

THE STUDENT AS OWN-THERAPIST: SELF-CONTROL PROCEDURES FOR USE IN TODAY'S SCHOOLS AND UNIVERSITIES

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Abstract

Self-control procedures are discussed as a new tool of the counsellor for helping clients. Goal-setting by the client, and how he can effectively use the environment in achieving his goals, are considered both philosophically and technically. Thoresen and Mahoney's classifications of environmental planning and behavioral programming are used to order the presentation of systematic desensitization, operant and coverant techniques, all as self-administered procedures.

Comment is offered upon self-observation and recording, client age and maturity, perfectionism and the limits of self-control, the need for some counsellor-client contact, and ways of mediating self-control procedures so as to reach crisis-relevant and developmental objectives.

Résumé

Les procédures de maîtrise de soi sont discutées comme un nouveau moyen dont dispose le conseiller pour aider ses clients. Les buts que le client veut atteindre, et comment il peut employer son milieu efficacement pour atteindre ses buts, sont considérés philosophiquement et théoriquement.

Les classifications de système de Thorensen et de Mahoney sur le milieu et sur le plan de conduite sont utilisées pour fixer l'ordre de la présentation de 'desensitization' systématique et des techniques 'operant' et 'coverant'.

On offre des commentaires sur l'observation de soi, l'âge et la maturité du client, le perfectionnement et les limites de la maîtrise de soi, le besoin de rapport entre le conseiller et son client, et les méthodes pour procurer la maîtrise de soi afin d'atteindre les buts relatifs à la solution du problème particulier et au développement de la personne.

Recent developments in counselling theory are making important new tools available to the practicing counsellor. One of these tools involves procedures which a client may use on his own to achieve his own objectives. These procedures may be taught to the client by a counsellor, or he may learn them, as well as apply them, from various other sources on his own. Counselling, or psychotherapy, traditionally attempted a reorganization of the personality of the client which would function spontaneously, after counselling, to produce more adaptive responses to the events of life. Without the

abandonment of that strategy, a trend is to give to the client also a more conscious and deliberate knowledge of effective behavioral principles which can be applied by the client himself for the improvement of the quality of his life. Counselling becomes the teaching of self-control.

Although this paper will describe the self-control techniques in question, its main purposes are threefold: Firstly, to draw attention to developments in procedures which, although not presently in widespread use in school and university settings, have great potential value. Sources will be recommended from which de-

tailed presentations of the procedures are available. Secondly, the purpose is to discuss certain theoretical and practical implications which are important to counsellors who contemplate using these procedures. And thirdly, the paper will suggest areas for the suitable application of self-control procedures and necessary precautions.

Self-control is highly valued, according to Thoresen and Mahoney (1974), for at least three reasons. Self-control patterns possess survival value, as can be seen when a person reduces his own weight or rate of smoking and thereby increases his potential life span. It is also sought because of its key role in the socialization process. Training in the culture is to enable people to act on their own for the common good without the need for continuous surveillance. Thirdly, there is something rewarding in itself about the practice of self-control. The self-determination, freedom of choice and independence implied in self-control appeal to most people.

Still other values are inherent in the use of self-control procedures. They maximize client initiative and activity on his or her own behalf, thus getting at a goal of all therapeutic approaches. At the same time, they take the sting out of any allegations that the counsellor may be usurping the right to self-determination of the client, because of course, what is being done is quite clearly not done *to* the client, but *by* him. Because these techniques are worked out by the client within his real day-to-day experiences, the problems of generalization of the growth experiences attained in counselling to real life simply do not arise. Finally, self-control procedures do not excuse the over-burdened counsellor from his obligation to assist students having problems, but they will save him much time.

Self-control techniques may be passed on by the school or university counsellor to students presenting a wide variety of problems. They may be used by students who are concerned because they are not, in many respects, achieving their potential. They may be used for the attainment of specific personal goals, such as passing a course, improving study habits or social facility, or writing a paper. They can help with the elimination of some bothersome or destructive trait or habit, such as quick temper, over-eating, or smoking. And self-control procedures are showing great promise in the alteration of hampering states of mind, depression, pessimism, negativism, perfectionism, being hyper-critical of others or one's self, low self-esteem, lack of confidence, and so on. Most

of us have unkept New Year's resolutions which still haunt us and itches which we have never succeeded in scratching. Self-control procedures will not grow us a third arm, but they may extend the reach a little.

An early question which must be answered by the counsellor thinking of using self-control techniques with a client (or with a group, or, indeed, on himself) is how the goals to be reached are selected. Operationally speaking, the most generally acceptable answer will be that the goals will emerge from one or more interviews with the client. Only when a discussion has been held will the client be instructed in self-control procedures or given printed manuals. The interviews will be characterized by the Rogerian conditions of accurate empathy, non-possessive warmth, and the genuineness of the counsellor (Rogers, 1959). Although the use of the self-control procedures described in this paper implies acceptance of Krumboltz' view about the Rogerian conditions (Krumboltz, 1966), that they are necessary but not sufficient, there will be no better way for arriving at the most mature goals for the client than through initial interviews of this sort. If reaching them is to be of ultimate help to the client, the goals must not be merely superficial wishes of the client, blind adherence to the accepted social or institutional conventions, or the imposed personal goals of the counsellor. The discussion needs to enable the client to fashion an amalgam of the requirements of his own unique person and the demands of his particular environment.

Speaking more philosophically, it is fair to point out that most advocates of the procedures outlined here hold a particular point of view about the nature of man and how he behaves. This is at variance with that popular school of thought which is predominantly oriented toward the unique and self-sufficient individual. Answers to questions about self-control which accord with generally accepted views tend to refer everything back to the individual. One must, it is suggested, become more responsible and less dependent. One must learn to think for one's self and become a self-starter. The unique potential of the individual must be actualized and then life will be satisfying.

Although it would be a mistake to deny the truth of the individualistic philosophies, it may also be a mistake to see a phenomenological viewpoint as presenting the whole truth. It is important for the counsellor to try to perceive the environment as the client sees it, but there

is apt to be severe loss to the potential of counselling if nowhere in the process is provision made for an attempt to see the environment and its effect in objective terms. It is true, as May (1958, p. 26) points out, that a perfectly objective perception of the environment is not possible; it is likewise true, as Rogers implies (Rogers, 1951, pp. 40, 43), that an absolutely accurate view of the client's internal frame of reference is not possible. Yet both, and not one or the other, may be essential endeavors, in all their imperfection, for successful counselling.

In diagrammatic terms, the individual and his relationships do not have to be represented as force lines directed toward outside entities from a single point of origin. They can also be represented as a spiral movement, with each action having continually recurring reciprocal influences. For example, if I change my behavior toward a friend, that will change his reaction to me, and that in turn will affect my future responses to him and so on.

If all attention is paid to the individual, to his motivation, responsibility, uniqueness, potential, and actualization, self-control measures are likely to be less effective than if it is recognized that although the person acts he is also acted upon. Self-control is constituted not only of good control of my own organism from the inside, but also of my effective influence over what events from the outside will happen to me.

This contention would seem to have been somewhat contradicted in a recent news report of the views of Selye (1975). "Stress can't be eliminated but, says Selye: 'it isn't what happens to you — it's how you handle it that counts.'" The contradiction is more apparent than real, however, for in the article Selye advocates both acquiring adequate motivation in order to deal with stress, and also adjusting the life style. Life style he sees as having to do with what happens to one. "Some people function best under a good deal of constant pressure; others do better with very little." Whereas he appears to be saying that one can, on one's own personal initiative, change the level of pressure acting upon one, he is also clearly asserting that the pressures from outside events do make a difference.

Selye's informal statement illustrates the characteristic idiom of our culture, in which we each speak as though the cosmos begins and ends with me. But it also shows that in order to avoid excessive stress, there is a need to have particular things happening to me which

come from outside of me. The essence of the self-control procedures to be outlined in this paper lies in the recognition of the spiral or reciprocal nature of man's relationship with his social and non-social environment.

Without himself specifying what the goals of the client will be, the counsellor wishing to teach self-control will have the client express his goals in terms of personal motivation and environmental influences, but more particularly in terms of the behavioral relationship between the client and his environment. A student may decide, in discussion with you, the counsellor, that he needs more and better social relationships than he has. He can decide upon the kinds of persons that he would like to communicate with more in his social environment. But, in addition, he must specify the kinds of behavior by means of which he will relate to the other persons. Does he wish to discuss, be part of a gang, play tennis, drink beer, or dance with them? Consideration of goals in this way makes it easy for counselling to move into the implementation phase of the process where self-control techniques can be of service.

A corollary of the point just made, that the person is most clearly seen within the flux of his influencing and being influenced, is that "practicing effective dependency upon others" is a more accurate way of speaking of self-control than talking about independence. An effective dependency is a mature relationship. The difference between dependency and independence is not that in one case we rely upon the help of other people and in the other we do not, as the words seem to suggest; the essence of good therapy is the *improvement* of human communication resulting in interdependence, not its elimination. The difference between what we have come to call being dependent and being independent is the difference between using or relying upon other people in ways which get us nowhere in the long run, and using or relying upon them in such a way that our important needs in both the long term and the short term are maximally satisfied.

Thus, for example, an adolescent girl can depend upon her mother to determine whom she may go out with and how late she may stay, or she may rebel against any influence or involvement of her mother, or she may use her mother as a model of desirable behavior and discuss standards of dating behavior with her. The first course would be called dependent, and the second would likely be called indepen-

dent, but the third might be described as a mature dependency or a mature relationship, and will likely be the most constructive alternative.

It is not a question of whether one is dependent upon others or not, but of how one is dependent. Self-control procedures link a person meaningfully through a concern for associations and consequences, with other people and with things in the environment. Self-control should not be viewed simply as an alternative to being controlled by others. Every mature person influences and is influenced by other persons. It is best seen as the alternative to confusion and the lack of control; it is an intelligently ordered exchange of reciprocal influences between a person and other people and things. Self-control brings a person into a productive relationship with his human and non-human environment.

One of the outstanding features of modern education is the extent to which techniques and materials have been developed which enable people to learn by themselves. Very large numbers of people are today involved in significant learning by means of correspondence courses, television, audio and video tapes, teaching machines, and programmed learning textbooks, all with little or no personal contact with a teacher. If, as many now think (Steffle and Grant, 1972, p. 13), a learning model most acceptably represents counselling, it follows that it should be possible to render many counselling activities in such a form that people can learn to carry them out for themselves. Evidence that this is in fact the case, in the form of research and of do-it-yourself magazine articles and books, is rapidly accumulating.

To consider the whole range of approaches which can be vehicles for self-help in a significant way is beyond the scope of this paper. Significant approaches such as hypnosis, biofeedback, and yoga will not be dealt with here so as to make way for a consideration of certain behavioral approaches which are perhaps more readily accessible to the counsellor and his clients.

Numerous journal articles have appeared in recent years, and several books have now been published, dealing with self-control approaches. For those counsellors who wish to make use of the new developments, three relatively small paperback books are highly recommended. The first is a readable manual explaining how to go about carrying out self-control procedures in general, and as applied to a number of common problems: Williams, R. L. and Long, J. D. *Toward a self-managed life style*. The

second is an authoritative and comprehensive treatment of the present state of theory, practice, and research in the area: Thoresen, C. E. and Mahoney, M. J. *Behavioral self-control*. The third recommended book contains well-selected readings which will add breadth and depth to the counsellor's knowledge: Goldfried, M. R. and Merbaum, M., eds., *Behavior change through self-control*.

In order to specify for the reader the nature of the procedures being considered, and hopefully to whet the appetite for further reading, we will provide a description of some self-control procedures. To further encourage the reader's understanding a simple method of classifying self-control techniques will be offered. Thoresen and Mahoney, (1974), view such procedures as involving either environmental planning (stimulus control) or behavioral programming (self-presented consequences). The first category includes those techniques for changes in situational factors which are made *before* the behavior to be controlled occurs. So, for example, a person wishing to reduce his eating behavior packs a smaller lunch to take to work. Of course changing the preceding events would also include changing the subject's own behavior before the behavior to be changed occurs. In fact, exercising any *controlling* behavior before the event is an example of environmental planning so that training the client to approach a feared situation with relaxation is also an appropriate example of stimulus control. The second category, behavioral programming, consists of those methods of changing the events which come *after* an occurrence of the behavior to be controlled. In the course of a weight reduction program, for example, the person might reward himself for the loss of one pound in a week by engaging in some desired activity, for example, going on a fishing trip. Of course this again involves the execution of a controlling response but this time the controlling response comes after the behavior to be changed has occurred. If the behavior that occurred was defined as inappropriate, then self-administered punishment could be provided as a consequence.

Of course not all the procedures employed as self-control strategies readily lend themselves to such simple classification, but this system has considerable advantages over alternatives in that most, if not all, the techniques in present use can be classified if we allow a third category that would accommodate combinations of the first two. The provision of this combination

category also allows the adaptation of current therapist-administered treatments for use in self-control training. Indeed there is evidence to hand that modifications of Rational-Emotive Therapy (Ellis, 1963) can be specified that allow it to be used very constructively as a self-instructional technique (Meichenbaum and Cameron, 1974), and that modelling is readily adaptable to self-administration (Cautela, 1971; Kazdin, 1974).

One of the most commonly used behavioral techniques is desensitization therapy which attempts to replace fear as a response to phobic stimuli by the more appropriate response of relaxation (Wolpe, 1969). This is usually done in the therapist's office with some advice provided about applying it to the client's everyday experience. Goldfried (1971) has described a method whereby desensitization can be utilized as a self-control technique, and Marshall and Andrews (1973) have produced a take-home manual for the self-administration of desensitization therapy.

Shorn of technical terminology, desensitization is essentially a very simple process, and it is quite possible to make the process available for self-use by the layman through the provision of simple instructional materials. The clinical experience of both authors and evidence from research studies support the feasibility of the self-administration of all or part of the desensitization procedure (Kahn and Baker, 1968; Phillips, Johnson and Geyer, 1972; Marshall, Presse and Andrews, 1975). In the last-mentioned study, therapist-administered desensitization was compared with a take-home manual for self-administering desensitization, where the self-administering subjects had varying degrees of contact with therapists. These treatments were compared with an attention-placebo procedure and no-treatment controls. All treatment subjects showed greater reductions in subjectively reported anxiety than either of the control groups, indicating the value of self-administered treatment.

Although the value of self-administered desensitization for counsellors is apparent, it is in the area of the application of operant conditioning principles to self-control that the greatest potential lies for use in educational institutions. These procedures are simple; they will probably seem more natural and therefore more credible to most students; and they have the further advantage that although aversive consequences may be arranged, operant techniques in educational contexts will usually apply *positive* consequences to increase desired behavior.

In a self-management manual prepared by the authors (Andrews and Marshall, 1973), and designed to increase assertive behavior, the reader is instructed to take three steps.

"Step 1 Decide in terms which describe activity, what your objective is.

Step 2 Determine what consequences are maintaining your present behavior.

Step 3 Arrange different consequences which will help you develop new, different behavior.

A. Remove the reinforcements from the behavior you do not want,

B. Apply new reinforcements to the behavior you do want."

In recent years behavior theorists have enthusiastically included cognitive factors within the realm of behavior analysis and treatment (Goldfried and Merbaum, 1973; Mahoney, 1975). Thinking is considered to be a form of behavior which, although directly observable by only one person, the thinker, is, like any other behavior, subject to the principles of learning involving association and reinforcement. Thinking is termed "covert behavior", and Homme (1965) has coined the term *coverant* (covert + operant) conditioning to refer to procedures for changing characteristic patterns of thinking.

In a further self-management manual prepared by the authors (Andrews and Marshall, 1974) the development of Homme's technique (Flannery, 1972; Mahoney, 1971; Todd, 1972) is applied to the modification of thoughts and attitudes that are maladaptive.

Typical maladaptive thoughts are specified and written down. So, for example, a user of the technique might write, "I don't see how I can face another day!" He will then devise some sentences which could represent a more hopeful attitude, such as, "Increasingly at the beginning of a new day I can look forward to things I will like." Several such sentences are then repeated a number of times each day, and each repetition is followed by reinforcement. Reinforcements are chosen often with the guidance of the Premack Principle (Premack, 1971), which states that any high probability behavior can be used as a reinforcer to increase any behavior having a lower probability. Thus, if there is a high probability that a person will drink five cups of coffee a day, his coffee drinking can be used to reinforce his repeating of the hopeful statements. Teachers who let their students out to play upon completion of their classwork have known this principle for years before psycho-

logists ever gave it formal status and experimental support.

A number of observations may be useful about self-control procedures in general. To begin with, the role of self-observation, along with the recording and charting of data, should be regarded as more than an incidental or optional feature of self-control. Thoresen and Mahoney (1974) conclude:

Self-monitoring provides a method by which a person can become quantifiably more aware of both his own behavior and the factors that influence it. As such it represents an important first step in the development and implementation of effective self-control techniques (p. 64).

Indeed Mahoney's (1975) work in this area has convinced him that the appropriate treatment strategy to adopt for all clients is to train them to be applied scientists collecting data on and modifying their own behavior so that they may realize the humanist goals of self-actualization.

It is known that individuals differ in their style of learning (Perkins, 1969). Counsellors may expect that some students will work more readily on their own through the medium of written materials than others, and that some will need more counsellor help than others in order to reach their objectives.

Perfectionist and other impossible goal-setting will need to be guarded against in the initial interview. Perfectionism is a common source of serious problems among both young and old. Age and other maturity factors should also be taken into account by counsellor and client. The studying efficiency expected of a seventeen-year-old, for example, may be a quite unrealistic goal for an eight-year-old to set out to achieve. It is not possible by any method to achieve unrealistic goals; indeed, the chronic setting of such goals is a kind of disturbance itself.

A most important suggestion is that self-administered procedures initiated within schools and universities should be carried through to completion with at least some regular counsellor contact provided for the client. This suggestion augments the earlier recommendation that goal-setting be carried out in one or more initial individual or group personal contacts. Such contacts are an ethical and humanistic requirement of the counsellor, enabling him to screen initially for students who need referral to other professionals, and making help possible if difficulties arise along the way. Marshall, Presse and Andrews (1975) found that if subjects are

left entirely on their own with a self-instruction manual, a number of them will not complete the program. However, it was observed that even minimal contact with a counsellor eliminates this problem. The general professional oversight by the counsellor over a self-control program, the trouble-shooting help, and the regular social reinforcement the counsellor can provide may therefore be vital elements in what will remain the largely self-administered program of a school or university student.

Self-control procedures can be taught to the client in a variety of ways. Books, manuals, tape recordings, and films have been used. The counsellor may instruct a client in the course of a series of one-to-one interviews. Either the counsellor or some of these media may present the self-help principles to large or small groups of persons, or these modes of presentation may be combined. Finally, self-control procedures may be taught alone, or together with other procedures such as vocational counselling or skill training — and skill training will often need to accompany self-control measures (Marshall, Presse and Andrews, 1975).

Today thousands of students in high schools and universities in Canada are chronically anxious or depressed, feel inferior, cannot concentrate, fail in their social relationships, have sex-related problems, are addicted or delinquent. Competent counsellors will always recognize an obligation to these people, even if there are too few counsellors to meet it fully — the current fad which would confine counsellors in some educational institutions to non-crisis-related tasks notwithstanding. It has been demonstrated that behavioral approaches to these problems in counselling are quite feasible in the secondary school setting (Andrews, 1971); self-control procedures can hardly be less so. These new procedures can help counsellors substantially in their efforts to meet their obligation to the student with personal problems.

Of course counsellors in schools and universities *do* have the developmental or preventive role to perform and there is no doubt that the principles of self-control can usefully be disseminated for these purposes as well. Counsellors can present these approaches in small groups, they can present lectures and prepare pamphlets and articles, or they can work to have self-control principles incorporated, as short courses or as units within established courses, into the instructional curriculum.

The history of the development of techniques for the self-application of the various behavior change procedures discussed here has been a very short one. Counsellors must therefore expect that some procedures will not work as well as others. They may also expect substantial developments in self-control techniques, and might with profit establish a watching brief so that they will become aware of advances when they occur. From this short review it may be seen that a promising new tool is being fashioned which counsellors can hand over to people wishing to dig their way out of rough ground or to build more generally satisfying lives.

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