

QUALITATIVE STUDY OF THE IMPACT OF RATIONAL EMOTIVE THERAPY
ON HIGH SCHOOL GIRLS EXHIBITING EMOTIONALLY DISTURBED
BEHAVIOUR

A Thesis Submitted to the Goa University
For the
Degree of Doctorate of Education

Guide

B.K. Passi
Dr. B.K. Passi

Investigator

Beulah Mendez
Beulah Mendez



Nirmala Institute of Education

Panaji, Goa

1996

371.46
MEN/qua
1-122

~~1-100~~

राष्ट्रीय अध्यापक शिक्षा परिषद्

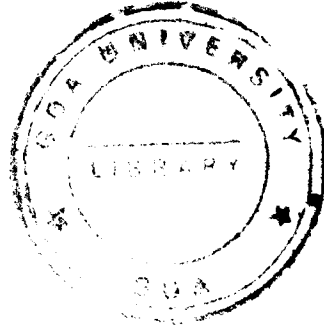
(भारत सरकार का एक विधिक संस्थान)

NATIONAL COUNCIL FOR TEACHER EDUCATION

(A STATUTORY BODY OF THE GOVERNMENT OF INDIA)

C E R T I F I C A T E

This is to certify that this thesis entitled 'QUALITATIVE STUDY OF THE IMPACT OF RATIONAL' EMOTIVE THERAPY ON HIGH SCHOOL GIRLS EXHIBITING EMOTIONALLY DISTURBED BEHAVIOUR' submitted by Beulah Mendez is her own work carried out under my guidance and is worthy of examination.



Signature of Guide

B.K. Passi

Dr. B.K. Passi
Vice Chairman NCTE
Guide of Goa University

16. महात्मा गांधी मार्ग, इन्द्रप्रस्थ एस्टेट, नई दिल्ली-110002
16, Mahatma Gandhi Marg, I. P. Estate, New Delhi-110002
दूरभाष/Phone : 3320795, 3351677 फ़ैक्स/FAX : 91-11-3351716

DECLARATION

I, Miss Beulah Mendez, solemnly declare that this thesis being submitted by me is my own research work on 'Qualitative Study Of The Impact Of Rational Emotive Therapy On High School Girls Exhibiting Emotionally Disturbed Behaviour' carried on under the guidance of Dr. B.K. Passi, Vice Chairman of NCTE and guide of the Goa University.

I do further declare that to the best of my knowledge, the research work presented in this thesis is original and has not yet been submitted in part or full for any other diploma or degree of this or any other University.

Beulah Mendez



Investigator

ACKNOWLEDGMENT

I am immensely grateful to my guide Dr. B. K. Passi for his excellent guidance given to me at all the stages of my research work. Dr. B.K. Passi has not only guided me but has inspired me by his hard work and excellence in the field of Education. He encouraged and challenged me through out my research work. His creativity, enthusiasm, hardwork and encouragement has gone a long way in completing this research in time.

My special thanks are also due to Mrs. S. Passi, Miss V. Passi, and Miss Gil for their hospitality, encouragement and support especially during my stay at Indore.

I am also very grateful to my Principal Dr. J Fonseca, Nirmala Institute of Education for her valuable guidance, support and encouragement in completing this study efficiently.

I am indebted to the Society of the Daughter of the Heart of Mary (Management) for granting me leave for Two Years and for all the facilities extended to me during this period. I am also grateful to Vimalalayam Community and all my sisters in Goa.

I am immensely grateful to the Management, Principal, Staff and Students of St. Teresa's Convent Girls High School for giving me all the freedom and facilities for conducting this research. I thank all the parents and students for their co-operation and collaboration during the data collection and study. A special thanks to Class VIII B of St. Teresa's Convent Girls High School of the academic year 1993-1994, and their class teacher Mrs. Jane Paul without whose support, adjustment of the

time table, co-operation and presence during the out door activity, group counselling would not have been so effective.

My special thanks are also due to my family members for their support, encouragement and help and especially my brother Toby, my nephew Lionel, neices Suman, Zarine and Dufferine for helping me out with scoring, preparation of charts, and taking of photographs of the important sessions. A big thanks to Petro and Rona for sending me the essential Books from America.

I am also very grateful to Dr. T. Kalathiveetil, Dr. M. Majundar, Dr. C. Ninan, Dr. P. Dukle and others for their valuable suggestions and criticisms during the preparation of tools.

I also extend my gratitude to our Prabhatara sisters for their encouragement, support, and the conducive environment created for my study during my stay at Delhi.

My thanks are also due to my colleagues, Miss V. Sequira for her timely help especially during the preparation of tools. I also extend my thanks to Mr. Naik, Mr. L.D'Souza, Miss E. Fernandes, Mr. P.D'Souza and Mr. U. Rodrigues. I am extremely grateful to Dr. G. Padhan for helping me with valuable suggestions.

I want to extend my special gratitude to my ex-student and friend Mrs. L. Walawalker for checking my language and Mr. S.B. Bakhale for typing the thesis so neatly.

Investigator

Beulah Mendez

TABLE OF CONTENTS

CHAPTER	PAGE
APPROVAL SHEET	111
ACKNOWLEDGEMENT	v
LIST OF TABLES	xii
LIST OF MATRICES	xiv
LIST OF FIGURES	xvi
LIST OF PHOTOGRAPHS	xviii
LIST OF ABBREVIATIONS	xx

CHAPTER I IMPORTANCE AND DEVELOPMENT OF TOPIC

1.0.0 Introduction	1
1.1.0 Significance Of The Study	5
1.1.1 Historical Development Of RET	8
1.2.0 Definition Of Keywords	16
1.2.1 Cognitive Behaviour Modification (CBM)	20
1.2.2 Progressive Relaxation Exercise (PRE) and Awareness Exercise (AE)	21
1.3.0 Delimitations Of The Study	22

CHAPTER II PILOT STUDY

2.0.0 Introduction	24
2.1.0 Objectives Of The Pilot Study	25
2.1.1 Pilot Study Methodology	25
2.1.2 Selection Of Sample	27
2.1.3 Tools And Materials	27
2.1.4 Procedure Of The Pilot Study	27
2.2.0 Case Study I Timid Renu	28

2.2.1	Home Scenario	29
2.2.2	Treatment Of RET	31
2.2.3	Identification Of iBs And EDBs	34
2.2.4	Origin And Development Of iBs In Renu	36
2.2.5	Introduction Of rBs In Renu	38
2.2.6	RET Therapist And Her Impact	40
2.2.7	Impact Of RET On Timid Renu	41
2.2.8	Emergence Of Specific Theory	42
2.3.0	Case Study II Depressed Binu	
2.3.1	Home Secenario And Background Of Binu	43
2.3.2	Treatment Of RET And Depressed Binu	44
2.3.3	Detection Of Binu's iBs	47
2.3.4	Effect Of RET In Depressed Binu	47
2.3.5	Emerging Specific Theory	55
2.4.0	Case Study III Frightened Genu	
2.4.1	Identification Of EDBs In Genu	56
2.4.2	Family Constellation And Scenario	57
2.4.3	Treatment Of RET On Genu	58
2.4.4	Glimpses Of Counselling Sessions	59
2.4.5	Emerging Specific Theory	65
2.5.0	Outcomes Of The Final Study	66
2.5.1	Guidelines For The Final Study	67
2.5.2	Feedback From Genu	70
CHAPTER III DESIGN OF THE STUDY		
3.0.0	Introduction	71
3.1.0	Preparation	72
3.2.0	Research Approach	73

3.2.1	Case Study	74
3.2.2	Selection Of Sample	76
3.2.3	Sources Of Data	80
3.3.0	Data Gathering Techniques	81
3.3.1	Participant Observation (PO)	82
3.3.2	Indepth Interview (II)	83
3.3.3	Home Visits	84
3.3.4	Individual And Group Counselling Sessions	84
3.3.5	Feedbacks	86
3.4.0	Data Gathering Tools	86
3.4.1	Investigator	87
3.4.2	Investigator Prepared Tools (IPTs)	88
3.4.3	Rational For Investigator Prepared Tools	88
3.4.4	School Observation Schedule (SOS)	91
3.4.5	Charts, Posters, Photographs	92
3.5.0	Treatment Of RET	93
3.5.1	Rational Emotive Education (REE)	93
3.5.2	Rational Emotive Imagery (REI)	94
3.5.3	Cognitive Behaviour Modification (CBM)	95
3.5.4	Progressive Relaxation Exercise (PRE) And Awareness Exercise (AE)	96
3.5.5	Steps In RET (Countering iBs)	97
3.5.6	Phases Of RET	99
3.6.0	Data Collection Procedure	99
3.6.1	Data Collection	99
3.6.2	Organization Of Data And Information	101
3.6.3	Data Reduction And Analysis Of Data	102

3.6.4	Data Display	102
3.6.5	Renu's Feedback During RET	104
CHAPTER IV WITHDRAWN KEYEY (CASE STUDY I)		
4.0.0	Introduction	106
4.1.0	Objective 1	107
4.1.1	Identification And Selection Of KEYEY	108
4.1.2	Home Background	109
4.1.3	Identification Of iBs	113
4.1.4	Identification Of Keyeey's EDBs	115
4.1.5	Origin And Development Of EDBs	117
4.2.0	Objective 2	119
4.2.1	Treatment Of RET	119
4.2.2	Glimpses Of Individual Sessions	120
4.2.3	Stage Fear Of Keyeey And iB No-2	124
4.2.4	Dealing With Her iB No-4	127
4.3.0	Objective 3	128
4.3.1	Application OF RET	129
4.3.2	Feedback Sessions	130
4.3.3	Investigator's Participant Observation	134
4.3.4	Emerging Ground Theory	135
CHAPTER V ANXIOUS ANN (CASE STUDY II)		
5.0.0	Identification Of Anxious ANN	136
5.1.0	Objective 1	137
5.1.1	Family And Environment	137
5.2.0	Origin And Development Of iBs And EDBs	141
5.2.1	Investigator's Observation	143

	ix
5.3.0 Objective 2	146
5.3.1 Treatment Of RET	146
5.3.2 Individual Counselling Sessions	146
5.3.3 Group Counselling Sessions	156
5.4.0 Objective 3	156
5.4.1 Impact Of RET	156
5.4.2 Investigator's Participant Observation	160
5.4.3 Emerging Ground Theory	161
CHAPTER VI NERVOUS JUDY (CASE STUDY III)	
6.0.0 Introduction	162
6.1.0 Identification And Selection Of Judy	162
6.1.1 Objective	163
6.1.2 Home Environment	163
6.1.3 Judy's Achievements	166
6.1.4 Co-curricular Activities	167
6.1.5 Psychological Data Of Judy	168
6.1.6 Origin And Development Of iBs And EDBs	170
6.2.0 Objective 2	171
6.2.1 Relationship Between iBs And EDBs	171
6.2.2 Treatment Of RET	171
6.3.0 Objective 3	183
6.3.1 Impact Of RET	183
6.3.2 Investigator's PO	185
6.3.3 Feedback From Judy	187
6.3.4 Specific Ground Theory	189
CHAPTER VII DEPRESSED DEEPA (CASE STUDY IV)	
7.0.0 Introduction	190

7.1.0	Identification Of Deepa	190
7.1.1	Objective 1	191
7.1.2	Scenario Of Deepa's Family	191
7.2.0	Objective 2	197
7.2.1	RET And Deepa	199
7.2.2	Group Counselling Sessions	200
7.2.3	Glimpses Of Individual Sessions	200
7.3.0	Objective 3	204
7.3.1	Investigator's PO	206
7.3.2	Emerging Ground Theory	209
CHAPTER VIII RET AND ANGRY MARIE (CASE STUDY V)		
8.0.0	Introduction	210
8.1.0	Objective 1	211
8.1.1	Marie And Home Environment	211
8.1.2	Marie's Achievement	215
8.1.3	Psychological data	216
8.2.0	Objective 2	216
8.2.1	Investigator's Participant Observation (IPO)	220
8.2.2	Treatment Of RET On Angry Marie	222
8.2.3	Glimpses Of Individual Counselling Sessions	223
8.3.0	Objective 3	229
8.3.1	Investigator's PO	230
8.3.2	Emerging Ground Theory Of The Impact Of RET On Angry Marie With Multiple Problems	235
CHAPTER IX RET IN GROUP (CASE STUDY VI)		
9.0.0	An Overview	236
9.1.0	Objective 1	236

	xi	
9.1.1	The School Environment	240
9.1.2	Description Of Class VIII B	242
9.1.3	Selection Of Class VIII B	244
9.1.4	Family Influences	245
9.1.5	Influence Of Teachers	247
9.2.0	Objective 2	249
9.2.1	Treatment Of RET	254
9.3.0	Objective 3	257
9.4.0	Objective 4	257
9.4.1	Samples Of Student Feedbacks	264
9.4.2	Emerging Ground Theory Of The Impact Of RET	267
CHAPTER X SUMMARY AND EDUCATIONAL IMPLICATION		
10.0.0	Introduction	268
10.1.0	Research Questions	268
10.1.1	Summary	269
10.1.2	RET In Angry Marie	273
10.1.3	RET IN Group VIII B	273
10.2.0	Emergence Of Theories	282
10.2.1	Ground Theory	284
10.3.0	Educational Implications	284
10.3.1	Suggested Curriculum For Rational Emotive Therapy	286
10.3.2	Educational Agencies	287
10.3.3	Suggestions For Further Research	287
	In Group	

LIST OF TABLES

TABLES	PAGE
2.2.1 Renu's Identification With Family iBs	37
3.3.1 Details Of Individual And Group Counselling Sessions	85
4.1.1 Scholastic Performance	112
4.1.2 Origin And Development Of iBs	115
4.3.1 Impact Of RET On Keey	135
5.1.1 Scholastic Achievement Of Ann	140
5.2.1 Inter-relationship Of iBs With Family And Teachers	141
5.4.1 Pre-test, Post-test Results Of IPTs	157
6.1.1 Scholastic Achievements	167
6.1.2 Comparitive Study Of The Presence Of iBs	170
6.3.1 Test Results Of IPTs And Bell's Adjustment Inventory	188
7.1.1 Deepa's Achievements.	194
7.1.2 Origin And Development Of iBs In Deepa	195
7.3.1 Impact Of RET On Depressed Deepa	204
8.1.1 Performance In School Subjects	217
8.1.2 Identification Of iBs And their Intensity In Angry Marie	218
8.1.3 Communality Of Marie's iBs With Family And Teachers	218
8.3.1 Impact Of RET And Pre-test, Post-test Scores Of IPTs	230
9.1.1 Sharing Of iBs	248
9.2.1 Gradient Presence Of iBs And EDBs Before RET	250
9.4.1 Comparitive Study Of Gradient Presence Of iBs	258

And EDBs Before And After RET.	
9.4.2 Significance Of Difference Between Correlated Means	259
9.4.3 Effect Of RET And Areas of Growth Class VIII B	262
10.1.1 Growth Gradients Of RET Innovation In All Six Cases	275
10.1.2 Presence Of iBs In All Six Cases	278
10.1.3 Effect Of RET On IPTs Pre-test, Post-test	278
10.1.4 A Comparison Of Correlated Significance Of Difference Of Means	281

LIST OF MATRICES

MATRICES	PAGE
1.1.1 Conceptual Frame Work	15
2.1.1 Overview Of The Pilot Study	24
2.1.2 Proposed Process Research Design Of Case Study	26
2.2.1 Home Scenario Of Timid Renu	30
2.2.2 Phases Of Treatment Of RET On Renu	42
2.3.1 Relationships Of ABCDE's	48
2.4.1 Genu's iBs And EDBs	58
2.4.2 Effect Of RET	65
2.4.3 RET Process Model Of Genu's Treatment	65
2.5.1 Research Design For The Final Case Studies	69
3.1.1 Overview Of Procedural Steps	71
3.4.1 Description of Investigator Prepared Tools	89
3.5.1 Process Product Of RET	98
4.1.1 Model Of The Process Of Ret On Kway	107
4.3.1 Feedbacks	132
5.2.1 Ann's EDBs	142
5.2.2 Feedbacks before The Treatment Of RET	145
5.4.1 Process Model Of RET On Anxious Ann	157
5.4.2 Feedbacks Before And After RET	158
6.1.1 Identification of iBs And EDBs	169
6.3.1 Feedbacks From Teachers, Peers, Family And Judy	184
6.3.2 Judy Before And After RET	189
7.2.1 Deepa's iBs And EDBs	197
7.3.1 Feedbacks From Teachers, Peers, Family And Deepa	206
8.2.1 Angry Marie Before RET	219
8.3.1 Marie After RET	219
9.1.1 Phases Of Treatment Of RET And Group	237
9.2.1 EDBs Of Class VIII B Feedbacks	251

9.2.2	Relationships Between iBs And EDBs	252
9.4.1	Impact Of RET In Group And Areas Of Change	261
10.1.1	Impact of RET On Withdrawn Keey	271
10.1.2	RET On Anxious Ann - The Process Product Model	272
10.1.3	Model Of RET On Nervous Judy	273
10.1.4	Phases Of Treatment Of RET On Depressed Deepa	273
10.1.5	Effect Of RET In All Six Cases	277

LIST OF FIGURES

FIGURES	PAGE
1.2.1 Model Of RET	16
1.2.2 Interactive Model Of RET - Steps	17
2.1.1 Steps For Pilot Study Process Model	26
2.2.1 Model Of The Effect Of RET On Timid Renu	41
2.3.1 RET Process Model	48
2.3.2 RET Process And Depressed Binu	54
2.5.1 Model Of The RET Process	68
3.5.1 Interactive Model Countering iBs	97
4.2.1 Vicious Cycle Of EDBs In Keey Related To iB No.1	122
4.2.2 Impact Of iB No. 4 On Keey	128
4.3.1 Model Of RET On Withdrawn Keey	134
5.3.1 Vicious Cycle Of The Effect Of iB No.1 In Ann	149
5.3.2 Choice Of EDBs And Its Effect On Ann	152
6.2.1 Faulty Study Habits	175
6.3.1 Process Product Model Of RET On Nervous Judy	189
7.3.1 Comparison Of Pre-test, Post-test Scores Of IPTs Of Deepa	205
7.3.2 Process Product Model Of RET On Depressed Deepa	207
8.3.1 Process Product Model Of RET On Angry Marie	235
9.1.1 Interactive Model Of RET For Group	237
9.1.2 Location Of The School	238
9.1.3 Seating Arrangement Of Class VIII B	238
9.1.4 Scenario Of The School And Class VIII B	239
9.1.5 Flow Chart Selection And Site	243
9.4.2 RET And Social Development	263
10.1.1 Interactive Model Of RET	269
10.1.2 (a,b) The Design Of The Study	270
10.1.3 Phases Of RET In Angry Marie	274

10.1.4 Reduction Of iBs	279
10.1.5 Reduction Of Fears	279
10.1.6 Reduction Of Anxiety	279
10.1.7 Reduction Of Anger	279
10.1.8 Reduction Of Poor Self Concept	279

LIST OF PHOTOGRAPHS

PHOTOGRAPHS	PAGE
1 Progressive Relaxation Exercise (PRE) Individual	21
2 PRE For Group	21
3 Renu	36
4 Genu And Family	57
5 Poster	92
6 Taking Post -tests	92
7 Individual Cases With The Investigator	103
8 Group discussion - Class room	103
9 Out door Activity	103
10 Group discussions	103
11 Keey And Investigator	106
12 Keey	108
13 Cognitive Behaviour Modification (CBM)	114
14 Individual Session	120
15 Ann	135
16 Counselling Session	151
17 Ann In The Group Session	159
18 Judy	162
19 Judy And The Investigator	172
20 Judy Dancing	180
21 Deepa And The Investigator	199
22 Deepa After RET	205
23 Marie	210
24 Marie And The Investigator	222
25 RET Sessions	232
26 Marie After RET	232

	xix
27 RET Sessions For Small Group	245
28 RET Sessions For Class VIII B	254
29 CBM For Small Group	255
30 Out door Activity	256
31 Teacher, Investigator And Students Of Class VIII B	267
32 Angry Marie	274
BIBLIOGRAPHY	288
APPENDICES	
APPENDIX I RET	302
APPENDIX II BSKS	331
APPENDIX III SOS	332
APPENDIX IV CLASS VIII B	334
APPENDIX V TEACHERS INTERVIEWED	336
APPENDIX VI FORMAT OF PRE	337
APPENDIX VII HEADMISTRESS' LETTER	338

Abbreviations Used In The Thesis

1. Rational Emotive Therapy (RET)
2. Activating agent (A)
3. Beliefs (B)
4. Consequences (C)
5. Debate (D)
6. Effect (E)
7. Rational Emotive Education (REE)
8. Rational Emotive Imagery (REI)
9. Irrational Beliefs (iBs)
10. Rational Beliefs (rBs)
11. Irrational Beliefs (iBs)
12. Emotionally Disturbed Behaviour (EDBs)
13. Self Winning Behaviours (SWBs)
14. Cognitive Effect (cE)
15. Behaviour Effect (bE)
16. Beulah's Irrational Belief Description (BIBD)
17. Beulah's Irrational Belief Questionnaire (BIRBQ)
18. Fear Identification Rating Scale (FIRS)
19. Anger Rating Scale (ARS)
20. Anxiety Checking Questionnaire (ACQ)
21. Poor Self Concept Rating Scale (PSCRS)
22. Cognitive Behaviour Modification (CBM)
23. Progressive Relaxation Exercise (PRE)
24. Awareness Exercise (AE)
25. Participant Observation (PO)
26. Indepth Interview (II)
27. Informal Interviews (INI)

CHAPTER I

IMPORTANCE AND DEVELOPMENT OF TOPIC

1.0.0 Introduction

"Education to be complete must be humane, it must include not only the training of the intellect but also the refinement of the heart and the discipline of the spirit" (Radhakrishna 1938).

"Education directs his actions inspires his behaviour in all his contacts with human mind, and helps him to master himself. Education gives him the unalterable foundation of his life" (Le comte Du Novy).

Ruskin describes Education as, "The entire object of true education is to make people not merely to do the right things, but enjoy them; not merely industrious, but to love industry, not merely learned, but to love knowledge, not merely pure, but to love purity; not merely just, but hunger and thirst after justice". What does really happen in the class room?

"Education is bringing about modification of behaviours". "Education has for its object the formation of character" (H. Spencer 19th century). Do we notice these changes in the class rooms?

Education is supposed to be a preparation for life. How

many of our students coming out of our educational institutions can face life?

Investigator's experiences with the youth and their problems aroused her curiosity to go deeper into these apparent exterior distortations, that men and women, youth and adolescents, children and infants all alike exhibit, through symbolic language and actions.

"A child is only a child, and people don't know how very much a child knows. Or is it because people won't listen to a child or even to an adult? Because they don't want to know, other than what they already know. Or is it because they just can't, won't understand? May be because they won't believe whatever doesn't come within their experiences" (Rothenberg 1977).

The investigator has spent many hours in the classrooms of teachers. Her observations of present day normal classrooms, forces her to question the authenticity of these philosophical statements mentioned above.

Scientific advancement and technological progress have brought about, a revolution in the living process of humanity. It has made the world shrink. All that is happening in any part of the world at any time, can be viewed from our drawing rooms. "Mass media are flooding the minds of our school children with values that are often dangerous to self and humanity" (Paul 1994).

The violence, crime and suicides (Malayala Manorama 1994); theft murder and rape (Chand and Narendra 1995), occurring in our country are viewed by our youth. Adolescents

are very strongly affected, by what they see and hear continuously. "Everyday we hear the news about communal violence and clashes among different religious groups in every nook and corner of the country "(Satyavan, Jyoti 1995). The primary duty of the elders is to sow the seeds of love and tolerance in the minds of children and give them proper guidance. Who will do this work for our adolescents? The tensions and violence the adolescents witness in the mass media are causing tensions, conflicts and value deterioration. As a result, a number of our youths are exhibiting emotionally disturbed behaviours (EDBs). Some of them get paralysed and are a problem to self and others in the community. "Communal harmony would remain the goal for tortured, afflicted, wounded soul and psyche of the individual man, woman and child across the globe. Only good natured, well meaning people who are above the constraints and pressures of their particular civilizational double-mind could make life for people, irrespective of religious caste, province, language, culture, race, tribe and ethnic group tolerable and pleasant in their earthly pilgrimage" (Alexander 1995). An idealistic thinking and 'how' of this in the school system is not mentioned.

Many of our adolescents feel lonely, rejected and are drifting away, from the normal life stream through self defeating behaviours (SDBs) that are destructive to self and others. How do we bring these youth to face the reality without destroying themselves?

"India today is faced with grave crises. Destructive and divisive forces are threatening to devour this great nation. Mother India is crying out for brave and strong sons and daughters who will take up the duty of rebuilding her, even at the cost of their own lives. As new vision alone can

save this great nation" (Sachidanand 1995). And what is this vision Sachidanand is talking about?

"The present day education world over gives least importance to human values, such as service to others, non-violence, truth, simplicity, contentment etc. Hence the world suffers due to corruption, terrorism, consumerism and other meanaces" (Kaliappan 1995). "Services does develop personality, but quicker, better and multifier effect can be achieved through well formulated personality development training" (Kalliappan 1995). What this well formulated personality development training is, has not been explained by Kalliappan.

Humans have always fascinated the investigator. The more she got involved with people of different age groups, the more she saw and listened to them and to their pains, shared their dreams and fears, their doubts and inhibitions, their insecurities and hopelessness, of their rationalizations and struggles for survival the questions in her mind took deep roots. She finds it difficult to understand why the same event has different impacts on different people. The misery and sufferings of people turned one lady to Mother Theresa and another man to Baba Amte, while others turn violent, still many remain indifferent. How could concentration camp experiences become so meaningful to Mira and Viktor? Mira's sufferings became a reservoir from which she drew strength and courage to enter into the lives of others, who were battered and shattered through the experiences of concentration camps to heal and build. And Viktor came out with a new approach in counselling,

namely 'logotherapy'. How do the same experiences enrich and ennoble one, but crush and destroy another?

These basic questions have played a role in the choice of the topic.

"No insanity is incurable. It is just that they don't know how to cure some forms of it. No insanity is so frightening as to make it untouchable and hence incurable. If touched with understanding and compassion, it becomes curable" (Rothenburg 1977). If only one could enter into that mysterious world and see what he/she sees, if only one could understand how and why the other sees what he/she sees, then it becomes evident that it is only a drifting from the main road, the common way. "What is mental illness if not getting lost of the self for whatever reason" (Rothenberg 1977).

1.1.0 Significance Of The Study

The increase of emotionally disturbed behaviours (EDBs) among high school students and teacher trainees over years is one of the reasons for taking up this study. It is observed that these EDBs are exhibited by practically all the school children in one form or the other, the increase of indiscipline, violence, crime, cruelty among the student population and destruction of public and private property (Newspaper reports).

Increase of drug addicts among the youth of Goa and the

cities of India is also an indication of restlessness, unhappiness and incapacity to face life's reverses courageously. This in turn is affecting the student population in their poor academic performance as well as in self destructive behaviours (SDBs). Visits to counselling centres and department of psychiatry and human behaviour high light the fact that there is an increase in the number of mental breakdowns among the youth namely school children as well as college students (Kumar, Kaur and Kaur 1993).

Education is expected to bring about allround development of the individual physical, mental, emotional and spiritual. "It is a man-making process" (Vivekananda 19th Century). Yet a glance at the products of our present education system give an entirely different picture (Zainuddin 1993).

A good number of our youth coming out of our educational institutions lack a sense of direction and purpose in life. They seem to suffer from identity crisis and show signs of low frustration tolerance (LFT) and some of them even wonder why they live. "Education has for its aim formation of Character" (Spencer 19th century). We see a contradiction here.

If education is to be relevant, then these emotionally sick students need to be helped. "A sound mind in a sound body" is as old as (Aristotle 4th century BC). If we want to have a future society with healthy people, then we cannot

ignore this increase of EDBs in our school children.

Observation of our Indian society today brings to light, without any trace of doubt, that man is becoming more and more sick emotionally. His/her incapacity to forgive, to love, to respect, to unite, to rebuild a new world, where man and woman would be respected as persons, remains an idealistic far off dream. Would educationists remain as silent spectators? Are we not supposed to touch the most important domain of man the very core of his existence, his heart, his feelings and emotions? (Bloom 1967).

If anything is urgent in education today, it is enabling the emotionally crippled youth of ours, to break off from the fetters, that are oppressive like fear, timidity, aggression anxiety, nervousness and depression. Freeing youth means, freeing them from self downing, self defeating behaviours and helping them to be creative nation builders through accepting the reality of themselves, people and the world (Powel 1984).

"Mankind makes his own heaven or hell, during his life time upon the earth by the way in which he moulds his life. The negative emotions of fear, hate, jealousy selfishness are all destroying emotions, as opposed to courage, love, selflessness, which are creative forces within the spirit of man if he will seek them out" (Deheuter 1970; Kohlberg 1950). RET seems to give an answer.

"Our Schools, at present time, are some what proficient in teaching children how to read, write, do arithmetic and comprehend various other subjects. But they as yet do little to help them in their emotional growth and development.... Children can be taught in the regular class room situation to think clearly about themselves and others, as well as to think about eternal reality" (Ellis 1968). RET can teach children how

to go through life without unduly upsetting themselves about anything and how to maximally enjoy themselves. It is the investigator's observation that this element of the 'joy of living' is often taken away in most of our class room teachings. Could RET bring this joy back into the classroom?

1.1.1 Historical Development Of RET

"The greatest discovery in our generation is that the human beings by changing the inner attitudes of their minds can change all the other aspects of their lives" (James 1984). Such thinking was not foreign in our motherland. "As a man thinks so is he. All that we are is the result of our thoughts" (Gotama BC 600). "Overcome anger by forgiveness, conquer vanity by humility, treachery by uprightness and vanquish desires through contentment. Right knowledge, right belief, right conduct, these together constitute the path of freedom" (Mahavir B.C.600). And yet the teachers and educators have not succeeded in bringing this freedom in our class rooms. This is exactly what the RET-therapists are trying to do "Ignorance was conquered, the light came, and I felt myself to be the master" (Gotana B.C.600). He left his palace, child and wife to achieve enlightenment. Is there a better way of self mastery and enlightenment?

"What disturbs people's minds is not the events but their judgements of events, you choose to over react to the obnoxious behaviour of others, while you could more wisely choose to treat it in very different manner" (Epictetus 1st

Century AD). We saw these thoughts in Gotama and Mahavir. We see the same importance given by sufis to thoughts." My brother you are only thought; the rest of you is but bone and sinew. If thy thoughts bear the likeness of a rose, thou art a rose garden, if that of thorn, thou art fuel for the oven" (Sufis).

The good news preached by all these people is that, we are free to change our attitudes and consequently change our lives,. "Attitudes are no more than practical habitual ways of perceiving some part of reality. We can break old habits and make new ones" (Powel 1984).

"RET has been my method of personal therapy ever since I have learnt about this method. My depressions have vanished, I only suffer mild pangs of guilt and no inferiority at all. RET your secrets are divine. Your great charm is this ability to provide us with self help" (Hauck 1984). What is the aim of education if not to provide self help?

The Investigator has classified the development of RET as follows:

- a) Precursor of irrational beliefs (iBs)
- b) Identification of iBs
- c) Diagnosis of iBs and related emotional problems
- d) Critical study of RET
- e) Personality of the therapist .
- f) The Effect of RET
- g) Miscellaneous

a) Precursor of irrational beliefs (iBs): Dysfunctional thought is considered as a precursor of iBs by (Beck 1970), while (Lazarus 1972) considered dichotomous reasoning and culturation and our socialization as precursor of iBs.

b) Identification of iBs: "RET has found that by following the age old wisdom of the philosopher Epictetus and combining it with the most modern methods of psychotherapy anyone can learn to reduce or eliminate self defeating behaviours" (Ellis 1987). "The fault dear Brutus is not with our stars, but with ourselves" (Shakespeare 16th century AD) (Ellis 1978; Jung, Ferne, Frank 1969; Leslie and Powel 1984) all believe that man can break old and crippling habits of perception and cultivate new life giving habits. Studies conducted by (Don Yuhee, Hallberg, Hasse, Richard 1979; Diguiseppe and Kasinove 1968) showed that iBs as causal agents for emotional problems in children, while (Maltzer 1933; Bernastein and Allen 1969; Hurlock 1969' Lohr, Bonge and Jones 1993) also confirmed the ideas of iBs as responsible for emotional problems in adolescents as well. (Charles, Cook, Flerking 1973) made the same discovery with reference to adults through their studies. It was also interesting to note how their iBs helped shop lifters in their delinquent behaviour (Soloman and Rays 1984). The presence of iBs were noticed by (Lorraine 1984) at all levels in school going children.

c) Diagnosis of iBs and related emotional problems: "We live according to our beliefs" (Varkey 1993). Our happiness depends not so much on what happens to us, as on what happens in us" (James 1984). The researches show that iBs are related

to specific types of anxiety (Ellis 1962; Greigner 1962; Charles, Mark, Flerking and Cook 1973; Fried and Sobanki 1975). Study of Dispositional optimism and life, meaning and purpose of the elderly by (Guasnera and Sharon 1992) also support Ellis' theories.

d) Critical Study of RET: "We must assume responsibility to what happens to us and for our attitudes, only if we accept this responsibility can we grow through various circumstances of life" (James 1984). Ellis and his methods were scrutinised in the test tube of laboratory experiments by researchers like (Mark 1972; Don Yulee, Hallberg and Hasse 1976; Webster and James 1988).

e) Personality of the RET therapist: "In every child who is born under any circumstances and no matter of what parents, the potentiality of human race is born again and in him too, once more and in each of us, the terrific responsibility towards human life" (Iyer 1991). "Beliefs are caught than taught" (Ellis 1968; Hauck 1984) enumerate a number of personality traits of RET therapists from their research findings.

These are risk taking, confident, rational, logical, empathetic, practical, taking a stand on issues, knowledge of RET methods and theory, straight forward, hard hitting, neat, clean, reasoning persons and logical in their approach to life, healthy respect for intellectualizing, have faith in RET-Theory, not other pitier, doesn't discourage mild degrees of disturbances, always encourage self debate and above all love

for the clients.

f) Effect of RET: "Our distorted perceptions become our merciless tyrants. We become the tortured prisoners of these crippling attitudes which will torment us as long as we tolerate them" (Powel 1984). RET has the ability for relieving, releasing and enabling the subjects to relearn, relate and to relive a more fuller and happier lives (David and Robert 1953; Becker and Rosenfields 1976). Studies show maladaptive, narcissistic behaviours were replaced by more positive self regard. RET and RET-Methods are very useful in developing mental health in normal children as well as to eradicate and reduce tensions and self defeating behaviours in emotionally disturbed (Eileen 1974; Ellis 1982; Seldon, John, Singer 1989). Studies of battered women and their defeating beliefs prove significantly Ellis' definition of IBs and rBs on coping strategies, stress and self-esteem (Meerts and Kin 1973). Effects of RET- Methods on adult impatient alcoholics helped them (Palmer, James, Morton 1985).

g) Miscellaneous: (Forman and Forman 1978) applied RET to parents and school personnel as well. Application of RET in different branches like marital, educational, clinical and health education and counselling reveal the magic touch of RET.

1. Research findings of the samples of iBs observed in subjects "Humans tend to self rate (Freud 1965; Berne 1964; Branden 1968; Roger 1971; Ellis and Harper 1975; Ellis and

Knaus 1977).

2. It is awful and catastrophic when things don't go the way you want. "Cognitive defensiveness depends on self-damning" (Ellis 1950; Jurejevick 1974; Regan, Gosselink, Hubsch and Ulsh 1975).

3. The idea that human unhappiness is externally caused (Kelley 1968; Cook, Pallak and Sogin 1976; Whlen and Henker 1976).

4. One should dwell on fearsome and dangerous events repeating. Anticipation of threats mediates emotional disturbances (Mark, Fritiz 1954; Folknis 1970; Grings 1973; Krupat 1974; Szpiler and Epstein 1976).

5. It is easier to avoid than to face certain life difficulties and self responsibilities. Humans have a tendency to low frustration tolerance (LFT) (Adler 1927; Freud 1965; Ellis 1962, 1975; Ellis and Harper 1975; Patterson, Michael, Whitehill, De Mayer, Gaspin and Scott 1976).

The research questions that have emerged integrate the major aspects of RET. The society does not change unless the individuals change as mentioned earlier. An attempt is made in this research, to deal with High School Girls Exhibiting Emotionally Disturbed Behaviours through RET and enabling them to choose "fulfilling, life giving and long range satisfaction oriented behaviours" (Ellis 1987).

The review of Educational Research literature in India showed that no mention of RET is made in the field of Education, Psychology or Guidance and Counselling. Therefore the investigator feels that a study of this type is of great importance in our country today.

"We may be guilty of many errors and many faults, but our worst crime is abandoning the children, neglecting the fountain of life. Many things we need can wait, the child, adolescent cannot. Right now is the time, his bones are being formed, his blood is being made and his senses are being developed. To him we cannot answer 'tomorrow'. His name is today". In these words of (Mistrat 1991) the investigator expresses the urgency and the need of this study.

Matrix 1.1.1 Conceptual Framework

Research Questions	Objectives	Hypotheses
1. What factors have contributed in the origin & development of iBs and EDB's in High School Girls?	1. To identify the origin & development of irrational beliefs (iBs) responsible for emotionally disturbed behaviours (EDBs) like fear, anger, depression, nervousness, withdrawal and anxiety in High School Girls through knowledge of RET.	1. Knowledge of RET will enable the investigator to identify the origin and development of iB's responsible for EDBs.
2. How far can knowledge of RET help the High School Girls in seeing the relationship between iBs and EDBs?	2. To study the relationship between irrational beliefs and Emotionally Disturbed Behaviours.	2. Knowledge of RET will enable the cases to identify the relationship between iB's and EDBs.
3. How effective is RET through individual and group sessions to reduce EDBs.	3. To study the impact of RET in bringing about positive changes in cognitive and effective domains by reducing or replacing `iBs' with `rBs' thus reducing EDBs.	3. Treatment of RET will enable the cases to remove or reduce `iBs' and `EDBs.
	4. To study the effect of RET in a group of 56 in the class room situation.	4. Treatment of RET will enable the group to reduce or remove their `EDBs by replacing `iBs with `rBs'.

1.2.0 Definition of Key Words.

The key words defined in the following paragraphs are Rational Emotive Therapy, ABCDE'S of RET, Rational Emotive Education, Rational Emotive Imagery, Irrational Beliefs, Rational Beliefs, Emotionally Disturbed Behaviours, self Defeating Behaviours, Cognitive Effect, Behaviour Effect and Countering iBs. All these terms are directly connected with RET. The other terms defined are cognitive Behaviour Modification, Progressive Relaxation Exercise and Awareness Exercise.

a) Rational Emotive Therapy (RET) is basically an educational psychotherapy showing the cause of an individual's self defeating behaviours as irrational Beliefs or their offshoot, and enabling the subject to replace these beliefs with Rational beliefs through detection of iBs, disputing, debating and destroying iBs.

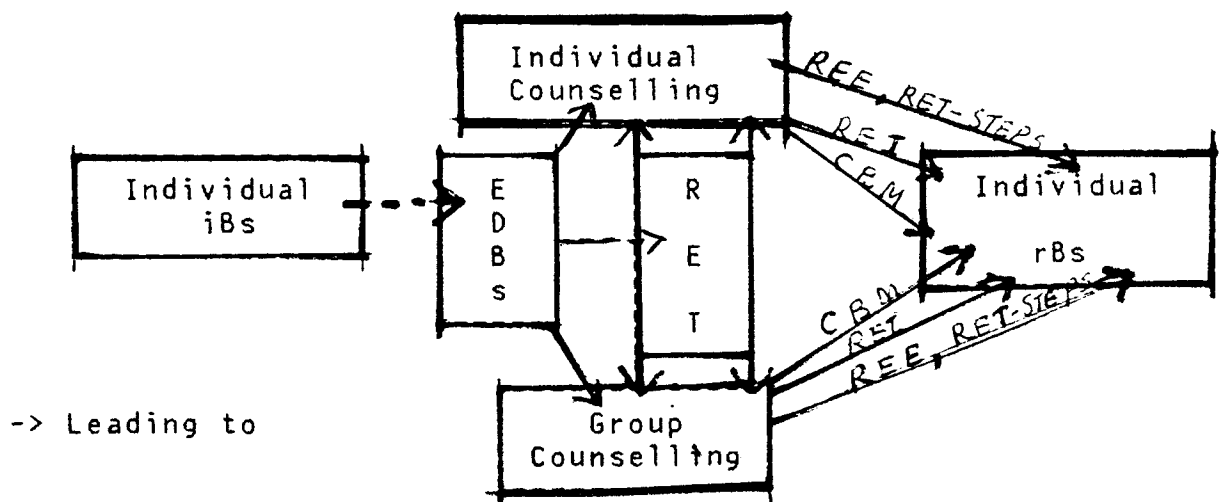
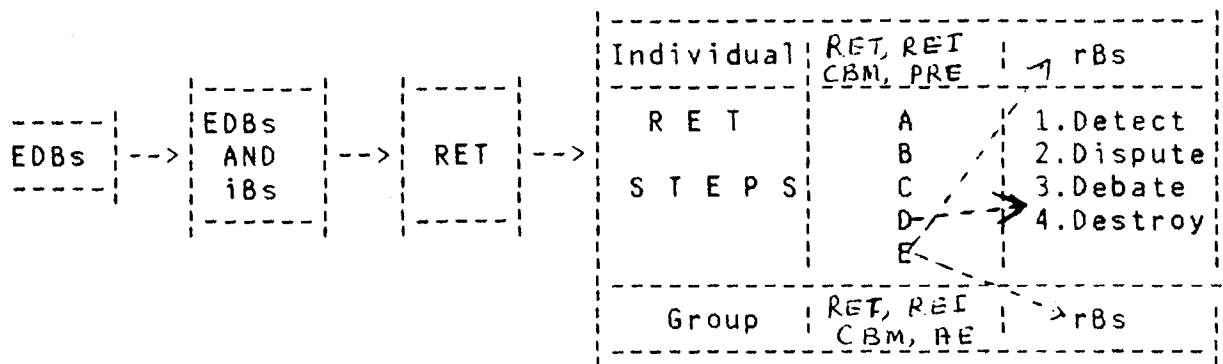


Figure - 1.2.1 Model Of RET

b) ABCDE's of RET: ABCD are the different steps used by RET - Therapists to counter iBs 'A' stands for activating agent, 'B' for the beliefs both rational and irrational 'C' for consequences of these beliefs on the subject and 'D' for debating through detection of rBs iBs and disputing iBs and destroying or reducing iBs and 'E' stands for the effect on the subjects' thinking and acting as a result of RET.



--> Leads to

Figure - 1.2.2 Interactive Model Of RET-Steps

Fig 1.3.2 Inter active Model of RET- Steps shows the different steps that are involved in the treatment of RET. Presence of EDBs leads to the discovery of iBs, treatment of RET through RET-Steps reduce iBs and introduce rBs. The steps for individual and group sessions are presented in the figure.

c) Rational Emotive Education (REE): It is education that leads the subject to reality. It Helps them (subjects) to look at life more objectively and realistically, thus helping them to break off from their self defeating, self downing, emotionally disturbed behaviours. REE encourages the subjects

to think for themselves logically in the given situation and to look at the different factors responsible for one's disturbances. At times it is "hard hitting", often bringing insight to the subject.

d) Rational Emotive Imagery (REI): It is a process by which the subject is helped to overcome his/her self defeating behaviours or ESDB's by imagery either through self winning behaviours or through increasing the intensity of EDB's through word imagery. It has been used to overcome, fears, nervousness, aggression, anger, timidity, anxiety and depression.

e) Irrational Beliefs (iBs):- These are considered to be responsible for emotionally disturbed behaviours (EDBs) by RET -Therapists. Ellis was the first one to identify these in his patients. The simplified list of iBs used for high school girls is given below:

1. I must be loved and accepted by every body in my neighbour hood.
2. I must be perfect in everything I do.
3. Some people are bad and wicked and they need to be punished.
4. It is terrible and bad when things don't go the way you want to go.
5. What we think or do now is because of what happened to us in the past and we cannot get away from this.
6. Bad and unhappy events are caused by others and other things. So we cannot do anything about them.
7. We need others to help us and we must have somebody strong to get us out of trouble.
8. When we have some difficult tasks to be done, it is much easier to run away from them than to face them.
9. There is always a right and perfect answer to every problem and it is a terrible thing if we cannot find their answer.
10. If something is painful, frightening or sorrowful, I

- must keep on thinking about it.
11. I must be upset over others and other's problems.
 12. This world should be just and fair to all.

f) Rational beliefs (rBs): These are beliefs that enable the subject to face the reality objectively and realistically. These beliefs help to see the world, others, things and ourselves as we really are and help one to find peace and contentment. Rational beliefs help subjects to choose, Self Winning Behaviours (SWBs) and to give up self defeating behaviours (SDBs) and emotionally disturbed behaviours (EDBs).

g) Emotionally Disturbed Behaviours (EDBs): Those behaviours that cause emotional disturbances. The EDBs dealt within this study are anxiety, depression, aggression, anger, withdrawal, fear and nervousness. These affect the normal functioning, growth and development of the person adversely by blocking his/her emotional life.

h) Self Defeating Behaviours (SDBs): These are behaviours that come in the way of progress, and personal maturity. These behaviours are often the result of emotional, mental or social disturbances. Lying, cheating, laziness, procrastination, fighting, quarrelling, destructions of life and property are examples of SDBs. These lead the subjects to worse problems.

i) Cognitive Effect (cE): It is the effect produced on the thinking level as a result of RET. The changing of iBs into rBs.

j) Behaviour Effect (bE): It is the effect produced by the treatment of RET in behaviour. These behavioural changes are brought about by changes in cE.

k) Countering iBs: This is a way of attacking the iB's through 'hard hitting' or through debate. First iB's are detected and these are reduced or destroyed by disputing and debating.

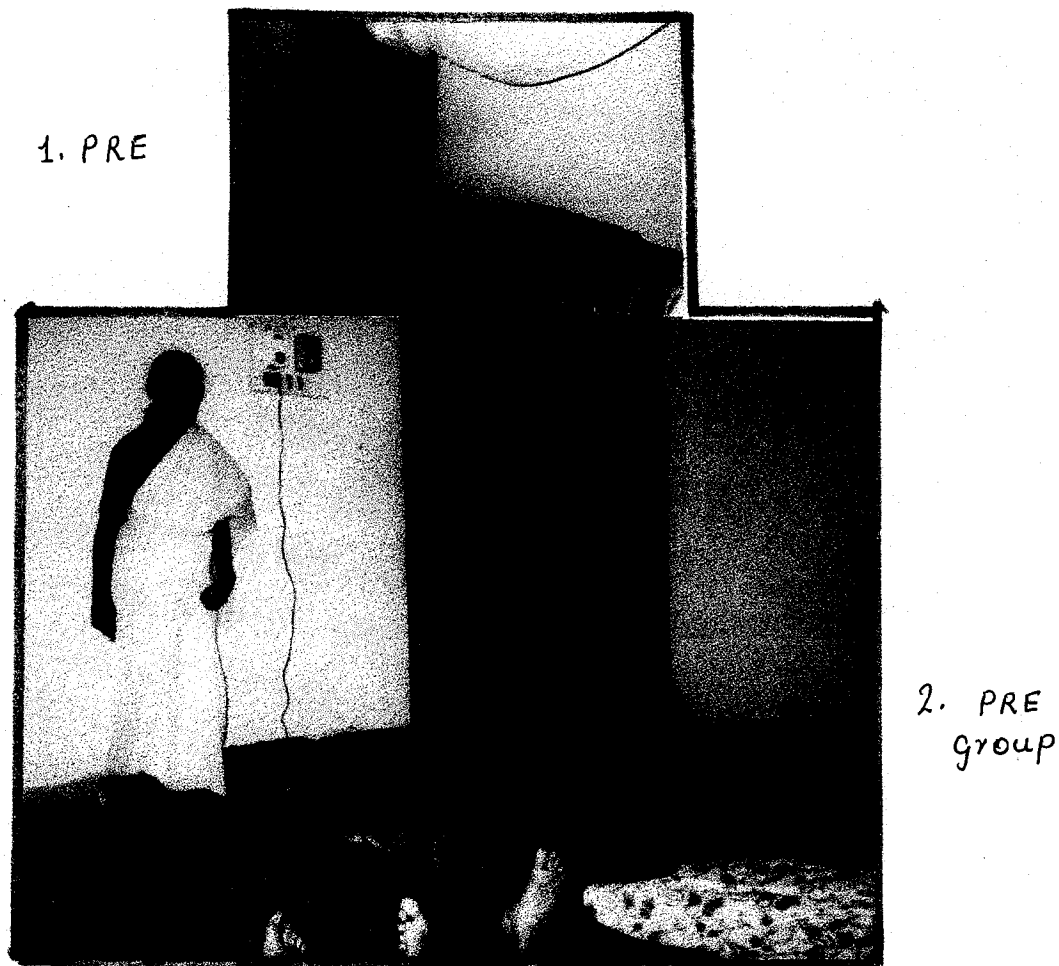
1.2.1 Cognitive Behaviour Modification (CBM):

CBM involves the application of a set of procedures to teach subjects to gain better personal control over a learning situation by use of self statements or directions which guide their thinking and actions. "Inner language is" seen as very important for Cognitive development and the learner is taught to use language to control his or her own responses. CBM consists of five steps 1. Modelling - the teacher performs the new behaviour. 2. Overt external guidance the student copies the teacher. 3. Overt and Self guidance - the learner repeats the behaviour using the verbal instructions as modelled by the teacher. 4. Faded self guidance - the learner repeats by whispering the instructions. 5. Covert self instruction- individual Performs the task using inner speech.

1.2.2 Progressive Relaxation Exercise (PRE)

IT is an exercise that enables the cases to relax

completely. Either through the use of audio tape or verbal instructions the case is allowed to relax progressively from toes to head. The format of the same is in the appendix. PRE was given before the Counselling sessions. All the individual cases were taught this exercise. It takes about 20 minutes. RET-Therapists use these methods as a pre-condition for RET.



1.2.3 Awareness Exercise (AE)

This exercise was used as a substitute for PRE for class VIII B. Here the students were asked to become aware of the sounds around them, their body posture, breathing and

concentration on different parts of the body. The format is the same. .

Being a qualitative study the data collection, data reduction and analysis and data display were done at every stage of the study.

The investigator was the major tool and her personality as RET therapist was of great importance in the treatment of RET. She like other therapists was risk taking, taking stand for issues, not feeling sorry for the cases, neat, clean, practical, had healthy respect for intellectualizing, rational and respected rational approach. She had faith in the RET-theory, the ability to listen and not other pitier. She also did not discourage minor degrees of disturbances and encouraged self-debate and had love for clients. The delimitations of the study are given below.

1.3.0 Delimitations

1. The final study was restricted to High School Girls of age group 12-15 years.
2. The number of individual cases studied was five, each case for specific emotionally disturbed behaviour.
3. Group Counselling sessions for class VIII B was conducted during their free periods. Therefore the whole hearted co-operation was missing at times.

4. Since the investigator was the major tool in the collection of data, her knowledge, skills, personality and attitudes have influenced the data collection, data reduction and data display.
5. One day out door activity organised for class VIII B was not attended by all the students. Therefore absentees missed some important group sessions. One or two students were absent for most of the sessions.
6. Interest, participation and co-operation with reference to assignment, activities, group discussions, awareness exercise and counselling sessions varied from individual to individual as the group was very heterogeneous with reference to religion, caste, community, economic background, scholastic performance, curricular activities and intelligence.
7. All the cases chosen for the final study were from the same school as the investigator was as the main tool and the technique was mainly Participant Observations.

CHAPTER II

P I L O T S T U D Y

2.0.0 Introduction

Pilot study was conducted on Renu, Binu and Genu. The details of the study, phases and essential aspects are shown in the Matrix 2.1.1

Matrix 2.1.1 Overview Of The Pilot Study

Phases	Essential Aspects Of The Pilot Study
I.	Objectives of Pilot Study, Methodology, Proposed process research design, selection of the sample, tools and procedures of Pilot Study.
II.	Case study of Timid Renu, Home Scenario, Identification of iBs and EDBs, Treatment of RET, Impact of RET and RET Therapist and Emerging Specific Theory.
III.	Case study of Depressed Binu, Home Scenario, Identification of EDBs and iBs, Treatment of RET, Impact of RET and Emerging specific theory.
IV.	Case study of Frightened Genu, Background, Origin and development of iBs and EDBs, Relationship between iBs and EDBs, Treatment of RET, Multi-dimensional approach, Impact of RET and Emerging Specific theory.
V.	Outcomes of the Pilot study, Guidelines for the final study, Model of RET - Process, and 5 phase programme for the final study.

Matrix 2.1.1 explains the overview of this Chapter II Pilot Study.

2.1.0 Objectives Of The Pilot Study

The Objectives of the pilot study were. 1. To help the investigator to prepare herself with reference to subject competence, skills, appropriate tools, techniques and choice of school for final study. 2. To find out the feasibility of the treatment of RET and RET- Steps with reference to students and institution. 3. To find out the requirements for conducting the final study in terms of time and conducive environment and tools if any.

2.1.1 Pilot Study Methodology

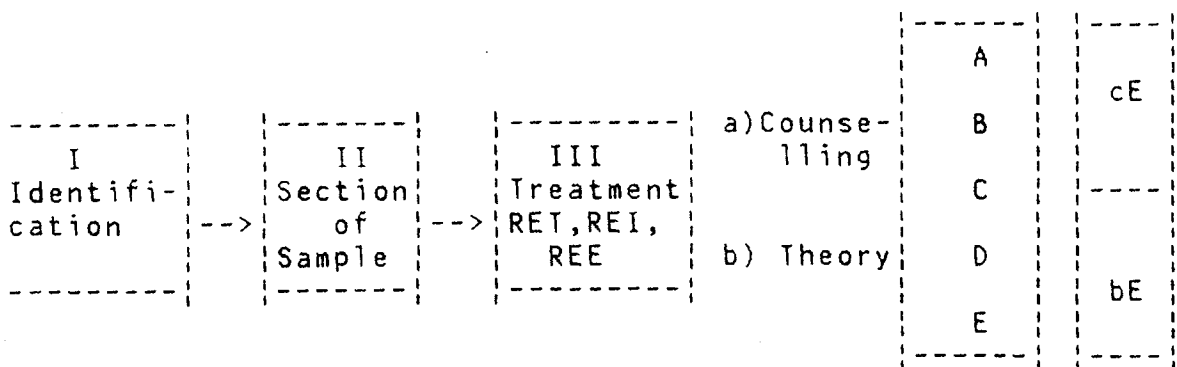
The approach for Pilot Study was Case Studies, through Qualitative Indepth Study of the cases. PO, II, Counselling, Questionnaires and rating scales were used to collect the data. Data collection, data reduction and analysis and data display took place simultaneously. The steps used in the collection of data were 1. Selection of cases with EDBs through administration of Bell's Adjustment Inventory and BIBD. 2. Observation of the investigator, parents and peers of the cases for identifying the iBs and EDBs. 3. Treatment of RET was carried out by observing the relationship between iBs and EDBs, RET, REE, REI and RET-Steps. These sessions were carried out through individual and group counselling. 4. Effect of RET was studied through observation of the investigator, cases, peers,

family and self reporting by cases.

Matrix 2.1.2 Proposed Process Research Design of Case Study

Identification	Treatment of RET	Effect
1. Identification of cases through purposive Sampling, Timid Renu Depressed Binu and Frightened Genu	Participant observation, Counselling interviews, Home Visits, Indepth Interviews, RET- Theory, Rational Emotive Education, Rational Emotive Imagery and use of RET-Steps namely ABCDE's	Reduction of iBs, Reduction of EDBs Introduction of rBs Cognitive Effect(cE)and Introduction of self Winning Behaviours (SWBs) behaviour Effect (bE)
2. EDBs of Cases through observation of subject, peers, investigator and iBs through the administration of BIBD.		

Matrix 2.1.2 gives the proposed process of research design of case study namely identification of cases, treatment of RET and its effect.



--> Leads to

Figure 2.1.1 Steps For Pilot Study Process Model

2.1.2 Selection Of Sample

The Samples were selected from different age groups who exhibited EDBs. Exhibition of EDBs and the willingness to Co-operate with the investigator were the main criteria for the selection at this stage of the study. Detailed description of each sample is given in the case studies (2.2.0, 2.3.0 and 2.4.0)

2.1.3 Tools And Materials

As the investigator entered into this research study, she became aware of the EDBs that needed attention. In the first two cases BIBD was enough to identify the iBs and problems for treatment of RET, while studying Genu many problems emerged. Therefore she began to prepare more tools, according to the needs of the subject, for identification of EDBs, ACQ, ARS, PSCRS, FIRS and BIBD and BIRBQ for iBs. Since the existing test materials were very few and cumbersome, simple tools were prepared. Preparation of tools and materials are explained in chapter III.

2.1.4 Procedure Of The Pilot Study

Case Study approach was used for the following reasons:

1. This approach would enable the investigator to go deeper into the origin and development of iBs.

2. It allows multi-dimensional and multi-site approach. As this study calls for an indepth qualitative study, case study approach was ideal.

3. The treatment of RET is mainly for subjects exhibiting EDBs. To trace the origin of EDBs, which are related to specific iBs, needs going back to subject's past history and environment. Case study is most suitable for this purpose.

4. This research topic lends best for qualitative indepth study in a natural setting through PO, and II. In order to collect the data, PO, interviews of peers, parents and counselling interviews with the cases were used. She also used INIs when and where required.

2.2.0 Case Study - 1 Timid Renu

"The source of personality problems is a lack of adjustment, or tensions within the personality. The lack of adjustment or tensions within the personality may manifest itself in all of or some of the symptoms such as embarrassment, timidity, extra-ordinary shyness, continuous, worry and anxiety Individuals who are not able adequately to adjust to the tensions with their personalities may consequently be severely handicapped in the execution of their work, or be unable to make normal, social contacts and thus solve their love and marriage problems in other words to develop and utilize their potentialities "(May 1968). Renu Showed some of these symptoms when she came to the investigator. She was a student of B.Ed course at a renowned college.

2.2.1 Home Scenario

Renu is the eldest child in her family. She has a brother younger to her. At present father, mother and children lived in the house. Matrix 2.2.1 briefly describes the picture of Renu's Home.

Matrix 2.2.1 Home scenario of Renu brings to light her home environment. "Each of us is born into a human family, frail, vulnerable with a deep need of acceptance and recognition, needs that we carry with us all through our lives. The function of the family is to love, nurture and support its members and provide contacts for children to develop the social, emotional, intellectual and spiritual resources they need to become mature adults. For various reasons some families become dysfunctional and therefore need the help and support of others outside the family system" (Neary 1994). Renu's family has turned out to be dysfunctional.

2.2.2 Treatment of RET

Renu had five counselling sessions. The first two lasted for more than an hour each. The last session was conducted after a period of two months and no relapse was noticed. During the first session the investigator allowed Renu to ventilate her suppressed feelings. Very often such an exercise enables the client to look at the reality more

Matrix 2.2.1 Home Scenario Of Timid Renu

FATHER	MOTHER	BROTHER	RENU
<p>Father is a deputy manager at MMTC, aged 48. He is hot tempered. He has to have his way (iB No-4). His belief that the world should be just and fair is often a cause of tension for him and others (iB No-12). He blames his wife for all his failures and stupidities. His belief that others and other things are responsible for joys and pains (iB No-6) also causes tensions and conflicts at home. He is a perfectionist (iB No-2) He wants everything to go as per his idea of perfection.</p>	<p>Mother is passive, timid, submissive and nervous. She is 43 years old. Her belief of an ideal wife blocks her from confronting her husband's iBs and EDBs. She is helpless in bringing peace and harmony in that house. Her religion seems to be neurotic because it adds to her fears, iBs and SDBs. She said "He often treats me like a worm, useless and hopeless. My husband tells me I am responsible for all his misery". She too is a slave of iBs 3 and 6. Continual conflicts with the family members cause her anxiety and insecurity. She is living in fear and anxiety.</p>	<p>Brother is aggressive and hot tempered like his father. "Aggression is a learnt form of behaviour" (Montague 1968). He did not look friendly towards the investigator. "Aggression is an off shoot of iBs Nos-2 and 4" (Ellis 1968). His demand to start a garage has not yet materialized. He seems to vent his anger on Renu who is weak. He too feels that he was treated unjustly by his parents (iB No.12). He turns violent when he cannot have his ways.</p>	<p>Renu is an attractive hard working girl with thick bushy hair ideal. She has rejected her hair. Renu seems to have a combination of father's and mother's iBs. She suffers from anxiety, guilt and a number of fears. She is faced with conflicting values. Continual clashes between parents and brother add to her fear of the future. She suddenly became sad, showed sleeplessness, lack of interest in studies, changing moods from very high to very low. Depression and even suicidal tendencies.</p>

objectively and realistically.

I; "I am told that you are very disturbed at this moment. Would you like to talk about it to me?"

[With this invitation Renu began her story. She cried now and again when she spoke about her family, her brother's cruel action towards her, her mother's preferential love for her brother, her fear and uncertainty of the future, her interventions and efforts to solve the family problems were ignored by others. While talking about her dire need for acceptance and love from her mother, the investigator intervened]

I; "Will you die if your parents do not love you the way you expect them to love you? Are you not capable and old enough to manage your life now?"

R; "Yes. I can live. I can manage my life if I want to do so. But I feel sad and angry because my mother does not punish my brother's cruel actions towards me" (iB No-3).

I; "Do you still need mummy to intervene in your arguments? Can't you defend your points or your rights?"

R; "May be I could. But I never thought of doing it. Physically he is much stronger and if I argue with him he will destroy my things. I always give into him, because I don't want to have a scene at home."

I; "In spite of you withdrawing, there is always trouble at home. If I understand you right. How do you explain that?"

R; "He knows that I am weak and I will finally give in to his ways."

I; "How long has such a state of behaviour pattern continued?"

- R: "From childhood mummy never punished him when he was wrong. Though he was at fault I got the firing saying, why do you fight with him. I want him to talk to me lovingly. But he is always rough and crude."
- I: "What do you tell yourself when he is rude to you?"
- R: "Poor me, I have to suffer all this. He should respect me his elder sister. I can't stand such bad manners"(iB No-4).
- I: "So, your joy depends on his kindness and mummy's love. Otherwise you feel miserable. Don't you see it is not the event that is causing you so much misery but your demand that mummy and Jayesh should love you, should respect you and treat you like this or that. And these statements are causing your depression. You feel you are not lovable and good because they don't love you. Is this right?"
- R: "Yes. I often feel I am useless. So I do not participate in anything. I do not like to displease anyone."
- I: "Yes, for fear of rejection. You have had enough of rejection at home. You can't stand it any more. So you would be ready to kill yourself for a little love, a little recognition" (Hard hitting).
- R: "In the school I could never say 'no' to others. I know my friends used me, my talents, my time for their work. But when the work was over they never bothered to be friendly."(iB-12).
- I: "And you wondered why the friends did not stick to you. You were too good for them, so you continued to be lonely and sad."

[REE. She explained to her how her self concept and self rejection was the cause of rejection from others. If she loved herself, respected herself, and had confidence in herself, no matter what her achievements, others would respect her simply because she is a human person and has the gift of life. She is precious and worthy. An assignment of writing the following

sentences were given to her. My life is in my hands. No one can destroy me, unless I want them to. She was also given positive strokes to boost her ego. Her positive qualities were mentioned to her and she was asked to repeat them a number of times daily.]

Renu's feed back of this session after few days." After the first session I felt relieved. I felt light. I felt no more burden as such and experienced a feeling of lightness." She was also asked to write her personal life briefly. A copy of the same is attached herewith in her own writing. P- 104

Investigator's home visit to Renu's house verified the facts as true. A deeper insight into the physical emotional and social climate of the home was gained. Some of the iB's of her family members seemed to be part of Renu's belief system. She was often told by her family and relatives; "Girls do not question their parents. They should not argue with their elders. They are expected to obey". Her feelings of guilt prevented her from breaking off from the oppressive emotional ties with her family.

2.2.3 Identification Of iBs And EDBs

Renu exhibited anxiety, fear, guilt and insecurity from an early age. This insecurity was translated into action. "Children suffer from emotional disturbances because they lack

order, or structures or definitions in their daily living at home and at school, within the school environment and the school programme. Habits, attitudes and achievement has to be within limits "(Harring and Phillips 1926). The lack of stability and security could be the causes of Renu's problems. She exhibited the following EDBs namely timidity, fear of rejection, poor self concept, incapacity to develop intimacy with friends and her dire need to feel loved by all." These neurotic conflicts may result either in inability to make meaningful associations and assimilate the materials learned" (Pearson). Renu seemed to have difficulty to assimilate what was happening at home. She too became passive and fearful like her mother. Though talented she often under rated her capacities and withdrew from any healthy competitions. Could this be because of her incapacity to succeed at home?

The result of BIBD brought to light Renu's iBs. They are-dire need for love and approval (iB No.1) Somebody strong to help her out, (iB No.7) looking for right and perfect answer,(iB No.9) wanting to have her ways in everything, (iB No.4) dire need to be perfect in every thing, (iB No.2) and attributing unhappiness to others and other things (iB No.6). The presence of these iBs were verified from her peers, family members and also during the counselling sessions.

From her personal descriptions we can note that Renu could not relate with her family members freely. This

difficulty in communication seemed to be due to her fears and needs. She didn't want to be rejected by others a consequence of iB No.1; Her dire need for love, recognition and acceptance comes out very strongly. Her feelings of inferiority could also be an outcome of iB No-2. Her feelings of incapacity could be the result of her inability to reduce or solve the family tensions. She seems to be jealous of her brother who has his ways inspite of his parents opposition. Her dire need to be loved and recognized is not very much met the way she would like it to be. Since it does not happen according to her expectations, she feels it is terrible and bad. She strongly believed that bad and unhappy events were caused by others like parents, brothers and relatives. She felt guilty and upset whenever she tried to assert her rights, for she feels she must be perfect in everything and believed that she could not cause pain to others. Her joy and pain depended to a great extent on others and other things. We see a number of symptoms that crippled Renu emotionally.] From where did Renu learn these iBs?

2.2.4 Origin And Development Of iBs In Renu

From the feedbacks and counselling sessions we see that Renu has imbibed most of her iBs during her childhood, from parents, family, relatives, teachers and peers. Renu recollected the incident that induced guilt in her for the

first time. She was then in the primary school. She related how the teacher's explanations of hell for the disobedient affected her". "Every time I wanted to assert myself in the school or home, I suffered from guilt even when I was right."



3. RENU

Table 2.2.1 clearly indicates her identification with all the family iBs. She possesses the combination of all the other's iBs. Her "I" is buried beneath her parents "We". "We do not know ourselves because our "I"s are buried beneath so many "We"s" (May 1968). "Self esteem in children seems to be the foundation of self confidence "(Berne and Savary 1991). Renu did not possess enough of self-esteem and hence lacks confidence. Renu was often unable to face the reality objectively due to `parent tapes` (Harris and Carol 1991) that play continuously in her mind.

Table 2.2.1 Renu's Identification With Family iB's

Irrational Beliefs iB's	Father	Mother	Jayesh	Renu
1. Dire need for love		✓		✓
2. Dire need for perfection	✓		✓	✓
4. Having one's way	✓		✓	✓
6. Cause of unhappiness other and other things		✓		✓
Wanting persons' for support/help		✓		✓
9. Looking for perfect solution	✓		✓	✓

[Renu's inability to get along with family, friends, and others could be a projection of her own self rejection. Renu's inability to come up to other's expectations seemed to result in her inferiority complex.] Home; "I felt that all my friends were better than me and I am nothing. I did not take part in any activity even during my college days." [In these words a deep rooted uncertainty of her true self is seen] Investigator's observation of her brought to light a number of her abilities. With some encouragement on the part of the investigator she won a number of prizes during her B.Ed course. "We do not easily discover what is uniquely me" (May 1968). In spite of her uncertainty of her identity we see in her a strong urge to become some body.

2.2.5 Introduction Of rBs In Renu

I; "How are you feeling now?"

R; "I feel a little better. I still feel why can't my parents understand me? Why can't my brother respect me? Why can't I be free to take life decisions?"

[Renu came out with a number of questions. She desires freedom. She wants to be responsible for her life].

I; "Is anyone stopping you from taking up the responsibility for your life?"

R; "No. It was my own fears. The sentences you told me helped me to gain confidence in myself."

[The investigator also showed her that her iBs were mainly responsible for her misery. By changing them she could enjoy more freedom. Renu was struggling in her search for true self]. "Because we live in all kinds of systems, it is hard for us to discover our own self, our own values, our own personality and vision"(May-1968). Most of what we think is ours is really what we get from others this is true in Renu's case. Renu is ready for rB's. She gained an insight into the relationship that existed between her iBs and EDBs. She decided to break off from her iBs that crippled and crushed her. She wanted to enjoy the freedom.

The sessions began and ended with REI (Watkins, Patil, L. Sturgis, Ellis, I. George A. 1968). Through RET her assets were affirmed and rBs and SWBs were introduced.

R; "I took a decision to break off from my iB's, I felt great. Now I feel more confident. I have decided to be free. No more masks, I will be true to myself. I was frightened of hurting others. But in the process I was hurting myself."

I; "Exactly, but you wanted to be a martyr, an ideal girl who was suffering for the sake of others. You feared the rejection of others, because you needed them for your happiness."

R; "Then I said to myself why should I hurt myself just for the sake of another. Till then I was worried about the whole world."

[These words of Renu indicated the changes in her thinking].

R; "I started thinking in that light. I feel that I don't have to fear anyone. Courage, yes, I really felt brave. No one can do anything to me. I will think for myself, not even my parents can decide for me."

The investigator wanted to make sure whether the changes noticed in Renu were permanent or not. So the investigator met Renu after two months. Did RET really bring about the lasting changes in Renu?

R; "I feel a contrast between what I was and what I am now."

I; "Do you feel that you can cope up with life more realistically?"

R; " yes, yes."

I; "Do you feel that you have enough courage to face problems?"

R; "Yes. I feel if I had managed so well the previous day, then I can do the same the next day."

2.2.6 RET Therapist And Her Impact

R; "Your capacity to solve problems and your positive strokes enabled me to see my good qualities. In spite of my limitations I feel good. I gained confidence in myself. If you had seen so many qualities in me, then it must be true. Why not look at my good qualities than my bad ones? I experienced a ray of hope that even I can be good if I try now." On another occasion Renu said; "Your confidence in me, your warmth, your love and your care helped me to look at myself more objectively. Our discussion and debate about life more realistically also had an impact in changing my thinking."

Ellis strictly speaking do not speak about the positive qualities exhibited by the counsellor. He would argue and debate with the client stating that even if he does not possess these qualities he still is worthy, because he is a human person. The investigator does not believe in such an exaggerated manner of debate for the following reasons. 1. All human beings possess positive qualities or attributes 2. To keep debating only on the negative attribute is not the reality about the person. 3. RET is expected to lead the person from unreality to more objective reality about the person. RET is basically education. It is desirable of the educator to draw the best in the educand.

2.2.7 Impact of RET on Timid Renu

RET seems to have brought about a number of changes in Renu.

R; "I can't believe, I was so stupid just 2 months before.

It looks a distant past dream. I even wondered, whether I would remember the pains I had gone through". Renu Continued; "I can face any problems in the future."

Interviews with the peers and the roommate verified the fact that Renu is not the same after the meetings with the investigator. The observation of the investigator in a natural setting brought to light that she has gained courage and confidence. As mentioned earlier she has won a number of prizes this year. She has realized that bad and unhappy events are not caused by others and other things, and she could choose to be happy.

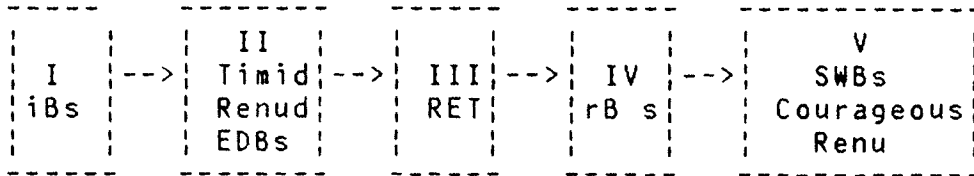


Figure 2.2.1 Model Of The Effect Of RET On Timid Renu

In the case of Renu RET seems to be effective in reducing iB's and replacing them with rB's. Thus EDB's decreased and SWB's were chosen by her. She seems to have learnt that it is not the events that were responsible for tensions, fears and anxieties. But what she thought about these events. Though the situation at home have not changed, she is able to cope with unpleasant home conditions.

Matrix 2.2.1 Phases Of Treatment of RET On Renu

Phases	Procedure	Findings
I. Identification of EDBs	Interviews, Counselling, Home visit	Timidity, fears of rejection, guilt, need for love and insecurity
II. Identification of iBs	Administration of interviews, counselling, home visit	iB Nos - 1,2,4,6, 7 and 9
III. Treatment of RET	RET, REE, REI	Reduction of IBs and EDBs
IV. Impact of RET	Interviews, Counselling, feedbacks from case, peers, PO of the investigator	Decrease of iBs and EDBs, Increase of rBs and SWBs Courageous Confident Renu

Table 2.2.1 states the different phases, procedures and findings of the treatment of RET on Timid Renu.

2.2.8 Emergence Of Specific Theory

In the case of Timid Renu RET and RET-Steps seems to be effective, in reducing iBs and replacing it with rBs, thus EDBs seems to decrease and SWBs seems to increase. Renu seems to have gained an insight into the relationships that existed between her iBs and her EDBs like tensions anxieties and fears.

2.3.0 Case Study II Depressed Binu

Depressed Binu was in the hostel where the investigator stayed. She was intelligent, efficient, social and friendly person. She was also good in studies and showed leadership qualities.

2.3.1 Home Scenario And Background of Binu

a) Home: Binu came from a well to do family most of her life had been spent in the boarding school or hostel. She has a younger brother. Parents view points differ with reference to marriage, life, freedom, relationships and friendships. Binu feels more at home with her father. She finds difficulty in getting along with her mother. She is over protective and strict with Benu. Mother is anxious about her daughter and does not want her, to choose her life partner as she did, while her brother is given a lot more freedom. This irritates Binu. Parents were aware of Binu's talents and had encouraged her to learn dancing and music.

b) Performance at College: Good in studies, reasonable, initiative and organized. she is also good in acting, dancing and singing. She was loved by teachers and friends.

c) Behaviour in the hostel: She was chosen as the head girl. She carried out her responsibilities joyfully and

effectively. She was energetic, fun loving and cheerful until that event took place, in the hostel. A few of her intimate friends rejected her. As a result she exhibited the following symptoms. Her enthusiasm died out. She became moody, sad and angry. These changes were noticed by herself, peers and the investigator.

d) Binu's EDBs : Her EDBs were a feeling of loneliness, lethargy, confusion, anger, depression, inability to concentrate, incapacity to relate with her friends, decrease of humour and fun. The investigator observed, a sizeable failure pattern of living in her. "An emotionally disturbed child is one who shows a sizeable failure pattern in living "(Harring and Philips 1962). And Binu exhibited this.

2.3.2 Treatment Of RET And Depressed Binu

She had a brief counselling with RET. There were just three sessions in all. Through the use of II's investigator was able to help Binu to verbalise her emotional problems. Here the investigator presents both verbal and non-verbal communications. Binu's disturbance was evident from her exterior behaviour. She burst into tears as she entered the room. She could not talk for a few minutes. The investigator calmly allowed Binu to take a seat and gave her a cue to begin. As she began her story she began to tremble.

I; "I see you very disturbed. Something seems to worry you. Would you like to speak about it?"

B; "Miss, I have not slept for the last two weeks. I don't understand, I can't stand it. I approached the warden, she can do nothing about it. You know, my friends whom I loved dearly, whom I trusted, and with whom I shared all my secrets have turned out to be my enemies. They refuse to talk to me. I can't bear it. They turn their faces away, when I approach them and stop their conversation. They make me feel unwanted, I just can't bear it. It is terrible." (iB No.1)

I; "Did you ask them the reasons for this change of behaviour?"

B; "Yes. I did. They say there is nothing." [what did they really do to her? Her friends suddenly became indifferent and cold. Binu's efforts to relate and re-establish her relationship were in vain. She begged them, she used abusive language towards them, she fought with them, she cried, she kept away from them, she tried to explain to them. She questioned them. None of these helped in bringing about expected change in her friends. Binu became more and more frustrated. It is noticed that her actions chosen were self defeating, for example crying, fighting, abusing, keeping aloof, even questioning at times].

I; "Have you done anything to disturb them?"

B; "No. I was always good to them. I tried everything possible to win them back. But they say they can't be the same again. I cried in their presence so many times, I asked them the reasons, I kept away from them, I even fought with them, I even got angry with them. Miss I just can't tolerate it. I simply can't take it. I had been soaking any pillow with tears every night. I just can't carry on this way. Please miss, please tell me what to do."

[Her desperation and frustration were clear in her statements. Her awfulizing and exaggerating the event to an unrealistic proportion. Absolutist thinking leading to

emotional problems (Obstel, Allistair 1992). We find Binu has made the rejection of a few friends as something unbearable to endure. She had been demanding and commanding their attention. RET deals with such behaviour and enables them to accept the reality without too much exaggeration.]

I; "If your friends do not want to be friendly, why do you force them to do so? Are they not free to choose, accept or reject their friends?"

B; "Yes. But I can't live without them"(iB No.4).

I; "Who told you so? How did you live without them before you came here?"

B; "I am suffering so much. I can't concentrate on any thing. I feel that the joy of living has left me".(iB No.10).

[We see in the above statements her dire need to be loved. Her iB that her joy depended on others and other things outside her].

I; "You mean your friends are responsible for your joys and sorrows. I say no. You are telling, and believing, that they are the cause of your misery. Do you really want to know the cause of your misery?"

B; "Of course I want to".

[By now she was relieved partly of her emotional distress, having verbalised her misery. She seemed to be ready to look at life more objectively].

I; "What disturbs you is not the rejection of your friends. But what you are telling yourself about it."

2.3.3 Detection of Binu's iBs

BIBD was administered on Binu. Her strong iBs were (1) dire need for love; (2) wanting to be perfect (4) awfulizing when things didn't go according to her (6) Thinking others responsible for her pains and joys (10) keep worrying about painful past (Marks, Fritz, Szpiller, Epstein 1976) and (12) wanting the world to be just and fair at all times.

A clear idea about her iB's made it easier to deal with her problems. "What disturbs people's minds is not events, but their judgements on events" (Epictetus 1 century AD).

[She was now challenged to take responsibility for her feelings of sorrow, joy or depression.]

I; "No one can hurt your feelings unless you permit them. Who is responsible for your life now? My life is in my hands. No one can destroy it unless I allow them to do so. What are you doing with your life? To whom have you given the responsibility of your life?"

B; "You mean my life is in their hands?"

I; "At least the responsibility of your joys and sorrows."

B; "No. I don't want them to be responsible for my life any more. I want to be the mistress of my life."

2.3.4 Effect Of RET In Depressed Binu

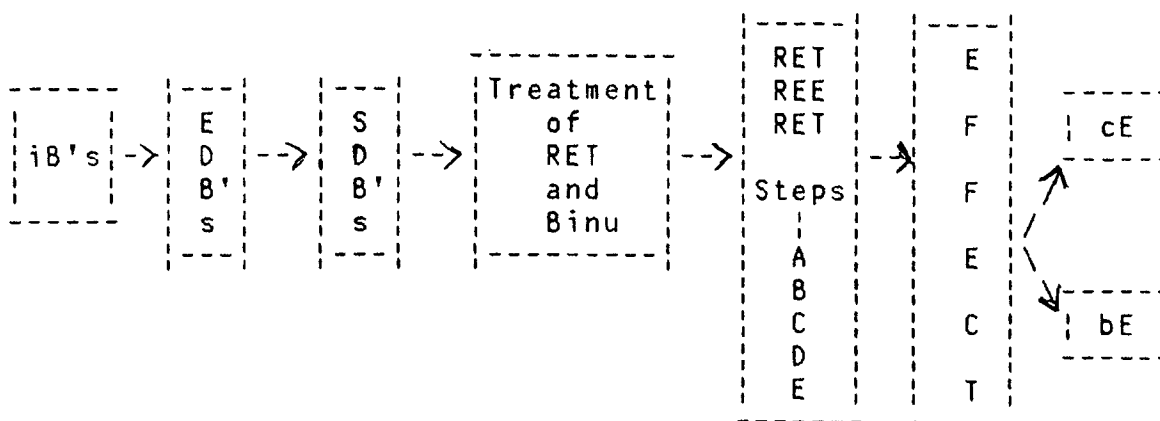
At the end of the session a change is seen in her emotions.

" I want to be the mistress of my life". Definitely there was confidence in this sentence. She seemed to have received an insight into the reasons of her self defeating feelings and behaviours. She went out of the room confidently feeling that she could live happily without them if she so wanted. Her happiness is in her and not outside of her.

Matrix 2.3.1 Relationships Of ABCDE's

A	B	C	D	E
Rejection of friends <-->	iB Nos 1,2,4,6,10,12	EDBs exhibited <--> loneliness, anger, depression, sadness	Debate detection <--> disputing, debate, destroying iBs	rBs friendly, enthusiastic, calm and happy

<--> indicates relationships



--> indicates leading to

Figure 2.3.1 RET Process Model

Figure 2.3.1 shows how the investigator used RET to lead Binu from her iBs to rBs. What was the activating agent in her case?

A- The rejection of Binu by her friends.

B- The iB's that led Binu to depression 1,2,4,6,10 and 12

[She should be loved and accepted by everybody important to her, namely her friends. She wanted them to love her the way she expected. It was terrible and bad when things didn't go the way she wanted. Binu believed that her pains, depressions and anger were caused by her friends and their rejection of her. So she felt she could do nothing about it to relieve her. If something is fearsome she must keep on thinking about it. She also believed that this world should be just and fair to all and especially to her. She had been nice so they too have to be nice to her. In the course of debate these iBs were detected,disputed, debated and destroyed. She was shown clearly that it is desirable to be loved and appreciated by all and that it is not a dire need. She wouldn't die without it. It is not so awful to be rejected by a few friends. Such rejections are part of our world in which we live. Some who were our friends turn out to be our enemies even traitors. Jesus was betrayed and rejected by his apostle Judas, and this resulted in his death. She had been awfulizing it, thus making the rejection of few persons beyond the actual

situation. In doing so she crippled her freedom and her capacity to find joy elsewhere. She was also demanding and commanding, the specific ways of dealing with her, from her friends. Her very demand for love and friendship, might have distanced the others from her, possibly her insistence on having her ways always, might have repelled others from her.]

"I must remain a helpless victim of anxiety and depression, feelings of adequacy and hostility unless the conditions that cause my unhappiness change and allow me to stop feeling disturbed. The idea of remaining powerless in life or at the mercy of one's life conditions constitutes the greatest irrationality" (Ellis 1987). This is what Binu seemed to be doing.

The objective of RET was to see whether RET would help Binu to get out of her iBs and be more functional and realistic about life.

- C- What were the consequences of her iBs? The reason for referral was the problems she exhibited, namely her SDBs like sadness, loneliness, depression, anger and lethargy.
- D- Debating was done by detecting iBs and rBs and disputing and debating, challenging and destroying those iBs which were responsible for her emotional disturbance. Debating enabled Binu to see, that the event was not the cause of her problems, but her iBs. She could not only face rejection from a few friends but even more difficult

situations with greater calm." I now saw that all things I feared had nothing good or bad in them" (Spinoza).

E- What was the effect of RET in Depressed Binu? The impact of ABCD of RET brought about positive effect in this case in Binu. When she left the room, she was in a better position to deal with the situation. She stopped awfulizing and as a result she could be more effective. RET believes in hard work and perseverance. So the ideas countering her iBs needed to be practiced and made a part of her normal thinking process. These sentences were given as an assignment to repeat and write. "I don't need everyone to love me. I can face rejection; I don't always have to have my ways of thinking and doing. I don't have to keep thinking about painful events of the past.

The next session is briefly given below.

I; "How are you feeling now?"

B; I am feeling much better. Though I still wonder why such a thing had to happen. You know I had been reflecting about what you had told me last time. I said to myself how stupid it was for me to let others be responsible for my joys or sorrows. Why not I be responsible for me and my feelings?"

[Binu had done her home work. She Practiced the rBs rather than iBs. In the next session we went a little deeper to see why she suffered two weeks intensely.]

I; "You went on thinking again and again about the painful incident repeating how awful it was. By repeating these pains you may have seen them even worse than they really were. Though the incident was over, the memory was even more painful with greater self-pity and additional imagination. Every time you thought of it, it looked even more horrible and painful than before. Can you recall the sentences you said to yourself, that caused you so much of pain?"

B; "Yes. I said to myself, how can they be so rude to me? They should be kind to me. It is terrible to behave like this. People should return kindness to people who had been kind to them. I had been nice to them so they must treat me in the same manner. I can't tolerate this nonsense. No. They must love me. They must be kind to me again - I can't be happy without them. The more I thought this way, the more depressed and angry I felt."

I; "You believed that your sorrow was caused by your friends and their behaviour towards you. If they changed their behaviour towards you, you would be happy."

B; "Yes. I did. I felt that their love would bring back into my life happiness again." [Her iB's that 'this world should be just and fair to her' and that her joys and pains are caused by others are evident]

I; "REE- Just because some one whom I love rejects me, I am not going to cry and mourn or stay in a depressed state. I will tell myself, if they don't enjoy my companionship, so what? There are thousands of others who would like to be my friends. I will go to them. I still can have fun and merriment. It is possible, that these girls were not meant for me. Don't you think there are others who would like to be (that there are others who would like to be) your friends?"

B; "Yes. There are others who love me. Very much. I don't know why I was insisting that these and these friends alone will be able to give me joy."

[Unconsciously or consciously she was wanting to have her ways. This insistence on wanting them to come back could be an outcome of her iB No.4, that it is terrible and bad when

things don't go the way I want them to go.]

I; "Yours beliefs that the world should be just and fair to you at all times, you must be loved and appreciated by your friends and that they are responsible for your joys and sorrows were foolish and irrational. It would be nice if these happened according to your desire. But you were awfulizing. Look at your sentences that caused you depression and anger. They should, must, ought, awful, terrible, horrible, can't are demanding and commanding. "So try to antiawfulize and antimusturbate. Antiawfulizing and antimusturbating remain the core of rational thinking." It is the essence of uprooting your feelings of anger, range, resentment, furry (Ellis 1989).

[Discussions and dialogue helped Binu to see that the events in itself need not cause depression or anger. They can cause us disappointment, sadness, and even frustration. It is only when we magnify an event beyond actuality by awfulizing that we often become the slaves of anger, anxiety and depression.] "By consciously and unconsciously subscribing to absolute command oriented thinking and exactly how by changing the thoughts, feelings and behaviours which lie and accompany your rage, you can greatly reduce that rage" (Ellis 1987). The same principle holds good for other SDB's as well.

Why did Binu get so upset and disturbed? She seems to have over acted because she awfulized her friends indifference or coldness as mentioned earlier in the first session. "You choose to over act to the obnoxious behaviour of others while you'd more wisely choose to treat in a very different manner" (Epictetus 1 Century AD). "People take different messages from the experiences (Ellis 1987).

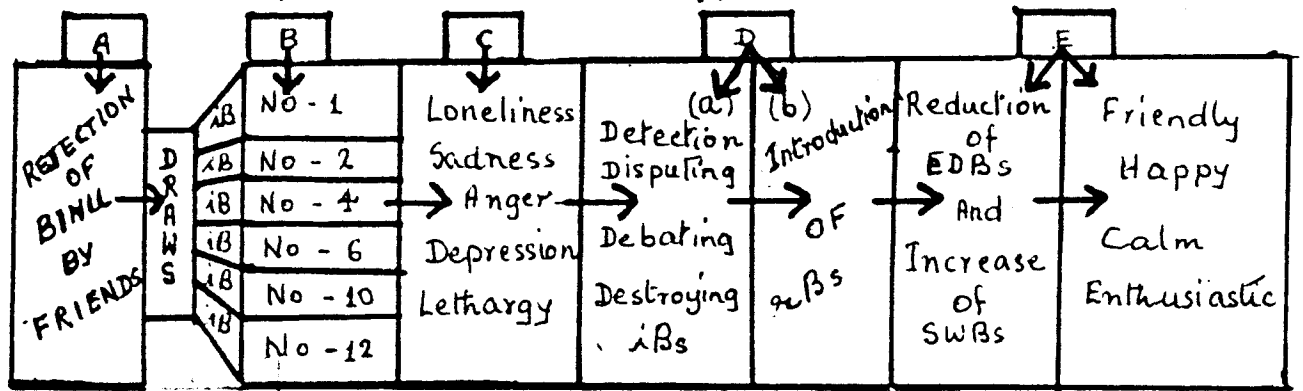
I: "You can choose to remain in misery by self downing and self pitying beliefs or you can get out of it, by changing your thoughts and iB's, you can be reasonably happy. What is your opinion?"

B: "Definitely the second one"

"Cognitive reorganization may be a far more effective means of reducing violence than promoting its sublimated or free expressions" (Freshback 1962). Yes this is very true in the case of Binu who has learned to reorganize her beliefs. After the session, she looked relieved, relaxed and free.

B: "I feel, I can manage to face disappointments. I have already made a number of friends. I feel I am back to my normal self. They are no more that important to me."

[She has learnt to face this world more realistically. She is cheerful and happy and is going about doing her normal duties. When she realized the cause of her misery, she was able to remove it]. "A thing that is explained ceases to concern us" (Nietzsche 19th Century).



Ret - Steps --> Leading to

Figure 2.3.2 RET Process And Depressed Binu

"RET practitioner can help some people in the relatively brief period of time, in spite of the fact that they have a number of serious emotional difficulties" (Ard 1969). It is true in Binu's Case. Binu seems to have overcome her dire need to be loved by all. It is possible Binu has realized that her happiness is not with other people, or other things or events outside her. She has also realized that the world we live in is not a just and perfect world. RET is effective in bringing about positive changes in her cognitive and behaviour effects (Gossette, Robert, Obrien, Richard 1992).

2.3.5 Emerging Specific Theory

The application of RET seems to have brought about reduction of iB's leading to EDB's and SDB's by introducing rB's leading to SWB's thus accepting the reality of the rejection of friends more objectively.

2.4.0 Case Study III Frightened Genu

"Emotionally disturbed children are children who have more or less serious problems with other people, peers and authority figures such as parents, or who are unhappy and unable to apply themselves in a manner commensurate with their abilities and interests" (Harring and Philips 1962). Genu is 10 and is a student of class V. He is also the second and last child in the family. A conversation with his mother brings to light that he was not much cared for while in the womb and was a rejected conception. "It was an awful time for me. I hated

GU/EXAM/PH.D./Edu/98/

16/7/1998

To

The Principal
Nirmala Institute of Education
Altinho
Panaji - Goa

Sub: Viva-voce Examination

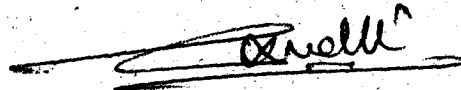
Sir,

This is to inform you that the viva-voce examination of Ms. Beulah Mendez, Ph.D. student in Education of this University is fixed on Saturday 18th July, 1998 at 12.00 noon in the Nirmala Institute of Education, Altinho, Panaji, Goa. The other details are as under:

Title of the Thesis	: Qualitative study of the Impact of Rational Emotive Therapy on High School Girls Exhibiting Emotionally Disturbed Behaviour
Name of the Guiding Teacher	: Dr. B.K. Passi IGNOU - UNESCO Chair New Delhi

It is requested to please take note of the Ordinance 19.9(xi) on viva-voce examination and take further necessary action in the matter.

Yours faithfully,



(Gopalkrishna G. Kondli)
CONTROLLER OF EXAMINATIONS

Copy to:

The Dy. Librarian, Goa University
Taleigao Plateau, Goa alongwith copy of the thesis.

myself and had no desire even to live. We had a lot of family problems. Then we were living as a joint family". said his mother." The depth of human nature is contained in the depth profound and powerful realms of the unconscious" Freud. Today we are aware that from the moment of conception the child is picking up all that is happening to its environment, the mother. Some of Genu's EDBs seems to have some connections with his parents problems. "They come from homes with tensions, hostility, misunderstanding and confusion, from parents filled with guilt and self blame for having failed in spite of great efforts to be good parents" Harring (Phillips 1962).

2.4.1 Identification Of EDBs In Genu

"He came to this world as an angry child. He refused to be fed by his mother's milk. He was an impossible child" said his mother. He felt uncomfortable and strange towards his parents and he clung to the maid. Circumstances forced his mother to be away. Father found it difficult to accept the dark son. He continued to experience rejection from his parents. He was rejected at pre-natal stage by his mother and at infancy by father. What could have been this child's experience during these all important days of his infancy? He had to experience another traumatic situation. The maid had to be sent away for some reasons, another rejection and insecurity. The world seemed unjust to Genu, he began to be violent and used abusive language. He moved from violence to

fear and deep insecurity. He clung to his mother for survival.

2.4.2 Family Constellation And Scenario



A. Genu and Family

At this moment his family consists of father, mother, sister, grand mother and Genu. His father is busy with his business and hardly has time for his children, mother is a teacher. His sister is fair, good in studies and cocurricular activities and 4 years older to him. He was often compared with her at home. When a second child comes into this world he/she is confronted by a rival, who is older and stronger. He had his inferiority held up before him vividly and continuously. This is noticed in Genu-an exaggerated ambition in sports, studies and other co-curricular activities. He also tended to be the revolutionary and exhibited the inferiority pattern of the second child(May 1968). He also exhibited a few characteristics of the youngest child. "He tends to become cynical and distrustful when his hopes are disappointed" (May 1968). May continues "The lack of adjustment of tensions within the personality may manifest itself in all or some of the symptoms such as embarrassment, timidity, extra ordinary shyness, continuous worry, anxiety and fear" (May 1968). Genu suffered from migraine, he withdrew from all his activities in

the school and showed signs of EDB's like aggressions, hot temper, irritability, possessive of mother, fears, and giving up activities like sports, games, neglect of certain school subjects, rigidity in daily routine, restlessness, getting up at night with fears, getting upset for accidentals that changed his daily routine and other fears.

2.4.3 Treatment Of RET And Genu

The first step in the treatment was to identify his iBs and EDBs. The table below gives us the iBs and EDBs of Genu. The following IPTs were administered on him BIBD, BIRBQ, FIRS, ACQ, ARS and PSCR5.

Matrix 2.4.1 Genu's iBs And EDBs

iBs	EDBs
1. Dire need for love	Fears of failure, rejection,
2. Dire need for perfection	Examinations, powerful lights,
4. Wanting to have his way	getting sick, being afraid,
5. Painful past repeating	being left alone, death,
	spiders
7. Wanting others to help out	blushing, violence, snakes,
10. Worrying and thinking about painful events.	cockroaches, buried alive,
	crowd, darkness, thunder,
	elders
11. Upsetting over other's problems	and lightning.
12. Wanting justice at all times	He suffered from poor self concept high degree of anxiety and easily provoked to anger.

2.4.4 Glimpses Of Counselling Sessions

The first session was mainly used to establish rapport with genu and to find out about him and his problems. Therefore the investigator gave him a few sentences to complete - I love 1..... 2....., I enjoy 1..... 2..... I fear 1..... 2....., I hate 1..... 2..... etc.

The answers to these statements and conversation with him brought to light that Genu had a number of fears, Matrix 2.4.1 gives us the results of IPTs and shows his EDBs. "The disturbed child's attitude towards himself and others is distrust. His response to his environment is predominantly negative. He is generally hostile and overtly expresses hostility to others. The source of hostility is anxiety. The child may get this idea from his parents, that he is not worthy" "Moustakes". Most of his fears are also learnt from family and environment. "Children who have difficulty with social relationship, should be drawn into social situations on their own" (Rogers 1948). "Aggressive behaviour results from feelings of fear and lack of self worth and confidence". (D'Evelyn 1962). This is very true in the case of Genu. This withdrawal also could be due to his poor self concept. "Withdrawn behaviour also results from the child's poor self-Concept of himself. He feels unworthy of attention. He may actually withdraw back further when attention is directed towards him" (D'Evelyn 1962).

a) A multi Dimensional approach: Was used in the case of Genu. The iBs and fears were countered through discussions, debate, REE, REI and CBM. He was also given RET assignment. The iB's that were responsible for EDBs were also countered through writing and speaking. These were done to overcome iBs and to replace this with rBs. A few sentences are given below:

1. It is okay to make mistakes. 2. It is human to err. 3. It is alright to feel nervous on the stage. 4. People have a right to be wrong. 5. Human beings make mistakes. 6. I am a human being, so I can afford to make mistakes.

b) Rational Emotive Imagery (REI): was given after PRE through auto suggestion. After two sessions his migraine vanished. The investigator found that when disturbed cases are given PRE they are in a better position to think straight. "The wise person who wishes to establish peace in mind and remain integrated creates centres to be adhered to on such being the peace within, variously called 'light'" (Chidanande 1991).

C) Countering Fears: Genu is scared of spiders. He happened to see a horror film on spiders a year ago on the T.V. His words are quoted below.

I; "It was a forest area. It was raining. Many many spiders came to a person's house through the gaps in the door. They came and killed people. So, when I see spiders I feel

frightened."

I; "What happens when you see a spider?"

G; "I remember this movie. I see them killing those people."

I; "So what do you do?"

G; "I run away with fear."

I; "What are you telling yourself about the spider when you are running away."

G; "That they will kill me."

I; "And then what do you feel?"

G; "I feel frightened."

I; "So, when you tell yourself that they will kill me, then you get frightened. Do the spiders in our homes kill people?"

G; "No."

I; "So, what you are telling yourself about the spiders of our homes is not true. This is not the case with our spiders, It is an exaggerated statement or a sentence. Have you come across anyone who died because of spider's bite?"

G; "No."

I; "It is your belief that they are very very dangerous and your telling yourself that they will kill you that frightens you."

[Here the investigator is helping Genu to see the cause of his fear that is his foolish or irrational thinking. He also uses very simple language a 10 year old can understand].

I; "If you tell yourself some other sentences your fear will vanish. So, what other sentences will you tell yourself so that you can come out of your fears?"

G; "Spiders are not dangerous. They cannot kill me. I can kill them easily with a broom. I don't have to run away when I see a spider. All I need is a big broom. I can kill them next time."

The sentences given below were given to Genu to write and speak to reinforce the rBs. 1. It is not spiders that frighten me but what I say about spiders. 2. They are not very dangerous. 3. I can kill them if I want to. 4. All I need to kill a spider is a broom.

After PRE Genu was allowed to go through REI experience of spiders. He was asked to kill them in his imagination with the help of a broom. The size of the spiders were gradually increased. He was told to inform the investigator when he felt frightened or uneasy. Two more sessions were needed for Genu to be completely out of his fear of spiders. A feed back from his mother indicated that Genu killed an average size spider alone and a big one with his father.

[Genu's capacity to identify his defective thinking and countering then enabled him to overcome his fear of spiders].

d) ABCDE's Of RET: Let us now analyze the different steps used by the investigator to deal with Genu's irrational fear of spiders.

A- The activating agent is the sight of spiders.

rB they are dangerous.

B-

iB they will kill me.

C- Consequence - running away with fears.

D- Debate _

1. Detecting iBs and rBs
2. Disputing
3. Discussing
4. Debating iBs

The investigator helped Genu to find out his defective thinking namely the statements he said before he got frightened. Genu also understood that it was these statements and not the spiders that caused fear in him. Through discussion and disputing and debating investigator enables Genu to destroy his iB's and to replace them with rB's. Thus his fear of spiders was considerably reduced, so much so he even killed spiders.

E- Effect of ABCD was reduction of iB's and elimination of his fear of spiders. His iB No.10 that if something is painful and frightening he must keep thinking about it. Every time he saw a spider he kept remembering the movie he saw an year ago. The next two sessions were concentrated on dealing with two other fears namely snake and stage. Since the sessions were more or less on the same lines the investigator does not feel the need to repeat them. A number of fears were

overcome through RET-Steps, REE, REI and PRE helped Genu, to counter most of his fears through RET. " All that is happening is the outward expressions of the inner conditions of the mind and heart. The seeds, source, origin of all human life, actions, behaviour are inevitable results in the mind, and if the mind, being aware of the divinity, within tries to turn to, balance, auspiciousness, that light which is God, then one can convey it to others, the peace within you" (Chidananda 1994).

RET also believes in the impact of the mind on human body and behaviours. RET tries to replace self defeating iB's with self winning rBs.

e) Learning RET:- Genu through group and individual sessions have learnt to handle his iB's and EDBs. He is able to identify the activating agents, his rBs, and iBs. He also sees the relationship between iBs and EDBs. RET has taught him to take responsibility for his thoughts, words and feelings. Some of his fears were due to wrong and limited knowledge. That is RET therapists believe in educating their clients. They believe that through proper education, right knowledge, proper skills in thinking, rational living is possible. We find that the RET therapists are direct, active and confronting. "The therapeutic approach is direct, active, hard hitting even relentless" (Ard 1969).

Matrix 2.4.2 Effect Of RET

Before RET	After RET
1. Physical level: Migraine tense, withdrawn from sports and game.	1. Migraine vanished taking active part in Sports and games.
2. Emotional level: Relationships with parents and others poor, poor self Concept, anxiety, fears, angry withdrawn	2. Relationship with parents and others better, better self concept reduction of iBs and EDBs, acceptance of rBs and SWBs.
3. Social level: -Loner, silent.- aggressive, shy, withdrawn, timid, sad and fearful.	3. More functional and creative, co-operative cheerful, pleasant, involving, free, brave, healthy, happy and outgoing.

Matrix 2.4.3 RET Process Model Of Genu's Treatment.

iBs	EDBs	RET	A	E	Reduction	Introduction
1, 2,	Fears,	AND	B	F	Of iBs,	of rBs
1, 5,	Anger	RET	C	F	EDB's	and SWBs
7,10,	Poor self	STEPS	D	E	Fears	Free, brave,
11and	Concept	REE	E	C	illnesses	healthy, happy
12	Anxiety	REI		T		outgoing
	withdrawn	PRE				

2.4.3 Emerging Ground Theory

We notice that RET, REE, REI and PRE all these have positive impact on Genu in the reduction of iB's and EDBs and the introduction of iBs and EDBs and the introduction of iBs and SWBs.

2.5.0 Outcomes Of The Pilot Study

The pilot study has brought to light the following:-

1. The three case studies of subjects show that RET and RET-Steps can reduce iBs or replace iB's with rBs and thus EDBs like depression, timidity and fear can be reduced.

2. The investigator has gained enough competence to give RET treatment to children who exhibit EDBs like timidity, depression and aggression.

3. BIBD was inadequate to check the intensity of iBs in the subjects and therefore, BIRBQ was prepared by the investigator.

4. Since iBs and EDBs are born and nurtured in the subjects environment (school, home, peer group, mass media and social environment) these need to be studied.

5. Human beings behaves as a whole person. Therefore the effect RET on all these three domains namely, cognitive,

affective and psychomotor need to be observed checked.

6. Three cases were inadequate to cover the other EDBs exhibited by high school girls. Therefore, more cases will be needed for the final study.

7. Students with deep rooted iBs and EDBs require more counselling sessions. So class VIII would be ideal for the final study.

8. Post-tests were not administered for Pilot study. As BIBD could not test the reduction of iB's BIRBQ would be of better use for the final study.

9. Effectiveness of RET for groups was not studied through group sessions.

2.5.1 Guidelines For The Final Study

The following guidelines were drawn for the final study:

1. The time required for identification of iBs, exhibition of EDBs and treatment require more than 14 to 20 months. Hence Class VIII was considered ideal.

2. The girls at this stage were chosen for the final study for they at this stage exhibit a number of EDBs.

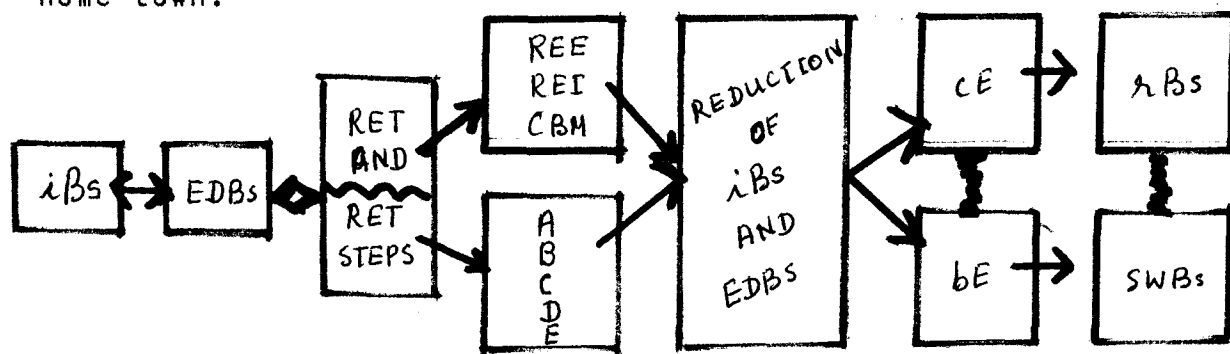
3. For the identification of iBs, EDBs and their

intensity, simple appropriate investigator made tools to be used. Pre-test and post-test results of these will indicate the effect of RET.

4. Since a sample of three was too small to cover the major areas of EDBs exhibited by high school girls five to seven cases may be ideal for covering EDBs like fear, timidity, anxiety, depression, nervousness, withdrawal and poor self concept.

5. In order to study the effectiveness of RET for groups through group sessions class VIII B may be taken as a case.

6. Knowledge of the mother tongue of subjects helped the investigator in her pilot study. In qualitative indepth study knowledge of subject's language, culture and upbringing are essential. Therefore, the investigator chose the place at her home town.



↔ mutual relationship
 → Reduction of iB's aB's & EDB's
 ~~~~~ Mutual effect of cE and bE.

↗ Treatment of RET  
 ↘ Effect of RET.  
 → leading to

Figure 2.5.1 Model Of The RET - Process

Matrix 2.5.1 Research Design For The Final Case Studies

| Phases                                                     | Description                                                                                                                               | Outcomes                                                             |
|------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------|
| I<br>Identification of cases with EDBs and iBs.            | Administration of Bell's Adjustment, FIRS,ARS,ACQ,PSCRS, Interviews,PO, BIBD,and BIRBQ, Feedbacks from self, parents, teachers and peers. | Selection of cases with specific EDBs and iBs.                       |
| II<br>Study of the origin and development of iB's and EDBs | Administration of BIBD to teachers and teacher trainees, PO, IIs, INIs, Study of the environment, school, Home.                           | Factors responsible for the origins and development of iBs and EDBs. |
| III<br>Study of the relationship between iB's and EDBs.    | Group discussions, RET-theory, RET-Steps, Group and individual counselling.                                                               | Sees the relationship between EDBs and specific iBs.                 |
| IV<br>Treatment of RET, to individual cases and the group. | Individual and group counselling, RET, RET-Steps, REE, REI and CBM. PRE,AE, HRS.                                                          | Reduction of iBs and EDBs, and Introduction of rBs and SWBs.         |
| V<br>Effect of RET in individual cases and class III B.    | Post tests of BIRD, BIRBQ, FIRS, ACQ, ARS, PSCRS, Bell's Adjustment Inventory PO, II's, Feedbacks from Cases, parents, peers, teachers.   | Cognitive and behaviour Effects (cE) and (bE).                       |

Matrix 2.5.1 explains briefly the phases of the final study of the Research Design. It also gives the description of the steps and expected outcome of each phase.

2.5.1 Feedback From Genu

Now I feel better than I was before  
 I don't feel angry, sad, unhappy  
 afraid or uneasy.

Now I ~~feel~~ don't get angry even  
 if my mother corrects me or scold  
 me.

I am ~~am~~ not afraid of snakes,  
 thunder, lightning and other insects.

Now I don't want to do ~~do~~  
 everything perfectly that I wanted  
 to do ~~do~~ before.

I feel more ~~happy~~ happier than  
 before I was

Now I started to enjoy my life  
 I think how precious my life is.

Now my ~~has~~ hearts are light and  
 I feel much better than before.  
~~before~~

Before I used to have migraine  
 head ache because of all the  
 tensions in my head.

~~Not It~~

Now It has disappeared because  
 all my tensions have gone.

I ~~was~~ was afraid to face the crowd  
 or talk a speech on the stage.

Now I ~~am~~ am not afraid to face  
 the crowd on the stage or the  
 public.

## CHAPTER III

### DESIGN OF THE STUDY

#### 3.0.0 Introduction

This chapter presents detailed description of research approach, sample, sources of data, description, of data gathering techniques, tools, collection of data and information, data reduction and data display.

#### Matrix 3.1.1 An Overview Of Procedural Steps

| Serial No. | Activities                                                       | Time.    | Remarks                                                                    |
|------------|------------------------------------------------------------------|----------|----------------------------------------------------------------------------|
| 1          | Preparation and Selection of sample                              | 8 months | Preparation of tools selection of site and sample.                         |
| 2          | Final Selection of cases for treatment of RET                    | 6 months | Final Selection was done after 10 months                                   |
| 3          | Treatment of RET<br>a) Individual cases<br>b) Group Class VIII B | 12 "     | Completion of the sessions took 18 months                                  |
| 4          | Effect of RET Pre-test, Post test of IPTs                        | 2 "      | Changes-Cognitive effect (CE) Behaviour effect (bE).                       |
| 5          | Organization of the data and information and Analysis of data    | 6 "      | It was a continuous process, from the preparation to writing of the thesis |
| 6          | Writing of the thesis                                            | 3 "      | Data collection, data reduction, and display took place simultaneously     |
| 7.         | Recording and compiling                                          | 4 "      | Compiling was a slow.                                                      |

\* The time division so made are not exclusive of each other.

### 3.1.0 Preparation

After the necessary formalities to conduct the research in the school, the researcher visited the school regularly and made herself available to the staff and students. She visited the high school classes regularly. She used these visits to study the site and environment of the school. She also built up rapport with the school staff. She also established rapport with high school girls by teaching songs, telling stories or speaking about RET during their free periods. At times she spent time by just being with them. At other times she showed interest in their studies or families.

The investigator explained the purpose of her presence in the school to the staff as well as to the students of high school classes. She also gave mini talks about rational living, disadvantages of SDBs and enumerated some EEBs. She spent time with the girls during free periods, lunch breaks, school celebrations, in the corridors, in the campus and canteen. She invited the students who would like to talk to her about any of their difficulties or problem areas. She spent her free time going around observing the campus, observing the activities, listening to the conversations, watching the events that were going on in the campus. She observed the posters displayed, the notices put upon the notice boards, attending the school assembly, watching the children

during their free periods and free time. She observed teacher-pupil, teacher-teacher and teacher - parent conversations. In these ways she studied the physical, emotional and social environment of the school. She spent many hours in the staff room observing, listening and studying the teacher's dealings with their students, parents and amongst themselves. The teachers by this time had accepted the investigator as part of their school. Some of the teachers discussed their home problems, and the problems of their children while some others referred their students with problem to the investigator. In the mean time the students also approached the investigator for casual talks about themselves, their class, their homes or their fears. The investigator simultaneously prepared the tools necessary for her study.

### 3.2.0 Research Approach

The research approach was a qualitative indepth study of the cases using active participant observation. Qualitative research can describe events, persons and processes scientifically without the use of numerical data. The investigator interviewed mothers, teachers cases and peers. She also interviewed the girls exhibiting EDBs to find out how parents and their lives and values contributed to their childrens' EDBs. This study mainly concentrated on the effect of

RET on high school girls who exhibited EDBs as a result of their iBs. It carefully and logically analyzed the responses of mothers and reported those responses that are consistent as well as areas of disagreement. Such a research leaves open the possibility to change, to ask different questions and to go in the direction that the observation may lead the experimenter. It is more open and responsive to its subject. Since case study is one type of qualitative study the investigator chose this for her research.

It was an investigation in the natural setting. The investigator spent most of her time in the site of the subjects namely school. She used qualitative and quantitative approaches to describe the findings. It is a multi-dimensional approach (Lorenstein Ludwig 1992; Biseio 1988).and the data is a thick description in a natural setting. She moved with the cases to their homes, their families, their teachers, their peers to see and feel what they feel, see those who are closely associated with them.

### 3.2.1 Case Study

The case study is a way of organizing social data for the purpose of viewing social reality. It examines a social unit as a whole. The unit may be a person, a family, a social group, a social institution or a community. The purpose is to understand the life cycle of the unit. The case study probes



deeply and analyzes interactions between the factors that explain present status or that influence change or growth.

"The element of typicalness is the focus of action, for an emphasis upon would preclude scientific abstraction and generalization of findings" (Bronley 1986). "A case is an example or of perhaps even a prototype for a category of individuals". Thus the reaction of the case studies were done in such a way that each case is typical of those whom she wished to generalize.

These are interpretative presentations and discussions of the cases resting upon evidence gathered by the investigator during P.O, II, and INI, counselling, Feed backs from those involved in the study, (parents, family members, teachers, peers and cases). It is a subjective statement which the investigator is prepared to justify and defend. It is a detailed examination of the origin and development of iBs in the subject, diagnosis of EDBs that are related to the iBs and treatment of RET. The effect of RET on cognitive level as well as in the behaviour level in the subject. Case study approach was used for the Pilot study as well as for the final study. For pilot study three cases were taken for a short span of four months, while for the final study the cases were studied for a period of 18 months.

### 3.2.2 Selection Of Sample

Since this is a qualitative indepth study the sample is small. They were selected in such a way that the investigator is well versed in their culture, language, customs and traditions of people as there was a necessary requisite for a study like this that involves INI, home visits, counselling sessions and P O. Therefore while selecting the sample she kept in mind the above mentioned factors both for pilot as well as the final studies.

a) Place: As mentioned above she selected her home town for this study. So that her mother tongue would be of great help in building up rapport and establishing relationships with cases, teachers, parents and those involved in the study. Therefore the site chosen for this study was Cochin.

b) School: An English medium school with a population of two thousand children was chosen. The school has six divisions for each class. It was chosen for the following reasons. 1. The investigation could find out the reliability of the tools as there was facilities for testing and retesting without causing much inconvenience to the school. 2. This school caters to students coming from different strata of the society namely economically, socially, and religion wise and this enabled the investigator to have a heterogeneous sample for finding out the reliability of investigator prepared tools.

3. The students in each class are grouped heterogeneously. Therefore in each class there are bright, average and weak students with reference to scholastic performances. 4. In this school the same teachers continue to be responsible for them till they are in the S.S.L.C. that is the teachers of class VIII continue to go along with the students till they reach the final class. The class teacher of class VIII B continues to be their teacher in class IX B and also in class X B. That was also another reason for the choice of this school as she needed the co-operation of these teachers for more than 2 years.

#### c) Class VIII and VIII B

1. All the cases selected are from class VIII for the simple reason that these students are needed to be observed for a period of two years or more. The availability of students for three consecutive years was a major reason for this choice.

2. Students coming from the middle school seem to go through a period of crisis to adjust to the teaching pattern in the high school. Since this adolescent stage is critical period for most of them in physical, emotional, social and spiritual life, the investigator from her personal experience in the field of guiding the school children felt this class would be ideal. Therefore class VIII and VIII B were selected for group study. The details are given in Chapter IX.

d) Types of cases: All the cases selected for the Pilot

study as well as for the final study exhibited EDBs and iBs at different levels and intensity. All the cases were chosen on the following criteria. Knowledge of the mother tongue, willingness to co-operate with the investigator, perseverance in their assignments, punctuality and regularity. The detail procedure is given below.

After establishing rapport, the investigator administered Bell's Adjustment Inventory to all the students of classes VIII and IX. The result showed that there were a number of students who were emotionally disturbed in each class. Since the students including IX and VIII were above 700 the investigator decided to drop class IX for the reasons mentioned above. The result of BIBD showed that presence of iBs in all students. Some students had more iBs than others. After these tests the investigator described and explained RET to them, and told them that they were free to approach her with their problems and difficulties and where they could meet her privately.

More than 40 students approached the investigator of these 15 were referred by their class teachers while the rest were self referred. When these children were given the detailed explanation of the procedure and the need to meet their parents 10 out of the 25 self referred discontinued on a regular basis but came once in a way when they wished to talk.

It was observed by the investigator that 15 of the teacher referred, 10 of the self referred continued to come on a regular basis. After some time some of them found it difficult to be present for the group sessions as their tuitions seemed to clash with the timings of the RET sessions. Others had their family problems or difficulties and could not make it. As mentioned earlier the final selection was done by the investigator on the basis of the criteria mentioned earlier. Three out of the 15 teacher referred and two out of 25 self referred were finally selected. Some of the cases dropped off in the beginning when the investigator explained the need to meet their parents. "Parents of students who come to school are failures. I am not a failure". "Only problem children's parents are called. I am not a problem". "I am afraid to tell my parents to come to school. They will punish me". These are some of the remarks passed by these children. Investigator's observation of parents coming to school to meet the teachers and the method of feed-back sessions on a number of times gave a clue to the fear of children having to call their parents to school.

Types of cases selected for pilot study were Timid Renu, Frightened Genu and Depressed Binu. The details are stated in chapter II. The cases chosen for the final study were withdrawn KEEY, Anxious ANN, Nervous JUDY, Depressed DEEPA and Angry MARIE. Of these KEEY, JUDY and MARIE were referred by

teachers, while DEEPA and ANN were self referred. It was purposive sampling as the investigator was interested in knowing the impact of RET in children who exhibited different types of EDBs. Class VIII B was chosen as a case because this class seemed to have a higher degree and number of iBs and EDBs compared to other divisions. Class VIII B was given only group sessions to find out the impact of RET through group sessions alone. The details of these case studies are given in chapters IV to IX.

### 3.2.3 Sources Of Data

The major sources of data are cases, families, their class teachers and peers. The details of how the data was collected through these sources are explained below.

a) Cases: They formed an important source of data collection. Information was collected through informal and formal interviews as well as counselling sessions. The details are given in case studies chapters IV to IX.

b) Family members: They played an important role in the life of the children. The origin and development of iBs take place at least partly in the family. Therefore the information collected from family members have contributed much in understanding the origin and development of iBs responsible for their EDBs in all cases. The details are given in case studies chapters IV to IX.

C) Teachers: They too played an important role in the life of their students especially their class teachers who were with them for 2 years already. These teachers were able to give detailed descriptions of their students' behaviour in the class and they were the first people to notice the EDBs in their students. EDBs like withdrawal, nervousness, shyness, aggression or other antisocial behaviour in the class. Details are given in the following chapters IV to IX both inclusive.

d) Peers: Five of the peers were selected randomly and the remaining were students closely related to the case in the class, one being the class leader in all the cases. These peers were with the subjects during the class hours as well as during the breaks. It was not possible for the investigator to be with the subjects throughout. So she gave the peers necessary guidelines to observe the cases in their class, their behaviour in the absence and presence of teachers, their relationships with peers in their class, their responses during the teaching periods and all their other activities during the school hours. The details are given in the feedback sessions.

### 3.3.0 Data Gathering Techniques

The different techniques that were used to collect data are described in the following paragraphs and feedbacks.

### 3.3.1 Participant Observation (P.O.)

The investigator became a part of the institute through her availability to the students and teachers. She observed her cases in the class room, during their lessons, during their breaks, during their lunch hours, and sometimes having lunch in their class rooms. She listened to their conversations, observed their behaviour during the examinations, before their examinations and during the curricular activities. She tried to follow them in the chapel, canteen, auditorium and play ground. She became one of them in their school celebrations. On these occasions she too danced, sang and played with them so that she could observe them from the part of involvement. At other times she observed their actions without getting directly involved. The subjects were observed in their natural settings. The investigator worked as a participant observer (Malkin, Marilyn 1979).

Within three months the investigator was able to establish a good rapport with students and teachers of high school. So, students often came to call her during their free periods. She went around the school premises to get an idea of the functioning of the school, observed the charts and posters put up in the school, and the canteen. She also studied the physical, social, spiritual and emotional climate of the school. She actively helped the teachers during rehearsals,



competitions, displays and class programmes. After a period of five months she narrowed down the area of her activity and concentrated on the selected students as well as class VIII B.

The cases were observed with reference to their relationships with teachers, parents, peers and other staff members of the school. The detail description of these observations are given in chapters IV to IX both inclusive. Individual sessions and group sessions for the small group were sometimes conducted in the institute where the investigator resided as there were better facilities for more privacy and without these students being observed by their colleagues. The investigator thus had plenty of opportunities to observe their behaviour in the informal set up. Class VIII B now IX B was taken for picnic with their class teacher for intensive observation in an informal setting. The details of the observation is given in chapter IX.

### 3.3.2. Indepth Interview (II)

The investigator used indepth interviews during the selection of the sample, to establish rapport with cases, their parents, teachers and peers. They were also of help to study the problem areas, the origin of their iBs and EDBs that were self defeating. These interviews were used basically for individual cases. During the interviews open ended questions were used when needed. Through IIs family environment, their

value systems, the iBs of parents, family members, their priorities, their expectations of their children, the sibling competitions and the situations where self defeating EDBs were studied.

IIs were also used during home visits and during the interviews with teachers and family members. These gave chances for free flow of expression. The results of these are given in each case study. IIs were used for counselling sessions for all individual cases.

### 3.3.3 Home Visits

The investigator visited the homes of the individual cases. The family was informed of these visits. These visits enabled the investigator to study the physical, social and emotional climate of the home. Minimum four visits were conducted to their homes. The visits lasted for one to three hours depending upon the family members. No inhibition in expressing their views was observed.

### 3.3.4 Individual And Group Counselling Sessions

The details of these sessions are given in table 3.3.1

In addition to IPTs all the individual cases took Bell's Adjustment inventory and Wechler's Test Of Intelligence. Pre and Post test of IPTs were taken by all.

Table 3.3.1 Details of Individual and Group Counselling

| Cases       | Pre Tests<br>IPTs | Individual counselling |     |     |     | Group Counselling      |     |     |     |
|-------------|-------------------|------------------------|-----|-----|-----|------------------------|-----|-----|-----|
|             |                   | No of<br>Sessi-<br>ons | RET | REE | REI | No of<br>sessi-<br>ons | RET | REE | CBM |
| I<br>W.K.   | ✓                 | 30                     | ✓   | ✓   | ✓   | 20                     | ✓   | ✓   | ✓   |
| II<br>A.A.  | ✓                 | 30                     | ✓   | ✓   | ✓   | 20                     | ✓   | ✓   | ✓   |
| III<br>N.J  | ✓                 | 35                     | ✓   | ✓   | ✓   | 15                     | ✓   | ✓   | ✓   |
| IV<br>D.D.  | ✓                 | 30                     | ✓   | ✓   | ✓   | 20                     | ✓   | ✓   |     |
| V<br>A.M    | ✓                 | 30                     | ✓   | ✓   | ✓   | 20                     | ✓   | ✓   | ✓   |
| VI<br>VIIIB | ✓                 | NIL                    | NIL | NIL | NIL | 40                     | 25  | 5   | 10  |

a) Individual counselling sessions: The first 5 sessions were used mainly to establish support with the subjects, to get to know their problem areas, as well as their iBs and EDBs. Twenty counselling sessions were used for treatment of RET, REE and REI, and the final 5 for summing the works done. The Glimpses of the sessions are given as it is too elaborate to include all the details. In the case of nervous July 35 individual sessions and 15 group session were given.

b) Group counselling sessions: These sessions were used to impart RET theory, to teach RET-Steps, how to use assignment

sheets, the skills of PRE and REE for the individual cases. For class VIII B group sessions were used to teach RET-theory and RET-STEPS, REE, CBM and AE and also to counter their iBs, introduction of rBs and also for group discussions. For these sessions the investigator has used charts, to discuss the theory diagrams and sketches were also used to show the relationships between iBs and EDBs. CBM was used to overcome some of their fears like meeting teachers, facing a class, participating in a programme, stage and audience, to express their ideas to the whole class and to face the examinations

#### 3.3.4 Feedbacks

Feedbacks were received from family members. Teachers, Cases and peers. The family members and cases were seen more frequently than teachers and peers. Interviews with the mothers often lasted for more than an hour often. The details of these feedbacks are given in chapters IV to IX. Triangulation of these feedbacks were done before the data display.

#### 3.4.0 Data Gathering Tools

A number of tools were prepared by the investigator as and when the needs arose. In this study the investigator is the main tool. She has used tools that were prepared by herself as well as school records and a few standardized tests. The details of all the tools used to collect the data and the

details of the tools prepared by the investigator are presented in the following pages.

#### 3.4.1 Investigator

Investigator is the most important tool in the collection of data. She has already much experience in the field of education. She has 23 years of experience in the teaching line. She also has experience in dealing with students exhibiting EDBs at B.Ed level as well as with high school children. In qualitative research the investigator is the main tool. Her experiences in dealing with different types of personalities her ability to empathise with cases, teachers, parents and her peers enabled her to win their confidence, an essential element for qualitative research. The 'thick description' of the data in the following chapters is the result of this capacity of the investigator to see through unsaid words, the capacity to pick up feelings in their gestures and tone of words. "Human experience is mediated by interpretation" (Blumer 1966). Her knowledge of human behaviour, sensitivity, perception, the ability to reach out and her simplicity and child like enthusiasm enabled her to be one with children as well as with the teachers. The investigator was not only 'eyes and ears' (Maclean) but also hands and feet, tongue and skin. All her senses were alert while in the site to see, to hear, to touch, to feel, to taste

and she also entered into the other and experienced what the other experienced as if she was the other" (Roger 1968). She spent much time in a natural setting, talking, looking, visiting, eating, playing, dancing, singing and so on (Gulba 1978; Wolf 1979). She identified herself so much with students that they felt free to talk and discuss things on their way home, bus stand or even in the bus.

#### 3.4.2 Investigator Prepared Tools (IPTs)

Matrix 3.4.1 gives the details of all the tools prepared by the investigator. (89)

#### 3.4.3 Rational For Investigator Prepared Tools

The existing personality tests measure neurotic tendencies and not specific iBs and EDBs. The general tests prepared and used for clinical purposes will not serve to measure the specific iBs and EDBs the investigator is trying to study at depth. Therefore she prepared these tools. They were also meant to help her for her IT's. The investigators are free to prepare their own material suitable and useful for their study. The investigator while preparing these tools has considered the language of the adolescent, their problem areas and uniqueness of individuals. Format of PRE and AE are flexible. The investigator while carrying out these exercises cannot be very rigid and standardized tests do not give scope

Matrix 3.4.1 Description of Investigator Prepared Tool's (IPTs)

| I                  | II                                                             | III                                                                     | IV                                                                       | V                                                                                                            | VI                                                                                                           | VII                                                                       |
|--------------------|----------------------------------------------------------------|-------------------------------------------------------------------------|--------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------|
| 1. Names of tests. | Beulah's Irrational Beliefs Description (BIBD)                 | Beulah's Irrational Beliefs Questionnaire (BIRBQ)                       | Fear Identification Rating Scale (PIRS)                                  | Anger Rating Scale (ARS)                                                                                     | Anxiety Checking Questionnaire (ACQ)                                                                         | Poor Self Concept Rating Scale (PSCRS).                                   |
| 2. Objectives      | Identification of iBs                                          | Detection of dominant iBs and their intensity                           | Detection of areas of Fear                                               | Detection of Anger provoking Situations and expression of anger                                              | Detection of Anxiety Causing situations and expression of Anxiety                                            | Identification of poor self concept                                       |
| 3. Preparation     | Studied the iBs of Ellis and Hauck Simplified with description | Studied the iBs of Ellis, prepared 70 items rejected 10 and retained 60 | Studied available literature, discussed with professionals in Psychiatry | Brain Storming Sessions, with High School Girls, studied literature, PO discussions with child Psychologists | Brain Storming Sessions, with High School Girls, studied literature, PO discussions with child Psychologists | Available literature PO of inhibited girls in the class room and outside. |
| 4. Scrutinised by  | Counsellor and educationists                                   | Counsellor and educationists                                            | Clinical Psychologists Social workers, educationists                     | Clinical Psychologists Social workers, educationists                                                         | Clinical Psychologists Social workers, educationists                                                         | Counsellors educationists Psychologists                                   |
| 5. Administered on | 320 High School Girls                                          | 95 High School Girls                                                    | 95 High School Girls                                                     | 95 High School Girls                                                                                         | 95 High School Girls                                                                                         | 90 High School Girls                                                      |
| 6. Variables       | 12 iBs of Ellis and Hauck                                      | 12 iBs                                                                  | Fears of School children                                                 | Situations provoking anger and expression of it.                                                             | Anxiety causing situations and expression of it                                                              | Situations evoking inferiority complex                                    |

Matrix 3.4.1 Description of Investigator Prepared Tools (IPTs) Continued -

|                    | I       | II | III                     | IV                      | V                       | VI                      | VII                     |
|--------------------|---------|----|-------------------------|-------------------------|-------------------------|-------------------------|-------------------------|
| 7. Number of items |         | 12 | 60                      | 40                      | 20                      | 25                      | 15                      |
| 8. Scoring         | Yes/No  |    | 5 Point scale           | 5 Point scale           | 5 Point scale           | 5 Point scale           | 5 Point scale           |
| 9. Reliability     | -       |    | Test, retest method .86 | Test, Retest Method .90 | Test, Retest method .82 | Test, Retest Method .82 | Test, Retest Method .84 |
| 10. Validity       | Content |    | Validity                | and                     | face                    | validity                |                         |

5 - always, 4 - After, 3 - Sometimes, 2 - Rarely, 1 - Never.



for flexibility.

In this study flexibility was needed at all levels. The needs of the groups are different, the capacity of their imaginations too varied. How can such materials be used for research? What about their validity, reliability and objectivity? True here the investigator is not testing materials but unique persons who are ever in the process of change. And her purpose of using these IPTs are to accelerate their movement and change from undesirable to desirable (AE, PRE and HRS). How? These tools and activities help them to be more realistic about their problems and their irrational and self defeating thinking. One cannot be objective about something or a process that move on or is undergoing transformation for example beliefs and feelings. What we could observe is the changes brought about in one's exterior observable behaviour that are related to one's innerself.

#### 3.4.4 School Observation Schedule (SOS)

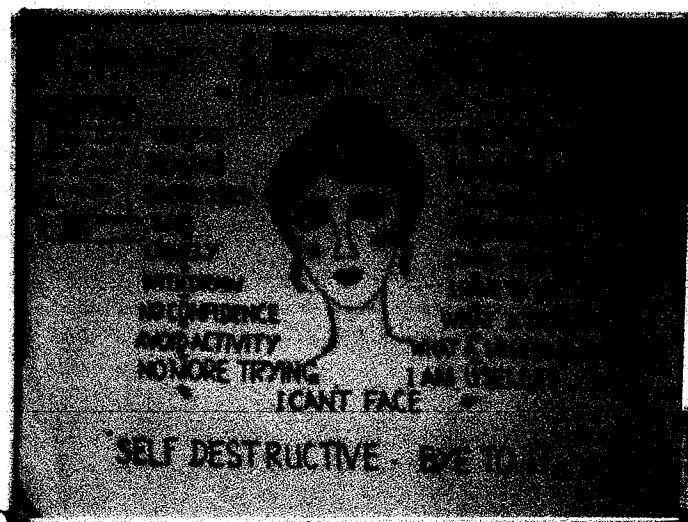
This tool was prepared by the investigator for indepth interviews with teachers and students. The questions are open ended. The tool was prepared by the investigator after spending 6 months in the school. Literature regarding School observation was also referred. The schedule was shown to two educationists for their opinion. The schedule covers the following areas.

- A. Physical environment.
- B. Emotional climate
- C. Priorities
- D. Feedback Sessions
- E. Scope for all round development and
- F. Teacher pupil relationship

A copy of the same is included in the appendix **TM**

### 3.4.5 Charts/Posters/Photographs

Charts and posters were used by the investigator to teach the students content of RET and also to show the effect of iBs in developing EDBs. These were also used to counter the iBs. Samples of the photographs of these charts are presented below. These enabled the students to see the relationship between iBs and EDBs. They were also able to see the relationship among iBs, rBs, and irrational and rational thinking as well. Photographs are used in the analysis of the data. The liveshots of most of the activities carried out in the RET sessions both for individual cases as well as for group are given. These show us glimpses of the school environment, classroom, activities carried outside and inside the school. PRE, CBM, RET also are shown with the help of photographs.



5. Poster.



6. Taking Post-tests.

### 3.5.0 Treatment of RET

The treatment of RET was given through 5 phase programme for Pilot Study as well as for the final study. 1. Identification of cases with EDBs. 2. Identification origin and development of iB's 3. The relationship between iBs and EDBs 4. Treatment of RET through RET, RET-Steps, REE REI, CBM, PRE/AE, 5) Effect of RET and Cognitive and behaviour levels leading to the emergence of specific or ground theory.

The treatment of RET was given individually as well as in groups. RET theory was given to the cases and the class through lectures, discussions, questions and group discussions using teaching aids like charts, sketches and diagrams. The following aspects were dealt in theory. Concept of RET, importance of RET in overcoming EDBs, the 12 iBs. Relationship between iBs and EDBs. And how to counter the iBs in individual counselling sessions as well as in group sessions. It was noticed by the investigator that in some cases a number of sessions were needed to help the individual to reduce or give up the strongest iBs. Details of these sessions are explained in each case study. (Eileen, Beck, Kareen 1979;, Leaf, Russel C, Kranus, David H. Dantzig, Stephen 1992).

### 3.5.1 Rational Emotive Education (REE)

REE was conducted both with the individuals as well as

the group with the objectives to counter the iBs and to replace them with rBs, to help the cases to be more realistic about themselves the world and others and to help the cases to accept the reality more objectively as they are.

REE enabled them to get an insight into their thinking processes that cause then self downing and self defeating processes that in turn cause self defeating and self downing feelings and EDBs. It was observed that cases that suffered from tensions, anxiety or worry showed high expectations coupled with lower abilities. Those who suffered from anger too were frustrated because they found it difficult to measure up to either their parent's expectations or their own expectations. They often wanted to have their way in everything. Through REE students were motivated to improve self discipline, they also learnt the habit of concentration and how to develop them. They acquired right attitudes, more knowledge and skills for effective learning and handling emotions positively and creatively. The class was actively involved in all these sessions. At times the investigator noticed a feeling of relief and joy in the students.

### 3.5.2 Rational Emotive Imagery (REI)

It was used during the individual counselling sessions for individuals who were very disturbed and found life too difficult to accept. It was used for desensitizing their fears

and to give positive strokes to face painful and fearful situations with greater courage and confidence. REI was given after either progressive relaxation exercise (PRE) or awareness exercise (AE). The cases gained courage to face their angry parents, to assert themselves and also to express their true feelings at home, reporting their failures or mistakes, they committed in school or other situations. Sometimes the investigator exaggerated the pain gradually through fantasy. These exercises increased their frustration tolerance level (FTL) as well as the ability to face painful experiences that are part of living in a community. These exercises were repeated on a number of times till the subject could face the situation with more confidence in their real life situations.

### 3.5.3 Cognitive Behaviour Modification (CBM)

Four weeks were spent with an hours practice of CBM at 2 levels during the year for overcoming stage fear and teaching them to face the audience. The first CBM was 2 weeks, during the month of August 1994 and the second was during the month of February 1995. Through CBM cases were enabled to face a small group first and then a bigger group. They were given over preparation before they were asked to act on the stage. This was done by the investigator by first modelling before the cases. They were then asked to model after the investigator.

After a number of practices they gained more confidence to face the audience. They were given opportunities on four occasions. They were trained to dance, to sing and to act. Feedback from the cases after shows, ensured that they were quite at ease now. To quote their own words "I didn't feel anything." "I was a little nervous for the first item. I felt my body trembling a bit." "I wasn't afraid during the latter items." "I felt good that I could face such a big crowd." "I think now I am not afraid to face a crowd." It was evident from their conversations as well as their facial expressions and tone that they experienced a sense of achievement. A dream of theirs was realized.

#### 3.5.4 Progressive Relation Exercise (PRE)

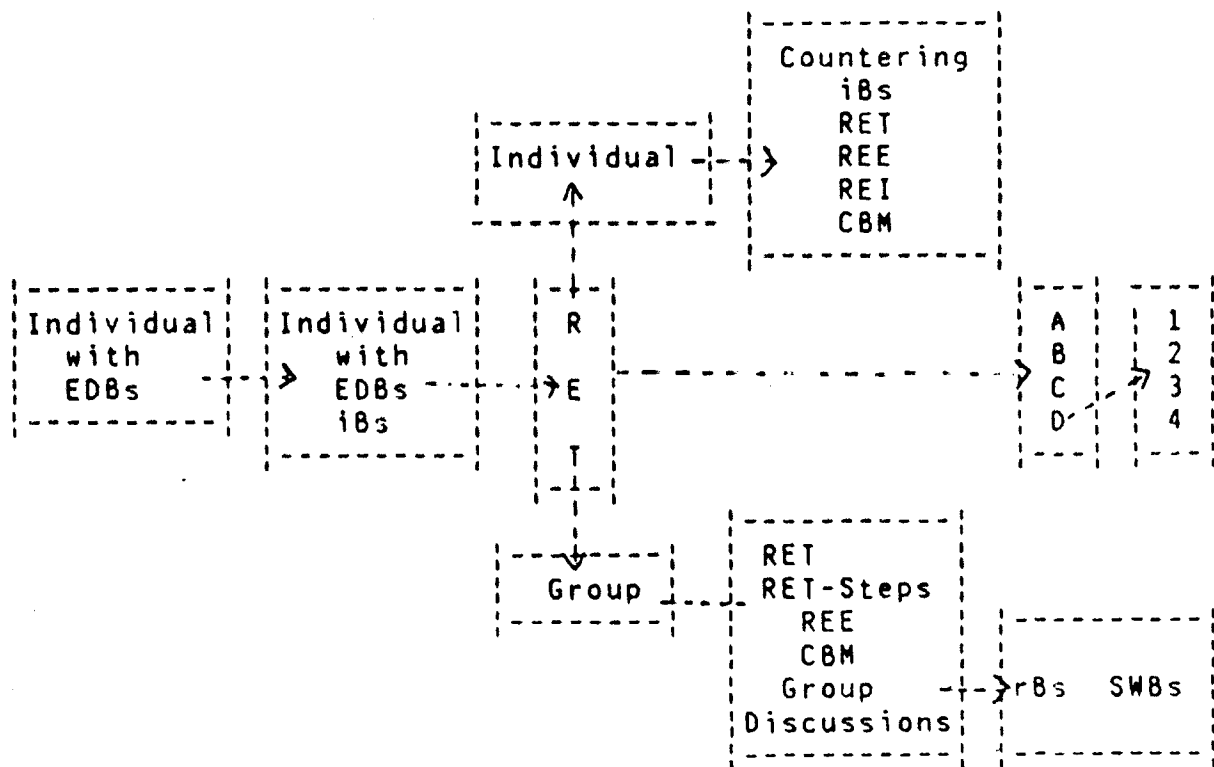
And

#### Awareness Exercise (AE)

PRE was practiced with a small group. A cassette for the same was recorded by the investigator. These exercises were carried out with those who found concentration difficult in general. PRE was tried out during the individual sessions before counselling if the case was upset or anxious. Since PRE was not possible to conduct for the whole class AE was tried out with the class. It was of short duration and enabled the cases to be alert and relaxed. It also helped to concentrate better.

3.5.5 Steps In RET (Countering iBs)

Figure 3.5.1 gives a diagrammatic sketch for the treatment of RET for both individual cases and group. It summarises all the steps in the treatment of RET (Cohen, Elliot 1992). The ABCD's of RET can be brought within the purview of formal logic for all.



-----> movement

- A- Activating agent.
- B- Belief System
- C- Consequence
- D- Debate
- E- Effects

- 1. Detect
- 2. Discuss
- 3. Dispute
- 4. Destroy

Figure 3.5.1 Interactive Model Counteracting iBs

Matrix 3.5.1 Process Product Model of RET

|     | Objective                                                                                                                                                  | Activities                                                                                                                                                                                                                                                                                                               | Outcomes                                                                                                                                                           |
|-----|------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| I   | To identify the origin and development of iBs responsible for EDBs like fear, depression, nervousness, anger and withdrawal.                               | Mini lectures on EDBs , and concept of RET, Administration of IPTs BIBD, BIRBQ, FIRS, ABS, ACQ, PSCRS and Bell's Adjustment. IIs with parents, teachers and individual cases. Administrations BIBD to teachers and trainees. Home visits, study of school environment and PO of the investigator, Mass media e.g. films. | Knowledge of the factors, contributed to the origin and development of iBs and EDBs in high school girls.                                                          |
| II  | To study the relationship between iBs and EDBs.                                                                                                            | Concept of RET-Theory, knowledge of iBs and RET-Steps. Group discussions Analysis of dominant iB's and related EDBs, of the group, brain storming.                                                                                                                                                                       | The dominant iBs of the group and related EDBs of the class. Intensity and presence of iB's for specific EDBs like fear, anger uncontrollability anxiety or worry. |
| III | To study the impact of RET in bringing about positive changes in cognitive and affective domains by reducing or replacing iBs with rBs thus reducing EDBs. | RET, REE, REI, CBN, counselling sessions, PRE, HRS, Post tests of IPTs, Feedbacks from. Cases, Family, Teachers, peers, PO of the investigator.                                                                                                                                                                          | Reduction in iBs and introduction of rBs reduction in EDBs and introduction SWBs in group and individual cases.                                                    |
| IV  | To study the effect of RET in a group of 56 in the class room situation.                                                                                   | RET, REE, Correlated means, Class feed backs, Analysis of the feedbacks.                                                                                                                                                                                                                                                 | Reduction of EDBs and iBs.                                                                                                                                         |



### 3.5.6 Phases Of RET

The process product model of RET is presented in Matrix 3.5.1 It explains the phases, objectives, activities and the outcome.

### 3.6.0 Data Collection Procedure

The data was collected through multi-site, multi-dimensional approach. Being a qualitative study the investigator was the main tool. Her knowledge and skills helped her to develop the tools needed for study. She knew what she wanted and accordingly she responded to the situation resourcefully using the opportunities in the data collection. PO, II, INI, Pre-tests, Post-tests, of IPTs, Feedbacks, home visits, study of school environment, school practices, school records related to individuals and group and counselling sessions for individual, small group and class VIII B were means of data collection.

### 3.6.1 Data Collection

The procedures of data collection mainly consisted of data collection, data reduction and data display. After the final selection of the cases the investigator made an indepth study of each individual case. She kept an activity file and a diary. These helped her to observe the frequency of events happening, the style of conversations, the words, phrases and

sentences repeatedly used by teachers, their reactions to certain situations in the school, persons, students and parents.

To study the origin and development of iB's and EDBs Pre-tests of Bell's Adjustment and IPTs namely BIBD, BIRBQ, FIRS, ARS. ACQ and PSCRS to all individual cases and all the IPTs to the group were administered. She carried out a number of IIs, INIs with cases their parents, teachers and peers in addition to PO. She made a detailed study of physical, social, emotional and spiritual climate of the school and school practices. A few films that were viewed by the class and the iBs communicated through these films were discussed with class VIII B. During the data collection she studied the individual and group in relation to their environment, the persons they are interacting with in the school and home. The achievement of the students in curricular and co-curricular activities were collected from the school records. She used SOS for observation and interviews with the staff of the school. Investigator's PO consisted active involvement on a number of occasions.

The treatment of RET was carried out for individual cases through individual counselling and small group sessions. Countering of iB's were done during the individual counselling sessions for individuals while for the group it was done

through group sessions which included lectures, discussions and brain storming. RET, REE were conducted with the help of charts, posters, diagrams and group discussions. CBM also helped in overcoming EDBs like fear, nervousness, anxiety and worry. CBM is a part of the therapy for both individuals and group.

The study of the relationship between iBs and EDBs was carried out by dividing the group into smaller groups according to their dominant EDBs. Each group studied those iBs which were responsible for their specific EDBs like anger, fear, uncontrollability and anxiety. The grouping was done after a number of sessions in RET and RET steps. So the students were able to identify the iBs responsible for their dominant EDBs. Impact of the treatment of RET was found out using both qualitative and quantitative methods. Qualitative data were collected through Feedbacks, Interviews, Counselling and PO. The quantitative data were collected through Pre-test, Post-test scores of IPIs and Bell's Adjustment Inventory for individual cases.

### 3.6.2 Organization Of Data And Information

For organization of data description and interpretation of data both quantitative and qualitative methods were used graphs, percentage, correlated means were used to interpret the quantitative data. While Matrices, Figures, Tables, Models and

Samples of Feedbacks are used to describe and interpret qualitative data.

### 3.6.3 Data Reduction And Analysis Of Data

Data reduction was done continuously during the data collection. From the bountiful data, essentials were sorted out, ideas of similarities were clubbed together. Data coding helped in data reduction. At first a rough coding was done, this led to general coding which was finally specified and refined. As a result new headings emerged. Some titles were discarded and others were introduced. The refinement of coding was done along with the data reduction for each case study. Data reduction continued during analysis of the data till the final display. For data analysis graphs, percentage, tables, photographs diagrams and descriptions are used. Snapshots of the major activities like counselling session, out door activities, school environment and CBM are included. Description and interpretation formed the major part of the analysis.

### 3.6.4 Data Display

Data display is done through description, interpretations, summarizing Process-Product Models of RET for different individual cases and the group leading to the emergency of specific and ground theories. The data is

displayed after clubbing and subsuming of 'thick bountiful data into meaningful symbols. The investigator used triangulation 2for the trustworthiness of data for all the individual cases as well as the group. 1. Individual cases with the Investigator.



8.



9. Outdoor Activity.



10. Group Discussions ,

Qualitative B.E. 3.6.8 Renu's Feedback During RET

I was born in Kerala, but brought up in Goa. I studied in a girls' convent in Vasco. I never liked my school days. I was a loner then. But all my classmates made good use of me whenever they had any work of drawing or sketching. And I would do it willingly <sup>or unwillingly</sup> because I could never say 'no'.

At home daddy and mummy loves me very much. My brother does not like talking much to me. We used to fight a lot as children. Always I was the one who got the beating because I was always scared to hit back. I used to feel bad even if I hit my brother by mistake. Mummy usually was not strict with my brother and most of the time he got his way. Many a times I felt that mummy loved my brother more than me.

As children, my brother and I saw a lot of fights within the family. It was a very bad experience. Everyday we would be scared as to when the next fight would begin. There was a lot of tension at home. But now a days the fight is between daddy and my ~~brother~~ brother. Daddy drinks quite a bit and my brother does not like it. My brother wants daddy to change his habits and daddy will not take anything from his son. Tension reaches the peak <sup>whole day</sup> on Saturdays and Sundays as daddy's <sup>is</sup> ~~is~~ at home ~~the day~~. On these days they just cannot stand each other. I tried to explain to my brother many times but he does not listen. The same with daddy. Daddy picks up ~~up~~ fights with mummy on silly matters and there is a lot of tension at home. First I used to cry a lot when there were fights at home. Then when I realised I could not do anything about it, I used to lock myself up in the bedroom.

Everytime I decided to do anything on my own I used to be interrogated and questioned. I got discouraged most of the time. But my brother would always get his way out. I used to feel very guilty if I did not do anything that mummy and daddy told me. I was always scared that God would punish me. Sometimes I do never do what they told me because I did not feel it was right. Yet I always repented for not doing.

When I entered college I made a lot of friends. But I always felt that all my friends were better than me and I am nothing. My college friends are still my best of friends. Even when I was in college I did not take part in any activities. I was always scared that I would not be able to do it. I am neither in awe of success nor do I fear failure. But I always thought that I was not capable of doing anything. My friends helped me a lot in changing this attitude of mine.

I always felt bad when anyone took me for granted. Mummy and daddy also took me for granted. It has also become my brother's hobby to take me for granted. I never said anything to anyone, even if they hurt me, because I thought that they would feel bad. I always cried into my pillow. I cry even when I get angry on someone. Sometimes when I get angry on mummy, daddy or brother I just don't know what to do. They never understand me. I do not feel free to talk to mummy or daddy about myself because I feel they will not understand me.

## CHAPTER IV

### WITHDRAWN KEEY (CASE STUDY-1)

#### 4.0.0 Introduction:

It is an interesting case study of a withdrawn high school girl. This chapter deals with identification of the case, selection of KEEY, her family environment, family constellation, economic status, emotional climate, religious beliefs and values, upbringing style, relationships of parents and siblings with KEEY, her scholastic and other achievements, origin and development of her iBs, EDBs and identification and selection of KEEY, impact of RET on KEEY through feedback, from peers, parents, teachers and KEEY, PO of the investigator and glimpses of counselling sessions. We also get the pre-test post-test results of IPTs before and after the treatment of RET. The chapter ends with the emergence of specific ground theory.



11. Keey and Investigator



Matrix 4.1.1 Model Of The Process Of RET On KEEY

| PHASES                     | MAJOR STEPS                                                                                  | ACTIVITIES                                                                                                     |
|----------------------------|----------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------|
| PHASE I<br>Objective<br>1  | a) Introduction of Investigation.<br>b) Rapport with KEEY                                    | Mini talks,<br>Administration of Bell's Adjustment Inventory, INI, II, SKS, and frequent meetings              |
| PHASE II<br>Objective<br>2 | a) Identification of iBs and EDBs of KEEY<br>b) Final Selection of KEEY                      | BIBD, BIRBO, FIRS, ARS, PSCRS and ACQ<br>Co-operation of parents and KEEY, and her Punctuality and regularity. |
| PHASE III                  | Case study (Study of Environment physical, mental emotional) and Pre-test, Post-test scores. | Study of School, Family, PO, IIs<br>Feedback from peers, teachers, KEEY. Parents.                              |
| PHASE IV<br>Objective<br>3 | Treatment of RET on KEEY                                                                     | Counselling sessions individual and Group,                                                                     |
| PHASE V                    | Impact of RET on KEEY                                                                        | CBM, REE, REI, PRE, HRS.,<br>Feedbacks, score differences of IPTs.                                             |

4.1.0 Objective 1

To identify the origin and development of irrational Beliefs (iBs) responsible for Emotionally Disturbed Behaviour (EDB) namely withdrawal in High School Girl KEEY through knowledge of RET.

#### 4.1.1 Identification And Selection Keyy

Keyy was referred by her class teacher for the following symptoms observed by her. Though a repeater in class VIII she was withdrawn, shy, timid, frightened, inability to read correctly, meaningless responses, concept deficiency and poor self image. "She is shy, withdrawn and rejects her colour and appearance. In spite of being a repeater she cannot answer a single question. See what you can do with her." said; her class teacher.



12. KEYY.

KEYY was 13 years old when she first met the investigator. She visited the investigator regularly. Through INIs the investigator entered a little deeper into her inner life. During the first few interviews Keyy trembled, stammered and even hesitated to come closer to the investigator. She muttered in words when questioned often these words had no logical sequence.

Therefore she was also given scope to write about self, school, home, family members, friends and teachers. These enabled the investigator to become aware of her fears, iBs, EDBs. family back-ground their life style and values to some extent. Through these interviews the following problems of Keyy surfaced. Lack of memory, inferiority complex, shyness,

timidity, signs of fear, inability to comprehend even simple instructions. She was equally weak in English and Malayalam to read, and to write. Investigator also visited her home, met her mother and family members.

Keey was 5'2" tall and weighed 52 kilograms and her complexion was dark, face free of pimples, soft smooth skin and free of hair while hands and feet showed the signs of dry skin. She had dark curly hair below the shoulder level. She enjoys normal health except for shifting of knee cap sometimes. For fear of this she avoids vigorous games.

#### 4.1.2 Home Background

a) Physical Environment: House is close to the road, beautiful, big and neatly kept. It is two storeyed building, spacious, well ventilated, furnished with modern facilities for health, hygiene and privacy.

b) Family Constellation: Basically unitary, though grand parents live in the campus. Their presence does influence the family. She prefers her grand parents to parents. "I like to be with my grand parents. If I am at home, my mother keeps shouting at me all the time. So, I don't like to be there" says Keey. She has two brothers, they are both better than her in their studies. Even her younger brother and little cousins make fun of her. When she is provoked by teasing, she gets angry and hurts others. This aggression of hers is often

punished by her mother. Thus the vicious circle of anger → punishment → more anger, → leading to self rejection and guilt.

c) Economic Status: Father is an engineer but now is in Business. Families are basically business people by profession. They hail from upper middle class families. Keey and her mother had never travelled by a public bus. They travel by car or auto-rickshaw. Parents are over protective.

d) Emotional Climate: Parents have great expectations from their children. Keey's failure is often the cause of tensions in the house. Parents attempts to teach her music and dance also were a failure. Mother seems to be over anxious about her future and Keey's limitations irritate and anger her. Emotional stress, tensions, fights or unpleasant scenes at home are all the offshoots of Keey's incapacity to study according to her family expectations. There are quarrels at home among siblings and cousins. Often she is called 'monkey' and 'donkey'. No wonder she rejects and hates her physical appearance.

e) Religious Beliefs And Values: She is a Hindu ezhava. Religious rituals form part of their daily living. The following values respect, obedience, submission and forgiveness are emphasised. The girls are supposed to accept the wrong done to them. She is not encouraged to discuss, question or

clarify. "They are girls, miss. They should be obedient and submissive. Above all there should be modesty in their behaviour." The girls are discouraged to talk and laugh loudly. Her confusing and vague communication added to her suffering as she was often ridiculed by others in the family.

f) Upbringing Style: All her needs clothes, ornaments, good food and others are met. She is expected to help out in the normal home chores because she is a girl. While her brothers are exempted from these Keey enjoys this to studies. "She is better than her mother in running the house," Says her grand mother. She is often the target of scolding because of her inability to measure up to reach parents expectations.

g) Relationships: Children's relationship with parents are cordial, respectful and distant. The communication is minimal and is with reference to studies, duties and other essentials. Keey does not feel very free with her parents. The only way of assertion is withdrawal from an activity that is difficult. She gave up music when she found her mother a better student than her. She gave up dancing when she found difficulty in picking up difficult steps. She wants to play and enjoy the company of her elder brother. But he is reserved. The conversation often between them is fighting. Keey finds difficulty in carrying on a long conversation. The conflicts in the house are often due to Keey. Mother is directly involved in settling children's matters and she often discusses that

with her husband. The influence of family in the origin and development of iBs and EDBs in Keey (Margaret 1990: Karen 1989: Bose 1960: Jubka 1970).

Table 4.1.1 Scholastic Achievement

a) Her performance in School Subjects.

| Subjects      | 1993-94   |           |           | 1994-95   |           |           | Remarks                     |
|---------------|-----------|-----------|-----------|-----------|-----------|-----------|-----------------------------|
|               | 1st<br>50 | 2nd<br>50 | 3rd<br>50 | 1st<br>50 | 2nd<br>50 | 3rd<br>50 |                             |
| Malayalam I   | 20        | 16        | 18        | 20        | 14        | 17        | Shows<br>Slight<br>Progress |
| " II          | 16        | 22        | 21        | 16        | 15        | 17        |                             |
| English I     | 23        | 22        | 20        | 16        | 19        | 22        |                             |
| " II          | 14        | 20        | 20        | 22        | 12        | 18        |                             |
| Hindi -       | 30        | 20        | 32        | 21        | 31        | 16        |                             |
| History )     | 17        | 25        | 14        | 18        | 22        | 22        |                             |
| Geography)    |           |           |           |           |           |           |                             |
| Civics )      |           |           |           |           |           |           |                             |
| Physics )     | 27        | 19        | 26        | 13        | 19        | 15        |                             |
| Chemistry)    |           |           |           |           |           |           |                             |
| Biology )     |           |           |           |           |           |           |                             |
| Mathematics I | 26        | 25        | 28        | 22        | 18        | 22        |                             |
| " II          |           |           |           |           |           | 22        |                             |

b) Co-curricular Activities: She does not take part in dramatics, music, dancing or any other activities in the school or in the class. She is interested in cooking but is not interested in needlework or craft. She does not take part in sports or games. She is not able to write stories or poems. She is weak in English as well as in Malayalam. She has never taken part in quiz or any other co-curricular activities.

#### 4.1.3 Identification Of iBs

In the case of Keey practically all the iBs have a strong hold on her. The strongest being iB No-8 to run away from difficult tasks. The effect of this is seen in many ways, when music was difficult she gave it up, when dance lessons were difficult she gave up that too. The iB No-1 is also quite strong in her, the desire to be loved and accepted. She clings to people who show love and accept her. She loves to be with her grand parents, she likes to be with her class mates who love her, when the investigator showed love and acceptance, she made it a point to visit her regularly. We see that iB No-2 the need to be perfect also plays a role in her withdrawal. She wants to do things perfectly. When she falls short of perfection she seems to withdraw. The iB No-4 wanting to have her ways in everything, iB No.-5 - fear of the painful past repeating and iB No.11 getting upset over others and other's problems are all part of Keey's thinking. She is also affected by iB No-6 that unhappy events are caused by others and other things. She feels that the events like failures are beyond her and would have to continue the self downing, self defeating, self talk. Her belief and demand for justice is the result of iB No-12. Keey feels that people are not just and fair as they pass comments about her dark complexion. These comments upset her. She needs her parents and friends to help her in times of need, and she feels upset if they don't iB No-7, we

need others to help us. Keey also believes iB No-9 that there is always a right and perfect answer to every problem. When Keey does not know the perfect answer she withdraws and does not volunteer to answer in the class. Keey also has iB No-10. She keeps remembering about frightening and painful events. She feels that her teacher's beating and ill treatment are to be frequently remembered. Concentration is difficult for Keey. As she takes the books for study, she keeps thinking about these possible failures and humiliations she went through. She feels that her brother and cousins need to be punished iB No-3. Some people are bad and wicked and they need to be punished. So she hurts them when they call her names.

Keey shows identification with father, mother and teacher in her iBs. Her strongest iB No.-8 is shared by her teachers and mother. Table 4.1.2 above gives an indications of the origin and development of her iBs.



13. CBM.



Table 4.1.2 Origin And Development Of iBs

| iB Nos.                               | Mother | Father | Teacher | Keey | Remarks                    |
|---------------------------------------|--------|--------|---------|------|----------------------------|
| 1. dire need for love                 | ✓      | x      | ✓       | ✓    | KEEY shares the iBs of all |
| 2. dire need for perfection           | ✓      | ✓      | ✓       | ✓    |                            |
| 3. punishing the wicked               | ✓      | x      | ✓       | ✓    |                            |
| 4. having one's way                   | ✓      | ✓      | ✓       | ✓    |                            |
| 5. fear of the past repeating         | ✓      | x      | ✓       | ✓    |                            |
| 6. others as the cause of unhappiness | ✓      | x      | ✓       | ✓    |                            |
| 7. wanting other's help               | ✓      | x      | ✓       | ✓    |                            |
| 8. evading difficulties               | ✓      | x      | ✓       | ✓    |                            |
| 9. looking for perfect solution       | x      | x      | ✓       | ✓    |                            |
| 10. recalls past pains                | ✓      | ✓      | ✓       | ✓    |                            |
| 11. worry about others                | ✓      | x      | x       | ✓    |                            |
| 12. demanding justice                 | ✓      | x      | ✓       | ✓    |                            |

4.1.4 Identification Of Keey's EDBs

a) The result of FIRS: The following fears were noticed in Keey, policeman, making mistakes, facing the public or crowd, snakes, teachers, elders, scolding, punishment. Some of her fears seems to be related to iBs 1 and 2.

b) The Result Of ARS: The situations in which Keey seems to get angry are when, she can't have her ways. She wants to be loved and appreciated. She finds it difficult to accept

negative remarks. She hates herself and these remarks seem to add to her poor self concept and self rejection. She loses her temper whenever others come in her way. Anger often is the result of insecurity and a feeling of rejection from those whom she loves. "I hate myself. I am useless. What a hopeless and useless creature I am." said Keey in one of her interviews. In the above mentioned sentences we see the deep seated rejection of self, inferiority and helplessness. No wonder Keey used to withdraw from others. If she can't love herself who else will love her?

c) The result of ACQ: The situations that provoke anxiety in Keey are when people shout at her and talk angrily, when something is difficult, fear of something bad happening to her, when she can't remember what she had studied. Some of the anxiety provoking situations seem to be related to IB No-5. She has the fear that her past failures may repeat.

d) PSCRS: She experiences negative feelings towards herself in the following situations - When she is questioned in the class, when others crack jokes on her, when she sees others better looking than her. She has not accepted her colour and height. These have been a cause of pain to her. She has a great desire to look more beautiful. She follows suggestions to improve colour and appearance meticulously. She was observed, in the school as well as outside. Interviews with her family members, teachers, peers and self, confirmed the

presence of these iBs as well as her EDBs.

#### 4.1.5 Origin And Development Of EDBs

When did Keey begin to exhibit her EDBs? Some of the EDBs mentioned earlier like backwardness in studies, difficulty in remembering, inferiority complex and stammering appeared after the incident in the K.G. All her family members referred to this regression, fear and withdrawal after her bitter experience in the K.G. What was this bitter experience? When Keey was in upper K.G. The teacher asked her a question and Keey was unable to answer it. The teacher insisted that she answered. She yelled at the child. This made her even more frightened and no words came out of her. Possibly teacher felt threatened and humiliated because of her silence. She was so furious that she slapped her on the face till it bled. When Keey came home that evening her face was swollen and the marks of the finger prints were still on the face. From that day she began to stammer. and she could rarely answer in the class. This incident was narrated by her family, Keey and her class teacher. When she was in pre-primary her family members often frightened her when she acted naughty saying she would be given to the police. This incident was narrated by Keey. "One day a policeman came to our house in his uniform. He was actually our relative. But I thought he had come to catch me. I experienced guilt and fear. I was so frightened that I even developed fever that night." As she narrated this scene one

could observe fear and anxiety on her face and tone. She expressed her fear of police even now. The second incident was narrated only by Keey. She also started bed wetting. This habit too added to her self rejection.

Before these incidents Keey was an average student. In spite of all these events she managed to pass in all the classes with coaching. Her mother lost interest in teaching her. "I felt it is a sheer waste of time to teach her. She did not show the fruit of our labour. I used to lose my patience with her. So my father took her lessons sometimes He too gave up". It is noticed that iB No-8 as part of her family, giving up when things are difficult.

Keey says that her mother often called her 'donkey' and 'monkey'. Her mother too possessed. iBs 2, 4 and 8. You can imagine the pains she experienced through these continual rejections from her family members. She became more repulsive to herself. "I hated myself. Nobody likes me. Why live? I even meditated suicide. What is the use of being such a useless person in this world. I was afraid of death." Said Keey once to the investigator.

In spite of these rejections Keey managed to complete her studies up to the VII class successfully. She learnt by heart and worked hard. Her dire need for love and appreciation prompted her to work hard.

High school is often a traumatic experience for students who learn by heart. The teachers expect the students to find out the answers for themselves. It is more of guided learning rather than spoon feeding. It is also a critical period for most of the students. In spite of all the coaching and tuitions she could not clear her class VIII. When she came to the investigator she was a repeater in class VIII. She showed signs of timidity and withdrawal. As she moved from lower classes to higher classes a steady growth in the symptoms of EDBs was noticed.

#### 4.2.0 Objective 2

To study the relationship between irrational Beliefs (iBs) and Emotionally Disturbed behaviour (EDBs) namely withdrawal in KEEY.

#### 4.2.1 Treatment Of REI

The first individual sessions were used to establish rapport and to study the iBs and EDBs of Keey and their intensity. During these sessions the investigator's acceptance and recognition helped Keey to begin to look at herself positively after a few sessions she stopped stammering. She had plenty of chances to express her negative feelings suppressed for so long. During these sessions she expressed her negative attitude towards herself. "I hate being at home because for one thing or another my mother keeps scolding me. I do not

like myself. The elders and young people alike hate me." She expressed her desire to be an engineer like her brother who is now studying for engineering in Mangalore. From her present performance it looks like a mere fantasy. Her aspirations are far above her real abilities. Keyy was very disturbed and needed understanding of her iBs, EDBs and how to counter these iBs and replace them with rB's. Therefore the latter sessions were used to counter iBs and replace EDBs through RET sessions. These were carried out at two levels. 1. Individual counselling 2. Group counselling sessions. During the individual sessions. RET, REE and REI were given in the course of the counselling. She was given suggestions and sentences to counter iBs and EDBs. These sessions also helped the investigator to evaluate the effect of group sessions on Keyy. Keyy was very regular for all sessions.

The second method of imparting RET was through group sessions. These were used to impart RET- Theory, REE, CBM, and for clarification of iBs, rBs, SWBs and RET. These sessions oriented them for application of RET in daily life.

#### 4.2.2 Glimpses Of Individual Sessions



The investigator is trying to counter one of her strongest iBs, iB No.1. "I must be loved and appreciated by every body."

14. Individual Session

I; "What do you feel if someone does not love you at home?"

K; "I feel sad."

I; "It is okay to feel sad. what are your other feelings."

K; "Every time my parents scold me. I question myself in my mind. Don't they have any other work than to find fault with me? Is it because of my fault that I don't do well in my studies ? I am spending so much of my time in studies what is the use of living? What a terrible thing ? I can't do anything. I am such a useless creature. Such thoughts make me angry. Sometimes I feel very sad. I even hate myself. I am a burden to others. I hate myself so much that I don't take food. I don't talk to others. I hurt my brothers and cousins. Then my parents scold me. Then I feel more angry and I hurt others again. So my mother beats me. I feel like dying. I wanted to take a sleeping dose. But I am afraid of dying."

[No wonder that Keey is so confused and withdrawn. She found it difficult to express her feelings in sentences often they were broken sentences. Sometimes just a few words. She lacked clarity in thinking. When others criticised or found fault with her, it was terrible for Keey. She could not bear it. She felt she must be loved as she is. Continual scolding about her poor performance added to Keey's problem. It caused anger, frustration, disappointment and withdrawal. She refused to eat and even had meditated suicide. We see these in her statements and descriptions of her feelings when scolded or humiliated. We find a number of self defeating patterns of thinking and acting. Her self hate, her self inflicting, her withdrawal all these are the result of her irrational beliefs. She wanted love, acceptance and appreciation from her family members. Her reaction pattern leading to withdrawal is shown

below]

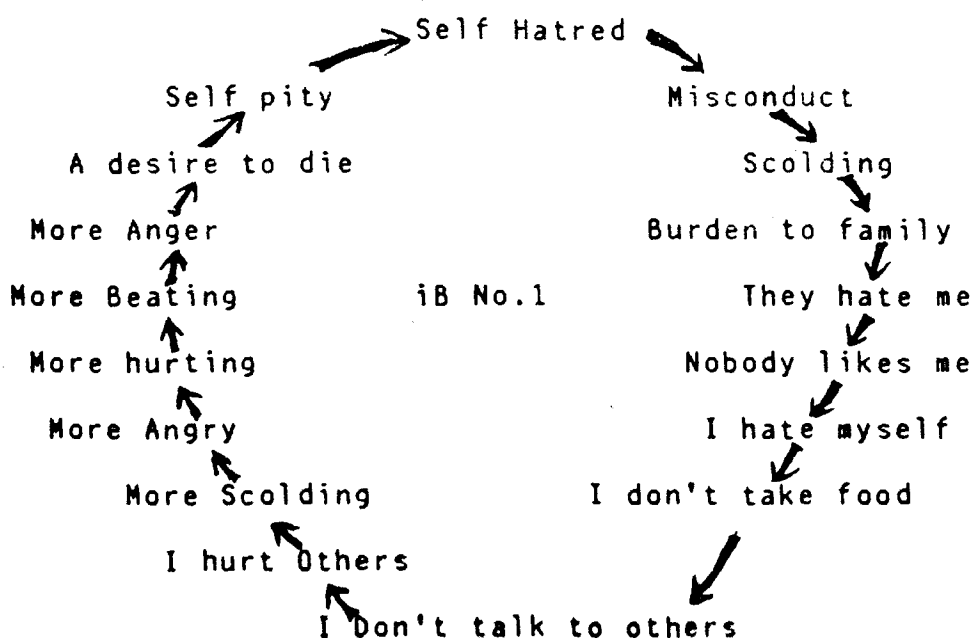


Figure 4.2.1 Vicious Cycle of EDBs In Keey Related To iB No-1

When things don't go the way she wants, she is depressed. She tells herself it is terrible and I can't stand it. We find words like can't, terrible and horrible. These words lead her to self pity and a feeling of uselessness.]

I; "What sentences do you tell yourself that cause you depression and withdrawal?"

K; "I am useless, No one loves me. I am a burden to the family. It is better to die than live like this. I started hating myself. I am so angry. I hurt others. Then my mother beats me. Then I don't like talking to anyone."

I; "The more sorry you felt for yourself the more angry you became. What other things do you tell yourself?"

K; "Why was I born?" It would have been nice if I were not born."



I: "You want everybody to love you. You tell yourself every one must love me, mummy, daddy, brothers, cousins and grand parents. Will you die if some of them didn't love you today? Can't you still live?"

K: "Yes. I could live."

I: "You said a little before that you won't be able to bear. You were able to face rejection from your friends, your cousins, and even parents. You may not get love the way you expect. People are free to express their love to you the way they want."

[Here the investigator leads her to REE. People are free to love or not to love. They are free to accept you or not. They are free to appreciate or not. We cannot force people to love us.]

I: "Can we force others to love us?"

K: "No"

I: "It would be foolish to demand it at this age. How will you face such a situation next time?"

K: "It is painful. But I can face it. I can make others my friends. I can go to those who love me. I don't have to be loved always by others. It is okay, not to be loved by everybody. There are many people who do not get even this much love."

-----  
 1. She seemed to have received an insight into her foolish beliefs. She was also given home assignment to counter her iBs through sentences like, I don't need every body to love me. I am old enough to take care of myself, people are free to be wrong. I am free to be myself.

-----  
 2. She was also asked to note the number of times she experienced anger or hatred and to note down when, where and why. She was asked to keep a daily record. Keey had already attended group sessions on RET. These helped her to see that by changing her beliefs. She can get out of her inferiority complex. She worked hard on self improvement.  
 -----

The block 1 is a suggestion to practice PET and to reinforce the insights Keey had already received.

Block - 2 is more difficult exercise that would help Keey to awareness of the presence of her related iBs leading her to withdrawal.

#### 4.2.3 Stage Fear Of Keey And iB No-2

"I must be perfect in everything I do." Keey suffers from the fear of facing a crowd. She is afraid of making mistakes. This is the result of iB No-2. Since Keey wanted to deal with some of her fears the session of that day moved in that direction:

I; "What are some of your fears?"

K; "I am afraid of acting on a stage. I get scared of facing a crowd. I become very nervous and I even tremble."

I; "What are you afraid of when you are on the stage?"

K; "I am afraid of making mistakes."

I; "What will happen if you make a mistake?"

K; "People will laugh at me."

[It was observed that Keey was often laughed at by her family members when ever she made mistakes. These incidents have caused her anger, self pity and self hatred.]

I; "So what".

K; "What a shame it is to be laughed at by others."

I; "So before you enter the stage you keep telling yourself that it is a shame if I made a mistake. It is a shame if people laugh at me. What are the other things that you tell yourself?"

K; "I can't stand it. It is terrible."

I; "Yes. It is not your mistakes, not people's laughter that make you frightened but what you are telling yourself about their laughter. So if you change your statements or sentences, your fear will disappear. What sentences can you tell yourself to get rid of your stage fears?"

K; "It is alright if I made a mistake. It is okay if they laughed at me."

[The investigator helped Keey to see that her wish to be perfect is causing her fear. Keey also suffered because of her incapacity to do well in the examinations and studies. So the investigator asks her what she had been telling herself about her studies.]

K; "I can't study. I won't be able to study English. It is very difficult for me."

(Keey was given some help in English to overcome her basic difficulties.)

I; "Now you are able to study better. What are you telling yourself now about studies?"

K; "I can study. I can concentrate. English is not so difficult. I am able to do much better than before".

(Investigator has noticed many changes in Keey. She looks more relaxed and cheerful. She has also begun to accept herself.)

I; "What do you tell yourself about you now?"

K; "I am of great worth."

[We see that some changes have taken place in Keey's thinking. Her self hatred has disappeared. The investigator has noticed a change in her manners, dress and her relationships with others. The desire for attention which she showed during the first few months has decreased and she has begun to take responsibility for her life partly.]

-----  
 3. Keey still exhibited nervousness in facing the audiences. REE- in this world nothing is perfect. Our world is an imperfect world. And we are all imperfect human beings. So we all commit mistakes. We can put in more efforts and do our best. Our best will be different from the best of others.  
 -----

Block - 3 investigator is trying to lead Keey from iB to rB.

I; "Who is perfect? No human being is perfect and therefore we all commit mistakes. Who alone is perfect?"

K; "God alone is perfect."

I; "Yes. We are human beings and human beings are imperfect. No one can do anything very perfectly. We keep learning and improving our works and actions every day. So should we run away from difficult works?"

K; "No. We can try even if we made mistakes."

I; "Do you see this change in you?"

K; "Yes. I am able to study better now - I can concentrate better. I am able to remember better now."

I; "Good. (REE)- See how, when you began to think of yourself as capable your abilities are put to use. So you are able to do better now. When you said to yourself that you are useless, hopeless, good for nothing, then you could not do your work well. So you see how your thinking and your beliefs are important in affecting your

behaviour. You are afraid of facing the audience or acting on a stage. This fear is the result of telling something to yourself. I can't do it. I will commit mistakes. I can't stand if people make fun of me. It is terrible if I made mistakes. These sentences of your's made you nervous and frightened. You told me last time that you begin to tremble especially your legs. Suppose you say to yourself sentences like these. It is okay to commit mistakes. I can do better next time. I can try, even if I am not perfect, then you will be able to face audience without becoming so nervous. You may feel a little uneasy. So what are you going to do to get out of your nervousness?" REE was leading KEEY to reality (Ellis 1972; Knaus 1974).

K; "I will tell myself it is okay if I committed mistakes. I can try to improve even if it is not perfect."

-----  
 4.REI- Investigator allowed Keey to go through REI allowing her to experience the audience through fantasy, saying a few sentences in front of them. She started her exercise with a small group at first then a bigger group. She was instructed to inform the investigator when she was uncomfortable. This exercise was repeated a number of times. This was followed by CBM in small groups. Keey was actually prepared with others to perform on the stage before the big audience in the school auditorium. Two suggestions were given to counter her iB No-2. 1. It is okay to make mistakes. 2. I can try new experiences even if I committed mistakes.  
 -----

Block-4 explains REI application on Keey.

#### 4.2.4 Dealing With Her iB No-4

"It is terrible and bad when things don't go the way I want them to go". Observation of Keey had brought to light a tendency to have her way in everything.

I; "What happens when you can't have your ways?"

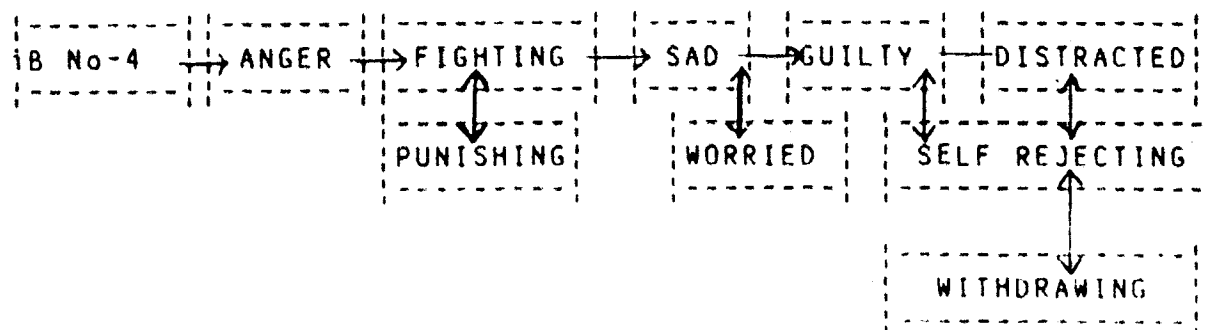
K; "I get very angry -> I fight -> I punish -> then I feel sad -> I can't concentrate -> I feel depressed -> I hate myself -> I reject myself -> I withdraw."

I; "What type of behaviours are these?"

K; "Self defeating behaviours."

-----  
 5. It was interesting to note that group sessions on RET had helped her to show the chain reactions of her behaviour. She had identified her self defeating behaviours. She is beginning to get an insight into the causes of her behaviour problems. In Keey we find a steady progress in her thinking and understanding. She is also applying these in her behaviour. At times one noticed a slight regression from her part and she is able to get out of it. The investigator did support and challenge her as per needs.  
 -----

Block - 5 Keey is already using RET to see the chain reactions



-> leading to  
 (--) Inter relationship

Figure 4.2.2 Impact Of iB No-4 On Keey

Once Keey was able to see the thought processes leading to withdrawal, she was able to counter them. Through a number of counselling sessions both individual and group she was able to reduce and give up many of her iBs and EDBs.

#### 4.3.0 Objective 3

To study the impact of RET in bringing about Positive Changes in Cognitive and Affective Domains by reducing or Replacing iBs' with 'rB's thus reducing or removing withdrawal.

### 4.3.1 Application Of RET

I; "How was the last week ? Any situations that brought out your EBDs?"

K; "Yes burning of the electric iron."

I; "So what was the activating agent A here?"

K; "'A' - burning of iron."

I; "What was the consequence?"

K; "'C' - fear as well as anxiety."

I; "What sentences of your's caused anxiety and fear? These sentences will help us to find out your rBs and iBs.

K; "B - 1. What will my father say? (rB)  
 2. Will he scold me? (rB)  
 3. Will he tell me that I destroy things? (rB)  
 4. I should not spoil things. (iB)  
 5. I should not destroy things. (iB)  
 6. It is terrible if he scolds me. (iB)  
 7. I Can't stand it. (iB)

[The iBs which were responsible for Keey's fear and anxiety were 1 and 2. She does not like to make mistakes and needs a lot of love and acceptance from her family members. Her fear of losing it causes undue anxiety in her. Before the debate Keey was given knowledge about things. Most of the things we use have a span of life. That is why the owners of these objects give us a guarantee. After a period of time these things do get spoiled. They do get worn out. They will need replacement or repair. It is true if we are careful these things may last a little longer.]

I; "Suppose you were careless what would happen? You forgot to switch off the iron when it was hot. So it got burned.

Does this happen with everyone?"

K; "Yes."

I; "If these things happen with everyone is there a need for you to get so upset if something get spoiled while using?"

K; "No. But lately it was repaired when my brother spoiled it. As I was ironing the sparks came out and it got spoiled. It was early morning and it happened before my parents got up. So I was anxious and worried."

I; "What were you worried about?"

K; "Fear of being scolded by my father. I did use RET-Steps. I debated for sometime. I said it is okey if he scolds me. I can face it. When I repeated these sentences a number of times. My fear and anxiety disappeared."

I; "What was the effect of debate on you. So you know how to debate."

K; "My fear and anxiety disappeared?"

She also reported that her father did not scold her when he knew about it. So she felt simply worried about it. Keey is beginning to use RET-Steps in dealing with her life situations in school as well as at home. She said that She has improved a lot in her reactions to others. She feels She is some body even if she was not perfect. She has also accepted her physical appearance and her colour. RET has worked to bring about positive changes in Keey (Wooten and Ray 1993; Maertz and Kim 1973; Bandura, Melntire 1991).

#### 4.3.2 Feedback Sessions

A number of Feed Back sessions were conducted by the investigator during her home visits with her family members



especially mother and grand mother. Mother was interviewed 10 times for continued feedbacks. During the first three sessions she gave a detailed account of Keey's problem areas and her EDBs. These accounts are given in 4.1.2. The other interviews helped the investigator to confirm some of the changes observed in Keey at the cognitive as well as behaviour level (Smith 1983).

Her teacher was interviewed six times. The first two sessions helped the investigator to get an idea of her problems and the intermittent interviews helped the investigator to understand the impact of RET on Keey gradually. The Investigator also interviewed seven peers from her class. These were interviewed 3 times. These feedbacks are given separately. Keey's feedback also is considered.

[The feed backs bring to light a number positive changes in Keey. Her thinking and beliefs have changed, her negative attitude towards herself and others have changed to more positive. These in turn has reduced her iBs and EDBs. Instead we find rB's and SWB's. Though she has not shown much improvement in her studies, her personality has improved. This is evident in her studies, her personality has improved. This is evident from the feedback sessions from her peers, teachers, Family and Keey. These changes are observed in Pre-test, Post-test results of IPT's, counselling sessions as well as investigator's observation of Keey. Her hard work and

perseverance have brought about positive changes in her. She does not exhibit EDBs [like before. She has learnt to face life more realistically].

#### Matrix 4.3.1 Feedbacks.

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             | After RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>a) Investigator: Withdrawn Keey<br/>iBs; -1, 2, 3, 4, 5, 6, 7, 8<br/>9, 10, 11 and 12<br/>EDBs Fear, self hatred,<br/>depression, self rejection,<br/>withdrawal, poor self concept,<br/>sadness, inactive, poor in<br/>studies, stammering, concept<br/>deficiency, upset, nervous,<br/>anxious, head aches.</p>                                                                                                                                                                                                                                                   | <p>Out going and sociable Keey.<br/>Nil BIBD Post test.<br/>SWBs- courageous, self<br/>accepting, cheerful, energetic<br/>fearless, confident, more<br/>fluent, clearer better in<br/>studies, more realistic,<br/>healthier, happier, faces her<br/>strengths and weaknesses.</p>                                                                                                                                                                                                                                                                                                                       |
| <p>b) Peers: "She has fears to<br/>answer. She is with drawn she<br/>has very few friends she<br/>complains about headaches.<br/>She is not good in studies<br/>Does not answer in the class.<br/>Doesn't like to be teased.<br/>She is afraid to face the class<br/>One day when she had to say the<br/>speech she did not say anything.<br/>She disturbs others by talking<br/>She gets worried and upset.<br/>She can't concentrate. She is<br/>sad, she is frightened of<br/>teachers She is afraid of<br/>forgetting. She does not obey<br/>the class leader.</p> | <p>She has more friends now.<br/>She is not sad like before.<br/>She is always smiling, more<br/>sociable, attentive and<br/>She does not complain about<br/>headaches now.<br/>She is a little better in<br/>studies.<br/>Sometimes she answers in the<br/>class.<br/><br/>She doesn't mind being teased<br/>She was able to say the<br/>speech better.<br/>She is less noisy. And she<br/>does not get so upset now.<br/>She can concentrate better<br/>She is not so frightened of<br/>teachers. She is louder and<br/>clearer while answering.<br/>She is more obedient to the<br/>class leader.</p> |
| <p>c) Teacher: She seems to suffer<br/>from inferiority complex. She<br/>does not mix with others. She<br/>looks sad and withdrawn.<br/>Inspite of being a repeater she</p>                                                                                                                                                                                                                                                                                                                                                                                            | <p>She has shown a lot of<br/>progress in social relations.<br/>She is a little better in<br/>her studies but has become<br/>very talkative. Shows</p>                                                                                                                                                                                                                                                                                                                                                                                                                                                   |

Matrix 4.3.1 Feedbacks Continued

is very weak. She cannot remember. She gets very nervous even to read or answer in the class. She has some complexes about her colour and height. She is withdrawn.

d) Family: She spends a lot of time studying but is not seen in results. She doesn't know even how to read properly. No body understands what she is telling. She is good in running the house, but cannot follow instructions. She rejects her height and colour. She is often fighting with her brothers and cousins. She stammers and is nervous. She is weak in all the subjects. She gave up singing and dancing classes. She is afraid of teachers, examinations and gets upset and angry soon. Before she was very submissive. She studies by heart.

d) Keey: I don't like myself. No body loves me. I don't like to be at home. Everyone scolds me. I prefer to be in school. I do not like my appearance. I can't forget my pains. I am worried and upset. All at home make fun of me. I am dark and not good looking. I am so tall. I don't like it. when I failed I felt very sad and wanted to die. I actually wanted to take sleeping dose. I spent much time studying but I forgot everything. When I enter the examination class I am blank. I am afraid of my class teacher. She doesn't like me. I can't concentrate when I sit to study. I keep on worrying about the past.

slight progress in reading skill. Sometimes she answers. Now she does not show any behaviour problems. She has become too bold. Shows improvement in studies too.

She has shown slight progress in reading and studies. Now her conversations make some sense. She can manage the house well. She has accepted her physical appearance. Fighting is less now. Stammering has disappeared. Now she is better in science and mathematics. She showed some interest in singing and dancing. Some things she remembers when she studies. Her fear of teachers and examinations have reduced. she is trying to learn meaningfully. She is becoming arrogant now.

Now I like myself. My grand parents are fond of me. My parents also like me. It is okay to be at home. I don't feel bad about my colour and height. Even if I fail : will not get so upset. I don't think I will be anxious like before. I will say it is okay if I fail. I can remember most of the things I study. I like my teacher and am not scared of her now. I don't have to be loved by all. If I want I can concentrate better and study better. I don't keep worrying like before. I am happy.

4.3.3 Investigator's Participant Observation

In addition to all that is mentioned in the feed back by peers, teachers, family and Keey. The following cognitive and behaviour effects are observed by the investigator. Most of her fears like examinations, committing mistakes, facing the audience, of meeting teachers, of punishment, of scolding and failure have reduced.

REE, REI, CBM and RET-Steps have helped Keey to overcome her self hatred, self rejection withdrawal, fears and poor self concept. Keey was regular for individual and group counselling sessions. For Keey her educational achievement was identified with her acceptance or rejection. Continual comparison with siblings and cousins in educational success did her more harm than good. She had believed that she was a total failure in life because she failed in class VIII. Keey was often running away from the reality through withdrawal. These tendencies have reduced. Her self acceptance, confidence and assertion are signs of positive changes. CBM helped Keey to overcome her stage fears (Goldfried 1978).

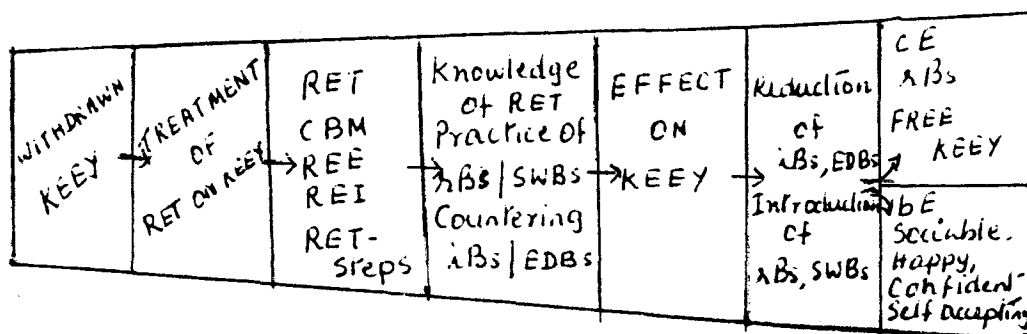


Figure 4.3.1 Model Of RET On Withdrawn Keey

Table 4.3.1 Impact Of RET On Keey

| Before RET<br>Pre - test | After RET<br>Post-test | Differences |
|--------------------------|------------------------|-------------|
| BIRBQ - 198              | 130                    | 68          |
| FIRS - 58                | 40                     | 18          |
| ACQ - 58                 | 25                     | 33          |
| ARS - 63                 | 20                     | 43          |
| PSCRS - 45               | 15                     | 30          |

These differences in the scores of pre-test post-test are significant and trust worthy. The differences in the scores indicates the changes in cognitive level, and these could be responsible for the reduction and removal of EDBs in Keey's life.

#### 4.3.4 Emerging Ground Theory

Knowledge of RET and RET-Theory seemed to have given withdrawn Keey an insight into her iBs responsible for her withdrawal and other EDBs. RET-Steps and REE in turn have shown Keey the relationships that existed between iBs and EDBs (Figure 4.3.1, Table 4.3.1 ) and RET, CBM, PRE and HRS helped Keey in the acceptance of rBs and SWBs and strengthened them, thus removing her withdrawal symptoms. Thus proving the effect of RET in removing or reducing the iBs responsible for withdrawn children.

## CHAPTER V

### ANXIOUS ANN ( CASE STUDY 11)

#### 5.0.0 Identification Of ANN

"Catastrophizing is the cause of most emotional disturbances " (Ellis 1966). "You make mountains out of mole hills and this results in a generalized feeling of distress..... this can lead to depression, guilt, inferiority, anger. Fear sometimes seen as worry, anxiety, phobia or panic"( Ellis 1966).

"Focusing obsessively on a problem often increases it. Worries are caused by treating the matter very seriously not casually"( Fischer 1970).



Ann is a self referred case who exhibited a number of EDB's when she approached the investigator. She showed the symptoms of a disturbed person. Anxiety, loneliness, insecurity of the present and future, feelings of rejection and inability to concentrate were some of the symptoms she exhibited. "I cannot concentrate. I am very lazy. I want to study but when I take the books I feel sleepy or my mind wanders. When I don't study my mother is very upset and I feel bad about it" said Ann.

ANN  
She visited the investigator regularly.

### 5.1.0 Objective 1

To identify the origin and development of irrational Beliefs (iBs) responsible for Emotionally Disturbed Behaviour (EDB) namely Anxiety in High School Girl ANN through knowledge of RET.

### 5.1.1 Family And Environment

1. Family Constellation: It is a unitary family. Father is no more. children live with their mother.

a) Mother: She became a widow at the age of 30. Now she is 42 years old. After the death of her husband she lived in anxiety and fear. She settled two daughters. One was a success while the 2nd one is separated from her husband and is at home. Mother feels guilty about it for she had forced this marriage on her. She is too idealistic and has great expectations for her children.

b) Sisters: Ann's sisters are married. They are graduates. Second sister is at home. Her presence at home is a cause of shame, pain and tension to all the family members. This sister nags Ann often. Ann does not get along with her. The eldest sister is well settled and her husband is a great support to the family. Ann is fond of her eldest sister but feels sad because she doesn't talk much to her.

c) Brother: He is very reserved and talks very little

to Ann. She admires and loves him. She feels rejected by him also because he does not speak much to her. Ann is much younger than other children at home. Therefore in all important conversations she is left out. This is interpreted by Ann as rejection.

d) Ann: Ann feels that there is no one in the family who can understand her feelings. She is the youngest child in the family. According to her family members, the changes in her behaviour were noticed gradually. Ann at this moment exhibited a number of emotionally disturbed behaviours.

## 2) Home Environment

a) Religious Climate:-The family members are all unhappy and disturbed. The family belongs to Marthomite Christian denomination. The mother is idealistic in her values and hence 'should' and 'must' seemed to be part of her conversation. Possible this 'masturbating' and 'Catastrophizing' could be the cause of so much tension and unpleasantness in the family. **Probably** Ann has learnt this anxiety from her mother.

b) Physical: The house is well furnished, clean, artistic, welcoming and well maintained. The ground floor is given for rent while the family lives on the first floor. Rooms are big and spacious. There are two big bed rooms, kitchen, store room, dining room cum visitor's room which is big. The house was well furnished - tiled polished floors, expensive window curtains.



**c) Emotional Climate:** It is very unsatisfactory at this point of time. The family is facing a lot of tension. The members are upset and disturbed about the second sister's separation from her husband, the case with the tenant, the son's absence, Ann's lack of interest in studies and her rebellious nature. Mother's continuous worry and anxiety, her insecurity of the present and future, her crying and grumbling about all the misfortunes she is facing, speak of a poor emotional climate. No one seems to be happy in that house. Ann is sensitive and perceptive of all that is happening even though she retaliates while being corrected, she too is upset about her sister's plight. Ann feels she is a burden in the family, she feels others are loved and cared for more than her. "She cries easily, does not mix with us. She spends most of her time in front of the T.V", said her sister. Ann's frustrations seem to turn into rebellion as she is helpless to change the situation.

**d) Education:** Mother is only S.S.L.C. The elder sisters are graduates. Her brother is doing his graduation. Mother gives a lot of importance to children's education. All that she expects of Ann is to study well.

**e) Economic Background:** Financially they are well to do. The income from the property as well as the rent is more than sufficient for their living. They have all the modern gadgets. Tuitions are arranged to help her to study better.

f) Psychological data of Ann Intelligence Weschler's

test of intelligence : I.Q. 105

**Bell's Adjustment Inventory (Personality):**

- a. Home - Unsatisfactory
- b. Health - unsatisfactory
- c. Social- Very retiring
- d. Emotional- Very unsatisfactory.

Table 5.1.1 Scholastic Achievement

| CLASS VIII  |                |                |                | CLASS IX       |                |                |
|-------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Subject     | 1st Term<br>50 | 2nd Term<br>50 | 3rd Term<br>50 | 1st Term<br>50 | 2nd Term<br>50 | 3rd Term<br>50 |
| Malayalam I | 29             | 27             | 32             | 30             | 33             | 27             |
| " II        | 24             | 21             | 22             | 27             | 23             | 25             |
| English I   | 33             | 31             | 33             | 30             | 25             | 35             |
| " II        | 26             | 29             | 33             | 30             | 35             | 28             |
| Hindi -     | 28             | 27             | 25             | 21             | 23             | 22             |
| History )   |                |                |                | 42             | 23             | 18             |
| Geography ) | 28             | 20             | 24             | 18             | 26             | 25             |
| Physics )   |                |                |                |                | 20             | 29             |
| Chemistry } | 36             | 18             | 24             | 24             | 20             | 25             |
| Biology )   |                |                |                |                | 23             | 16             |
| Maths - I ) | 26             | 31             | 26             | 32             | 31             | 38             |
| Maths - II) |                |                |                |                | 19             | 30             |

Co-curricular Activities: Ann did not volunteer to take part in any of the activities or competitions organised in the school. She was frightened and nervous. She did not have an

opportunity to enter the school stage.

### 5.2.0 Origin And Development Of iBs And EDBs

From the feed backs received from her family members, it seems that origin and development of iBs had begun at a very early age, when she began to exhibit her emotionally disturbed behaviour patterns.

"Ann was a cheerful, happy and chirpy child. At the age of two, after the death of her father she turned into herself gradually over the years. She talks very little with us as well as with the visitors who come home"; said her sister. During the first house visits it was observed by the investigator that Ann was not at ease in her house. She seemed to be more free with the investigator and her class mates than with her family members.

Table 5.2.1 Inter Relationship Of iBs With Parents And Teachers

| iBs                 | Family | Teachers | Ann | Remarks                                                                                                    |
|---------------------|--------|----------|-----|------------------------------------------------------------------------------------------------------------|
| 1. need for love    | √      | √        | √   | All the iBs exhibit are the iBs that are part of her family. Some of these are exhibited by teachers also. |
| 2. "for perfection  | √      | √        | √   |                                                                                                            |
| 3.punishing wicked  | √      | √        | √   |                                                                                                            |
| 4.having one's way  | √      | √        | √   |                                                                                                            |
| 5.fear of past      | √      | x        | √   |                                                                                                            |
| 6.others cause pain | √      | √        | √   |                                                                                                            |
| 7.need others help  | √      | x        | √   |                                                                                                            |
| 8 evade difficulty  | √      | √        | √   |                                                                                                            |
| 9.perfect solution  | √      | x        | √   |                                                                                                            |
| 10.recalls past     | √      | x        | √   |                                                                                                            |
| 11.                 | x      |          | x   |                                                                                                            |
| 12.                 | x      |          | x   |                                                                                                            |

Table 5.2.1 indicate the following iBs shared by family, teachers and Ann 1, 2, 3, 4, 6 and 8. Teacher's influence could have affirmed these iBs she has learnt at home. Though 11 and 12 are part of teachers' iB's it is not accepted by Ann. So their influence on her could be less than that of her family.

Matrix 5.2.1 Ann's EDBs

| IPTs                                                         | Descriptions                                                                                                                                                                                                                                                                     |
|--------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| a) ACQ<br>Anxiety Causing Situations.                        | When called by authority figures, when facing difficult situations, facing important persons, when scolded or corrected, facing failures, working for a long time, fear of calamities, painful past, facing audience examinations, parents meeting with dangers, when stared at. |
| b) ARS<br>Anger inducing situations and expression of anger. | When shouted at, scolded or criticised, seeing those whom she dislikes, when disturbed, teased, or when some one comes in the way, while losing a game, when she can't have her way .                                                                                            |
| c) FIRS<br>Fear inducing situations                          | Crossing bridges, getting sick, fire, insects, crawling animals, worms, rats, fireworks, being buried alive, burnt alive, funeral, dead person (corpse) facing crowd, darkness, men, being stared at, snakes, dogs, cats, height, thunder and lightning.                         |
| d) PSCRS<br>She considers herself inferior to others         | Considers others better than self, no participation in class or school activities, avoids crowd for fear of being laughed at, avoids being noticed, a feeling of incapacity, day dreaming rejects her physical appearance and she hates herself.                                 |

Matrix 5.2.1 gives us the result of IPTs.

We get a glimpse of her EDBs. Her anxiety may be the result of her iBs (Lohr, Bonge 1981). Her social disability could also be the result of her iBs (Lohr, Bonge, Jones 1983).

Matrix 5.2.2 gives similarities in feed-backs from different sources. A clear picture of her behaviour in the class was received from the feedback. Lack of self discipline, interest in studies, restlessness, evading difficult tasks, disobedience, and evading responsibilities were part of Ann. Some of her behaviour patterns seems to reflect her poor self concept and fear of rejection. She is more at home in the class than at home. Ann enjoys the company of her friends and cracks jokes but she does not share her problems with them. They are not aware of her emotional life.

### 5.1.3 Investigator's Observations

When Ann approached the investigator she was confused, upset, unhappy, frightened, anxious, self rejecting and self hating. She considered herself unwanted, a burden to the family and was lonely. Home was a place of pain. She felt nobody really cared for her or made an effort to understand her world of dreams and frustrations. Family considered and treated her like a child. The age difference between her and other siblings made communication difficult for her. Her efforts to join the family in their conversations met with

ridicule or scolding. "Now stop talking and go to study. You go to the other room. This conversation is not meant for you. We are discussing important matters." Such remarks from family members put her off. And yet she could hear their conversations. Their desire to keep the secrets away from her added to her feelings of rejection. Her only joy was to watch the T.V. That too was forbidden to her. How could she not get upset? most of the time she was told to go and study.

She with her limited knowledge interpreted the reactions of the family members as rejection. Family members too suffered from number of iBs and these in turn demanded much from Ann than she could meet with. Therefore there was a conflict within her. Every time she failed to meet the family expectation she suffered from inferiority complex, guilt and self rejection.

Ann cried very often when she spoke about her pains, her incapacity to meet the needs, her inability to concentrate, to study and even remember. At times she reacted to these by shouting back at her mother or sister. Since others showed greater respect to their mother Ann's behaviour upset her and brought tears. Every time her mother cried Ann felt more guilty, and considered herself unworthy or even bad. She even attributed the cause of pain to herself. Ann found it difficult to see something good or beautiful in herself. She continuously suffered from anxiety and loneliness.

Matrix 5.2.2 Feedbacks Before The Treatment Of RET

| Family                                                                                                                                                                                                                                                                                                                                                                                                    | Ann                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                   | Teachers                                                                                                                                                                                                                                                                                                                                                                                                                                                              | Peers                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>"Very disobedient, stubborn, does not respect elders and does not study. She always gives back answers when we tell her to study. Most of the time she is in front of the T.V. It is very difficult to get her to study. She cries easily and fights with everyone. She does not mix with others. She often keeps herself aloof. She tells us nobody loves me. We don't know how to deal with her"</p> | <p>"I do not have any interest in learning. I lack concentration and am lazy. I find myself helpless when I sit to study. I am stubborn, often hurt the feelings of my mother. I worry about many things, I am lonely, nobody likes me at home, nobody talks to me. I reject and hate myself. I have no one to whom I can talk. I wish someone understood me. I feel I am a burden to family members, I feel angry with them. I don't obey them. I like to watch T. V. and when I watch it my mother scolds me. Then I don't feel like studying".</p> | <p>"Ann is very restless and distracted in the class. She is often distracted in the class. She distracts others. she is very withdrawn and does not show any initiative nor volunteer for any thing. She is just an average student. She does not create other problems in the class. She seems to be lazy and careless. She comes to class without studying. She evades difficult tasks or assignments. At times she copies the home work from other students".</p> | <p>"Ann is restless and funny and enjoys jokes. She is not so good in studies. She disturbe others when they study and copies home work. She gets scolding from teachers. She does not answer in the class. She hides her feelings, does not participate in school activities, lacks self confidence and discipline. She cries easily. In the absence of teachers she cracks jokes and disturb others and disobeys the leader. She avoids difficult work. She also avoids fearful situations. She obeys teachers. She does not volunteer for any work."</p> |

### 5.2.0 Objective 2

To study the relationship between irrational Beliefs (iBs) and Emotionally Disturbed behaviour (EDB) namely anxiety in ANN.

### 5.3.1 Treatment Of RET

Ann has received treatment of RET through individual as well as group counselling sessions. Through group counselling sessions she received RET-Theory, REE, REI and CBM. In all she received 30 individual sessions and 20 group sessions. The pre-test, post-tests were given outside the counselling sessions. Glimpses of the individual sessions are given.

### 5.3.2 Individual Counselling Sessions

iB No.-1 -"I must be loved and accepted by every body."

I; "What happens if your family members do not express love to you all the time?"

A; "I get upset, angry, sad and keep worrying about it. Then I cannot concentrate in my studies."

I; "What do you tell yourself about the event?"

A; "How sad, why should they scold me every time?" Nobody loves me, nobody cares for me, poor me, why was I born? What a pity? I wish I was not born. Then I don't feel like obeying anyone."

I; "Does your mother pass remarks like these to you? You never obey, you give back answers, no respect for elders. When we were children we never spoke to our parents like this. Your sisters never spoke to me like this. You are very lazy. What do you feel when you hear such comments?"



A; "They shouldn't scold me always. It is terrible to hear scolding. They scold me because they don't love me. I can't bear it."

-----  
 1. We find the typical style of working into anger, anxiety, depression or withdrawal. Poor me, no one cares for me. I can't stand it. They shouldn't. It is terrible. Though Ann is aware of her failures and reactions, she is not able to see the love of her mother in her corrections. Possible the approach of corrections and frequency need improvement.  
 -----

I; "But your mother is not telling a falsehood. What she is telling you are facts of life. Then why do you get so upset? Why don't you accept these as truths?"

A; "All these are true but they should not shout."

I; "Why not? (REE) They are free to be wrong. They are free to say the way they like. Though you would prefer them to say these facts more lovingly or gently. It is not mummy's or other's correction that is upsetting you. You know they are facts. But what you are telling yourself about these corrections."

A; "I don't like to hear that I am bad. I get angry. When I hear that. I feel very bad."

[Here we notice that Ann has difficulty to get the point the investigator is trying to get across. She seems to insist that it is their saying that makes her angry and sad].

I; "Do you become bad because some one called you bad.(REE) do you become a donkey if some one called you donkey? No. You remain Ann no matter what I call you. If I call you African or Japanese do you become them? No. you remain an Indian. It is foolish to think that way. So, their actions or words do not really cause us anger or sadness. But what you tell about their actions or words to yourself."

A; "But when I hear their scolding, I feel I am not loved. They don't like me. I must be a burden to them."

I; "So, you want their love and approval all the time. You

want them to be sweet, gentle and kind to you always. You do not want others to point out your mistakes. Do you think this is possible in life?"

A; "No."

I; "Then why do you want to live in an unreal world? In doing so you are creating **big problems** Don't you want to be the master of your life?"

A; "Yes,"

I; "But you have made others the masters of your life. They are free to be polite or impolite, free to be right or wrong, free to be angry or calm. Their actions are ruling your feelings."

[ At the end of the session Ann seemed to be still upset and confused. She finds it difficult to accept the fact that what she tells about the events causes her pain than the event. She strongly believes she needs others love, others and other things are responsible for her pain]

-----  
 2. Ann has a very poor self concept. She defies her mother and sister and is sick of their continual corrections. The family accepts her good behaviour and rejects her mistakes and faults. Every time she falters she feels rejected by the family, for her failures and mistakes of hers are considered synonymous to her. So, her self rejection, her poor self concept, feeling of uselessness and helplessness is often confirmed by the shouting and nagging she receives for slightest mistakes. She will need time to differentiate herself from her acts. The investigator enabled her to see that she is greater than her acts.  
 -----

("Just because you disobeyed or did a wrong action you do not become bad. Just as a good action does not make you good: We are people who are capable of doing good or bad actions. We are not mere actions. We are precious because we are human beings and are alive." Her inferiority feelings are deep

rooted. It will take a number of sessions before she will be able to see her trueself.]

I; "What happened to you when mummy and chachi (sister) didn't love you the way you wanted them to?"

A; "I felt sad and asked myself why are they scolding me? May be I am useless, May be they don't like me. Then I feel sorry for myself (self pity). I feel so sad. I said to myself 'Poor me'.

I; "What was the result of such thinking?"

A; "I lacked concentration. This led to poor performance and this in turn affected the marks. I got poor marks."

I; (REE) "Investigator shows Ann how her choices are self defeating."

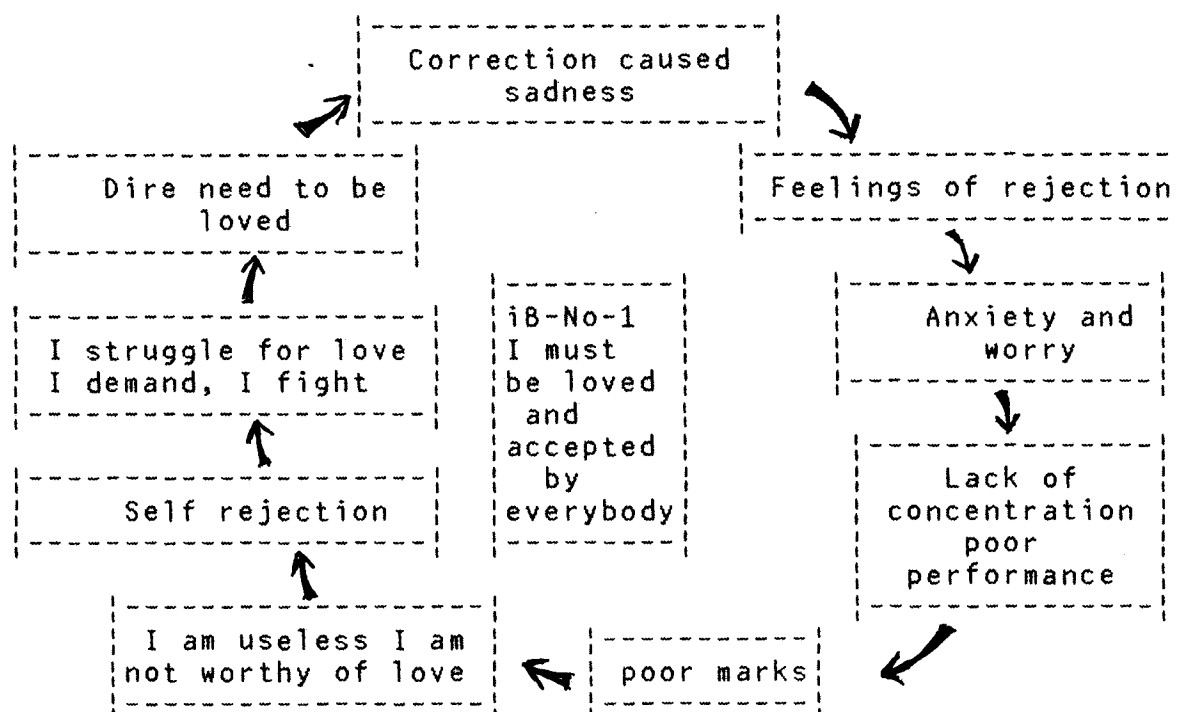


Figure 5.3.1 Vicious Cycle of the Effect iB No.-1 in Ann.

Having helped her to see the vicious cycle caused due to

her iB No-1. Ann was able to counter this and reduce it gradually. A number of sessions were needed before she could accept countering. Ann also had a number of group sessions as well.

Dealing with Stage Fear iB No's 2 and 1.

- I; "What would you like to talk about?"
- A: "Stage fear. When I enter the stage I start trembling."
- I; "What do you tell yourself before entering the stage?"
- A: "How will I speak in front of so many? What will happen suppose I make a mistake?"
- I; "What happens if you make a mistake?"
- A: "They will laugh at me and it is terrible."
- I; "So what?"
- A: "How can I face it? I won't be able to stand it. It is a shame. I can't face such a shame."

-----

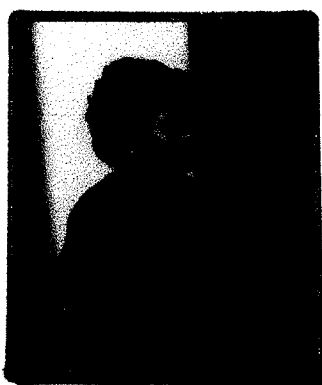
3. She keeps telling herself 'I can't face the crowd. If I make mistakes it is terrible. It is a shame to make mistakes'. By saying these can't, terrible. Ann is making herself anxious. And this anxiety makes her tremble when she enters the stage.

-----

Ann was already getting chances in the small group sessions to face them and speak a few sentences. REI Ann was allowed to go through REI. To imagine the stage and to face the audience starting with 10 and allowing her to act before them. Gradually the number was increased to 20,30,40,60 and 100. She could face the audience of 100 without fear. With a number of sessions Ann faced more than 2000 people for a

function in reality. Her stage fear was overcome through CBM (Elliot, Charles, Adams, Russel, Hedge, Gordon 1992).

A few sentences to counter her stage fear were given to Ann to say to herself and to write it everyday for a period of



16. Counselling  
Session.

time. 1. I don't care if others laughed at me. 2. I am going to make others laugh. Ann is opening herself to this new thinking. She is slowly accepting the reality and is beginning to see that it is okay if sometimes she is ignored or rejected. Helping Ann to face the regression and to move ahead.

I: "Ann you seemed to be disturbed about something. What is your problem?. In life we can't always have our ways. To insist on having one's ways always is foolish". "What happened to you when you clung to your ways?" (iB No.-4)

A: "I felt sad, angry, anxious and afraid.. I lacked concentration. I felt guilty for disobeying. Again the feeling I am bad came to mind. I started becoming touchy and highly emotional."

I: "what do you call such behaviours?"

A: "Self defeating behaviours (SDBs).

I: "How did you feel when you chose SDBs?"

A: "I felt sad, guilty and hopeless."

I: "You chose SDBs and SDBs thinking and hoping you would be happier, Instead what did you feel?"

Here the investigator leads her to REE.

By clinging stubbornly to unrealistic expectations we

create problems for ourselves. She was given a few sentences to counter her iBs 1. There is no need for me to have my ways always 2. I need to choose what is best for me.

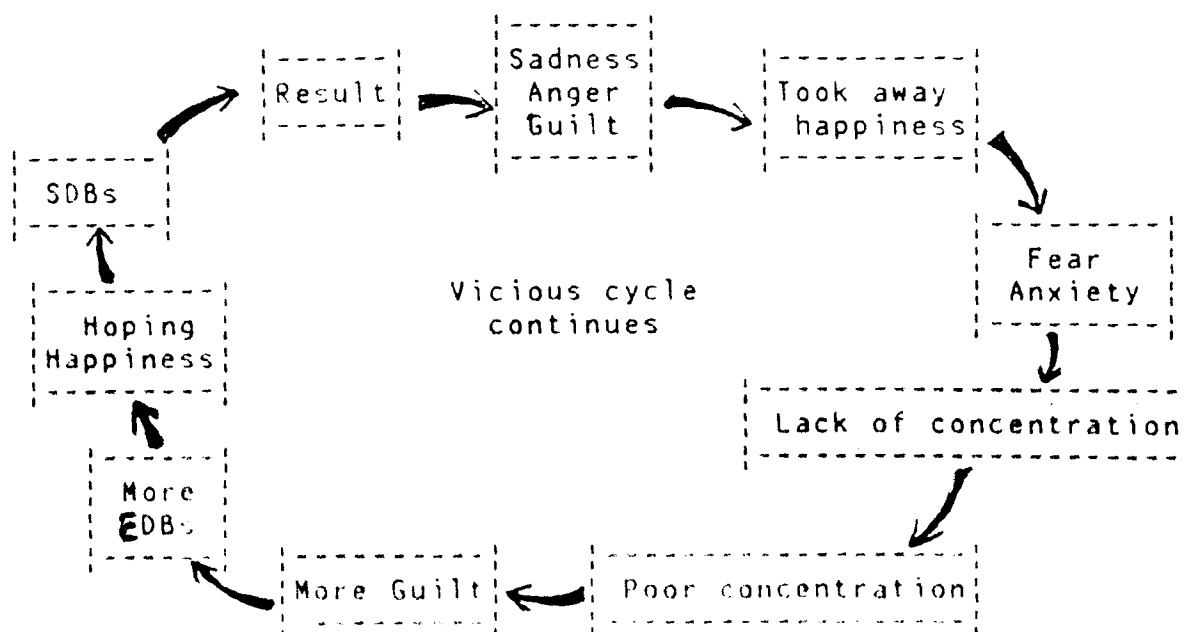


Figure 5.3.2 Choice Of SDBs And Its Effect On Ann.

A: "I keep postponing my works."

2. Ann had regressed in her behaviour at home. She had started giving back answers to her sister who was often correcting her. This conflict with her was affecting her adversely in her studies. She found difficulty in concentration. She began to experience a feeling of helplessness, self pity, guilt and self rejection. When she spoke about these she was in tears. One could feel the struggle she had been going through within her. Her iBs were not radically uprooted from her beliefs and thinking. She had experienced for sometime the joy and freedom from these. The fear of backsliding was causing her much pain. and disturbance, than real regression. Ann was helped to see that such regressions are bound to happen. Her 14 years of beliefs cannot be uprooted in a month's time.

[Ann looked relieved and took a decision to try again. Adolescence is a stage when he/she struggles with strong emotions in the opposite direction . They need some one gentle and understanding. To help them to accept this reality in their lives. RET therapists not only comfort the subjects but also encourages and support them.]

I; "How are you progressing now?"

A: "I still can't feel very much better, when I can't have my way. I get angry and react. When things are difficult, I have a tendency to give up."

During this session two iBs were dealt 4 and 8. It is terrible and bad when things don't go the way I want them to go (4). When we have some difficult things to be done, it is much easier to run away from them than to face them."

[The need for discipline and perseverance is emphasised.]

I; "What do we call such behaviour ?"

A: "Self winning behaviour (SWBs)."

[REE] Remember others have freedom to tell me whatever they want. I don't have to get upset about it. I also don't have to have my ways always. When we live in a society, home, class, school we adjust to others desires sometimes. We exchange, we give up our ways if it is not helpful to us. We do what others say if that is better for us".

-----  
4. Ann was encouraged to accept suggestions that are useful, and to reject the rest. She showed greater desire to improve herself and to progress. She has already tasted success and peace of mind. Regression has taken away her peace of mind and joy. She was given suggestions to counter her iB No.-8 as well and not to runaway when things are difficult. She was encouraged to counter these through auto suggestions. And to keep track of her daily failures and successes. Deeply rooted habits and beliefs cannot be rooted out easily.  
-----

[It takes time, discipline and planning along with perseverance are essential to unlearning the wrong habits and to replace them with right habits.]

### 5.3.3 Group Counselling Sessions

Twenty group counselling sessions were organised for the individual cases. Ann was one of those who was regular and punctual for all the sessions. During these sessions they received knowledge on RET and the different steps namely ABCDE of countering iBs. At times these were divided into smaller groups for better interaction and clarification of their ideas and beliefs. She also built up friendly relations within the group.

a) RET Theory: included meaning of RET, iBs, rBs, SDBs, EDBs and SWBs. They were helped to see the relationships between their iBs and EDBs. These helped to increase the effect of individual counselling. She the investigator could clarify their understanding about theory and the ways of practicing it in their lives.



b) REE was given to help the cases to see to the importance of rational living. How, by choosing to opt for rational life much of their sufferings, fears, anxieties and SDBs can be overcome. Importance of discipline, practice and perseverance too was emphasised (Haaga, David, Gerald 1991) (Kendell, Phillip 1992).

c) ABCDEs of RET Was practiced in group sessions as well as for individual sessions. In groups EDBs were given. The cases were analysed by the small groups and tried to find these steps and use it for countering iBs and EDBs (Cohen, Ellis 1992; Knaus and Borker 1975; Ellis 1982).

d) CBM This was practiced during a few group sessions by helping each one of them to come to the front and report their feelings, their answers, to the questions, singing, dancing and acting. This small group was given two weeks intense training for an hour every day as a preparation for Onam festival. Since all these cases had no chance of being on the stage, ever since they entered the middle school they had stage fear. Ann wanted to be on the stage for other functions as well (Kendell, Philip 1992; Perris, Carlo 1993).

Group counselling sessions helped Ann to get out of her shell and interact with others in a more effective manner. Since this group was small they were able to face one another in a less threatening manner. Ann became more social, active

out going and entertaining in the small group. All of them were comfortable in the presence of others. This experience helped them to react and respond better in their own classes and school situation. The encouragement and support she received from this small group helped her to venture into the outer world. She joined the school band, won prize for the school and went with the band to Lakshadeev.

#### 5.4.0 Objective 3

To study the impact of RET in bringing about positive changes in cognitive and Affective Domains by reducing or replacing iBs with rB's thus reducing or removing Anxiety.

#### 5.4.1 Impact Of RET

The impact of RET on Ann is seen in her thinking in post-test results, feed back sessions from her family, teachers, peers and Ann. We also see the changes in her behaviour through feed backs and observations by the investigator. Ann has shown progress in many ways in her studies, in her relationships with others, at home and above all her acceptance of herself as she really is ABCDE of RET enhanced her progress (Cohen, Elliot 1992).

The difference between Pre-test, Post-test results show that Ann's EDBs and iBs have decreased to a great extent. Positive behaviour modification is also noticed in the

feedbacks received from Family, teachers, peers, Ann and the PO of the investigator.

Table - 5.4.1 Pre-test, Post Test Results Of IPTs

| IPTs  | Pre-test scores                       | Post-test scores | Difference in score  |
|-------|---------------------------------------|------------------|----------------------|
| BIBD  | iB No's, 1<br>2,3,4,5, 6<br>7,8,9,10. | iB No-1          | The rest were absent |
| BIRBQ | 156                                   | 115              | 41 less              |
| ARS   | 59                                    | 33               | 29 less              |
| FIRS  | 102                                   | 69               | 33 less              |
| ACQ   | 72                                    | 50               | 22 less              |
| PSCRS | 49                                    | 29               | 20 less              |
|       | Pre-test                              | Post-test        |                      |

Bell's adjustment - Inventory.

|                             |                          |
|-----------------------------|--------------------------|
| Home - Unsatisfactory       | Home-Average             |
| Health- Unsatisfactory      | Health-Good              |
| Social-V. Retiring          | Social-Average           |
| Emotional-V. Unsatisfactory | Emotional-Unsatisfactory |
| Group- V. Unsatisfactory    | Group-Average.           |

Matrix 5.4.1 Process Model Of RET On Anxious ANN

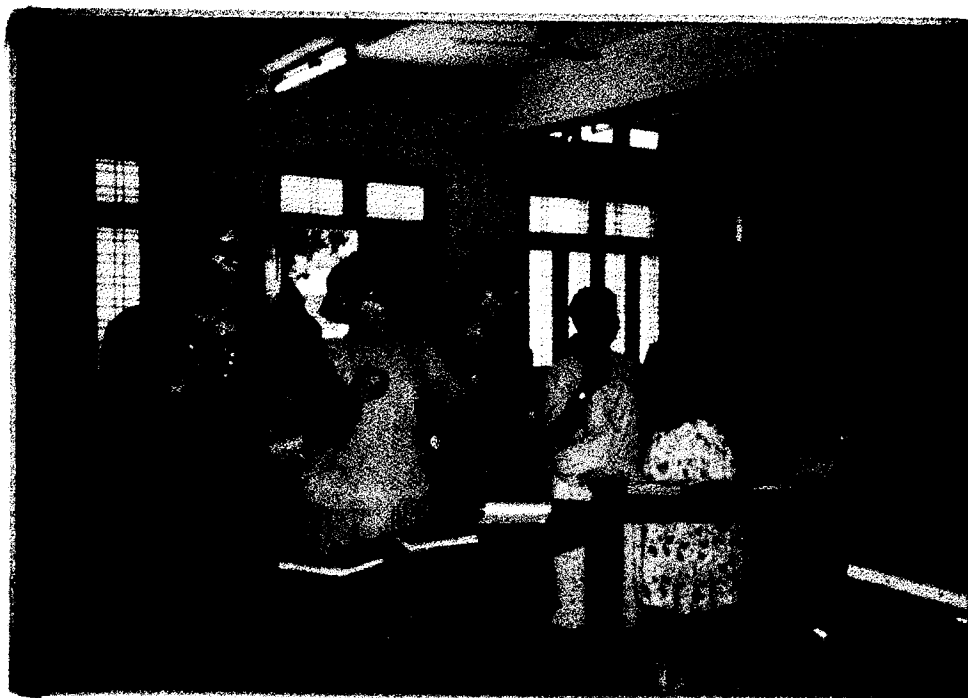
| EDBs                                                                                                                             | RET Treatment                                                                                     | Effect Of RET                                                                                                                                                                                         |
|----------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| Anxiety, fears,<br>Poor Self Concept,<br>No. Concentration,<br>Anger, evading<br>difficult tasks<br>Unsatisfactory<br>adjustment | Counselling<br>individual and<br>group sessions<br>RET, RET STEPS,<br>REE, REI, CBM,<br>PRE, HRS. | Reduction of iBs and<br>EDBs. And<br>introduction of rBs<br>and SWBs. Less<br>Anxiety, less fears,<br>better self concept,<br>adjustment, calm,<br>happy, better<br>involvement and<br>concentration. |

Matrix 5.4.2 Feedbacks Before And After RET

| -----<br>Before RET<br>-----                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | -----<br>After RET<br>-----                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>a) <b>Family:</b> Ann is very disobedient. She is stubborn. She does not respect elders. She gives back answers. Often she is in front of the T.V. It is difficult to get her to study. She cries easily. She fights with everyone. She does not mix with others. She keeps aloof. She tells us nobody loves <u>her</u> in this house.</p>                                                                                                                                                                          | <p>I do not know how to thank you miss. She is changed a lot. She is more obedient. She is loving and more flexible. She obeys most of the times. She even consoles me. She has more interest in studies and watches T. V. rarely. She is more cheerful and happy, rarely fights with anyone. She shares with us and even shows concern for us she says her brother and eldest chachi (sister) love her much.</p>                                                                                         |
| <p>b) <b>Teacher:</b> Ann is very restless and distracted in the class. She often distracts others and is withdrawn, does not participate or volunteer for anything. She is just an average student. She is also lazy and careless and comes to class without studying. She evades difficult tasks and assignments.</p>                                                                                                                                                                                                | <p>She is not so restless and distracted now. She doesn't distract others much. She shows more interest in studies, volunteers for school activities, shows slight improvement in studies. She is more careful now and is making efforts to improve. She answers in the class more frequently. She often does her home work now.</p>                                                                                                                                                                      |
| <p>c) <b>Peers:</b> Ann is restless, funny and enjoys jokes. She is not so good in studies. She disturbs others when they study and copies home work. She does not answer in the class and evades works. Avoids activities and does not participate. She hides her feelings, lacks self confidence and discipline she cries easily. In the absence of teachers she cracks jokes and disobey the leader. She avoids difficult tasks and avoids fearful situation. She does not volunteer for anything in the class.</p> | <p>She is less restless, and is really funny and entertains us. She is better in studies She disturbs less and only sometimes she copies home work. She answers often in the class. She participates sometimes. She has joined the school band. She is more confident and disciplined now. She is more cheerful, outgoing and seems to enjoy life. She obeys the leader better though she still cracks jokes at times. She can laugh at her mistakes and volunteers sometimes for works in the class.</p> |

Matrix 5.4.2 Feedbaks Before And After RET Continued.

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           | After RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>d) Ann: I do not have any interest in learning. I cannot concentrate. I am lazy and find myself helpless when I sit to study. I am stubborn and often hurt my mother's feelings. I worry about many things. I am lonely nobody talks to me. I reject and hate myself. I have no one to whom I can talk. I wish someone understood me. I feel I am a burden to my family. I am angry with them. I don't listen to them. I like to watch T.V. and when I am scolded I don't feel like studying.</p> | <p>Many changes have taken place in me. I am interested in studies. I can concentrate. I can study when I want to. My mother says I have changed. I am no more bad says my mother. I do not worry about the past. I accept myself and like me. I am happy. I feel now that my family too loves me. I can share better with my mother. I have gained more faith in God and me. I feel at home in our house and school. I don't get angry so easily. I can take corrections. My iBs and EDBs have reduced.</p> |



17. Ann in the Group Session.

#### 5.4.2 Investigator's Participant Observation

Ann has changed very much from what she was and is now.- She is no more worried, anxious, upset, frightened or crying. Her attitudes to self, others, God and things have changed over this period slowly but steadily. She has not only accepted herself, but she has also discovered some of her potentialities and is proud to exhibit them. She has moved from very retiring to a sociable, loving and outgoing person. At times in the beginning Ann did show tendencies of regression. But her success, achievement, encouragement and approval received from peers, investigator, family and teachers have improved her self image. She has learnt to look out rather than to turn in. She is not only happy now but also spreads this happiness around her peers and friends, (Kendel, Phillip 1992). The feedbacks from the teachers who were with Ann at Lakshadev stated that her presence was a blessing because she could cheer up those who were down with home sickness "Oh - I sent Ann to all those who were depressed and homesick. She could entertain and cheer up all of them. She is really a joyful person," said that teacher. Ann also was one of those who received the prize for her best conduct and behaviour at Lakshadev. "She was responsible and accountable and carried out her duties well," said another teacher; who accompanied then to Lakshdeev. RET and CBM has brought about positive changes in Anxious Ann. (Kendel, Phillip 1992)

Rational Emotive therapy seems to have been effective in bringing about positive changes in Anxious Ann by reducing and or destroying (Timothy, Wand, Smith 1982). Irrational Beliefs responsible for EDBs through the introduction of rB's and SWBs. She has entered into new areas of life and is happy about her achievements. These changes were brought about through her co-operation and practice of assignments (Forman, Forman 1979).

#### 5.4.3 Emerging Ground Theory

Knowledge of RET and RET-Steps seemed to have given Anxious Ann an insight into the relationship that existed between her iBs and her anxiety and other EDBs REE and REI seemed to have motivated her to give up iBs, anxiety and EDBs CBM, PRE and HRS helped in the acceptance of 'rBs' and 'SWB's' and strengthened them. Therefore it seems that RET and RET-Steps along with REE, REI, CBM, PRE and HRS can reduce anxiety symptoms and replace it with confidence and acceptance of reality.

## CHAPTER VI

### THE NERVOUS JUDY (CASE STUDY III)

#### 6.0.0 Introduction

"Compulsive striving for perfectionism is neurotic. It is one thing to want to be perfect and another to make it a condition of your worthwhileness" (Hall and Lindez, 1970). Doing is more important than doing well. Perfectionists are often nervous, tense, worried and ready to feel enormous guilt over an inferior performance. Therefore, they experience the fear of completing it, lest they fall short of their neurotic goals. Perfectionists are humiliated with trial and error, so they avoid errors and avoid distant goals. Judy's great desire to be perfect has probably made her a nervous student. Her nervousness seemed to block and hinder her performance in school, at home, in social gatherings and also cause her emotional stress.

#### 6.1.0 Identification And Selection Of Judy



18. Judy.

Judy was referred by her class teacher though she was not a problem to the teacher or classmates. Her withdrawal and sad looks led her teacher to refer her. It took a long time for Judy to share her family problems. Her



problems were that she was shy, withdrawn, slow to respond, and kept away from participating in co-curricular activities in the school. "A good student, very passive, sad, lethargic and does not even smile in the class," said her class teacher. "She showed fear of examinations from class 5 and even got sick on some examination days"; said her mother. Judy was self-conscious, uneasy in the presence of a crowd and suffered from stage phobia.

#### 6.1.1 Objective 1

To identify the origin and development of irrational Beliefs (iBs) responsible for Emotionally Disturbed Behaviour (EDB) namely Nervousness, in High School Girl Judy through knowledge of RET.

#### 6.1.2 Home Environment

Physical: It is a small house neat and clean with 2 bed rooms, a drawing room, Kitchen visitor's room and dining room. The toilets are in the compound. The rooms are small and old fashioned. It is away from the main means of transport.

Family: Is unitary, father, mother and Judy stay there. Her unmarried uncle who is slightly retarded also stays with them.

Father: He is a machine mechanic, eldest in his family took up most of the responsibility of bringing up his brothers

and sisters. He had to even borrow money to help them. This caused him tension and his habit of drinking added to this tension at home. He is otherwise gentle, loving and polite even when he drinks.

Mother: She is a hardworking lady, senior clerk in Post and Telegraph, talented and brilliant in studies, being the eldest in the family, she too had to help out her brothers and sisters till they were independent. In spite of hard work, all the money she earned was used to settle her in-laws. So, she does feel upset about their ungrateful attitude now. She too, had the fears of stage, dire need for perfection and shyness. Though externally she did not show her fears. She is fair and intelligent and was first in the class throughout her school life.

Uncle: He is slightly retarded and therefore all his needs are to be met by Judy's parents. He too drinks whenever he gets money. He does go sometimes for simple work but does not save

Economic status: They belong to lower middle class family. Had Judy's parents used their salaries for them alone they could have made a lot more money. Parents are anxious about their future especially Judy's. They speak of how they had helped others and how they were cheated. These talks arouse feelings of anxiety and even anger. Judy is affected by

these. "I tell my parents I don't want any money. But don't keep talking about the past."

Emotional climate: Judy is loved by her family and relatives, she too loves her parents and family members. But she misses her grand parents who showed her much love. When she comes home there is no one to greet her as both her parents are working. She feels lonely and sad. Drinking habit of dad and her uncle causes her tension, anger and anxiety. There are quarrels between her mother and father when he comes drunk. She is often worried about this. Though she is much loved by her parents, she missed a lot of childhood experiences of normal children, as there are no children of her age in her immediate environment. She missed fun and laughter, enthusiasm and curiosity as she is in an adult world she even thinks and behaves like adults.

Relationship With One Another And Neighbours: It is cordial, friendly, and respectful. Her mother disapproves of father's drinking habit and too much involvement in social activities that incur debts to the family. Father does not discuss family matters nor plan the future together. Both are generous, kind and loving to family members and neighbours. Communication is not up to the mark. It is poor and does not help one another to speak freely their negative feelings. All of them are friendly loving and accommodating. They live in peace and unity with their neighbours. Judy misses laughter

and fun, games and competitions and even little quarrels with siblings. She works hard to score high marks and feels guilty when she fails to do so. "Judy does not know how to get angry or quarrel," said her close friend. Judy does not feel very free with her parents. Speaking about her mother she said; "She is forever working. When I want to talk to her, she tells me she has work to do. She is forever cleaning and working. I don't even feel like talking to her."

Religious Beliefs And Values: They belong to Roman Catholic - Anglo - Indian community. They are practising catholics. All have respect and love for God. Judy is active in her church activities. The family cherishes Values like honesty, justice, hardwork, manners, hospitality, kindness to poor, sick and needy, and forgiving those who hurt or cause harm to them. They avoid fights and quarrels. Judy also practises these values. She does not carry tales or speak ill of others.

Upbringing Styles: Judy is given freedom along with discipline. Her ideas are respected by her parents when she communicates.

### 6.1.3 Judy's Achievement

(Table 6.1.1 shows that Judy shows slight progress from term to term, even though she has gone to higher class and has more portion to study. She was a very good student in primary

school. When she entered middle school she started losing confidence and started under rating her abilities.)

Table 6.1.1 Scholastic Achievement

| Subject       | Tests<br>Max.Marks | Class VIII     |           |           | Class IX       |           |           |
|---------------|--------------------|----------------|-----------|-----------|----------------|-----------|-----------|
|               |                    | 1st term<br>50 | 2nd<br>50 | 3rd<br>50 | 1st term<br>50 | 2nd<br>50 | 3rd<br>50 |
| Malayalam     | I                  | 25             | 24        | 25        | 25             | 25        | 24        |
| "             | II                 | 24             | 31        | 26        | 27             | 33        | 30        |
| English       | I                  | 38             | 39        | 42        | 41             | 37        | 41        |
| English       | II                 | 31             | 34        | 37        | 34             | 33        | 39        |
| Hindi         |                    | 28             | 30        | 36        | 22             | 25        | 22        |
| History       |                    |                |           |           | 42             | 31        | 36        |
| Geography     |                    | 32             | 21        | 29        | 22             | 28        | 22        |
| Civics        |                    |                |           |           |                |           |           |
| Physics       | /                  |                |           |           | 42             | 31        | 36        |
| Chemistry     |                    | 32             | 21        | 29        | 22             | 28        | 22        |
| Biology       |                    |                |           |           |                | 28        | 27        |
| Mathematics-I |                    | 39             | 39        | 42        | 41             | 37        | 41        |
| "             | -II                |                |           |           |                | 33        | 34        |
| TOTAL         |                    | 249            | 256       | 258       | 275            | 360       | 372       |

#### 6.1.4 Co-curricular Activities

She took part when she was in primary school. Once she entered the high school she gave it up totally. She did not exhibit any extra ordinary talents, so no one encouraged her to do it. Though she does not volunteer, she does whatever is asked of her to the best of her ability. She is good in

stitching.

#### 6.1.5 Psychological Data Of Judy

Weschler's test of Intelligence shows her I.Q. as 120 a superior child. Bell's Adjustment Inventory - her personality showed the following:

Home - unsatisfactory,  
health - Unsatisfactory,  
social-average,  
emotional - unsatisfactory and  
group very satisfactory.

From the Matrix 6.1.1 the areas of SDBs and iBs are clear. She needs help in all these areas. She seems to under rate her ability because of her dire need to be perfect. (Freud 1965, Rogers 1971). We also notice Judy avoiding different tasks by withdrawing. Humans have a tendency to low frustration tolerance (LFT)(Adler 1927,1929; White hill, De Mayer, Gapin and Scott 1976)

Judy's strongest iB is the dire need for perfection and she shows all the symptoms of a nervous person and a perfectionist.

Matrix 6.1.1 Identification Of iBs And EDBs

| Name Of Tests | Areas Of Self Defeating Behaviours                                                                                                                                                                                                                                                                                                                                                                      |
|---------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| BIBD          | iBs<br>1, 2, 3, 4, 5, 6, 7, 8, 9, 10, 11,12.                                                                                                                                                                                                                                                                                                                                                            |
| BIRBQ         | iBs according to their intensity in Judy.<br>2- dire need for perfection<br>11- Worry about other's problems.<br>1- dire need for love.<br>6- Others as cause of unhappiness.<br>12- Demanding justice.<br>7- Wanting others' help.<br>4- having one's way<br>3- punishing wickedness.<br>9- looking for perfect solution.<br>10- recalls past pains.<br>5- Fear of the repetition of the past.         |
| FIRS          | Fears: Death, being buried alive, sea and waves, travelling by boat, making mistakes, elders, teachers, principal especially when they scold, floods, afraid of being afraid, of blushing in front of others, the word examination, a big crowd, gathering, the sight of blood, stage fear, strangers, dogs, cats, snakes, frogs, lizards, thunder and lightning                                        |
| ARS           | Anger: We find Judy is not an angry person. She does not show symptoms of anger in the situations given or express anger. "Judy does not know how to get angry" said one of her close friends.                                                                                                                                                                                                          |
| ACQ           | Anxiety: Restless, often worried, fear of forgetting, trembling for examinations, inability to continue when faced with a difficult situation or forgets an answer, biting nails, cracking knuckles, disturbance in sleep, when can't succeed in a work, while starting a work. It was observed by the investigator that if one answer is not known to Judy she gets stuck there instead of proceeding. |
| PSCRS         | Perception of self concept:- Considers others better, no participation in co-curricular activities, not volunteering in                                                                                                                                                                                                                                                                                 |

Matrix 6.1.1 Identification Of iBs And EDBs Continued.

| PSCRS | Areas of self defeating Behaviours                                                                   |
|-------|------------------------------------------------------------------------------------------------------|
|       | in class to answer, or any other activities, hesitates to do work, for she feels she is not capable. |

6.1.6 Origin And Development OF iBs

II's and PO of the family, school, teachers and peers bring to light that most of her iBs have their Origin in her own family and they are nurtured and strengthened at school.

Table 6.1.2 Comparative Study Of The Presence Of iBs

| iBs                                   | family | Teachers | Judy | Remarks                             |
|---------------------------------------|--------|----------|------|-------------------------------------|
| 1. Dire need for love                 | ✓      | ✓        | ✓    |                                     |
| 2. " " perfection                     | ✓      | ✓        | ✓    | Judy shares                         |
| 3. punishing the wicked               | ✓      | ✓        | ✓    | all the iBs of teachers and parents |
| 4. Having one's way                   | ✓      | ✓        | ✓    | in addition to theirs               |
| 5. Fear of the repetition of the past | x      | x        | ✓    | she has iB No.-5 also.              |
| 6. Others as cause of unhappiness     | ✓      | x        | ✓    |                                     |
| 7. Wanting other's help               | x      | ✓        | ✓    |                                     |
| 8. Evading difficulties               | x      | ✓        | ✓    |                                     |
| 9. Looking for perfect solution       | ✓      | ✓        | ✓    |                                     |
| 10. Recalls past pains                | ✓      | x        | ✓    |                                     |
| 11. Worry about others                | ✓      | x        | ✓    |                                     |
| 12. Demanding justice.                | ✓      | ✓        | ✓    |                                     |

Table 6.1.2 gives us the shared iBs of her family, teachers and Judy. Though teachers and parents do not exhibit



the iBs No.5. Judy exhibits it. Some of her peers too exhibit it. Therefore probably she has picked it from her peers.

#### 6.2.0 Objective 2

To study the relationship between irrational Beliefs (iBs) and Emotionally Disturbed Behaviour (EDB) namely Nervousness in High School Girl Judy.

#### 6.2.1 Relationship Between iBs And EDBs

The nervousness seems to spring up from her strongest iB number - 2 the dire need to be perfect in every thing. The relationship between her iBs and EDBs are clearer in individual counselling sessions (6.2.2).

#### 6.2.2 Treatment Of RET

Treatment of RET was given through individual and group sessions. Since Judy could not come for some group sessions she was given more of individual sessions. She had 35 individual sessions.

a) Group Councelling Sessions: Judy attended 15 group counselling sessions where she learnt part of RET through theory, ABCDE's and progressive relaxation Exercises. In addition to these she also attended all the CBM sessions to overcome stage fear.

b) Glimpses of Individual Sessions: Judy had more individual counselling sessions than others. What she missed in the group sessions were taken up during the individual sessions.

19. Judy

and the



Investigator.

I; "What problem would you like to deal with today Judy?"

J; "Fear of examinations."

I; "What do you tell yourself about exams?"

J; "I will get less marks."

I; "What will happen if you get less marks?"

J; "It is a shame."

I; "Why is it a shame?"

J; "What will others think of me?"

I; "What will others think of you?"

J; "They may think that I am not clever."

I; "If you get less marks you may not be considered clever like mummy and aunts. You may not get their love and appreciation."

-----  
 1. Judy's two strong iBs are that I must be perfect in every thing (2) and I must be loved and appreciated by all (1).  
 -----

I; "So you want to be considered a clever student?"

J; "Yes. I don't want others to think that I am not a clever student."

I; "Do you become clever just because others think you are?"

J; "No."

I; "Do you become stupid just because others think you are?"

I; "No."

J; "Then what are you afraid of? Possibly marks will give you a sense of achievement, a sense of importance, others will look up to you. You might get attention and appreciation. And you need it. You want every one to love you. You can't imagine the rejection from others."

-----

2. Judy hails from a family where her maternal aunts and uncles were brilliant students, so also her mother. She keeps comparing herself with them. She fears rejection if she didn't perform well like them. She was good when she was in lower classes. She feels if she does badly in her exams they may not approve of her. She may be considered less efficient. This is seen in the result of PSCRS where she considers others better than her. This thought of not reaching their expectations seems to cause her anxiety, fears and these result in nervousness. She feels it a dire need for her happiness (high marks). She was shown gradually how these iBs were causing her undue tensions and nervousness. Her fear of examinations can be removed or reduced if she changed her self talk and thinking.

-----

I; (REE) "Can you buy love with marks?"

J; "No"

I; (REE) continues "It is foolish thinking to believe that I will get more love and appreciation if I can score more marks. Whether you get '100' marks or '0' you are precious as a human being. You are much more than all the marks you can possibly get. You are much more than all your achievements. Besides these thoughts are frightening you, making you nervous, sometimes even sick, making you incapable of doing your examinations well. You even forget what you know because of your nervousness. You also make mistakes. The result is that you finally end up with getting less marks. All these happenings in you are self defeating because they are not helping you to be more effective. So what do you think you need to do? Do you

still want to cling on to these?"

J; "No?"

I; "So how would you get out of this habit, you had for some years now?" In order to get out of these fears one needs to accept the reality about self and others. What is more important, your life or examinations and marks?"

J; "I am more important than marks".

I; "Examinations are making your life miserable because of what you say about them. What would you do to change this?"

J; "I will choose the right thinking."

I; "In order to choose right thinking you have to change the wrong into right. How will you change your iBs into rBs?"

J; "I will tell myself, it is okay if I get less marks. It is desirable to get more marks. But it is not a must. It is okay if all didn't love me. Life is more important than examinations and marks. I am precious and beautiful as a person whether I get more marks or less marks.

I; "Yes it is desirable to get good marks. But we do not study only for marks but to gain more knowledge and skills for better living."

[She was allowed to go through REI facing the examinations. She felt better after that experience.] (Keable, Diana 1985; Richard 1988; Singer 1974).

I; "What is education? Is it examination?"

J; "It is getting knowledge, skills and helping us to have good character."

I; "What is more important marks or character?"

J; "Character is more important."

I; "Is it you or marks that is more important?"

J; "I am more important."

I; "Your life is more important than all the marks you can achieve. But what are you telling yourself during the

examinations?"

J; "If I get less marks. I can't bear it. I cannot face people. How will I tell dad and mum? What will mummy think, of me? Poor mummy she is working hard for my sake. I can't make her happy. When I think like this I experience guilt. This makes me sad."

I; "You are sad and therefore you look sad. When you are sad, can you concentrate?"

J; "No."

I; "How can you change sadness? You can do it by changing all the depressing sentences you keep telling yourself."

-----  
 3. The investigator perceived that Judy's Time-Table could be one of the reasons for her poor performances in spite of so many hours of study  
 -----

I; "It is possible that you have a hectic time-table. Please tell me, your time table of the day."

J; "When I go home, I have my bath, then study, after sometime I take my milk then study, then prayer, again study, dinner, again study, sleep, then get up after washing, study, break fast then school, study the whole day till the school leaves."

-----  
 4. Even in the class she rarely talks or recreates with others. Even during the interval she is busy studying. The investigator shows the vicious cycle of her learning process.  
 -----

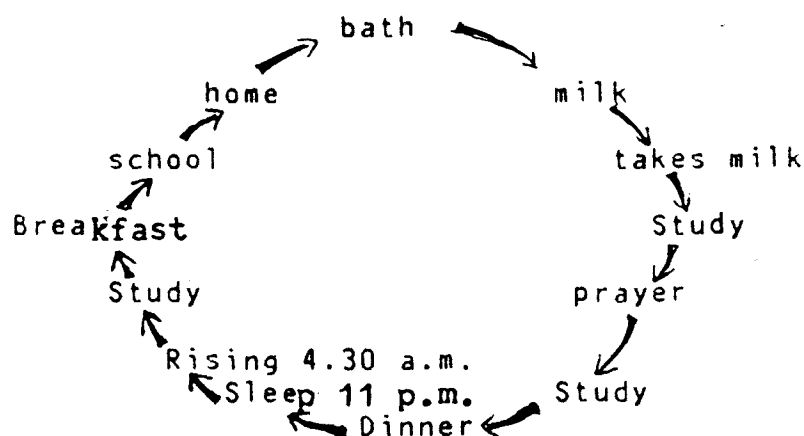


Figure 6.2.1 Faulty Study Habits

I; (REE) See you do not give rest to the brain. Naturally you can't concentrate. You may be sitting with your books. But your mind may be wandering. You need breaks and little distractions for variety."

-----  
 5. So together they prepared a time table with little breaks in between. She was also given a few tips on effective study habits. Judy is very co-operative does her home work carefully and regularly (Mautlsby 1975). A feedback from her showed that her fear of exams has considerably decreased and her power of concentration has increased considerably. She is also participating in a group dance.  
 -----

Dealing with iB No.-11. 'I must be upset over the others and other's problems:

Judy gets upset over others and other's problems.

Possible she has learnt this iB from her parents.

I; "Why do you get worried about the problems of others. Do you think, your worry will help others in any way?"

J; "No".

I; "Then why do you worry?"

J; "It just happens. When I see and hear about the problems, I feel bad., I keep thinking about them. Then I can't concentrate. I keep wondering what will happen in the future?"

I; "So you also worry about these repeating in the future?"

J; "Yes".

I; "What do you worry about normally?"

J; "Will dad come home drunk ? Will there be shouting and confusion? These thoughts upset me."

I; "What sentences do you tell yourself before your get upset?"

J; "Daddy should not drink. It is terrible to drink and get

drunk. I can't stand it?"

I; "Who told you you can't stand it?"

J; "No one."

I; "You have stood it in the past and you will be able to stand in the future as well. Why are you telling these foolish sentences and making your life miserable?" So who is really responsible for your misery?"

J; "I".

I; "How?"

J; "By repeating these sentences. Daddy should not drink. It is terrible to drink. I can't stand."

I; "What is the reality?"

J; "I can face it, because I have faced it on a number of occasions: "

I; (REE) By telling yourself you can't face it, you were making the situation beyond your control, you were upsetting yourself, getting disturbed, anxious and sad. "Mood states depend on cognition-what they believe or tell themselves" (Ellis 1958, 1973, 1977, Ellis Harper 1975). You also became nervous. You believe that your dad should be a perfect man. He does not come up to your perfect man when he drinks. And you tell yourself that he should be an ideal man. So you find it difficult to accept this limitation. What are dad's weaknesses?"

J; "Drinking alcohol."

I; "Is this the only weakness?"

J; "Yes. Otherwise he is a very good man."

I; (REE) "Since he is a human being like others he too will have limitations. To expect dad to be perfect and ideal is not real. You yourself said that he is very nice. Even when he drinks he does not create problems. Even when mummy shouts he keeps quiet".

[At this moment Judy opened up herself without any inhibition. She spoke of the things that happen at home].

"Active-directive therapy is helpful" (Adler 1929; Alexander 1946; Ellis 1974).

J; "They are all the same when it comes to drinking. All three brothers have enough and more money to drink. Otherwise they have no money".

[When she was speaking thus there was disgust in her tone. Speaking about mother, she said; "Work, work, work. When I want to speak to her, she tells me she has no time. She is busy cleaning. She finds some work or the other. Then I don't feel like talking"]

I; "You wish mummy had more time to spend with you".

J; "Yes. She looks always busy and has no time for me".

I; "You feel sad about it. You wish, you could spent more time talking about school and other things".

J; "Yes." [Judy's eyes were filled with tears at this juncture and her voice was choked with sorrow. She is the only child and is very lonely. There is no one with whom she can share her opinions and fears. She wishes that her mother explained and expressed what she really felt. Her mother doesn't say words of appreciation nor expresses her disappointments when she scores less marks. This time Judy had shown marked progress with reference to her rank. She has moved up the ladder from 29 to 20 which was commendable. But mother said nothing about it. she was pained even though she knew that mother didn't say any thing because she didn't want to hurt her feelings. She wishes that her mother was more free so that she could talk to her more freely ].

Meeting with Judy's mother the next day verified the facts Judy shared with the investigator. Her mother does not know how to help Judy. She too like her daughter suffers from the same iBs.

Judy dreads the rejection of her relatives.



- I; "What happens if your relatives considered you not clever?"
- J; "Nothing".
- I; "If nothing happens why do you get so upset about marks and ranks?"
- J; "I still experience a desire to please my parents and relatives. Poor performance on my part displeases them and disappoints them, even though they do not tell me so I know they are not happy I tell myself that I can't hurt my parents. It is terrible to cause them pain."
- I; "Are you responsible for your parents sorrow or joy?"
- J; "Yes."
- I; "How?"
- J; "When I do well they are happy."
- I; "Are you responsible for their lives?"
- J; "No."
- I; "Then you are also not responsible for their joys or sorrow. Your marks have nothing to do with their joys or sorrows. What they say about your marks are causing them pain or joy. Remember it is not the event but what you are telling about the event."
- J; "Do you mean marks are not important?"
- I; "I didn't say that. I said your life and your happiness is more important than marks. If so then why make your life so miserable for the sake of marks, for some future destiny which may or may not materialise. So what would be a better way of getting out of this need to be loved. You need to please yourself and make your life meaningful and happy. How would you do that?"
- J; "It is okay if I made mistakes. All I need is to learn from my mistakes and not repeat them. I don't have to destroy myself for the sake of marks. Happiness and peace are more important than marks."
- I; "Excellent. You can make your life beautiful and meaningful by developing right attitudes towards study."

[Judy seemed happier and relaxed. She was given assignment sheets to work on these line of thinking. "Changes in cognition tend to produce significant changes in emotion and behaviour" [Acock, Defleur 1972; Picota and Rutnam 1975; Hickey 1976]



20. Judy dancing

Judy learning RET

Judy has a tendency to worry about the past painful events repeating (iB No-10)

- I; "Now that you know it is foolish to worry about the past how would you overcome that?"
- J; "Give up thinking."
- I; "Possible these thoughts will come back to your mind again. How will you use RET? What will you tell yourself?"
- J; "There is no need to worry about the past. It is useless to think about that and make my life miserable."

Thinking generates emotions. ABCDE help to get in touch with the emotions created (Elli's 1975; Bandura 1974; Lazarus 1976).

- I; "Let us apply RET-steps here what is A here?"
- J; "A - He would come drunk and there will be a fight."
- I; "What is the 'C' here?"
- J; "Upset, worried, anxious, can't concentrate."

- I; "Which iBs are causing these tensions?"
- j; "We have to find these."
- I; "Which are your strongest iBs?"
- j; "I must be perfect in every thing, I must be loved and appreciated by all, past and painful events may repeat again."
- I; "Which of these are causing worry about dad?"
- j; "iB No.2- and iB No.- 10."
- I; "What is the next step?"
- j; "D"
- I; "Let us now probe into your thought processes to detect rational and irrational thinking. The exact words or phrases that cause the consequences namely anxiety and nervousness?"
- j; "Judy's thinking processes are probed.
1. Today I don't know how he will come.
  2. Why is he drinking ?
  3. Can't he come soon ?
  4. Suppose he comes drunk there will be a fight.
  5. Mummy will get angry.
  6. There will be shouting.
  7. All the people will know about mum and dad's fighting.
  8. What will they think about mummy?
  9. They will think that she is a fighter cock.
  10. It is terrible if they think she is a fighter-cock.
  11. They should not think about her like that.
  12. Why should he drink?
  13. I can't stand dad drinking.
  14. I can't stand others thinking of mummy as a fighter-cock.

Investigator gets Judy to notice how she herself causes her nervousness or anxiety. Look at the sentences 1-9 these do not cause anxiety or nervousness because they are possibilities or reality.

- I; "Look at the sentences from 10-14. Which are the words that will cause anxiety or nervousness?"
- j; "Terrible, should and cant" (Ellis - 1960).
- I; "Who told you it is terrible if husband and wife argue?"
- j; "Nobody."
- I; "Don't people argue at home? Don't people speak loudly sometimes?"
- j; "Yes."
- I; "Then why do you think it is terrible? (REE). If something is normal and happens in most of the homes it is not a terrible thing. It would be desirable if there were no arguments or fighting. But this is rare. Many people have their weaknesses so also your parents. You are expecting them to be perfect. Your iBs No.10 is also related to your iB No.2. Wanting to be perfect. You want your parents too to be perfect. As long as we live, we will continue to have a few strong defects. But your parents are not their 'defects'. Are they?"
- J; "No. My father is very good, very loving. He is kind and caring."
- I; "What about your mother, is she just a fighter-cock?"
- j; "Not at all. She is helpful, loving, kind, self less, forgiving, hard working, sincere, has self respect, she goes out of her way to help others."
- I; "So you see though they have defects, they are beautiful people. Since they are human beings, they will have some defects. It is okay, if they shout or argue once in a way. It is okay, if dad drinks once in a way. We have seen the irrational thinking and beliefs that are causing tensions in you. So how will you replace these iBs with rBs?"
- j; "I feel there is no need for me to get upset. It is useless to worry and think about the past frightening events."
- I; "Exactly."

[ We notice during discussions and debate that Judy is

changing her iBs and replacing them with rB's. Here we already notice 'cE'. So we can presume that 'bE' will follow. Feedbacks from her and others indicate these changes in her]

### 6.3.0 Objective 3

To study the impact of RET in bringing about Positive Changes in Cognitive and Affective Domains by Reducing or Replacing 'iBs' with 'rB's' thus reducing or removing Nervousness

#### 6.3.1 Impact Of RET

In the case of Judy her nervousness has reduced, 'cE' and 'bE' are clear from the post-test results as well as the feedback sessions from the family, peers, teachers and Judy. These are verified by the PO of the investigator. She who was passive, is enquiring, describing and asserting her likes and dislikes and is able to think clearly. She looks more cheerful and is getting involved with others.

#### 6.3.2 Investigator's PO

It is no more the anxious, shy, timid, sad, reserved, closed up or unhappy Judy that we meet but a Judy who is cheerful, happy, free, confident, self accepting and self appreciating. She is not sick any more due to nervousness, It was a pleasure for me, as an investigator to work with her. Her great desire to be free and happy made a lot of difference when

coupled with her many beautiful qualities already possessed by her. Since, Judy was already disciplined, adolescent she did not find the exercises, suggestions, or home work difficult. Punctuality and regularity were part of her and these she showed during the sessions and took the counselling sessions seriously. She had more individual sessions as mentioned earlier. And these sessions helped to build up strong confidence in the investigator. Her own feedbacks speak about the changes that have occurred in her. Her written feedback is attached here with. She is not only ~~not~~ ashamed of being herself but is proud to be herself. She has accepted herself with her assets and liabilities. This enabled her to accept other family members as well. Now, she is not demanding an ideal dad or an ideal mummy but loving human beings. She wants to develop and build up herself physically, mentally, emotionally and spiritually. She is not only loving but a refined, gentle adolescent. Once her fears were gone, she showed signs of maturity, an adolescent in a world of reality. She took time to open up, but once she did, it was a real running towards rational thinking and living. She showed great enthusiasm, to break through her blocks, and to grow as a person of responsibility for her feelings and actions. The Matrix 6.3.2 explains the summary of the changes noticed in Judy briefly.

## Matrix 6.3.1 Feedbacks From Teachers, Peers, Family And Judy

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                                      | After RET                                                                                                                                                                                                                                                                                                                                                                                                                                            |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>a) Teacher</p> <p>"She is not a problem to me. She studies and is regular in her work. Though an average student she is life-less and expressionless. She looks sad and worried and often looks sick to me. I wish you could find out why she is so silent and lethargic. She does not volunteer for anything in the class. She does not even raise her hands when a question is put to the class."</p>                                                      | <p>"At least now she smiles, speaks louder and is more alive. She looks happier and healthier. She is okay. She has shown progress in the class. Her rank too has improved. She has shown progress in general."</p>                                                                                                                                                                                                                                  |
| <p>b) Peers</p> <p>"She is becoming weaker in studies. She doesn't talk with anyone. She does not waste time. She never raises her hands even if she knows the answers. She looks sad often. She is weak in Hindi and Malayalam. She has fear of examinations. She is so quiet that her name has never been on the chalk board for any misconduct. She is lethargic does not like to argue or quarrel with anyone. She loves sharing her food with others."</p> | <p>"She is better now in studies. She is trying to mingle with others. She looks more cheerful and happier. She answers loud and clear. Now she responds more frequently. She does her duties regularly. Everyone loves her. She is very generous and shares every thing with every one. She is close to her intimate friends and kind to all. She participated this year for co-curricular activities. She still does not assert herself much."</p> |
| <p>c) Family</p> <p>"She is afraid of examination. She did very well in lower classes. When others started doing better than her in her class, she started getting sick. She is not pressed to work harder. "Do whatever you</p>                                                                                                                                                                                                                                | <p>Her examination fears have reduced. She now questions and expresses her likes and dislikes and even her annoyance. She was excited about participating in the dance and songs. She is learning to assert herself. She</p>                                                                                                                                                                                                                         |

Matrix 6.3.1 Feedbacks From Teachers, Peers, Family And Judy  
Continued

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               | After RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>can" that is what I tell her. The fruits of her hard work is not seen in the results. She lacks fun and friends. She is lonely, obedient and submissive. She eats very little. So She falls sick often. She likes only delicacies and avoids common food items. Father's drinking habit worries her. She does not like loud talk or shouts. She is shy, timid and does not mix with strangers. She gives a lot of importance to what others might say or think."</p>                                                                                                                                                                                  | <p>refused to go for tuitions with her friend inspite of the pressures exerted on her even by me. She seems happier. Her stage fear and other fears have reduced. She is not so much bothered about what others would speak think or say now.</p>                                                                                                                                                                                                                                                                                                                     |
| <p>d) Judy</p> <p>I have many fears like stage, making mistakes, examinations and being considered not clever. I feel sad, lonely, anxious, and often worried about dad's drinking, and quarrels at home. I have no peace of mind. I am afraid to volunteer for anything, not even to raise my hands when teachers question me. I consider others better than me. I do not take part in any competitions. I compare myself with mum and her siblings. I keep worrying about marks. I often forget what I study, so always become nervous before the examinations. I even fall sick. My hands and feet tremble as I enter the class for examinations.</p> | <p>I have got rid off many of my fears and worries. I can concentrate better. I can face my life more courageously. I assert and speak about my feelings to my parents. I like me. I don't keep worrying about marks. I don't get so nervous for examinations. I remember most of the things I study. I have gained confidence in me and am not afraid of rejection. I took part in co-curricular activities and dance. My stage fear is gone. I feel I can face a crowd and speak at least a few words in front of them. Now I don't compare myself with others.</p> |



6.3.3 Feedback From Judy

Before knowing more about RET I had the thought that I am not beautiful, I have no ability. I could not face strangers and had many problems. I had the feeling that I am not good. When my daddy comes drunk I get angry. I used to think that I could not live without others. I had the feeling that all must love me and care for me. When anyone look at me or stare at me I used to get upset. When someone says I am not good I used to get upset I used to avoid coming in front of visitors. I used to avoid going for functions. I had the feeling that I am not good looking so I did not mingle with

others much. I could not make friends easily. I was not able to take my own decisions. I was not aware of the wrong situations in the society.

Now I know that I am beautiful, lovable and good looking. I am able to face problems easily. If my daddy comes drunk also I can face it. I face strangers. I have understood my life is more important. I can live without depending on others. I think if no one loves me it's okay. I go for functions and mingle with others. Now if others stare at me I don't feel anything. If anyone says that I am not good I don't care. I am able to take decisions. Face situations easily. I enjoy life better.

Matrice 6.3.2 is the result of triangulation of the data collected through feedback sessions, interviews, PO of the investigator and individual and group counselling sessions.

Table 6.3.1 Test Results Of TPT's And Bell's Adjustment

Inventory

| Names  | Pre-test scores                          | Post-test scores | Difference | Remarks                             |
|--------|------------------------------------------|------------------|------------|-------------------------------------|
| BIBD   | iBs<br>1,2,3,4,5<br>6,7,8,9,<br>10,11,12 | Nil              | 12         | Reduction or removal of all iBs.    |
| BIRBQ. | 173                                      | 94               | 79         | Reduction iBs                       |
| FIRS   | 123                                      | 60               | 63         | Reduction of fears                  |
| ARS    | 30                                       | 22               | 8          | Reduction of Anger                  |
| ACQ    | 63                                       | 29               | 34         | Reduction of Anxiety                |
| PSCRS  | 37                                       | 17               | 20         | Development of better self concept. |

Bell's Adjustment Inventory

|           |     |    |          |                                                                                                                               |
|-----------|-----|----|----------|-------------------------------------------------------------------------------------------------------------------------------|
| Home      | Un  | G  | Progress | We find positive changes have taken place in Judy with reference to her adjustment. She has learnt to accept self and others. |
| Health    | Un  | G  | "        |                                                                                                                               |
| Social    | AV  | Ag | "        |                                                                                                                               |
| Emotional | UN  | Ex | "        |                                                                                                                               |
| Group     | VUN | G  | "        |                                                                                                                               |

Un- Unsatisfactory, AV-Average, VUN - Very unsatisfactory,

Ag-Aggressive/Assertive. G-Good, E-Excellent.

Figure 6.4.7 Process Product Model Of RET ON NERVOUS JUDY

Table 6.3.2 Judy Before and After RET.

| Before RET                                                                                                                                                                                                                                                                                                                                    | After RET                                                                                                                                                                                                                                                                                                                    |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Negative behaviours:- Nervous frightened, shy, passive, perfectionist, timid, with-drawn sad, lonely, submissive, self pitying, self rejecting and family rejecting. She was also worried and disturbed.</p> <p>Positive behaviour :- Kind, generous, loving, patient, caring sharing, honest, hardworking, regular, neat and dutiful.</p> | <p>Free; Courageous, realistic, humane, involving, sociable, outgoing, cheerful, self accepting, co-operative, assertive, family accepting and self appreciating. She now enjoys peace of mind, happy, kind, gentle, generous loving, patient, caring sharing, honest, hard working open, regular, dutiful and fearless.</p> |

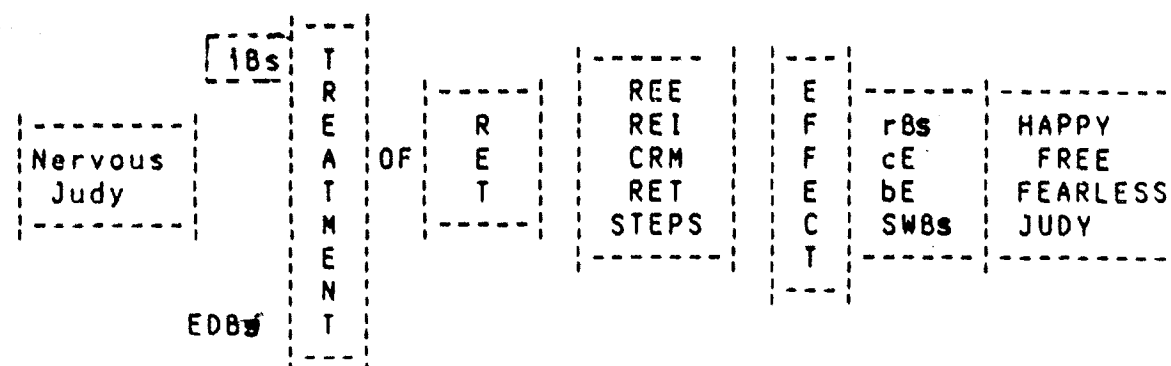


Figure 6.3.2 Process Product Model Of RET And Nervous Judy

#### 6.4.0 Specific Ground Theory

Knowledge or RET, RET-Theory seemed to have given nervous Judy an insight into the relationship between her iBs, nervousness and other EDBS., REE and REI motivated her to give up iBs responsible for nervousness and other EDBS , PRE, CBM and HRS help in the acceptance of rBs and SWBs and strengthen them.

## CHAPTER VII

### DEPRESSED DEEPA (CASE STUDY IV)

#### 7.0.0 Introduction

"Depression is an affective disorder which is used to describe a wide variety of clinical states verifying from mild sadness of mood to psychotic depressive illness. It is viewed as the total reaction of human beings in the face of a traumatic psychological experience with or without some biological disposition" (Kumar, Kaur and Kaur 1993). Deepa shows a number of these signs mentioned above.

#### 7.1.0 Identification Of Deepa

Deepa is a self referred case. She came to the investigator after the investigator's introductory talks in Deepa's class. She came with a friend and met the investigator. She expressed her desire to come out of fears and her depressive tendencies. During the first free sessions she found difficulty in talking and therefore was asked to write about her life in school and home, her fears, and her childhood days. Her writings brought to light her inner world as she experienced it. Some of her problems were inability to answer in the class, nervousness, fear of father, feeling of rejection, inability to stop worrying about something or the other and difficulty to concentrate. She looked sad, confused, upset and worried. She also experienced difficulty in expressing. "She also suffered from inferiority complex"; Teacher. "She is short and dark and is upset about her colour

and height," said her mother. Deepa showed the following SDBs namely shyness, timidity, withdrawal and aloofness. Her outlook of life was pessimistic and she was unhappy at home.

### 7.1.1 Objective 1

To identify the origin and development of irrational Beliefs (iBs) responsible for Emotionally Disturbed Behaviour (EDB) namely Depression in High School Girl DEEPA through knowledge of RET.

### 7.1.2 Scenario Of Deepa's Family

a) Family: Unitary Family, Dominant Father, Submissive Mother, Depressed Deepa, and two brothers. Both the brothers are demanding. Elder brother is more considerate, while the younger brother hurts, fights, irritates and taunts Deepa. Both are college students.

b) Occupation: Father is a Bank Officer, and mother is a Homeo Doctor.

c) Personality: Father is dominating, strict, demanding, constantly comparing, irritable, angry, wanting to have his way, "Even folding a sheet before ironing clothes". Said Deepa. Mother is understanding, submissive, obliging, sensitive, aware of the causes of Deepa's depression, helpless, but tries to be a bridge between husband and the children, a comfort to them. But she is afraid of her husband. Deepa is

the youngest child, self rejecting, physically short, dark and fat. She is afraid of teachers, father, brothers. She is sad, depressed, withdrawn, pessimistic, lonely, anxious, worried, unhappy at home and school, cries easily. These tendencies were seen from her childhood. (Freud 1965; Adler 1929; Reich 1949). The second brother adds to her tensions and feelings of rejection. The elder brother at times helps her but he too is over strict and demanding and considers girls inferior to boys. He expects Deepa to be at their service.

d) Physical Environment: House is spacious with three bed rooms, visitor's room, dining room and kitchen. Bath room and toilets are outside in the campus. Deepa has a room to herself but is afraid to sleep alone and therefore still sleeps with her parents. The arrangement of the furniture and other articles is not neat or artistic.

e) Emotional Climate: Seems to be unhealthy, with no scope for free exchange of ideas, views or even feelings. Mother and children live in constant fear of the father. There is hardly any time for fun and laughter in that house. There are constant power struggles between father and the second son. He often (2nd brother) expresses his anger and frustrations by hurting Deepa who is younger and weaker than him.

f) Religious Climate: All are involved in the activities of the temple like pooja's and other rituals. The

religion has not helped Mr. Shekhar to be more human. He is not aware that his rigid, domineering, self righteous attitude is causing undue tensions in all the family members. All the family members exhibit iBs.

g) Social Climate: They are not friendly with neighbours as there is no time for parents for socialising, Deepa does not have a single friend in the neighbour-hood. She spends most of her free time in self pitying, reading and listening to music. Often she is left alone in the house.

Table 7.1.1 gives the details of Deepa's scholastic achievements while we 'b' gives her participation in co-curricular activities and 'a' psychological data.

Before the treatment of RET she was inactive and distant. During the treatment of RET she took part in the school band, won prize at the district level and was invited to Lakshadev. She went along with the group.

a) Psychological.

Bell's Adjustment Inventory.

Home - very unsatisfactory  
 Health - unsatisfactory  
 Social - average  
 Emotional - Very unsatisfactory  
 Group - Very unsatisfactory.

Wescheler's Test Of Intelligence i.Q. 120 superior.

| <u>b) Co-curricular</u> | Class VIII | Class IX |
|-------------------------|------------|----------|
| Dramatics/Music Dancing | Nil        | Yes      |
| Painting/Art/Craft      | Nil        | Nil      |



|                     |     |                      |
|---------------------|-----|----------------------|
| Sports/games        | Nil | Yes (March and Band) |
| Story writing/poems | Nil | Nil                  |

Table 7.1.1 Deepa's Achievement

| CLASS VIII  |                |                |                | CLASS IX       |                |                |
|-------------|----------------|----------------|----------------|----------------|----------------|----------------|
| Subject     | 1st Term<br>50 | 2nd Term<br>50 | 3rd Term<br>50 | 1st Term<br>50 | 2nd Term<br>50 | 3rd Term<br>50 |
| Malayalam I | 44             | 43             | 43             | 41             | 36             | 40             |
| " II        | 28             | 33             | 33             | 28             | 34             | 38             |
| English I   | 38             | 43             | 38             | 33             | 34             | 38             |
| " II        | 33             | 39             | 39             | 30             | 31             | 31             |
| Hindi -     | 42             | 44             | 41             | 40             | 41             | 44             |
| History )   | 35             | 23             | 34             | 24             | 36             | 28             |
| Geography ) |                |                |                |                | 36             | 36             |
| Physics )   |                |                |                |                | 27             | 22             |
| Chemistry } | 42             | 27             | 33             | 39             | 21             | 30             |
| Biology )   |                |                |                |                | 27             | 23             |
| Maths - I ) | 45             | 35             | 40             | 35             | 31             | 31             |
| Maths - II) |                |                |                |                | 26             | 32             |

Table 7.1.2 shows Deepa's iBs, family's and teachers. Possible Deepa has learnt these from her family members at home. Possible Deepa had personal iBs and EDBs. She had problem of communication and hence her relationships with friends, siblings, father and herself suffered. Her grand aunt's death has added to her insecurity. The world was frightening to her. It is possible that iBs learnt at home were reinforced in her environment. Home visits and interviews

with family showed that others at home too had their share of iBs.

Table 7.1.2 Origin And Development Of iBs In Deepa

| Description of iBs                    | family | Deepa | Teachers |
|---------------------------------------|--------|-------|----------|
| 1. dire need for love                 | ✓      | ✓     | ✓        |
| 2. " " perfection                     | ✓      | ✓     | ✓        |
| 3. punishing the wicked               | ✓      | ✓     | ✓        |
| 4. having one's way                   | ✓      | ✓     | ✓        |
| 5. fear of the repetition of the past | x      | ✓     | ✓        |
| 6. Others as cause of unhappiness     | ✓      | ✓     | x        |
| 7. Wanting other's help               | ✓      | ✓     | ✓        |
| 8. Evading difficulties               | ✓      | ✓     | ✓        |
| 9. Looking for perfect solution       | ✓      | ✓     | ✓        |
| 10. Recalls past pains                | ✓      | ✓     | ✓        |
| 11. Worry about others                | ✓      | ✓     | ✓        |
| 12. Demanding justice.                | ✓      | ✓     | ✓        |

Table 7.1.2. indicates the possible sources of origin and development of iBs in depressed Deepa. It is possible the impact of iBs of family and teachers are very strong in Deepa. What ever originated at home seems to be reinforced in the school through her teachers. During the home visits it was observed by the investigator that her family exhibited 11 iBs which were part of Deepa. Her mother too suffers from mild attacks of depression and often gets attacks of asthma. Most of the sentences spoken by her family members included the following words 'should', 'must', 'terrible', 'awful', and

can't. They were used by all her family members. "She 'should' be humble. It is 'terrible', when girls give back answers. She 'can't' face any criticisms. She 'should' not cry easily. She 'must' learn to put up with difficulties. After all she is a girl." Humans have an innate and acquired tendency to think irrationally (Beck 1974; Chapman, Daut 1976; Davis and Blaney 1976).

Probably the EDBs are the result of her strong iBs. Her tendency to get depressed is also partly due to the unhealthy environment at home. She showed a tendency to look for sufferings and pains in and around her and to get depressed. She worries about her uncle who was cheated, she worries about her mother's friend's father-in-law who is sick. Even reading of news papers depresses her. She feels this world is cruel and sad, where many are suffering. She feels guilty to go for a movie or to have an ice cream because there are many suffering people in our country. Deepa says "How can I enjoy icecream when so many are starving in our country?" Self statements affect behaviour (Ellis, Harper 1975; Kelly 1955; Beilin, Lust, Sack and Natt 1975). She feels guilty and upset when she goes for shows or hotels for a dinner with her parents. It was noticed by the investigator, that she did nothing concrete to help the suffering other than worry about them.



Matrix 7.2.1 Deepa's iBs and EDBs Result of IPTs Continued

| IPTs                             | Descriptions of iBs and EDBs                            | Frequency |
|----------------------------------|---------------------------------------------------------|-----------|
| ARS                              | Anger Inducing Situations in Deepa                      | "         |
|                                  | 17- When some one disturbs her works                    | Always    |
|                                  | 3- Shouting                                             | "         |
|                                  | 6- Cannot express anger                                 | "         |
|                                  | 11-Avoiding the person with whom she is angry           | "         |
|                                  | 12-When cheated                                         | "         |
| ACQ                              | 15- When her plans are spoiled                          | "         |
|                                  | Anxiety inducing situations and expressions of anxiety. |           |
|                                  | 6- Examinations                                         | always    |
|                                  | 14-Worries about something                              | "         |
|                                  | 20-Forgetting                                           | "         |
|                                  | 21-Biting nails and cracking knuckles                   | "         |
|                                  | 23-When parents are late                                | "         |
|                                  | 24-When stared at.                                      | "         |
|                                  | 25-Strangers                                            | "         |
|                                  | 1- Angry people and shouting                            | often     |
|                                  | 3- difficulties                                         | "         |
|                                  | 7- Important works                                      | "         |
|                                  | 8- Facing important persons                             | "         |
|                                  | 15- Facing someone unexpectedly.                        | "         |
|                                  | 19-Examination and fear of forgetting                   | "         |
|                                  | 12-Incapacity to succeed                                | Sometimes |
|                                  | 16-Inability to enjoy due to worries                    | "         |
| 17-worries of past and future    | "                                                       |           |
| 18-Facing audience               | "                                                       |           |
| 22-Feeling of inadequacy at work | "                                                       |           |
| PSCRS                            | Poor self Concept                                       |           |
|                                  | 1-Others better                                         | Always    |
|                                  | 8-Fear of being laughed at in a crowd                   | "         |
|                                  | 11-Day dreaming                                         | "         |
|                                  | 12-Wanting to be somebody else                          | "         |
|                                  | 6-Avoid volunteering                                    | Often     |
|                                  | 2-Dislike personal appearance                           | Sometimes |
|                                  | 3-Dislike self                                          | "         |
|                                  | 4- Feeling of inadequacy to participate                 | "         |
|                                  | 5-Inability to respond in class                         | "         |
|                                  | 7-Hiding behind others                                  | "         |
|                                  | 9-Inability to join merry makers                        | "         |
|                                  | 10-Hesitancy to try out                                 | "         |
|                                  | 13-Wanting to be different for acceptance               | "         |
|                                  | 14-Sad and angry at self                                | "         |
| 15-Hating and hurting self       | "                                                       |           |

Matrix 7.2.1 gives Deepa's iBs as well as her EDBs. Her fears, her anxiety and her poor self concept and anger causing situations. When one tells and believes in pessimistic, cynical, hopeless ideas and make predictions about an unenjoyable future, they tend to feel sad, morose, miserable and depressed" (Ellis 1977; Hale, Strickland 1976).

FIRS gives the description of Deepa's fears. ARS indicates that she rarely expresses anger. She being of depressive nature showed very little tendency to express anger. ACQ seems to confirm her tendency to be continually upset about something or the other. PSCRS also reinforces her inferiority complex. She always considers others better than her. For fear of rejection she avoids joining a group and keeps day dreaming a lot. Her desire to be some body else seems to be the result of her poor self concept.

### 7.2.1 RET and Deepa

Photo of C.Session The treatment of RET was given to Deepa through group and individual counselling sessions. She had 30 individual sessions and 20 group sessions. Deepa was very regular and punctual for all these sessions. She did the assignments seriously and regularly. REE, REI and CBM were



21. Deepa and the Investigator.

given to her during the individual as well as group sessions. In addition to the counselling sessions Pre-tests and post-tests were administered. It took a number of sessions to deal with her strongest iB No-11. 'I must be worried about others and other's problems'.

### 7.2.2 Group Counselling Sessions.

During the group sessions, Deepa was given a number of chances to overcome her fear of facing the audience and fear of answering. Through CBM, she was enabled to express herself in small groups. (Nixon, Charles, Singer, George 1993). Deepa gained social competence and development of coping skills (Kendal, Philip 1992). She gained confidence and freedom. She was encouraged to participate in dance, song and music. Deepa showed greater confidence in her abilities and even joined the school band. She was selected to represent the school band at Lakshadeev. Deepa showed progress in communication in group discussions and learnt RET theory and RET-Steps.

### 7.2.3 Glimpses of Individual Sessions.

Inspite of 30 individual sessions, Deepa is not fully freed from her iB's and EDB's. Five sessions were required to help her to see the foolishness of her strongest iB No-11.

I; "How were you last week? Is there anything that caused you much worry or depression?"

D; "Yes. I was upset about that teacher's father who is

paralysed. The teacher should look after her father-in-law. He is suffering so much. She should try to reduce his sufferings. It is terrible not to look after him. She must be kind to him. I can't bear such behaviour. It is the servant who is doing all the work that a daughter-in-law 'should' do. It is not right. Don't you think so? I feel daughters-in-law should look after their fathers-in-law. If they don't do it. It is terrible. It is very bad. It is horrible.

-----

1. Deepa has had a number of sessions and she is free now to express her view points to the investigator, she feels very much at home with the investigator.

-----

I; "Where is it written that daughters-in-law, would look after their father-in-law. It would be nice, if they took care of them. Suppose, she is unable to do because of her other work then what? Besides she, as a human being has every right to be wrong. She even has the right to decide how she should look after her father-in-law."

-----

2. Deepa seemed to have seen the rational behind the actions of the other.

-----

D; "It does not matter then if someone else looks after him. All that is needed is that he is taken care off."

I; "Yes. you are right."

iB No-6 "Others and other things are responsible for bad and unhappy events." iB No-2. "I must be perfect in everything I do".

-----

3. Deepa had fallen sick and she was very depressed as the first term examinations were approaching.

-----

D; "I am very depressed these days."

I; "Why? What is happening?"

D; "Examinations are approaching and I am not ready. Besides I was sick and so I missed a number of classes."



- I; "What is the activating agent here, Deepa?"
- D; "A" - illness and examination."
- I; "What are the consequences of your illness?"
- D; "C". Anxious and depressed for two days."
- I; "Let us see what led you to depression. What were you telling yourself about the approaching examinations?"
- D; 1. "I will get less marks.  
2. Others will get more marks.  
3. My rank will go down.  
4. I will get scolding from my father.  
5. It is a shame to get less marks and I can't stand it.  
6. I won't be able to face my parents.  
7. It is terrible and bad if I fail to get good marks.
- I; "The statements 1 to 4 can be considered rational. Why are these statements rational? They are a reality you cannot avoid them. But statements 5 to 7 are irrational why? These statements are the outcomes of two IBs namely, number 2 and 6. What do they state?"
- D; "2. I must be perfect in everything I do. Here I must score very high marks. I can't get low marks. Number 6- Bad and unhappy events are caused by others and other things, my illness before the examination."
- I; "Why do you say you were depressed for two days?"
- D; "For two days I found it difficult even to study?"
- I; "You fear, your father's scolding and tell yourself I can't face it. How many times have you faced it?"
- D; "Many times."
- I; "Then your statement I can't face is not true. You had faced it in the past. So, you can continue to face them in the future. Of course it is very unpleasant. Since you are used to facing in the past, can you face it in the future also?"
- D; "May be it was very painful in the past. So I suppose I can face it in the future also?"
- I; "You didn't die of shock because of his scolding? How do you think you will face them in the future?"

D; "More peacefully."

I; "How?"

D; "I will tell myself it is okay if I get scolding, because if he can't understand the reason of my poor performance let him scold. It is his problem."

I; "Excellent. It is true, when you go for examinations after the illness, you are not able to do as well as when you are okay. If dad is sensible he needs to understand that. If he can't and doesn't want to and scolds you, then you don't need to get upset. Does your father get angry easily?"

D; "Yes. For everything he gets angry. He scolds mummy and brothers as well."

I; "How do they take it? Do they also go to the corner and cry like you?"

D; "No. They just keep quiet and don't seem to bother about his scolding."

I; "So its dad's habit. But then why do you get so bugged about it? You seem to keep telling yourself that others and other things are responsible for your life and happiness. You think, that dad's saying, You are clever, when you get good marks, will make you happy. So when you can't get these you get depressed. Is this true?"

D; "Yes. But now I see my happiness is in me. I can be happy even if I don't get good marks". Thinking creates Emotion and ABCD can help in changing thinking (Lazarus 1976; Bandura 1974.)

I; (REE) All the people get illnesses. Just because of an illness you may not do well. This does not mean that you are going to do badly. Possible you may not do as well as you did before you were ill. Possible, if you work hard you can make up those few days portions. Even if you didn't succeed in doing so, you don't have to get upset. As long as you do the best you can, you could be happy. What is expected of you is to do your best. What could you tell about the examinations and the illness?"

D; "It is nothing terrible. May be I needed rest, let me take the maximum rest. I get more love from all at home. Let me enjoy this now. I will do what I can in the examinations. Anyway by getting depressed and worried I am only creating more problems. So let me just relax."

- I; "Good. Life is a mixture of sorrows and joys, health and illness, successes and failures. It is good to accept these when these are presented to us. So how will you face painful experiences in the future?"
- D; "By accepting the reality. By accepting the reality I mean accepting the fact that life is a mixture of pleasant and unpleasant experiences."

We see the effect of REE in Deepa is effective. It has increased her self esteem and decreased emotional distress. (Leaf, Russel, C. Krauss, David, H, Dant-Zig, Stephen A, Alington, Diane E 1992). She is perceptive and is able to apply the learning of RET she had received. We also notice a great desire in her to get out of her depression and misery.

### 7.3.0 Objective 3

To study the impact of RET in bringing about positive changes in Cognitive and Affective Domains by Reducing or Replacing iBs with rBs thus reducing or removing Depression.

Table 7.3.1 Impact Of RET On Depressed DEEPA.

| Names | Pre-test                           | Post-tests          | Difference         | Remarks                 |
|-------|------------------------------------|---------------------|--------------------|-------------------------|
| BIBD  | All the irrational beliefs present | Only one is present | Absence of 2 to 12 | Significant improvement |
| BIRBQ | Score 201                          | Score 82            | - 119              | " "                     |
| FIRS  | " 94                               | " 58                | - 36               | " "                     |
| ARS   | " 42                               | " 46                | + 4                | A sign of assertion     |
| ACQ   | " 92                               | " 54                | - 36               | significant improvement |
| PSCRS | " 56                               | " 36                | - 28               | " "                     |

## Bell's Adjustment Inventory.

|           |        |       |   |    |
|-----------|--------|-------|---|----|
| Home      | 23-VUN | 18-UN | - | 5  |
| Health    | 11-UN  | 13-UN | + | 2  |
| Social    | 20-A   | 16-A  | - | 4  |
| Emotional | 22-VUN | 14-UN | - | 8  |
| Group     | 76-VUN | 60-UN | - | 16 |

VUN - Very unsatisfactory  
 UN - Unsatisfactory  
 A - Average.

Table 7.3.1 shows the areas of progress in depressed Deepa. Her iBs are reduced and many of her EDB like fears, anxiety, and poor self concept. Her personality too shows slight improvement.

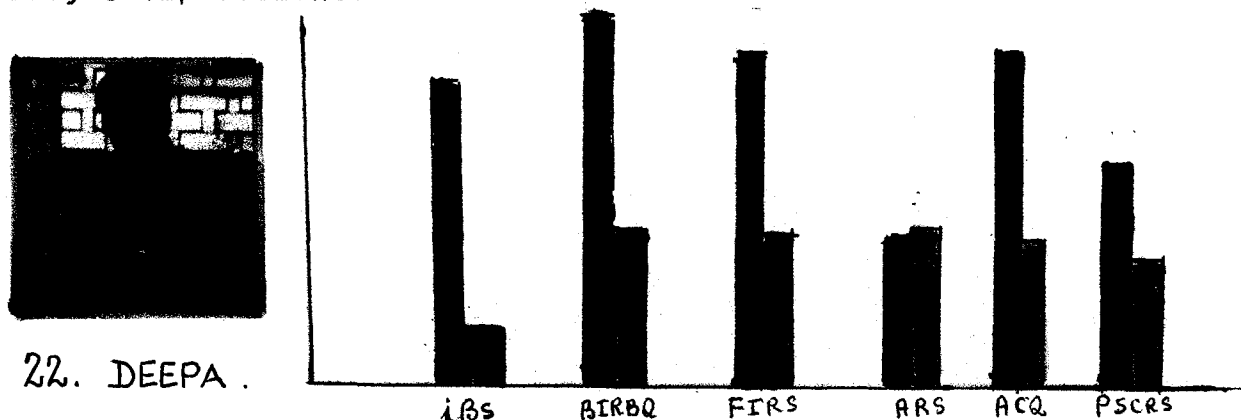


Figure 7.3.1 Comparison Of Pre-test, Post test.

Scores Of IPTs Of DEEPA.

Figure 7.3.1 clearly shows the effect on the treatment of RET on depressed Deepa. From the feedbacks received and PO of the investigator it is evident that Deepa has shown progress in her self acceptance and acceptance of others and situations.

Deepa: "I am not like before - I have changed much. Before I met you I used to cry everyday. I didn't like me. I wished I was some one else. But it is not so now. I am happier than before".

### 7.3.1 Investigator's P. O.

Deepa who was often in tears for individual sessions in the beginning, is often seen smiling now. She looks happier and seems to enjoy being herself. She is freed of her depression causing thinking and beliefs considerably and hence she accepts herself as she really is. Her 'shoulds', 'musts', 'oughts', 'terrible', 'horrible' and 'cant's' have reduced. The reduction of these words in her vocabulary is also a sign of her emotional growth and maturity. She has learnt to accept the reality about herself, the world and others to some degree. And this helps her not to get depressed when others misbehave, shout or get angry.

Though others at home have not changed, namely her father mother or brothers, she is still happy because she has learnt to accept herself and others as they are. The changes that have taken place in her thinking have also affected her feelings and they in turn her behaviour .

It is evident from the feedbacks received from her teachers, classmates, family and Deepa that these changes are observed by all. Thanks to RET's capacity to free people from Depression to freedom.

Matrix 7.3.1 Feedbacks From Teacher, Peers, Family And Deepa

| Before RET                                                                                                                                                                                                                                                                                                                                                                                          | After RET                                                                                                                                                                                                                                                                                                                                                                                                              |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>a) <u>Teacher</u>: with drawn shy, studious, submissive, non-volunteering, lacked confidence, suffered from inferiority complex, poor self image, a feeling of helplessness, sad, aloof, depressed, non co-operative in co-curricular activities and seemed to have an inner struggle. She is no problem to teachers, others and is neat and clean.</p>                                          | <p>She is more cheerful, active, Co-operative, shows more interest in studies and makes an effort to volunteer and shares the responsibilities, more sociable, relaxed and takes part in activities. She visited Lakshadeev as a member of the band team. "She is not the same Deepa. She is changed, more friendly and sociable. I am very happy to note the changes in her."</p>                                     |
| <p>b) <u>Peers</u>: She is quiet, gloomy, moody, withdrawn, not active, speaks only to one or two friends, looks sad, does not attend class meetings and she does not volunteer to do any work of the class.</p>                                                                                                                                                                                    | <p>Now she is more active cheerful, cheerful, happier and has made more friends. She also attends class meetings, visited Lakshadeev with the school band, participated in co-curricular activities, co-operated with friends and class mates and has more friends and she also studies better.</p>                                                                                                                    |
| <p>c) <u>Family</u>: Deepa is very touchy, cries often, can't take corrections, wants to have her ways, looks sad and depressed, gave up music classes, she is frightened of father and can't get along with second brother, avoids pain and difficulties, lonely, withdrawn, frightened, brooding, moody, unhappy about her colour and height. "She sleeps with us even now." said her mother.</p> | <p>She is not so touchy, more active assertive, pleasant and communicative. "I don't see her crying now in the corner. She is less fearful, gets along better with father and brothers. She took part in co-curricular activities, visited Lakshadeev with school band. She now tries out new recipes and cooks better. She also sleeps alone in her room. I am happy with these changes in her," said her mother.</p> |
| <p>d) <u>Deepa</u>: I feel sad, lonely, worried, depressed, and often cry, find difficulty in speaking to strangers or to</p>                                                                                                                                                                                                                                                                       | <p>I am not the same, I rarely feel lonely, useless or depressed now. I can mix with strangers and others. I like me, my fears have</p>                                                                                                                                                                                                                                                                                |

Matrix 7.3.1 Feedbacks From Teacher, Peers, Family And Deepa

(Continued)

| Before RET                                                                                                                                                                                                                                                                                                   | After RET                                                                                                                                                                                                                                 |
|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>express my feelings and ideas. I don't like me, my colour and height. I even hate myself. I feel nobody loves me, often feel rejected by family and friends. I have many fears, no friends, no fun, unhappy and miserable. I want to be free and happy like others. I keep brooding about calamities.</p> | <p>reduced. I can sleep alone now. I am not worried about my height and colour and can even express my ideas, to my father. I am not brooding about the possible calamities and my stage fears have left me. I have confidence in me.</p> |

7.3.2 Process Product Model Of RET  
On Depressed Deepa

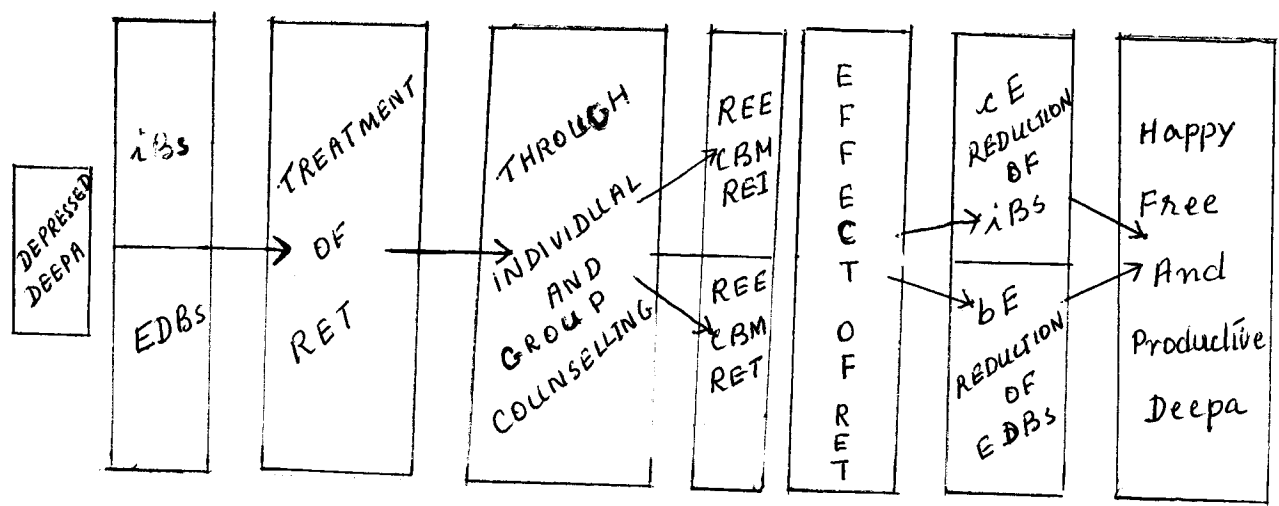


Figure 7.3.2 explains the process as well as the product of the treatment of RET given to depressed Deepa briefly. It was effective in Removing Depressions in Deepa by enabling her to accept herself, others and the world by reducing and removing her iBs and EDBs thus bringing about 'cE' and 'bE' through individual and group counselling sessions. Therefore RET could be effective in dealing with cases of depression.

7.4.0 Emerging Ground theory.

Knowledge of RET and RET-Steps seems to have given depressed Deepa an insight into the relationships between her iBs, depression and other EDB's, REE and RET seemed to have enlightened and motivated her to give up iBs responsible for her depression CBM, PRE and HRS have helped in strengthening her SWBs and rBs.



## CHAPTER VIII

### RET AND ANGRY MARIE (CASE STUDY V)

#### 8.0.0 Introduction

"Anger is one of the most crucial emotions in terms of its implications for psychological adjustment and physical health. It has been pointed out that psycho-social factors are important determinants of anger" (Ellis 1977; Averill 1982, 1983, Micann and Braggo 1989). Marie was referred by her class



23. Marie

teacher for her aggressive behaviours. "She used abusive language, is violent and aggressive. She beats, hits, pinches and spits on others" said; her class teacher "But when you question her she starts crying" added her teacher.

PO of the investigator brought to light the following problems of Marie namely feelings of rejection, insecurity, inferiority complex, poor self concept, incapacity to concentrate, her feelings of helplessness, guilt for being a problem at home and in the school. She experienced guilt, continued comparison with her brother, abusive language and battering for her poor school performances, rejection of her peers in the school-all these added to her self rejection and pain. No one wanted to be near her in the class.

#### 8.4.0 Objective 1

To identify the origin and development of irrational beliefs (iBs) responsible for Emotionally Disturbed Behaviour (EDB) namely Anger in High School Girl MARIE through knowledge of RET.

#### 8.1.1 Marie And Home Environment

a) Family constellation: It is a unitary family, father, mother and children live together.

Father: He is a business man and does not talk much, he has given the responsibility of bringing up children, their education and disciplining to his wife.

Mother: Mother suffers from asthma and gets irritable easily. She is also a student of the same school. Marie's poor academic and social performances humiliates her. So she seems to abuse Marie and punish her mercilessly, so much so her husband often corrects and warns her. She seems to favour her son and spends most of her time with him. "I do not know miss, why I get so angry and I beat her a lot. My husband tells me not to do that because if she runs away from home it will be even worse. So please leave her alone," Said her mother during one of her interviews.

Brother: He is four years younger to Marie. He is loving and obedient to his mother. Since he is thin and weak

mother sides and protects him. He takes advantage of this and irritates and hurts Marie often.

Marie: Though she is weak in studies, she is very competent in running the house. "She can manage the house far better than her mother," said her father once during an interview. Marie is aware of her other abilities but she hates studies and the very word 'study' irritates her. It was interesting to note that Marie bullied and hurt the weaker sections of the students of her class. She was afraid of very good students, strong class mates or powerful ones in the class. One day she throttled her classmate because she teased her. And the girl got temperature after that and it is supposed that it was out of her fear that the girl got fever.

b) Marie's Attitude Towards The Family: Marie is not happy in her home. Home is a place of humiliations and torture for her. She prefers to be away whenever she can. It is a place of failure. But it is also a place she experiences more freedom. She is a voracious eater and she continually eats and this is the only thing she seems to enjoy. Though she is often punished by her mother, she also bullies her and gets what she wants. It is strange to note that mother is not in a position to read her daughter's behaviour and therefore is unconsciously spoiling her by giving into Marie's whims and fancies. She often feels rejected and humiliated. "My mother loves only my brother. She often kisses him. But she never kisses me. I

feel jealous of him and therefore I hurt him. Before he was born everyone at home loved me very much. I hate him. After his birth my life became miserable," says Marie.

**b) Emotional Climate:** It is tense for Marie as she feels continuously threatened by the presence of her brother. She feels lonely, sad, upset, incapable of relating to many of her cousins. She avoids going for family get togethers. She is often left alone while her brother is often taken for outings. Marie prefers to stay at home and enjoy the food. She tells plenty of lies to escape punishment but her lies finally brings her double punishment. She often chooses SDBs that result in emotional stress and strain for her as well as tension for others.

**c) Relationships :** Parents get along well with each other. But Marie and her brother **continuously** fight for attention of parents and brother wins it often and Marie ends up getting punished for her misconduct . Marie prefers her father to mother though she is afraid of him. She gets along well with parents except in school work . Parents do encourage and support their children. Their forcing her to study all the time irritates Marie and she refuses to study. "I hate to study. I don't want to study. I know if I study I can do better. I just don't feel like," said Marie. There is constant power struggles between the siblings. Though her brother is younger to her, he often dominates her on the

strength of his school achievements. They often use abusive language and even hurt one another physically. Part of Marie's problem is also her eating habits. She has no control over food. She even goes around begging in the class when she sees tasty food items. She often takes money, borrows money to buy and eat snacks, patties and ice-cream. Sometimes she eats two, three ice-cream cones or cups. She is too fat for her age and people on the road pass remarks like 'little elephant'.

d) Economic status : She comes from upper middle class family with all the modern comforts. A big house, she has a room to herself, car and other luxuries.. Her grand father was a very famous doctor of the city. They also own estates and receive income from their rubber plantations, in addition to their business in the city. She often received expensive gifts from relatives and plenty of pocket money. This could be one reason of developing this voracious eating habit. "She buys 'three to four ice-cream cups and eats," says her friend. Marie was the first grand child and her parents got her after losing two children. So in the beginning, she was pampered by all her family members. She was given everything she asked for without discipline.

e) Religious beliefs and Values: They are syrian Roman Catholics. The family follows the religious customs of the community. Religious practices like prayer, and mass form part of their daily life. But religious values like forgiving,

sharing with the poor, respect and acceptance of others do not seem to be a part of Marie. For Marie comfort and easy life is what she wants. Fun and ~~merriment~~ would be ideal. She avoids hard work and discipline.

f) Upbringing Style : "The environment of the individual not only creates the conditions for normal cognitive, affective development, but also provides the basis for the child's learning of situation-specific adaptive behaviour as well as acquiring of mediational control of emotions. Parents as role models and reinforcing-punishing agents play a major part in preventing, minimizing, or exacerbating emotional and behavioural problems in their children" (Almeida 1989; Ellis 1962) has consistently maintained that the worst manner in which parents can bring up their children is that of blaming them for their mistakes. Such blaming encourages children to blame themselves for their mistakes and this inevitably leads to chronic feelings of hostility, guilt, anxiety and low self esteem". Most of Marie's problems seems to spring up due to the upbringing style. Marie is uncertain of the treatment she may receive and hence developed a number of EDBs.. Upbringing style **received by Marie** seemed to move from dictatorship to uncontrolled freedom. She lacks self discipline.

#### 8.1.2 Marie's Achievement

Marie's performance at school is not satisfactory. She

has talents in music, dancing, acting and cooking and she uses her abilities in music and dancing to distract others from their studies. Marie did not take part in co-curricular activities like music, painting, singing or acting inspite of having the talents, she did not participate in any competitions held by the school or the state.

Marie showed fast progress when she started the treatment of RET. Column 3 of table 8.1.4 indicates the progress from 1 to 3. So she was promoted to class IX. Though she could not maintain the same position in IX. She still did well for the first terminal. One can notice a sudden fall during the second term. Continual nagging of the mother and pressure to do well in the school caused an aversion for study. She rebelled, disobeyed and avoided her school work. Marie at this stage showed regression. A number of sessions were required to get her to come out of her aversion for studies and Marie had too many emotional problems to handle therefore the investigator decided to concentrate on her SDBs rather than achievement. Marie did make an effort but she failed. She was able to accept failure as part of life and was more relaxed. The 6th column shows the progress she made in studies as a repeater. Though she failed, she has gained more insight to live a happier and more normal life.

### 8.1.3 Psychological Data

Weschler's test of Intelligence showed her I. Q. as 100.

Bell's Adjustment Inventory.

Home - Unsatisfactory  
 Health - Very insatisfactory.  
 Social - Unsatisfactory.  
 Emotional - Unsatisfactory.  
 Group - Very unsatisfactory.

Table 8.1.1 Performance In School Subjects

## a) Table 8.1.1 Marie's Achievement

| CLASS VIII  |          |          |          |          | CLASS IX |          |  |
|-------------|----------|----------|----------|----------|----------|----------|--|
| Subject     | 1st Term | 2nd Term | 3rd Term | 1st Term | 2nd Term | 1st Term |  |
|             | 50       | 50       | 50       | 50       | 50       | 50       |  |
| Malayalam I | 10       | 15       | 20       | 14       | 09       | 28       |  |
| " II        | 9        | 15       | 22       | 19       | 12       | 20       |  |
| English I   | 20       | 20       | 22       | 20       | 19       | 35       |  |
| " II        | 10       | 20       | 18       | 21       | 15       | 25       |  |
| Hindi -     | 5        | 18       | 20       | 17       | 18       | 30       |  |
| History )   | 20       | 22       | 25       | 31       | 6        | 40       |  |
| Civics )    |          |          |          |          |          |          |  |
| Geography ) | 5        | 10       | 15       | 9        | 6        | 25       |  |
| Physics )   |          |          |          |          | 27       | 24       |  |
| Chemistry } | 5        | 22       | 26       | 18       | 33       | 26       |  |
| Biology )   |          |          |          |          |          | 10       |  |
| Maths - I ) | 10       | 20       | 22       | 15       | 10       | 19       |  |
| Maths - II) |          |          |          |          | 10       | 19       |  |

Table 8.1.2 gives the picture of presence of iBs in angry Marie. All the iBs are present in her and except iB No.2 all are very strong.

Table 8.1.3 shows the sharing of iBs of Marie with her family as well as with her teachers. The iBs learnt at home



seems to be reinforced in the school. Table 8.1.3 also indicates the origin and development of iB's in Marie.

Table 8.1.2 Identification Of iBs And Their Intensity In  
Angry Marie

| Test  | Score/iBs                  | Remarks                                                                     |
|-------|----------------------------|-----------------------------------------------------------------------------|
| BIBD  | 1,2,3,4,5,6,7,8,9,10,11,12 | Presence of all iBs                                                         |
| BIRBQ | 11,9,5,6,12,3,8,7,4,10,1,  | The numbers are marked according to their intensity<br>11-1 are very strong |
|       | 2                          | strong                                                                      |
|       | Score - 234 (pre-test)     | very high                                                                   |

Table 8.1.3 Communality Of Marie's iBs With  
Family And Teachers

| Description of iBs                    | Family | Marie | Teachers |
|---------------------------------------|--------|-------|----------|
| 1. dire need for love                 | ✓      | ✓     | ✓        |
| 2. " " perfection                     | ✓      | ✓     | ✓        |
| 3. punishing the wicked               | ✓      | ✓     | ✓        |
| 4. having one's way                   | ✓      | ✓     | ✓        |
| 5. fear of the repetition of the past | ✓      | ✓     | ✓        |
| 6. Others as cause of unhappiness     | ✓      | ✓     | x        |
| 7. Wanting others help                | ✓      | ✓     | ✓        |
| 8. Evading difficulties               | ✓      | ✓     | ✓        |
| 9. Looking for perfect solution       | ✓      | ✓     | ✓        |
| 10. Recalls past pains                | ✓      | ✓     | ✓        |
| 11. Worry about others                | ✓      | ✓     | ✓        |
| 12. Demanding justice.                | x      | ✓     | ✓        |



### 8.2.0 Objective 2

To study the relationship between irrational Beliefs (iBs) and Emotionally Disturbed Behaviour (EDB) namely Anger in High School girl MARIE.

Matrix 8.2.1 clearly shows the relationship between Marie's iBs leading to her EDBs and resulting in Anger and aggression. Figure 8.2.1 is also the result of the data reduction of IPTs namely FIRS, ACQ, ARS, BIBD, BIREQ, and PSCRS. The investigator has summarised the result of these details into a figure to give bird's eye view of the whole picture of Marie before the treatment of RET.

#### 8.2.1. Investigator's Participant Observation (PO)

Marie was the most complicated student whom the investigator studied. Angry Marie suffered from self rejection due to poor self concept and anxiety. Her anxiety was based on her numerous fears and they in turn were related to her iBs as mentioned earlier in 8.2.1. No wonder Marie was so angry with self and others. For her life is too complicated, fears and anxieties coupled with poor self concept and iBs stifled her thinking and crippled her emotional life. No wonder she is angry with the whole world!

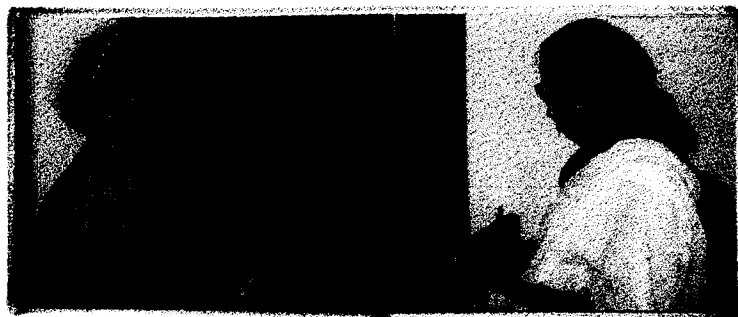
Marie at the age of 13 is also entering into the phase of her puberty. This is already a stressful stage for any

normal girl, how much more it might have been for her? Her teacher's found her an impossible child and parents a hopeless and difficult child. There was one thing that gave Marie relief and satisfaction from all these agonizing pains and tensions "FOOD". She is voracious eater and enjoys all types of food. Her capacity for food is that of three students of her age. Five buns for evening tea is a like "an apple for an elephant,". says her mother. The more they tried to cut down the more she went around begging for food in the class, or brought snacks and ice-cream cups from the hawkers or shops near the school. She often robbed biscuits and other food items from the house. She borrowed money from her peers to buy food at school. She told the investigator once. "I keep thinking about food all the time, in the class or elsewhere: while speaking thus her mouth seemed to be watering. This is where Marie found her only satisfaction.

Others observed, only her overt behaviour and branded her as 'A very aggressive girl.' The pre-test results of the IPTs enabled the investigator to enter her covert experiences. She noticed that Marie was a very insecure girl, rejected by self and others with only fears and anxieties of the future and the present. She was expecting the past pains and failures to recur. Would RET bring some positive changes? Would it help Marie to become aware of her covert behaviour? These important questions are answered in the section below.

### 8.2.3 Treatment Of RET And Angry Marie

a) Group Sessions Treatment of RET was given for Marie in groups as well as individually. She had attended the sessions in small groups as well as in the class. Marie was sometimes distracted in the large group. During the group sessions she showed a tendency to be distracted and to distract others. She received RET theory, REE, CBM in group sessions. Though CBM some of her fears were reduced (Arnkoff; Diana 1986) RET also reduced her aggressive tendencies (Nirmala 1989) and brought about a number of changes in her behaviour along with CBM (Miller, Alfred, R, Yeager, Raymond G. 1993). Marie also was empowered against being battered by her mother (Webb ; Wanda 1992). PRE also helped Marie to reduce her anger and anxiety (Hazaleus, Susan 4, Deffen Backers, Jerry L. 1986). Marie had a number of PRE sessions before the counselling as well.



#### 24. Marie and the Investigator.

b) Individual counselling sessions were used to enable Marie to see her self defeating behaviour patterns, her iBs that influenced her, her lack of discipline that is causing her

problems. Investigator's unconditional acceptance of Angry Marie helped her to progress even in her studies. She needed continual encouragement and approval. A break in the sessions due to her long contagious illness caused regression as well as mother's continual nagging brought about an aversion for studies. Since Marie had too many problems to battle with it was decided with her parents that she be freed from forced tuitions and studies even if she lost one year as she was too young for the class and she be given space, time and energy to deal with her iBs and emotional blocks.

### 8.2.3 Glimpses Of Individual Counselling Sessions

Dealing with her iB No.8. Tendency to run away from difficult and painful situations.

I; "When things are difficult you runaway. Why do you do that?"

M; "I feel I won't succeed. I can't do it. Others will laugh at me and it is terrible. So I do not want to give others a chance to laugh at me."

I; "REE" very often we run away from tasks that are difficult. Sometimes we do not want to try because we are lazy and we like to have an easy and comfortable life. Sometimes we keep away because we truly lack abilities. What do you think is your reason for running away?"

M; "I like an easy and comfortable life. I do not like to be in pain. I am also lazy".

I; "Why do you live Marie?"

M; "To have fun."

I; "We do need fun and entertainment. But all life is not fun and entertainment. We need to put in a lot of solid

work".

M; "I feel guilty."

I; "How do you feel after a fight with your brother?"

[ since Marie was silent, the investigator gives her a clue]. Do you feel happy or sad?

M; " I feel sad".

I; "What kind of a world would you like to have around us? A peaceful or violent world? (REE). You said you feel sad and guilty after hurting or fighting with your brother. So you lose peace. War begins in the minds of people and we can change war from our minds to peace if we change our thinking and beliefs through self talk. Does fighting brings you any benefit?"

M; "No".

I; "What sort of behaviour is fighting?"

M; "Self defeating."

I; (REE) If it is self defeating, then why do you cling on to it? You have learnt to fight. Since it is a learnt behaviour it can be unlearnt. If you want you can start new behaviour patterns. What you are doing now is reacting. You could learn to act rather than react. Do you want to continue reacting?" The investigator is helping.

M; "No"

I; (REE) SDBs do not help us in any way. Anger is self and other destructive. It causes sadness, guilt and breaks down good relationships. It takes away your ability to concentrate on studies. 'Violence begets violence'. It adds to suffering and pain, therefore it is better to give up anger. What do you tell yourself before getting angry?"

M; "He should not touch my things. He should not touch my money. He must obey me".

I; "So you know which words are causing you anger? Could you name them?"

M; "Yes. 'Should' and 'must'. I also use the word 'terrible' and 'can't', because I always want to have my way. When same one comes in my way whether it is home or school I get very angry."

[Marie has had a number of group sessions as RET]

I; "So you know why you get angry. Now I would like you to go through an exercise to help you to reduce your anger."

[She was allowed to go through REI experiences to face annoying situations without getting upset. A few sentences to counter her iBs 1 and 4 were also given].

REI had always a soothing impact on Marie. It helped her to partially overcome her negative feelings towards self and others (Holdemn, Limd, Carol 1988).

1. It is okay if others don't love me all the time.
2. It is not terrible if I can't have my way .

I; "How was the week? How many times did you quarrel?"

M; "I remember seven times".

I; "What were the situations that provoked you to quarrel?"

[Marie narrated the situations]

M' "1. While watching the T.V. I told him to put his feet down. He wouldn't so I hit him.

2. I told him not to take my pen and he took it. So I pinched him.

3. I wanted the big piece of chicken I told him not to take , but he took it. So I used abusive language



4. I gave him my pen for stickers. He did not give me stickers. So I hit him and he too hit me back.

5. While going for the movie, we fought again I don't remember the reason.

6. While playing the shuttle game, I wanted to start the game. But he started, so I hit him with the bat.

7. While he was sleeping, I called out to him. He would not get up. So I used abusive language and provoked him".

[Marie's iB's 4 and 11 seems to be responsible for all their quarrels. Her wanting to have her way in everything and taking responsibility for others' life in this case, her brothers.]

I: "Are you responsible for your brother's life?"

M: "No."

I: "Then why are you taking responsibility for his actions? why do you scold and punish him for his failure or mistakes? Is he not free to make mistakes?"

M: "Yes."

I: "Then what forces you to react with anger all the time?"

M: "I don't like anyone coming in the way. I want everyone to do what I say."

I: "Excellent. Do you think this is possible? Which iB is responsible for your anger mainly? iB No.4- It is terrible and bad when things don't go the way I want them to. You do not like mummy or daddy correcting you. You want to be free. How could you have avoided the quarrels with your brother?"

M: "By leaving him free and by not forcing him to do what I want."

I: "Exactly. Would you like someone treating you the way you treat your brother?"

M: "No"

I: "It is desirable if he listened to you. Possible you were shouting at him, thus provoking him to disobey. Does he obey you when you speak to him politely?"

M: "Sometimes".

I: "How did you speak to him on all these occasions?"

M: "Angrily".

I: "You are aware of the reasons for quarrelling : How would you give up this SDB?"

M: "By countering".

[Investigator suggested a few sentences to counter her]

iBs]

- I am not responsible for my brother's life.
- He is free to disobey.
- I can take 'No's from him and others without getting upset.
- Home work is desirable (Maultsby 1975; Ellis and Knaus 1977; Sherman, Mulac and Mc Cann 1974)

[Marie can tell any number of lies. She copies her home work. The investigator confronts Marie in this SDB]

I: "Why do you copy the home work?"

M: "Because it is very easy".

[Earlier we had seen that Marie wants to have a comfortable life without difficulties.]

I: "Why do you choose easy ways? [REE] Life is not made of easy things. Life is a challenge. It is meant for people who are prepared to work, to face challenges and difficult things. Finally the people who choose easy things become a failure in life. Then it is too late to correct it.

- Does copying help you?"
- M: "No".
- I: "Then why are you doing it?"
- M: "Not to get punishment."
- I: "What happens if you are punished? You keep telling I can't bear beating. Do you really want to get out of this habit?"
- M: "Yes."
- I: "What is the activating agent here Marie?"
- M: "A - Not doing home work."
- I: "What are the sentences you say before copying?"
- M: "1. Teacher will be angry with me. 2. She will scold me. 3. Others will think I am not good. 4. I want to look good in the presence of others. 5. I don't want to get punishment. 6. I want to avoid getting scolding. 7. Students must not laugh at me. 8. It is terrible to get scolding 9. I can't take it."
- I: "So what are the consequences of these sentences?"
- M: "I tell lies. I feel upset and guilty."
- I: "Do you get out of the problem by telling lies?"
- M: "No. Somehow I am caught. I get not only scolding but also beating from my mother."
- I: "So, your lying is self defeating. What sentences could you say to stop telling lies?"
- M: "1. It is useless telling lies. 2. The truth will be known one day. 3. Lies cause tension, anger, worry and take me away from reality. 4. I lose my peace of mind."
- I: "If all this happens to you, should you continue to tell lies?"

[We see Marie is beginning to 'D' - debate her own irrational beliefs and thinking. However she lacks self

discipline and perseverance. These are a block to the effectiveness of RET (Ellis 1974.). The pressures from her mother to study and the coaching classes in the morning and evening left her no time for relaxation. She showed regressions and aversion in study. Parents co-operation was lacking for a period. It was important that parents understood Marie's problems. So the investigator requested her parents not to tax her on studies because it was important to build positive self respect and counter her iBs that caused her so many EDBs. They were also asked to see to her discipline at home and to be a support and encourage her to persevere in her positive attempts.]

[ We notice in the case of Marie she still exhibited iBs and EDBs. She showed low frustration tolerance (LFT). She could not persevere in her home works and exercises. In spite of these drawbacks there is some reduction in her iBs and EDBs (Timothy Patrick 1977). "What parents can offer is a home, a place that is receptive but also has the safe boundaries within which the children can develop and discover what is helpful and what is harmful..... Hospitable home indeed is a place where father, mother and children can reveal their talents to each other, become present to each other as members of the same human family and support each other in their common struggles to live and make live. (Nouwen1975)", Marie's home environment lacked such an environment.

### 8.3.0 Objective 3

To study the impact of RET in bringing about Positive Changes in Cognitive and Affective Domains by Reducing or Replacing iBs

with 'rBs' thus reducing or removing Anger.

Table 8.3.1 Impact of RET and Pre-test, Post-test Scores Of IPTs

| Names | Pre-tests                               | Post-tests | Difference | Remarks              |
|-------|-----------------------------------------|------------|------------|----------------------|
| BIBD  | 1,2,3,4,<br>5,6,7,8,<br>9,10,11,<br>12. | 3,4,7,9,12 | 7' less    | significant          |
| BIRBQ | 234                                     | 198        | 36         | decrease             |
| FIRS  | 130                                     | 126        | 4          | sight<br>improvement |
| ARS   | 80                                      | 64         | 16         | improvement          |
| ACQ   | 97                                      | 85         | 12         | improvement          |
| PSCRS | 57                                      | 51         | 6          | sight<br>improvement |

In all these results it is noticed that there is progress in the reduction of iBs and EDBs. RET did bring about change along with CBM in Marie (Miller, Alfred R, Yeager, Raymond G 1993). RET helped in managing change in Angry Marie (Ostel, Allistair 1992).

### 8.3.1. Investigator's P 0

Before RET a) Interaction styles with teachers: With the investigator and the class teacher Marie was free. With others she was not free, and was frightened of them. She was distracted, annoying and restless in the class. She often got

scolding for her misconduct, lack of responsibility, for telling lies and copying home work . . . She needed a lot of attention. She took a lot of advantage of the freedom given to her. She liked the teacher trainees and bullied them.

b) Interaction with the peers: No student wanted to sit near Marie before the RET sessions. She was restless, distracting, talkative and hurting. If she liked someone she would kiss and lick them. When she was angry she called them names, used abusive language. Spit, hurt, kick, beat and even throttled once a peer when she teased Marie. "She is a big bully," said one of her class mates. "She is selfish and does not share a thing with others," said another. During the CBM when her friend asked her for a pencil she gave it with such reluctance and instructions; that when she needed a second time her colleague refused to take it from her.

c) Interaction To New Situations: She welcomes any new situation that is pleasant and to her liking. She enjoys fun, playing and fooling. She enjoys running errands, cleaning the board, minding the class and loves to boss over others". "When she was entrusted with the work of a monitor, for some time she was over demanding and was finding fault with practically every student," said her class teacher. She had an aversion to study. To escape studies, she would do any jobs.

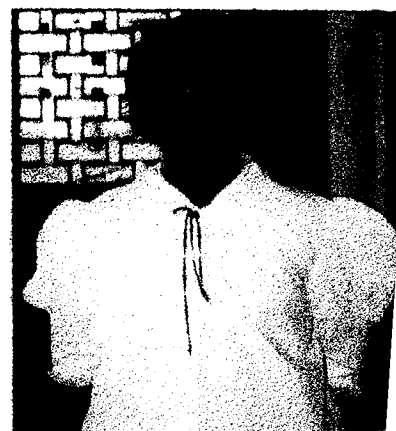
d) Her Reactions To Difficult Situations: She takes up

responsibility in running the house, cooking, seeing to the works, greeting visitors and other odd jobs. Marie finds difficulty in concentrating on her studies". The span of concentration is limited when it comes to studies and yet she enjoys computer games for hours" says her mother. The investigator observed in her opposing behaviour patterns. She is shrewd, discreet and has the capacity to gauge the seriousness of her friend's involvement with boys. At times she behaves kiddish. She lacked self discipline with reference to food, exercise and studies. She gets hurt easily and she shows her annoyance or hurt feelings by sulking, withdrawing or even through anger.

e) MARIE After RET: She has shown progress in her relationships with teachers, peers, and other family members. A number of her fears have decreased. Her self concept has widened and she accepts herself and others better. The details given by family, teachers, peers and Marie are not repeated again. Though she failed in class IX she is far better in studies and behaviour this year. All her present teachers say she answers in the class, she is learning better and does not exhibit any problems mentioned earlier.



25. RET Session



26. Marie after  
RET

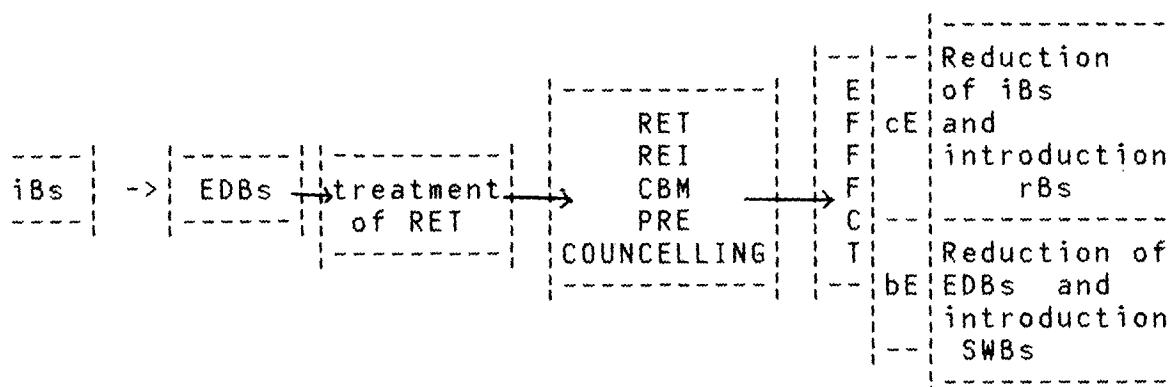
Matrix 8.3.1 Feedbacks Before And After RET

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              | After RET                                                                                                                                                                                                                                                                                                                                                                                                                                                    |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><u>a) Teacher</u></p> <p>Marie is a problem. She hits, hurts, spits, kicks, distracts restless, noisy, lazy, pinches, uses abusive language, lies, over-eats, borrows money, robs money, copies homework and is distracted in the class. At times she is timid, shy, sad and stubborn. She failed in six subjects and even got a zero for Biology. She is kept alone and no one wants to be near her.</p>                                                                                                                                                            | <p>She is now less noisy, more attentive, stopped hurting and using abusive language, less complaints from peers, answers sometimes, does home work some times, less lies, less copying, no borrowing money nor begging food. She is more accepted by the peers, more pleasant, cheerful and active. Showed steady progress in VIII Class hence promoted. Showed regression in IX after illness at a later stage she showed progress in studies as well.</p> |
| <p><u>b) Peers Before RET</u></p> <p>She hurts, hits, kicks, pinches, kisses, licks and goes begging for food. She does not share her food, or things with others, no one can touch her things but goes around checking others things. Fights, uses, abusive language, copies, tells lies, is lazy, distracted, restless, noisy, runs around in the absence of teachers, disobeys class leader, bites, hurts quiet girls, enjoys fun, food and jokes. She has changed her marks and suffers from an inferiority complex. No one likes to sit near her in the class.</p> | <p>She is much better in her behaviour towards teachers and classmates, more attentive, obedient and loving, less fighting, hurting and has made friends and some like to sit with her. Sometimes she still copies and also does her home work. She is loved by the class and others enjoy her jokes and fun. She is making an effort to study. She is not begging for food now.</p>                                                                         |
| <p><u>c) Family Before RET</u></p> <p>She does not study, gets angry, fights with her brother, hurts him, disobedient, cries easily, no self discipline eats a</p>                                                                                                                                                                                                                                                                                                                                                                                                      | <p>Her behaviour is far better, less fighting, more obedient and disciplined, showed interest and improvement in studies. After the illness she regressed after</p>                                                                                                                                                                                                                                                                                          |



Matrix 8.3.1 Feedbacks Before And After RET Continued

| Before RET                                                                                                                                                                                                                                                                                                                                                                                                                                  | After RET                                                                                                                                                                                                                                                                                                                             |
|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>lot, uses abusive language, tells lies, copies, hurts classmates, hates the word study. She is good in running the house, she is good in music but gave up music lessons. The problems began after the birth of her brother. She fights with the mother and wants to have her way in everything.</p>                                                                                                                                     | <p>sometime she showed progress. She is more understanding, helpful, less angry and stopped begging food. At least 2 hours she sits and studies. She does not spend too much time watching T. V.</p>                                                                                                                                  |
| <p><u>d) Marie Before RET.</u></p> <p>I hate myself and am angry with me. I have many fears. Some are examinations, teachers, principal, failures, blood, punishment and scolding. I tell lies, I copy, I hurt, fight, use abusive language, I avoid studies and difficult works. I want to have my way in every thing. If some one disobeys I scream and hurt that person. I am worried upset and sad. I like school but hate studies.</p> | <p>I like myself and my fears have reduced. I don't get angry and worry others like before. I obey others and am beginning to like studies. I don't use abusive language. I can talk to my brother lovingly. I spend less time in front of the T. V. I have many friends in the class. I don't beg food but share mine sometimes.</p> |



Figur 8.3.1 Process Product Model Of RET And Angry Marie

### 8.3.2 Emerging Ground Theory Of The Impact Of RET On

#### Angry Marie With Multiple Problems

Knowledge of RET and RET theory seemed to give Angry Marie **with** multiple problems, an insight into the relationship that exist between her iBs, aggressive behaviour and other EDBs, REE and REI motivates her to give up iBs, anger and other EDBs, PRE, CBM and HRS help in the acceptance of 'rBs' and SWBs and strengthen them.

## CHAPTER IX

### RET IN GROUP (CASE STUDY-6)

#### 9.0.0. An Overview

This chapter deals in General the Scenario of the school and class VIIIB, selection of class VIII B, sites (persons and places) for study, the impact of school, home, teachers and mass media, in the origin and development of iBs, objective-wise data collection and analysis, identification of iBs and EDBs through IPTs and feedbacks from students, teachers, family and PO of investigator, relationship between iBs and specific EDBs, treatment of RET, RET-Theory, RET-steps, REE, CBM, out door activity, Home assignment, AE and group discussions, Effect of RET on iBs and EDBs, quantitative analysis of pre-test, Post-test scores and significance of difference between correlated means. The last part of the chapter high light the impact of RET through group counselling in reducing or removing iBs and EDBs, RET and Social Development, growth areas and RET and samples of student feed backs, and emergence of ground theory.

#### 9.1.0 Objective-1

To identify the origin and development of irrational Beliefs responsible for Emotionally Disturbed Behaviours (EDBs) like fear, depression, nervousness, anger, timidity, withdrawal and anxiety in High School Girls through knowledge of RET.

9.1.1 Matrix Phases of Treatment Of RET and Group

| Phases | Description Of The Phase                                                                                             | Objectives                                                                                |
|--------|----------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------|
| I      | -study of the school environment and school practices<br>-Description of the group class VIII B                      | Origin and development of iBs and EDBs<br><br>Knowledge of factors interacting with class |
| II     | -Influence of the Family, school and teachers<br>-Administration of BIBD                                             | VIII B and general knowledge of EDBs exhibited by class VIII                              |
| III    | -Identification iBs and EDBs through IPTs and feedbacks from students, teachers, parents and PO of the investigator. | objective -2<br>To study the Relationships between iBs and EDBs                           |
| IV     | -Treatment RET, REE, RET-Steps, CBM, Outdoor activities, Home Assignment, AE and Group Discussions.                  | Objective-3<br>Impact of RET in the reduction or removal of EDBs and iBs.                 |
| V      | -Impact of RET in group counselling                                                                                  | Objective-4<br>Effect of RET in groups                                                    |
| VI     | -Emergence of the ground Theory                                                                                      | Ground Theory                                                                             |

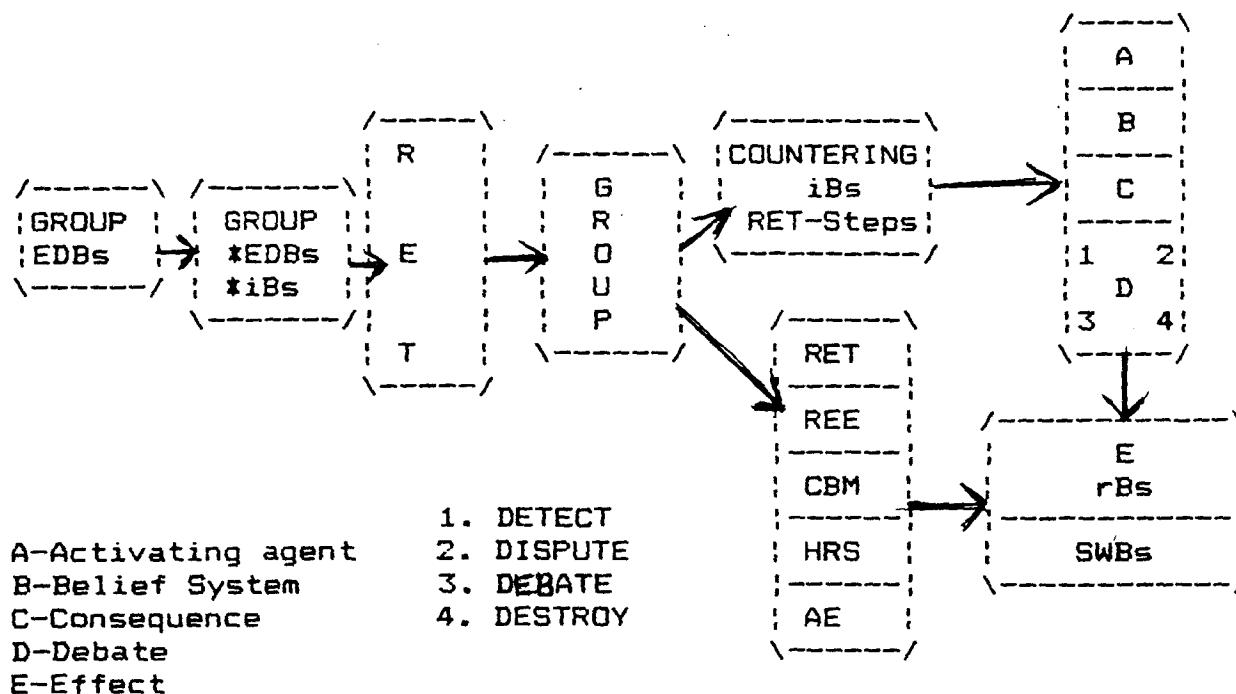


Figure 9.1.1 Inter-active Model Of RET For Group

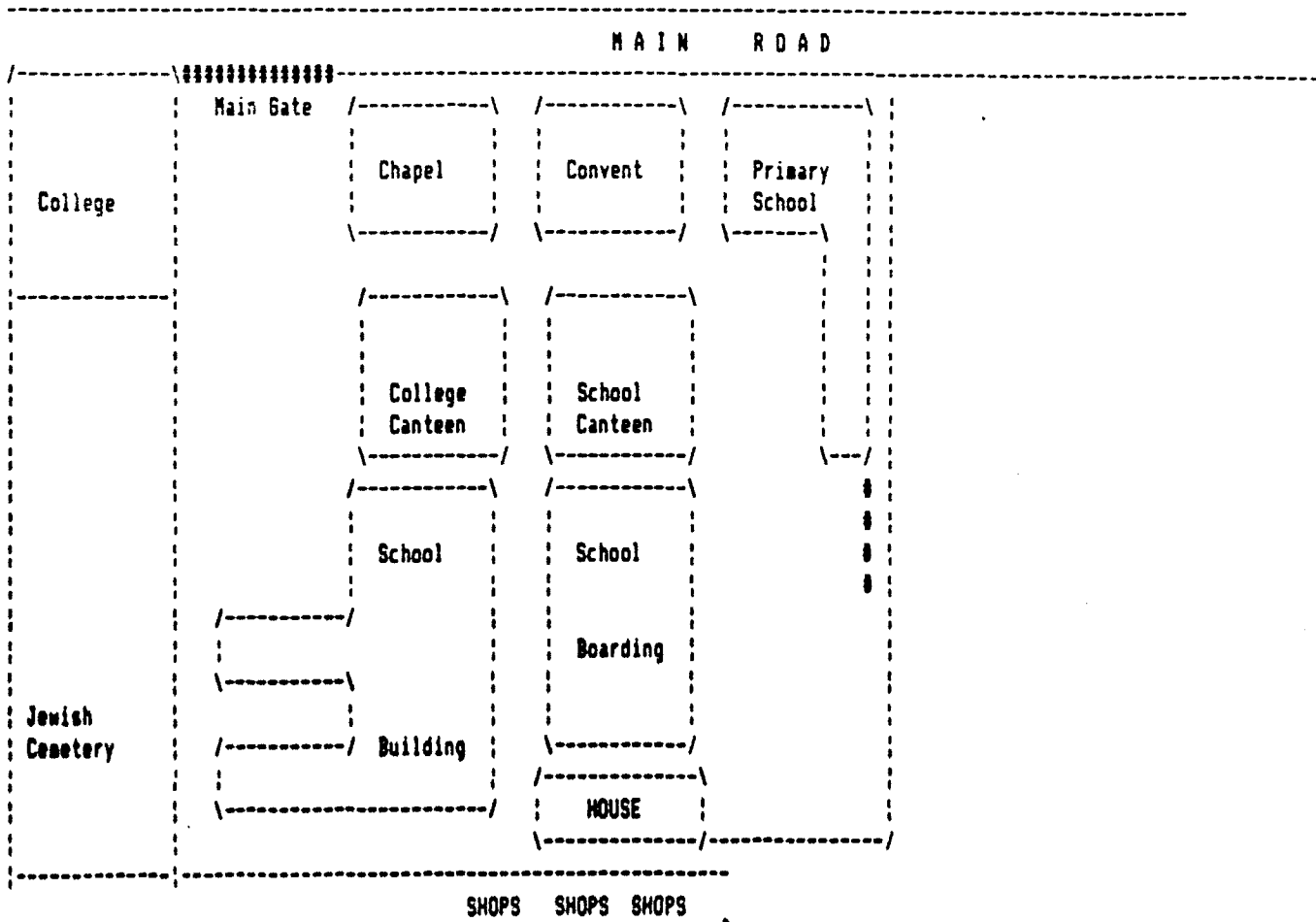


Figure 9.1.2 Location Of The School

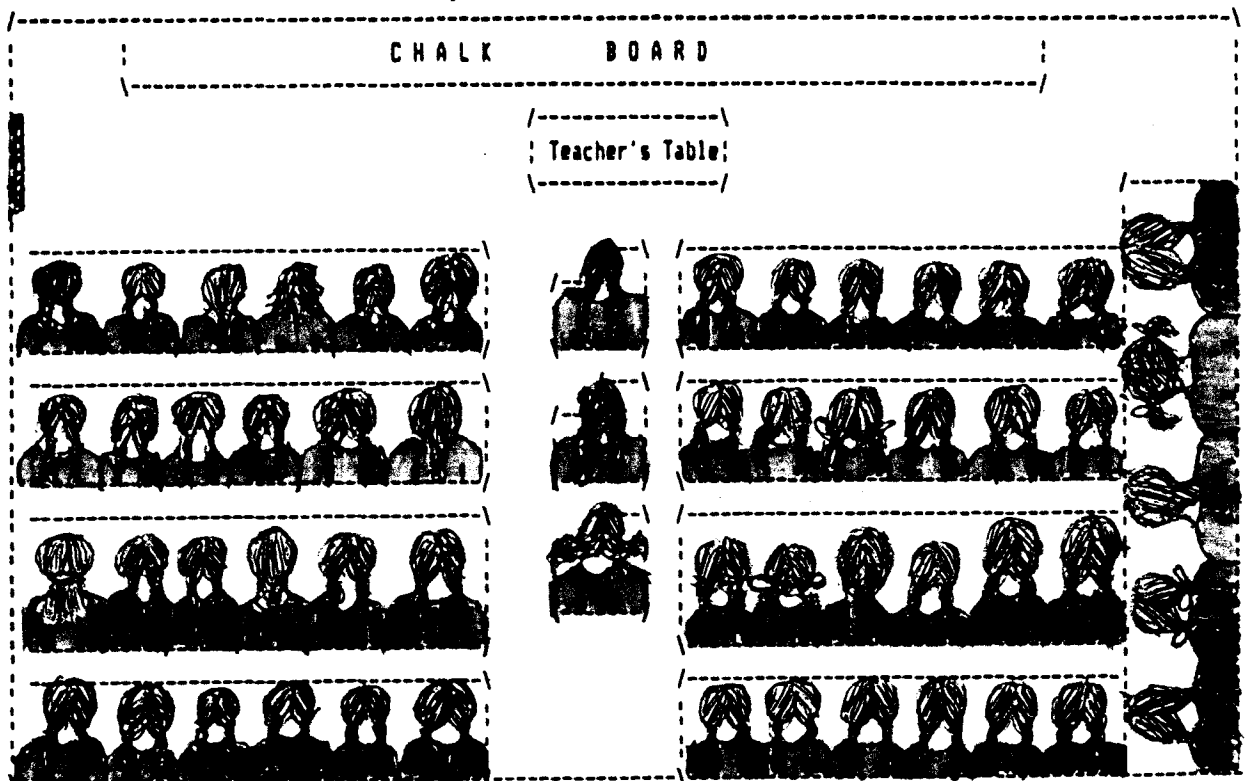


Figure 9.1.3 Classroom VIII B

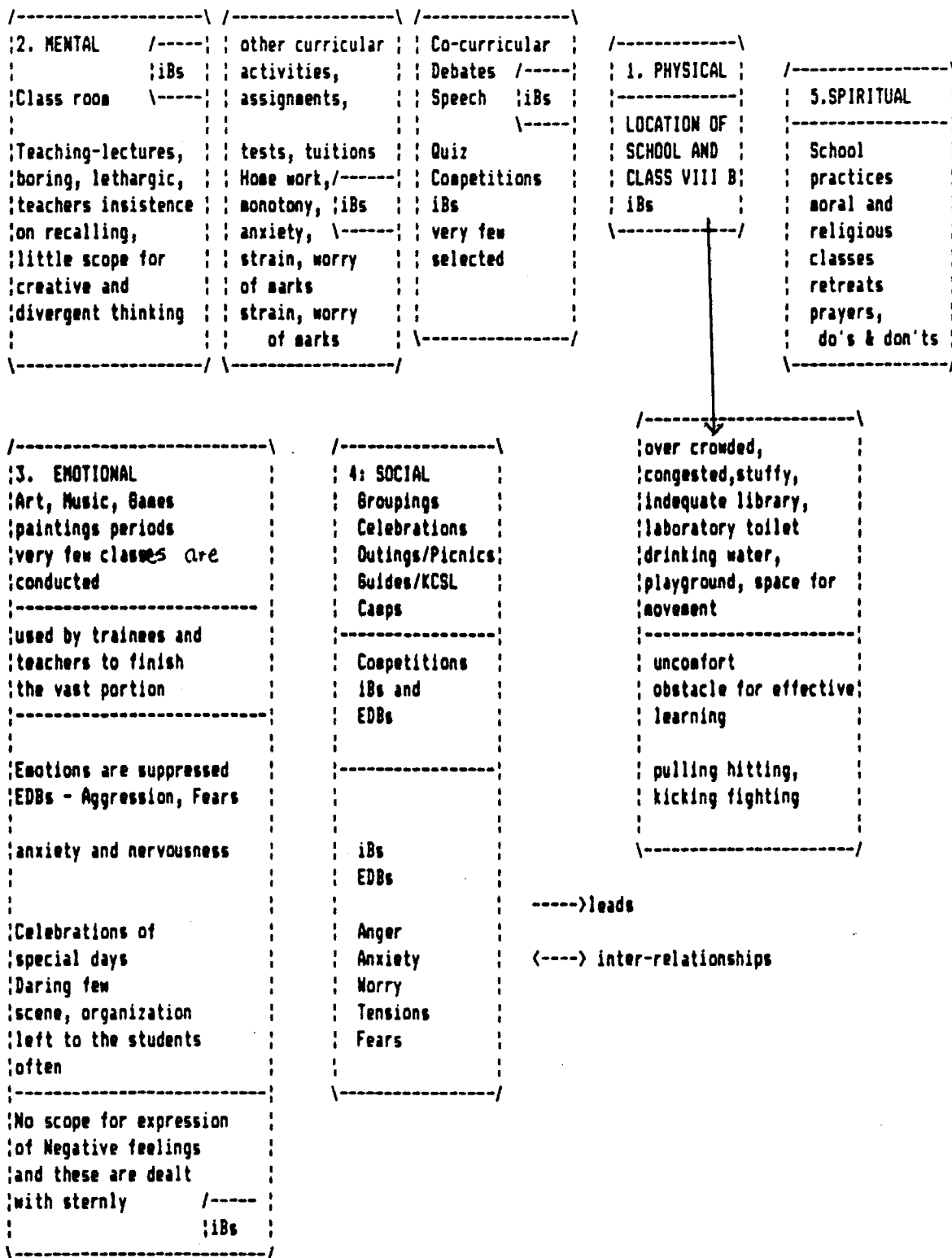


Figure 9.1.4 Scenario Of The School And Class VIII B

### 9.1.1 The School Environment

Figure 9.1.1 Scenario of the school and class VIII B gives us the different aspects that contribute in the origin and development of iBs and EDBs in High School Girls through the school environment.

1. Physical: The diagrams and the photographs clearly explain physical environment, location of the school, overcrowded buildings, lack of space, congested and stuffy class rooms, inadequate library, laboratory, drinking water facilities, playground and space for free movement cause discomfort for the growing adolescents who have to spent a great part of their day in school (9.30 am to 3.30pm). Class rooms were originally meant for 35 to 40 students are accommodating 55 to 70 students today. Such a situation causes restlessness in students resulting in EDBs like pushing, pulling, hitting, kicking and fighting for better comfort in the class rooms and outside leading to iBs.

2. Mental: Classroom teaching is result oriented. It is mainly lecture method. Some teachers are lethargic and boring. The insistence is on recalling with very little scope for critical thinking, divergent or convergent thinking and experimentation. IIs have high lighted these facts namely over loaded curriculum, tuition rackets, extra assignments, pressures from teachers, parents and school cause undue tensions leading to iBs and EDBs like anxiety, worry for marks and fear of failures.

Co-Curricular activities like competitions of speeches, songs, quiz and other activities are also inducing iBs that lead to EDBs like fear, worry and tension in school girls.

3. Emotions: Students can grow emotionally only in an atmosphere of freedom, acceptance and recognition. Periods allotted for art, music, painting, pre-vocation and games are rarely used for these purposes due to the groups of trainees pouring into the institutions from various organizations. These periods are taken by trainees and class teachers for the completion of the subjects, thus the chances for emotional expressions are further suppressed, leading to emotional strains and EDBs like anger, anxiety, fears and nervousness. Celebrations of special days like Onam, Christmas and School days are chances for emotional growth and development but a few daring students dominate the scenes and majority are left behind, since the students are left on their own to organize these activities. Scope for expressions of negative feelings are nil. "Such behaviours ought to be dealt sternly". Said the teacher. According to a number of teachers; "There is little scope for their emotional growth and development".

4. Social: School groupings, celebrations, outings, picnics, activities of guides, KCSL and camp are meant to develop social relationships and leadership qualities. Even through these a few emerge as leaders and they get plenty of scope for developing responsibility and accountability. Competitions are part and parcel in all these activities. These cause iBs and



EDBs like anxiety, anger and fears in those who participate. Sometimes there are quarrels between the participants. In spite of all these opportunities open to the students a number of students are with-drawn, shy, timid and keep away from others. Nothing is done to help these to come out of their comfort zones.

5. Spiritual: The school tries to inculcate values, like others before self, co-operation, collaboration and competitions with their motto "shine where you are". Since competitions are given priority at all levels in school, district, state and national, teachers, parents and institutions priority seems to be 'ranks' and 'prize's. The school practices, moral and religious education classes, retreats, prayers and school assemblies insist on many don'ts and 'do's' causing iBs in high school girls and class VIII B. The insistence on high marks and ranks has caused break down in very good students. Visits to the counselling centre brought to light break down among S.S.L.C students before the examinations. True spirituality enhances physical, mental and social well being (Rangaswamy 1994).

#### 9.1.2 Description of Class VIII B

Class VIII B is a prototype of the high school. Since case study is a way of organizing the social data for the purpose of viewing social re ality, it examines a social unity as a whole, in this case class VIII B. The purpose is to understand an important aspect of the life cycle of the unit, namely belief system leading to EDBs and SDBs and the effect of RET. This

study probes deeply and analysis interactions between the two factors, persons or situations that explain present status or that influences change or growth through RET. "A case is an example or perhaps even a prototype for a category of individual (Cromley 1986).

|              |              |             |                   |          |         |                |
|--------------|--------------|-------------|-------------------|----------|---------|----------------|
| High School  | IX classes   | VIII A      | VIII B            | Teachers | Parents | School         |
| V classes    | and          | VIII B      | Report with       |          |         |                |
| VI classes   | VIII classes | VIII C      | class teacher,    | POI      | II of   | POI            |
| VII classes  | Bells'       | VIII D      | her readiness     | F        | parents | class rooms    |
| VIII classes | Adjustment   | VIII E      | to Co-operate,    | Teachers |         | Chapel         |
| IX classes   | Inventory    | BIBD        | adjust and modify |          | AND     | Canteen        |
| X classes    | 700 students | 336 student | the class         |          | POI     | Corridors      |
| -2000 large  | IX Available | Available   | schedule and      |          |         | Laboratory     |
| population   | only for     | for 2 years | to work with      |          |         | Library        |
| -Not needed  | 1 year for   |             | the Investigator  |          |         | Auditorium     |
| for case     | study        |             | and intensity of  |          |         |                |
| -Qualitative |              |             | EDBs and IBs      |          |         | School POI     |
| -Research    |              |             | More students     |          |         | Practices      |
|              |              |             | with EDBs         |          |         | Assembly       |
|              |              |             |                   |          |         | Activities     |
|              |              |             |                   |          |         | Classes        |
|              |              |             |                   |          |         | Celebrations   |
|              |              |             |                   |          |         | Competitions   |
|              |              |             |                   |          |         | Outings, youth |
|              |              |             |                   |          |         | Festivals      |
|              |              |             |                   |          |         | Feedback to    |
|              |              |             |                   |          |         | Parents by     |
|              |              |             |                   |          |         | Teachers       |

### Selection Of Class VIII B And Site (Persons And Activities)

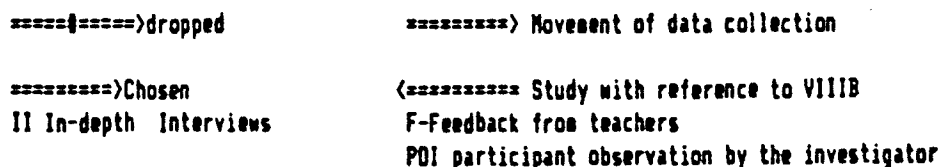


Figure 9.1.5 Flow Chart Selection And Site

### 9.1.3 Selection of Class VIII B

The selection of class was done carefully in order to ensure the typicalness of the high school class. In this descriptive study the investigator has given 'thick description' of conditions, relationships that exist, opinions that are held, processes that are going on, the effect that are evident and the trends that are developing as a result of RET. It also deals with the present prevailing opinions, knowledge, practices or conditions that influenced VIII B.

Figure 9.1.5 the flow chart clearly indicates how class VIII B was selected for this study. She started with the high school, gradually narrowing down to IX and VIII classes. Because of this large number and non-availability of students for 2 years IX class was dropped. Since class VIII was available for two years, she chose class VIII. Since the topic of the study is impact of RET on high school girls exhibiting EDBs she found VIII B most suitable. The administration of BIBD and Bell's Adjustment helped the investigator to choose the class with maximum IBs and EDBs. In addition to these the investigator had better rapport with their class teacher and her willingness for adjustment, modification of time tables and collaboration at all levels led the investigator to choose VIII B. For her final study. It took six months for the final choice.

Figure 9.1.5 also explains the movement of in-depth study of the class from class teacher and students to other teachers, parents, school and school practices and their impact on VIII B.



### 27. RET Session for small group

There were 56 students in the class, 30 were christians and 24 Hindus and 2 Muslims. They were from different social, economic, cultural and religions backgrounds. It was a very heterogeneous group in many aspects. They were of the age group 12-14. The detailed description of class VIII B is given in Table 9.3.2.

#### 9.1.4 Family Influences

Family plays an important role in children's life. They decide the school, tuition classes, medium of instruction and other special classes. Students are expected to live their own lives, but parents dictate how, when, where and why of their children's activities in and outside the school. Students ideas, their experiences, feelings, aspirations, dreams, limitations and inhibitions are not taken into consideration. Adolescents have no say in their lives.

Many of them come from middle, middle class, few from the lowest strata of middle class and two students had financial problems. Irrespective of these differences parents seem to make more demands from their children than they can meet with. They

often scold and punish their children when they are unable to come up to their expectations. When they fail they get battering from their parents. For fear of punishment and scolding the students do not disclose their marks and increase them. Lying, cheating in the examinations and nervousness seem to be the result of fear of punishment and failure in the examinations, which are again related to iBs. 1 and 2 fear of rejection and the need to be perfect. The competitions for marks are not only seen in children but also between the parents. To cite an example the mother of the student who comes second in this class does not talk to the mother of the student who secures first rank even though the students are friendly.

From the feedbacks and PO of parents the investigator get this impression that some parents seemed to be wanting to fulfill their unfulfilled dreams through their children. Beliefs, values and expectations of parents affect their wards. Many are materialistic minded and give their children much more than they need in terms of clothes, gifts and other articles. Children, parents and teachers are equally exposed to T.V serials and teachers are equally exposed to T.V serials and some of them are addicted to T.V. Cinema Scenes do excite violent emotions of the viewer (John 1995). The desire to find happiness outside, is on the increase. Many believe that with money they can buy everything. Marks and ranks are of great importance to parents. The values like respect for self, others, elders and teachers, character, honesty, selflessness, service, respect for poor are

displaced by selfishness, dishonesty, wanting to be served and lack of respect for parents and life. The most common iBs apparent are 1,2,3,4,5,7,8,9,10 and 12 and their offshoots. They expect their children to do all that they want. They expect them to be perfect, make no mistakes, secure high marks and ranks. When they disobey, question or challenge their parents they are punished. They get upset and disturbed when their children fail to come upto their expectations. 'should', 'must', 'ought', 'terrible' and 'can't' form part of their normal vocabulary. Family is partly responsible for iBs and EDBs (Iqbal, Ahmed, Akhtar 1993)

#### 9.1.5 Influence Of Teachers

Teachers too have an impact on students. The students are influenced by their lives, teachings, conversations and values. Some teachers of this class were lethargic, strict and misactive while a few were gentle and caring. All the teachers were qualified. Their class teacher had 29 years of experience. Though well versed in her subject matter she is lethargic. Her gentleness is taken advantage of by her students. Teachers in general lacked knowledge of counselling and skills in handling problematic students. They lacked empathy towards students. They looked down on students as ignorant and unskilled. The students were expected to take notes during the classes. No teachers used group discussions, project method or even scientific approach. Teachers often blamed parents for their 'faulty upbringing. "The students have no interest in studies.

They want to watch T.V, dress well and have comfortable lives". Teachers are not aware of their limitations. The students do not get a chance to express their feelings about their teachers. The result of the IPT, BIBD brought to light the presence of iBs and EDBs. Their influences have reinforced the students iBs. We notice many of the iBs of class VIII B are also the iBs of their teachers. Psychosocial factors are important determinants of EDBs (Ellis 1977, Averill 1982, 1983, Micann and Braggo 1989).

Table 9.1.1 Sharing of iBs.

Gradient Presence Of iBs In Teachers, Parents VIII Classes and VIII B

| iBs and Descriptions                         | Teachers | Parents | VIII Classes | VIII B    | Remarks     |
|----------------------------------------------|----------|---------|--------------|-----------|-------------|
|                                              | N        | N       | N %          | N %       |             |
| 1 Dire need for love                         | 10(H)    | 20(H)   | 147 43(MO)   | 39 70(H)  | T,P, VIII B |
| 2 Dire need for perfection                   | 7(H)     | 25(H)   | 106 32(MO)   | 28 50(H)  | T,P, VIII B |
| 3 Wanting to punish the Wicked               | 10(H)    | 15(H)   | 132 39(MO)   | 21 30(MO) | T,P,        |
| 4 Having one's way                           | 3(M)     | 23(H)   | 134 40(MO)   | 35 62(H)  | P, VIII B   |
| 5 Fear of the repetition of past.            | 4(MO)    | 22(H)   | 63 19(M)     | 11 20(M)  | P           |
| 6 Unhappiness due to others and other things | 1(M)     | 10(MO)  | 68 20(M)     | 16 28(M)  | -           |
| 7 Wanting strong persons for help            | 9(H)     | 15(H)   | 42 13(M)     | 4 8(M)    | T,P         |
| 8 Evading difficulties                       | 3(M)     | 8(MO)   | 112 34(MO)   | 31 56(H)  | VIII B      |
| 9 Perfect solutions                          | 7(H)     | 21(H)   | 128 38(MO)   | 28 50(H)  | T,P,VIII B  |
| 10 Thinking painful events                   | 5(MO)    | 19(H)   | 122 36(MO)   | 17 30(M)  | P           |
| 11 Worry about other's problems              | 3(M)     | 8(M)    | 216 64(H)    | 43 76(H)  | VIII.VIII B |
| 12 Demand for justice                        | 8(H)     | 23(H)   | 155 46(MO)   | 38 68(H)  | T,P, VIII B |
|                                              | 12(6Hs)  | 30(9Hs) | 366(1H)      | 56 (7Hs)  |             |

T - Teachers, P - Parents, H - High, MO- Moderate, M - Minimum

The gradient presence of iBs in teachers, parents VIII classes and VIII B bring to light the influence of parents and teachers on class VIII B. This class seemed to be influenced by parents, teacher and their peers in other classes. The iBs 1, 2, 9, and 12 are common to teachers, parents and VIII B. The iB, 4 is shared with parents and iB,11 seem to be common to all classes of VIII and VIII B. This brings to light the peer group influence on VIII B. However iB, 8 evading difficulties seems to be part of VIII B alone. This table leads to the factors contributing to the origin and development of iBs in high school girls VIII B.

Table 9.1.1 shows the origin and development of iBs of class VIII B. Parents, teachers, Mass media and School practices are also responsible for their iBs. Figure 9.1.4 shows the Impact of School, teachers and mass media. Figure 9.1.5 shows the presence of iBs and EDBs of Class VIII B higher in degree and number compared to the other VIII classes of the school.

Therefore the hypothesis-1 which states that knowledge of RET will enable to identify the origin and development of iBs in High School Girls can be accepted.

#### 9.2.0 Objective -2

To study the relationship between irrational Beliefs (iBs) and Emotionally Disturbed Behaviours (EDBs) of High School Girls class VIII B of age group 12-15.



Table 9.2.1. gives us a clear picture of the presence of iBs and EDBs of class VIII B and their intensity. The result of the column '3' indicates a variation from the rest of the scores in that only '3' students exhibit anger extensively. Though the qualitative data gives another picture. It is the investigator's feeling that the students were not even aware of their feelings of anger in their lives as anger is often considered as bad. Many of them did not even want to own its presence in their lives. At a later stage they own the presence of it and this is evident in Table 9.2.1

Table 9.2.1 Gradient Presence Of iBs and EDBs Before RET

| Name of Test | 1 iBs<br>BIRBD<br>Scores | 2<br>FIRS<br>Scores | 3<br>ARS<br>Scores | 4<br>ACQ<br>Scores | 5<br>PSCRS<br>Scores |
|--------------|--------------------------|---------------------|--------------------|--------------------|----------------------|
| Very high    | 248-300<br>(3)           | 160-200<br>-        | 80-100<br>(1)      | 100-125<br>-       | 60-75<br>(3)         |
| Extensive    | 180-239<br>(32)          | 120-159<br>(14)     | 60-79<br>(3)       | 75-99<br>(22)      | 45-59<br>(13)        |
| Moderate     | 120-179<br>(19)          | 60-119<br>(30)      | 40-59<br>(28)      | 50-74<br>(24)      | 30-44<br>(29)        |
| Minimum      | 70-119<br>(2)            | 50-59<br>(4)        | 30-39<br>(19)      | 35-49<br>(8)       | 20-29<br>(11)        |
| NIL          | 60-69<br>-               | 40-49<br>-          | 20-29<br>(5)       | 25-34<br>(2)       | -                    |
| TOTAL        | 56                       | 56                  | 56                 | 56                 | 56                   |

The numbers in parentheses indicate the number of students

1. Indicates iBs, 2-5 indicates EDBs

Matrix 9.2.1 EDBs of class VIII B - Feedbacks

| Students                                                                                                                                                               | Teachers                                                                                                                                                                             | Parents                                                                                                          | Investigator                                                     |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------|------------------------------------------------------------------|
| -Inability to concentrate, recall learnt matter, for oral and written exams.                                                                                           | -Lack of concentration, language difficulty in expressing and comprehending.                                                                                                         | -They study a lot still fail.                                                                                    | Students exhibit difficulties in concentration,                  |
| "we don't feel like studying".                                                                                                                                         | -Aversion to study--"They are lazy, restless, angry, nervous, and lying. Some exhibit fears, and aggression.                                                                         | -My daughter has a lot of fears, nervous, frightened, falls sick for exams.                                      | restless, distracted, disturbing, proper study habits, and       |
| "Too tired after the tuitions"                                                                                                                                         |                                                                                                                                                                                      |                                                                                                                  | indicipline.                                                     |
| -"We are afraid of teachers, principal, parents and authority Fears of examinations, mistakes, punishment, scolding, of being laughed at and deprivation of some kind. | -"Some exhibit incapacity, indifference, with drawn and distant".-"They seem to suffer from inferiority complex do not come for clarification of doubts or to share their problems". | -They don't obey, don't study, watch T.V.,                                                                       | -They shout bully, hurt, shout, call names, domineer, aggressive |
| -Forced discipline, obedience out of fear, when teachers are                                                                                                           | -"Some copy from others".                                                                                                                                                            | -They should study, obey, not cheat, not tell lies                                                               | and destroy furniture,                                           |
| gentle, we copy, cheat, misbehave, disobey (SDBs)                                                                                                                      | -"They worry about marks".                                                                                                                                                           | -They should not fight                                                                                           | -They are                                                        |
| -"Sometimes we feel angry"                                                                                                                                             | -Many teachers are worried about the deteriorating values in students.                                                                                                               | -They must score high marks.                                                                                     | restless, nervous,                                               |
| The EDBs mentioned by the class are anger, fears, anxiety, worries, shyness, nervousness, uncontrollability, poor self concept and withdrawal.                         | -"They lack values like love, respect, sharing and caring".-"They are only bothered about themselves". They want to have good food, clothes and watch T.V"                           | -"Miss my parents could not afford to give me education but I want my children to go to college"; said a father. | timid, frightened and rebellious.                                |
|                                                                                                                                                                        |                                                                                                                                                                                      |                                                                                                                  | -Some were talented, isolates.                                   |

Matrix 9.2.2 Relationship Between iBs And EDBs

| Description Of iBs                                        | Groups      | EDBs              | N  | Related iBs                                                                                                     |
|-----------------------------------------------------------|-------------|-------------------|----|-----------------------------------------------------------------------------------------------------------------|
| 1. Dire need for love                                     |             |                   |    |                                                                                                                 |
| 2. Dire need for perfection                               | Eagles      | Anger             | 8  | Having one's way (4)                                                                                            |
| 3. Wanting to punish the wicked.                          | Beetles     | Anger             | 9  | Having one's way (4)                                                                                            |
| 4. Having one's way                                       |             |                   |    |                                                                                                                 |
| 5. Fear of repetition of painful past.                    | White house | Anxiety           | 9  | Dire need for love (1)<br>Dire need for perfection (2)<br>Having one's way (4)                                  |
| 6. Attribution of Unhappiness to others and other things. | Liberty     | Fears             | 10 | Dire need for love (1)<br>Dire need for perfection (2)<br>Having one's way (4)<br>Thinking of painful past (10) |
| 7. Wanting a strong person for help.                      |             |                   |    |                                                                                                                 |
| 8. Evading responsibilities                               | Eurekha     | Uncontrol-ability | 11 | Dire need for perfection (2)<br>Having one's way (4)<br>Thinking of painful past (10)                           |
| 9. Perfect solution.                                      |             |                   |    |                                                                                                                 |
| 10. Thinking of painful events.                           | Jasmine     | Nervousness       | 9  | Dire need for perfection (2)<br>Having one's way (4)<br>Perfect Solution (9)<br>Thinking of painful past (10)   |
| 11. Worry about others.                                   |             | Worry             |    |                                                                                                                 |
| 12. Demand for justice.                                   |             |                   |    |                                                                                                                 |

Knowledge of RET and RET-steps enabled the students to see the relationship between their iBs and EDBs. Matrix 9.2.2 clearly explains the number of students who experienced anger as their dominant EDB. Since their number was greater they were divided into two groups. Through group discussions, they arrived at the common iBs in the group and those iBs that provoked the specific EDBs. The numbers in parentheses indicate the numbers of iBs responsible for the exhibition of that specific EDB. A glance at the table brings to light the following findings. For anger iB, 4 is often the cause. Anxiety is experienced due to 3 iBs namely 1, 2, and 4, while fear is caused by 1, 2, 4 and 10. We also notice that uncontrollability share the same iBs namely 4, 2, 1. Nervous and worried girls seemed to have maximum number of iBs namely 2, 4, 9 and 10. The predominant iBs of this class at this stage seemed to be 4 and 2 as per Matrix 9.2.2. By now the students had a number of sessions in RET and countering iBs. Possible a number of changes are taking place in their thinking and feelings. During these sessions they were also concentrating on those iBs that were causing them their specific EDBs. Could the difference between Table 9.1.1 and Matrix 9.2.2 be the effect of RET sessions the class has already had?

How did the students find the relationship between iBs and EDBs? The students used RET - steps they had learnt. They started with the emotional disturbance namely C-moving to the

situation A - that is activating agents and analyzing the rBs and iBs - B and finally D - debating. The students were able to identify the iBs as they were aware of the 12 iBs. They were allowed to check their numbers in case of doubt before finalizing their list.

### 9.2.1 Treatment Of RET

The treatment of RET was carried out for the group in the following ways. RET concept and methodology was done along with REE, RET -steps, ABCDE, AE, CBM group discussions and countering EDBs.

a) RET -The investigator through classes gave the students the theoretical back ground of what is RET, how it could be used, what causes emotional disturbances like anger, aggression, fear, nervousness, shyness, timidity and depression. Investigator used instructional materials like charts, diagrams and examples to communicate effectively. She used 20 class periods for RET (David, McClelland, White 1953).

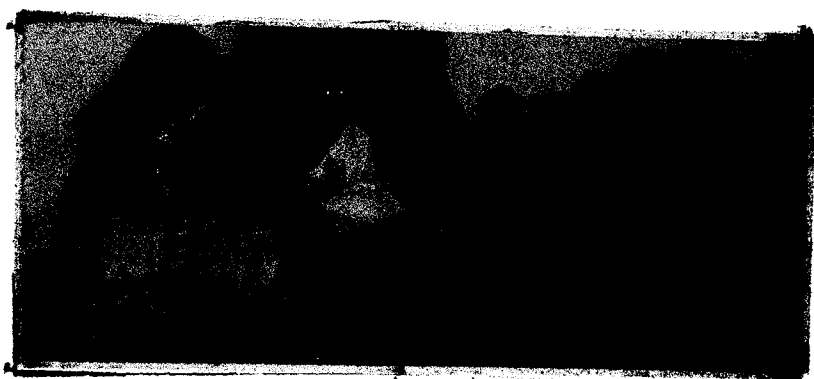


28. RET  
Class VIII B.

Each iB was discussed in the class with the help of charts or examples. Twenty class periods were distributed over the months. A few free periods had to be used due to unexpected holidays.

b) REE: About 15 periods were allotted to give REE. This was done by motivating students to face reality realistically. The importance of discipline in life, the techniques of concentration, acceptance of right attitudes, handling emotions positively and creatively were some of the topics dealt. Positive and negative aspects of anger was dealt in detail. Students were actively involved in these sessions. The students learnt to handle many of their EDBs effectively through REE (Ellis 1968; Knaus and Borker 1975).

c) RET-Steps: ABCDEs of RET were done through group discussions as well as demonstration of counselling sessions (Seldon, John and Singer 1989).



29. CBM for small group.

d) CBM: Since many students were nervous and had a number of fears the investigator helped them to overcome at least some of their behaviour through CBM. Many of them expressed the fear of facing a crowd, to be on the stage or even to answer a question in the class. The investigator used the basic principles of CBM and taught them to face the class and gradually to face a bigger audience. Most of them got rid of their shyness

as well as stage fear when they were given an opportunity to dance and sing on the stage (Ghosh and Chattopadhyay 1995; Perris, Carlo, Herlofson, Gorgen 1993).

e) Outdoor activity: The investigator organized a one day outing for the group where she organized a number of group activities. The class was divided into smaller groups and the following activities were conducted by changing the leaders and secretaries for every session giving every student an opportunity to be a leader and to report before the whole class. The investigator got an opportunity to watch each student in different roles in a free environment of friendship and love. The conducive environment was created by keeping these aspects, provision for expression, avoiding power struggles, flexible rules and tolerance. situations happy and effective, provided activities, encouraged responsibilities, well defined rules, gentle and firm. Some of the activities were creativity in making articles, acting, singing, action songs, group discussions, and mixing. Students had plenty of chances for socializing. Group activities and discussions formed part of the treatment of RET.



30. Outdoor Activity, Class VIII B

f) HRS: The students were encouraged to use HRS to counter them iBs and to develop self discipline and SWBs. Many used to practice their RET-steps. This was used to teach the cases coping skills. It was observed by the investigator those who did their home work showed greater and faster progress (Burns, David, Anerback, Arthur 1993). The investigator used sentences and metaphase to counter their iBs and EDBs (Elliot, Charles, Adams, Russel, Hedge and Gordon 1992).

g) AE: These exercise were conducted when and where needed before the RET Sessions. These were of short duration and was conducted in the class room as a preparation for the sessions, when the investigator noticed that they were tense, restless and upset.

#### 9.4.0 Objective 3

To study the impact of RET in bringing about Positive Changes in Cognitive and Affective Domains by reducing or replacing iBs with rBs thus reducing EDBs like anxiety, fears, poor self concept, nervousness and anger.

#### 9.4.0 Objective 4

To study the effect of RET in a group of 56 in the class room situation.



Table 9.4.1 Comparative Study Of Gradient Presence Of iBs And EDBs Before And After RET

| Tests     | 1<br>BIRBQ              | 2<br>FIRS              | 3<br>ARS              | 4<br>ACQ              | 5<br>PSCRS            |
|-----------|-------------------------|------------------------|-----------------------|-----------------------|-----------------------|
| Very High | 240-300<br>(3)<br>(-)   | 160-200<br>-           | 80-100<br>(1)<br>(2)  | 100-125<br>-          | 60-75<br>(3)<br>(-)   |
| Extensive | 180-239<br>(32)<br>(10) | 120-159<br>(14)<br>(8) | 60-79<br>(3)<br>(4)   | 75-99<br>(22)<br>(13) | 45-59<br>(13)<br>(9)  |
| Moderate  | 120-179<br>(19)<br>(36) | 60-119<br>(30)<br>(41) | 40-59<br>(20)<br>(21) | 50-74<br>(24)<br>(23) | 30-44<br>(29)<br>(22) |
| Minimum   | 70-119<br>(2)<br>(10)   | 50-59<br>(4)<br>(6)    | 30-39<br>(19)<br>(10) | 35-49<br>(8)<br>(19)  | 20-29<br>(11)<br>(22) |
| Nil       | 60-69<br>-              | 40-49<br>-             | 20-29<br>(-)<br>(1)   | 25-34<br>(5)<br>(7)   | 15-19<br>(2)<br>(1)   |
| Total     | 56                      | 56                     | 56                    | 56                    | 56                    |

Column : 1 indicates iBs                      Columns: 2-5 indicate EDBs  
The numbers in the parentheses on the left hand side indicate pre-test results.

The number on the right hand side indicate the post test results

Table 9.4.2 gives the significance difference between the correlated means of the pre-tests, Post-tests of the IPTs, BIRBQ, FIRS, ACQ, PSCRS, and ARS. Pre-tests were given before the treatment of RET and the Post-tests were given at the end of the treatment of RET. The Post-test results are much lower than the pre-test scores showing a reduction of iBs, fears, anxiety and poor self concept.

Table 9.4.2 Significance Of Difference Between Correlated Means

| Names | Tests     | Mean   | SD    | N  | df | Correlated 't' |
|-------|-----------|--------|-------|----|----|----------------|
| BIRBQ | Pre-test  | 186.86 | 1.54  | 56 | 55 | 9.25**         |
|       | Post-test | 146.43 | 1.49  | 56 | 55 |                |
| FIRS  | Pre-test  | 183.91 | 22.88 | 56 | 55 | 6.26**         |
|       | Post-test | 86.95  | 22.58 | 56 | 55 |                |
| ACQ   | Pre-test  | 67.14  | 17.88 | 56 | 55 | 3.42**         |
|       | Post-test | 68.85  | 15.98 | 56 | 55 |                |
| PSCRS | Pre-test  | 39.64  | 11.27 | 56 | 55 | 5.39**         |
|       | Post-test | 32.98  | 9.75  | 56 | 55 |                |
| ARS   | Pre-test  | 39.98  | 12.92 | 56 | 55 | 8.31 NS        |
|       | Post-test | 39.32  | 12.68 | 56 | 55 |                |

\*\* Significant at 0.01 level. NS - Not Significant

The correlated 't' value for BIRBQ is 9.25 which is (with df one tailed 't' - 9.25 > 't' 0.01 = 2.39) much greater than the table value at 0.01 level. It revealed that the impact of RET was very effective.

The correlated 't' value (with df one tailed 't' = 6.25 > 't' 0.01 = 2.39). In other words the existed significant difference between the pre-test and post-test performance of the subjects in a positive direction, that is pre-test mean score was significantly higher than the post-test means score of the group.

Hence it was concluded that RET was effective in reducing the fears of the group.

The mean Post-test score in ACQ was found significantly lower ( $p < 0.01$ ) than the pre-tests mean score of the subjects ( $t = 3.42 > t_{0.01} = 2.39$ ). It revealed that RET was effective in reducing their anxiety.

The difference between pre-test and post-test correlated mean scores on PSCRS was also significant at 0.01 level. The mean post test score was significantly lower than the pre-test score of the group indicating the fact that RET brought about reduction in their poor self concept.

Therefore  $H_3$  which states that RET will enable the high school girls to remove or reduce their iBs and EDBs was retained for BIRBQ (reduction of iBs), FIRS (reduction of fears), ACQ (reduction) of anxiety and PSCRS (reduction of Poor Self Concept).

No significant difference was found between the pre-test and post-test of the subjects on ARS ( $t = 0.31 < t_{0.05} = 1.68$ ). Therefore the hypothesis -3 which states that treatment of RET will reduce or remove EDBs was rejected for anger.

It revealed that RET did not help the subjects under study to remove or reduce their anger.

Table 9.4.1 and Table 9.4.2 show that through group

counselling there is significant reduction of iBs and EDBs like fear, anxiety and poor self concept.

Matrix 9.4.1 Impact Of RET In Groups And Areas Of Change

|                                                                                                               |                                                     |                      |                            |                                                                         |
|---------------------------------------------------------------------------------------------------------------|-----------------------------------------------------|----------------------|----------------------------|-------------------------------------------------------------------------|
| T<br>R<br>E<br>A<br>T<br>M<br>E<br>N<br>T<br><br>O<br>F<br>R<br>E<br>T<br><br>T<br>H<br>R<br>O<br>U<br>G<br>H | G<br>R<br>O<br>U<br>P                               | RET-<br>THEORY       | E<br>F<br>F<br>E<br>C<br>T | AWARENESS --> iBs and EDBs<br>OF                                        |
|                                                                                                               |                                                     | REE                  |                            |                                                                         |
|                                                                                                               |                                                     | RET-Steps            |                            | KNOWLEDGE --> Self, Others<br>OF and rBs                                |
|                                                                                                               | C<br>O<br>U<br>N<br>S<br>E<br>L<br>L<br>I<br>N<br>G | AE                   | O<br>F<br>R<br>E<br>T      | COGNITIVE<br>EFFECT --> iBs and<br>Introduction<br>of rBs               |
|                                                                                                               |                                                     | CBM                  |                            |                                                                         |
|                                                                                                               |                                                     | GROUP<br>COUNSELLING |                            | BEHAVIOUR<br>EFFECT --> Reduction<br>of EDBs<br>Introduction<br>of SWBs |

--->Indicates areas of change

Matrix 9.4.1 shows the areas of change in behaviour irrational beliefs are reduced and rational beliefs are introduced. RET can bring about positive mental health through group therapy (Leaf, Russel, Kraws, David, Dantzig Stephen 1992).

This in turn helped the students to choose self winning behaviour and give up EDBs.

Table 9.4.2 Effect Of RET And Areas Of Growth In Group Class VIII B

| LEVELS             | Awareness                          | Knowledge            | Cognitive Reduction | Effect(cE) Introduction | Behaviour Reduction of                         | Effect(bE) Introduction            |
|--------------------|------------------------------------|----------------------|---------------------|-------------------------|------------------------------------------------|------------------------------------|
|                    |                                    |                      | ↓<br>of iBs         | ↓<br>of rBs             | ↓<br>EDBs                                      | ↓<br>of SWBs                       |
| Very high<br>66%+  | EDBs<br>Worry<br>66%               | -                    | -                   | -                       | Fears<br>66%                                   | Progress<br>in study<br>habits 88% |
| Intense<br>58-65%  | iBs<br>62%<br>EDBs<br>Anger<br>58% | -                    | -                   | -                       | -                                              | Personal<br>growth 56%             |
| Moderate<br>35-49% | -                                  | Self 37%             | iBs<br>89%          | rBs<br>38%              | Anger!<br>38%                                  | -                                  |
| Low<br>18-34%      | -                                  | EDBs, rBs<br>19% 28% | -                   | -                       | Hurting<br>13% of<br>worry 19%<br>shouting 13% | Acceptance<br>self and<br>others   |
| Minimum<br>1-9%    | -                                  | -                    | -                   | -                       | Lying 2%                                       | -                                  |

EDBs - Emotionally disturbed behaviours    SWBs- self winning behaviours    iBs-irrational beliefs

rBs-rational beliefs    cE- cognitive effect    bE-Behaviour effect

Table 9.4.2 shows the growth areas after the treatment of RET. The students have gained knowledge of the presence of EDB and iBs in themselves. 88 percent of students have shown progress in their study habits 56 percent have mentioned personal growth in one area or the other. And samples of student feed backs 9.53 give qualitative description of growth in individual students.

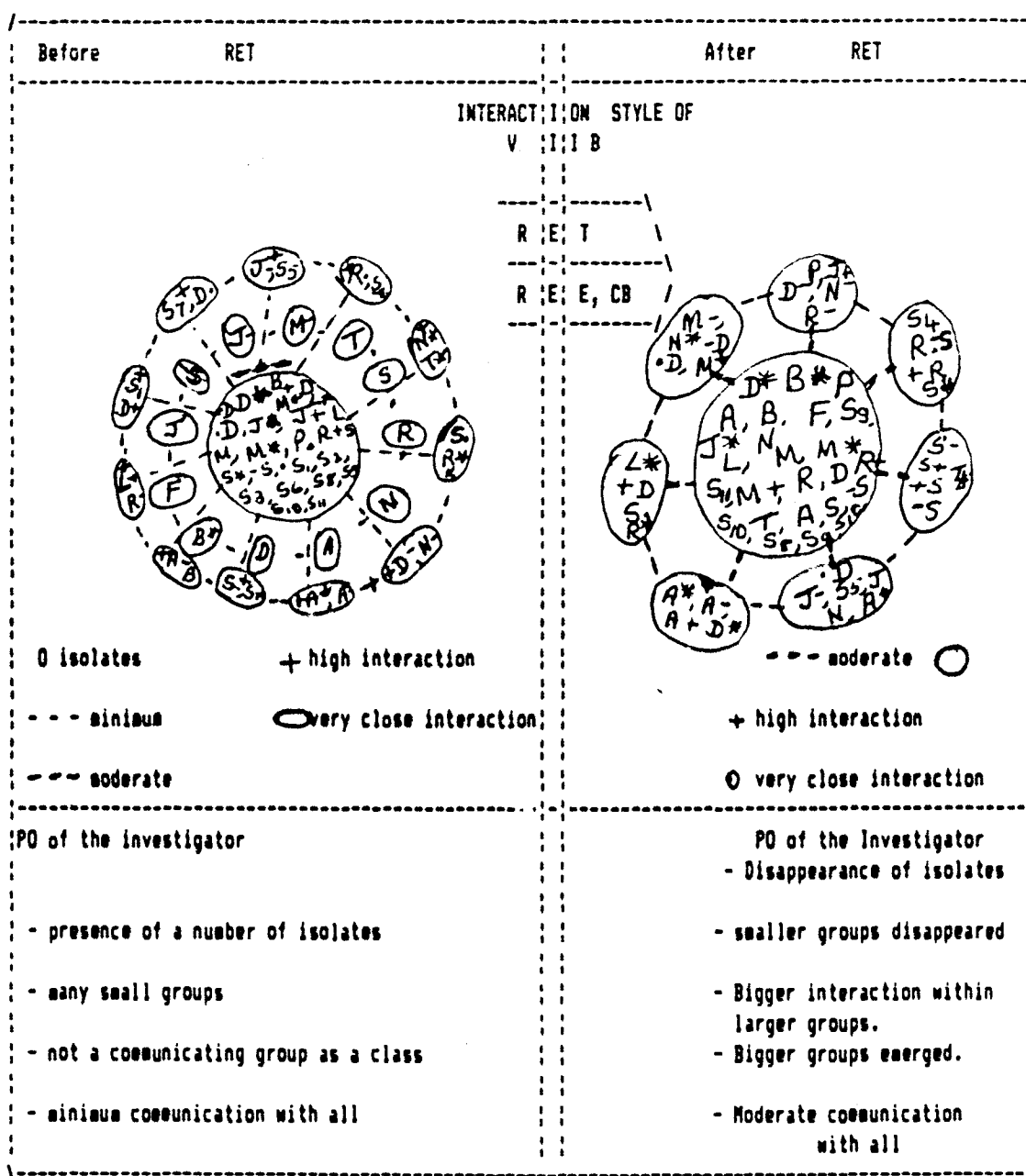


Figure 9.4.2 RET And Social Development

Figure 9.4.2 shows social development of class VIII B before and after RET. It is observed that there is a great progress in their communication with one another. This also brought about better relationships among students. Isolates and timid students became more sociable, the domineering students became more accommodating.

And help me to change my character. Before this class I used to get angry fast. Now this has changed. now I have a mind to forgive anything.

RET helped me to overcome some of my problems. It gave me more confidence and to improve my studies. I was able to control my anger with the help of RET. It helped me to lead a new life.

I found Bula miss's classes very helpful. After listening to her class I was able to know what life my character was able to build. It has helped a lot to know what life a new person in me.

I like Bula Miss. I liked her class also. Her class has helped me in some many ways especially my habits. Now I am able to deal with other people easily. I used to think of her points, it was not only a good teacher but also a friend to our class.

Ret has helped me to face disappointing situations quite well. I don't believe now that there is something you can't face. It has also helped me to believe that you can achieve anything in this world with God's help.

When my mommy or daddy scold me I won't tell anything to them. Now I have concentration in my studies. After now I have <sup>really</sup> confidence in me.

After Bula Miss class I was really enjoying my life and I was very happy.

Miss Bula's classes on RET helped me very much. Her class on concentration was the best.

sample (3) On the first day when you came to our class (std 8<sup>th</sup>) we thought that you are simply a teacher. But later I understood that you are just not just a teacher but also a friend and a good psychologist. I learned many things from you. Especially my character of sitting at one end of the end class and keeping worrying about things changed. Today, with more courage I can say that I am changed. I realised that I am something in this great

world. I have confidence in me.

I have no fear to face people.

Thank you, Beulah miss for your teaching and studying our class for the last 2 years! I heard some

children saying that they were bored of your class! At that time I

felt like that - But today I

thinking that has brought great changes in me. I became more confident, courageous & forgiving. It helped me to stand great troubles. The principles of R.E.T. & many great



sample 5)

RN-54

- ① MY FEAR BECOME LESS
- ② NOW I CAN CONCENTRATE
- ③ NOW I CAN FACE EXAMS
- ④ IF I CANNOT FIND A PERFECT ANSWER. IT DOES NOT MAKE ME UPSET
- ⑤ YOUR CLASS TEACH ME "IT IS OK TO MAKE MISTAKS"
- ⑥ NOW I CAN OVER COME ANY PROBLEMS
- ⑦ BUT ONE NEGATIVE POINT FOR ME

sample 6) I had a problem of getting angry. I used to get angry very fast. When Miss came and ~~we~~ talked to us about IB's and RB's in the 8<sup>th</sup> standard I thought it is something like psychology. But afterwards when she dealt with every irrational beliefs, problems (anger etc...) I found it interesting. ~~I~~ I had many irrational beliefs in me. Now I have changed a lot. I used to quarrel with others, shout at others, hurt others. Now I can feel the change in me. ~~I~~ I have gained the confidence to face everything that happens to me. Thanks Miss Beula for making me understand about the after effects (good and bad) of anger.

The qualitative feedbacks bring to light that even anger is reduced even though correlated mean of ARS was not significant at 0.01 level. The qualitative feedback of children gave another picture. Therefore there is need for further study to find out the effectiveness of group sessions in the reduction of anger.

#### 9.4.2 Emerging Ground Theory Of The Effect Of RET In Group

Knowledge of RET and RET- Theory seemed to give the group an insight into the relationship that existed between their irrational Belief (iBs) and Emotionally Disturbed Behaviours (EDBs) that led them to Self Defeating Behaviours (SDBs), Rational Emotive Education (REE) motivated them to give up their iBs and EDBs, Awareness Exercise (AE), Cognitive Behaviour Modifications (CBM) and Home Work Reports (HRS) helped them in the acceptance of rational Belief (rBs) and Self Winning Behaviour (SWBs) and strengthen them.

21. Class VIII B.



## CHAPTER X

### SUMMARY AND EDUCATIONAL IMPLICATIONS

#### 10.0.0 Introduction

The four research questions probe the main thrust of this study namely origin and development of irrational Beliefs responsible for emotionally disturbed behaviours, the relationship of iBs with EDBs, the treatment of RET and its effects in individual cases and group.

#### 10.1.0 Research Questions

1. Does the knowledge of RET enable the investigator to find out the origin and development of irrational Beliefs responsible for Emotionally Disturbed Behaviours in High School Girls?

2. How effective is RET in identifying the relationship between irrational Beliefs and Emotionally Disturbed Behaviours like withdrawal, anxiety, nervousness, depression, timidity, fear and anger?

3. How effective is RET in bringing about positive changes in cognitive and effective domains by reducing or removing irrational Beliefs and Emotionally Disturbed Behaviours through individual and group counselling sessions?

4. How effective is RET in a group of 56 in a class room in bringing about reduction of irrational Beliefs and EDBs in High School Girls?

10.1.1. SUMMARY

Pilot study was conducted with the objective to find out the effect of RET on 3 cases exhibiting EDBs. The investigator also wanted to find out what materials and approaches are most feasible. The three cases studied were, Timid Renu, Depressed Binu and Frightened Genu. All three cases received treatment of RET. Analysis of the study led to the formulation of objectives, approaches for the collection of data and the need for IPTs. The interactive model of steps

in RET also emerged.

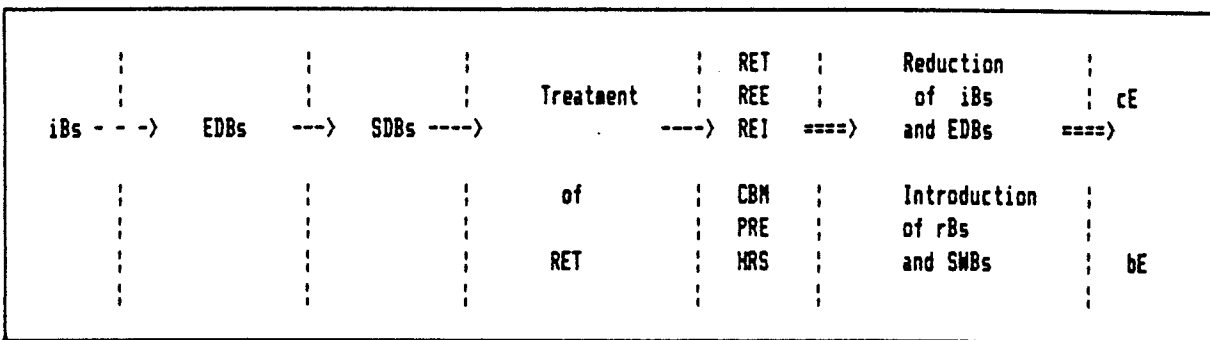
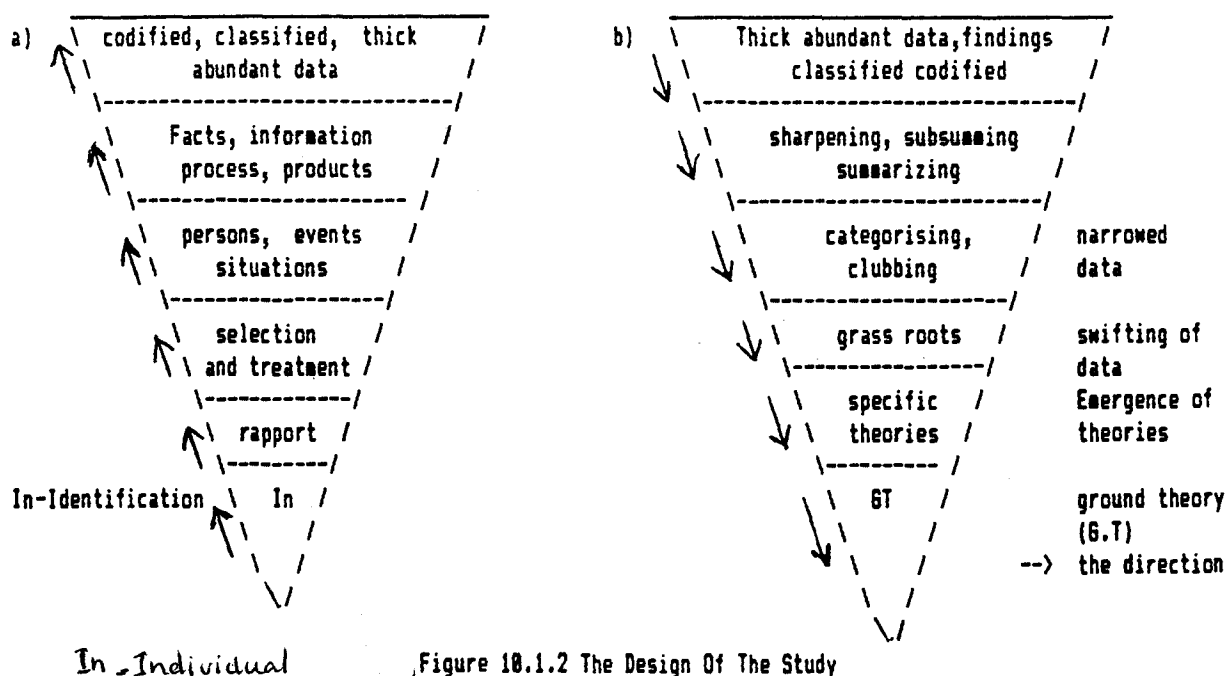


Figure -10.1.1 Interactive Model of RET

--> leading to

---> through

====> the result



The data collection was done through PO, II, Counselling sessions, feedbacks and pre-test, post-tests, of IPTs. Figure 10.1.2 (a) clearly indicates the movement of procedures from persons, events, situations, facts, processes and products resulting in abundant data collection. While Figure 10.1.2 (b) gives the reverse movement in analysis and interpretation of data. The 'thick' 'bountiful' data had to be reduced through continual data reduction, through coding, subsuming and displaying. Through these processes the data is narrowed leading to the essentials or grass roots and to the ground theory.

Matrix 10.1.1 gives a picture of KEEY before and after RET. This study consisted six sequential phases; viz: identification of KEEY, her iBs and EDBs, final selection, treatment of RET through 30 individual and 20 group sessions, countering iBs and

the impact of RET. These sessions enabled KEEY to become aware of her iBs and EDBs that were responsible for her SDBs and causes of her withdrawal and unhappiness. Treatment of RET seemed to have freed her from her iBs and reduced her EDBs and SDBs.

Matrix 10.1.1 RET On Withdrawn KEEY

| Before RET                                                                                                       | RET                      | After RET                                                                                                                                                    |
|------------------------------------------------------------------------------------------------------------------|--------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------|
| KEEY with iBs 1 to 12, EDBs, withdrawn, fears, self hatred, depressed,                                           | RET<br>REE               | KEEY with no iBs and EDBs, courageous, free,                                                                                                                 |
| self rejecting, sad, inactive, stammering, anxious, nervous, worried with concept deficiency and weak in studies | REI<br>CBM<br>PRE<br>HRS | self accepting, self liking, confident, cheerful, active, fearless, clearer, happier, more realistic, better in studies, accepting weaknesses and strengths. |

Anxious ANN was a self referred case. In the first phase rapport was established through informal and in-depth interviews. In the second phase, her iBs and EDBs were identified through pre-tests of Bell's Adjustment Inventory and IPTs. She was selected for the final study with her family's permission during the third phase. Fourth and fifth phases consisted of the case study and treatment of RET through 30 individual and 20 group sessions. Phase six consisted in finding out the effect of RET on Anxious ANN and the emergence of the theory Matrix 10.1.2.

Matrix 10.1.2 RET On Anxious ANN The Process Product Model

| iBs                       | EDBs            | RET | Treatment | Effect of RET  |
|---------------------------|-----------------|-----|-----------|----------------|
| 1. Dire need for love     | Anxiety,        | G   | RET       | cE and bE      |
| 2. Need for perfection    | fears,poorself- | r   | REE       | introduction   |
| 3. Punishing the          | concept, no     | o   |           | of rBs, less   |
| 4. Having one's way       | concentration,  | u   | CBM       | fear, anxiety, |
| 5. Fear of the repetition | inability to    | p   | PRE       | better self    |
| 6. Others as cause        | study, worried, | and |           | concept,       |
| 7. Wanting others         | poor adjustment | I   | RET       | calm, happy,   |
| 8. Evading difficulties   | at home, self,  | n   |           | more relaxed,  |
| 9. Looking for perfect    | others and      | d   | REE       | acceptance     |
| 10. Recalls past          | school, sad,    | i   |           | of self and    |
|                           | angry, self     | v   | CBM       |                |
|                           | rejecting,      | d   |           | others, better |
|                           | fighting,       | u   | PRE       | adjustment     |
|                           | crying.         | a   |           | at home,       |
|                           |                 | l   | HRS       | greater        |
|                           |                 |     | REI       | involvement    |
|                           |                 |     |           | with others.   |

The nervous Judy was referred by her class teacher not because she was a problem to her or in the class but because of her non-involvement and shyness. It was a pleasure to study Judy. Her peers gave more positive remarks about her. "She is kind hearted, nice and shares with everyone". Only her close friend was aware of her nervousness and fears. She received 35 individual sessions and 15 group sessions. Matrix 10.1.3 Model of RET on nervous JUDY explains the treatment of RET and its impact on her.

Matrix 10.1.3 Model Of RET On Nervous JUDY

| Phases                                  | I                  | II                                                                        | III         | IV                                  | V                               | VI                                                                                                 |
|-----------------------------------------|--------------------|---------------------------------------------------------------------------|-------------|-------------------------------------|---------------------------------|----------------------------------------------------------------------------------------------------|
| Identification<br>of<br>Nervous<br>JUDY | iBs<br>and<br>EDBs | 1 to 12<br>Nervous<br>shy<br>lonely<br>timid<br>anxious<br>self rejecting | R<br>E<br>T | Individual<br>(35)<br>Group<br>(15) | REE<br>REI<br>CBM<br>HRS<br>PRE | rBs<br>cE<br>bE SWBs<br>courageous,<br>sociable,<br>happy, free,<br>fearless and<br>self accepting |

Matrix 10.1.4 Phases Of Treatment Of RET On Depressed DEEPA

| Phase 1                  | Phase 2                                                            | Phase 3                                     | Phase 4                                                                                | Phase 5                                | Phase 6                                        |
|--------------------------|--------------------------------------------------------------------|---------------------------------------------|----------------------------------------------------------------------------------------|----------------------------------------|------------------------------------------------|
| Rapport<br>with<br>Deepa | Identification<br>of iBs and<br>EDBs<br>through the<br>use of IPTs | Final<br>Selection<br>of Deepa<br>for study | Case study<br>PO, IIs,<br>Feedbacks<br>from peers,<br>family,<br>Deepa and<br>Teachers | RET<br>REE<br>REI<br>CBM<br>PRE<br>HRS | cE rBs<br>bE sWBs<br>emergence<br>of<br>theory |

Deepa was a self referred case. Matrix 10.1.4 shows the different phases of the study. She had 30 individual and 20 group sessions. She was regular and co-operative in all the sessions, many sessions were required to counter her strongest iBs.

#### 10.1.2 RET In Angry MARIE

Marie was referred by her teacher because she was a problem to her family, class, peers, teachers and herself. The study conducted on her is presented in Fig. 10.1.3. It consisted of 30



individual sessions and 20 group sessions. Unlike the other cases she found discipline and order very difficult. She did not do her home assignments regularly.

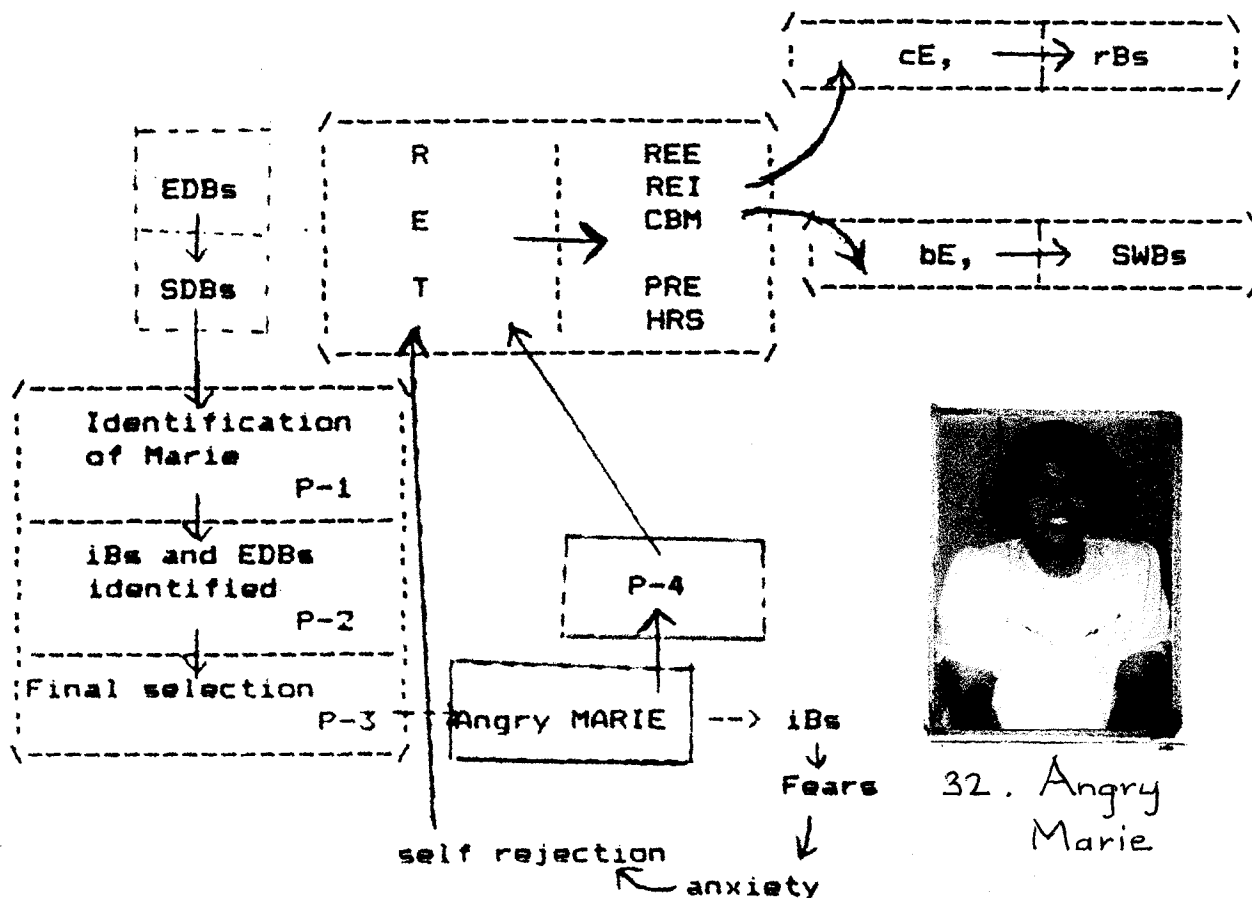


Figure 10.1.3 Phases Of RET In Angry Marie

Ps - Phases, cE - cognitive Effect, rBs - rational Beliefs

bE - behaviour Effect, SWBs - Self Winning Behaviours

10.1.3 RET In Group - VIII B

Impact of RET in group situation was studied by taking 56 students of class VIII B. It is significant, complete and consider alternate perspectives, display evidence and is composed of emerging theory (Yin 1984). The reader can eye ball the

effective data display to see where the common threads and contrasts are (Miles and Huberman 1985).

Table 10.1.1 Growth Gradients Of RET Innovation In All Six Case Studies

| Items                         | KEYY-1 | ANN- 2 | JUDY-3;DEEPA-4; | MARIE-5 | VIII.B-6 |    |
|-------------------------------|--------|--------|-----------------|---------|----------|----|
| Reduction of<br>-iBs          | VH     | VH     | VH              | VH      | NO       | H  |
| - fears                       | H      | H      | VH              | VH      | H        | NO |
| - anxiety                     | VH     | VH     | H               | VH      | NO       | NO |
| - nervousness                 | H      | H      | VH              | H       | NO       | NO |
| - anger                       | VH     | H      | VH              | NE      | NO       | H  |
| - uncontrollability           | H      | H      | VH              | H       | H        | NO |
| - depression                  | VH     | VH     | VH              | VH      | VH       | NO |
| - poor self concept           | VH     | H      | H               | H       | NO       | NO |
| - withdrawal                  | VH     | VH     | H               | H       | VH       | H  |
| Awareness of iBs<br>and EDBs  | VH     | VH     | VH              | VH      | H        | VH |
| Increase in<br>-concentration | VH     | VH     | VH              | VH      | H        | VH |
| -confidence                   | H      | H      | H               | H       | VH       | H  |
| -freedom                      | VH     | VH     | H               | H       | VH       | NO |
| -self acceptance              | H      | H      | H               | H       | H        | NO |

Table 10.1.1 growth gradient of RET innovation in all six case studies indicate the areas of growth and the degree of reduction of iBs and EDBs namely fears, anxiety, nervousness anger, uncontrollability, depression, poor self concept and withdrawal. We also notice positive areas of growth namely awareness of the presence of iBs and EDBs, better concentration,

increase in confidence, free and self acceptance.

Table 10.1.1 is the result of triangulation of feed-backs and FC of the investigator. The degrees of growth gradient varies from very high to minimum. The causes of these variations are dealt while qualitative analysis of pre-test, post-test results of IPIs are done.

RET in groups consisted of 40 sessions, 25 for RET and RET-steps, 5 REE, 5 CBM and 5 group Discussion sessions. Thick description of school environment, practices, teachers, parents, class, factors contributing to the origin and development of IBS and process product model of the treatment of RET were done. Quantitative and qualitative data analysis was done. Quantitative analysis of the data was done to find out the difference between pre-test, post-test scores of the subjects on the Investigator prepared Tools (IPTs). Qualitative analysis was done through triangulation for trustworthiness.

Matrix 10.1.5 shows the effect of RET in all individual cases as well as the group, hypothesis-wise. The analysis of the data is the outcome of the data reduction through, clubbing, sharpening and sorting through triangulation. Column 1 presents the major thrust of each hypothesis, namely hypotheses 1 to 4. Case 1 gives the essence of the data analysis of withdrawn KEEY, in a very brief and meaningful manner. 'The thick' description of the study has been reduced to the core of the findings in a 'nut shell'. In like manner the analysis of the data of case-2 Anxious ANN, case-3 Nervous JUDY, Case-4 Depressed DEEPA and

Case-5 Angry MARIE are done. Case-6 class VIIIB displays the analysis of the data of the effect of RET in group, through group sessions alone.

Matrix 10.1.5 Effect Of RET In All Six Cases

| Hypotheses                                                                                                        | Case-1 KEYEY                                                                                                          | Case-2 ANN                                                                                                                 | Case-3 JUDY                                                                                                                    | Case-4 DEEPA                                                                                                                                              | Case-5 MARI                                                                                                        | Case-6VIIIB                                                                           |
|-------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------|----------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------|
| H-1 Knowledge of RET will help in identifying the origin and development of IBs responsible for EDBs              | Family<br>School<br>Teachers<br>Peers<br>Media                                                                        | Family<br>School<br>Teachers<br>Peers<br>Media                                                                             | Family<br>School<br>Teachers<br>Peers<br>Media                                                                                 | Family<br>School<br>Teachers<br>Peers<br>Media                                                                                                            | Family<br>School<br>Teachers<br>Peers<br>Media                                                                     | Family<br>School<br>Teachers<br>Peers<br>Media                                        |
| H-2 Knowledge of RET and RET-steps leads to identification of IBs and related EDBs.                               | Causes for withdrawal and EDBs.<br>Presence of related IBs                                                            | Causes for anxiety and EDBs<br>presence of related IBs                                                                     | Causes for nervousness and EDBs,<br>presence of related IBs                                                                    | Causes for depression EDBs,presence of relatedIBs                                                                                                         | Causes for anger and EDBs,presence of relatedIBs                                                                   | Causes for anger anxiety nervousness worry,fears uncontrollability of presence of IBs |
| H-3 Treatment of RET through individual and group sessions bring about positive cognitive and behavioural changes | Reduction of IBs and EDBs.<br>Introduction of IBs and SWBs sociable, better concentration, self acceptance and others | Reduction of IBs and EDBs introduction of rBs and SWBs sociable free, assertive, self accepting, courageous and expressive | Reduction of IBs and EDBs introduction of rBs and SWBs sociable, happier, brave,less nervous, better concentration expressive. | Reduction of IBs and EDBs sociable less fear, happier better self image self accepting, more loving. brave,less nervous, better concentration expressive. | Reduction of IBs and EDBs introduction of rBs and SWBs less anxiety,fear anger,worry and more loving and sociable. | Reduction of IBs and EDBs introduction of rBs and SWBs through group sessions alone.  |
| H-4 RET is effective through group sessions                                                                       | YES                                                                                                                   | YES                                                                                                                        | YES                                                                                                                            | YES                                                                                                                                                       | YES                                                                                                                | Positive cognitive and behavioural changes                                            |

From the matrix it is evident that positive changes have taken place in all six cases.

Table 10.1.2 Presence Of iBs In All Six Cases

| iBs                               | KEYY-1 | ANN-2 | JUDY-3 | DEEPA-4 | MARIE-5 | VIIIB | -6% |
|-----------------------------------|--------|-------|--------|---------|---------|-------|-----|
| 1. Dire need for love             | ✓      | ✓     | ✓      | ✓       | ✓       | 39    | 70  |
| 2. Need for perfection            | ✓      | ✓     | ✓      | ✓       | ✓       | 27    | 40  |
| 3. Punishing the wicked           | ✓      | ✓     | ✓      | ✓       | ✓       | 21    | 38  |
| 4. Having one's way               | ✓      | ✓     | ✓      | ✓       | ✓       | 35    | 62  |
| 5. Fear of the repetition of past | ✓      | ✓     | ✓      | ✓       | ✓       | 11    | 20  |
| 6. Cause of unhappiness as others | ✓      | ✓     | ✓      | ✓       | ✓       | 16    | 28  |
| 7. Wanting others' help           | ✓      | ✓     | ✓      | ✓       | ✓       | -4-   | -8- |
| 8. Evading difficulties           | ✓      | ✓     | ✓      | ✓       | ✓       | 31    | 56  |
| 9. Looking for perfect solution   | ✓      | ✓     | ✓      | ✓       | ✓       | 28    | 50  |
| 10. Recalling past pains          | ✓      | ✓     | ✓      | ✓       | ✓       | 27    | 30  |
| 11. Worry about other's problems  | ✓      | ×     | ✓      | ✓       | ✓       | 43    | 76  |
| 12. Demand for Justice            | ✓      | ×     | ✓      | ✓       | ✓       | 38    | 60  |

Table 10.1.2. clearly shows the presence of iBs in all six cases

Table 10.1.3 Effect Of RET On IPTs Pre-test, Post-test Scores

| IPTs  | KEYY |      | ANN |      | JUDY |      | DEEPA |      | MARIE |      | VIII B |      |
|-------|------|------|-----|------|------|------|-------|------|-------|------|--------|------|
|       | Pre  | Post | Pre | Post | Pre  | Post | Pre   | Post | Pre   | Post | Pre    | Post |
| BIRBO | 198  | 130  | 159 | 115  | 173  | 94   | 201   | 82   | 234   | 198  | 186    | 146  |
| FIRS  | 58   | 40   | 59  | 33   | 123  | 60   | 94    | 58   | 130   | 126  | 104    | 86   |
| ACQ   | 58   | 25   | 102 | 69   | 30   | 22   | 92    | 54   | 88    | 64   | 67     | 60   |
| ARS   | 63   | 20   | 72  | 50   | 63   | 29   | 42    | 46   | 97    | 85   | 42     | 39   |
| PSCRS | 45   | 15   | 49  | 29   | 37   | 17   | 56    | 36   | 57    | 51   | 40     | 33   |

Table 10.1.3 indicates reduction in scores for BIRBQ, FIRS, ACQ and PSCRS in all cases and group., In the case of ARS there is slight increase in the case of Deepa who is learning to assert and express her views at home and at school. The decrease of scores varies from case to case. For class VIIIB the mean score used There was less reduction in the case of Marie compared to other cases.

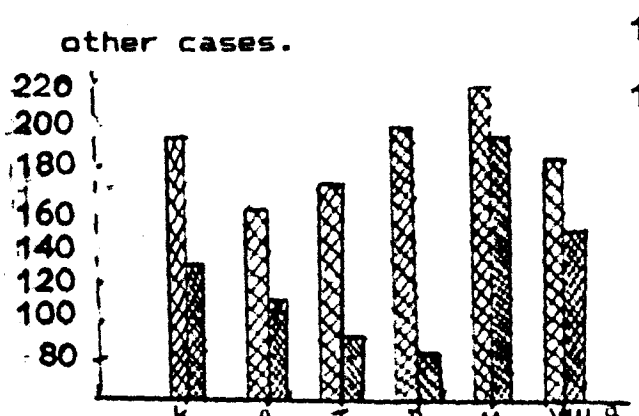


Figure 10.1.4 Reduction of IBS

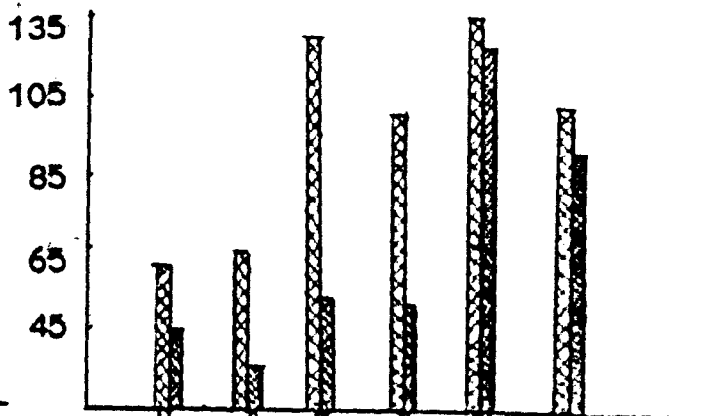


Figure 10.1.5 Reduction of Fears.

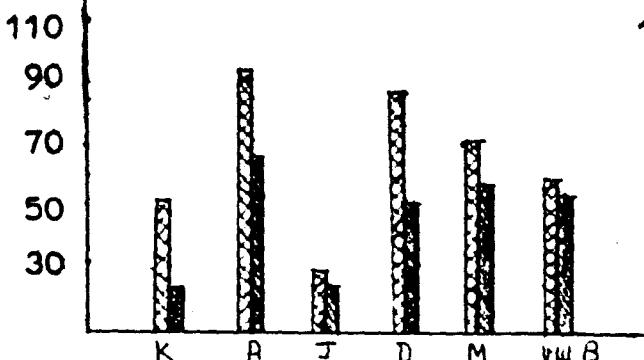


Figure 10.1.6 Reduction of anxiety

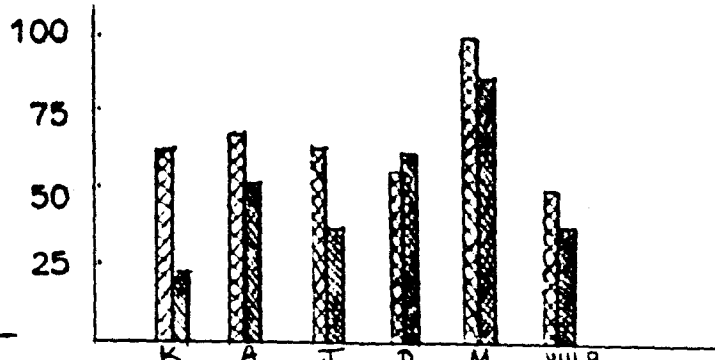


Figure 10.1.7

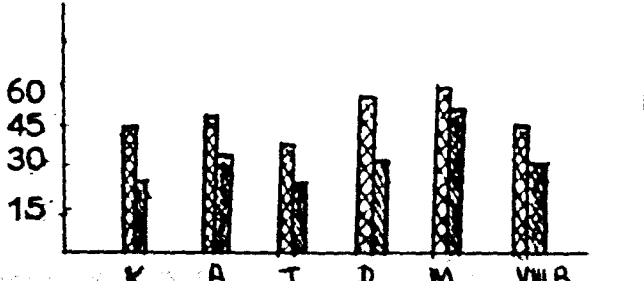


figure 10.1.8 Reduction of

Poor Self concept

Pre-test  
Post-test

Figure 10.1.4, Figure 10.1.5, Figure 10.1.6, Figure 10.1.7 and Figure 10.1.8 show pre-test, post test scores of IPTs.

They were BIRBQ,

FIRS, ACQ, ARS and PSCRS. Figure 10.1.4 shows the reduction of iBs in all six cases Figure 10.1.5,

Figure 10.1.6 Figure 10.1.7, and Figure 10.1.8 show the reduction of EDBs namely fears, anxiety, anger and poor self concept. Significant reduction of fears in all six case studies were also observed. There are variations in the reduction of EDBs in their degrees in various cases. Therefore the hypothesis which states that RET through individual and group counselling will bring about positive cognitive and behavioral changes were retained for iBs, fears, anxiety and poor self concept.

It was noticed that there was only slight increase of score in ARS in the case of Deepa, and very little reduction in the case of Marie, and very little reduction in the case of the group - class VIII B. Therefore more researches may have to be carried out to study the impact of RET in the reduction of anger.

Table 10.1.4 clearly shows that there was significant reduction of iBs as a result of the treatment of RET in group counselling in a class of 56 students. The post-test mean scores are significantly lower than the mean of pre-test scores. Therefore the hypothesis-4 which states that RET is effective in group counselling in a class of 56 was retained for iBs, fears anxiety and poor self concept.

However, the post-test mean scores of ARS for class VI

did not differ significantly for class VIIIIB. It is indicated that for the reduction of anger group counselling sessions alone might not be enough. Therefore the hypothesis-4 which states that RET is effective in group counselling in a class of 56 was not retained in the case of anger.

Table 10.1.4 A comparison Of Correlated Significance Of Difference Of Means

| Tests     | Mean   | SD    | N  | df | Colrelated 't' |
|-----------|--------|-------|----|----|----------------|
| BIRBO     |        |       |    |    |                |
| pre-test  | 196.86 | 1.54  | 56 | 55 |                |
| post-test | 146.43 | 1.43  | 56 | 55 | 9.25**         |
| FIRS      |        |       |    |    |                |
| pre-test  | 183.91 | 22.8  | 56 | 55 |                |
| post-test | 86.95  | 22.5  | 56 | 55 | 6.25**         |
| ACQ       |        |       |    |    |                |
| pre-test  | 67-14  | 17.8  | 56 | 55 |                |
| post-test | 60.05  | 15.9  | 56 | 55 | 3.42**         |
| PSCRS     |        |       |    |    |                |
| pre-test  | 39.64  | 11.27 | 56 | 55 |                |
| post-test | 32.98  | 9.75  | 56 | 55 | 5.38**         |
| ARS       |        |       |    |    |                |
| pre-test  | 39.98  | 12.98 | 56 | 55 |                |
| post-test | 39.32  | 12.68 | 56 | 55 | 0.31 N.S       |

\*-level of significance 0.01 level      N.S. -not significant.



### 10.2.0 Emergence of Theories.

Case 1 KEEY: Knowledge of RET and RET-Theory seemed to give withdrawn KEEY an insight into the relationship that existed between her iBs, withdrawal and other EDBs; REE and REI motivated her to give up iBs, withdrawal and EDBs; CBM, PRE and HRS helped KEEY in the acceptance of rBs and SWBs and strengthened them in her.

Case 2 ANN: Knowledge of RET and RET-theory seemed to give anxious ANN an insight into the relationship that existed between her iBs, anxiety and EDBs; REE and REI motivated her to give up iBs, anxiety and other EDBs; CBM, PRE and HRS helped ANN in accepting the rBs and SWBs and strengthened them

Case 3 JUDY: Knowledge of RET and RET-Theory seemed to have shown nervous JUDY the relationships between her iBs, nervousness and other EDBs: REE and REI motivated her to give up iBs, nervousness and EDBs; CBM, PRE and HRS helped JUDY in the acceptance of rBs and SWBs and strengthen them.

Case 4 DEEPA: Knowledge of RET and RET-theory seemed to show DEEPA the relationship that existed between her iBs and depression and other EDBs: REE and REI seemed to have motivated her to give up iBs which in turn reduced her depressive behaviour and EDBs : REE and REI seemed to have motivated her to give up iBs which in turn reduced her depressive behaviour and

EDBs, PRE, CBM and HRS helped in the acceptance of rBs and SWBs and strengthen them.

Case 5 MARIE: Knowledge of RET and RET-theory seemed to give an insight to Angry MARIE about the relationship that existed between her iBs and her aggressive behaviours and other EDBs; REE and REI motivated her to give up some of her iBs thus reducing her anger and her EDBs: CBM, PRE and HRS helped in the acceptance of rBs and SWBs and strengthen them in her.

Case 6 Class VIII B: Knowledge of RET, RET-Theory seemed to give the group insight into the relationship that existed between their iBs and their EDBs; REE, and REI motivated them to give up their iBs and EDBs, CBM and HRS helped them in the acceptance of rBs and SWBs and strengthen them.

1. Findings in all the six case studies proved that RET was effective in reducing iBs, fears, anger, poor self concept, anxiety, timidity nervousness, withdrawal and depression.

2. For the reduction of anger group discussion alone seemed to be inadequate.

3. Feedbacks from the cases and PO of the investigator showed that home work played an important role in the reduction of iBs as well as EDBs.

4. CBM as part of the group (small and large) sessions

showed speedy effect in over-coming nervousness, fear, anxiety, withdrawal, timidity and depression as was seen from the feedbacks of Cases and PO of the investigator.

5. REE as part of RET enabled in the reduction of iBs and in the introduction of rBs as well as SWBs as evident from the feedbacks of Cases and group VIII B.

6. REI when used with disturbed subjects reduced anxiety, tension, fears and even nervousness. It helped the subjects to face painful or frightening realities with greater confidence and courage as evident from the feedbacks and PO of the investigator.

7. When PRE was used as a preparatory stage for RET, treatment with subjects who were frightened, upset, anxious or tense, it reduced emotional disturbances and relaxed the cases for counselling, evident from PO.

#### 10.2.1 Ground Theory

Knowledge of RET and RET theory seemed to give subjects an insight into the relationship that exists between their iBs and EDBs leading to SWBs; REE and REI motivate them to give up their EDBs and SDBs, CBM, HRS and PRE or AE help them in the acceptance of rBs and SWBs and strengthen them.

#### 10.3.0 Educational Implications.

1. The aim of education is to help the educand to be free

of distorted perceptions, concepts and ideologies. The aim of RET is also to relieve people of their irrational thinking and beliefs, and correct distorted perceptions, concepts and lead the educand to realistic value system.

2. Education brings about desirable changes in the educand who are emotionally disturbed and exhibit SDB patterns. If these are not corrected in time, affect the society adversely. RET would help the educationists to deal with SDB patterns and change them to SWBs through REE, REI and CBM.

3. Education is preparation of individuals for life, enabling them to face life's reverses without breakdowns. RET and RET-steps help the students to handle their emotional upheavals and enable them to face their problems squarely. Since the negative emotions are the result of faulty cognition, CBM as part of RET can be taught to all teachers in correcting their misconducts of students instead of punishment.

4. Education is a continual call to growth through life experiences. Once RET and RET steps become part of one's way of solving problems, it will enable them to face life's challenges more objectively and realistically.

5. All the high school teachers as well as teacher trainees showed the presence of two or more iBs. Therefore, RET can be included for pre-service as well as inservice programmes for teachers.

6. The result of BIBD given to all the students of high school classes numbering 700 showed that all exhibited one or more iBs. Therefore, RET is essential for all, for better growth, development and adjustment.

7. Education is formation of character. The maintaining indiscipline problems at all levels of the educational ladder is an indication of the deterioration of the moral caliber of teachers and students. RET, REE and CBM could help students to give up their EDB and SDBs.

The reasons above clearly state why RET and REE be given to all children at all stages of education. This also brings to light the need of RET as an essential part of the teacher training programmes.

#### 10.3.1. Suggested Curriculum For Rational Emotive Therapy

Topic 1. Theory of RET. Concept - What?

Importance - Why? Methodology - How?

Topic 2. RET and its relationship to Rational living

Topic 3. Irrational Beliefs and irrational thinking, its effect on emotions (cE) and behaviour (bE).

Topic 4. Rational beliefs and Rational thinking as a means of reduction of emotional disturbances in subjects, teachers, parents and children.

Topic 5. Countering iBs and EDBs as a means of correction of SDBs and class room problems.

Topic 6. Countering iBs and EDBs through ABCDEs of RET and introduction of rBs and SWBs through

REE, REI, CBM, PRE and group dynamics.

#### 10.3.2 Educational Agencies

Suggested curriculum for Rational Emotive Therapy may be useful to the following agencies:-

1. Curriculam framers
2. Department of Education
3. Teacher Educators and Teacher, Training Institutions
4. Parents
5. School and college staff and students
6. Non formal and Informal agencies of Education.

#### 10.3.3 Suggestions For Further Research

The following suggestions could be used for further research:

1. The effect of RET could be tried out on homogenous groups with reference to age, interest, achievement, intelligence, religion, caste, community, region and economic status.

2. Effect of REE, REI, CBM and PRE with reference to treatment of RET can be studied separately.

3. Impact of RET on teachers, teacher trainees and parents could be other areas for further research.

4. The suggested curriculum of RET could be tried out on high school and college students.

5. Detailed and separate curricula could be framed for RET, REE and Rational living.

BIBLIOGRAPHY

- Allen, T.W; Whitely, J.M. (1968), Dimensions Of Effective Counselling, Charles E. Merrill Publishing Co, Columbus, OHIO.
- Almeida, N.J.P. (1989), "Effectiveness Of Rational Emotive Therapy with Aggressive Subjects, As a Function of Size of Therapeutic Collectivity and level of Intelligence", A Thesis Submitted For Ph.D Degree in Psychology Of The University Of Bombay.
- Anusha, S. (1994), "Are you overpowered by a death wish? And have no one to turn to? Help is a call away", Article, XIV, Sunday Mid-Day April 3, 1994.
- Arukoff, Diana, B. (1986), "Comparison of the coping and restructuring of components of cognitive restructuring", Cognitive therapy and Research 1986, April, Vol-10(2), p.147-158.
- Arora, R.K. (1992), "Interactional Effect of Creativity and Intelligence on Emotional Stability, Personality Adjustment and Academic Achievement", Indian Educational Review Vol-XXVII, Oct 4, 1992.
- Arron, T. Beck, M.D. (1979), "Cognitive Therapy And The Emotional Disorders", A Meridian Book, New American Library, New York.
- Augustine, K. (1992), "The Discovery Of The Whole Person", Progress Publishers.
- Augustine, L.S. (1987), "Endorsement Of Irrational Beliefs As A Function Of Age and Sex its Relation to Adjustment", M.Sc Dissertation, Bombay University, 1987.
- Bannet, Ruth, (1992), "AET Accelerated Empathic Therapy", British Journal Of Psychotherapy, Vol-8 (4), p.430-441.
- Bednar, Richard, L. Etal, (1974), "Empirical guidelines for group therapy, pre-training, Cohesion and Modeling", Journal of Applied Behavioural Science, Vol-10 (2), p.149-165.
- Berne, P.H. Savary, L.M. (1991), "Building Self Esteem in Children", Better Yourself Books, St. Paul Publications, Bombay.
- Best, J.W. (1948), Research In Education, Prentice Hall, New Jersey.

- Blair, G.M. Jones, R.S. (1964), "Psychology Of Adolescence For Teachers", The Macmillan Company, New York.
- Bloom, Engelhart, Furst, Hill, Krathwohl, (1965), "Taxnomy Of Educational Objectives", David Mckay Company, Inc, New York.
- Bordon, R.C. Biklem, S.K. (1982), "Qualitative Research In Education", An Introduction To Theory And Methods, Allyn And Bacon, Roston.
- Brouweers, Mariette And Wiggan Candice, D. (1993), "Bulimia And Perfectionism Developing The Courage To Be Imperfect", Journal of Mental Health Counselling, April, Vol-15 (2), p.141-143.
- Bower, Hilgard, (1991), "Experience is the only source of knowledge", Indian Educational Review, Vol-XXVI, No.2 April, p.10-28.
- Buch, M.B. (1974), "A Survey of Research in Education", A Centre Of Advanced Study IIn Education, Faculty Of Education, Baroda.
- Buch, M.B. (1979), "Second Survey of Research in Education", Society of Educational Research and Development, Baroda.
- Buch, M.B. (1986), "Third Survey of Research in Education", N.C.E.R.T, New Delhi.
- Busamma, K. (1993), "Expression of Feeling Through Drawing", A Simple Empirical Study, The progress of Education, Vol-LXVIII, No.3, Oct, 1993.
- Borkovee, T.D. and Costello, Ellen, (1993), "Efficacy of applied Relaxation and Cognitive Behaviour Therapy in the treatment of generalized anxiety disorder", Journal of Consulting and Clinical Psychology, 1993, August, Vol-61 (4), p.611-619.
- Bower, Hilgard, (1991), "Experience is the only source of knowledge", Indian Educational Review, Vol-XXVI, No.2, April, p.10-28.
- Cantwell, (1973), "Counselling Today's Youth", Spectrum Publications.
- Carrol, L.P. (1991), "To Love, Share, Serve", Challenges to a Religious, St. Paul's Publications.



- Chand, B. (1995), "I felt like God had died", The Sunday Times Review, October 15, p.13.
- Chakraborty, C. (1991), "Social Stress and Mental Health", Indian Educational Review, Vol-XXVI, No.1, January, 1991, p.127-129.
- Chidananda, (1991), "Ponder These Truths", A Divine Society Publication.
- Chidanada, (1991), "The Peace Within", A Divine Society Publication.
- Clark, Jones, (1992), Relationship Among Teachers, Sense of Efficacy, Perceptiveness, and Locus of Control", Dissertation Abstracts International, Vol-53, No.1, July, p.124.
- Cooper, Samuel, (1992), "Anthropological Impressions of Koach, Participant Observation", Psychological Abstracts, Vol-79, No.12, p.5270.
- Cohn, Elliot, D. (1993), "Syllogizing RET, Applying Formal Logical in Rational Emotive Therapy", Psychological Abstracts Vol-80, No.8 p.
- Clark Moustakes, (1994), "Phenomenological Research Methods", Sage Publications, International Educational and Professional Publishers, New Delhi.
- Costello Brian, R. (1989), "Assessing Progress of two Therapy Sessions Using Budzynski Relation Tape with Relax", Psychological Abstracts, Vol-76, No.4, p.30347.
- Currie, S.J.(1976), "Bare Foot Counsellor", A.T. Publication.
- Cyriac, J. (1991), "Teacher you are special", St. Paul's Publications.
- Davidoff, L.L. (1981), "Introduction to Psychology", Kosaido Printing Co, Ltd, Tokyo.
- Dehlavi, Soheila, (1990), "Family dynamix variables and continuity of psychological adjustment from childhood to late adolescence and early childhood", Dissertation Abstract International, Vol-51, No.5, November, p.15006A.
- De Meuter, G. (1970), "Your God is my God", Sirsur Printing Press, Ketwadi, Bombay.
- Dick, Barbara, M and Wolf, Kate, (1987), "An evaluation of a time-limited programme of dynamic group psychotherapy", Psychological Abstracts, Vol-74, No.4, p.1138.

- Dodd, Bely Nan, (1981), "A Study of the Effects of A Values Development Program of Elementary School Emotionally Disturbed Students", Dissertation Abstracts International, Vol-42, No.2, p.547A.
- Donat, Dennis, C (1985), "Modifying Wandering Behaviour", A Case Study, Psychological Abstracts, Vol-74, No.4, p.1138.
- Edmiston, R. (1990), "Effects of Counsellor Empathy, Gender, pairing, Client type on counsellor counter transferred behaviour", Dissertation Abstracts International, Vol-51, No.5, November, p. 1506A.
- Edward, V.S. (1918), "Guilt Theory And Therapy", The West Minister Press.
- Ellis, A. (1987), "ANGER, How to live with and without it", Jaico Publishing House.
- Ellis A. Harper, R.A. (1961), "A New Guide to Rational Living", Melvin Powers.
- Ellis, A. Greinger, R. (1962), "Handbook of Rational Emotive Therapy", Melvin Powers.
- Ellis, A. Mosley, S. and Wolfe, J.L. (1968), "How to Raise An Emotionally Healthy and Happy Child", Melvin Powers.
- Ellis, A. (1981), "Growth through Reason", Melvin Powers.
- Ellis, A. Harper, R.A. (1961), "A Guide to Successful Marriage", Melvin Powers.
- Ellis, A. (1986), "Use of hypnosis with Rational Emotive Therapy", Psychological Abstracts, Vol-73, No.10, p.2710.
- Ellis, A. (1986), "Expanding the ABC's of RET", Psychological Abstracts, Vol-73, No.2, p.474.
- Ellis, (1986), "Fanaticism that may lead to nuclear holocaust", The contribution of scientific counselling and Psychotherapy, Psychological Abstracts, Vol-74, No.1, p.1128.
- Erickson, C.E. (1954), "A Basic Text for Guidance Workers", New York, Prentice-Hall, Inc.
- Evraiff, W. (1965), "Helping Counsellors Grow Professionally", A Case Book for School Counsellors, Prentice-Hall, Inc.

- Eysencks, H.J. (1986), "Anxiety Reduction Model of Behavioural Change", Psychological Abstract, Vol-73, p.9.
- Fall, Eaton, M. (1992), "Counsellor Self Efficacy," A Test of Bandura's Theory", Dissertation Abstracts International, Vol-53, No.4, p.1053A.
- 
- Fals, Stewart, William, Marks, Allen P, Schafer, John, (1993), A Comparison of Group Therapy and Individual Behaviour therapy in treating obsessive compulsive disorder, Journal of Nervous and Mental Disease, 1993 March, Vol-181 (3), p.189-193.
- Fink, David, (1992), "Psychotherapy of Multiplie Personality Disorder", A Case Study, Psychological Abstracts, Vol-79, No.6, p.2486.
- Finn, Thomas, Diguiseppe, Raymond, Culver, Clayton, (1992), "The Effectiveness of Rational Inactive Therapy in The Reduction of Muscle Contraction Headaches", Psychological Abstracts, Vol-79, No.2, p.759.
- Foot, Brad, (1992), "Accelerated Empathic Therapy, the first self psychological brief therapy", Psychological Abstracts, No.AET, 2438.
- Frankl, V. (1958), "Man's Search for Meaning Logotherapy", New York, Washington Press.
- Fuhriman, A(1992), "U Utah, Counselling, Psychology Program, Short term therapy, A shift in thinking", Psychological Abstracts, 1992, July, Vol-20 (3), p.2442.
- Furman, Ben, Tapani, A (1989), "The use of humor in brief Therapy", Psychological Abstracts, Vol-76, No.5, p.1552.
- Gale, Jerry, (1998), "A field guide to qualitative inquiry and its clinical relevance", Psychological Abstracts, Vol-80, No.8, p.3630.
- Getka, Eric, J. Glass, Carol, R(1992), "Behavioural and Cognitive Behavioural approaches to the reduction of Dental Anxiety", Behaviour Therapy, June, Vol-23(3), p.443-448.
- Giles, Kathleen, M. (1992), "Anger and type related coping resources in the experience of Adult Survivors of incest", Dissertation Abstracts International Vol-53, No.4, p.1054A.

- Glines, Marsha, AL. (1989), "An Innovative Model in higher education-A baccalaureate degree program for non-traditional students with learning difficulties", Dissertation Abstracts International. Vol-50, No.4, p.881-A.
- Goldfried, M.R. (1978), "Reduction of Test Anxiety through Cognition Restructuring", Journal of Consulting and Clinical Psychology. Vol-46, p.32-39.
- Gosh, S. Chattopadhyay, P.K., (1993), "Application of Behaviour Modification Techniques in treatment of Attention Deficit Hyperactivity Disorder", A Case Report, Indian Journal Of Clinical Psychology. Vol-20, No.2.
- Goleman, D. (1995), "Broken Hearts Stunted Minds", Article, Sunday Review Times of India. September 10, p.5.
- Greenberg, Leslie, S. (1993), "Process diagnosis of Levels of Emotional Processing", Psychological Abstracts. Vol-80, No.3, March 1993, p.1251.
- Guarnera, Sharon, Ann Marie, (1992), "Dispositional Optimism and Life meaning and purpose in the elderly", Dissertation Abstracts International. Vol-53, No.4, p.1055A.
- Guick, John Kronn, (1992), "A comparative follow up of high-risk Elementary School students from two schools in Allegany Country Maryland", Dissertation Abstracts International. Vol-53, No.4, p.1055A.
- Haaga, David A, Davidson, Gerald, C. (1992), "Disappearing differences do not always reflect healthy integration, An analysis of cognitive therapy and rational emotive therapy", Psychological Abstracts. Vol-1, No.10489.
- Harvill Riley, (1986), "Bulimia, Treatment with systematic rational restructuring, response prevention and cognitive modelling", Psychological Abstracts. Vol-72, No.5, p.1131.
- Hauck, P.A,(1980), "A Brief Counselling With RET". Philadelphia, The West Minister Press.
- Hazaleus, Susan, L. Deffenbacher, Jerry, L. (1986), "Relaxation and Cognitive Treatments of Anger", Psychological Abstracts, Vol-73, No.8, Journal of Consult and Clinical Psychology, (1986), April, vol-54 (2), p.9, 222-226.

- Heid, Kevin, (1992), "Comparison of the relative effectiveness of two treatment program in modifying the perceptions and behaviours of potentially abusive mother", Dissertation Abstracts International, Vol-53, No.4, p.1 1056-4.
- Hiltunen, Sirkker, S. (1988), "Initial therapeutic Application of Noh Theater in Drama", Journal of Transpersonal Psychology, Vol-20 (1), p-71-79.
- I.C.T.A, (1993), "You and Me". Transational Analysis, I.C.T.A Publication.
- Ismail, M. (1989), "Socio-economic Deprivation among college Freshman in Relation Factors", Indian Educational Review, Vol-XXVIII, No.3, July, (1992).
- Jayanthi, N. (1991), "Development of Skills in the mentally Retarded Child," the effect of Home Training", Indian Educational Review, Vol-XXVI, No.3, July, (1991), p.29-48.
- Jeevan Dhara Ashram, (1993), "Jeevan Dhara Lahran". U.P. Garhwali Printing Press.
- John, P. (1995), "Cinema. Communication of Culture and Values", Article The Examiner, Vol-146, No.20, p.1-2.
- John, P. (1994), "Message for 28th World Communication Day", The Examiner, Vol-XVI, Nos-5,6, May, June.
- Kaighim, Barbara, A. (1992), "Mission State High Way Patrol Recruit Training and Effect of Self Perception", Dissertation Abstracts International, Vol-53, No.1, p.1353.
- Kalpan, Dorothy A. (1983), "Behaviour Cognitive and Behavioural Cognitive Approaches to Group Assertion Training Therapy", Psychological Abstracts, Vol-69, No.2, P.436.
- Kazdin, Alan, E. (1974), "Effects of Covert Modelling and Model Reinforcement on Assertive Behaviour", Journal of Abnormal Psychology, 1074, January, Vol-189(3), p.240-252.
- Keable, Diana, (1986), "Relaxation Training Technique, "A Review, How Effect give is Relaxation Training?", Psychological Abstracts, Vol-73, No.9, November, p.2434.
- Kelly, Laura, J.(1993), "Rational Emotive Therapy and Aural Rehabilitation", Psychological Abstracts, Vol-25, p.43-50.

- Kendall, Philip. C. (1993), "Childhood Coping, Avoiding a life time of anxiety", Psychological Abstracts, Vol-80, No.80, p.3622.
- Kirk, S.A.,(1970), "Educating Exceptional Children". IBH Publishing Company.
- Klees, S. Esmanhoto, P. Wertheim, J. (1985), Educational Evaluation Trends Towards More Participatory Approaches", Indian Social Institute Monograph Series 21.
- Krishna, D. (1993), Editorial, "Indian Journal of Clinical Psychology", Vol-20, No.2, p.
- Krumboltz, J.D Thoresen, C.E.(1969), "Behaviour Counselling- Cases and Techniques". Holt, Rinehari and Winston, INC, New York.
- Kumar, S.S Kaur, S. (1993), "Effectiveness of Shavasana On Depression Among University Students", Indian Journal of Clinical Psychology, Vol-20, No.2.
- Kurian, C. (1991), "A Sociological Study Of Schizophrenic Patients In Goa", Ph. D. Thesis Submitted to Goa University.
- Leaf, Russel, C. Krauss, David, H. Dantzig, Stephen, A. Alington, Diane, E. (1992), "Educational Equivalents of Psychotherapy, positive and negative mental benefits after group therapy exercise by college students", Journal of Rational Emotive and Cognitive Behaviour Therapy, Vol-10 (4), p.189-206.
- Leela Menon, (1994), "Bringing them back from the brink of death Article", Indian Express, 18th November.
- Leon, Christopher, Aronow, Rebeca, E. (1992), "Through Process constraints and cognitive styles, Individual differences in self-generated reduction of fear", Journal of Social and Clinical Psychology, (1992), Vol-11 (4), p.365-376.
- Leslie, R.C. (1985), "Jesus and Logotherapy". Nashville Abingdon and Press.
- Maclean, I.C, (1966), "Child Guidance And The School". Methen Co. Ltd., 1 New Fether Lane London Ec4.
- Macracken M, (1976), "Lovy A Very Special Child". A signet book, New American Library.

- Maertz, Kim, (1992), "Self defeating beliefs of battered women", Dissertation Abstracts International, Vol-53, No.1, p.71A.
- Malayala Manorma Editor, (1994), "Makkala Knnu Aatmahatya, Rangam Kanda Aallu Marichu", Dated 26th, October, 1994.
- Maurus, J.M. (1993), "Mental Health", Better Yourself Book, St. Paul Publication, Bandra.
- Maurus, J.M. (1987), "A Gift for Teachers", Better Yourself Books, St. Paul Publication, Bombay.
- Mathey, Stephen, (1988), "Cognitive Behaviour Treatment of a Thunder Phobic Child", Behaviour Change Psychological Abstracts, Vol-76, No.4, p.1204.
- Markham, Donna, J. (1995), "Behaviour Rehearsals VS Group Ssystematic Desensitization in Assertiveness Training with Women", Special Issue, Gender Roles, Academic Psychology Bulletin, Vol-7 (2), p.157-174.
- Mascarenhas, M.M (1983), "Counselling Youth", Asian Trading Corporation, (1983), Bangalore.
- May, R. (1967), "The Art of Counselling", Abingdon Press, Nashville, Tennessee, U.S.A.
- May, R. (1972), "Power and Innocence." A Search for the Soruce of Violence", W.W. Norton and Co. Inc., New York.
- Mekat, J. (1985), "Own Your Power", Claretion Publication, Bangalore.
- Melvin Powers, (1961), "A Practical Guide to Self Hypnosis", Melvin Powers Wishire Book Company.
- Miles, M.B Huberman, A.M. (1994), "Qualitative Data Anaysis", Sage Publications, New Delhi.
- Miller, Alfred, R. Yeager, Raymond, J. (19 ), "Managing Change", A Corporative Application of RET-Journal of Rational Emotive and Cognitive Behaviour Therapy, Vol-11 (2), p.65-76.
- Merlin, C., Wittrock, (1985), "Handbook of Research On Teaching", Macmillan Publishing Company.
- McAuley, Edward, (1985), "Modelling and Self Efficacy", A Test of Bandura's Model, Journal of Sport Psychology, September, Vol-7 (3), p.283-295.

- McCormack, Norman, A. (1985), "Cognitive therapy of Post Traumatic Stress Disorder", A Case Report, American Mental Health Counsellor's Association Journal. (1985), October, Vol-7 (4), p.151-155.
- Mishra, R.D. (1985), "Key to excellence", Examines the Role of Transactional Analysis in Increasing Managerial Effectiveness in an Organisation, The Times of India. (ASCENT), September, 4, p.1.
- Monroe, D. Cohen, (1976), "Ways to Help Children Overcome Sex Role Stereotypes", Growing Free-Magazine-Association for Childhood Education International.
- Monteiro, H.A. (1994), "Integral Education of Youth, Formal and Informal Setting", Vidhyajyoti, Journal Of Theological Reflection, Vol-58, No.2.
- Morton, (1925), "Childhood's Fears", Macmillan Company, New York.
- Mucchielli, R. (1983), "Face to Face In The, Counselling Interview", The Mac-Millan Press Ltd.
- Narayana K, Kumar S.K.I. Rao, S. (1994), "Personality Types and Value Orientations Among Business Management Students", Indian Journal Of Clinical Psychology, Vol-21, No.2, p.7-12.
- Narenda, P (1995), Child Abuse, Some after effects "Sunday Review-Times of India", October 1, p.13.
- Naved, I. Hamida, A.S. Asif, A. (1993), "A study of Family in Relation to Anger Among male and Female Students", Indian Journal of Clinical Psychology, Vol-20, No.2, p.73-77.
- Neary, N. (1994), "With A Look of Christ". An Article Private Circulation.
- Nicassio, Perry, Bootsgin, R. (1974), "A Comparison of Progressive Relation and Autogenio Training as Treatments for Insomania", Journal of Abnormal Psychology, 1974, January, Vol-83 (3), p.253-260.
- Nixon, C.D. Singer, George, H. (1993), "Group Cognitive Behavioural Treatment for Excessive Parental Self Blame and Guilt", American Journal of Mental Retardation, Vol-97 (6), p.665-672.
- Oleksy, W.G. (1981), "The Power of Concentration". Argus Communication.



- Oldfield, C. (1995), "Death by Overwork", The Sunday Review, Times of India 24th September, 1995, p.9.
- Ostel, Allistair, (1992), "Abolutist Thinking and Emotional Problems", Psychological Abstracts, Vol-5 (2), p.2460.
- Overholser James, C. (1992), "The Use of Guided Imagery in Psychotherapy, Modules for use with Passive Relaxation Training", Psychological Abstracts, Vol-79, No.9, p.3849.
- Paley, Karen, S. (1993), "Dream Wars A Case Study of a Woman with Multiple Personality Disorder", Dissociation, Progress in the Dissocrative Disorders, Vol-5, No.2, p.111-116.
- Path (1989), "Guidelines for the Use of Qualitative Research methodologies". Prepared for the Agenda for Action to Improve the Imprementation of Population Program in Sub-Sharan Africa in 1990's Washington, D.C.
- Patricia, H. Berne, Louis, Savary, (1991), "Building Self Esteem in Children". St. Paul Publications.
- Patrick, L.C. (1991), "To Love, Share, Serve". Challenges To a Religious, St. Paul Publications.
- Peter, G. (1995), "Whats Media Education", The Examiner, Vol-146, No.20, p.9-10.
- Piaget, J. (1970), "Main Trends in Psychology". London, George Allen and Unwin Ltd., Ruskin House.
- Powel, J. (1974), "He Touched Me". Argus Communication.
- Powel, J. (1984), "The Christian Vision". Arugus Communication.
- Powel, J.(197), "The secret of staying In Love". Argus Communications.
- .Powel, J. (1969), "Why am I Afraid to tell you who I am?". Argus Communications.
- Powel, J. (19 ), "Why am I afraid to Love?". Argus Communications.
- Rangaswamy, K. (1994), Article "Spirituality And Psychotherapy", Indian Jurnal Of Clinical Psychology, Vol-21, No.2, Editorial.
- Rangaswamy, K. (1994), Editorial "Indian Journal of Clinical Psychology", Vol-21, No.2.

- Rapee, Ronald, M. Barlow, D.H. (1989), "Cognitive Behavioural Treatment", Psychological Abstracts, Vol-76, Nos. p.15,56.
- Ravella, Neil, F. (1989), "The Serious Business of Humor in Therapy", Psychological Abstract, Vol-76, No. 5 p.1556-1557.
- Read, K.H. Conrad, H.D. (1942), "Interpretation of Behaviour Ratings In Terms of Favourable and Unfavourable Deviations", A Study of Scores From The Read-Conrad behaviour Inventory, Institute of Child Welfare, University of California, p.161-215.
- Rennie, David, L. Toukmanian, Shake, G. (1992), "Explanation in Psychotherapy Process Research", Paradigmatic and Narrative Approaches, Sage Focus Editions, Sage Publications, Inc.
- Richard, D.A. (1989), The treatment of a snake phobia by "Maginal Exposure", Behaviour Psychotheraph, July 1988, Vol-16 (3), p.207-216.
- Ronen, Tannmie, (1993), "Cognitive Therapy with Young Children", Psychological Abstracts," Vol-80, No.3, p.1256.
- Rothenberg, (1977), "Children with Emerald Eyes", Pocket Books, New York.
- Rowlsy, Lewis, (1990), "A Naturalistic Case Study of Higher Cognition in Academic Tasks Performed by Secondary Students", Dissertation Abstracts International, Vol-51, No.5, p.1556A.
- Sabotta, Thomas, Arthur, (1981), "An Investigation into the Relationship Between Irrational/Rational thinking and Academic Achievement", Dissertation Abstracts International, Vol-42, No.1, p.92A.
- Sandel, Zinda, (1992), "Understanding and Empathy Development in Seasoned Psychotherapist, A Qualitative Study", Dissertation Abstracts International, Vol-53, No.1, P.73a.
- Sandison, Ronald, (1993), "The presence of God in the Group. A neglected Dimension Aspects of Religion in group analysis", Psychological Abstracts, Vol-80, No.8, p.3634.
- Selm, Mark, E. (1993), "Three issues in treatment and implications for Music therapy", Psychological Abstracts, Vol-80, No.7, p.2231.

- Sharpe, Luise, Nicholas, T. (1993), "Towards a Cognitive Behaviour Therapy of Problem Gambling", British Journal of Psychiatry, March, Vol-162, p.407-412.
- Sharma, Prasad, Satyanarayana, (1989), "Research Methods in Social Sciences", Sterling Publishers.
- Shelton, Charles, (1989), "A Psychological Study of Adolescent Everyday Morality", Dissertation Abstracts International, Vol-50, No.4, p.908a.
- Strong, Thomas, Irvin, (1992), "Relationship between Coping Beliefs, Coping Practices and Coping Resources and the Quality of Life in Rheumatoid Arthritis Patients", Dissertation Abstracts International, Vol-53, No.1 p. 74A.
- Kapoor, S., Shankhala, S. (1994), "A study of Secondary Motives in Relation to Cattels Personality Dimensions", Indian Journal of Clinical Psychology, Vol-21, No.2, p.6.
- Strosal, Kirk, D. Ascough, James, Rogas, Arleen, (1986), "Imagery Assessment by Self Report," A Multi-Dimensional Analysis of Clinical Imagery", Cognitive Therapy and Research, (1980), April, Vol-10 (2), p.187-199.
- Srivastava, (1992), Fifth All India Educational Survey, NCERT, New Delhi.
- Tajan, J (1994), "Report Of the Core group meeting", Bhopal Consultation held at Faridabad, 75h April, 1994, Private Circulation.
- Telch, Michael, J. Lucas, J.A. Schmidt, Norman, B.Hanna, Henry, Hetal, (1993), "Group Cognitive Behavioural Treatment of Panic Orde Behaviour Research Therapy", Psychological Abstracts, Vol-30, No.8, p.3624.
- Thorpe, Geoffrey, L. Freedman, Eric G and Mc Galliard, David, W. (1984), "Components of Rational Emotive Imagery, Two experiments with non-assertive students", Psychological Abstracts, 1986, Vol-73, No.2, p.491.
- Thyer, Bruce, Mathew, A. John, (1986), "The effect of Phobic Anxiety on Plasma B. Endorphin", A Single Subject Experiment Behaviour, Research and Therapy, Vol-24, p.237-241.

- Tracy, Margaret, E. (1991), "Family Traits and Child Functioning The Relationship between Family Cohesion Adaptability, Parenting Skills and Responsibility and Self-esteem in Children", Dissertation Abstracts International, Vol-51, No.7, p.2271A.
- Vanier, J. (1994), Followers of Jesus, St. Paul Publications.
- Varkey, C.P. (1993), Handle with care you can make or break your child, St. Pauls Publications.
- Warchter, Linda, Tuckley, (1991), "A study of Career Consciousness, Work Values And Temporal Experience", Dissertation Abstracts International, Vol-42, No.1, July p.93A.
- Watkins, Pathi, Sturgies, Ellie, T. George, A.C. (1989), "Guided Imaginal Coping, an integrative treatment for panic disorder", Journal of Behaviour Therapy and Experimental Psychiatry, 1988, Vol-19 (2), p.147-155.
- Wells, Adrian, Dattilio, Frank, M. (1992), "Negative Outcome in Cognitive Behaviour Therapy", A Case Study Behavioural Psychotherapy, Vol-20 (3), p.291-294.
- Weisz, Joh, Rudolph, Karen, Granger, Douglas, Sweeney, Lynne, (1993), "Cognition, Competence and Coping in Child and Adolescent Depression", Development and Psychotherapy, 1992, Vol-4 (4), p.627-653.
- Westwood, P. (1993), Common Sense Methods for Children With Special Needs, Second Edition Routledge, London.
- William, R.S. (1992), "A descriptive Case Study of an Alternative Education Program for at risk youths in a small, rural high school", Dissertation Abstracts International, Vol-53, No.4 p.1060A.
- Wittrock M.C. (19 ) Handbook of Research on Teaching, Mac-Millan Publishing Company.
- Wooten, Herbart, Ray, (1992), "Cognitive complexity and selected Aspects of teachers self reported Cognitions", Dissertation Abstracts International, Vol-53, No.1, July, p.74A.
- Wolpe, Joseph, (1984), "Deconditioning and Adhor Uses of Relaxation, an Overview", Psychological Abstracts, Vol-73, No.2, p.492.

APPENDIX I

RATIONAL EMOTIVE THERAPY

A

HAND BOOK

Dr B.K. Passi

And

Miss Beulah Mendez

## TABLE OF CONTENTS

1. Why Rational Emotive Therapy
2. Concept - What is RET
3. RET - Steps
4. Who needs RET
5. Identification of IBs and EDBs
6. Treatment of RET
7. a) IPTs a Beulah's Irrational Belief Description (BIBD)  
b) Beulah's Irrational Belief Questionnaire (BIRBQ)  
c) Fear Identification Rating Scale (FIRS)  
d) Anger Rating Scale (ARS)  
e) Anxiety Checking Questionnaire (ACQ)  
f) Poor Self Concept Rating Scale (PSCRS)  
g) Home-work Report Sheet (HRS)

Prepared by

B.K. PASSI

BEULAH MENDEZ

## 1. Why Rational Emotive Therapy

Introduction: a) Today we live in a world of continual changes. Past values and beliefs are giving way to a society with no stability of values, convictions or beliefs. Man and woman young and old, child and adolescent, babe and infant are all equally exposed to this changing world. The T.V. with its world news and programmes are exposing our infants, children, adolescents and adults to a world culture, where everything is permissive and nothing is a taboo anymore. These continual exposure to the mass media. Contradictory values spoken of in the family, school, from religious and social pulpits and from political platforms cause conflicts in the minds of all alike.

b) A glance at the daily news papers will help us to be aware of self defeating, self destroying emotionally disturbed behaviours exhibited at all levels. Increase in suicide rates, mental breakdowns, addiction to alcohol and drugs all these are symptoms of an emotionally sick and mentally starved society.

c) The increase in the number of emotionally disturbed behaviour patterns exhibited by our youth, adolescent and children is the main reason for the application of Rational Emotive Therapy. The research study brought to light the presence of a number of irrational beliefs (iBs) in school children, adolescents, adults and teachers.

d) The researches have brought to light that there is a positive relationship between iBs and Emotionally Disturbed Behaviours. If iBs and irrational thinking that are related to the iBs can be modified, reduced or removed then EDBs can be reduced and thus self defeating behaviours (SDBs) too can be replaced by self winning behaviours (SWBs), provided iBs are replaced with rBs. Albert Ellis (1960) brought to light these ideas. After him many behaviouristic psychotherapists, cognitive therapists, and Rational Emotive Therapists agreed upon this idea.

e) In India there is paucity of Research studies in this area RET. With the growing indiscipline, corruption, cheating in the examinations and evaluation. RET can play an important 'Role' to remould and reincarnate new approaches in thinking, feeling, and acting. Thus a new educational environment can be created in our institutions and through our institutions to our society and the world at large.

## 2. Concept: What is RET?

Rational Emotive Therapy advocates the age old thinking of the Greek Philosopher Epictetus that it is not the events that cause emotional disturbances but what we think about them. Albert Ellis speaks of Rational Emotive Therapy as an education helping people to give up their idealistic and unrealistic thinking and accepting the world of reality by giving up their irrational thinking and irrational beliefs.



Paul Hauck and Albert Ellis have identified these irrational beliefs given below.

1. I must be loved and accepted by everybody important to me.
2. I must be perfect in everything I do.
3. Some people are bad and wicked and need to be punished.
4. It is terrible and bad when things do not go the way I want them to go.
5. What we do and think now is because of what happened to us in the past and we cannot get away from them.
6. Bad and unhappy events are caused by others and other things not by ourselves and so we cannot do any thing about them.
7. We need others to help us and we must have somebody strong to get us out of trouble.
8. When we have some difficult tasks to be done, it is much easier to run away from them than to face them.
9. There is always a right and perfect answer to every problem and it is a terrible thing if we cannot find this answer.
10. If something is scary frightening and fearsome I must keep on thinking about it.
11. I must be upset over others and others problems.
12. This world must be just and fair to all.

We suffer not because of what happens outside of us but because of what happens inside us. Words normally cause anger, depression and withdrawal are: 'should', 'must', 'cant', 'terrible', 'horrible' and 'awful'. Many people work up their

anger and through their 'masturbation' and by 'catastrophising' the events. If events are responsible for anger, depression, anxiety, withdrawal, then all human beings in that situation or similar situations would react in the same way. But it is our observation that people react differently to different situations and these reactions are based on their beliefs.

If these beliefs can be replaced with more realistic rational beliefs these feelings can be changed. RET strongly believes that feelings are caused by thinking and thinking is based on the person's beliefs and convictions. RET therapists believe that thinking affect feelings and feelings in turn are responsible for behaviours. EDBs are the outcome of emotional disturbances and these in turn are caused by irrational thinking.

Through ABCDEs of RET, EDBs can be changed to SWBs. RET therapists use these steps known as ABCDE's of RET to help the subjects to trace back their thinking process (through self talk) that led them to disturbance. Once these thoughts and beliefs are found out, they are debated and thus DBs are reduced or destroyed.

It is also found that these debates bring two types of changes in the individual namely cognitive effect (cE) and behaviour effect (bE). Once cE takes place the bE will follow.

### 3. RET Steps

ABCDEs are called RET Steps A- stands for activating

agent, that is the cause for emotional disturbance. Examples the death of some one close to me, or a firing from my boss, or a rejection of my lover. B- stands for beliefs both rBs and iBs. Our thought processes often start with rational thinking leading to irrational thinking. And these are based on our beliefs. This self talk is so fast it takes place in a fraction of seconds. C- stands for consequence. It is easy to note our anger, anxiety depression, fears and worry that we experience as the result of an unpleasant event or an experience. D- stands for debate. First we detect the rBs and iBs. Then we find out the iBs responsible for EDBs. Through discussion and debate we reduce or destroy the iBs and replace these with more realistic rBs. E- stands for effect. The effects may be cognitive or behaviour. Cognitive effect (cE) brings about change in thinking. Behaviour effect (bE) brings about change in behaviour.

The RET therapists help their clients to overcome their disturbances through REE, REI and CBM. Through REE rational thinking is introduced enabling the subjects to accept an imperfect world with imperfect people and imperfect actions. Once we accept the reality that humans are imperfect then it is much easier to accept self and others. The less we see this the more disturbed we are. The more disturbed we are the less we can do something creatively to make this world a better place. A disturbed person disturbs others and as a result more suffering, more violence, more hatred and inhuman behaviours appear in this

world. RET helps a person to be more human. As a result he or she can accept self, world and others.

#### 4. Who needs RET?

Rational Emotive Therapy is for all. Because all of us do exhibit EDBs sometime or the other. Most of us hold on to one or two or more iBs. So it is for all. It is a self education and self awareness process through the use of RET theory and RET steps. By using RET steps we can overcome our EDBs. How do I identify or detect my iBs and EDBs? The Investigator Prepared Tool (IPTs) will enable the persons to find out the common areas where we exhibit EDBs as a result of iBs. By administration of investigator prepared tools (IPTs) one could become aware of that areas that need immediate attention.

#### 5. Identification of iBs and EDBs

Administration of the following would help in the identification of iBs BIBD and BIRBQ. While FIRS, ARS, ACQ and PSCRS would indicate the presence of EDBs. The test results would help the subjects to find the areas where they may need help. Awareness is the first step to change. The test results will enable the subjects decide on which area they would like to word on.

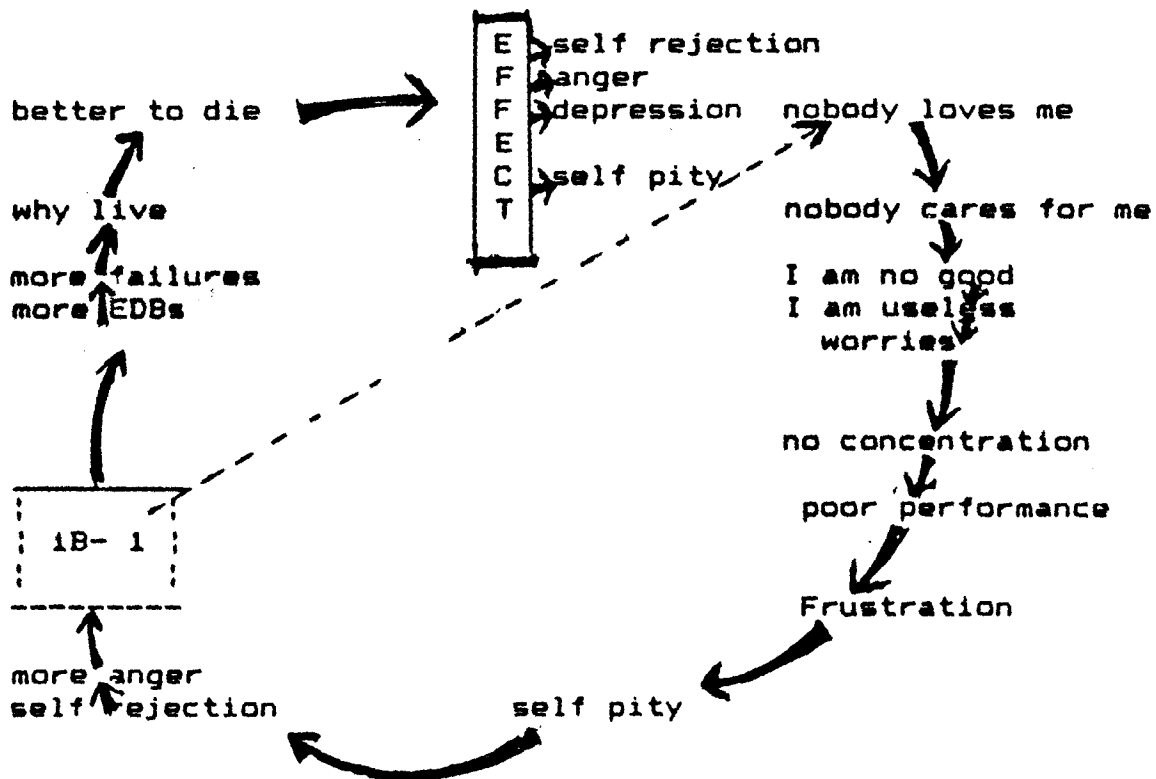
#### 6. Treatment of RET

RET can be conducted in groups as well as through individual counselling. The combination of both gives the best

result along with assignments and practice of ABCDEs.

Samples of iBs and its effect and counter rBs and its effect on the persons are shown below.

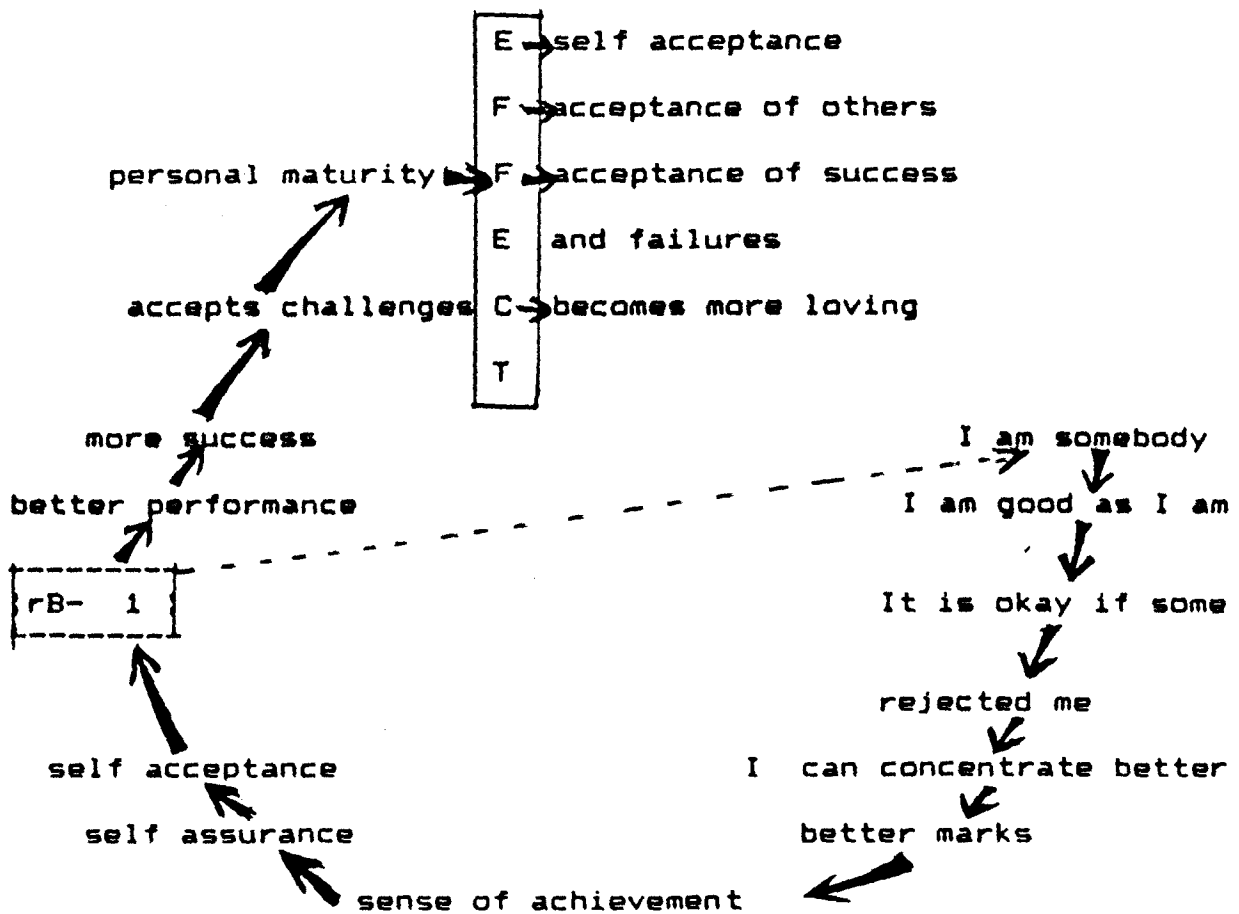
Irrational belief No.1 - I must be loved and accepted by everybody important to me.



By countering the iBs through debate and discussion we can destroy or reduce its effect and thus EDBs can be changed into SWBs through the introduction of rBs. The two conditions necessary for success are 1. self discipline 2. regular practice.

Countering iBs

Rational belief-1 It is okay if all do not love me.



IPTs are attached herewith. In order to use this booklet the user must undergo a training course in RET. Going through direct experience will help in the effective use of this hand book.

Beulah's Irrational Beliefs Description (BIBD)  
 (Identification of irrational Beliefs Of High School Students)

Instructions

A number of statements are given below with examples. These are beliefs of people. If these beliefs are true in your case put 'x' on 'yes' against the statement and if it is not true in your case then put 'x' on 'no' against the right statement. Remember to answer honestly. Honest answers will help you to know your beliefs.

1. I must be loved and accepted by everybody in my neighbourhood.

Example: If mummy, dad, uncles, aunties or relatives and others show more love to my brothers or sisters or give them better gifts sometimes, I feel very sad and upset. I feel they don't love me.

Yes/No

2. I must be perfect in everything I do.

Example: When I do not get the first or second place in studies, sports, games, singing or acting I feel bad. I do not like to take part in anything if I can't win prizes. If there are others who are better than me, then I am worried and upset.

Yes/No

3. Some people are bad and wicked and need to be punished.

Example: Those people who hurt or scold me or fight with me are bad, I don't like to be with them. They should be punished. People like robbers, murderers and terrorists are bad and wicked. So they should be put in the prison or killed.

Yes/No

4. It is terrible and bad when things don't go the way I want them to go.

Example: I had planned to go out with my friends; but dad want me to go for a movie with the family. In such situations I feel sad and upset because I wanted to be with my friends and I couldn't do what I wanted. So I feel unhappy the whole day and do not like to have fun or talk to others. Instead I feel like crying and shouting at others.

Yes/No

5. What we think or do now is because of what happened to us in the past and we cannot get away from this.

Example: I feel upset, disturbed or frightened, when I make a mistake. It is because I was always scolded and punished

when I made small mistakes as a child. So now can't help getting upset when I make a small mistake, and I feel I won't be able to overcome this habit anymore. Yes/No

6. Bad and unhappy events are caused by others or other things not by ourselves and so we cannot do anything about them.

Example:- As I was running across the road, a cyclist came and knocked me down, though he saw me he didn't bother to put a break. I fell and fractured my hand. Because of his carelessness I have to suffer so much of pain. I would not have crossed the road if my friend had not called me to the other side. Because of others I have to suffer. Yes/No

7. We need others to help us and we must have somebody strong to get us out of trouble.

Example:- I find it difficult to do the homework. It is easy when mummy explains and does it for me. I know I can do it with little more effort, but I feel better when mummy does it for me. Even when my bag is a little heavy I ask mummy to carry it for me. Yes/No

8. When we have some difficult tasks to be done, it is much easier to run away from them, than to face them.

Example:- When there is a test or examination it is better not to appear, if I feel I have not studied thoroughly. It is better to take a drop than to fail. When teachers ask me to do something difficult like preparing a speech or a chart I avoid meeting those teachers or hide behind my class mates. Yes/No

9. There is always a right and perfect answer to every problem, and it is a terrible thing if we cannot find this answer.

Example:- When teachers ask for suggestions or celebrate school day, though I get a number of ideas, I do not give my suggestions because I feel mine may not be the best solutions. It is foolish to give suggestions that are not the best. Yes/No

10. If something is painful, frightening or sad I must keep on thinking about it.

Example:- I am afraid of ghost when I am alone in the dark I think about it. Daddy scolded me a lot; now whenever I see daddy I keep thinking about all that he said and I feel very very sad. Yes/No

11. I must be upset over others and others problems.

Example:- When my friend is scolded in the class I feel very sad and upset. I even cry and feel like scolding the



teacher.

Yes/No

12. This world should be just and fair to all at all times especially to me. Sometimes I am scolded for talking. But others do not get scolding when they talk, then I feel very sad for I feel that everyone should be treated the same way. If my parents give gift to my brother or sister and do not give me one, I feel upset and disturbed. I even feel angry and think they do not love me.

Yes/No

\*\*\*\*\*

## BIBD (Answer sheet)

Name \_\_\_\_\_

Class \_\_\_\_\_

Age \_\_\_\_\_

Date \_\_\_\_\_

1. Yes No

2. Yes No

3. Yes No

4. Yes No

5. Yes No

6. Yes No

7. Yes No

8. Yes No

9. Yes No

10. Yes No

11. Yes No

12. Yes No

Beulah's Irrational Beliefs Questionnaire (BIRBQ)

Instructions:- Are you interested in knowing more about your own beliefs? If you answer honestly and carefully all the statements on the pages that follow, it will be possible for you to obtain a better understanding of yourself. There are no right or wrong answers. Indicate your answer to each question by putting a 'x' on VT, T, PT, NT OR NOT, as per your belief. (Meanings of these symbols are VT-very true, T-true, PT-partially true, NT-not true NOT-not true at all. There is no time limit. But work as fast as you can.

1. I must receive love from all those whom I really care, and if I do not receive love from them, I feel miserable.
2. Everything I do must be perfect or it is a shame for me.
3. Some people in the world are bad and wicked and they should be severely punished.
4. Everyone must listen and do what I say, otherwise I feel angry.
5. I should not plan a thing if I cannot carry it out.
6. My happiness depends totally on my parents and friends because I can not be happy without them.
7. Crude behaviour, indifference or rejection from others turn me crazy and I can not tolerate these.
8. I should never be left alone in this world when I am never safe.
9. I should not try things that are difficult because it will create tension.
10. I should be thoroughly competent and confident about the subject before I can appear for a test or an interview.
11. The world should be a place where there is justice for all and people should always treat me justly.
12. I must keep worrying about other's pains and their actions and feel responsible for them.
13. If the person I love, rejects me, I will not be able to live happily.
15. I should not try something, if I do not know to do it perfectly, because I must not make mistakes.

16. People do wicked things because they are always wicked and I should keep them away.

17. I feel terrible when someone opposes me or my ideas.

18. I am like this because of what happened to me as a child, so I would not be able to change.

19. I feel very happy when others are good, loving and kind to me. I feel miserable when people are cold to me.

20. I must always have some one strong and helpful near me to feel secure.

21. I should always look for the right and perfect answer to all problems.

22. I must keep thinking about painful and frightening experiences of my life.

23. I should never question the authority because they must be right.

24. I should leave the decisions to others even though it touches my life because you do not have the best answer.

25. I must keep away from people who have caused me pain in the past.

26. Even if some people reject me sometimes, I feel I am worthless.

27. It is a disgrace to make mistakes before the public, even if you are trying something for the first time.

28. It is horrible to have so many wicked people in the world. They should all be destroyed.

29. I feel terribly upset when I can not carry out my plans the way I want.

30. I would not be able to overcome my weaknesses because I have failed everytime I tried. So I should not try any more.

31. I must get always what I want, than I am very happy.

32. I should always avoid difficult tasks or words because it is foolishness to face problems.

33. Others at home and in my class must help me, when I am in need.

34. If you do not have the best solution, you should not speak or act.

35. I should go over and over the painful experiences and keep feeling upset about them.

36. I should not think that I can solve problems because I don't know whether I have the best solution.

37. When people reject or do not take notice of me, I feel something must be wrong with me.

38. I should never question the customs and traditions because they must be good and should follow them blindly.

39. I should not give chances to others to laugh at my mistakes.

40. It is difficult to know who is not wicked. So one should be on guard.

41. I should keep my promises always; so also others because it is horrible to break promises.

42. Since my parents and my teachers never understood me, the adults will always misunderstand what I tell them. So I should not explain anything to them.

43. I should not take part in acting or singing for I did badly in the past and will never more be able to do it well.

44. When I do not get what I want, I feel terrible and I create a scene /racket at home.

45. I should have someone stronger and wiser with me always, so that I am safe.

46. Those who are clever run away from difficulties or painful situations like hard work, difficult games and studies.

47. I should postpone the activity till I am completely sure of the best solution.

48. If I have committed a blunder or sin I should keep on thinking about it and should feel bad about them.

49. I feel terribly upset when others are punished and scolded.

50. I prefer to be alone and unhappy rather than be left out and ignored by others.

51. If someone finds fault with me or corrects me I feel terrible/bad/sad.

52. When I visit the hospital or sick people, I feel very sad and upset.

53. One should keep away from all strangers for they might be terrorists or villains.

54. Past is all important to me, it cannot be changed, so I can do nothing about it.

55. When I have to stay alone I feel so helpless and upset.

56. I ought to avoid all painful situations like failures, mistakes or work at home and school.

57. I should feel bad, worried and upset about the problems and sufferings of others or I would not be human.

58. I should always obey my parents even if I do not understand their instructions, or I feel it is wrong.

59. I should escape difficult work than to blunder.

60. I should think about the painful past now and again and feel rotten (very bad) about it.

#### Scoring Key

iB Number 1. 1, 6, 14, 26, 37, 51

iB Number 2. 2, 10, 15, 27, 39

iB Number 3. 3, 16, 28, 40, 53

iB Number 4. 4, 17, 29, 31, 44, 50

iB Number 5. 18, 30, 38, 42, 43, 54

iB Number 6. 18, 30, 38, 42, 43, 54

iB Number 7. 8, 20, 33, 45, 55

iB Number 8. 21, 34, 36, 47, 24

iB Number 9. 21, 34, 36, 47, 24

iB Number 10. 22, 35, 48, 46, 60

iB Number 11. 57, 12, 49, 52

iB Number 12. 11, 13, 19, 41.

BIRBO (Answer Sheet)

Name: \_\_\_\_\_

Class : \_\_\_\_\_

Age \_\_\_\_\_

Date : \_\_\_\_\_

Score : \_\_\_\_\_

|     |    |   |    |    |     |     |    |   |    |    |     |
|-----|----|---|----|----|-----|-----|----|---|----|----|-----|
| 1.  | VT | T | PT | NT | NOT | 31. | VT | T | PT | NT | NOT |
| 2.  | VT | T | PT | NT | NOT | 32. | VT | T | PT | NT | NOT |
| 3.  | VT | T | PT | NT | NOT | 33. | VT | T | PT | NT | NOT |
| 4.  | VT | T | PT | NT | NOT | 34. | VT | T | PT | NT | NOT |
| 5.  | VT | T | PT | NT | NOT | 35. | VT | T | PT | NT | NOT |
| 6.  | VT | T | PT | NT | NOT | 36. | VT | T | PT | NT | NOT |
| 7.  | VT | T | PT | NT | NOT | 37. | VT | T | PT | NT | NOT |
| 8.  | VT | T | PT | NT | NOT | 38. | VT | T | PT | NT | NOT |
| 9.  | VT | T | PT | NT | NOT | 39. | VT | T | PT | NT | NOT |
| 10. | VT | T | PT | NT | NOT | 40. | VT | T | PT | NT | NOT |
| 11. | VT | T | PT | NT | NOT | 41. | VT | T | PT | NT | NOT |
| 12. | VT | T | PT | NT | NOT | 42. | VT | T | PT | NT | NOT |
| 13. | VT | T | PT | NT | NOT | 43. | VT | T | PT | NT | NOT |
| 14. | VT | T | PT | NT | NOT | 44. | VT | T | PT | NT | NOT |
| 15. | VT | T | PT | NT | NOT | 45. | VT | T | PT | NT | NOT |
| 16. | VT | T | PT | NT | NOT | 46. | VT | T | PT | NT | NOT |
| 17. | VT | T | PT | NT | NOT | 47. | VT | T | PT | NT | NOT |
| 18. | VT | T | PT | NT | NOT | 48. | VT | T | PT | NT | NOT |
| 19. | VT | T | PT | NT | NOT | 49. | VT | T | PT | NT | NOT |
| 20. | VT | T | PT | NT | NOT | 50. | VT | T | PT | NT | NOT |
| 21. | VT | T | PT | NT | NOT | 51. | VT | T | PT | NT | NOT |
| 22. | VT | T | PT | NT | NOT | 52. | VT | T | PT | NT | NOT |
| 23. | VT | T | PT | NT | NOT | 53. | VT | T | PT | NT | NOT |
| 24. | VT | T | PT | NT | NOT | 54. | VT | T | PT | NT | NOT |
| 25. | VT | T | PT | NT | NOT | 55. | VT | T | PT | NT | NOT |
| 26. | VT | T | PT | NT | NOT | 56. | VT | T | PT | NT | NOT |
| 27. | VT | T | PT | NT | NOT | 57. | VT | T | PT | NT | NOT |
| 28. | VT | T | PT | NT | NOT | 58. | VT | T | PT | NT | NOT |
| 29. | VT | T | PT | NT | NOT | 59. | VT | T | PT | NT | NOT |
| 30. | VT | T | PT | NT | NOT | 60. | VT | T | PT | NT | NOT |

## Anger Rating Scale (ARS)

Name : \_\_\_\_\_ Class: \_\_\_\_\_

Age : \_\_\_\_\_ Date: \_\_\_\_\_

Score: Maximum : 300

Medium : 180

Minimum : 60

Instructions:- Twenty statements are given below. If you answer these statements spontaneously and honestly, you will be able to know the situations in which you tend to become angry. How to answer? Against each statement you find the following letters written, A/O/S/R/N. If it is true in your case always then put a 'x' on 'A'. If it is true often then put a 'x' on 'O'. If sometimes 'S', if rarely 'R' and 'N' if the statement is untrue in your case. There is not time limit but work rapidly.

1. When my friends or brothers or sisters shout at me A/O/S/R/N.  
I throw things around.
2. At times I destroy things around me by kicking or A/O/S/R/N.  
breaking.
3. If someone at home shouts at me (parents, brothers, A/O/S/R/N.  
sisters), I shout back at them.
4. When teachers/parents scold me, I grumble and keep A/O/S/R/N.  
on grumbling for a long time.
5. When someone touches my things or my works in A/O/S/R/N.  
school or home I use bad language/abusive language.
6. If I cannot express my anger to people like A/O/S/R/N.  
teachers or Principal then I withdraw or start  
crying.
7. If someone hurts me often I hit back or pull their A/O/S/R/N.  
hair.
8. When someone criticizes me I stare at them A/O/S/R/N.  
angrily.
9. When I am disturbed I stamp my feet or bite my A/O/S/R/N.  
teeth.
10. When I see the persons whom I do not like I walk A/O/S/R/N.  
faster and turn my face away.
11. When someone teases me, my heart beats faster and I A/O/S/R/N.  
feel like spitting on them.

12. If someone cheats me, I feel, like killing that A/0/S/R/N.  
person.
13. If someone comes in my way I push them and pinch A/0/S/R/N.  
them.
14. If someone disagrees with my ideas, opinions I walk A/0/S/R/N.  
away.
15. If someone spoils my plans I avoid talking to that A/0/S/R/N.  
person.
16. When teachers are not there I disobey and look at A/0/S/R/N.  
others/students books and works.
17. When someone comes and disturbs my work, I become A/0/S/R/N.  
restless and start breathing heavily.
18. When others do not understand me, I throw everything A/0/S/R/N.  
and shout at them.
19. If I lose a game, I hurt the person who has won the A/0/S/R/N.  
game by beating, biting, hitting, or shouting at  
her or him.
20. When I can not have my way I feel very disturbed A/0/S/R/N.  
and turn red.



Anxiety Checking Questionnaire (ACQ)

Name: \_\_\_\_\_ Class: \_\_\_\_\_

Age: \_\_\_\_\_ Date : \_\_\_\_\_

Instructions:- Twenty five statements are given below. If you answer these statements spontaneously and honestly, you will be able to know the situations in which you tend to become anxious or worried. How to answer? Against each statement you will find the five letters viz A/O/S/R/N. If the given statement is true always in your case then put a 'x' on 'A'. If the given statement is true often in your case then put on 'O' if sometimes 'S', 'R', if rarely and 'N' if the statement is untrue in your case.

1. I get pain in my stomach and feel upset when I hear people shouting or talking angrily. A/O/S/R/N
2. My hands and feet become cold when I am called by my father/mother/teacher principal or some older people. A/O/S/R/N
3. When I face difficult situations no words come out of my mouth. A/O/S/R/N
4. When I see angry scenes even in the film or T.V my heart starts beating faster. A/O/S/R/N
5. I feel like going to the toilet frequently when I have to face an examination, or an interview. A/O/S/R/N
6. Even though I am well prepared. for the examination, when I enter the hall my hands and feet begin to tremble. A/O/S/R/N
7. My sleep is disturbed when I have to do some important works. A/O/S/R/N
8. When I face an important person my mouth gets dry. A/O/S/R/N
9. When someone corrects me or finds fault with me I start perspiring. A/O/S/R/N
10. When I have to do a new job my hands and my feet begin to tremble. A/O/S/R/N
11. I am often thinking of the bad things that may happen to me. A/O/S/R/N

12. When I can not succeed in my work my whole body begins to tremble. A/O/S/R/N
13. I am very restless and can not sit in a chair or a place to do a work for a long time. A/O/S/R/N
14. I do not enjoy peace of mind for I am worried about something or the other. A/O/S/R/N
15. I feel awkward and stunned when I have to face someone unexpectedly. A/O/S/R/N
16. I do not really enjoy any activity as I keep worrying about something or the other. A/O/S/R/N
17. I am not where I am physically as my mind is pre-occupied by something that happened in the past or will happen in the future. A/O/S/R/N
18. I find it extremely difficult to face an audience, even in the class when I answer, I tremble. A/O/S/R/N
19. When I have to appear for an examination I fear of forgetting and my hands and body tremble as I enter the class. A/O/S/R/N
20. When I can't remember, what I had studied I am so disturbed, I find it difficult to continue the examination. A/O/S/R/N
21. Very often I feel like biting my nails or cracking my knuckles. A/O/S/R/N
22. When I start doing something, I feel I won't be able to do it well. A/O/S/R/N
23. When my parents don't return in time I worry about them and think something dangerous has happened to them. A/O/S/R/N
24. If someone stares at me, I turn pale and wonder, what wrong have I done. A/O/S/R/N
25. When I have to meet strangers, my hands and feet turn cold and even my whole body trembles. A/O/S/R/N

Score: Maximum:125  
Medium : 75  
Minimum: 25

## FIRS

Name : \_\_\_\_\_  
Age : \_\_\_\_\_

Class: \_\_\_\_\_  
Date : \_\_\_\_\_

Instructions: A number of statements are given below. If you answer these statements honestly you will be able to find out the areas of your fear. You are also given answer sheets. How to answer? In your answer sheet against each statement number, you find A/O/S/R/N. If the statement is true in your case, then you put a 'x' on 'A'. If it is often then put X on 'O' if sometimes on 'S' if rarely on 'R' and on 'N' if never.

- |                                                                                                              |           |
|--------------------------------------------------------------------------------------------------------------|-----------|
| 1. I am afraid of death.                                                                                     | A/O/S/R/N |
| 2. I am afraid of crossing bridges.                                                                          | A/O/S/R/N |
| 3. I am afraid of powerful lights.                                                                           | A/O/S/R/N |
| 4. I am afraid of getting sick.                                                                              | A/O/S/R/N |
| 5. I am afraid of being afraid.                                                                              | A/O/S/R/N |
| 6. I am afraid of blushing in front of others.                                                               | A/O/S/R/N |
| 7. I am afraid of being left alone.                                                                          | A/O/S/R/N |
| 8. I am afraid of causing fire.                                                                              | A/O/S/R/N |
| 9. I feel frightened to watch violence like war, murder, shouting, fighting, and screaming in a film or T.V. | A/O/S/R/N |
| 10. The word examination frightens me.                                                                       | A/O/S/R/N |
| 11. Women frighten me when they come very close to me.                                                       | A/O/S/R/N |
| 12. The stinging insects and crawling animals frighten me.                                                   | A/O/S/R/N |
| 13. I feel terribly uneasy when I see rats, cockroach, spider, worms.                                        | A/O/S/R/N |
| 14. I feel scared of crackers or fire works.                                                                 | A/O/S/R/N |
| 15. Loud sounds like the sound of vehicles and sound of a mob scares me.                                     | A/O/S/R/N |
| 16. I am afraid of being buried or burnt alive.                                                              | A/O/S/R/N |
| 17. I feel upset and uneasy when I see a big gathering or crowd.                                             | A/O/S/R/N |

18. In a crowd I feel suffocated, sick, uneasy, so I avoid going into a crowd. A/O/S/R/N
19. The sight of blood frightens me and I feel like fainting. A/O/S/R/N
20. When I am in the dark I see the faces of witches and so, I am scared of darkness. A/O/S/R/N
21. I am afraid of ghosts and giants. A/O/S/R/N
22. I feel frightened to go near a dead person or to go for a funeral. A/O/S/R/N
23. I feel scared to travel by train, plane, or bus. A/O/S/R/N
24. I find it frightening to face a crowd for example to sing or to act or even to talk in public or on the stage. A/O/S/R/N
25. I feel scared to walk through lonely lanes or road or to cross the road. A/O/S/R/N
26. Strangers frighten me. A/O/S/R/N
27. The sea and the waves frighten me for example I do not like to travel by ship, boat or canoe. A/O/S/R/N
28. I hate being alone in the darkness. A/O/S/R/N
29. I am afraid to play in the sea water or to go swimming. A/O/S/R/N
30. I get frightened when the lights go off. A/O/S/R/N
31. Men frighten me when they come too close to me. A/O/S/R/N
32. I am frightened of doctors. A/O/S/R/N
33. I feel frightened when someone stares at me. A/O/S/R/N
34. I am afraid of certain people like soldiers, policemen and army men. A/O/S/R/N
35. The very sight of dogs, cats, snakes, frogs and lizards, frightens me. A/O/S/R/N
36. When I am at a height I feel scared of falling. A/O/S/R/N

37. I am very frightened of thunder & lightening . A/O/S/R/N
38. I am afraid of making mistakes. A/O/S/R/N
39. I am scared of elders like parents, teachers A/O/S/R/N  
and principal especially when they scold me.
40. I am afraid of floods. A/O/S/R/N

Poor Self Concept Rating Scale (PSCRS)

Name \_\_\_\_\_ Class \_\_\_\_\_  
Age \_\_\_\_\_ Date \_\_\_\_\_

Instructions:- Fifteen statements are given below. If you answer these statements spontaneously and honestly, you will be able to know whether you tend to look at you negatively. How to answer? Against each statement you find the following letters written A/O/S/R/N. If the given statement is true always in your case then put a x like this on A. If it is true often then on O, if sometimes on S, if rarely R and N if the statement is untrue in your case. There is no time limit, but work rapidly.

1. I consider others better than me. A/O/S/R/N
2. I do not like my appearance. A/O/S/R/N
3. I do not like my voice. A/O/S/R/N
4. I do not participate in co-curricular activities, A/O/S/R/N  
because I feel I may not do as well as others.
5. When teachers question in the class, I do not A/O/S/R/N  
raise my hands, even if I know the answer.
6. I do not vounteer for anything in my class. A/O/S/R/N
7. I try to hide myself behind others because I do not A/O/S/R/N  
to be seen by teachers.
8. When I am in a crowd, I feel unhappy and think A/O/S/R/N  
others will make fun of me.
9. When others laugh or crack jokes I find it A/O/S/R/N  
difficult to join them.
10. I hesitate to do anything because I think I am not A/O/S/R/N  
capable.
11. I tend to day-dream quite a lot. Often I imagine A/O/S/R/N  
doing great things.
12. I wish I was like somebody else. A/O/S/R/N
13. I feel sad and angry, because I am like this. A/O/S/R/N
14. I feel sad and angry, because I am like this. A/O/S/R/N
15. At times I hate myself so much that I even hurt A/O/S/R/N





## - Part II

A — Activating Event — an event that disturbed / angered / depressed or made me sad — eg. My mummy screamed at me.

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

r B — Rational Belief or idea you had about the event. eg. How annoying to have a mummy like this?

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

i B — Irrational Belief or idea you had about the event — eg. I can't stand mummy shouting at me.

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_

Date : \_\_\_\_\_ Date : \_\_\_\_\_



C — Consequences / effects of your irrational Belief.

State / say the most disturbing emotion / feeling or behaviour. eg. I was anxious. I was sad

Date :

Date :

Date :

Date :

Date :

Date :

D — Disputing — Questioning & Challenging you can use to change your irrational Beliefs (i B) eg. Why can't I stand it.

Date :

Date :

Date :

Date :

Date :

Date :

Date :

Date :

c E — Cognitive Effects or answer obtained from Disputing your (i B) eg. It would not be horrible.

Date :

Date :

Date :

Date :

Date :

Date :

b E — Behaviour Effect or the result of your Disputing your irrational Belief (i B) eg. I feel less worried

Date :

Date :

Date :

Date :

Date :

Date :

---

F. If you did not challenge your iB why didn't you not? State your reasons.

---

G. Activities you would like to stop that you are now doing:-

- |    |    |
|----|----|
| 1. | 2. |
| 3. | 4. |
| 5. | 6. |
| 7. | 8. |
- 

H. Activities you would most like to start that you are not doing:-

- |    |    |
|----|----|
| 1. | 2. |
| 3. | 4. |
| 5. | 6. |
| 7. | 8. |
-

Beulah's Self Knowledge Statements (BSKS)

Instruction : A number of incomplete statements are given below. You are expected to fill in the blanks with appropriate words that make sense to you. These words are chosen in such a way that they are true in your life.

1. I think I am -----
2. I feel -----
3. I value -----
4. I love -----
5. I honour -----
6. I esteem -----
7. I hate -----
8. I fear -----
9. I desire -----
10. I hope -----
11. I believe -----
12. I wish -----
13. I suffer -----
14. I like -----
15. I enjoy -----
16. I regret -----
17. I hesitate -----
18. I long -----
19. I dream -----
20. I remember -----

\*\*\*\*\*

## APPENDIX III

GUIDE LINES FOR OBSERVATION OF SCHOOL

## A. PHYSICAL ENVIRONMENT

1. site
2. building
3. space
4. residential facilities
5. educational facilities

B. EMOTIONAL CLIMATE

1. aims and objectives of the school
2. type of discipline
3. organization
4. administration style
5. class grouping
6. policies of admission
7. staff
8. principal
9. group behaviour

C. PRIORITIES

1. emphasizes on
  - difference between good and poor achievers
  - high standard
  - productive achievement
  - competition
  - a limited band of achievers
  - doing better than their peers and friends
  - communicating unworthiness
  - communicating worthiness
  - communicating superiority complex
  - communicating inferiority complex
  - communicating a sense of equality
  - encouraging personal growth
  - encouraging co-operation
  - drawing natural competitiveness of all children
  - equal treatment for all
  - meeting the parents of all children
  - doing better than they did themselves before
  - any other

D. FEEDBACK SESSIONS

- individual level
- group level
- meeting of parents
- collaboration with all the teachers involved

E. SCOPE FOR AROUND DEVELOPMENT

- physical
- mental
- emotional
- aesthetic
- social
- spiritual
- any other

F. PUPIL TEACHER RELATIONSHIP

- acceptance of students without over involvement.
- warm and friendly
- respects in verbal communication
- empathetic
- gives due praise/acknowledgment
- rejecting
- correcting
- finding fault with
- ridiculing
- criticizing
- any other

## APPENDIX IV

List Of The Students Of Class VIII B

|                          |    |
|--------------------------|----|
| 1. Anitha R              | A  |
| 2. Ann Sherin Antony     | A* |
| 3. Anu James             | A- |
| 4. Anu M.                | A+ |
| 5. Bhavana Ann Alexander | B  |
| 6. Blessy James          | B* |
| 7. Deepa Paul            | D  |
| 8. Deepthi S.            | D* |
| 9. Dew Mary Devassy      | D- |
| 10. Dhanya P             | D+ |
| 11. Dhanya Unnikrishnan  | D. |
| 12. DiMya Mohan P        | +D |
| 13. Divya Roy            | -D |
| 14. Dona Mary Mathews    | .D |
| 15. Fobin V.F            | F  |
| 16. Jenisha Joseph       | J  |
| 17. Jeny Joseph          | J* |
| 18. Jicksy D'silva       | J- |
| 19. Jisha James          | J+ |
| 20. Laiju Cletus         | L  |
| 21. Liza George          | L* |
| 22. Malini H Tharakan    | M  |
| 23. Malini M             | M* |
| 24. Mary Alphonsa Joseph | M- |
| 25. Meera T.G.           | M+ |
| 26. Nazia Sikandar       | N  |
| 27. Neethu G. Puthullil  | N* |

|                             |                 |
|-----------------------------|-----------------|
| 28. Nisha T..G              | N-              |
| 29. Preethy A.M.            | P               |
| 30. Reeja Lawrance          | R               |
| 31. Reena Varghese          | R*              |
| 32. Reshna Mary mathew      | R-              |
| 33. Rekha A.C.              | R+              |
| 34. Remya Chandran          | R.              |
| 35. Reshni Ashok            | +R              |
| 36. Sali Jose               | S               |
| 37. Saumi Kurian            | S*              |
| 38. Seema K. Joseph         | S-              |
| 39. Seena K. Joseph         | S+              |
| 40. Sharon Christopher      | S.              |
| 41. Sharon Elizabeth Thomas | +S              |
| 42. Shimi Alex              | -S              |
| 43. Shimi Thomas            | .S              |
| 44. Shiny Kamla             | S <sub>1</sub>  |
| 45. Simi S.N.               | S <sub>2</sub>  |
| 46. Simy Jos P              | S <sub>3</sub>  |
| 47. Smitha Antony           | S <sub>4</sub>  |
| 48. Smitha Joy              | S <sub>5</sub>  |
| 49. Sreedevi T.H            | S <sub>6</sub>  |
| 50. Sreeparvathy C.M        | S <sub>7</sub>  |
| 51. Suja Cletus             | S <sub>8</sub>  |
| 52. Sujeetha B              | S <sub>9</sub>  |
| 53. Sumi Jacob              | S <sub>10</sub> |
| 54. Sunitha Viswanathan     | S <sub>11</sub> |
| 55. Tresa Gomez             | T               |
| 56. Trishna Devaranjan      | T*              |

## APPENDIX V

LIST OF TEACHERS INTERVIEWED IN ST. THERESA'S HIGH SCHOOL

1. Accamma
2. Aleyamma
3. Baby David
4. Beatrice C
5. Catherine Lopez
6. Digna Austin
7. Domilta C Correya
8. Geetha V.K
9. Talaja Thampi
10. Jane Paul
11. Kamala K.K
12. Marykutty G.A
13. Mary Francisca
14. Mary M.C.
15. Nancy V
16. Philomina K.D
17. Shirley Luisa
18. Stella Hyacinth
19. Theresa Alice
20. Thakamma K.J.
21. Valsa Benny
22. Valsa T.K.
23. Valsa K



## APPENDIX VI

Progressive Relaxation Exercise (PRE)

Gently lie down as shown by me. The Investigator demonstrates the procedure. Lie flat on your back. Keep your legs far apart, so also your arms, with your palms facing the roof. Now, close your eyes. Take a deep breath. Let all your tensions go out through your finger tips. Just relax. Keep your chin close to the chest. Now, concentrate on your right leg, tighten it, stretch it, lift it, and drop it. Gently swing the right leg from left to right. Repeat it a number of times. The right leg is relaxed, leave it there. Now concentrate on the left leg. Tighten it, stretch it, lift it and drop it. Once again tighten it, stretch it, lift it and drop it. Swing your left leg from right to left. Repeat it a number of times. Your right leg is relaxed. Leave it there. Your right leg is relaxed, your left leg is relaxed. Concentrate on your buttocks. Tighten it, lift it, drop it. Once again tighten it, lift it, and drop it. Your right leg is relaxed, your left leg is relaxed, your buttocks are relaxed. Blow in air into your stomach as if in a balloon and breathe out through your mouth like this 'aah'. Once again, blow in air into your stomach as if in a balloon, and breathe out through your mouth like this 'aah'. Stretch your chest, lift it, and drop it. Once again, stretch it, lift it and drop it. Your right leg is relaxed, your left leg is relaxed, your buttocks are relaxed and your chest is relaxed. Now, concentrate on your left arm, stretch it, lift it, tighten it, and drop it. Once again, stretch it, lift it, tighten it and drop it. Swing your right arm from left to right, repeat it a number of times. Now leave it. Your right arm is relaxed. Concentrate on your left arm, stretch it, lift it, tighten it and drop it. Now swing your left arm from right to left a number of times and leave it. Your left arm is relaxed, your legs are relaxed, your buttocks are relaxed, your stomach is relaxed, your chest is relaxed, your arms are relaxed. Many people store their tensions on their shoulders. Gently lift your shoulders and drop it. Once again, lift it and drop it. Your shoulder muscles are relaxed. Gently lift your head and drop it. Now swing your head from right to left and number of times. Your neck muscles are relaxed. Now blow air into your mouth like in a balloon and blow it out. Shrink your face as small as you can, now relax your nose, relax your ears, relax your lips, first stretch it and loosen it, bite your teeth as hard as you can and relax it. Once again, bite your teeth and relax it. Tighten your forehead muscles and loosen it, once again, tighten your eye lids and loosen it, once again. You are totally relaxed. Your breathing too is very slow. You feel at peace with your self. Lie in this bliss for sometime. Now turn to the left, with the help of your right hand, lift your body, with the eyes closed. Sit with crossed legs, and pronounce 'Oom' three times. Gently open your eyes.

Telephone : 3 5 1 7 4 4

**ST. TERESA'S CONVENT HIGH SCHOOL**  
Ernakulam, Cochin - 682 011

Date: 10.1.1996.

From

The Headmistress

This is to certify that Miss Beulah Mendez Senior lecturer of Nirmala Institute of Education, Panaji, Goa, carried out her research in our school for two academic years, 1993 - '94 and 1994 - '95. She was present in our school from July 1993 to the end of June 1995. She also visited this school in 1995 September and 1996 January to complete her work.



10 Sep 1996  
HEADMISTRESS'S C. H. SCHOOL  
ST. TERESA'S C. H. ERNAKULAM  
ERNAKULAM

