

## Intro SST 2 Transcript

BELLACK: Skills training is really designed for a broad range of people with problems in social role functioning. It's an intervention that can be used with very high-functioning folks that have difficulty, let's say, in public speaking or in romantic kind of involvements.

MAN: But a lot of times, you know, I feel that, you know, I'm...wanting to ask a question.

BELLACK: It can also be used for people with very serious mental illness who have difficulty just basically starting conversations and basically expressing satisfaction or dissatisfaction to other people.

BECKY: Garry! All right, Garry, so...

GARRY: Uh-huh. Okay.

WOMAN: So pretend that I'm Mr. Ellis. Just sort of use your imagination.

BECKY: Let's go ahead and start. Go!

GARRY: Uh... We'd take a pair of pajama pants...

BELLACK: So these are folks that have a fundamental difficulty with core social skills -- the ability to start and maintain conversations to achieve their needs or their goals in social interactions.

You know, it's remarkable how much of it is common sense. But it's common sense that clinicians have not typically thought to apply.

Most clinicians don't really learn effective skills for dealing with seriously ill populations when they're in school. They learn theories, they learn models, they learn how to do interventions that really aren't particularly practical or effective. And they have a mindset that talking about things is the solution to solving problems. If we can talk about it, if we get them to understand, if we can produce insight, people will behave differently. And in point of fact, that's not the way we learn and that's not the way we usually change our behavior.

And again, I like to think in terms of simple metaphors or analogies. If you want to learn to play the piano and you come to a piano teacher, and the piano teacher's approach is to talk to you about piano theory -- "What do you think about Mozart? Or how do you like Beethoven compared to Mozart? What do you think about C key instead of G key?" -- you're not going to learn anything very useful.

What you need to do is you need to have the piano teacher show you where to put your hands, to give you instructions on how to play the music, have you practice something very simple so you can begin to have success, give you positive feedback, give you corrective suggestions for how to do it better, and have you practice some more. That's the way people learn. That's the way you develop skills, and that's the way we need to think about working with our seriously ill populations. Not just to talk to them about their attitudes and their feelings and their needs and interests.

That might be useful. I don't want to suggest that that's never useful, but you need to understand, what is it that you want to accomplish? If you want people to be able to start conversations better, you need to make sure that they have the skills that they need to start a conversation.

They need to know, when is it appropriate to start a conversation? They need to know what words to use to start a conversation.

KATE: Hi, Becky.

BECKY: Hi, Kate.

BELLACK: They need to know some fundamental social rules of the road, what kinds of things to talk about with somebody when you're just starting a conversation.