The reading assignments that are given out by the group leader consist of books written by Albert Ellis which are; How to Stubbornly Refuse to Make Yourself Miserable About Anything, A New Guide to Rational Living, Rational Steps to Quitting Alcohol. The main reason that Rational Self Help uses books written by Albert Ellis is that this program uses Rational Emotive Behavioral Therapy (REBT) in educating people about how irrational thinking can lead to self defeating behaviors (SDB).

The group leader might also give out worksheets that the group members can use to work on their ABC's. By working on this model a person can start to

become more aware of their self-defeating thinking, emotional reactions and behavior (Ellis, 1991; Ellis & Velten, 1992).

The way this model works is that a person starts with their goals, standards, and values and then they encounter activating events and conditions that is the A in the ABC model. The consequences, which are the C's are a result of how a person chooses to react to the A. This reaction can be disturbed or non-disturbed. The consequences are also affected by the beliefs, which are the B's that a person has about these A's. When the belief is rational or functional the result is a self-helping consequence, however when the belief is irrational or dysfunctional, then the consequence often leads to destructive individual and social consequences (Ellis, 1991). By consistent work on the ABC model a person can start recognizing the irrational thinking and beliefs that tend to lead to self defeating behaviors.

Treatment Goals For SDB's

RSH (Rational Self Help) and REBT (Rational Emotive Behavioral Therapy) believe that once you have a SDB (Self Defeating Behavior) it does not mean that you will always have it and that you can never do it again. RSH focuses on the thinking that leads to one's SDB. It is not an abstinence program; however, if a person comes into this program and their goal is to moderate their SDB then RSH suggests that the person takes another look at the reasons for coming into this program. The goal of RSH is on clear thinking and taking responsibility (Ellis, 1987, 1990, 1991).

Changing and recognizing irrational thinking will enable a person to lead a more productive life instead of using SDB's to feel better and to cope with life.

Both treatments believe that irrational thinking enables a person to use SDB's as a coping mechanism to feel better about the themselves. If a person is educated to recognize their irrational thinking they will be able to eliminate or moderate their SDB as coping mechanisms (Ellis & Dryden, 1987).

One of the basic problems a person with a SDB has is that they often rely on something outside of themselves as a coping mechanism to make them feel better (Ellis & Schoenfeld, 1990). RSH and REBT teaches the person that even though it is difficult to change, it is not impossible. In the RSH workshops a person is shown how to decrease their self-damning, low frustration tolerance and SDB. One is also shown how to increase their ability of self-determination and self-control (Ellis & Schoenfeld, 1990, Ellis, 1962; Ellis & Dryden, 1987; Ellis & Grieger, 1986; Ellis, McInerney, Di Giuseppe, & Yeager, 1988).

CHAPTER III

METHODOLOGY

Introduction

This chapter descirbes the methods utilized to answer the research question are RSH workshops effective in educating people to recognize the irrational thinking that leads to SDB?

Description Of Methodology

The methodology used for this research study is descriptive. This methodology was chosen in order to identify the changes in a person's irrational beliefs through the use of self report questionairres and compare their changes in responses.

Sample Population

Data for this study were gathered by distributing questionnaires to 18 individuals who attended the RSH workshops.

Instrumentation

There were two questionnaires. The questionnaires were not anonymous because if the individual discontinued the workshops then the researcher would have a way of contacting them for further information. Both were one page in length (double-sided), with questions asking the individual to rate their emotions from one, strongly agree, to three, disagree. Both questionnaires had one to three

essay questions. The essay questions on the first questionnaire (see Appendix A) asked the individual about their SDB, why they engaged in it, and what they hoped to accomplish by attending the workshops. The essay question on the second questionnaire (see Appendix B) asked the individual if they were acting more rationally.

Questionnaire Design

The first questionnaire consisted of 21 questions. The first 18 questions asked the individual to rate and circle the number, that they agreed with, from one, strongly agree, to three disagree, on how they felt about certain situations. The last three questions were essay questions that asked the individual about their SDB and what they would like to achieve by attending the workshops. The second questionnaire consisted of 19 questions. The first 18 questions were designed exactly like the first questionnaire. The last question, which was an essay question, asked the individual if they were acting more rationally when it came to their behavior. The questionnaire format was one that was designed by Wynne Hemingway for RSH (Hemingway, 1993).

Questionnaire Distribution And Data Collection

The RSH group leader distributed the first questionnaire to the individuals who were attending the workshops for the first time. The second questionnaire was distributed, for the first time, after the individual had attended the workshops for two weeks and then it was redistributed four weeks thereafter over the period of the study, which was from June 4, 1993, to September 30, 1993. There were

18 participants for the tests from June to August, and there were 13 participants for the test in September.

Data Analysis

The data accumulated from the questionnaires were totaled and analyzed to determine whether the members of RSH workshops noticed a change in their irrational beliefs over the period of the study which ran from June 1, 1993 to September 10, 1993.

CHAPTER IV

PRESENTATION OF THE DATA

Out of the first 25 questionnaires that were distributed, 18 (72%) were returned. Of the 18 respondents, nine (5%) were male, eight (4%) were female and one (.05%) was an unknown gender because they did not put their name on the test. Some of the types of self-defeating behavior that the respondents engaged in was anger, verbal abuse, negative self-talk, putting pressure on one self, drinking, overeating, anxiety, drugs, and thinking negatively.

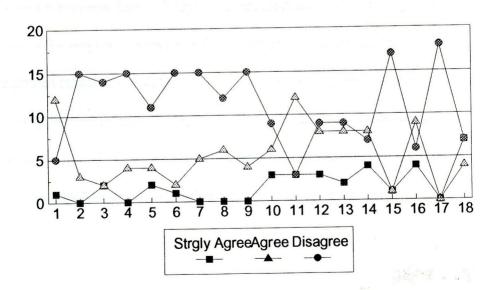
The respondents were asked if they had any ideas why they engaged in this self defeating behaviors the respondents answered with, low self-esteem, unhappy with themselves, lack of confidence, they have not learned differently, and lack of coping skills.

The reasons for attending the workshop and what they would like to achieve from the workshop ranged from getting over my problems, learning tools to take control of their addictive side, changing their thinking, a better life and more rational living.

In the first test (see graph 1) the distance between the respondents' beliefs between disagree and strongly agree were quite significant. However, this distance changed at question eleven were the majority of the respondents agreed with the question. After question eleven those who strongly agreed were quite

lower than those who agreed or disagreed. The greatest distance, however, was from question 14 thru 16. Two of the most noticeable distance in variables on the graph was on questions 15 and 17. For question 15, 16 out of the 18 respondents disagreed with the question stating that "our current behavior will always be determined by how we have been conditioned to behave in the past no matter how hard we try to change." For question 17 all of the respondents answered that they disagreed with the question stating that a person should "give themselves a global rating such as I am an alcoholic."

GRAPH 1 TEST 1, JUNE 1993 N=18

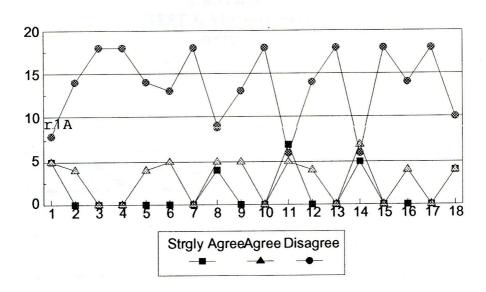


One month later when the second test was administered the respondents' beliefs about particular question changed (see graph 2). Out of the second set of questionnaires that were distributed, 18 (100%) were returned. Of the 18

respondents, nine (5%) were male, eight (4%) were female and one (.05%) was an unknown gender because they did not put their name on the test.

For the first question the distance between all the variables was less then in the first test. The distances between question two thru seven also increased, whereas in test one the respondents disagreed less with the question and in test 2 the respondents disagreed more with the question. Question seven all the respondents disagreed with the question. At question eight the distance between all the variables was less in test two than in the first test whereas the respondents started to agree and strongly agree with that question. After question eight those who disagreed with the questions started to increase until question 11 where there is a strong correlation between all the variables. Then from question 15 thru 18 the correlation becomes less. The respondents all disagreed with question 15 compared to the test one where all but two agreed. For question 16, fourteen out of the eighteen respondents disagreed compared to test 1 where seven out of eighteen respondents disagreed. Question 17 remained the same in that all the respondents disagreed. Question 18 the number of respondents who disagreed increased compared to those who either strongly agreed or agreed.

GRAPH 2 TEST 2, JULY 1993 N=18

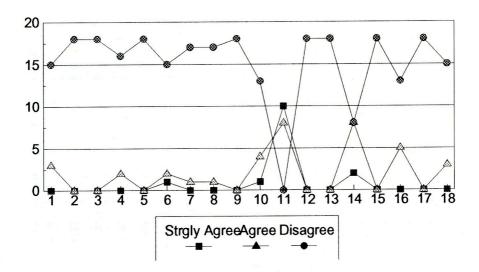


Test three (see graph 3) was distributed one month after test two. Out of the third set of 18 questionnaires that were distributed, 18 (100%) were returned. Of the 18 respondents, nine (5%) were male, eight (4%) were female and one (.05%) was an unknown gender because they did not put their name on the test.

Those respondents who disagreed increased from questions one thru eleven compared to test 1 and test 2. Question eleven increased with strongly agreed to ten and disagreed decreased to zero. However, compared to the two previous tests all the respondents disagreed to questions 12 and 13. Again question 14 had a strong correlation between agree and disagree but those who strongly agreed dropped to three. The correlation for question 16 between agree and disagree increased while those who strongly agreed decreased. Question 17 remained the

same in all the tests in that all the respondents disagreed and question 18 the respondents who disagreed increased while those who agreed and strongly agreed decreased.

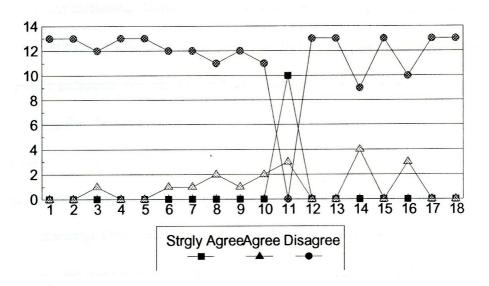
GRAPH 3 TEST 3, AUGUST 1993 N=18



Out of the 18 (100%) respondents for the first three questionnaires only 13 (52%) responded for the last and final test. Those who did not respond dropped out of the groups and the researcher was not able to contact them. In test four (see graph 4) from questions' one to 10 the distance between disagree agree and strongly agree increased whereas almost all the respondents disagreed with the questions. Question eleven was again the area where most of the movement was. Notice that ten out of the 13 respondents strongly agreed compared to the three

previous tests where there was a strong correlation between strongly agree, agree, and disagree. Again question 14 posed a conflict of beliefs between most of the respondents. However, for questions 17 and 18 all the respondents answered disagree.

GRAPH 4 TEST 4, SEPTEMBER 1993 N=13



The respondents' irrational thinking changed significantly from the first test (graph 1), which was distributed in July, to the last test (graph 4), which was distributed in September. As noted the strongest change throughout all tests was on question 11. For the first three tests the strongest movement was from questions one through questions ten.

CHAPTER V

SUMMARY, CONCLUSIONS and RECOMMENDATIONS

Summary

The major purpose of this paper was to find out if Rational Self Help workshops were effective in educating people to recognize the irrational thinking that leads to Self Defeating Behaviors. There were 18 volunteers, who identified that they had SDB, and who were participants in the RSH workshops. The results of the research indicated that the RSH workshops were effective in educating people to recognize their irrational thinking.

Conclusion

The outcome was that the respondents believed that the workshops educated them to acknowledge their irrational thinking and to recognize the self defeating behaviors that they used to stop the irrational thinking. As theorized in the research question it is the irrational thinking that leads a person to partake of a SDB in order to cope with emotions, beliefs, life, and work to name a few. By educating people to recognize their irrational thinking they will learn how to stop or decrease their SDB's. By attending RSH workshops people become more educated to recognize their irrational thinking that leads to SDB's. As noted in chapter four of this research project, the degree of beliefs changed from strongly

agree and agree to disagree after the Respondents had attended the workshops over the specified time.

The biggest surprise was that so many of the respondents continued to attend the group classes and that only five had dropped out by the time the last test was distributed. The response to the questionnaire was excellent. The researcher believes that the reason for this was the choice of the responsible group leader, Wynne Hemingway, who cared about the project and was willing to put the questionnaires in the hands of the workshop members at the appropriate time.

As has been thoroughly presented earlier in this paper, the relapse rate for people who partake in SDB's is incredibly high. It has been well documented that not every self help group works for everyone and that relapse will occur for almost everyone. With these two factors in mind, it makes sense that a person trying to recover from an SDB should address and attend a group that educates them to recognize their irrational thinking that causes them to partake of the SDB. It is the belief of this researcher that the sample population answering the questionnaire presented in this paper have shown they have a distinct desire to educate themselves to recognize their irrational thinking which causes them to partake of a SDB.

The research shows that the workshop was effective in educating people to recognize the irrational thinking that leads to SDB's and that it is the irrational thinking that leads a person to partake of a SDB in order to cope with emotions,

beliefs, life, and work to name a few. By educating people to recognize their irrational thinking they will learn how to stop or decrease their SDB's.

As theorized, the results of the survey showed that the members who attended the Rational Self Help workshops changed their irrational thinking and beliefs after attending the workshops. The respondents also lessened their Self Defeating Behaviors as their irrational thinking and irrational beliefs changed. As presented in chapter four the respondents changed their irrational thinking over a period of time whereas for the questions that they had strongly agreed or agreed to at the first test changed to disagree by the fourth test and vice versa (see Graphs 1-4) Findings indicate that participants in RSH workshops see themselves as more aware of their irrational thinking after completing the workshops. It appears therefore that these workshops are effective in educating people to recognize the irrational thinking that leads to SDB.

Recommendation

It is recommended that certain changes be made to the questionnaire if this study is to be replicated. There should be a rearrangement of questions or new questions that cover the same topic so that the respondents will not become conditioned to the test and answer the questions the way that they did on the previous tests. In the future it could prove interesting to center a study around the large percentage of respondents who achieved sobriety through other self help groups having them look at their irrational thinking and beliefs and see if they have changed their irrational thinking and beliefs over a period of time after attending

the other self help groups. It could prove informative and helpful to the population who partakes in self defeating behaviors (SDB) and attends other self help groups to recognize that it is not only the SDB that they need to be aware of and address but also their irrational thinking and behavior that causes them to partake of the SDB.

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APPENDIX A

RSH TEST 1

RSH TEST 1

| Name_ | Address |
|----------------|--|
| City | ZipPhone |
| WHAT Please | T DO YOU THINK? rate the following questions: 1-3 (from strongly agree to disagree). |
| | ongly Agree |
| 2. Agr | |
| 3. Disa | |
| 1. If w | re are friendly to others, they should be friendly back |
| 2. Unh | nappiness is usually the result of being treated badly by others |
| 3. Peo | ple need to become angry in order to change what is not fair |
| 4. You of | ur worth as a human being is measured by how many people approve you |
| 5. Unl | less people get anxious about how well they perform they will not nieve too much |
| 6. Pec | ople really can not help thinking less of themselves when they fall |
| 7. We | should be upset when others are unhappy |
| 8. Sel | f-confidence only comes from success |
| | e reason why people "breakdown" is that others expect too much of |
| 10. Th | te person who gets disgusted with himself for failing is more likely not succeed in the future |
| 11. Ad | lults can live happily whether people like them or not |

| 12. Things should be fair |
|--|
| 13. People who do something wrong should feel guilty about it |
| 14. A person needs to be motivated before they take action |
| 15. Our current behavior will always be determined by how we have been conditioned to behave in the past no matter how hard we try to change |
| 16. A person need certainty and stability in their life |
| 17. You should give yourself a global rating such as "I am an alcoholic" |
| 18. A person needs to be loved by somebody |
| HOW DO YOU BEHAVE? |
| 20. What kind of self-defeating behavior do you engage in? |
| |
| |
| 21. Do you have any ideas why? |
| |

22. What would you like to achieve by participating in this workshop?

APPENDIX B

RSH TEST 2

RSH TEST 2

| Na | meAddress |
|-----|---|
| Cit | tyZipPhone |
| Ho | ow many times have you attending the workshop? |
| | HAT DO YOU THINK? ease rate the following questions: 1-3 (from strongly agree to disagree). |
| 2. | Strongly Agree Agree Disagree |
| 1. | If we are friendly to others, they preferably should be friendly back |
| 2. | Unhappiness is usually the result of being treated badly by others |
| 3. | People need to become angry in order to change what is unjust |
| 4. | Your worth as a human being is measured by your accomplishments and by how many people approve of you |
| 5. | Unless people get anxious about how well they perform they will not achieve too much |
| 6. | People really can not help thinking less of themselves when they fall |
| 7. | We should be upset when others are unhappy |
| 8. | Self-confidence only comes from successes |
| | The reason why people "break down" is that others expect too much of them |
| 10 | A person who gets disgusted with themselves for failing if more likely to succeed in the future |
| 11. | Adults can live happily whether people like them or not |

| 12. If we are friendly to others, they (absolutely) should be friendly back |
|--|
| 13. Guilt and Shame are good motivators |
| 14. A person needs to be motivated before they take action |
| 15. Our current behavior will always be determined by how we have been conditioned to behave in the past no matter how hard we try to change |
| 16. A person needs certainty and stability in their life |
| 17. You should give yourself global rating such as "I am an alcoholic" |
| 18. A person needs to be loved by somebody |

WHAT ABOUT THE BEHAVIOR PART, ARE YOU ACTING MORE RATIONALLY?

BIOGRAPHICAL SKETCH

Renee Lynn Jacobson was born in Chicago, Illinois in 1965. She received her elementary and high school education at Thunderbird Adventist Academy in Scottsdale, Arizona. In 1984, after graduation from high school, she enrolled in Scottsdale Community College in Arizona, and by 1987 she had her Associate of Arts degree in Communication. During this time she also was enrolled at Arizona State University in Tempe, Arizona, and by 1989 she had her Bachelor of Arts degree in Sociology. After working in the Hotel Industry for six year's she decided that she needed a career change. Having gone through counseling herself she became interested in this field and decided to continue her education and pursue a career in Counseling. In January 1993 she enrolled in the graduate program at Ottawa University in Phoenix, Arizona. She completed her 60 hour Master of Arts degree in May 1994 with a concentration in Counseling.

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