
OVERCOMING RESISTANCE IN DIFFICULT CLIENTS: Techniques and Precursors of Change

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PRECURSORS MODEL OF CHANGE

Taken From the Book:

Therapy with Difficult Clients: Using the Precursors Model to Awaken Change

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THE SEVEN PRECURSORS OF CHANGE:

Definitions

- 1. A sense of necessity for change** is a recognized urgency or need that requires that change take place. It considers that change is important and that current conditions are not at all satisfactory and must give way to a different set of circumstances.
- 2. A willingness or readiness to experience anxiety or difficulty** is the simple surrender to the change process. It is the recognition that one will be willing to feel the discomfort that comes with change. Defensiveness is usually defined as an attempt to avoid anxiety. This precursor is the diametric opposite. Here, the person is open to and allows for presence of any anxiety or difficulty in order to bring about change. The willingness to take risks is also an important aspect of this precursor.
- 3. Awareness of the problem** is essentially, knowing that a problem exists and having a good sense of what that problem or issue is. Awareness is the opposite of denial. Without it a person has no idea where to direct his or her resources toward change. Awareness also has to do with the ability to identify thoughts and feelings.
- 4. Confronting the problem** is the culmination of awareness but is not the same. This is the steady and deliberate attending to and observing of anything intimidating, painful, or confusing. It is squaring off with, or looking at the problem dead in the face, and continuing to look; in spite of the tendency to avoid, act out, or otherwise escape it.
- 5. Effort or will toward change** is the precursor that indicates action engaged and taken to actually solve the problem. It is the actual expending of energy as well as movement taken. It also involves the will, in the sense of commitment and decision to change. Effort takes place in the changing the mind, behavior, or environment.
- 6. Hope for change** is the realistic expectation that change will occur. It is not wishing, longing, desiring, or yearning. Hope sees possibility of change, and motivates a person, knowing that change can be accomplished. When a person has hope, he or she can envision a positive outcome and how it can happen.
- 7. Social Support for change** consists of confiding, supportive relationships that are dedicated to the well being of the person. Such relationships make the change process much more tolerable and can inspire each of the previous precursors. Conversely, relationships that are not dedicated to the well being of the person negatively impact a person's ability to change.

THE SEVEN PRECURSORS OF CHANGE:

Assessment

Nature of the Problem or Issue:					
Precursor	None(0)	Trace(1)	Small(2)	Adequate(3)	Abundant(4)
1. Sense of Necessity					
2. Willingness for Anxiety					
3. Awareness					
4. Confronting					
5. Effort Toward Change					
6. Hope for Change					
7. Social Support					

General Scoring and Treatment Guide

1. Rate the client on each precursor, using definitions below and in book
2. Get the client to participate in the rating if possible, to learn change.
3. Be sure to rate the client's problem not the client as a person.
4. Note the lowest rated or missing precursors. These are inhibiting change.
5. Arrange treatment plan to increase the lowest rated precursors (0s and 1s)
6. Use the techniques and strategies below to increase the precursors.
7. When the precursors are implemented change will occur.
8. Note: A trace amount is when the precursor is present intermittently.

General Numerical Scoring Guide*

- 0-6: Change unlikely: Educate client on change: Focus on precursors with lowest ratings
 7-14: Change limited or erratic: Educate client and focus on precursors with lowest ratings.
 15-21: Change is steady and noticeable: Use the lowest rated precursors to stay on track.
 22-28: Highly motivated to inspired client: Change occurs easily: Standard approaches work well.

*Scoring is intended only as a general guide to a complex process: Some precursors may be more potent.

REFERENCES

Research and Scholarly Publications on the Precursors Model

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STRATEGIES AND TECHNIQUES

RELATIONSHIP BUILDING

Positive Relationships Enhance the Precursors

1. **Empathize Even when it Hurts or Sickens**
 - A. If one experiences visceral physical reactions with a difficult client:
 1. Such feelings ranging from upset stomach to heartache are quite natural
 2. Push through them
 3. Empathy does not develop or stabilize without this process
 4. Empathize with client defenses
 - a) For example, reframe defensiveness as
 - (1) a love of freedom
 - (2) self protection
 5. Understanding is not agreeing
 - B. Increase therapist capacity for empathy
 1. Negative reactions will subside in time through simple desensitization
2. **Attend to the Metalog**
 - A. Dialog is what is said aloud in a conversation
 - B. Metalog is what is being thought during dialog but not given voice
 - C. Clients tend to respect a therapist who attends to metalog
3. **Courtesy and Permission**
 - A. With a difficult client always ask permission before confronting
 - B. Do so courteously and kindly and with respect
 - D. Having given permission the client will be cooperative
4. **Hooking and Unhooking (Kiesler)**
 - A. Establish empathy (hooking) before confronting the client
 - B. When the client feels understood and supported confrontation is then fitting
5. **Set Boundaries**
 - A. Make clear that the purpose of the relationship is positive change
 - B. Anything the client brings up not related to change is inappropriate
6. **Find and Connect with the “I Behind the Eye”**
 - A. Connection with a client can happen sooner rather than later
 1. It is not always something one has to wait to happen
 2. The process of establishing the relationship can be thus boosted
7. **Develop Perspicacity**
 - A. The ability to see through situations
 1. Read between the lines
 2. Not being easily fooled or deceived
 3. Ability to recognize bull---
8. **Leave the Ego at the Door**
 - A. Ego needs interfere with therapy process and outcome
 1. Needing to be liked
 2. Demanding respect
 3. Anger at the client for not changing
 4. Seeing lack of change as an affront to one’s own skills
 5. Engaging in power struggles
9. **Therapist Interference**
 - A. When the therapist lacks precursors toward a client
 - B. Progress will be inhibited
 - C. Use the assessment form on oneself
 - D. Use the assessment form with therapists in supervision

10. **Validate the Client's Abilities**
 - A. Validate the client's core self, ability, and capability
 - B. Prematurely exposing the unwilling client to anxiety will fail
11. **Admire Negative Behaviors and Attitudes**
 - A. Four Steps
 1. Identify the negative behavior or attitude
 2. Reframe it as a skill
 - a) Or reframe the intention as positive
 - b) Although the behavior was negative the skill is neutral
 3. Admire the skill as well done
 4. Redirect or pivot the skill toward the positive
 - a) Or contextualize the behavior as appropriate only in that context
12. **Client Option to Tell Therapist to Back Off**
 - A. Give the client some control by offering the option to withdraw
 - B. If the client takes the option explore the desire to withdraw

**Precursor #1:
A SENSE OF NECESSITY**

13. **Align Client Values with Therapy**
 - A. Find out what is important to client
 - B. Reframe it in terms of therapy
 - C. Point out that therapy can provide it
 1. For example, substance abuse seeks same goals as counseling/therapy
 - a) Find out what the person is trying to change drugs/alcohol
 - (1) Change in feelings
 - (a) narcotics
 - (b) benzodiazepines
 - (2) Change in beliefs
 - (a) cocaine
 - (b) crystal meth
 - (3) Change in behaviors
 - (a) alcohol
 - (4) Change in relationships
 - (a) marijuana
 - (b) ecstasy
 - b) Show how counseling/therapy can provide what drugs cannot
14. **Reality Therapy Approach**
 - A. What do you want from life?
 1. Spend some time with this question
 2. Refine the answer until it is something that can be applied to therapy
 - B. What are you doing to get it?
 - C. Is what you are doing getting you what you want?
 - D. Let's find a way to get what you want
15. **Answer the "What's-in-it-for-me?" Question**
 - A. Some difficult clients believe that therapy is a form of punishment
 - B. Show the client that therapy is for them and not for the establishment
16. **Subpersonality Approach**
 - A. Fully acknowledge and empathize with the negative statements
 1. Do not judge
 2. Do not evaluate
 3. Understand and reflect the meanings and feelings in the negative
 - B. Ask: Is there a small, very small, part of you that...

1. Wants to quit using drugs
2. Is afraid of what is going to happen to you
3. Wants to stay alive
4. Loves your husband/wife
5. Wants to get good grades
- C. What percentage of the total you is that small part?
- D. Can I talk to that part of you?
 1. You are now talking to a much more authentic aspect of the client
 2. The client will seem very different and more cooperative
- E. Ask what percentage this part would like to be
- F. Have that percentage as a goal of therapy
17. **Increase Client Anxiety Levels**
 - A. Arouse cognitive dissonance by pointing out contradictions in the person's life
 1. Do so with empathy and courtesy
 2. The contradictions must be significant to the client
 3. This requires knowing the value system of the client
 - B. Then seek to resolve the contradiction by courteously challenging the client
18. **Explore if the Client Feels Deserving of Positive Change**
 - A. Sometimes a client feels undeserving of anything good
 - B. Ask if he or she is deserving of good things
 - C. Ask if he or she has ever done something that cannot be forgiven
 - D. Ask if this has to do with not caring about oneself or one's future
 - E. Do not push the client to disclose what was done
 - F. But ask, If forgiveness was granted would client then seek change?
19. **Identify Secondary Gains**
 - A. Find out how the negative behavior or attitude serves the client's needs
 - B. Find the payoff and the price of maintaining the negative
 - C. Get the client to decide to let it go
20. **Scaling Necessity from 1 to 10**
 - A. Ask the client to rate the needed change on a 1 to 10 scale
 1. Where 10 absolutely necessary
 2. And where 1 is least necessary
 - B. Ask what would it take to get the necessity to be at a 7 or higher
21. **Identify and Refute Possible Core Beliefs that Inhibit Necessity**
 - A. "I don't care about anything."
 - B. "I am just fine the way I am."
 - C. "I don't care what happens to me."
 - D. "I don't deserve anything good, so why even think about it."
 - E. "Only fools think they can better themselves."
 - F. "There is nothing worth trying for in this world."
 - G. "Nobody ever really gets better so why bother."
 - H. "If the problem were to change it would only get worse."
 - I. "If I changed, it would mean that [disliked person] was right."
 - J. "Everybody is screwed up so why should I be any different."

**Precursor #2:
THE WILLINGNESS TO EXPERIENCE ANXIETY**

22. **Self-Monitoring Anxiety Levels**
 - A. Get the client to become aware of anxiety and when it is present
 - B. Get the client to report its intensity on a scale of 1 to 10
 - C. Get the client to report in which situations anxiety is most present
23. **Identify the Internal Dialog**
 - A. Have client recall a moment of anxiety
 1. Or ask client to experience currently occurring anxiety in the session
 - B. Determine any self-talk taking place while anxiety is occurring
 - C. Ask client if the self-talk makes the anxiety worse or better
 - D. Practice positive self-talk to counteract anxiety
24. **Building Inner Strength through Tolerance of Anxiety**
 - A. Ask client to “stay with” the anxiety
 - B. Ask how it feels and what it feels like
 - C. Determine if the anxiety is life threatening
 - D. Ask client to allow the anxiety to “consume” him or her
 1. Determine if lasting damage has been done
 2. Point out that a person can build inner strength to tolerate anxiety
 3. Eventually, continuous immersion in anxiety brings a sense of peace
25. **Paradox to Deliberately Avoid Anxiety**
 - A. Have client list the various ways he or she avoids anxiety
 - B. Ask client to make the anxiety worse, if possible
 - C. Then have the client make it lessen
 - D. Repeat worsening and lessening until control over it is established
26. **Freedom Challenge for Addressing Blaming**
 - A. Point out that when a client blames another for his or her own behaviors...
 1. He or she gives up one’s freedom to that person
 2. He or she gives up one’s self-control to that person
 3. He or she gives up one’s one’s personal power to that person
 4. When a person loses their freedom, they have lost something precious
 - B. Using cognitive dissonance, ask the client if he or she...
 1. Likes the person being blamed
 - a) If not, then why give one’s freedom or power to someone unliked?
 2. Actually enjoys not having any freedom
 - C. Point out that blaming another for what oneself has done means that...
 1. One’s behaviors are not one’s own
 2. One’s thoughts are not one’s own
 3. One’s decisions are not one’s own
 - a) but are controlled by the person being blamed
 - D. Do role plays to allow the person to own behaviors and responses
 1. To keep one’s freedom and and personal power
27. **Metaphors Conducive to Increasing Willingness to Experience Anxiety**
 - A. “No Pain No Gain”
 - B. “Old Pipes and Dirty Water
 - C. “Takes Courage”
 - D. “Washing Hands with Gloves On”
 - E. “To Get Clean You Have to Get Dirty”
28. **Refute Core Beliefs that Inhibit Willingness to Experience Anxiety**
 - A. “Experiencing emotional pain is self-torture.”
 - B. “Experiencing emotional pain will make me weak.”
 - C. “Experiencing anxiety will drain my energy.”

- D. "Anything unpleasant is a sign of impending pain."
- E. "Only fools immerse themselves in emotions."
- F. "If I begin to feel I will fall apart."
- G. "There is always a way to avoid anything difficult."
- H. "I can avoid anything."
- I. "If I have no feelings, I will have no pain."

**PRECURSOR #3:
AWARENESS OF THE PROBLEM**

- 29. **Use Metaphors to Demonstrate Lack of Awareness of a Problem**
 - A. Bad Breath
 - B. Body Odor
 - C. Blind Spots in the Rear View Mirror
 - D. Mountain Overlook
 - E. Lost in the Thought Stream
 - F. Savoire Faire
- 30. **Role Plays of Others' Views of Client**
 - A. Have client role play a friend or close relative or spouse or child of the client
 - B. Have the client, in the role, describe self and answer questions about self
 - C. Process the role play afterwards to see if others' observations are valid
- 31. **Role Reversal: Client and Therapist**
 - A. Therapist acts out client role
 - B. Client takes the role of therapist and asks therapist about the problem
 - C. Process the interaction with the goal of increasing client's awareness
- 32. **Addressing Intentional Unawareness**
 - A. Ask if the client believes it is a hassle to be aware of some things
 - B. Ask if client believes that a lot of people are stupid in their observations
 - C. Ask if client overlooks some things deliberately to avoid being depressed
 - D. Ask if client overlooks some things deliberately to avoid guilt
 - E. Ask if client overlooks some things deliberately to avoid fear
 - F. Ask if client ignores things said by others so as to not deal with it
 - G. Find the payoff and the price of maintaining the ignorance
 - H. Process accordingly
- 33. **Localizing Feelings as Sensations**
 - A. Clients who are not aware of feelings may be able to report bodily sensations
 - 1. Have the client monitor the sensations just as they would feelings
 - B. Some clients can identify feelings as having a location in the body
 - 1. Have such clients identify the area in the body the feeling is in
 - a) Have them outline how large the area of the feeling is
 - b) Have them look at what is in the feeling there in that part of the body
- 34. **Admire Negative Behaviors and Attitudes**
 - A. Four Steps (Also mentioned in Relationship section)
 - 1. Identify the negative behavior, attitude
 - 2. Reframe it as a skill
 - a) Or reframe the intention as positive
 - b) Although the behavior was negative
 - 3. Admire the skill as well done
 - 4. Redirect the skill toward the positive
 - a) Or contextualize the behavior as appropriate only in that context
- 35. **Rehabilitating Empathy**
 - A. Since many clients hurt others with little or no awareness of doing so

1. Ask clients what their self-talk is when interacting with that person
 - a) Find out if the self talk kills empathy for the person
 - b) Change or stop the self talk while viewing the person in the mind
 2. Use the freeze frame to pinpoint exact moments of empathy killing
 3. Use role reversals to build empathy
 4. Use the empty chair (if possible) to build empathy
 5. Examine past models who were cold and unempathic
 - B. Point out that killing feelings for others also kills feelings in the self
 1. And also produces a sense of emptiness inside that seeks gratification
 - a) By drugs
 - b) By high sensation thrill seeking
36. **Establishing the Observer or Wise Mind**
- A. Ancient technique appealing to intuition or knowing
 1. Closely related to mindfulness
 2. Especially recommended for difficult clients plagued by self-doubt
 - B. Ask if there is a part of the client that seems to know best and is reliable
 - C. Bring that part into the session
 - D. Hear what advice it has for the client
37. **Refute Core Beliefs That Inhibit Awareness**
- A. "To be aware is to feel pain."
 - B. "Being aware of a problem hurts, so what's the point?"
 - C. "If there is no awareness there is no suffering."
 - D. "If I am not aware of something, it can't hurt me."
 - E. "Awareness interferes with my fun."
 - F. "Awareness only reveals how bad I am."
 - G. "Awareness reveals how empty I am."
 - H. "To be aware is to know that I am unlovable."
 - I. "Awareness exposes my faults."
 - J. "Awareness will make me feel ashamed or guilty."

**PRECURSOR #4:
CONFRONTING THE PROBLEM**

38. **Confronting Change Itself**
 - A. Some difficult clients resist considering change
 - B. Use courtesy and permission to allow the consideration of change
 - C. Explore negative beliefs that the person has about change
 - D. Refute the beliefs
39. **In Vivo Confronting of the problem**
 - A. Can be done with, for example:
 1. Difficult people
 2. Lying
 3. The urge to steal
 4. Difficult situations
 - B. Duplicate the issue as much as possible in the therapy room
 - C. Each time ask the client what he or she is thinking or feeling
 - D. Repeat until reaction subsides or habituates
40. **Paradox**
 - A. Tried and true technique for prescribing the symptom
 - B. Brings the client to confront the issue even if avoiding it
41. **Mirroring**
 - A. Have the client gaze into a good sized mirror
 - B. Report to the therapist any impressions that arise

- C. Report any emotions that arise from abhorrence to fear to sadness to disgust
- D. Continue to look into the mirror until an insight dawns
 - 1. Or until a fruitful therapy issue arises
- 42. **Concretized Confronting**
 - A. Can be used in two modes
 - 1. Concretize difficult thoughts or feelings or memories
 - a) By using a physical object of any sort
 - b) Move the object close to the client and address any reactions
 - 2. In a confused client use props to map out his or her mental state
 - a) Represent the problem on a table using different objects
 - (1) Each object can be labeled if so desired
 - (2) Helps client externalize
- 43. **Concentration Therapy**
 - A. Have client hold the image of a harmful or confusing person in mind
 - B. Have client continue to look at the person
 - C. Note any emotions or thoughts or reactions that arise
 - D. Continue to look until reactions reduce or an insight occurs
- 44. **Miracle Question**
 - A. If you were to wake up tomorrow morning and the problem was solved, how would things be different?
- 45. **Reframe to Make Confronting Easier**
 - A. Effective reframes make confronting the problem easier
 - B. This can include metaphors
 - 1. Use the client's metaphor if possible and appropriate
 - 2. Practice thinking in metaphors
- 46. **Strength Metaphor**
 - A. Confronting difficult issues build mental strength and stamina
 - B. The more you do it the stronger you get

**PRECURSOR #5:
EFFORT TOWARD CHANGE**

- 47. **Clarifying the Goal of Therapy**
 - A. Some clients need for the goal to be clear or they will be confused in therapy
 - B. Make sure that the goal is carefully talked about
- 48. **Graduated Tasks**
 - A. When having a client do an in session project or outside homework...
 - 1. Make sure he or she thinks they can do it
 - 2. Have the client do a small amount of work, at a time as appropriate
 - 3. Do not ask for too much too soon as it could discourage the client
- 49. **Self-Observation of Avoidance Self-Talk**
 - A. Have client report any negative self-talk about doing anything positive
 - B. Have client observe how this affects the expending of effort toward change
- 50. **Subpersonality Approach (See necessity section)**
 - A. Find out if there is a part of the client that does not want to expend effort
 - B. Find out if there is a part of the client that wants to expend effort but is not
 - C. Resolve with role play or empty chair if possible
 - D. Use full approach as previously described
- 51. **Paradox to Deliberately Avoid Effort**
 - A. In some cases, with an inactive client, instruct the client to do nothing
 - B. This can be helpful at times, and at other times not at all
- 52. **Mapping Intentions**

- A. Recommended for approaching the “unsolvable” problem
 - 1. Assumes that client has intentions directly opposing each other
 - 2. Intentions are locked up and client is inactive as a result
 - B. Ask the client what he or she intends to happen
 - C. Ask client if he or she also intends the opposite
 - D. Ask client if there are other intentions associated with the problem
 - E. You may have to ask specifically what an intention might be if the client is not particularly aware of what his or her intentions may be
53. **Metaphors**
- A. Finger Technique
 - B. House Cleaning
54. **Refute Core Beliefs that Inhibit Effort Toward Change**
- A. “I don’t deserve to get better and will not do anything toward it.”
 - B. “I have hurt too many people to deserve to devote effort for myself.”
 - C. “I screw everything up anyway so why try.”
 - D. “I cannot be trusted to succeed.”
 - E. “Becoming effective will only make me hurt people more.”
 - F. “I know that if I try I will fail.”
 - G. “I am afraid of making more mistakes.”
 - H. “I feel guilty if I even attempt to help myself.”
 - I. “Someone else should do the work for me.”
 - J. “I am waiting for someone to rescue me from all this.”
 - K. “God will take care of me.”

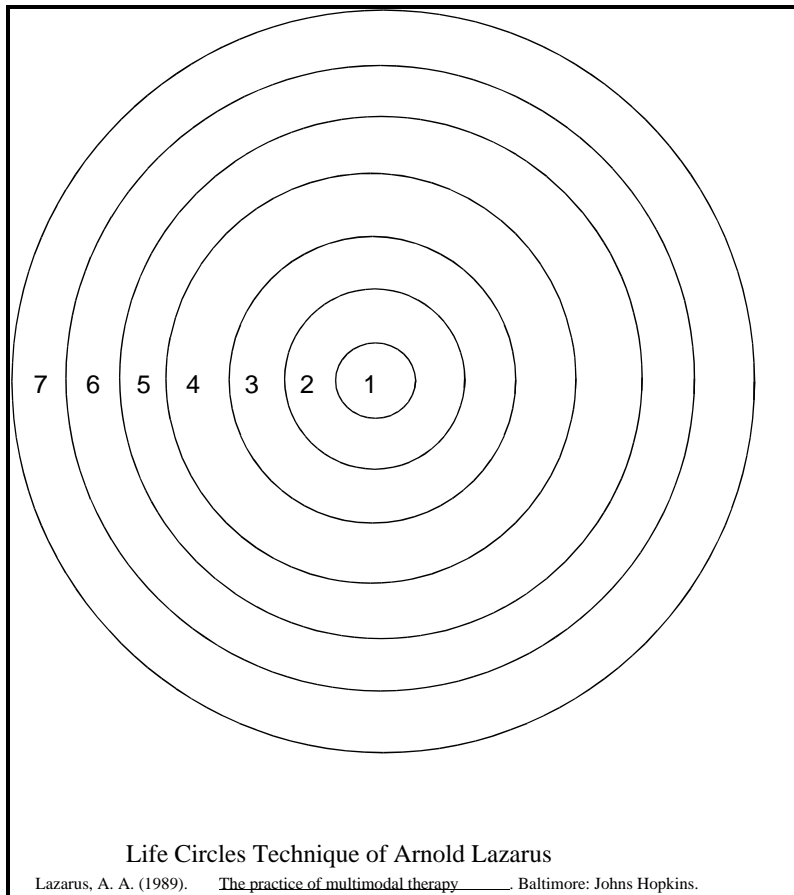
**PRECURSOR #6:
HOPE FOR CHANGE**

55. **Check for Suicide if Client Lacks Hope Precursor**
- A. Hopelessness is up to 90% predictive of suicide
 - B. If client is suicidal this precursor should get all initial attention
56. **Empathize with the Hopelessness**
- A. Important to empathize with hopelessness
 - B. Reflecting and plumbing its depths
 - C. Make sure the client feels understood
 - D. All the while maintaining hope for the client
57. **Contagion of Hope**
- A. It is the therapist’s duty to have hope for the client
 - 1. Find a realistic way out of their situation
 - 2. Communicate that you believe there is a solution and thing can be better
 - B. If the client sees that the therapist has hope it may transfer to the client
 - C. When people whom we respect believe in us, it brings about hope in us
58. **Tell Stories of Hope**
- A. Tell the client stories that he or she can relate to
 - B. Make sure there is enough content for the client to identify with
 - C. Make sure the story is one of hope and a happy ending
 - D. If the story resonates with the client, it can serve as a blue print for change
 - E. Such a story can stimulate hope
59. **Exposure to Successful Persons**
- A. Whenever feasible introduce clients to people who have made changes
 - 1. This could be through AA, or going to speaking events, or church
 - 2. Make sure the the “successful” person really has made the changes
60. **Alternative Therapy (Beck)**
- A. In a difficult situation explore and brainstorm a wide variety of options

1. Recognition of options brings about hope
 2. This also encourages problem solving skills
 - a) Such skills are important for hopeless clients
61. **Validate the Client's Life Skills and Strengths**
- A. Become familiar with how the client copes, survives, or gets by
 - B. Validate these skills
 - C. Build on and enhance those skills directing them toward the issues at hand
62. **Use of Humor**
- A. If you can make a client laugh the burden is easier to bear
 - B. Research supports humor in therapy as a healing element
 - C. Existential humor is preferred
 1. Avoid sarcastic or cynical humor if possible
 2. Avoid humor wherein someone is ridiculed
63. **Reframe a Threat Into a Challenge**
- A. Coping research says that a person can collapse under stress
 1. This is true if the stressful situation is viewed as a threat
 2. When viewed as a challenge the person will respond and cope
 - B. If the therapist can use reframes and encouragement
 1. The client will see the situation as manageable
 2. The client will also be more likely to confront the problem itself
64. **Creative Narratives**
- A. With the client's help, retell the client's life story in a positive light
 1. Emphasize the client's coping and survival skills
 2. Emphasize the client's goodness as well, if fitting and suitable
 3. If possible and appropriate reframe the client's role as that of a hero
 - B. With the client's help retell a specific situation in the same way
65. **Refute Core Beliefs that Inhibit Hope for Change**
- A. "The future holds nothing for me."
 - B. "Only bad things are waiting for me."
 - C. "The world is a cruel place to live."
 - D. "No matter what you do, things will never really get better."
 - E. "The future holds only what others want."
 - F. "Other people dictate my future."
 - G. "The passing of time is painful."
 - H. "The future provides nothing but anxiety."
 - I. "The future is filled with continuous disappointment."
 - J. "The future is filled with unforeseen catastrophes."
 - K. "I am unable to affect the future."
 - L. "The future is a continuous threat to my well being."

**PRECURSOR #7:
SOCIAL SUPPORT FOR CHANGE**

66. **Concentric Circles**



- A. Used with a client who seems to be not fully disclosing
 - 1. Ask if client is willing to try an experiment
 - a) Purpose is find out how much people know about him or her
 - 2. Show the circles
 - a) Say these 7 circles contain everything there is to know about you
 - b) The outer (7th) circle is what everyone knows about you
 - c) The innermost circle is the most private and secret info about you
 - 3. What circle have you let me into?
 - 4. What would it take for me to get into Circle number (the next circle)?
 - B. Used also in groups where clients share who in their life is in what circle
 - 1. An insight into the clients' interaction styles can be had this way
 - 2. Also an insight can be had into how many people the person trusts
 - C. Ask clients What kind of person can be trusted to be in Circle #1
 - 1. Emphasize that only empathic people should be in Circle #1
67. **Recognizing Empathy in Another**
- A. Teach clients how to recognize empathy in another
 - 1. Ask if the person in question
 - a) Can see with their eyes
 - b) Can hear with their ears
 - c) Can feel with their heart
 - 2. If no empathy, that relationship is a liability
68. **Identifying Sources of Social Support**
- A. Help clients to list people in their lives that are sources of social support
 - 1. List specifically people who increase the precursors in that client

69. **Identifying Persons Opposed to Social Support**
- A. Help clients to list people in their lives who are opposed to social support
 - 1. List specifically people who discourage the precursors
 - 2. List people who are opposed to therapeutic change in that client
70. **Recovering Lost Sources of Social Support**
- A. See if old positive relationships can be restored
 - 1. Through apology or forgiveness or whatever
 - B. Explore the nature of the relationship to see if restoration feasible
 - C. Of course, some such relationship cannot be recovered
71. **Assertiveness Training**
- A. Use role plays to help clients become assertive
 - B. There is a host of behavior therapy literature to help with this
72. **Group Therapy**
- A. This is an exceedingly valuable and vital activity for clients
 - B. Much of how to build social support can be learned in groups
73. **Refute Core Beliefs that Inhibit Social Support for Change**
- A. "People are sources of anxiety and pain."
 - B. "I cannot live without love."
 - C. "I am only alive when others are paying attention to me."
 - D. "I need other people to tell me who I am."
 - E. "I must have a person to whom I can give up control of myself."
 - F. "A friend/lover is someone who will rescue me from my problems."
 - G. "Even cruel attention from others is better than no attention at all."
 - H. "I am only secure when others are with me."
 - I. "Only fools would be interested in supporting me."
 - J. "Anyone stupid enough to support me cannot be trusted."
 - K. "Nobody ever really cares about anybody."
 - L. "People really only care about themselves."
 - M. "I am intrinsically unlovable."
 - N. "The presence of others threatens my survival."
 - O. "People are tolerable only when they are under my control."
 - P. "If I stay away from others, they cannot hurt me."
 - Q. "I only deserve to be treated badly."
 - R. "When in conflict it is better to end the relationship."
 - S. "I can always find someone else."