The Human Givens approach to emotional health and wellbeing

DECP conference
8 January 2009

Cathy Atkinson (University of Manchester)
Lisa Hales (Milton Keynes EPS)
Human Givens

- Proposes a holistic and practical framework for understanding what individuals, families and societies require to be mentally healthy (Griffin and Tyrrell, 2004).

- Eclectic psychological and psychotherapeutic approach which draws on ideas from other counselling paradigms (e.g. Cognitive Behavioural Therapy; Neurolinguistic Processing; Solution Focused Therapy).

Emotional needs

- Key organising idea of Human Givens therapy is that we have innate emotional needs and resources.

- These needs should be met in a fairly balanced way to ensure emotional wellbeing.

- Where needs are not met in balance there is a risk of mental health difficulties.
The Human Givens

- Security
- Volition
- Attention
- Emotional connection to other people
- Privacy
- Sense of status
- Connection to the wider community
- Sense of competence and achievement
- Being stretched
- Meaning
- Being stretched
Resources

- **Empathy** - The ability to build rapport, empathise and connect with others

- **Memory** - The ability to develop complex long term memory, which enables us to add to our innate knowledge and learn

- **Dreaming** - A dreaming brain that metaphorically diffuses emotionally arousing expectations not acted out the previous day

- **Observing self** – the ability to step back from ourselves (awareness of awareness)
Resources (continued)

- **Imagination** - which enables us to focus our attention away from our emotions and problem solve creatively and objectively.

- **Thinking brain** - A conscious rational mind that can check out emotions, question, analyse and plan (Left Hemisphere).

- **Knowing brain** - The ability to ‘know’ – understand the world unconsciously through metaphorical pattern matching (Right Hemisphere).
Evidence base for HG therapy

- At present, evidence-base limited as HG is new therapeutic intervention
- To date, research using Outcome Rating Scales (ORS) and Session Rating Scales (SRS)\(^2\) has suggested positive outcomes \((N=432)\). CORE\(^3\) also being used to measure outcomes
- Details of ongoing research available at http://www.hgiprn.org/index.html

\(^2\) Examples at http://www.hgiprn.org/measures.html
\(^3\) Clinical Outcomes in Routine Evaluation http://www.coreims.co.uk/
Goal setting

Goals should be:

- Positive
- Achievable
- Needs focussed
Case study

Tegan (Year 6):
- Transition for high school. Vulnerable to exclusion
- Information gathering around anger outbursts
- Accessing resources – strengths; ambitions; preferences
- Agreed strategies – discussed current strategies and introduced others
- Rehearsal – role play (Broken record); relaxation and guided imagery. Use of story metaphor
Relaxation technique and guided imagery

- When relaxed you can’t be anxious because you can’t experience two contradictory states

- Strong emotional arousal (e.g. anger; depression) locks us in to a single viewpoint and the neocortex cannot function properly (fight or flight; black and white thinking)

- Relaxation helps unlock the emotionally driven trance state allowing the higher cortex to function