

## HOW DO THE FIVE STEPS FOR CHANGE WORK WITH A REAL CLIENT?

Control Therapy, founded in control theory, involves the therapist and client explicitly assessing and then together examining various aspects of client's sense of control. Based on the client's "control profile," gathered by way of the Shapiro Control Inventory, the therapist utilizes interventions aimed at helping the client decide whether to take active steps to make a change in a certain life domain or to accept a situation as it is. Whatever the decision, the therapist utilizes a 5-step process to help the client carry out this goal. While the process is applied across clients, the content, such as issues, goals, and reasons for change, are all generated from the client's own material, so that maximum investment of the client is fostered. The five-step process can be spread out over a number of therapy sessions, with parts reviewed and revisited as needed.

### THE FIVE STEP PROCESS FOR GAINING CONTROL

Note: This material is summarized from Table 10.2, p. 174, in Shapiro & Astin (1998).

1. Desire for control. In this stage, the therapist needs to address any fears the client may have about losing control. The therapist helps the client focus on choices, goals, and awareness of options. If the client's desire for control is too low, then it needs to increase. If it is too high or inappropriately focused, then it needs to decrease.

2. Right and responsibility. The therapist will help the client increase his/her beliefs that s/he has the right to change and to act assertively. Therapist also helps the client increase responsibility for ensuring that right. Alternately, the therapist may need

to help the client decrease inappropriate responsibility and excessive belief in one's right to control.

3. Belief in ability. Therapist will help the client to increase and ensure the belief that one can make changes assertively. The therapist will help the person increase the belief that one can learn to let go and accept; alternately, the therapist may need to address any inappropriate beliefs in one's ability to actively control.

4. Commitment and skill. The therapist and client will deal with any obstacles to assertive change. This means addressing obstacles to acceptance; it could also mean addressing inappropriate or excessive efforts for active control.

5. Success. The therapist will help the client acknowledge the sense of control that comes from feelings of competency and mastery. The therapist will also help the person acknowledge the sense of control that comes from equanimity and acceptance.

#### AN EXAMPLE OF THE 5-STEP PROCESS FOR GAINING ACTIVE/ASSERTIVE CONTROL:

Note: This example is summarized from Shapiro & Astin, 1998.

The Five Step Process for gaining control through assertive means starts with an assessment of the client's desire for control. For example, a female client who feels overworked at the office and overburdened by household responsibilities at home may enter therapy feeling harried and complaining that she feels her life is unmanageable. At this stage the therapist will advise her that admitting the truth of her situation is a positive first step and will then help the client discuss her motivation for change. If her motivation is too low, he may need to help her discuss what is at risk for her if the situation remains unchanged. Step Two involves a discussion of the client's right and responsibility for control. This may involve discussing deeply held beliefs about self-worth (right) and/or position as the only one who can truly make changes in one's own life (responsibility), addressing the wish that other people should change. Once a sense of the client's personal responsibility is fostered, then Step Three occurs: The therapist helps the client look at self-efficacy beliefs, i.e., whether the client feels s/he can exert control over the external environment and the internal (feelings, thoughts) environment. The point is for the therapist and client to arrive at realistic goals so that the client can begin to achieve some sense of success and mastery. In the example given above, this may mean helping the woman to carve out an hour in her day to just relax. Step Four involves commitment and skills. This is the transition from "I can" to "I will" where the client imagines following through and works out any potential self-sabotage scenarios. At this stage, the therapist may also invite the client to learn some exercises that will boost her chances of success (e.g., diaphragmatic breathing to promote relaxation, role-playing to try on new behaviors, guided imagery to relax or build feelings of competence, and self-instructions to alter negative thought patterns and feelings). Step Five emphasizes the recognition of control. In this stage, the therapist encourages the client to

identify small ways she has been successful (between sessions) in actively gaining control and encourages her to enjoy the accomplishment.

#### AN EXAMPLE OF THE 5-STEP PROCESS FOR YIELDING/ACCEPTANCE:

The Five Steps for gaining active/assertive control can be applied to the process of yielding/accepting. In the case of the overworked woman, she needed to learn how to take some time for herself. This also means confronting ways in which her need for control (“I’ll do it myself”) regarding work and home tasks eclipses her enjoyment. In Step One of the process, the therapist works with the client to recognize that her desire for control is too high (i.e., leading to negative consequences she herself identifies). The task here is to help the client talk about the positive feelings that come from “doing it all” herself and how her thoughts about herself might change if she let go of some of that control. In this case, she fears that if she delegates some tasks, then things will fall apart. The therapist works to help her consider that perhaps this would not be the outcome and reminds her of the price she pays for trying to do everything by herself. In this way, the client is encouraged to face her fear by considering the alternative (the bad situation continues) and doing a comparison. In Step Two, regarding right and responsibility, the therapist helps the client evaluate where to draw the line between doing the work herself and letting others take on some tasks and having a chance to learn for themselves. Step Three involves developing the belief in one’s ability to let go of control. This stage may involve discussions of the client’s “control stories,” often formed in early childhood and which tend to guide an individual’s choices in later life. In the case of the overworked woman, she had learned from interactions in her family of origin that things would fall apart if she did not intervene. The therapist at this stage can help her discuss this early belief and how applying it to all situations all the time leads to problems. In Step Four, the process is the same as it was before: the client moves toward a firm commitment to change through discussion of self-efficacy beliefs and motivation. If the client has no idea how to “let go”, then the therapist may instruct the client to notice throughout the day each little way in which she has a chance to let go of control (e.g., when waiting at a red light) and to then practice slow deep breathing and relaxing self-statements. Stage Five involves bringing success experiences to the client’s attention. In the case of the woman client, it is likely that she may receive some positive feedback from her kids and her coworkers for giving them the chance to show their talents. The therapist can help her talk about these positive events and also about her realization that the world will not fall apart without her. This can be a very empowering discussion and should be given ample time, so that the client is reinforced for new behavior. The five-step processes outlined above form the basic framework for CT.