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Using the Reflecting As If Intervention to Reduce Bullying Behaviors

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Abstract

Bullying behaviors among youth in the United States are epidemic. Professional counselors need effective interventions founded upon evidence-based practices to help truncate perpetrator bullying behaviors. The "Reflecting As If" (RAI) intervention provides a relatively simple to implement, evidence-based intervention that holds significant clinical promise.

Keywords: bullying, school bullying, maltreatment, Reflecting As If

Recent bullying research suggests approximately 25% of 6th through 12th grade students in the U.S. are bullied (Centers for Disease Control and Prevention, 2012; DeVoe & Bauer, 2010; Schneider, O'Donnell, Stueve, & Coulter, 2012). Bullying negative effects are well documented throughout existing literature (Dao et al., 2006; Due & Holstein, 2008; Pozzoli, 2009; Rivers & Noret, 2013; Srabstein & Piazza, 2008). Given bullying frequency among U.S. students and bullying's documented negative effects, professional counselors need helpful bullying interventions that are both easy to implement and based upon evidence-based practices. The Reflecting As If (RAI) intervention provides such an intervention. RAI is founded upon proven, widely

accepted, evidence-based practices (Sommers-Flanagan & Sommers-Flanagan, 2012; Watts & La Guardia, 2013). This article will provide a general RAI description and explain RAI's three phases. It will then use a clinical vignette demonstrating RAI's use with a bullying perpetrator.

General "Reflecting As If" Description and Phases

RAI is based on ideas and procedures from Adlerian therapy and constructivist and social constructionist perspectives (Watts, 2013; Watts & La Guardia, 2013; Watts & Phillips, 2004; Watts, Williamson, & Williamson, 2004). Specifically, RAI is relationship focused, optimistic and anticipatory of positive change outcomes, present and future oriented, and places emphasis on existing client strengths, skills, and abilities (Watts, 2013; Watts & La Guardia, 2013). The intervention invites clients to both identify and implement new or alternate behaviors. Clients perceive these new and alternate behaviors as potentially helpful in changing current negative behaviors and relationships. Given the new or alternate behaviors are created by clients seeking counseling and neither created nor forced upon clients by their counselors, clients have a greater propensity to feel ownership of the new behaviors (Watts, 2013; Watts & La Guardia, 2013). Thus, clients have greater potential to commit to the implementation of the behaviors and expect positive outcomes when the behaviors are utilized. Furthermore, given clients completely control if and when their newly devised behaviors are utilized, clients will likely utilize the new behaviors when they believe these new behaviors will bring about desired and intended outcomes.

RAI is comprised of three distinct phases. Each phase has a specific task to complete. Phase One is brainstorming with clients. Here clients identify new or altered behaviors they believe would be beneficial in changing their perceived negative behaviors. Watts and La Guardia (2013) encouraged professional counselors to utilize thought provoking questions such as, "If you were acting as if you were the person you would like to be, how would you be acting differently?" or "If a good friend would see you several months from now and you were more like the person you desire to be, what would this person see you doing differently?"

Phase Two of the RAI is what Watts described as a "plausibility check" (Watts, 2013; Watts & La Guardia, 2013). Here, clients and professional counselors work together to help clients refine their identified new or altered behaviors. Counselors help clients ensure the new or altered behaviors are specific, behaviorally oriented, measurable, and relevant to the desired outcome. Once the plausible new or altered behaviors are behaviorally described and measurements for the behaviors are devised, clients then rank order the behaviors form easiest to most difficult to implement.

RAI Phase Three has three separate steps. In Step One of Phase Three, clients select two of the easiest behaviors from the list generated in Phase Two and initiate these behaviors during the upcoming week. Step Two is discussing clients' experiences with the new or altered behaviors. Specifically, professional counselors focus on successful behavioral attempts and discuss how the client may see and experience others, their interpersonal relationships, and themselves differently. The last step of Phase Three includes encouraging clients in their continued pursuit of change, focusing on clients'

strengths and abilities, differentiating between what people do and who people are, and communicating affirmation regarding client efforts (Watts & Pietrzak, 2000).

Bullying Case Vignette

Andrew presents as a 15-year-old, Caucasian male. He is a junior at Central High School. Two weeks ago, an incident occurred in the high school cafeteria. Andrew shoved a smaller freshman student and poured milk on the student's lap. Given the school district's zero tolerance bullying policy, Andrew was suspended last week from school and is now required to participate in weekly counseling sessions beginning today. RAI Phases One, Two, and Three are provided below, as well as a summary description for each phase.

Phase One:

Counselor: Andrew, based upon what you said, you don't want to get suspended again. One counseling intervention clients have found helpful is called, 'Reflecting As If.' Would you be interested in learning more about how to use this intervention as a way to stop bullying?

Andrew: Yes, I want to go to college. If I get in trouble again, I will be permanently expelled from school. Then, I'll never get into a college. How does Reflecting As If work?

Counselor: I'm glad you asked. If you were acting as if you were the person you want to be, who doesn't shove or bully, how would you be acting?

Andrew: I guess I would be acting friendly.

Counselor: So, how would acting friendly look, Andrew?

Andrew: I would be smiling rather than acting all tough and angry.

Counselor: Makes sense. How would you not be looking all tough and angry?

Andrew: I don't know. Maybe I would be walking so my hands weren't clenched into fists.

Counselor: What else would you be doing?

Andrew: I would say "hi" to people rather than being silent.

Counselor: Okay. So you would be smiling, your hands wouldn't be clenched into fists, and you would be saying "hi" to people. Is there anything else you would be doing if you were acting like the person you want to be who doesn't shove or bully?

Andrew: Nope. Those would be the things I would concentrate on.

As we read above, we understand Phase One is brainstorming how Andrew would act if he were acting like a person who does not bully. Although the above responses are limited for demonstration purposes, they describe how to ask bullying perpetrators to identify new, nonbullying behaviors. It is critically important to ensure responses are behaviorally described. Andrew first reports he would be acting friendly. The professional counselor then asks, "So, how would acting friendly look?" The intent of this question is to have Andrew behaviorally describe how he would be acting. He does this by saying he would be smiling and not clenching his fists when he walks. The counselor then asks what else Andrew might do. Andrew reports he would say "hi" to

people rather than be silent. This brainstorming helps Andrew envision the behavioral manner in which he can choose to act, and it provides a template of options from which he may select.

Phase Two:

Counselor: Andrew, how plausible is it that you would actually smile when you walk around the school?

Andrew: It wouldn't be that hard to do.

Counselor: But on a scale from 0 to 10 with 0 indicating that you likely won't walk around the school smiling and 10 indicating that you will be smiling as you walk around the school, how realistic is it that you will be smiling.

Andrew: I think about a 6. I will be smiling more than half the time I walk around the school.

Counselor: So, I'm hearing you would be willing and able to smile more than half the time you are walking around the school. How can you check yourself to see how often you are smiling?

Andrew: Well, I could write 'smile' on the back of my hand and every time I look at my hand, I can remember to smile.

Counselor: You seem pretty dedicated. I bet you would do that.

Andrew: Yup.

Counselor: So what could you do to remember not to clench your fists when you walk?

Andrew: If I am smiling, I probably clench my fists. Every time I look at the back of my hand and see 'smile', I will also relax my hands and make certain they are not clenched.

Counselor: That's a good idea. How about saying 'hi' to people? How will you do that?

Andrew: I bet if I'm smiling, people will smile back. That shouldn't be too hard to do.

Counselor: Smiling, nonclenched hands, and saying 'hi.' Which will be the easiest for you to do and which will be the most difficult?

Andrew: I don't think any of these things will be hard to do. I think smiling will be easiest, followed by keeping my hands from making fists, and saying 'hi.'

Counselor: So we would order these behaviors from easiest to hardest by saying smiling is easiest and number one, walking with your hands open and not clenched into fists would be second easiest or number two, and third easiest would be saying 'hi.'

Andrew: You got it!

Phase Two above demonstrates how professional counselors can create a plausibility check by asking if clients will use their newly self-identified, anti-bullying behaviors. Above, the counselor challenges Andrew by asking if Andrew actually will use the anti-bullying behaviors he identified and how Andrew will monitor his use of these behaviors. Andrew verbally reports the anti-bullying behaviors will be useful. He then devises a method to measure or monitor his compliance. Specifically, Andrew reports he will write 'smile' on the back of his hands. Andrew claims he will smile each

time he sees the word on the back of his hands. Finally within this Phase, the counselor has Andrew rank order the behaviors from easiest to most challenging.

Phase Three Step One:

Counselor: Given that the anti-bullying behaviors you identified are pretty straightforward, which two behaviors will you want to begin this week?

Andrew: I can do all three this week.

Counselor: I really believe you could. However, let's identify just two that you will use and practice this week. Once you are successful with those two new behaviors you can add your third anti-bullying behavior the following week. Which two will you want to utilize this week?

Andrew: I know I can smile and walk with my hands open rather than clenched into fists.

Counselor: Good. Between now and the next time we meet next Monday, why don't you smile and walk with your open hands, the way you have identified as helpful. Keep track of how that goes and tell me how things improve between now and next week.

Because Phase Three has three separate parts, this Phase will be broken into three Steps for demonstration purposes. Step One demonstrates how the professional counselor asks Andrew which two anti-bullying behaviors he will use. As is often the case with relatively easy to implement, anti-bullying behaviors identified by clients, Andrew reports he can implement all three. Although it is highly plausible Andrew could implement all three of these very simple behaviors, the counselor wants Andrew to have a high probability for success and focus on two limited behaviors that can quickly become an ingrained habit. Thus, the counselor reports her positive belief that Andrew could successfully implement all three. However, she encourages Andrew to focus on two behaviors in the upcoming week, and then report his success at the next scheduled counseling session. It is also important to note that the counselor sets an expectation for success. She does this by stating, ". . . tell me how things improve between now and next week." This statement has significant therapeutic implications. It implies the counselor believes in Andrew and his ability to implement these new anti-bullying behaviors. Furthermore, her statement establishes her expectations for Andrew's success.

Phase Three Step Two:

Counselor: Welcome back, Andrew. Tell me how often you smiled and walked with open hands last week?

Andrew: It was easy. I smiled wherever I went and kept my hands open the whole time.

Counselor: Cool. So on a scale of 0 to 10, with 0 meaning you never smiled or walked with your hands open and 10 meaning you were smiling all the time and walking with your hands open all the time, what kind of score would you give yourself?

Andrew: I'd say an 8. Most days I smiled and walked with my hands open.

Counselor: An eight is a pretty high score and tells me you smiled and walked with open hands a lot. What kinds of things did you do to remind yourself to keep on smiling and walking with open hands?
Andrew: I really didn't have to do much. I wrote 'SMILE' on the back of my hands the first day. But after I started smiling and walking with my hands open, it was easy to continue and I didn't write 'SMILE' on my hands anymore.
Counselor: So will you continue smiling and walking with open hands this next week?
Andrew: Yes. I plan to.
Counselor: Tell me how smiling and walking with open hands helped reduce or eliminate the previous bullying behaviors?
Andrew: It changed how people acted towards me.
Counselor: How's that?
Andrew: Well, when I smiled and walked with open hands people would smile back and talk with me.
Counselor: You also wanted to say 'hi' to people. Are you ready to do all three this week?
Andrew: No problem. I can do that.

Above, the professional counselor asked Andrew a scaling question to learn his smiling and walking with open hands frequency. She also asked how Andrew reminded himself to smile and use open hands. She then asked if Andrew planned to continue his new behaviors and whether or not the two behaviors helped Andrew reduce or eliminate the bullying. When Andrew reported the new behaviors helped, the counselor asked how the behaviors helped. Andrew reported that his smiling and walking with open hands resulted in people smiling back at him and speaking to him. Given the favorable outcome, the counselor then asked if Andrew was ready to implement the third anti-bullying behavior (i.e., saying 'hi'). Andrew reported he was ready to establish the third behavior. Hence, the counselor encouraged him to start saying 'hi' and monitor all three behaviors in the upcoming week. Had Andrew reported he was not ready to begin saying 'hi' to others, the counselor would have asked something like, "What things will you need to do before you start saying 'hi' to others?" Once Andrew identifies the things that he must do before utilizing the new behavior, the counselor will help Andrew establish a plan and timeline to accomplish what needs to be done. Had Andrew reported his newly implemented behaviors ineffective, the counselor would ask something like, "How can you modify the smiling and open hands behaviors or identify new behaviors that can help you reach your goal of non-bullying?"

The intent is to help Andrew understand he ultimately controls his behaviors and can identify and establish behaviors that will reduce and eliminate his bullying.

Phase Three Step Three:

Counselor: Andrew, I am impressed with the progress you have made and your commitment to be free from bullying. You have really set your mind to stopping the bullying behaviors and becoming the neat and caring person you are.
Andrew: Thanks. I want to go to college and bullying will keep me from getting accepted.

Counselor: You have many strengths and abilities, Andrew. You are a good communicator, you are intelligent, and you have many excellent interpersonal skills. I know you can be very successful. It is fun to see you becoming the person you are and to watch your dedication to continuing the change you want to achieve your goal of college.

In Phase Three Step Three the professional counselor does many things. She verbally praises Andrew, reports his progress and begins to differentiate between Andrew and his former bullying behaviors. The counselor also describes a few of Andrew's strengths and abilities. She concludes by communicating her perceptions of Andrew's future success and her belief in him.

Conclusion

The authors of this article described the RAI intervention and its three phases. RAI is a proven, evidence-based intervention based on an integration of Adlerian and constructivist ideas. Heretofore, RAI had not been linked within existing literature as a viable intervention to address the U.S. bullying epidemic. The clinical vignette demonstrates how to utilize RAI with a high school bullying perpetrator. Based upon the lead author's experiences, RAI is an easily implemented and effective bullying intervention that has broad potential for professional counselors working in a variety of settings including, but not limited to, school, community, and private practice counseling.

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