

ALFRED KORZYBSKI MEMORIAL LECTURE 1991**General Semantics and Rational-Emotive Therapy**

by

Albert Ellis

[At the Harvard Club of New York City, November 8, 1991]

I never would have originated rational-emotive therapy (RET) had I not been strongly influenced by philosophers rather than psychotherapists. For when I founded RET in 1955, the field of therapy was almost completely run by clinicians, ranging from psychoanalysts to behaviorists, who firmly, and rather dogmatically, believed that people's early experiences, especially with their sacred parents, made them or conditioned them to become emotionally disturbed.

This theory, of course, has some degree of validity because all humans live in an environment. As Korzybski (1951) put it, a person is "an organism-as-a-whole-in-an-environment." People seem to be born teachable and self-teachable and therefore partly acquire their feelings from their experiences with others and with the objects and things they encounter in their early and later life. Also, because they are more gullible or influenceable when they are young, they may well — though not necessarily always — be more disturbable in their childhood and adolescence than when they are older.

Fortunately, however, as philosophers have shown for many centuries, a crucial aspect of people's disturbance stems from the part they play in their interactions with the environment — from what they think about and tell themselves about the unfortunate events that occur in their lives. As Epictetus, a Greek-Roman stoic, said 2000 years ago, "People are disturbed not by things, but by the views which they take of them." Other Asian philosophers, such as Confucius and Gautama Buddha, said something similar; Marcus Aurelius echoed Epictetus' view; and many Western philosophers — especially Spinoza, Kant, Dewey, Russell, Heidegger, Sartre, and Popper — all seem to agree that what people feel and do largely, though not completely, stems from the way they actively and creatively construct and reconstruct reality rather than from their passively reacting to it.

Some early psychotherapists, such as Janet (1898), Dubois (1907), Munsterberg (1919), and Adler (1927, 1931), were also cognitive and believed that their clients' ideas about their experiences, rather than only the experiences themselves, made them neurotic. Even Sigmund Freud temporarily espoused this view and in his first book said that neurosis is ideogenic (Breuer & Freud, 1965). Unfortunately, he largely later retracted this view and insisted that it almost completely stemmed from childhood experiences, especially sex experiences. Although modern psychoanalysts of the object-relations school have repudiated Freud's sex theories, they have replaced them with the view that the early love or interpersonal relationships of children make them neurotic and borderline if they do not receive sufficient nurturing from their parents and other early love objects (Guntrip, 1971; Kernberg, 1975; Klein, [Klein & Riviere, 1964], Kohut, 1977).

Largely believing in psychoanalysis in the 1940's, especially in the neo-analytic views of Horney (1945), Fromm (1950), and Sullivan (1953), I got analyzed, was supervised by a training analyst of the Horney Institute, and practiced psychoanalysis for six years. Although my clients liked analysis and usually felt better as a result of it, I was not impressed and became quite disillusioned with all forms of psychoanalysis, except that of Alfred Adler (1927, 1931), who really opposed its main tenets and called his system "individual psychology". I also was influenced by Alexander & French (1946) and by Sullivan (1953) who considerably modified psychoanalytic technique. I saw that most of my clients felt better as a result of my psychoanalytic sessions with them, but virtually none of them got better. Why? Because they still strongly believed the same basic, largely self-created philosophies that originally made them and now kept them neurotic.

Looking for a better model of human disturbance and for a distinctly more efficient method of helping people become less neurotic, I abandoned psychoanalysis in 1953, did eclectic psychotherapy for a while, and founded rational-emotive therapy (RET) at the beginning of 1955. Going back to philosophy, I combined the best elements of Stoicism, Epicurianism, and several other phenomenological-humanistic-existential philosophies and formulated the ABC theory of emotional disturbance, which then became the core of most of the other cognitive-behavior therapies that began to follow RET in the 1960's and 1970's. (Beck, 1976; Burns, 1980; Glasser, 1965; Goldfried & Davison, 1976; Mahoney, 1974; Maultsby, 1975; Meichenbaum, 1977).

The ABC theory of RET, which I have revised over the years but is still similar to what I said at the American Psychological Association Convention in Chicago in 1956 (Ellis, 1957a, 1957b, 1958, 1962), states that people have goals and values (G's), especially to stay alive and be happy. When their Goals (G's) are blocked by Activating Events or Adversities (A's), such as failure, rejection, and discomfort, they have a choice of making themselves feel and act with appropriate Consequences (C's), such as sorrow, regret, and frustration, that tend to encourage them to change or improve their A's. Or they have a choice of making themselves panicked, depressed, enraged, and self-hating and thus creating inappropriate Consequences (C's) that tend to make their A's worse and block their achieving their Goals. Some of the main behavioral C's they choose to construct are withdrawal, procrastination, inertia, compulsions, and addictions (Bernard, 1986, 1991; Dryden, 1990; Ellis, 1957a, 1962, 1971, 1973, 1977, 1985, 1988; Ellis & Dryden, 1987, 1990, 1991; Yankura & Dryden, 1990).

RET, in other words, hypothesizes that people do not mainly get disturbed by unfortunate Activating Events or Adversities, which contribute to but rarely directly cause their self-defeating feelings and actions. Instead, they largely (not completely) create and construct their neuroses by their philosophies or Beliefs (B's). When, says RET, their Beliefs stay within reality, and only consist of preferences, wishes, or desires, they make themselves feel appropriately frustrated and displeased when these preferences are thwarted. Thus, if they stick to, "I strongly want success and approval, but I don't absolutely need these desirable results," they feel appropriately sorry and disappointed but rarely upset themselves about not achieving their goals and values.

However, when people change their wants and preferences to absolutist, dogmatic musts and demands, they often bring on emotional trouble. For these absolutist musts are not in accord with reality and lead to awfulizing, I-can't-stand-it-it-is, damning of oneself and others, allness and neverness, and other kinds of unrealistic overgeneralization. Thus, if you take your preferences for success and approval and you transform them into unconditional musts, you come up with Beliefs like, "Because I very much desire to do well in my work and want Mary Jones to love me, I must

at all times and under all conditions succeed and have to always win her affection. If I don't, it's awful, I can't stand it. I'm a worthless person, and I'll never achieve any success in life and will always fail to win any decent partner!"

When you create absolutist, unconditional demands like this, you clearly put yourself in emotional jeopardy. For you often make yourself panicked before you try to fulfill your goals because you know that you may not succeed in them, as you must. And then you often severely depress yourself because you actually do fail. And even if you are doing very well at work and if Mary Jones happily returns your love, you keep worrying and worrying whether this fine state of affairs will continue tomorrow and into the future. As, of course, it must!

As you can see — and as I think Alfred Korzybski was a pioneer in seeing — thinking realistically about yourself, about others, and about the world in which you live leads to both *Science and Sanity*, the title of his seminal book (Korzybski, 1933). On the other hand, perceiving and thinking in unrealistic, absolutist, all-or-nothing, either-or, overgeneralized terms very likely leads you to what we call emotional disturbance and to your doing poorly in both your intrapersonal and interpersonal relationships.

Korzybski (1951, p. 172) seems to have had a picture of human functioning similar to that of the ABC theory of RET. Thus, he said that when we “perceive” a happening or event we “silently” or “nonverbally” react with evaluations about it and our “emotions” and “evaluations” are organismically together and interact with our verbalizations, which quickly follow our silent thinking-feeling level. He quotes George Santayana as showing that humans are much better at believing than seeing.

In my first paper on RET, at the American Psychological Association Convention in Chicago (Ellis, 1958, 1962), I specifically said that people's cognitions, emotions, and behaviors are not pure, but are part of an organismic or holistic interaction. Again, Korzybski seems to have predated me by seeing each human as “an organism-as-a-whole-in-an-environment” (Korzybski, 1951, p. 188). As he states (1951, p. 187), “There is no ‘perception’ without interpolation and interpretation.” Obviously, before RET was formulated he endorsed some of its basic ABC theories.

As I noticed after practicing rational-emotive therapy for a short while — and as I think Korzybski would have again agreed — once you demand and command that you absolutely must do well and that you always have to be approved by others, and once you thereby make yourself panicked, depressed, enraged, or self-hating, you frequently show what a natural self-misled masturbator you are by dogmatically telling yourself, “I must not be panicked! I must not be depressed!” You then become — or much more accurately stated, make yourself — panicked about your panic, depressed about your depression, and self-hating about your self-hatred. You thereby create a secondary neurosis that is often more intense and pervasive than your primary disturbance and that, in fact, tends to stop you from clearly seeing how you first made yourself upset and what you can do to change your thinking and to unupset yourself (Ellis, 1962, 1973, 1985, 1988).

I think that Korzybski would have endorsed RET's continual crusading against people's absolutistic, dogmatic, overgeneralized shoulds and musts. Thus, he noted “the fact that we do abstract on higher orders becomes a danger if we are not conscious that we are doing so and retain the primitive confusions or identifications of orders of abstractions” (1951, p. 218).

He also advocated our increasingly using the term “etc.” because it “facilitates flexibility, and gives a greater degree of conditionality in our semantic reactions. This device trains us away from dogmatism, absolutism, etc.” (1951, p. 192).

Korzybski also first formulated the RET concept of secondary symptoms (such as anxiety about anxiety) by talking about “second-order reactions (‘thinking’ about ‘thinking,’ ‘doubt of doubt,’ ‘fear of fear,’ etc.)” (1951, p. 190). (And incidentally, people who think that it was Franklin D. Roosevelt who coined the phrase “we have nothing to fear but fear itself” should know that Franklin D. Roosevelt’s ghost-writer took it from Seneca.)

Once again, Korzybski, from 1920 to 1951, presented some unusual ideas that I seem to have taken from him and other philosophers and have solidly incorporated into RET along the lines I have stated in the previous several paragraphs. Thus, he endorsed physico-mathematical methods of thinking and said that they link science, “and particularly the exact sciences, with problems of sanity in the sense of adjustment to ‘facts’ and ‘reality’” (1951, p. 189). He warned that “elementalistic or metaphysical terms are not to be trusted, and that speculations based on them are misleading or dangerous.” (1951, p. 192). In my various criticisms of mystical and transpersonal ideas and practices in psychotherapy (Ellis, 1972b, 1986, Ellis & Yeager, 1989) I have expanded upon Korzybski’s “crusading” against dangerous kinds of mysticism.

SCIENCE AND SANITY

The more I think about Korzybski’s masterpiece, *Science and Sanity*, the more I am enthralled by its revolutionary title. For after practicing RET for several years and trying to assess its effectiveness by using the scientific method to check its results, and after helping hundreds of disturbed people by scientifically, realistically, and logically Disputing — at point D in RET — their neurosis-producing irrational Beliefs, the demands and commands, I saw that RET and the other cognitive-behavior therapies that Dispute people’s dysfunctional Beliefs tend to show that neurosis and antiscience are very similar, and that mental health and science distinctly overlap.

Why is this so? Because science includes four main attributes: First, it is realistic and tries to make its theories consistent with the facts of ‘reality.’ It postulates no absolute ‘reality’ — because all ‘things’ and ‘facts’ are viewed phenomenologically, through human perceptions and interpretations. But science thinks that there is some kind of ‘reality’ out there, apart from human perception, and it tries to check and falsify its theories in relation to so-called external ‘facts’.

Second, science uses logic, both Aristotelian and non-Aristotelian, to check its hypotheses, and usually ends up with theories that are not self-contradictory and are not falsified by other views of people and the world. It rules out magic, cavalier jumping to conclusions, and many illogical non sequiturs.

Third, and perhaps most important, science is invariably open-minded and nondogmatic. It holds even its best theories tentatively and sees them as always subject to change, and does not claim that they describe the nature of things for all possible conditions and for all times. It is exceptionally flexible and never devout.

Fourth, science is alternative-seeking and keeps looking for new, better facts, theories, and interpretations. It is never absolutist and has no final or invariant technique or answer.

Unlike science, emotional disturbance, and particularly severe neurosis, RET holds, tends to be replete with the kind of thinking, feeling, and behavior that is unrealistic, illogical, dogmatic, devout, and rigid. In this sense, as I think Korzybski strongly implied, and as RET agrees, science and unneurotic sanity tend to be similar (Korzybski, 1921, 1923, 1933, 1951).

Why is this so? Why do so many people much of the time think crookedly, misperceive reality, reason illogically, become dogmatic and devout, and stick rigidly to misleading perceptions, overgeneralizations, and conclusions? RET's answer is that they largely are innately predisposed to do this. They are strongly inclined by both their biological tendencies and their human experiences and their social learning to often make themselves self-defeating and socially sabotaging. As Piaget (1963) noted, children actively construct their view of the world and their adjustments to it; and RET and other constructivist therapies say that they keep reconstructing their thoughts, feelings, and actions all their lives (Ellis, 1990; Ellis & Dryden, 1991; Guidano, 1988; Mahoney, 1991). That is their 'nature' to do so, even though this 'nature' is changeable.

Moreover, once people adopt and create unrealistic, rigid, non-alternative-seeking ideas, they have a strong biosocial tendency to carry them into dysfunctional action, to repeat these actions many times, and to habituate themselves to destructive behaviors. They don't have to do this — for they always have some degree of choice. But they very frequently are innately propended to habituate themselves to dysfunctional thoughts, emotions, actions, and find it difficult, though not impossible, to change them.

Fortunately, however, the very nature of human constructivism includes a strong proactive change and self-actualizing element. People are not merely born and reared to defeat themselves — for if that were so the human race would soon die out. They are also born and raised with a powerful tendency to choose, to remember, to think, to think about their thinking, to change, to grow, and to develop. What is more, if they choose to do so, they can use their abilities to think and to change to largely, though probably not completely, overcome their propensities to perceive, think, and interpret crookedly (Johnson, 1946; Korzybski, 1923, 1933, 1951).

This, of course, is the goal of general semantics — to show people how they can become aware of their misperceptions, overgeneralizing, and poor judgements and how they can reconsider and reconstitute them so that they help themselves to more accurately perceive, accept, and live more comfortably with 'reality'.

This goal of general semantics is remarkably similar to that of rational-emotive therapy. RET has faith in disturbed people's ability to reconstruct their adopted and self-constructed distorted views of themselves, of others, and of the world with which they needlessly disturb themselves. It teaches them how to strongly Dispute their absolutist musts, shoulds, and demands; to reduce their overgeneralizing, awfulizing, and I-can't-stand-it-itis; to evaluate and rate only what they and others think, feel, and do while rigorously refraining from judging others' self, being, essence, or personhood (Ellis, 1962, 1971, 1972a, 1973, 1976b, 1985, 1988, 1991a, 1991b; Ellis & Dryden, 1987, 1990, 1991).

RET has two main goals: First, to help people see and correct their dogmatic, absolutistic attitudes and dysfunctional feelings and behaviors and to make themselves, as Korzybski called it, subject to greater sanity. Second, as people are making themselves less disturbed and more functional, RET tries to help them fulfill more of their human potential, to actualize themselves, and to enjoy themselves more fully (as Epicurus more than Epictetus advocated) (Ellis, 1985, 1988, 1991a; Ellis & Dryden, 1991). Korzybski also strongly urged people to try to achieve more of their human potential. Thus, he said, "With a time-binding consciousness, our criteria of values, and so behavior, are based on the study of human potentialities, not on statistical averages on the level of *homo homini lupus* drawn from primitive and/or unsane evaluational reactions which are on record" (1951, p. 188-9).

In other words, both general semantics and RET hold that if people think about their thinking, and minimize their "natural" tendency to overcategorize, they can significantly — though perhaps never completely — free themselves from some of their thought-language limitations and achieve a more self-fulfilling life.

We can speculate that humans in primitive times had to jump to quick conclusions, to make their wishes into musturbatory demands, and to act over-emotionally because they were thin-skinned animals living in a very dangerous world. Perhaps their imprecise perception, their seeing part of the picture as a whole, their rigid ways of approaching life, and their other cognitive weaknesses which Korzybski (1933) pointed out and that RET often details (Ellis, 1962, 1987a, 1987c; Ellis & Dryden, 1987, 1990, 1991), helped them survive in a grim and hostile world. Thus, by insisting that they must perform well and that others had to do their bidding, they may have made themselves needlessly anxious and angry thousands of years ago but may have survived better than if they were more reasonable. Perhaps. In any event, they did survive with their innate tendencies to reason better than other animals and to often think sloppily. Now, using general semantics and RET, they can use more reason and less dogma to survive more freely and more happily.

THE "IS" OF PREDICATION

Let me continue with the agreements between general semantics and RET. Korzybski showed that using the "is" of predication leads us to think imprecisely. Thus, statements like, "I am good" and "I am bad" are inaccurate overgeneralizations, because in reality I am a person who sometimes acts in a good and sometimes in a bad manner. In RET, we teach our clients not to rate themselves or their being but only what they do. All self-ratings seem to be mistaken, because humans are too complex and many-sided ever to be given a global evaluation. Moreover, RET holds, if you aim to be a good person you are too fallible to achieve that all-good status. And if you say, "I must be good," you will fail and then see yourself, quite falsely, as being bad. When you think in terms of dichotomous, good and bad, terms you will tend to demand that you always act well, for otherwise you will "become" bad. So even when you are doing well, you will be at great risk and will be quite anxious.

Moreover, when you strive to be a good person (rather than a person who tries to do good things), you make yourself grandiose, try to be better than other humans, tend to deify yourself; and then when you fall back and do stupid things, you see yourself as a bad person, and consequently devilify yourself. This is the essence of much neurosis! So RET is perhaps the only therapy that

specifically teaches, "You are not good and you are not bad. You are only you, a person who acts well and badly."

We can avoid the "is" of predication, as Korzybski points out, by saying, "I see myself as good" or "I see myself as bad," for then we do not claim that our "goodness" or "badness" really exists in the universe, but only that we choose to interpret ourselves in a "good" or "bad" manner. Because we are entitled to our personal definitions, we can decide to see ourselves as "good" because that will help us function better, rather than decide to see ourselves as "bad," for that will help us bring about worse pragmatic results.

So RET teaches people that they can arbitrarily define themselves as "good" and that that will work much better than if they define themselves as "bad." They can attach their "goodness," for example, to their existence and tell themselves, "I am good because I am human and alive." This is a pretty "safe" definition of themselves because they then will always be "good" as long as they are human and alive — and will only have to worry about being "bad" after they are dead. Quite safe, you can see!

The trouble with this definition of human worth is that it is definitional and cannot be validated nor falsified. Thus, you could say, "I am good because I am human and alive" and I can object, "But I think you are bad because you are human and alive." Which of us, then, is correct? Neither of us is, because we are both definitional; and definitions are useful but cannot be checked against "facts" or "reality."

Moreover, both statements — "I am good" and "I am bad" are over-generalizations because, as noted above, all people do both "good" and "bad" deeds, and cannot really be categorized under a single, global heading — as being "good" or as being "bad." So the pragmatic solution to the problem of human "worth" is not a very good one, and had better be replaced by the RET more elegant solution, "I am neither good or bad; I am just a person who sometimes acts 'well' and sometimes acts 'badly'." So I'd better rate or evaluate what I do and not what I am." I am pretty sure Korzybski would endorse this more elegant RET solution to the very important problem of self-rating.

Korzybski's writings on the "is" of predication encouraged me to help RET clients to stop using several kinds of over-generalizations. For if they say, "I am good," they strongly imply that they have an essence or "soul" of goodness, that they only do "good" things, and therefore deserve to live and enjoy themselves. This is misleading, because they cannot prove that they have any essence (which is a very bad, vague, and mystical word); and if they do have one, they cannot show that it always at all times is "good."

To be much more precise, as Korzybski would put it, I help my clients say, "I am a person who does good things (e.g., helps others in trouble) but who also does many 'neutral' and 'bad' things (e.g., harms others). I am never really entirely 'good,' 'bad,' nor 'neutral.' Because I am, as a human, much too complex and many-sided to perform only 'good' or 'bad' or 'neutral' behaviors."

RET particularly follows Korzybski in this respect, largely because before I even formulated it I read Hayakawa (1962, 1965) and other general semantics writers and saw that the "is" of predication is not only a misleading overgeneralization but that it also leads people to rate and

evaluate their self, their being, their totality, rather than to only evaluate what they do and what they don't do.

Since its very beginnings in 1955, RET has warned people not to rate their self or their personhood but only to evaluate their acts, deeds, and performances in relation to their goals and purposes. Thus, if you choose to stay alive and happy, you are acting well or sensibly when you keep your eyes open and avoid cars as you cross the street. But if you choose to commit suicide, you may be acting badly or foolishly when you carefully cross the street.

Let me repeat this important point: Following Korzybski, RET is one of the very few psychotherapies that tries to help people only rate, measure, and evaluate what they do and don't do and not to rate their self, totality, or personhood (Bernard, 1986, 1991; Dryden, 1990; Ellis, 1962, 1972a, 1973, 1976b, 1985, 1988, 1991c, 1991d; Ellis & Dryden, 1987, 1990; Yankura & Dryden, 1990).

Let me say that teaching clients and other people merely to rate their acts, feelings, and thoughts and not to give themselves a misleading self-rating is quite difficult. For, as Korzybski implied, humans naturally and easily conclude that "Because I act in a 'good' manner, I am a 'good person' and that because I act 'badly' I am a 'bad person.'" Obviously, both these views are mistaken and will often produce poor results. Because if you view yourself as a "good person" when you behave well, you will almost immediately see yourself as a "rotten person" and thereby produce anxiety, depression, and self-hatred, when you fall back, as you inevitably will, to behaving "badly" again.

To make matters worse, when you say, "I am a good person when I do good acts," you are not really proving, factually, that your entire self is good because of your good deeds, for there is no exact way of validating or falsifying this proposition. You are merely defining yourself, tautologically, in terms of one set of acts, which are good according to your goals and purposes, and you could theoretically define yourself in terms of any kinds of acts, "good," "bad," or "neutral." Thus, Hitler could say, "My goal is to kill Jews and Gypsies, and therefore I am a good person when I kill more of them." Would you agree with him? Or someone could say, "The human race is no good and deserves to die out. Therefore, if you do 'good' deeds by helping other humans to survive, you are really a bad person!" Would this person who rates you as "bad" for your supposedly "good" deeds be right or wrong? Who can really say?

RET uses various kinds of Disputing (D) of people's irrational Beliefs (iB's) when they think and say, "Because I do many bad things, I am a bad person." I tell such disturbed people, "When you say you are a bad person for doing bad things, you are engaging in what Bertrand Russell called a category error. For the bad things you are doing are in one category and you, the doer of these things, are in a quite different category. You do all kinds of things, good, bad, and indifferent. So if you categorize these things as "good" or "bad," you jump to a different category when you call yourself, the doer, "good" or "bad." You are not what you do. So you'd better rate only the things you do and not identify them with your youness, which is quite a different category."

I got the idea for this kind of Disputing from Bertrand Russell; and in recently re-reading Korzybski in order to write the present paper I was pleased to note that he gives Russell due credit for his "epoch-making work in his analysis of subject-predicate relations" (1951, p. 181). Even before I read Korzybski I was significantly influenced by Russell; so I am happy to acknowledge that

RET owes a real debt to both these modern philosophers. Russell, Korzybski, and RET all join in examining and revealing the limitations of the "is" of predication.

THE "IS" OF IDENTITY

Korzybski (1933, 1951) objected to the "is" of identity, to people's saying, "I am a man," "I am a woman," "I am a good (or bad) person." I think he was correct about this, because once again these statements are all crass overgeneralizations. Moreover, as RET points out, to identify with any group or concept implies loss of oneself and leads to what Helmuth Kaiser called neurotic fusion. Thus, to identify with your peer group gives you a sense of belonging and security. But ironically it also takes away your own identity, makes you over-conforming, and therefore less of an individual in your own right. You are really a person who chooses to be in the group but had better not be a devout follower of the group. When the latter occurs, you are believing something like, "I absolutely must be a group adherent, else I am nothing." That is hardly a good state of mental health!

Identity is a poor word because it has conflicting meanings. I am I, myself, and am not really any other person. So that is fairly clear. But I also call myself a New Yorker, an American, or a man; and as I do so I partly lose my identity as myself, a unique human. Of course, as a person I am normally a member of a social group; and, as Sampson (1989) and others have pointed out, I take some of the main parts of my personality from the group — such as the way I dress, the kind of foods I eat, and the language I speak. So I am never just myself; nor had I better even be just a group member. For me to say that I am only I or only a member of a certain class is wrong on both counts.

Korzybski seems to solve this problem by noting that I am neither only myself nor only identified with a group. He would presumably say I am both/and rather than either/or. That is what RET says, too. I am partly an individual in my own right but once I choose to be in or to remain in a group that I was put in at birth (e.g., choose to remain an "American"), I no longer am only responsible for and to myself but also to the group I choose to remain a member of.

RET, like Korzybski I think, gives me some degree of human choice (for I can even choose to be a hermit) but it also says that I have limited choice, because my biology and my upbringing help make me a social creature; and therefore I am never completely a person in my own right. If I accept this 'reality' I shall probably get along fairly well both as an individual and a social person. If I reject or deny it, I shall probably get into both personal and social difficulty.

If you insist on rating your self or your person, therefore, RET advises that you pick a safe or self-helping definition, such as, "I am 'good' or 'okay' just because I exist, just because I am human, just because I choose to view myself this way." This is still a definitional or tautological self-rating that cannot really be validated or falsified. But, pragmatically, it is safe and will get you into little trouble!

Better yet, as noted above, RET helps people to refuse to rate their self, their totality, at all but merely to evaluate what they do. Then, when they act "badly," they can tell themselves, "That was 'bad' or 'foolish' but I am a person who acted that way. I am not a bad person and therefore I am

capable of changing my behavior and of probably acting better next time. If I am 'bad' I am hopelessly stuck. But if what I do is 'bad' I can usually change."

ABSOLUTIST SHOULD AND MUSTS

Korzybski did not clearly differentiate as far as I can tell between people's preferences and their demands, as RET does, nor did he show how when they take their preferably shoulds and change them into absolute, unconditional shoulds, they make themselves neurotic. But he implied that virtually all absolutist, unconditional thinking encourages us to make ourselves "unsane."

Thus, when speaking against identity, he said, "'Identity' as a 'principle' is defined as 'absolute sameness in "all" ("every") respects.' It can never empirically be found in this world of ever-changing processes, nor on silent levels of our nervous systems" (1951, p. 184).

RET shows that when you believe, "I preferably should succeed and win the approval of significant others," you explicitly or tacitly include buts and alternative solutions to your desires, such as: "But if I don't succeed, I can try harder next time." "But if I'm not approved, too bad, but it's not the end of the world." When your preferably shoulds are not fulfilled, RET holds, you normally feel appropriately sorry, disappointed, and frustrated (rather than inappropriately panicked, depressed, and self-hating).

On the other hand, when you strongly believe, "Because I want to succeed and to be approved by significant others, I absolutely, under all conditions and at all times must do so," you create severe anxiety when you may not do well and severe depression when you do not act well or win others' approval. For with your absolute, under all conditions shoulds and musts you allow yourself no alternative solutions to your desires, box yourself in, and needlessly make yourself miserable (Ellis, 1957, 1973, 1985, 1988, 1991b, 1991c, 1991d).

Korzybski wasn't as clear as RET is about this, but he fought vigorously against absolutist, dogmatic, allness and neverness thinking. Therefore, general semantics obviously opposes self-statements like, "Because I want to succeed at my profession and want to win the approval of significant others, I absolutely, under all conditions, at all times must do so." In RET, we frequently encourage people to change their inaccurate self-defeating language to more precise languages, and we therefore show our clients how to change this all or nothing sentence to something like, "Because I want to succeed at my profession and to win the approval of significant others, I very much prefer to do so. But if I don't, I can find other things to succeed at. If I never succeed at any important project, I can still enjoy doing what I can do and can still have a reasonably happy life. As for winning the approval of significant others, I want very much to do so, but I never have to. If I keep trying, I can practically always find some people who will like me as I like them. But if I never somehow do, there are many other aspects of life that I can enjoy, so I'll keep looking until I find them."

PRECISE THINKING AND LANGUAGE

Alfred Korzybski was a pioneer in recognizing the importance of our linguistic behavior, and pointed out that when we think imprecisely our crooked thinking works its way into our language

and then our dysfunctional language leads us into engaging in more imprecise thinking. Ever since I started doing RET, I found that people habituate themselves to poor language habits which then interfere with their accepting that they largely are responsible for their own dysfunctional language, feelings, and actions, and that therefore they can change them.

Thus, when my clients say, "Joe lied to me and that made me furious," I interrupt, "How could that, or Joe, get into your gut and make you furious?" "Oh, I see," they often reply. "Yes, Joe lied to me, and I chose to infuriate myself about his lying." "Yes," I say. "Isn't that a much more accurate description of what happened and how you chose to create your fury?"

Again, a client says, "I'm not getting the love I want Martha to give me, and she makes me feel like a worm." I ask, "Do you only want Martha's love, or aren't you telling yourself you need it?" "Mmm. Yes, I guess I am believing that I absolutely need it." "And does Martha's lack of loving you make you feel like a worm?" "Uh, no. I guess I'm putting the two together and making myself feel like a worm." "And how could you not win Martha's love and still not label yourself as a worm?" "I guess I could tell myself that because I want Martha's love and don't have it, my relationship with her is somewhat wormy. But that doesn't give me, a total person, the label of a worm." "Right! So hereafter try to watch your language that includes your demanding instead of wanting and that keeps you giving inaccurate labels of you, rather than descriptions of what you and others do."

So RET often shows people how to correct their language and their thinking, and to stop sneaking in overgeneralizing, labeling, demandingness, and other unscientific verbalizations into their thinking and behaving. It employs a specific technique called semantic precision or accurate language to do this and in this respect is one of the very few therapies that puts Korzybski's theory of language use into therapeutic practice (Ellis, 1988; Ellis & Velten, 1992).

SELF-CHANGE AND SELF-ACTUALIZATION

While general semantics and RET seem to agree that people are disposed to create and construct semantic errors, they also agree that people can learn to minimally do so. RET says that just because humans are active constructivists, rather than passively conditioned to be disturbed by their parents, teachers, and culture, they also have the innate tendency to change themselves and to choose to behave less defeatingly. Thus, they are able to think about their thinking, to realistically assess their unrealistic attitudes, to dispute their irrational beliefs, and to work hard at reconstructing their disordered thoughts, feelings, and behaviors (Ellis, 1962, 1973, 1985, 1988). Moreover, once they keep working at reformulating their disturbed ideas and feelings, they can also creatively work at growing, developing, and bringing about greater degrees of happiness and involvement (Ellis, 1988, 1991a; Ellis & Becker, 1982; Ellis & Harper, 1975).

Korzybski and his followers obviously have similar ideas. The Institute of General Semantics and many members of the Institute solidly believe that people can be taught the principles of general semantics and can be shown how to think and communicate more clearly with themselves and each other and thereby help themselves to change. RET and general semantics are both psychoeducational approaches to helping humans improve their intrapersonal and interpersonal relationships (Crawford, 1990; Crawford & Ellis, 1982, 1989; Ellis, 1975; Johnson, 1946; Mosher, 1966).

THE USE OF E-PRIME

In order to encourage people to give up the “is” of predication and the “is” of identity, Bourland (1965-6, 1986) advocated and used what he called E-prime, the English language without any inclusion of various forms of the word “to be” or its various tenses. Although writing in E-prime is difficult and does not completely make a writer and the reader avoid all linguistic and semantic errors, it does offer some help. RET, through the help of Dr. Robert Moore of Clearwater, Florida, of Dr. William Knaus of Springfield, Massachusetts, and myself, has favored E-prime more than has any other form of psychotherapy. I think it is still the only form of therapy that has some of its main works written in E-prime (Ellis, 1975, 1977; Ellis & Harper, 1975; Ellis & Knaus, 1977).

USE OF FORCEFUL PERSUASION

Korzybski noted, quoting Bois, that we humans have “to change our habitual methods of thinking, and this is not so easy as it seems” (1951, p. 196). He implied that our overgeneralized, misleading thinking gets into our body-mind system and into our action habit patterns. RET has always said that thinking, feeling, and behaving are not disparate, but importantly influence and affect each other. As I noted in my very first paper on RET, delivered in 1956: “Thinking...is and to some extent has to be sensory, motor, and emotional behavior...Emotion, like thinking and the sensory-motor processes, we may define as an exceptionally complex state of human reaction which is integrally related to all the other perception and response processes. It is not one thing, but a combination and holistic integration of several seemingly diverse, yet actually closely related, phenomena.” (Ellis, 1958, p. 35)

Because of its holistic emphasis, RET has always favored strong and direct cognitive, emotive, and behavioral methods of showing people exactly what they are doing to needlessly disturb themselves and what they can do to active-directively minimize their self-disturbance. In consonance with Korzybski’s disavowal of either/or solutions to human problems, RET does not favor either thinking or emotive or behavioral methods of therapy. RET consciously and actively employs all three kinds of therapy; and, following “and/also” and “et cetera” facilitations, it has no hesitation in combining psychotherapy with pharmacological treatment, with environmental changes, and with any other kinds of psychophysical methods that are likely to help various clients (Ellis, 1985, 1988, 1989; Ellis & Abrahms, 1978; Ellis & Dryden, 1987, 1991; Ellis & Velten, 1992).

REALISM AND PROFOUND PHILOSOPHIC CHANGE

Korzybski was in many ways a profound realist and empiricist, and noted that the revised structure of language that he advocated “necessitates ‘thinking’ in terms of ‘facts’, or *visualizing processes, before making generalizations*” (1951, p. 193). He also noted that while Aristotelian either-or language fosters our evaluating “by definition” or “intension” his own “non-Aristotelian or physico-mathematical orientation involves evaluating ‘by extension,’ taking into consideration the actual ‘facts’ in the particular situation confronting us” (1951, p. 194).

RET’s original method helped people to Dispute (at point D) their self-defeating ideas, inferences, attributions, and overgeneralizations, and showed them how to scientifically challenge these ideas in the light of ‘reality’ or ‘facts’. Thus, if Joan asks Harry to marry her and he refuses to do so, she

may foolishly conclude, (1) "I made a mistake in asking him," (2) "He hates me!" and (3) "That proves I'm no good, that I am a bad person!" RET, and the main other cognitive-behavior therapies often confront Joan with the 'facts', which tend to show that her inferences about Harry's refusal are invalid over-generalizations. Because: (1) Joan was probably right, not wrong, in asking Harry to marry her — for by doing so she has gained some valuable information about his feelings for her. (2) There is no evidence that Harry hates her, but only evidence that he doesn't want to marry and live with her. Actually, he may deeply love her and still, for various reasons, not want to marry her. (3) His refusal to marry her never proves, of course, that she is no good nor is a bad person, though it may possibly show that "factually" or in Harry's eyes, she has some undesirable traits.

RET and cognitive-behavior Therapy (CBT) therefore use 'facts' or 'reality' to show Joan her dysfunctional Beliefs and they therefore accord with Korzybski's views. But RET goes further than the other therapies and asks, in Joan's case, "What is the underlying musturbatory overgeneralization that leads an intelligent woman like Joan to make such silly inferences that are obviously unsupported by the 'facts' of 'reality'?"

Seek and ye shall find. Looking for Joan's tacit, implicit, or unconscious musts that she probably believes and from which she largely derives her antifactual inferences, we find that she very likely brings to her proposal to Harry the basic, core philosophy: "Whenever I ask any person I really like, such as Harry, to grant me any important favor, such as marrying me, he absolutely must under all conditions accede to my request — or else (1) I made a mistake in asking, (2) he or she hates me, and (3) that proves I am no good and that I am a bad person."

I am contending, in other words, that if Korzybski were a psychotherapist — which, actually, he partially was — he would surely have Disputed Joan's irrational inferences and refuted them "factually" and "empirically." But he would also, I suggest, look as RET does (and as most other cognitive-behavior therapies do not) for the higher-order abstractions that seem to lie behind and to help instigate many of Joan's disturbance-creating inferences.

Korzybski noted that "making us *conscious* of our *unconscious assumptions* is essential" (1951, p. 195). He also said that "abstracting by necessity involves evaluating, whether conscious or not, and so the process of abstracting may be considered as a *process of evaluating stimuli*" (1951, p. 171). Again: "The fact that we do abstract on higher orders becomes a danger if we are not conscious that we are doing so and retain the primitive confusions or identifications of orders of abstractions" (1951, p. 178).

If I interpret Korzybski correctly, he is saying here that to understand ourselves in depth we had better not just look for our conscious inferences about unfortunate events in our lives (such as Joan's conscious inferences about her self when Harry rejects her) but we had better also look for our unconscious, tacit assumptions that underlie many of our self-disturbing inferences. This is what RET does when it looks for core musturbatory philosophies behind Joan's (and other people's) anti-factual inferences. In this respect, RET is not only more depth-centered than most other cognitive-behavior therapies, and is not only one of the most constructivist therapies in today's world, but it also — ironically enough! — seems to be considerably more depth-centered than psychoanalysis. Why? Because psychoanalysis is not particularly philosophic, does not explore and look behind people's disturbing assumptions, creates vague, almost undefinable higher-order abstractions of its own (such as 'ego', 'id', and 'superego') and almost entirely ignores the depth-centered semantic problems that Korzybski raised and went a long way toward solving.

A purely Korzybskian analysis of people's cognitive-emotional-behavioral problems, such as Wendell Johnson (1946) attempted, will, I wager, do people more good and much less harm than will psychoanalysis. When RET is employed, incorporating as it does much of Korzybski's work with other important elements of cognitive-behavior therapy, even more depth-centered, philosophically profound therapy will, I predict, often occur. Compared to this kind of "deep" analysis, psychoanalysis seems to be quite superficial!

CONCLUSION

As I think can be seen by many of the parallels between rational-emotive therapy (RET) and Korzybski's general semantics (GS), the two disciplines overlap in many important respects. This is hardly coincidental, as I was distinctly influenced, when formulating and developing RET, by several of Korzybski's ideas. This does not mean that were Alfred Korzybski alive today he would enthusiastically endorse RET and place it above all the other psychotherapies. Perhaps he would — and, quite likely, for one reason or another, he wouldn't. In keeping with his own extensional thinking, I would guess that he would agree with some of RET's theory and practice some of the time under some conditions. As my own life and my practice of RET continues, I try to take a similar attitude. Rational-emotive practice works quite well some of the time under some conditions with some people. It is not, and will never be, a panacea for all of all people's cognitive-emotive-behavioral problems. There is no reason for it to take an either-or position nor to claim that all people with all disturbances have to be treated with RET or else they will not improve. Rubbish! As Korzybski would probably have recommended and as I have previously noted (Ellis, 1987b, 1989), RET had better be integrated with the most useful of other therapies so that it becomes and remains effective with many (not all) people much (not all) of the time.

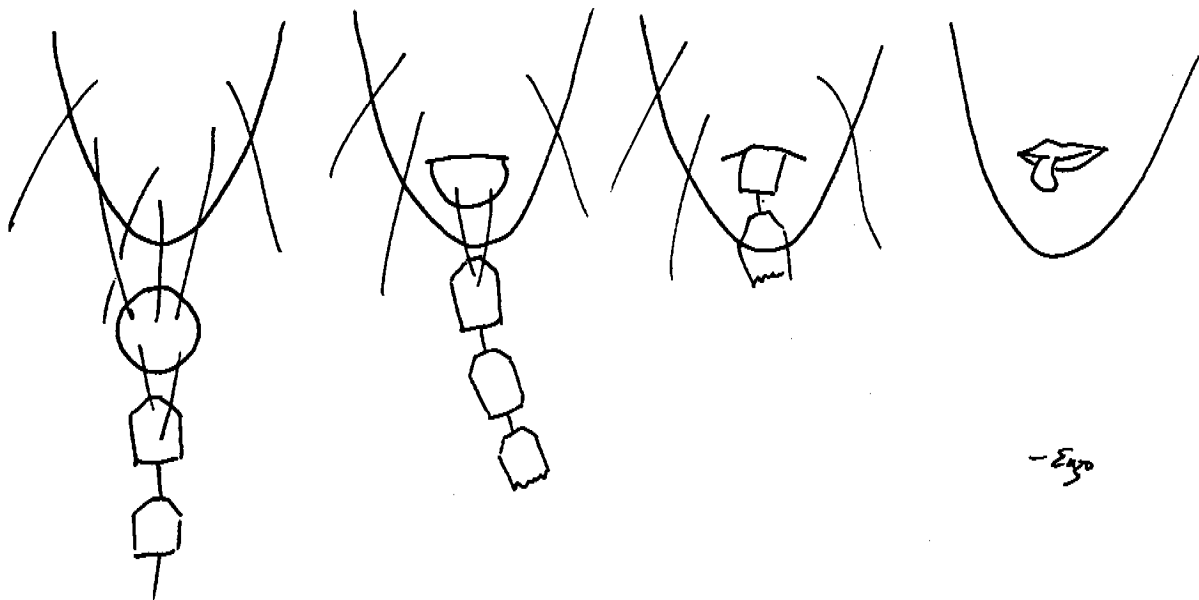
REFERENCES

- Adler, A. (1927). *Understanding human nature*. New York: Greenberg.
- Adler, A. (1931). *What life should mean to you*. New York: Blue Ribbon Books.
- Alexander, F., & French, T.M. (1946). *Psychoanalytic therapy*. New York: Ronald.
- Beck, A.T. (1976). *Cognitive therapy and the emotional disorders*. New York: International Universities Press.
- Bernard, M.E. (1986). *Staying alive in an irrational world: Albert Ellis and rational-emotive therapy*. South Melbourne, Australia: Carlson/Macmillan; Secaucus, NJ: Carol Publications.
- Bernard, M.E. (Ed.). (1991). *Using rational-emotive therapy effectively: A practitioner's guide*. New York: Plenum.
- Bourland, D.D., Jr. (1965/6). *A linguistic note: Writing in E-prime*. *General Semantics Bulletin*, # 32-33, 111-114.
- Bourland, D.D., Jr. (1968). *The semantics of a non-Aristotelian language*. *General Semantics Bulletin*, # 35, 60-63.
- Breuer, J., & Freud, S. (1965). *Studies in hysteria*. Vol. 2 of The Standard Edition of the Complete psychological works of Sigmund Freud. New York: Basic Books. (Originally published, 1897).
- Crawford, T. (1990, May 7, May 11, May 26). *Letters to Albert Ellis*.
- Crawford, T., & Ellis, A. (1982, October). Communication and rational-emotive therapy. Workshop presented in Los Angeles.

- Crawford, T., & Ellis, A. (1989). A dictionary of rational-emotive feelings and behaviors. *Journal of Rational-Emotive and Cognitive-Behavioral Therapy*, 7 (1), 3-27.
- Dryden, W. (1990). *Rational-emotive counseling in action*. London: Sage.
- Dubois, P. (1907). *The psychic treatment of nervous disorders*. New York: Funk & Wagnalls.
- Ellis, A. (1957a). *How to live with a neurotic: At home and at work*. New York: Crown. Rev. ed., Hollywood, CA: Wilshire Books, 1975.
- Ellis, A. (1957b). Outcome of employing three techniques of psychotherapy. *Journal of Clinical Psychology*, 13, 344-350.
- Ellis, A. (1958). Rational psychotherapy. *Journal of General Psychology*, 59, 35-49. Reprinted: New York: Institute for Rational-Emotive Therapy.
- Ellis, A. (1962). *Reason and emotion in psychotherapy*. Secaucus, NJ: Citadel.
- Ellis, A. (1971). *Growth through reason*. North Hollywood, CA: Wilshire Books.
- Ellis, A. (1972a). *Psychotherapy and the value of a human being*. New York: Institute for Rational-Emotive Therapy. Reprinted in A. Ellis & W. Dryden, *The essential Albert Ellis*. New York: Springer, 1990.
- Ellis, A. (1972b). What does transpersonal psychology have to offer the art and science of psychotherapy? *Voices*, 8(1), 20-28.
- Ellis, A. (1973). *Humanistic psychotherapy: The rational-emotive approach*. New York: McGraw-Hill.
- Ellis, A. (1976a). The biological basis of human irrationality. *Journal of Individual Psychology*, 32, 145-168. Reprinted: New York: Institute for Rational Emotive Therapy.
- Ellis, A. (1976b). RET abolishes most of the human ego. *Psychotherapy*, 13, 343-348. Reprinted: New York: Institute for Rational-Emotive Therapy.
- Ellis, A. (1977). *Anger — how to live with and without it*. Secaucus, NJ: Citadel Press.
- Ellis, A. (1985). *Overcoming resistance: Rational-emotive therapy with difficult clients*. New York: Springer.
- Ellis, A. (1986). Fanaticism that may lead to a nuclear holocaust: The contributions of scientific counseling and psychotherapy. *Journal of Counseling and Development*, 65, 146-151.
- Ellis, A. (1987a). The impossibility of achieving consistently good mental health. *American Psychologist*, 42, 364-375.
- Ellis, A. (1987b). Integrative developments in rational-emotive therapy (RET). *Journal of Integrative and Eclectic Psychotherapy*, 6, 470-479.
- Ellis, A. (1987c). A sadly neglected cognitive element in depression. *Cognitive Therapy and Research*, 11, 121-146.
- Ellis, A. (1988). *How to stubbornly refuse to make yourself miserable about anything — yes, anything!* Secaucus, NJ: Lyle Stuart.
- Ellis, A. (1989). *The treatment of psychotic and borderline individuals with RET*. Rev.ed. (Orig. publication, 1965). New York: Institute for Rational-Emotive Therapy.
- Ellis, A. (1990). Is rational-emotive therapy (RET) “rationalist” or “constructivist”? In Ellis, A., & Dryden, W., *The essential Albert Ellis* (pp. 114-141). New York: Springer.
- Ellis, A. (1991a). Achieving self-actualization. In A. Jones & R. Crandall (Eds.), *Handbook of self-actualization*. Corte Madera, CA: Select Press.

- Ellis, A. (1991b). Using RET effectively. In M.E. Bernard (Ed.) (1991). *Using rational-emotive therapy effectively* (pp. 1-33). New York: Plenum.
- Ellis, A. (1991c). The philosophical basis of rational-emotive therapy (RET). *Psychotherapy in private practice*, 8(4), 97-106.
- Ellis, A. (1991d). The revised ABC's of rational-emotive therapy. In J. Zeig (Ed.), *Evolution of psychotherapy: II*. New York: Brunner/Mazel. Expanded version: *Journal of Rational-Emotive and Cognitive-Behavior Therapy*, 2, 139-172.
- Ellis, A., & Abrahms, E. (1978). *Brief psychotherapy in medical and health practice*. New York: Springer.
- Ellis, A., & Becker, I. (1982). *A guide to personal happiness*. North Hollywood, CA: Wilshire Books.
- Ellis, A., & Dryden, W. (1987). *The practice of rational-emotive therapy*. New York: Springer.
- Ellis, A., & Dryden, W. (1990). *The essential Albert Ellis*. New York: Springer.
- Ellis, A., & Dryden, W. (1991). *A dialogue with Albert Ellis: Against dogma*. Milton Keynes, England: Open University Press.
- Ellis, A., & Harper, R.A. (1975). *A new guide to rational living*. North Hollywood, CA: Wilshire Books.
- Ellis, A., & Velten, E. (1992). *How to quit addictive drinking and stinking thinking*. New York: Barricade Books.
- Ellis, A., & Yeager, R. (1989). *Why some therapies don't work: The dangers of transpersonal psychology*. Buffalo, NY: Prometheus.
- Freud, S. (1965). *Standard edition of the complete works of Sigmund Freud*. New York: Basic Books.
- Fromm, E. (1950). *The sane society*. New York: Holt, Rinehart & Winston.
- Glasser, W. (1965). *Reality therapy*. New York: Harper & Row.
- Goldfried, M.R., & Davison, G.C. (1976). *Clinical behavior therapy*. New York: Holt, Rinehart & Winston.
- Guidano, V.F. (1988). A systems, process-oriented approach to cognitive therapy. In K.S. Dobson (Ed.), *Handbook of cognitive behavioral therapies* (pp. 307-356). New York: Guilford.
- Guntrip, H. (1971). *Psychoanalytic theory, therapy and the self*. New York: Basic Books.
- Hayakawa, S.I. (1962). *The use and misuse of language*. Greenwich, CT: Fawcett.
- Hayakawa, S.I. (1965). *Language in Thought and Action*. New York: Harcourt, Brace and World.
- Horney, K. (1945). *Our inner conflicts*. New York: Norton.
- Janet, P. (1898). *Nevroses et idée fixes*. 2 vols. Paris: Alcan.
- Johnson, W. (1946). *People in quandaries*. New York: Harper & Row.
- Kernberg, O. (1975). *Borderline conditions and pathological narcissism*. New York: Aronson.
- Klein, M., & Riviere, J. (1964). *Love, hate and reparation*. London: Hogarth.
- Kohut, H. (1977). *The restoration of the self*. New York: International Universities Press.
- Korzybski, A. (1921). *Manhood of humanity*. New York: E. P. Dutton & Co.
- Korzybski, A. (1923). Fate and freedom. In I.J. Lee (Ed.), *The language of wisdom and folly* (pp. 341-357). New York: Harper & Bros. (1949).

- Korzybski, A. (1933) *Science and Sanity: An Introduction to Non-Aristotelian Systems and General Semantics*. Lakeville, CT: The International Non-Aristotelian Library Publishing Co. (now part of the I.G.S., Englewood, NJ). 4th edition, 1958.
- Korzybski, A. (1951). The role of language in the perceptual processes. In R.R. Blake & G.V. Ramsey (Eds.), *Perception: An approach to personality* (pp. 170-205). New York: Ronald. Reprinted in *General Semantics Bulletin*, # 36, 15-50 (1969).
- Mahoney, M.J. (1974). *Cognition and behavior modification*. Cambridge, MA: Ballinger.
- Mahoney, M.J. (1991). *Human change processes*. New York: Basic Books.
- Maultsby, M.C., Jr. (1975). *Help yourself to happiness: Through rational self-counseling*. New York: Institute for Rational-Emotive Therapy.
- Meichenbaum, D. (1977). *Cognitive-behavior modification*. New York: Plenum.
- Mosher, D. (1966). Are neurotics victims of their emotions? *Et cetera*, 23, 225-234.
- Munsterberg, H. (1919). *Technique of psychotherapy*. Boston: Houghton Mifflin.
- Piaget, J. (1963). *The origin of intelligence in children*. New York: Norton.
- Sampson, E.E. (1989). The challenge of social change in psychology. Globalization and psychology's theory of the person. *American Psychologist*, 44, 914-921.
- Sullivan, H.S. (1953). *The interpersonal theory of psychiatry*. New York: Norton.
- Yankura, J., & Dryden, W. (1990). *Doing RET: Albert Ellis in action*. New York: Springer.



addition to our panel of speakers. However, as I agree with him about the uselessness of such dreaming, instead I now welcome his participation in future events.

ADDENDUM TO ALBERT ELLIS'S 1991

ALFRED KORZYBSKI MEMORIAL LECTURE

Dr. Ellis has communicated some additions to his lecture, just too late for inclusion in *Bulletin # 58*:

1. The methodology he created (acknowledging the influence of general-semantics) is now known officially as:

RATIONAL-EMOTIVE BEHAVIOR THERAPY.

2. Additional references cited are:

Bourland, D. D., Jr & Johnston, P. D. (1991). *To be or not: An E-prime Anthology*. San Francisco: International Society for General Semantics.

Fitzmaurice, K. (1989) *Self-concept: The enemy within*. Omaha, NE: Fitzmaurice Publishing.

----- (1991) *We're all insane*. Omaha, NE: Palm Tree Publishers.

Hauck, P. (1992). *Overcoming the rating game*. Louisville, KY: Westminster.