

Introduction

Almost all humans have the goals of staying alive and being happy. Too many people are unaware that it is not outer events or circumstances that will create happiness; rather, it is our perception of events and of ourselves that will create, or uncreate, positive emotions. People who are aware that they control their emotional and behavioral destinies have a far greater chance of experiencing more joy, less misery, and a healthy stability, even when coping with hardships. How? They choose to think in rational, realistic, and life-enhancing ways. In so doing, appropriate and healthy emotions and actions result.

From its start, rational emotive behavior therapy (REBT), the pioneering cognitive behavior therapy (CBT), has taught that when people want to survive and be happy, they then have several desires: to perform important tasks well, to relate successfully to others, and to do what it takes to help them reach their goals. When they strongly desire to achieve

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or avoid something, their wishes and wants frequently (and unhealthily) escalate into needs or necessities. They also frequently and falsely convince themselves that “when I perform well, I am a good person; if I perform badly, I am bad.” Just as they harmfully globally rate themselves as “good” or “bad,” they rate others as “great” or “damnable.” Similarly, they globally rate the world or life-as-a-whole as “good” or “bad.”

Seen in the context of REBT, by thinking, feeling, and acting in these irrational and inaccurate ways (and by refusing to accept others and life unconditionally), people can often unhealthily defeat their goals and purposes. They also needlessly create problems such as the unhealthy negative emotions of severe anxiety, depression, and rage. By refusing to accept themselves unconditionally, people needlessly, again, create guilt, shame, and self-loathing, in addition to any or all of the previously noted unhealthy emotions (A. Ellis, 2005b).

Constructivism holds that people have considerable power to construct self-helping thoughts, feelings, and actions, as well as to construct self-defeating behaviors. It is fortunate that despite this tendency to act destructively, people also have the tendency to act constructively if they so choose. Similar to Kelly’s (1955) theory of personal constructs, REBT hypothesizes that people have choice, to some degree, in how they conduct their lives and, with some degree of effort, can change themselves considerably, despite any biological or societal limitations.

Because of their constructivism, people can motivate and force themselves to change. Having highly developed language systems, they can think, think about their thinking, and think about thinking about their thinking. Even though their thinking, feeling, and actions may seem to be separate or disparate, they influence and interact with one another. When people think, they also feel and act. When they feel, they also think and act. When they act, they also think and feel. By recognizing that they are thinking, feeling, or behaving in destructive ways, people have the ability to push themselves to think, feel, and act in healthy and rational ways.

Consequently, REBT teaches many kinds of thinking, feeling, and behavioral techniques to identify, investigate, and change dysfunctional behaviors. It is holistic in approach. It is multimodal in its methods. It

holds that steady work and practice is usually required to change destructive tendencies and acts and to maintain desired changes.

REBT vigorously encourages insight, realistic perspective, reasoning, and logic but holds that these rational elements alone—without strong emotion, motivation, and action—are not enough for lasting change.

REBT is highly educational. Direct didactic teaching of its theories and practices often works, so it uses dialogue, arguing, and disputing of irrational beliefs with clients. It also uses other educational approaches, such as articles, books, lectures, workshops, CDs, and DVDs. It recognizes that indirect teaching methods can work well with many people and therefore uses Socratic dialogue, stories, fables, plays, poems, parables, and other forms of communication. It strongly acknowledges that each person is an individual who may find that particular modalities of learning work best for him or her.

REBT is the founding cognitive, multimodal, and integrative therapy approach. Albert Ellis originated it in the 1950s, and other cognitive approaches followed.¹ From its start, the approach included philosophical as well as experiential, emotional, and behavioral techniques. As its creator and founder, Al was ostracized and criticized by most of the psychological, psychiatric, and social professions in the early years of REBT. He and his approach were referred to as superficial, simplistic, and worse by some members of the psychoanalytic community; others reacted to his writings and lectures with anger, intellectual dissent, and arrogance. This is not surprising: Psychoanalysis was the dominant therapeutic approach of the day, and he was challenging most of its major assertions and tenets!

The cognitive approach and REBT (or main aspects of it) appear now to be used by a strong majority of practitioners in the helping professions. Beginning in the 1960s, studies showed that people who hold irrational

¹Note for readers: Albert Ellis passed away in 2007, during the process of writing the first edition of this book. He continued to present on REBT until months before his death in July 2007. Although hospitalized and in a rehabilitation care facility for his final 14 months of life, he taught psychology and counseling students and others who would come for that purpose to the care home and to the hospital. He also continued to give interviews to journalists and professors and attend to writing and other matters, as much as his health and strength would allow. In this book, the authorial “I” refers to the second author, Debbie Joffe Ellis. I continue to present and write on REBT in the United States and abroad.

beliefs are significantly more disturbed than when they do not hold them, and the more strongly they hold them, the more disturbed they tend to be (A. Ellis & Whiteley, 1979). Al and his colleagues started doing outcome studies; then Aaron Beck, Donald Meichenbaum, and others began to do them; and now there are thousands of studies on the effectiveness of CBT. The studies tend to show that when people change their rigid, irrational beliefs to flexible nondogmatic preferences, they become less disturbed.

One thing that distinguishes REBT from most other CBTs is its strong philosophical emphasis. It is humanistic and existential. Unlike other cognitive approaches, it strongly and vigorously emphasizes the importance of unconditional acceptance. It aims to help people achieve the three basic REBT philosophies of unconditional self-acceptance, unconditional other-acceptance, and unconditional life-acceptance. To do this, it uses cognitive, emotional, and behavioral methods, which are all described in this book. It also reminds people of the benefit and power of gratitude (D. J. Ellis, 2015)

REBT also differs from theories of the other CBTs in its assumption that the basic philosophies or core irrational beliefs that many people usually follow to make themselves disturbed largely involve their adopting and creating absolutistic musts. Although most of the popular CBTs include these musts, they do not emphasize—as REBT does—how basic and underlying they are and how they lead to most other profound disturbances, such as awfulizing, low frustration tolerance, and self-denigration. REBT most vigorously urges people to change their core irrational self-defeating philosophies and champions precision in the disputing process.

Although the REBT therapist is taught to practice unconditional other-acceptance with clients, he or she is not to encourage or foster dependence of the client on him or her. A major goal of REBT is to encourage people to be largely self-sufficient and empowered to choose healthy ways of thinking, feeling, acting, and being—and to accept themselves unconditionally even if they do not choose these healthy ways—without needing acceptance or approval from others, including their almighty therapists!

Al believed, and I still believe, that the principles of REBT should be taught in the school system, so that children can learn how to avoid

disturbing themselves and how to overcome disturbance when it occurs, so that they grow into adults who think, act, and feel in healthy ways, suffer minimal misery, and experience great and substantial happiness throughout their lives.

This book gives the reader a substantial introduction to the theory and practice of REBT. This second edition of the book includes updated references and describes major emphases given to certain of the REBT aspects in recent years. It can be used in conjunction with the DVD *Rational Emotive Behavior Therapy*, part of the *Systems of Psychotherapy Video Series*, in which a clinical demonstration is given and questions are answered.²

I believe that REBT, with precise focus on the aspects most relevant for the here and now, has a potency and power that expedites healthy change and healing. Since the passing of Albert Ellis, it appears that large numbers of former REBT practitioners and teachers are merging REBT with CBT. As a result, some of REBT's essential elements can be neglected or underemphasized. I hope that increased research will be done that continues to show, as past studies have done, the strength and effectiveness of REBT. The principles of REBT are timeless and can benefit individuals of any culture and race; they were applicable during past times in history and are highly relevant in the present. During certain periods it can be helpful to focus more strongly than ever on particular principles: In the 21st century, so far, when mass and academic literature report that higher stress is being experienced by many, greater attention and application of REBT's encouragement to practice greater mindfulness, tolerance, unconditional acceptance, and gratitude can reduce such stress significantly. Read it, enjoy it, apply it—and keep on doing it. Although nothing in life is absolutely certain, it is highly probable that therapists, clients, students, family, and friends will all benefit greatly.

Try it and see!

²For more information, visit <http://www.apa.org/pubs/videos/4310919.aspx>.