
Participative Appreciative Therapy: A Positive Intervention Approach to Mental Health

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ABSTRACT

The paper introduces a positive psychotherapy called Participative Appreciative Therapy® (PAT). It is based on principals of Appreciative Inquiry combined with the power of visualization. It has two phases. Phase one is called CREAM having five components and phases two is called DESERT having six stages. The five components of CREAM phase are Catharsis, Rapport building, Empathy, Affirmative Topic and Motivational environment and the six stages of DESERT phase are Discovery, Exploring the Dream, Seeing the dream implemented, Emotional Glue, Representative actions and behaviour, Transformation and discussion. It can also be called Cream and Dessert Therapy. The most significant aspect of the therapy is positive outcomes are visible from the very first session as probing and inquiry are in themselves therapeutic because of its nature of setting goal and asking questions. Secondly development of insight for solutions is fast. PAT is actually not just a therapy but should actually be adopted as a lifestyle.

Keywords: *Appreciative Inquiry, Cream and Desert Therapy, Participative Appreciative Therapy (PAT), Positive Psychotherapy, Affirmative Topic, Positive Therapeutic Goal, Discover and Dream, Emotional glue, Visualization, Positive Goal*

After World War II Psychology can largely be considered as a science about identification and treatment of diseases and problems. It largely concentrated on repairing damages with a disease model of human functioning. Attention to pathology neglected the fulfilled individual and the thriving community. This exclusive focus resulted in a model of human being lacking positive features that make life worth living. With the advent of Positive Psychology, the lopsided view of psychology shifted from human weaknesses to human strengths. Positive Psychology aims to catalyze a change in focus of psychology from preoccupation only with repairing the worst things in life to building positive qualities (Seligman and Csikszentmihalyi 2000).

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Several core tenets of positive psychology. These tenets include a focus on positive traits, positive subjective experiences, and positive institutions. Positive psychology seeks "to find and nurture genius and talent", and "to make normal life more fulfilling" (Seligman, 2000).

Working on patients of Myocardial Infarction (Agrawal et.al. 1995) introduced the term **“Positive Life Orientation” (PLO)**. In the longitudinal study the relationship was investigated between PLO and both perceived and medical recovery from a recent myocardial infarction (MI), i.e. heart attack. PLO was defined as a predisposition to selectively focus one's attention on the brighter side of any situation. Results showed positive correlation of patients' PLO scores with their medical recovery, perceived recovery, expected recovery, personal control and mood state but negative with helplessness. Significant correlations among variables under the study often reduced to insignificance on partialing out PLO. PLO thus emerged as an important factor in recovery from MI (Agrawal et.al., 1995). Studies have shown that optimism is associated with problem focused coping, active seeking social support, laying emphasis on positive aspects of illness, as well as greater acceptance of uncontrollable outcomes (Burish and Bradley 1983; Scheier and Carver 1985). Several researches suggested that pessimistic explanatory style leads to helplessness, which in turn results in passivity, depression, poor problem solving, low self esteem, poor immune functioning, and higher morbidity (Peterson et.al., 1988; Kamen et.al.1987; Peterson, 1988). Other researchers have also shown desirable consequences of positive thinking on one's coping and performance (Peterson and Barrett, 1987; Seligman and Schulman, 1986). In a study on recovery from MI was associated with a belief in a just world and a belief that recovery from disease is in their control (Agrawal and Dalal, 1993). Positive attitude have a long-standing impact on prognosis in old age (Pitkala et.al, 2004) Positive life orientation is an important inner health resource for older (Fagerström, 2010). Dalal and Singh (1992) also found perceived control over the chronic disease to be linked with better adjustment. A number of studies suggest that people do search for the causes of negative and unexpected outcomes (Weiner, 1985; Wong and Weiner, 1981). In a study by Greenberg et al. (1984). Abramson et al. (1978) and Miller and Norman (1979) postulated that helplessness would occur when people perceive the undesirable event as uncontrollable and attribute it to stable-internal causes (e.g., weak constitution). Hence it may be said that a belief that patient can control the course of one's own disease or the events in future can develop learned optimism a term used by Carr (2004).

Working on his own experiences of recovery from an irreversible disease Norman Cousins (1983), now a faculty member at UCLA School of Medicine suggested that beyond the central nervous system, hormonal system and Immune system there are two other systems: the healing system and the belief system which help a person recover fast from even irreversible diseases. The healing system is the way the body mobilizes all its resources to combat disease. The belief system is often the activator of the healing system (Cousins; 1983). He healed himself from irrevocable disease through these systems. These systems recognize that hope, faith, love, will to

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live, cheerfulness, creativity, playfulness, confidence and great expectations have great therapeutic value. Yet, till now, most of the traditional therapies take pathology focused and problem focused approach neglecting these positive systems inbuilt in human body itself.

Recognizing the need for developing and strengthening the positive belief systems for better emotional adjustment and coping, the present paper presents a Positive Psychotherapy “Participative Appreciative Therapy” (PAT). It is based on fundamentals of positive psychology, the research experiences and therapy experiences of the author of inculcating positive life orientation among patients and their recovery process from diseases and episodes of depression and anxiety. This therapy uses principles of Appreciative Inquiry (AI) (Srivastava and Cooperrider, 1990; Cooperrider and Srivastava 1987) in inculcating positive belief systems and helping the client develop learned optimism (Carr, 2004). *Appreciative inquiry is “a co evolutionary search for the best in people, their organizations, and the relevant world around them. It is a technique which empowers people and organizations, mobilizes them towards action and energizes with future focus (Cooperrider et.al.2003; Shrivastava and Cooperrider, 1990). AI evolved as an Organizational Development tool and has been described as the most important advance in action research in the past decade (Bushe, 1991); as powerful second generation OD practice (French and Bell, 1995; Mirvis, 1993); as offspring and “heir” to Maslow’s vision of a positive social science (Chin, 1998; Curran, 1991); as a model of a much needed participatory science, a “new yoga of inquiry” (Harman, 1990) where the term yoga comes from the Sanskrit root yug which means link or bond. AI helps make the memory link by concentrating systematic inquiry onto all aspects of the appreciable world. It is a methodology that takes the idea of the social construction of reality to its positive extreme (Gergen, 1990).*

Appreciative Inquiry is a particular way of asking questions and envisioning the future that fosters positive relationships and builds on the basic goodness in a person, a situation or an organization. According to Cooperrider and Whitney (2005) AI involves, in a central way, the Socratic strategy and practice of asking the right questions that strengthen a system's capacity to comprehend, anticipate and heighten positive potential.

AI basically has two words: appreciate and inquire. Appreciation refers to recognition of the best in people and the world around them. The other important word is inquiry which refers to exploration and discovery of what works by asking well crafted relevant questions.

In this therapy techniques of visualization, relaxation and inducing a state of trance are combined with the art of appreciative inquiry. The therapy works by focusing the attention of an individual on its most tangible and intangible strengths, capabilities, resources, positive potentials and assets. PAT is based on the notion that human system grows and changes in the direction of what it focuses upon, i.e., the positive goal you wish to achieve. Perception of those things which give

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life, health, vitality and excellence to living human systems, affirmation of past and present strengths, successes, assets, high points and potentials are valued in this process.

PAT: Operational Definition

Participative Appreciative Therapy (PAT) is basically a life focused approach including the process of transformation initiated through catharsis and rapport building in a motivational environment. Connecting to the subconscious of the client it focuses on life giving factors, visioning the possibilities and opportunities based on positive past experiences , making positive action plans and commitments with an emotional glue, taking actions, appreciating and celebrating for positive outcomes .

PAT Beliefs

Participative Appreciative Therapy is thus founded on the following set of beliefs about human nature and human behavior:

1. People individually and collectively have unique gifts, skills and contributions to bring to life. When given an enabling environment, these skills and unique gifts can be used for attaining desirable outcomes.
2. Human social systems are sources of unlimited relational capacity, created and lived in language. People are curious and they like to tell stories and listen to stories. They pass on lot of information related to their value system and belief patterns which is extremely helpful in understanding their issues, behavior and problems. People delight in doing well in the eyes of those they care about and respect. People create identities and knowledge in relation to one another.
3. The images we hold of the future are individually created and, once articulated, serve to guide the individual. Individual's vision of the future has a very deep and profound influence on the way s/he acts in the present. Individuals grow into the images they create. Hence if we are out to achieve deep or profound change we need to spend some time crafting or creating appropriate visions of the future. The vision of future, when creates its place in the subconscious and unconscious mind of the person, it becomes a powerful guiding force.

PAT Principles

1. You find what you search for (what you focus on becomes your reality). For example Rakesh focused upon his colleagues being jealous of him and creating problems in his growth, he found several incidences which supported his hypothesis and he narrated them in the board meeting. On the other hand Rekha looked for situations where his colleagues came forward in her support and she identified many such incidences in the same organization with same set of employees. This is in reference to the environment.

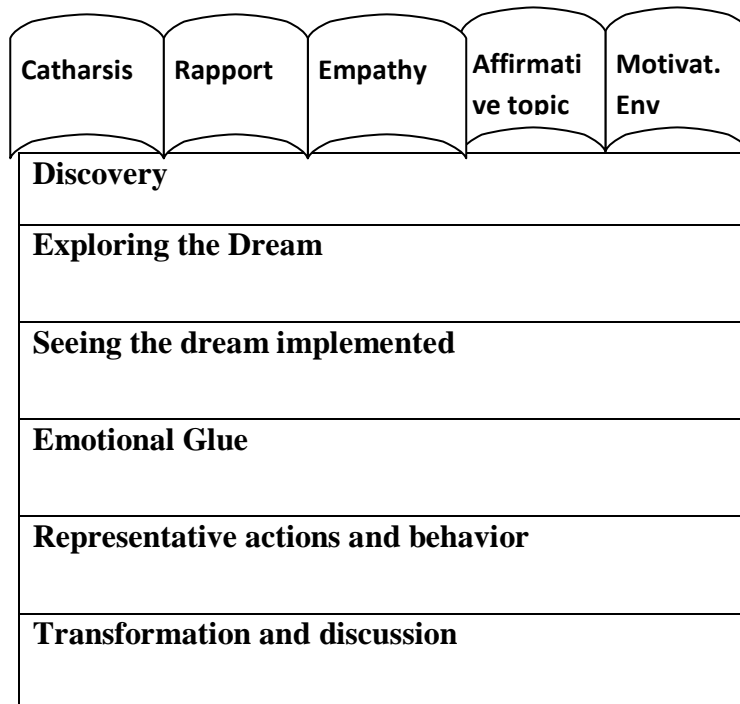
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2. Words are world and language creates reality, e.g. Addison said that he has learned thousand ways by which bulb could not be created. If he had called his attempts as failures he could have never made thousand attempts.
3. You get what you expect e.g., Studies on placebo effect have shown that if you believe that the medicine you are taking will help you, you will recover even if the tablet had no medicinal value.
4. When you enjoy doing something the results are achieved faster, for e.g. morning walk with a good friend is much longer than otherwise.
5. Thoughts and actions based on life factors will result in productive outcomes. e.g., Raj did not improve in studies till criticized for not paying attention to studies, not being serious and wasting time with friends. Same Raj improved drastically when appreciated in the class for giving a very good presentation and started studying seriously.

Process of PAT

Esposing the principles and beliefs mentioned above the most significant element of PAT is identification of a positive therapeutic goal. The therapeutic goal has to be worded positively i.e. what is to be achieved and not what is to be discarded. It is this goal on which the client and the therapist would work together. An agreement between the client and the therapist on the goal and active participation by the client in the therapeutic processes is a prerequisite in this therapy and therefore it is called **Participative**.

PAT is basically a two phase therapy. Phase I consists of Cream and Phase II consists of Dessert. It can also be called **Cream and Dessert** Therapy.



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Phase I: CREAM –It consists of following five components. There may not be a specific order in these five components.

1. Catharsis
2. Rapport Building
3. Empathy
4. Affirmative Topic and
5. Motivational Environment

Catharsis will help the client to ventilate and by showing empathy during this period the counselor will be able to establish a good rapport with the client. The next most important step of the therapy is choosing an **Affirmative Topic**. Usually in a therapeutic situation the question normally asked is, “what is the problem?”, “How can I help you?” In PAT the therapist would ask “Where do you want to go?” “What is it that you wish to achieve?” Since client comes with a problem focus hence even on asking the above questions the reply is often in terms of problems. The therapist would continue to ask questions till the client comes out with an affirmative issue. However it is advisable to allow the client for catharsis before reaching the affirmative topic and objective to work with and define the therapeutic goal in a positive language. E.g., in traditional therapy the problem that the client may come to ‘my child speaks lie and manipulates the parents’, ‘I wash my hands repeatedly and cannot stop taking bath at least 10 times a day’. The implication is that these problems should vanish or finish. There is no frame here about what to do instead e.g., the problem of taking bath does not mean that there will be no bathing. There has to be an alternative behaviour to replace the one which is seen as a problem. Hence the affirmative topic is about the behavior that has to replace or that one wants to achieve. It is not about finishing the problem. Hence these problems have to be reframed in affirmative language e.g., ‘I want my child to speak truth and be transparent and expressive about his relationships with parents’, and ‘I want to take bath at the most one or two times a day and wash my hands only after taking meals or when I do something which makes my hand dirty’. Sometimes the goal is not only positively worded but the expected goal is of a much higher value and nature e.g., ‘I want my child to be the best in the world with honesty and dedication in personality’. Exploring such goals have very interesting visions and expected behavior from the child which the therapist and clients work together to achieve with reality check. Once the affirmative issue is selected a motivational environment has to be maintained throughout the session where the counselor takes a commitment from the client for full active participation to reach where they wish to reach, the ultimate goal. Motivational Environment is achieved by active listening, paying attention to the concerns of the client and an assurance for attaining the future vision.

Phase II: DESSERT

This phase formulates the main therapy though the therapeutic effects are visible in the CREAM phase itself. It is composed of six stages:-

1. Discovery

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2. Exploring the Dream,
3. Seeing the Dream Implemented
4. Emotional Glue
5. Representative Actions and Behaviour.
6. Transformation and Discussion

i) Discovery: The Discovery phase is a diligent and extensive search to understand and identify the “best of what is” and “what has been” in relation to the affirmative topic or ultimate goal. It begins with developing interview guide which includes well crafted appreciative interview questions. The questions are written to generate stories, to enrich the images and inner dialogue within the client, and to bring to the surface the eternal soul and the factors that gave life to his/her existence especially in reference to the affirmative topic. Since human systems move in the direction of what it focuses upon so choice of what to focus upon is both critical and strategic. The selected issue provides a framework for collecting stories, discovering and sharing the most tangible and positive experience, and creating an environment where the client participates actively with the therapist to achieve desired results. The process of positive change in the direction of affirmative topic is initiated in the very first stage of the actual therapy as it starts giving a positive outlook for one’s existence and sets in motion the process of searching for desirable and positive experiences of life. Hence the discovery phase has therapeutic value.

ii) Exploring the Dream: The Dream phase is an energizing exploration of “what might be”. The client explores for his/her hopes, engaging oneself in and out of the box thinking and dreaming the desired world of one’s self, significant others and relationships at home or may be at work. This phase involves generation of creative, affirmative and hopeful images, innovative strategic vision and an elevated sense of purpose. During this state the therapist helps the client in creating the experience that the client wishes to achieve ultimately. Discovery of the best sets the mood for dreaming. In this stage the client is also challenged if the dream is very unrealistic, selfish and where space for other persons is missing. The client is guided to a realistic, attainable and responsible dream. It is more helpful to take the client in a state of deep relaxation or trance to dream. The client is motivated to have as clear perception of the desired state as if all is before her/his eyes.

iii) Seeing The Dream Implemented: This stage requires the client to be in a state of deep relaxation and visualizing or imagining the dream coming true. Some clients go through a lot of turmoil in this stage as it requires to create a bridge between the actual and the dream. Since the state in which the client comes is stressful and for which the client does not see a solution s/he often finds it difficult to visualize implementation of the dream. Sometimes they start the visualization and then stop in between. In such cases it may need more than one session for few clients to come to this stage depending on the severity and length of the period of the problem. With gradual effort it becomes possible. The role and behavior of client has to be, especially, elaborated in this stage. It basically involves selection and

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adoption of healthy behaviors which will help the client to reach the desired state of living. It is actually living the experience that the client wishes to achieve. In this stage the client gets insights about the strategies that will facilitate her/him to reach the desired state. The task of the therapist is to explore the details of the context in which the dream is implemented. Before taking the client in the visualization stage the therapist would ask the client to give details about the environmental factors of her/his liking e.g., the physical environment (outside or inside the house, the location of mountain, snow, sea shore or riverside), colour scheme (red, pink, blue green etc.) the temperature and the climate (sunny or cloudy, hot or cold etc.), the sounds (music of choice etc.), the décor and the interior (the upholstery, paintings, show pieces etc.).

This knowledge is then used during visualization as the context in which the dream is implemented. The therapist would then take the client to the journey of visualization after few minutes of deep relaxation through progressive muscular relaxation technique or some other technique of her/his choice. The therapist would ask the client to take steps towards fulfillment of his/her dreams. The journey is slow and steady in the environment for which the client has shown her/his liking. At the end of the journey the client is asked to focus on what the client is doing (standing, sitting, lying, talking or quiet, what if talking), the people around (who all are with her/him in this time of dream fulfillment, who is doing what, who is saying what, who is feeling and expressing and thinking what etc.).

Only the client knows what are the behaviours which would help her/him to achieve the desired goals. But for certain reasons s/he is not aware about them at conscious level or s/he is not able to adopt them. During subconscious stage things start coming as crystal clear with guided visualization process. During this stage the client is also asked to look carefully and microscopically at his own actions and behavior towards achieving the goals. This reveals the capabilities, the possibilities of behaviour, likings and desires of the client.

iv) Emotional Glue: Once the therapist is aware about the details of the environment in which the dream is implemented the therapist is required to lace it with emotional glue. The amygdale remembers all that is emotionally laden. During this phase the client is also fed with energy, positive thinking, capacity and capability enhancement techniques, confidence, high self esteem, appreciation by loved ones, happiness and peace on faces of loved ones etc. Hence to make the memory of the positive experience to be remembered for repetition in future the therapist would help the client focus on positive emotions as well as exaggerate them e.g., you are feeling at the top of the world as this (the dream) is happening. The therapist would also expand the experience physically and emotionally. The client is helped to visualize/imagine oneself as impacting and spreading the positive emotions to the loved ones (friends, spouse, children, colleagues etc.) and they are happy and cheerful seeing the client achieve one's ultimate goals. The client visualizes oneself

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happy, the entire environment is happy and joyous, may be the entire house, the entire neighborhood, the entire city or the world is celebrating, the people whom s/he values are extremely happy and enjoying.

Observe the face expressions of the client and the therapist would know if the client is enjoying the state or not. Let the client enjoy the state of positive visualization filled with positive experiences and emotions till s/he is comfortable as assessed by the facial expressions. Towards the end the client is asked to hold or freeze the image of happiness in some part of the body e.g., fist. The client is then asked to come back from the visualization state to conscious state with open eyes. Before the client opens the eyes s/he is suggested to rub the palms and put the warm palms on the closed eyes. Do this 2-3 times and then open the eyes. This will acclimatize the eyes from the comfort of dream to hard reality of the world. Before saying goodbye for this session the therapist should ask the client to use symbolic holding of the image as frequently as possible. Whenever the client is in pensive mood s/he should bring back the image of happiness with closed or open eyes and also use the part of the body where that scene has been frozen e.g., close the fist and feel the frozen moment rather than the entire process of implementation of dream.

v) Representative actions and behaviour. At the end of the session the therapist should ask the client to pick up one of the acts/behaviour s/he was doing in the visualization stage to actually do in the real life and make a commitment. Clients are quite resistant to take actions in the direction of their commitment. The therapist has to emphasize that some action may be as small as making a call or writing an e-mail is initiated. Appreciation for any small action taken by the client in the direction of its commitment, and creating opportunities for celebration are equally important part of PAT.

vi) Transformation and Discussion: In this phase future is crafted by a conscious effort towards re-creation or transformation of an individual's systems, structures, strategies, processes and images in a way that they are more fully aligned with the person's positive past (Discovery) and highest potential (Dream). It involves focusing specifically on personal commitments and paths forward. It initiates a series of inspired actions which bring an array of changes in the thought process and actions of the individual in one's interpretation of the world, the relationships, the communication processes, other processes and structures that support ongoing learning and innovation. Therapeutic changes occur in all phases.

Discussion is an important process of analysis and evaluation in PAT. It is done after each session and also after the session when the therapist would like to say goodbye to the client. However it is not done in a traditional manner where one asks what was wrong and what is not to be done or repeated. The three issues of discussion are important here to ask before wrapping up: "what was the best?", "you know your dream and lets discuss the first few steps that you will take in the direction of achieving your dreams", "in the next few days (before the second appointment) lets decide about the exact things that you will be doing".

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Before saying goodbye reassure the subject about his capabilities and strengths (which the therapist has gathered in the discovery and dream phase) which are extremely important in reaching the affirmative goal.

In every next session explore the impact of the previous session, the frequency of use of image of happiness, carrying out the representative action and behaviour, the commitments etc. In every session the client should be enabled to have more concrete and clear visualization of implementation of the dream. Also the therapist takes the client gradually step by step forward in dream implementation as in one session you take the client only as much forward as the client can take it. It should gradually become an effortless exercise for the client. In every repeat session the emotional glue has to be added to the visualization phase. Secondly after every visualization the client should be motivated to pick up more commitments to make and ensure that s/he carries out those commitments. Discussions, public commitments (before friends and relatives), appreciation, celebration are essential parts of therapeutic process and the therapist should remember to use them as frequently as is realistic and possible.

Stages iii and iv are repeated but often with different objectives and in reference to the said affirmative topic decided every day. If the affirmative topic is very different from the first one then all stages of DESERT phase have to be followed.

To conclude it can be said that the aim of all therapies is to help client adopt adaptive thought processes and actions which will help in achieving the identified objectives of the therapy. PAT has the same aim only that the outcome is faster and better as a number of steps are reduced. The traditional approach is to identify the problems and then investigate the genesis of the problem, sometimes in childhood, sometimes adulthood, sometimes at conscious level and sometimes at unconscious level. The next step is to release complexes, frustrations etc with an aim to fix the problem. The investigative process often roots you in the problem and then it requires a lot of effort and time to bring the client out of that rooting and give a new positive direction. Sometimes the pursuit of identifying the causes of the problem and unpacking the repressed material is very dangerous and threatening. Also a lot of times resolving the problem is not what is actually aimed at. For example in a cases of marital conflict the husband and wife blamed each other for being very aggressive and argumentative and claimed repeatedly that the partner should stop shouting and fighting. In traditional therapies a lot of time goes in exploring the incidents of fighting and the issues on which they argued and beat each other. Then the therapist tries to solve the issues on which they fight. In PAT when the couple was asked to reach the affirmative topic they said “my wife should understand me and develop a bond with my mother”, wife said “my husband should respect me and understand my situations”. On exploring the most memorable moments of their lives, the enjoyable stories of their lives it came out that husband enjoyed sex and wished to have it more frequently and for that he looked for greater cooperation of his wife and wanted to have another child “my wife should cooperate with me in sex and have

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one more child". In fact the wife had gone through with a recent abortion without the consent of the husband. The therapist then worked on their sexual compatibility and making them plan next child birth. This stopped frequent fights between them and a better understanding and also led to an acceptance and bonding between wife and his mother.

Why Does PAT Works?

PAT is based on power of belief system, power of positive processes combined with power of visualization. During the CREAM phase since the client is made to recollect the positive experiences of relationships, the best events and happenings of life in relation to the affirmative topic, the mood of the client changes from pensive, depressed, helplessness to feelings of goodness, optimism and a sense of achievement. Appreciating the client in this stage for her/his achievements, relationships etc. help the counselor to connect very easily and motivate the client to talk more about the positive stories of life. It also makes the client feel that everything is not as wrong as s/he used to think. The client usually generalizes her/his negative thought process to all situations in life and comes for therapy with very low self esteem and a sense of learned helplessness. PAT has a Pygmalion effect i.e., you get what you expect. It works in every circumstance and everywhere without the threat of being judgmental and critical.

PAT helps the repressed material to be replaced without unpacking it. Another major advantage of the process is that the process itself is motivating and therapeutic in nature. The process of change starts during the interviewing phase itself. Statement of the issue as an affirmative topic is insightful. PAT is search for solutions that already exist, or have worked in the past, amplify what is working, focus on life giving forces, put emotional glue to it, exaggerate the glue of positive emotions so that life giving forces becomes a part of the emotional memory and are retained. Help the client visualize the goal being implemented and seeing with clarity its own role and impact of achieving the goal on oneself and one's social, psychological and physical environment. Traditional approach is about "what problems are you having" while PAT is about "planning and taking action on the basis of "What is working well around oneself".

PAT is based on a complex philosophy that engages the entire system in an inquiry on "what works" and "why it works well". Common themes are then discovered from the data and analyzed for "what could be and what will be". The future is envisioned from the past, a past of positive memories, a past remembered with what worked. The entire system maintains the best of the past by discovering what it is and stretching it into future possibilities. In traditional system the focus is "what was not working" in the past. The moment you talk about weaknesses and problems one feels intimidated by "what is not working" hampering the flow of thought process which may otherwise lead you to innovations and solutions.

PAT works because it relies on the belief that people are capable of thinking, changing, creating wealth of wisdom and resources. People project their best if they feel respected, valued and

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cared. They want to do well in the eyes of those who they care and respect. People create their identities and knowledge in relation to the therapist. They are curious and love to tell stories and listen to stories. They express their values, beliefs and wisdom in stories. Hence PAT enables clients to think and understand what is doable, help them to narrow down their area of focus and clarify for themselves the goals they wish to achieve and they can achieve, develop beliefs of self worth and a perception of possibilities and opportunities before them. All this helps them to evolve into more confident persons with higher self esteem which itself is therapeutic and helps the client to find solutions. Sometimes, rather often, they need not find solutions for problems rather focus on goals ahead which may or may not relate to the problems with which they came with. The client focuses and makes efforts to achieving what s/he wishes to achieve. The moment the client gets success in the areas in which s/he makes effort and succeeds, it gives a sense of pleasure, a sense of self worth and a lot of problems with which s/he had come initially are either no more significant, or resolved automatically.

An adolescent comes with a problem of not being able to concentrate on the study of physics. When asked to identify the goal it is “getting famous and doing well in the life” when asked to visualize the client visualizes oneself entertaining audience by playing violin and adding a sense of humor to it by funny mannerisms and few jokes in between. In the process of therapy the client clearly sees what s/he wants to ultimately achieve, make commitments and starts carrying out commitments, starts learning violin, starts playing it in college shows etc. Gradually the client is able to study physics as well to the extent that s/he manages to get decent marks. PAT generates positive thought process and the ultimate result is inspiring, constructive and motivating.

A lot more work needs to be done on this therapy. This therapy has been found very useful with people under stress, conflict and confusion about future, drug addicts, marital relationship problems, communication issues with children etc.

PAT is not just a therapy but should actually be adopted as a lifestyle. Teachers, parents and spouses should be trained to use AI and PAT in their daily life communication to understand what people are worthy of, what are the unique life giving forces for them, how to motivate them and give them joy and happiness as well. It strengthens a system’s capacity to appraise, anticipate, and enhance positive potential.

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