Volume XX
No. 1
FALL 2000

International Journal of Reality Therapy

Sponsored and published semi-annually by Northeastern University
The William Glasser Institute

President & Founder
William Glasser, M.D.

Administrator
Linda Harshman
22024 Lassen Street, #118
Chatsworth, California 91311
1-818-700-8000
FAX 818-700-0555
1-800-899-0688

The William Glasser Institute-Australia

Administrator
Lynne Pearce
P.O. Box 62
Toowoon Bay NSW
Australia 2261
(043)335525
FAX 011-612-4333-4382

The William Glasser Institute-Ireland

Chairperson
Brian Lennon
6 Red Island
Skerries
Republic of Ireland
011-849-9106
FAX 011-353-1-849-2461

The Reality Therapy Association in Japan

Contact Person
Masaki Kakitani
2205-23
Oiso-Machi
Kanagawa 255
Japan
0463-33-8819
FAX 0463-61-2434

The William Glasser Institute-New Zealand

Administrator
Penny Woollams
7 Cascade Avenue
Waiatarua
Auckland, New Zealand
64-9-814-9600
FAX 64-9-8149600

KART: Korea Association for Reality Therapy

Chairperson
Rose-Inza Kim
C.P.O. Box 1142
Seoul, Korea
822-335-0971/0972
FAX 822-335-0609

Canadian Association for Reality Therapy

President
Jean Suffield
530 Des Chenes
Beloeil, Quebec
J3G 2H8
Canada
514-446-5671
FAX 514-446-5908

Association for Reality Therapy-Singapore

President
Irene Lio
c/o Boys' Town
622 Upper Bukit Timah Rd.
Singapore 678117
769-1618
FAX 762-7846

Reality Therapy Association-United Kingdom

Contact Person
John Brickell
Green House
43 George St.
Leighton Buzzard (BEDS)
England LU78JX

Reality Therapy Association-Israel

Contact Person
Sara Weisler
c/o Educ. Horizons-Israel College
Levanon 26, Tel Aviv
Israel
011-972-3-640-1111
FAX 011-972-3-640-1122

Croatian Association for Reality Therapy

President
Dubravka Stijacic
Kuslanova 59a
10.000 Zagreb
Croatia

Reality Therapy Association - Slovenia

President
Bojana Gobbo
Morova 29
6310 Izola
Slovenia
386 666 2706
FAX 386 6674 7045
<table>
<thead>
<tr>
<th>Editor/Author</th>
<th>Article Title</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>Larry Litwack</td>
<td>Editor's Comments</td>
<td>3</td>
</tr>
<tr>
<td>Stanley E. Wigle, Pamela Sandoval</td>
<td>Change and Challenges in a School of Education</td>
<td>4</td>
</tr>
<tr>
<td></td>
<td>Choice Theory as an Effective Leadership Paradigm</td>
<td>4</td>
</tr>
<tr>
<td>Terry Bell</td>
<td>Lead Management and Parenting</td>
<td>10</td>
</tr>
<tr>
<td>Elijah Mickel, Mopelola A. Adegoke</td>
<td>Family Therapy in Transition: Choice Theory and Clothing</td>
<td>13</td>
</tr>
<tr>
<td>William Sanchez, Dawna M. Thomas</td>
<td>Quality World and Capeverdeans: Viewing Basic Needs Through a Cultural/Historical Lens</td>
<td>17</td>
</tr>
<tr>
<td>Brent G. Dennis</td>
<td>Mitigation in Capital Murder Cases: War of the Quality Worlds</td>
<td>22</td>
</tr>
<tr>
<td>Shelley L. Parson</td>
<td>Creating a Quality School Atmosphere in a Post-Secondary Study Skills Class</td>
<td>27</td>
</tr>
<tr>
<td>Constance M. Wittek</td>
<td>Helping Children Make Choices for Life: Glasser’s Choice Theory at Work in a Third Grade Classroom</td>
<td>30</td>
</tr>
<tr>
<td>Karen Mottarella</td>
<td>Interviewing for Adolescent Substance Abuse Using the Reality Therapy Orientation</td>
<td>34</td>
</tr>
<tr>
<td>Thomas E. Bratter</td>
<td>Book Review: P.R. Breggin Talking Back To Ritalin</td>
<td>36</td>
</tr>
<tr>
<td>Brian Lennon</td>
<td>From Reality Therapy to Reality Therapy in Action</td>
<td>41</td>
</tr>
<tr>
<td>Neil Davies</td>
<td>Psychology, Choice Theory and the Classroom</td>
<td>47</td>
</tr>
<tr>
<td>Kim Rebane</td>
<td>Promoting Resiliency in Education through Choice Theory and Quality Schools</td>
<td>51</td>
</tr>
<tr>
<td>Tyson Jones</td>
<td>CT/RT: Challenging the Ancient Paradigm Of Coercion</td>
<td>60</td>
</tr>
</tbody>
</table>
The International Journal of Reality Therapy is directed to concepts of internal control psychology, with particular emphasis on research, theory, development, or special descriptions of the successful application of choice theory and reality therapy principles in field setting.

The International Journal of Reality Therapy is published semiannually in Fall and Spring. ISSN: 1099-7717.

Material published in the Journal reflects the views of the authors, and does not necessarily represent the official position of, or endorsement by, the William Glasser Institute. The accuracy of material published in the Journal is the responsibility of the authors.

Subscriptions: $14.00 for one year or $25.00 for two years. (U.S. currency) Single copies, $7.00 per issue. Send payment order to the editor. Back issues Vol. 1-8, $3.00 per issue. Vol. 9-14, $4.00 per issue, Vol. 15-19, $5.00 per issue.

Permissions: Copyright held by the International Journal of Reality Therapy. No part of any article appearing in this issue may be used or reproduced in any manner whatsoever without written permission of the editor - except in the case of brief quotations embodied in the article or review.
Editor’s Comments
Larry Litwack

This issue marks the start of the twentieth year of publication for the Journal. The contents of the issue nicely represent the diversity of content, author, and the international nature of our readers and contributors. The articles range from organizational change to individual change, from historical perspective to current practice, and include material from both schools and colleges. Reflecting our international membership, the last five articles come from members of international groups in Ireland, England, Canada, and Australia. It is my hope that we will have a steady stream of contributions from members of international groups.

On a more personal note, I would like to note the omission from the editorial board of Larry Palmatier. For those who may not be aware, Larry recently died in his sleep. A long time associate of Bill Glasser and a senior faculty member of the Institute, Larry has been a member of the editorial board of the Journal for many of the nineteen years of publication. A prolific author in his own right, Larry was a frequent contributor to the Journal and an insightful reviewer of submitted articles. Larry’s death comes as a major loss to the University of San Francisco (his academic home), to the Institute, to his current and former students, and to all who knew him personally and/or professionally. For me, I feel the loss of someone who constantly supported my efforts with the Journal, and who could always be counted on for careful, rational thoughts and actions.

On a financial note, since the initiation of the Journal, I have constantly striven to keep the cost low so that issues could receive the widest possible distribution. The Journal is financed solely through the sale of copies - it receives no financial support from any other source. For the first eight years of publication, the Journal price was set at $3 an issue. The next five years, the Journal was available at $4 an issue, and since Fall 1995 has been $5 an issue. This price was the same for United States and international subscribers, and was intended to cover both printing and mailing costs. In both areas - printing and mailing (especially internationally) - costs have risen. Therefore, I have no alternative but to increase the price of the Journal effective with the Spring 2001 issue.

Therefore, the new price schedule will be as follows:

1) Individual subscriptions will be $14 per year or $25 for two years.
2) Individual copies will be available for $7 each.
3) For copies provided to members of the William Glasser Institute, William Glasser Institute-Australia, or the International Association of Applied Control Theory (each of these associations provide a set of mailing labels of its members and is billed directly for the number of issues mailed), the cost will be $6 per issue.
4) For members of any other group, nationally or internationally, the same policy will be available.

If there are any questions about publication or costs, please let me know.
ABSTRACT

The case study presented in this paper describes the application of Choice Theory in a school of education at a small mid-western university. As it relates to both individuals and groups within a given organization, it illustrates the use of Choice Theory as an effective leadership paradigm.

Change

Change is a constant factor in our environment. While change can be positive and welcomed (eustress), it can also be perceived as very threatening (distress) (Selye, 1975). As distress, change can represent the end of comfort and predictability, and leave in its wake painful deficits in the need areas of security, belonging, and even power. To control for change, people often choose a wide range of ineffective behaviors like anxieting, acting out, giving up, criticizing and blaming, or any of a number of other like behaviors. Such behaviors tend to be ineffective because they do not resolve the threats brought by change, and because such behaviors are themselves sources of frustration and pain (Glasser, 1994; Karrass & Glasser, 1980).

Institutions, like the people within them, are also constantly beset by change. Like the people within them, institutions also often struggle with change. Universities, and the schools of education (SOE's) within them, are examples of institutions which are beset by and which struggle with change. Changes such as performance-based assessment (Banta, 1996; Banta, Lund, Black & Oblender, 1996; Wiggins, 1993; Wigle & White, 1998), enhancing diversity (Banks & Banks, 1993), incorporating technology (Bitter & Pierson, 1999), and program evaluation (Jordan, 1999) seem to be especially troublesome. Such changes become even more threatening when they are imbedded into the requirements of accrediting agencies such as the National Council for Accreditation of Teacher Education (NCATE). Many states have formed partnerships with NCATE, and the SOE's in such states must meet the accreditation standards of this agency in order to be allowed to prepare educational professionals. NCATE standards are rigorous, especially in the areas of assessment, diversity, technology, and program assessment (NCATE, 2000). If a SOE in a partnership state does not incorporate effective responses to these areas into its program, if faces the real possibility of being closed by its state's Department of Education.

As SOE's struggle with change, leadership within them becomes ever more critical. Without effective leadership, SOE's often lose their focus, their cohesion, and their ability to adapt to changing needs. Without effective leadership, when challenges to their integrity develop, SOE's often become crisis-driven. Such a development results in facile, shallow solutions rather than authentic, deep-structured, and systemic changes that are called for (Goodlad, 1999; Quinn, 1996). For leadership to be successful in helping institutions adapt effectively to change, change cannot be approached in a random fashion. Rather, leaders must adopt a paradigm that will enable them to be consistent in their presence and in the quality of that presence. There are many paradigms that might be adopted by a leader as that individual is called upon to help a SOE respond effectively to change and the challenges it brings. One such paradigm that has been used to successfully work with a troubled SOE is Choice Theory (Glasser, 1998).

This article describes a case study that illustrates the application of Choice Theory by the leadership in a SOE at a small university in the mid-west. This case study will illustrate how Glasser's theoretical perspective provided the means by which this SOE dealt successfully with the many changes and challenges it was facing.

Challenges

In the spring of 1995, the Dean of the SOE at Mid-Western State University (not its real name) stepped down due to pressure from the university administration and his own health reasons. He had practiced crisis management and special favors were provided behind closed doors. This quasi-political negotiation is described by Bergquist (1992) as typical of collegial cultures in higher education. He generally wanted faculty to be happy, but also practiced favoritism based on loyalty. The former is a statement he agreed to when one of the authors suggested it to him. The SOE had failed the graduate portion of the NCATE accreditation in 1992 and was again reviewed in 1994. At that time the SOE passed the graduate portion. However, a term this dean used to describe meeting accreditation standards was to “finesse” our way through. There was little serious effort to engage in program or student assessment except to meet the minimal, more easily evident, standards.

An interim Dean was appointed for the academic year, 1995-1996. The interim Dean was a full professor who was highly respected for his intellectual rigor. However, he was also seen by a number of the faculty in the SOE as being unapproachable and authoritarian. In addition, he appointed an Assistant Dean who did not have the support of many of the faculty members in the SOE, and who was also perceived to be quite authoritarian. They meant to resolve some problems that were evident in the Student Services Office within the SOE, but used heavy-handed means and were accused of harassment and failure to pursue due process by members of that office.

Events did not go well in the SOE during the 1995-1996 academic year. There were many altercations between the tenured faculty and the Dean and Assistant Dean. The tenured faculty came to perceive the Dean and the Assistant Dean as not being fair, open, or effective leaders, and an atmosphere of distrust came to pervade the SOE. Tenured faculty and
other personnel were perceived to support one or the other adversaries, whether they did or not. Within such an environment, mutual misunderstandings quickly resulted in numerous altercations between both faculty members and between the faculty and the Dean. The unrest and emotional turbulence that resulted from these altercations eventually led to a letter of no confidence in the Dean being written and signed by all the remaining tenured faculty members in the SOE and forwarded to the Chancellor of Mid-Western State. In response to these events, the interim Dean and his Assistant Dean stepped down from their posts in the spring of 1996.

Because of the inability of SOE faculty to come to agreement on any of the issues facing the school, the university administration installed another interim Dean in the spring of 1996. This interim Dean was an individual who was not a member of the faculty in the SOE, and who had no academic preparation or experiential background in Professional Education. The faculty was very unhappy with this choice, but the Chancellor did not allow for discussion of this decision. This second interim dean provided little leadership. Prior to an accreditation visit in 1997, because of the new interim Dean’s lack of relevant experience, rather superficial cosmetic changes were made to prepare the SOE to meet the demands of its accreditors. In spite of the upcoming NCATE visit, he provided for only 1 faculty meeting per month, provided little direction in those meetings, and asked a newly-tenured faculty member to create an exhibits room in his spare time with no additional clerical help. The unrest and turbulence within the SOE continued and an adversarial climate among the faculty became pervasive. There was great disunity and infighting among the faculty and little substantive work was done.

In the fall of 1997, when the SOE at Mid-Western State was scheduled to undergo an accreditation review, it was disastrous. Mid-Western State University is located in a state that has entered into a partnership with NCATE. Because of that, the review team that visited the campus consisted of individuals from the state’s Department of Education and individuals acting for NCATE. At the end of the accreditation visit in 1997, it was found that the SOE did not meet a single one of NCATE’s 20 standards. Worse, the fighting within the SOE and the adversarial climate among the faculty were clearly perceived by the accreditation team. The SOE was placed on probation and was given two years to correct its deficiencies. Another accreditation review was scheduled at the end of that two-year period. It was made clear to the SOE that if it did not meet the expected standards at that time, it would be closed by the state Department of Education.

The SOE’s accreditation debacle quickly became public knowledge throughout the rest of the university. This public embarrassment, coupled with the continuing internal disaffection and turmoil, resulted in the collapse of faculty morale within the SOE. It was within this context that in the spring of 1999, after three years of failed searches, the SOE finally hired a permanent Dean.

The Response

In January, 1999, the new permanent Dean of the SOE began his work with the faculty. The new Dean brought with him a great deal of experience with accreditation, especially with the standards and procedures of NCATE accreditation. As a professional who was Reality Therapy certified, he also brought with him an understanding and a belief in Choice Theory as an effective leadership paradigm. Lastly, he understood that to help the SOE move toward success was going to require discipline, courage, and motivation on the part of all of its members. It was also going to require the application of Choice Theory through the processes of Reality Therapy.

Behavior Choices

When people perceive themselves to be trapped by circumstances and powerless to do anything effective, they experience extreme deficits in the basic need area of power (Glasser, 1998). In the case of the faculty in the SOE at Mid-Western State, because of the intimidating and adversarial climate within the school, they also experienced great deficits in the basic need areas of security and belonging. To control for these deficits, many of the faculty of the SOE chose the withdrawal behavior of staying busy with insignificant issues, or everyday tasks. Several described “hiding in their offices” to avoid their colleagues. This allowed them to ignore the threats to their needs or for some to even to deny that the threats existed. For example, some faculty wanted the unit to fail, either to “wake up their colleagues” or to demonstrate how “incompetent their colleagues were.” Others were convinced that we could still “finesse” our way through. However, the temporary relief that the faculty's withdrawal behavior may have brought them, was purchased at a high price. To avoid the difficulties facing the SOE by choosing to withdraw from them did nothing to resolve them. Further, absent more effective behavioral choices, the difficulties simply became more serious.

As the seriousness of the difficulties increased, some faculty made the further ineffective choices of feeling behaviors such as hopelessness, impotence, and frustration. Other faculty members chose to engage in victim behavior. As victims, individuals choose to believe that there is nothing they can do to exercise control over the difficulties they face and that their salvation can only come from the actions of someone else. Contributing to such victim behavior is the propensity for people to see others as the cause of their difficulties and themselves as unwilling bystanders who are caught in the destructive environment that surrounds them (Glasser, 1984, 1985). This blame placing was rampant. Each side assured themselves that everything would be fine if the other side would just play by the rules, or act with principle.

As enough faculty members made such choices, the environment in the SOE became a self-fulfilling context. In that context, the individual members of the school perceived their ineffective choices to be prudent attempts to protect themselves from the difficult situation in which they knew themselves to be. The environment also became a context in which many faculty members came to share the common perception that if only other people would change, the situation could be salvaged and the perceived challenge could be effectively dealt with.

At a certain point in such contexts, the external challenges that face people fade into the background and the perceived issue becomes the behavior of others. We want other people to change and we see no problem with our own behavior. We want other people to work harder, to be more compliant, more
collegial, and collaborative. Such blaming behavior and avoidance of personal responsibility are choices that are often made because they tend to match people’s Quality World pictures more closely than other, more self-referenced, situational analysis (Powers, 1973). In such instances, people often attempt to control for such perceptions by telling others what their faults are and how they should change in order to correct those faults. At Mid-Western, this occurred in public meetings with the offending party present, in hallway conversations, and behind closed doors with the offending party out of earshot. In most cases, such behavior fails because others have little interest in meeting our needs, especially when they are experiencing deficits in their own basic need areas of safety and security (Glasser, 1994).

When their attempts to make their colleagues behave as they thought they should by criticizing them failed, various faculty members of the SOE turned to coercion. However, coercion, just like criticism, is ineffective. It may result in short-term behavior change, but long-term relationships tend to be damaged. Since positive relationships are critical to the success of any collective initiatives, the long-term effect of coercion tends to be the failure of such initiatives (Glasser, 1994; Karrass & Glasser, 1980).

As the inability of the SOE to resolve the challenges it faced continued, the faculty tended to turn to the same ineffective behaviors that had contributed to their inability to be successful as a unit. Many of the faculty became rigid and, instead of seeking creative solutions to their difficulties, they increased their commitment to their habitual choices of ineffective behavior. The main faculty adversaries continued to spend much time trying to justify and garner support for their prior actions. Although all the characters wanted to be good people and believed themselves to be a victim of the other, the continued attempts to justify behavior led to significantly reduced civility among the members of the SOE. As the performance and productivity of the faculty fell, as their reliance on criticism and coercion continued, the difficulties the SOE faced became ever greater. To break out of this destructive cycle of choices was going to require the faculty to be willing to risk making new choices.

University administration recognized that the unit needed someone from outside of the SOE. After two failed searches, a new dean was finally identified. He brought extensive knowledge of accreditation and assessment, and he brought a commitment to Choice Theory. He found faculty were tired of the lack of community and ready to make a commitment to change. This change was made easier by the retirement of the first dean and a move by the interim dean to a sister campus.

**What do you want?**

It is often difficult to give up old behavior, even when it is ineffective, because it is familiar and somehow comfortable. In order for people to risk new behavior, they must first become convinced that what they are doing to meet their needs will not work (Glasser, 1981, 1984, 1985). To help the faculty move to that point, the new Dean began by first asking them what it was they wanted.

In a series of meetings in January and March, 1999 that were facilitated by the new Dean, the faculty were asked to think about and discuss with each other what they wanted as a group of individuals who were engaged in the same enterprise. They were asked what they wanted in terms of their upcoming accreditation visit. They were also asked what they wanted in terms of the outcomes of their collective effort. Specifically, that meant thinking and talking about what they wanted the students of the SOE to know and be able to do upon graduation.

This conversation proceeded over several sessions. All of the faculty wanted very much to be successful in the upcoming accreditation visit. Additionally, it became clear that, despite the tentative differences between faculty members, there was a good deal of unanimity in the answers to the question concerning the outcomes of their collective efforts. These answers were codified in two documents called conceptual frameworks. These conceptual frameworks were a statement of the knowledges and skills that the SOE students were to have before they graduated from any program in the SOE. These statements were adopted unanimously by the faculty and came to be the guiding set of beliefs that undergirded all of the SOE’s activities over the following 15 months. The expressed desire to succeed with accreditation and the adoption of their new conceptual frameworks were the faculty’s collective answers to the question “what do you want?”

**What are you doing?**

Having helped the faculty to agree on a clear set of goal pictures (wants), the conversation then proceeded to an examination of the behaviors that the faculty as a group had been choosing. This examination quickly resulted in a rough, but thorough inventory of the ineffective behavior that the faculty had been choosing to control for the changes it had experienced and the challenges it now faced. This examination also resulted in the faculty concluding that such behavior did not work, and would not work in helping them achieve what they agreed that they now wanted as a group.

While the summary statement in the preceding paragraph is short, the process of helping the faculty truthfully examine and evaluate the effectiveness of their chosen behaviors was not. As the facilitator of this process, it was necessary for the Dean to spend some time building trust and rapport between himself and his colleagues, and between and among the faculty themselves. A great deal of pain had been experienced in the SOE prior to this stage in this process, and the relationships between and among the faculty had been significantly strained. It took a significant amount of time and effort on the part of the Dean to convince the faculty that they could trust him. Perhaps more importantly, the Dean also spent a significant amount of time and effort to help the faculty come to believe that they could trust each other.

Without spending time to begin to rebuild positive relationships between and among the faculty, the SOE would not have succeeded in its goals. The deficits that faculty felt in the basic need areas of power, and worth and recognition, had to be addressed. The faculty had to perceive that they had the competence and the ability to do what must be done to ensure the SOE’s success. They also had to perceive that their colleagues also believed in their abilities enough to entrust them with important tasks. Lastly, the faculty had to perceive that they had something important to contribute to the SOE’s success and that their colleagues would listen to their ideas.
and take them seriously. Stronger and more positive relationships was the tool that the faculty had to create in order to accomplish these goals (Glasser, 1998).

Make a plan

Over time, our reliance on old behavioral choices may eventually lead us to great pain and frustration. When the pain of unmet needs becomes great enough, we may finally conclude that our old behaviors will not work to meet our needs. It will be at that point that we may become open to considering new behavior that might allow us to effectively address our need deficits (Glasser, 1981, 1984, 1985, 1998). It was at that point that the faculty in the SOE were ready to make a plan to achieve their common goals.

In the early stages of the planning process, the Dean spent a good deal of time helping the faculty perceive that they had the knowledge, skills and ability to reach their goals. The message that was shared was consistently one of confidence in and certainty of the SOE’s success. At the same time, the message was also truthful. The faculty was told that the path to their goals was going to be challenging. They were helped to see that some tough decisions were going to have to be made on short timelines and with no guarantee of their outcomes. There were going to be many difficult situations, lots of heated discussions, and an almost endless number of meetings. However, they were also helped to see that all faculty members would experience sacrifice and suffering equally throughout the process before it was completed.

The Dean and the faculty created a set of new committees to augment the SOE’s existing governance structure. An agenda of tasks was identified and a timeline and a cycle of meetings were agreed upon. On the basis of this work, the faculty then began to address the challenging issues contained in its agenda.

Facilitative leadership

Leadership during the planning and the implementation of the structures, processes, and policies that enabled the SOE to achieve its goals had to be consistent in both its presence and the quality of that presence. The Dean was the acknowledged leader of the SOE. As the acknowledged leader, the Dean had to provide effective leadership. Key to his effectiveness was his ability to undertake both the transactional roles of leaders (task-setting, problem-solving, follow-up responsibilities, and integrating projects and perspectives) as well as the transformational roles of leaders (focus on purpose and direction, goals setting, motivation, and creating a sense of excitement) (Hart & Quinn, 1993).

By assuming these roles, the Dean became a model of new attitudes and new behaviors that were needed to replace older and less effective attitudes and behaviors among the faculty that had hampered the SOE’s success in the past. During troubled times, people’s anxieties and uncertainty increase and they look for someone who can provide clear direction and purpose. By assuming these roles, the Dean was able to communicate the clear vision, direction, and purpose that were important factors in the faculty’s choosing to adopt the new attitudes and behaviors (Wigle & Manges, 1995).

To help facilitate the acceptance of and commitment by the faculty to the new attitudes, behaviors, and direction of the SOE, the Dean also created a leadership group consisting of both administrators and faculty. This group was large enough to ensure that important faculty leaders were members, and small enough so that it did not become unwieldy. The creation of this group was meant to signal to the whole faculty that a commitment to and an involvement in the process of ensuring the SOE’s success had to be shared by all members of the SOE, both faculty as well as administrators. It was also intended to broaden the impact of the attitudes, behaviors and new directions modeled by the Dean by encouraging the members of this group to adopt and model those attitudes, behaviors, and directions for the rest of the faculty.

As individuals choose to place pictures into and remove pictures from their Quality World, they often observe the behavior of others closely to help determine what might be need meeting and what might not be (Glasser, 1981, 1985). Knowing this, the Dean felt that the greater the demonstrated commitment to new attitudes, behaviors, and direction on the part of the leadership group in the SOE, the greater was the probability that the rest of the faculty members would also adopt those attitudes and behaviors. The Dean also felt that that process would help produce a critical mass of faculty members who would be willing to risk new attitudes and behaviors. By facilitating the formation of this critical mass, the SOE was able to successfully overcome the inertia of its previous failure behaviors and move toward its goals. Faculty willingly agreed to meet at least weekly, including all-day Friday during the summer, with many committee meetings in between. All members of the Education Cabinet worked on the Document Center. All faculty willingly revised their syllabi and coursework to meet new standards, and new advising and assessment procedures were put into place.

Assumption of common perceptions

The more reference perceptions that are shared in common by the members of a group, the more cohesive that group may become and the more effective will be its common efforts (Quinn, 1996). Throughout the planning process and throughout the 15-month period in which the faculty worked to prepare for its accreditation visit, there were several perceptions that the Dean worked hard to ensure that they become more or less commonly shared among the faculty. Specifically, the Dean wanted the faculty to perceive that what they were being asked to do was meaningful and important to the SOE’s success. Although many of the faculty knew and understood this, they needed someone with leadership to provide solidarity so that all faculty could move forward. Further, the Dean wanted the faculty to perceive success as not just a short-term phenomenon of simply doing whatever must be done to be accredited – the old “finesse” model. Rather, he wanted them to perceive success as accomplishing that which would enable the SOE to achieve its long-term mission. In addition, the faculty needed to perceive that they understood the SOE’s long-term mission so that they knew where the SOE was going and so that they knew how what they were being asked to do was related to that goal. The dean wanted each faculty member to perceive him/herself as having access to all of the information that other faculty members had access to and as being totally informed about issues related to the SOE’s efforts. Lastly, the Dean wanted the faculty to perceive that they had the competence and the ability to do what they were being asked to do, and that they
were free to determine how to accomplish the tasks that they were assigned.

These commonly held perceptions were important to the group’s sense of solidarity in the face of a serious challenge. Throughout a 15-month period of time the faculty was asked to work extremely hard to prepare for an accreditation visit, while at the same time continuing to meet all of their regularly assigned responsibilities. The more the faculty perceived that everyone was participating, and that everyone was working together toward a common goal, the greater the probability became that the faculty would choose to maintain its uncommon effort over an extended time (Spreitzer, 1995, 1996).

The Result

Over 15 months, the SOE made enormous progress. The adversarial atmosphere among the faculty was replaced with one of mutual respect and collaborative behaviors. The faculty initiated significant, meaningful, and lasting changes that enabled their programs to truly prepare educational professionals for the 21st century. Not incidentally, in an accreditation visit in April, 2000, the SOE was found to have met all 20 NCATE standards.

All the SOE’s successes were the result of sustained hard work. As promised by the Dean, the path to the faculty’s goals was challenging. Many tough decisions were made on short timelines. Some of those decisions proved to be good ones, and others had to be rethought. There were many difficult situations, lots of heated discussions, and an almost endless number of meetings. However, all of the faculty sacrificed and suffered equally. All of the faculty worked hard, and all of the faculty made important contributions to the common good. While not all of the changes and challenges facing the SOE have been met and resolved, the faculty have learned how to work together in effective ways so that they will be able to continue to be successful. The Dean continues to try to strengthen relationships, to hold the SOE’s common goals before the faculty, to engage every member in the care and maintenance of the SOE, and to be both a transactional and a transformational leader. Lastly, the Dean continues to embrace Choice Theory as his paradigm of leadership.

Conclusion

The case study presented in this paper is a clear example of Choice Theory as it is manifested in the external world. As it relates to both individuals and groups in a given organization, it is also a clear example of how this theory can be a very effective leadership paradigm.

As the faculty in the SOE as Mid-Western State began the journey described in this paper, they were able to change their organizational context so that it became a need fulfilling experience. This required considerable changes in behavior and in the pattern of relationships. Such changes were facilitated when the dean enticed faculty to risk placing new pictures into their Quality Worlds, and to risk new behaviors in an effort to meet those pictures. As this happened with more and more the faculty, they were able to view one another in a new light. The former adversarial atmosphere disappeared and was replaced by one in which collaboration and collegiality were possible.

These changes were initiated by the intervention of a Dean who knew and understood Choice Theory and whose efforts were shaped by the application of that theory through the processes of Reality Therapy. Restoring and strengthening positive relationships among the faculty became an important tool in helping form a faculty consensus around goals that would guide their efforts over a significant period of time. That consensus was then carried forward by involving the entire faculty in planning and implementing changes that were significant and meaningful. New attitudes, new behaviors and new directions were adopted by a significant group of faculty who were given important leadership roles. This facilitated the development of a critical mass of faculty who also adopted new behaviors, new attitudes and new directions. Commonly-held perceptions of the common good were encouraged through leadership that, by being both transactional and transformational, met faculty needs for safety, security, power, and belonging. The result of this approach was the successful achievement of the SOE’s accreditation goals and the increased possibility of future successes for the school.

The Choice Theory principles of freedom of choice and individual responsibility for the results are imbedded throughout this example of leadership paradigm. That this example shows how successful this paradigm can be is both exciting and a source of great hope.

References


---

**Peaceful Parenting**

by Nancy S. Buck, Ph.D.

Now available for order. In Dr. Glasser's forward to her book, he states, "Dr. Buck presents a clear, comprehensive process to help parents develop and maintain the vital relationships necessary for a healthy future for our families and our nation... *Peaceful Parenting* is a desperately needed book addressing the issue of parenting, an area that very much needs a fresh approach.

For ordering information, contact Nancy S. Buck, 66 Power Street, Portsmouth, RI 02871, or visit her website at: www.peacefulparenting.com

---

**Reality Therapy for the 21st Century**

by Robert E. Wubbolding

*NOW AVAILABLE*

- Major Expansion of Procedures: 22 Ways to Self-Evaluate
- Interview with Dr. Glasser
- Cross Cultural Applications
- Summary of Research Studies

Useful for practica, workshops, and other training.

"It contains the most up-to-date material from the historical beginning to the latest practices."
—William Glasser, M.D.

To order, contact: Center for Reality Therapy
7672 Montgomery Road, #383
Cincinnati, OH 45236-4204 U.S.A.
Phone: (513) 561-1911
E-mail: wubsrt@fuse.net
Lead Management and Parenting

Terry Bell

The author is a staff member at the LABBB Collaborative in Lexington, Massachusetts.

ABSTRACT

Reality Therapy offers quick and effective techniques for reducing fearing and acting out behaviors of children who have been removed from their homes and placed in foster care. Overcoming these behaviors is often the vital first step to building a positive relationship with a young person. The article below is an attempt to use an actual experience working with a troubled young girl to shed light on this important topic.

The training and experience in Choice Theory that I have enjoyed has taken place primarily at LABBB Collaborative Programs, based in Lexington, Massachusetts. LABBB serves developmentally challenged students, and other students with a wide range of physical, emotional, and behavioral challenges.

The focus of this article, however, will be based on the experience my wife, Marie, and I have had using Choice Theory principles in our home. We have found Choice Theory/Reality Therapy to be particularly helpful in quickly establishing a safe, non-fearing environment for foster children removed from their own homes and placed in ours. Over the past ten years, my wife and I have cared for many children besides our own, and we have adopted four children with significant mental and physical challenges. We are no longer foster parents because our demanding family consumes all our energy, but we continue to care for an occasional child who is referred to us through various agencies, hospitals, or courts.

By basing itself on the bedrock principle that all motivation and change is internally based, Choice Theory ideas often provide foster children with the first vision of themselves as autonomous human beings, not just convenient punching bags for the adults around them. We found that the principles of Choice Theory complemented our efforts to provide a safe, loving environment for the children in our care because of the power of positive, non-coercive involvement which is at the core of Reality Therapy and therapeutic family care.

An important aspect of our success has been learning to adapt the principles of Lead Management to our work with children coming into our home. Reducing the high level of fear and coercion that these children feel is always the first task. We have learned to only ask things that are clear and understandable. Children in our care must be able to convince themselves that they can accomplish anything we ask of them. And they must see anything we ask them to do as useful and need-satisfying for themselves.

“Shawna”

In the early 90’s, a five year old girl was placed in our home as a foster child. She was very thin and bald, due to a terrible case of ringworm. She was angry and scared, as many foster children are. Shawna (a pseudonym) was still in diapers and she was terrified of dolls. We learned from the Social Workers that Shawna’s mother had tied her to the toilet for long periods of time in an attempt to train her. It was also believed that her mother practiced Voodoo, and that may have been the source of Shawna’s unnatural terror of dolls.

My wife and I believed that Shawna needed to feel safe and comfortable in our home before she would make any progress. We concentrated on providing a positive environment, with complete confidence that Shawna would begin to heal as soon as she felt safe. We therefore decided not to directly address any behavior issues except for violent acting out behaviors which were a safety concern for Shawna and the other children in our family.

This minimalist plan was effective and Shawna began to settle in and make progress as we expected. After a few months, we were informed by Social Workers that they had found a suitable pre-adoptive placement for Shawna with a family that had expressed interest in adopting her. We helped Shawna transition to her new home and we were happy for this positive outcome, because there are many children in State care who never find an adoptive home.

After two years, my wife and I were distressed to learn that Shawna was coming back to us after being sexually abused in her pre-adoptive home. By this time, Shawna was completely out of control. My wife and I were concerned about our ability to help her after she had been abused in a home that we had helped send her to. We expected that Shawna would see us as co-perpetrators with all the other adults who had victimized her.

Total Behaviors

By this time, Shawna had been victimized at least twice by adults entrusted to take care of her. She was at war with the world, and she reorganized her Perceptual System so that her Valuing Filter routinely placed a negative value on new people or ideas coming into her world. This reorganization had left her emotionally paralyzed and isolated.

Her Thinking Behavior was typified by her complete lack of trust in anyone, especially adults. Her Perceived World was filled with negative images of people, things and ideas. Her isolation and lack of any need-fulfilling relationships left her with an extremely poor self-image in her Quality World. Her QW was filled with old pictures (memories and fantasies) that she clung to tenaciously as her only safe place in a world of turmoil that she couldn’t understand. Her clearest QW picture was of her mother, who she was mandated to see on a regular basis. Shawna struggled to maintain her idealized QW picture of her mother, but she could not reconcile it with her memory of abuse at her mother’s hands, and this contributed to her organized angering behaviors.

Shawna’s Feeling Behavior was most clearly revealed as she watched the movie Lion King. Shawna’s whole person,
including her body language, facial expression, muscle tone, respiration, and eye movement, all betrayed her profound feelings of sadness and alienation. Shawna was reaching deep into her Ideal QW to create new pictures to sustain her.

Shawna took her first tentative steps toward developing a positive and need-fulfilling picture, by seeing my wife and myself as her Pumbaa and Timon, who rescued Simba when he was lost in the wilderness. Shawna created this new thinking behavior entirely by herself, and it marked the beginning of substantial progress on her part. Ironically, it was her Lion King fantasies that helped her reconnect with the real world.

She identified closely with Simba, and blamed herself for the separation from her mother, much like Simba blamed himself for the death of his father, Mufasa. Her identification with Lion King was so all-encompassing that she once asked if a Ferris Wheel was the “Circle of Life.” To help her sleep, my wife drew a poster-sized picture of Mufasa with the legend “Keep out, Scar!” Shawna treasured this poster, and took it with her everywhere.

Shawna’s Acting Behavior was often violent, including screaming, hitting, head-banging, and other destructive behaviors. Shawna was still in diapers (age seven!), and regularly engaged in feces smearing, self-soiling and wetting behaviors. When outsiders were present, Shawna jumped into our arms and called us ‘Mom’ and ‘Dad,’ even though we encouraged her to call us by our first names. This behavior was particularly extreme when other children were present, which suggested how desperately she wanted other kids to see her as having a family of her own, just like the picture in her QW.

Shawna’s Perceived World pictures of the adults trying to help her was almost entirely negative. The resulting “pain” signal in her Comparing Place kept her scales chronically out of balance, and she would ‘Go To’ the Organized Behaviors described above as her best attempt to regain control.

Lead Management and Dr. Glasser

Shawna came to us on a regimen of medication to moderate her more violent behavior, and she was continuing to receive intensive counseling from a mental health professional. In addition, various behavior modification techniques had been used to get Shawna to stop soiling herself, with no measurable success. My wife and I were wrestling with how to best help Shawna, when Dr. Glasser visited LABBB and gave a presentation, including remarks on the use of non-coercive discipline. Based on our understanding of Dr. Glasser’s remarks, my wife developed a simple strategy for encouraging Shawna to use the toilet.

We decided that we would forget about nagging, punishing, or bribing Shawna (The three basic Stimulus-Response strategies). Plenty of people had tried this approach and all had failed. At the same time, we felt that Shawna would reject the normal counseling procedure in WDEP. Wants, Doing, Evaluation, Plan), and would “Go To” her raging behavior if we even tried to discuss her soiling behavior with her. We decided to avoid any mention of “the problem” and to just present her with some Perceived World pictures concerning hygiene that we thought Shawna would possibly attach a positive value to. We believed our plan was simple, attainable, measurable, immediate, consistent and client-centered. All that remained was to see if Shawna would commit to it and embrace it as her own.

Our objective was to give Shawna the tools to keep herself clean, trusting that our non-critical support would help her make effective choices. We simply explained to Shawna that she was old enough to mange her own hygiene, and we would give her the tools to take care of herself. If she preferred to wear diapers, that was OK, but we expected her to keep herself clean.

Shawna was puzzled to say the least. And when she inevitably soiled herself, she was apprehensive. We did out best not to react or show disappointing behavior. My wife simply led her to the shower and gave her gloves, wipes, and ‘chux’ to place the soiled diaper on. She calmly showed Shawna how to put gloves on, clean herself up, dispose of the soiled material, and put a fresh diaper on. Then, Shawna was left to go about her business without comment.

Within a week this simple form or non-critical support based on Choice Theory yielded results. Where years of the “carrot and stick” approach, therapy, and medication had produced nothing, Shawna made her own choice to stop soiling herself. She was out of diapers and she rarely soiled herself after that.

Choice Theory and External Control Professionals

The professionals treating Shawna were all highly educated, motivated, caring, people who earnestly wanted to help Shawna. But they met with little success over a period of three years, while my wife and I saw big changes in a week. Why the dramatic difference?

My wife and I have no special qualifications, other than trying hard to learn from our mistakes over the years. Experience has shown us that a committed family can be the most powerful therapeutic environment on earth for a young child. The principles of Choice Theory are perfect in a family setting because they can be used by any competent caregiver. To a practitioner of External Control Psychology, Shawna was “disturbed,” and in need of medication, counseling, and possibly long-term institutional care. To a caregiver using Choice Theory, Shawna’s behavior was not “disturbed,” but was only her best attempt to meet her needs at the time.

Trying New Behaviors

Shawna continued to make progress in our home for the next several months. She was using the toilet regularly, her play had become noticeably less violent, and she was beginning to communicate her wants verbally. Most importantly, Shawna had begun to make connections with the adults and other children around her. Shawna’s highly creative picture of us as her Timon and Pumbaa had unlocked a part of her QW that she previously kept nailed shut to any outsiders.

Shawna did continue to have occasional violent outbursts, however, which made it difficult to maintain a safe environment for her in my home. She would almost always adopt the old “Go To” behaviors after a mandated visit with

International Journal of Reality Therapy • Fall 2000 • Vol. XX, number 1 • 11
The Best Interests of the Child

Often, the most challenging aspect of caring for children in a family setting is maintaining an objective outlook in an intensely personal situation. While all of Shawna's old behaviors and her direct statements to my wife tended to support a continued perspective of adoption for Shawna, none of it could be used at a trial to make her legally free for adoption.

We considered it vitally important that Shawna understand that a child in his care.

Choice Theory provides all the tools necessary to help skilled caregivers convince S-R Professionals to re-frame their pictures in a manner more consistent with the needs of the child. One of the strengths of CT/RT is that is can be expressed in plain English. There is, therefore, a common language to communicate with External Control Professionals. It may not be as precise as the language we use in communicating with other practitioners of Choice Theory, but it serves the purpose.

Many Therapists and Social Workers trained in External Control Psychology accept the idea that destructive behaviors will return unless a child's basic needs are met. The lay caregiver must be as effective in collaborating with Stimulus-Response Professionals as he is working with the child in his care.

Choice Theory has been defined as a system of weight in Massachusetts, like most states. Even if a child clearly describes criminal acts committed against him by a parent, it cannot be used in court unless that statement is witnessed by a competent professional. That means that the lay caregiver must be as effective in collaborating with Stimulus-Response Professionals as he is working with the child in his care.

Choice Theory provides all the tools necessary to help skilled caregivers convince S-R Professionals to re-frame their pictures in a manner more consistent with the needs of the child. One of the strengths of CT/RT is that it can be expressed in plain English. There is, therefore, a common language to communicate with External Control Professionals. It may not be as precise as the language we use in communicating with other practitioners of Choice Theory, but it serves the purpose.

Many Therapists and Social Workers trained in External Control Psychology accept the idea that destructive behaviors will return unless a child's basic needs are met. They also accept the idea that a child/client must feel in control of his/her life. It is only necessary to convince the key team members how a specific plan will help meet those basic needs. Once the discussion revolves around satisfying the child's needs, instead of focusing on the trauma the child has suffered, it becomes much easier to develop effective plans that are acceptable to all.

The Best Interests of the Child

Often, the most challenging aspect of caring for children in a family setting is maintaining an objective outlook in an intensely personal situation. While all of Shawna's old behaviors and her direct statements to my wife tended to support a continued perspective of adoption for Shawna, none of it could be used at a trial to make her legally free for adoption.

It was necessary to advocate for a thorough professional assessment that would stand up in court. After overcoming the usual bureaucratic inertia ("Sorry, we can’t help," "There are no openings at this time," "call an ambulance," etc.), we were finally able to obtain a 30 day hospital assessment for Shawna. The result of this assessment was a professional confirmation of all the behaviors and statements strongly supporting allegations of abuse at the hands of her mother. Unfortunately, the assessment also produced a recommendation that Shawna be treated in a residential program.

Our role necessarily changed, but my wife and I were able to use the good will we had established working with outside professionals to be named a “visiting resource,” with the ability to visit Shawna and keep her in our home weekends. We considered it vitally important that Shawna understand that she was not being abandoned or rejected in any way. Although the situation was not ideal, Shawna was able to maintain the positive QW pictures she was developing, and she was able to form new friendships at the group home.

The search for an appropriate adoptive home continued at a snail’s pace, and Shawna continued to make progress. But it was all cut short when a judge, tiring of the inability of the State to find a permanent placement for Shawna, ordered Shawna returned to her biological mother. In one of the hardest jobs we ever did, my wife and I needed to help Shawna transition back to her biological mother.

Never Give Up!

After an outcome for Shawna that was unexpected and devastating, there were the inevitable feelings of frustration in a system that often fails to meet the needs of children. An understandable behavior of many caregivers is to give up, and wash one's hands of the whole mess. But defending the right of every individual to meet his/her basic human needs is basic to Choice Theory/Reality Therapy. Without a continuing commitment, Choice Theory would be just another sterile academic idea. It is the fact that Choice Theory is a theory of Doing that gives it its real power and resilience.

We know that Shawna was able to be part of a real family, with all its strengths and weaknesses; and to experience how a thriving family thinks, feels, and acts. She was able to develop positive, need-fulfilling QW pictures of herself and others for the first time in her life, and we needed to trust that Shawna would use her newly learned skills effectively. We can seldom predict or control the outcome of our work. But if we base our work on helping others meet their own needs, we will inevitably make a difference in the long run.

“Dad,” Simba asked suddenly, “We’ll always be together, right?”

Mufasa gazed up at the sparkling heavens. “The great kings of the past look down on us from those stars,” he said.

“Whenever you feel alone, remember that those kings will always be there to guide you.”

“And so will I.”

(from Lion King)
Family Therapy in Transition: Choice Theory and Clothing

Elijah Mickel
Mopeolo A. Adegoke

ABSTRACT

The choice to wear selected clothing can reflect an attempt to meet our basic needs. These basic needs are universal, although their behavioral manifestation may be environmentally influenced. The choice of clothing to wear is the result of a thinking behavior manifested into action. The wearing of clothing is an acting behavior. One role of the reality therapist is to gather information, both verbal and non-verbal. Many family therapists, to date, have concentrated on verbal interactions. This article begins the discourse on integrating both verbal and non-verbal communications. As a beginning of the discourse on the inclusion of nonverbal behavior, the authors posit that these behaviors are the observable manifestations of our basic needs. The authors present their perceptions, based upon experience and practice. This article correlated the basic needs with some clothes wearing behaviors.

Family Therapy in Transition: Choice theory and clothing

It is important for family therapists, committed to continuous improvement, to add to their practice frame of reference. Family therapy, as practiced by reality therapists (Mickel, 1990, Mickel and Liddie-Hamilton, 1997, 1998) is a unique practice modality. It is a culturally competent model based upon ancient values and knowledge. Many approaches to family therapy have a history of dependence on pathology. Family therapy, as practiced by reality therapists who use choice theory, can rightly posit that its foundation has always had a strengths perspective. The focus is not to become entangled in symptoms, but is wellness oriented. According to the Programs, policies & procedures manual (1999, p. 2), “Avoids discussing symptoms and complaints as much as possible since these are the ways that counselees choose to deal with non-satisfying relationships.” The focus of this article is to use choice theory’s basic needs to posit possible explanations of clothes wearing behaviors. The word “clothing” here is used to emphasize adornments and enclosures that cover the body, exclusive of body modification. Clothing reflects knowledge and values which are the components of our perceptual system.

A family’s perception of the world is reflected in their choice of clothing. The total environment influences clothing choices. Understanding why some people may choose to wear specific clothing can add to the understanding of the impact of cultures, values, attitudes and personality traits on the total environment. According to Mickel and Liddie-Hamilton (1998, p. 97) “It is impossible to encode without understanding culture. It is impossible to encode without understanding the total environment.”

The foundation of our understanding of non verbal communication is based in our understanding of total behavior and systems theory. The family is a system. The family therapist using reality therapy works for change within a system. A basic tenet of systems theory is communications. According to Mickel (1990), “information input, negative feedback, and the coding process are communicative materials which allow the family to interact with its environment. These are processes that furnish signals to the family about micro and macro environment (internal and external). They further inform the family about its own functioning/choices in relation to the environment. Coding is the general term for the selective filtering mechanism of a system by which it translates incoming information for the family. The family, under the auspices of society’s ethnic and cultural variance, selectively filters its interpretations of the world. (p. 29).” The nonverbal, clothes choosing behaviors are especially influenced by culture and ethnic variance. For example, culture often dictates the type of body adornment or beautification to use. People within the culture recognize and identify with the prescribed body beautification requirements, act or react upon such, based on personality preference.

The choice to wear certain clothing indicates an attempt by people to meet their needs. From the ancient time, clothing has satisfied human desire for protection, belief in adornment and identification, modesty and status. The needs are universal, although their behavioral manifestation may be environmentally influenced. To meet the survival needs, clothing helps prevent harm to the body from weather, from environmental and occupational hazards, and from enemies. Clothing reflects an individual’s feeling behaviors, attitude or morale. Clothing may also reflect positive psychological feelings. Clothes may indicate artistic expression, or creativity, which can attract favorable attention and contribute to feelings of self-esteem. Socially, clothing can indicate whether or not individuals are accepted and or admired in their environment (Wolf, 1998). The way people present themselves may follow the accepted social standard of modesty which varies from culture to culture.

Clothing carries a highly visible message about who a person is or is not. It can also indicate who that person would like to be. It is our best attempt to match the picture in our quality world. We can observe the doing component of total behavior. The clothes wearing behaviors and body language are reflective of other components. The body beautification or adornment, for example, is observable through the physical appearance of individuals. The appearance is prone to different interpretation and behaviors by the audience. Behaviors could be verbal (discourse or talk about the appearance) or a nonverbal gesture such as a lifted eye brow, a smile or frown, approach or withdrawal. One blushes with shame for the shamelessness of the other’s appearance or with embarrassment of one’s own (Stone, 1962).
In most cultures, particularly in the Western culture, males and females of certain classes are expected to present themselves neatly attired, shaven, hair, hands and faces clean and made-up. Similarly, “passing,” a term used to designate the instability of gender identities and the ability to change sexes, even as gender is considered the only characteristic remaining invariant from birth, is used as a facade to meet our psychological needs. “Passing” for instance relies on cross-dressing for the purpose of convincing an unknown audience that one is actually a member of the opposite sex. “Passing” can be an end in itself or it can be a means to an end-sex reassignment (Herrmann, 1991). Clothing is used in “passing” to create an illusion. Therefore, clothing expresses both private and public lives. These lives are interconnected and interdependent. The therapist can begin the treatment process with an understanding that clothes are a form of non verbal behaviors which express both lives.

The therapist should, during the initial interview, begin the discourse on the meaning of clothing as a nonverbal behavior. The authors posit that these behaviors are the outward manifestation of our best attempt to meet our basic needs. The therapist can, with the assistance of the family, learn to properly interpret clothes as visible manifestations of meeting basic needs. The authors present their perceptions, based upon experience and practice. Clothing is in one’s Quality World. The Quality world is that specific place in our memory that is filled with specific clothes which satisfy one or more of the basic needs. It should be noted that people may have different perceptions from the therapist. The only certain method for understanding is to communicate. What follows are the authors’ perceptions of the correlation of some clothes wearing behaviors with the basic needs:

**POWER:** Clothing reflects that the wearer perceives that they are recognized some of the time as important.

Clothing can be used to communicate a perception of economic, political, social, religious power. Families play major roles in transmitting these social-cultural values to the younger generation, by teaching acceptable standards of body adornment and body beautification that is comparable with the family status within a social system. Clothing can be used to communicate political power when it is perceived as giving rights to the wearer to make decisions on behalf of the people.

Clothing that communicates economic and political power is found in various occupational rankings. Several examples of the power of clothing are the uniforms of law enforcing agents such as the police, military personnel and firefighters, who wear identifiable uniforms which are usually adorned with pins, bars and medals that indicate ranks, specific roles, years of service and economic standings. The uniforms denote authority and power vested in them to enforce law and order in the society, to defend sovereignty of a country from external aggression, and to protect lives and properties of the citizens. The uniforms also signify honor and prestige. The judge’s robe is another occupational uniform that sends information about the political power to preside and make decisions on issues brought before him or her. The “high-power suit” in the corporate world indicates high socio-economic status. The economic status of a business chief executive may be found in the design, maker, materials, cost and accessories (ties, pins, shoes), that accompany the suit. Royalty has been associated with clothing such as highly decorated uniforms, robes, crowns, and jewelry which are used for ceremonial events and rituals to communicate “royal” power. Historically the use of certain fabrics, such as silks, pearls for embroidery, and the color purple were exclusive to royal families, because these items were rare and expensive (Wolf, 1998).

**LOVE AND BELONGING:** Clothing reflects that the wearer perceives that clothes wearing represents a connection to others we care for, and who are concerned enough about us so that they will both give us and accept from us the affection, care and friendship we desire.

Clothing that may be perceived as representing belonging or love may be found in clothing that indicates affiliation with an organization, occupation, group, association, activity or events. It is a form of identification with a group. These are found in most cultures of the world. Personal experience of one of the author’s of this article who is native to a Yoruba culture of southwestern Nigeria, illustrates a common practice among families, clubs or community organizations to wear same or similar traditional clothing, e.g., hat for men, head wrap for women or a complete outfit, at special or ceremonial events such as weddings, naming ceremonies, birthdays, coronations, funerals, political rallies, etc. The events may be organized by or for a club member. (The clothing is referred to as “group clothing” and not uniforms, because group clothing is for social/political events rather than occupational). Depending on the number of groups or clubs the celebrant(s) belongs to, it is possible to see different group clothing for the same event. Usually, the celebrant(s) wear different clothes for his/her event. In most cases, though, the celebrant(s) also have same group clothing, which he/she can wear later, after the event or for someone else’s. During the celebration, each group and the members take turn to dance with the celebrant(s) at which time, a money gift is showered on the celebrant(s). This is a show of love, solidarity and support. It shows how much the individual or the family is loved by the community. It helps the individual feel good, loved and belonging.

**FREEDOM:** Clothing reflects that the wearer perceives that selected clothing represents total behaviors which indicate a desire for fewer restrictions.

Clothing that may be perceived as representing freedom of choice and expression can be observed among people who want to be different, who are showing appreciation for freedom of choice, and who are expressing individual creativity through clothing forms, designs, styles, colors, materials, attachments and body alterations. These freedoms are found in all cultures, religious organizations, educational institutions and in business. In a democratic system such as in the United States, the population is increasingly diverse, witnessing and experiencing diversity in culture and ethnicity including foods, clothes, accessories, etc. This cultural variance is perceived as a strength of democracy. A new America was defined by Clausell (1998, p. 6) as an “America with a declining non-Hispanic White population. An America where career oriented, Middle class Family and Consumer Sciences professionals must respect the choices women of other cultures make for themselves and their children, even if the choices appear anachronistic”.

This diversity is reflected in cultural and ethnic clothing
with an array of materials, designs, styles and colors. Immigrant families freely wear, design and market their clothing to express themselves without restrictions. Clothing ideas, materials and fashions are borrowed and utilized cross-culturally and globally, making ways for global adoption and marketing. It is this hodgepodge of cultures and ideas that strengthened individual self-esteem, creativity, and economic growth. Freedom of expression of self and in one's heritage fulfills a powerful psychological want toward the development of self-esteem and self-actualization. In her interview of African American professional women, O'Neal (1998) concluded that the women in her study used dress to construct identities that are based on knowledge and appreciation of cultural heritage. The choice of cultural dress by the women indicates pride in self and in the ethnic self, as this helps the women identify with their cultural heritage of West Africa. At the same time, they are able to balance the tension created by dual self as Americans, and as Africans. Some of the interview excerpts showed that by wearing cultural dress, the women felt connected to their African ancestors as they expressed fulfillment in doing so. Similarly, Legette (1993, p. 6) supports this conclusion with the statement that "Blacks respond positively to products and messages that affirm their sense of black pride and recognize their ethnic features and needs" (p. 6).

**FUN:** Clothing choices reflect the belief that we are having fun. The choice of clothing has for its main purpose, enjoyment and (re)creation.

Clothing that may be perceived as representing fun include athletic, sport, games, leisure and weekend or casual wear. Sport players are entertainers, whose primary goal is to make their fans happy. The fans attend sport events to have fun, interact and socialize. Reasons for selection of athletic uniforms are as varied as the sports. Activities that reflect what individuals and teams want are manifested though variables such as sentiments, patriotism, attachments, emotions, and rituals. These factors are psychological, sociological and environmental in nature. The factors influence behaviors of teams players, the officers, and sport fans. There are meanings attached to numbers on the jersey, mascot, colors and styles of uniforms. Today, people are involved in physical fitness activities for health reasons and for fun. Such activities include aerobic dancing, walking, running, stretching, tennis, golfing, bowling, surfing, skiing, snowboarding, hiking, mountaineering, etc. Different forms of active wear are available in the market today, to meet the needs of the health conscious and fun loving people. Technology has made it possible to manufacture lightweight, breathable fabrics that are soft, durable, washable, wind and water-resistant. Active wear clothing designs are now standardized, the only way to differentiate daily active wear from that of professional sports wear is from the names and logos of the teams on the uniforms. Weekend work clothes or casual Friday clothes such as jeans, slacks, shirt and two piece French suits are becoming part of American business wear outlook. This is to promote relaxation in the work place. It is to reduce the general impression of rigidity and promote flexibility in the work environment.

**SPIRITUAL:** Clothing reflects a connection to what we perceive as a higher power. Clothing reflects that the wearers perceive that selected clothing communicates relevance and relationship to their perceived higher power. (It is recognized that spirituality is not one of the basic psychological needs identified by Glasser).

Clothing of religious leaders such as the robes, gowns and coverings of nuns, pope, bishop, clergymen and women make statements about political power. These religious organizations require their leaders, men and women, to appear in prescribed clothing for their official duties so as to be recognized and differentiated from the followers. The uniforms affirm their authority as the spiritual leaders of the religious groups. Clothing worn by certain religious organizations denotes meanings that are ritualistic in nature. Different clothing may be worn to perform different rituals. For example, the Celestial Church of Christ is a secular faith that requires members to attend church service in a long white robe. Whenever they are in the robe (in or outside church), they can not wear shoes. Catholic Priests wear different robes for different events in the Church. Some members of the Jewish faith wear clothes that signify rank and status in the Jewish community. Solomon Poll (1962) illustrated the two major external appearance of Hasidic Jewish, the Hasidic garment and the bord und payes (the beard and side-lock), and these appearances represent status symbols. Individuals who display more intense religious observance are requested to wear more elaborate Hasidic garments for recognition and to elevate the individual into a higher status within the community. The Hasidic Jewish women's clothing symbolizes power and control of the opposite gender. The clothing styles of Jewish women indicate marital and economic status. Clothing of the Amish people has social and religion meaning strictly observed by both male, female, children and adults.

**Conclusion**

Clothing is one visible manifestation of our attempt to meet our basic needs. The therapist can use clothing, with the proper discussion, as a method to began to understand the level of need fulfillment. Clothing is an economical form of body image altering behaviors. (Brazell, 12/18/99). It also reflects the client’s attempt to inform, influence and reflect the level of need fulfillment. Clothing is, in the final analysis, a method by which messages are transmitted. It is a way to transform one’s perception of self from day to day. According to Zastrow (1989, p. 159), “People intentionally and unintentionally send messages about themselves by what they wear. Clothes give messages about occupations, personalities, interests, group norms, social philosophies, religious beliefs, status, values, mood, age, nationality, and personal attitudes.” Clothing is an affirmation of the basic needs, and reflects our best attempt to meet these needs. The role of the family therapist is to be a translator of these messages. The translator must be both a receiver and sender of information. In the planning process, the family therapist can work with the counseling to alter behavior by the change of wardrobe. This is one of the practical applications of clothes wearing to making behavioral changes. Littrell (1998) illustrates the power of clothes in making therapeutic changes in counseling cases. He presented cases that illustrate a six-stage model developed by Prochaska, Norcross, and DiClemente (1994). The model describes the six processes of change when dealing with problem behaviors. He concluded that unbeknown to him, he had used clothing to affect therapeutic
change in a variety of counseling situations using multiple methods.

The choice of clothing is the result of a thinking behavior manifested into action. The acting behavior is observed in people's values and attitudes regarding clothing selection, whether or not to conform to group clothing norms or to be different and manifest individual choices. The family therapist who practices reality therapy "focuses on what counselees can do directly- "act and think." One role of the reality therapist is to gather information, both verbal and nonverbal. Family therapists, who practice reality therapy, have heretofore concentrated on verbal interactions. This article intends to integrate both verbal (discourse) and nonverbal (appearance) communications; in this case, clothing selections and interpretation of choice within the family systems. The issue is not to separate (discriminate) but to become more holistic in the approach to family therapy. In the general society, many people are judged by their appearance. These judgments are at times used to justify discriminatory behaviors. This is not the intent of understanding the intersection of choice theory and clothing. Our intent is to provide to the family therapist an old tool for the new box. The issue is not that judgments have been or continue to be made, but where they fit in quality family therapy.

Bibliography


Quality World and Capeverdeans: Viewing Basic Needs Through a Cultural/Historical Lens

William Sanchez
Dawna M. Thomas

ABSTRACT

The Capeverdean American community is described through the use of Choice Theory. Examining the collective meeting of basic needs and thus the enhancement of a cultural Quality World, needs to be conditioned by an understanding of the unique cultural/historical issues that face the Capeverdean community. Making the Capeverdean American community more visible is an important step in enhancing their cultural Quality World.

Introduction

Within choice theory, the construct of Quality World is a critical and vital concept (Glasser, 1992; Glasser & Wubbolding, 1995). One of our major goals as service providers is to assist in the enhancement of an individual's efforts toward understanding and developing his/her Quality World. The meeting of basic needs is crucial to this process of articulating a well grounded Quality World. Relationships that are loving and need satisfying have to be part of this Quality World development (Glasser, 1998). The pictures we have in our heads as to how our needs are satisfied within a reciprocal, relational matrix, are guiding points in our lifelong attempts to make meaning of our lives. This meaning is predominantly situated within a relational context, that is, our Quality World, and the meeting of our basic needs is dependent on others.

Our relational context, however, is not located within a neutral or ahistorical social space. Our social landscape is very much conditioned by factors that include socioeconomic status, gender, race, sexual orientation and culture. This is, of course, not an all-inclusive list, but these factors are some of the important elements that provide texture, color, difference and tension in our efforts to meet basic needs and thus articulate our Quality World. The notion of a universalized context must give way to one that situates the multiple histories and worldviews of diverse cultural groups (Sue & Sue, 1999; Mickel, 1995; Young 1990; Wubbolding, et al. 1998). A well articulated and critical understanding of history allows us not only to see where we came from, but how the past has also set up certain sociopolitical, cultural and economic structures that clearly affect how we function today, and provide us with multiple possibilities or trajectories towards the future (Zinn, 1990). Thus, history is not a collection of dead "facts," but a living process that connects all of us in multiple ways (Said, 1993). What has happened to groups in the past does influence (although obviously not fully determine in any automatic manner) where they are going in the future. This has been clear for all cultural groups, which in turn also affects "individuals" irrespective of how conscious they are of their own cultural history. Our cultural history, whether or not we know it, is always with us (Sanchez, 1998). The past, that is, the historical, also demonstrates to us how ordinary people have come together to confront and actively change situations of social oppression (Zinn, 1994, 1995). This is very much a part of the commitment to the enhancement of a cultural Quality World for groups that have been marginalized or excluded in our society (Sanchez & Garriga, 1995).

This article is concerned with the social construct of culture and the efforts being made to enhance the Quality World of an ethnic group that has had little recognition in the United States. We, the authors, as researchers and service providers have been involved in the efforts to both articulate and advocate for the particular cultural, social and health care needs of Capeverdean Americans (Sanchez & Thomas, 1997; Sanchez, Thomas, & Lima, in press; Thomas & Sanchez, 1998; 1999). We would like to show how Choice Theory has assisted us in our continued efforts to understand the Capeverdean American community and its basic needs. Looking at Quality World through a cultural lens has assisted us in further understanding how basic needs are met on a collective, group level. Understanding the cultural and historical relationships to basic needs, in our opinion, is a necessary element in engaging in culturally liberating research and clinical practice (Sanchez & Thomas, 1997; Casas & Mann, 1996; Sue, Ivey, & Pedersen, 1996). We will present a brief description of the Capeverdean American community and examine how basic needs are conditioned by unique cultural and historical factors. Some general guidelines will be presented regarding the engagement of the Capeverdean American community in its continued efforts to enhance its Cultural Quality World.

Cape Verde, its History and its People

One of the first things asked about Capeverdeans is where are they from, that is, where is Cape Verde? Knowing the geographic location of where a people come from is important. It connects to their history and a sense of coming from somewhere, that somewhere being a place where cultural and historical roots are formed (see, e.g., Davidson, 1989). The Republic of Cape Verde is made up of a chain of islands, an archipelago that is located in the Atlantic Ocean off the West Coast of Africa. The islands "... lie within a grid from 283 to 448 miles off the coast of Senegal" (Lobban, 1995, p. 4). Although there are twenty-one islands and islets that make up the archipelago, nine of the islands make up the major inhabited areas of Cape Verde. The islands are divided into two major groups. From North to South, the "Barlavento" or windward islands are: Santo Antão, São Vicente, São Nicolau, Sal and Boa Vista, From East to West the "Ilhas Do Sotavento" or leeward islands are Maio, São Tiago, Fogo and Brava (Davidson, 1989, p. 5). The total area of the islands is roughly 1,557 square miles, which according
to Lobban (1995, p. 6) is “just a little more territory than Rhode Island.” Located on the leeward island of São Tiago, the capital of the Republic of Cape Verde is the city of Praia.

Contrary to the image of lush, green tropical islands, Cape Verde is largely dry, being on the same latitude as the Sahara Desert. Lobban (1995, p. 5) notes how “The Cape Verdean archipelago is better understood as a western extension of the Sahara Desert.” As a result of severe droughts and overall dry climate, there have been major challenges to issues of basic survival in the history of Cape Verde. Basic survival needs have been an area of struggle due to colonial mismanagement, something which will be discussed further below. Survival needs have always loomed large for the people of Cape Verde, both on the islands themselves and here in the United States. Given the harsh economic conditions due to severe droughts and “colonial mismanagement of the land,” (Halter, 1993 p. 4), Cape Verde is an economically poor country. Much of the gross national product of Cape Verde is made up of remittances sent back by family members who have immigrated to other parts of the world, in particular the United States (Lobban, 1995).

The population of Cape Verde is estimated at 394,000 people, with a projected estimate for the year 2000 at 411,000 (U.S. Bureau of the Census, 1997, Table 1334). It is a young population where close to a third of their people are between the ages of 4 and 14 years of age (Lobban, 1995, p. 48).

Many different peoples make up the racial/ethnic mixture of the population of Cape Verde. The major groups are represented by Africans, many who had been brought as slaves from the west coast of Africa, and of course the Portuguese settlers (Lobban, 1995). Lobban (1995, p. 1) notes how “Cape Verdean history essentially starts with the settlers from Portugal and their slaves in the 1460s. From that point forward, for more than five centuries, the islands’ history was characterized by Portuguese colonialism and a synthesis of a Crioulo culture.” He goes on to note how “Much of the islands’ genetic ancestry can be traced to African groups who spoke Fula, Mandinka, and various Senegambian languages” (Lobban, 1995, p. 1).

A major component of the cultural Quality World for Cape Verde and its movement towards freedom in the 1970’s was its emphasis on being re-connected to Africa and its African identity (Cabral, 1979; Davidson, 1989, 1994). This complex historical grounding of its racial and ethnic identity is further accentuated and contested here in the United States, particularly with regards to its visibility as a distinct cultural group, something which will be discussed further below.

The people of Cape Verde speak Portuguese, which has been the language of the colonizer, and Capeverdean Creole, the cultural language of the people (Veiga, 1999). Capeverdean Creole is the language of the community, and was developed partly in resistance to the language of the colonizer (Silva, 1996). Its connection to grassroots survival issues, political activism, and cultural differentiation cannot be underestimated (Baptista, 1996, 1997a, 1997b, Gonçalves, 1997; Lobban, 1995). It is also the language of intimacy and connects directly to the complex cultural history of its people and their sense of community. It is the communication medium, through which all needs are negotiated, but in particular, the needs for love and being connected to individuals, family and community, are much more profoundly related to the use and development of the language of Capeverdean Creole (Coli & Lobban, 1990; Lobban, 1995; Caswell & Pina-Britt, 1998; Ferro, 1997; Lima, 1996).

The Struggle for Freedom as a Central Element of a Capeverdean Quality World

After five hundred years of colonialism, the people of Cape Verde, led by Amilcar Cabral, engaged in an armed struggle against the Portuguese government in order to gain its freedom (Davidson, 1989, 1994; Lobban, 1995, 1996). Approaching twenty-five years as an independent nation, Cape Verde declared its independence on July 5, 1975.

The need for freedom, and subsequently power, were clearly basic needs that had been lacking for so long in the collective, - the cultural Quality World of the people of Cape Verde. Amilcar Cabral and the many other women and men who struggled for the independence of Cape Verde, however, had the critical “picture in their heads,” of a free Cape Verde. This was a Cape Verde that would then have its own sense of agency, that is, power, to decide its future and to govern its own affairs as a sovereign nation. Freedom on a collective level meant complete sovereignty as a country, which translated to the satisfaction of the individual need for freedom. Becoming free from the colonizer and the mental colonialism that was so much a part of this oppressive system meant the development of a critical/political consciousness, one that clearly confronted the issues of power on a collective level (Cabral, 1979; Freire, 1994; 1995).

Amilcar Cabral, one of the most famous Capeverdean leaders, always in a collaborative, relational stance with the people of Cape Verde, made important choices. Cabral’s radical praxis was always very attuned to the reality of Capeverdean people and their struggle to meet basic needs (Davidson, 1994). His Quality World always included the emancipation of Capeverdeans and their freedom to struggle towards enhancing their self-determined Quality World. Having been oppressed for so long by the colonial powers, a choice was made, one that led to the liberatory actions of the people of Cape Verde. These needs were not only basic survival needs, but cultural as well (Davidson, 1989, 1994). In many ways, he became the “reality therapist” for the people of Cape Verde. How to enhance the Quality World of the people of Cape Verde was always his major goal. One element of his greatness was in his ability to see this project within the unique cultural and historical context of Cape Verde. The other unique element of his leadership was his ability to inspire collective hope and, thus, a loving relational context that challenged them to collectively make liberating choices. Cabral was utterly aware that freedom was both their choice (as they could never expect the colonizer to choose or grant them their freedom) and responsibility. This responsibility was connected to power and freedom, but, for Cabral, it had to be ultimately focussed on the meeting of basic needs, including, the need to re-articulate and make visible African and Capeverdean culture.
Emigration and The Capeverdean Community in the United States

Given its complex history of colonialism, harsh climate and economic status, many Capeverdeans have sought to take an active choice in meeting their survival needs through emigration. Capeverdeans can be found in many countries in Europe, Africa and the United States (Carling, 1997; Lobban, 1995). Capeverdean Americans have been in the United States since the early 1800’s, settling mostly in southeastern New England (Coli & Lobban, 1990; Halter, 1993; Lobban, 1995). Capeverdeans have the unique distinction of being one of the very few free blacks of African heritage to immigrate to the United States (Halter, 1993; Lobban, 1995). The largest concentration of Capeverdean Americans is located in New Bedford, Massachusetts, which is known by many as “little Cape Verde.” Many men emigrated from Cape Verde in search of better economic opportunities for their families: survival needs have always been paramount. Many came to the U.S. as seamen on whaling ships, with a few rising to the heights of attaining their own sailing vessels (Coli, 1997). Later on, in the late 1800’s and early 1900’s, entire families emigrated from Cape Verde in order to work in southern New England’s cranberry bogs and the textile mills (Halter, 1993), industries that brought many other immigrant families attempting to meet basic needs and better their Quality Worlds.

Estimating the number of Capeverdeans in the United States has been a difficult task. How the U.S. census has historically classified Capeverdeans has had implications for the visibility/invisibility of this racial/ethnic group (Ramos, 1998; Sanchez & Thomas, 1997). “Not until the 1980 census did a category even exist for a possible response of ‘Cape Verde’ to the question of ancestry. Since the Cape Verdean Islands were a colony of Portugal until their independence in 1975, Cape Verdeans were simply lumped with the Portuguese group” (Halter, 1993, p. 35). This issue is further complicated not only by how the authors choose to count, but how many have also chosen to identify themselves.

Various estimates of the number of Capeverdeans in the United States have been presented (Carling, 1997; Lobban, 1995). Carling (1997, p. 4) using various sources calculates an average of 287,000, while Lobban (1995, p. 58) presents a conservative estimate of “... 50,000 people of Cape Verdean ancestry and self-identity.” If one includes “... second- or third-generation Cape Verdeans with at least one parent of Cape Verdean descent... the number may be as great at 250,000.”

Once here in New England, meeting basic needs and the development of a cultural Quality World began and continues to this day. First, second and third generation Capeverdean Americans and more recent immigrants make up the Capeverdean American Community (Sanchez & Thomas, 1997). Although here in the United States, the islands of Cape Verde still remain important to them and serve as a cultural anchor. Many Capeverdeans identify themselves with the specific island that they came from (Lobban, 1995; Sanchez & Thomas, 1997; Thomas & Sanchez, 1998). Cape Verde remains a strong picture in their Quality World.

The Capeverdean American community has been made up of a tight knit network of many organizations, from social clubs, churches, and advocacy centers, all being crucial to the enhancement of the Capeverdean Quality World. These various organizations are interconnected and have played a crucial part in establishing the relational connections for many Capeverdeans and their families (Sanchez & Thomas, 1997). Meeting basic needs of survival, enhancing their political and economic power through collective, collaborative enterprises, developing friendships and connections, and being free to engage in these activities, have all enhanced the Capeverdean Cultural Quality World.

Racial and ethnic identity is a complex subject for many Capeverdeans. Given their complex racial and ethnic history, issues of identity and visibility have been very critical to Capeverdeans (Coli & Lobban, 1990; Halter, 1993). This is by no means simple, with Capeverdeans having multiple pictures of the different elements of their identity (Halter, 1993; Lomba de Andrade, 1997; Monteiro, 1997; Ramos, 1998; Romano, 1998; G. Sanchez, 1998). Many older Capeverdeans, for example, still identify very much with the Portuguese side of their identity, and many younger Capeverdeans with their African/black side, in particular, its intimate connection to a more political consciousness and sense of empowerment. Its connection to the need for freedom and power cannot be underestimated. Further complicating this identification is the variable of class. “In Cape Verde itself, social stratification tends to occur much more on the basis of class as opposed to race, so that in working with recent Capeverdean immigrant families, the notion of class standing may be more heavily weighted than other factors associated with identity (Sanchez, Thomas, & Lima, in press, p. 11). Their identification here in this country is also complex due to the historical and current nature of racial identification in the U.S., where the binary of black or white has set up an artificial, yet politically and socially real system of classification (Halter, 1993; Lobban, 1995, Omi & Winant, 1994).

Given that Capeverdeans represent a broad range of racial characteristics, many in the United States have been misidentified as either Black, African American or Latino (Coli & Lobban, 1990; Sanchez & Thomas, 1997). This misidentification has been a part of their “invisibility” within the U.S. and in particular within its census categories (Ramos, 1998). Continuing efforts are being made to rectify this invisibility. Being recognized as a cultural/ethnic group, in our opinion, is a basic need, one that connects to survival, freedom, power, and being connected to others in positive, collaborative and culturally affirming relationships.

Capeverdean identity is also very much connected to issues of language. As previously noted, Portuguese was the language of the colonizer, while Capeverdean Creole, the language of resistance and connection for the community. The importance of Capeverdean Creole within the Quality World of Capeverdeans is recognized through the development of bilingual educational settings, where English and Capeverdean Creole are taught (Boston Public Schools, n.d.; Caswell & Pina-Britt, 1998; Lima, 1996). Working with Capeverdeans clients and understanding their Cultural Quality World requires the recognition of the importance of language and in particular Capeverdean Creole or CVC. Although having been a predominantly oral language, recent efforts have been made to develop and systematize its
orthography, that is, its written component. This orthography is named “ALUPEC,” which stands for “Alfabeto Unificado para a Escrita do Cabo-Verdiano” (Unified alphabet for written Capeverdean). (Baptista, 1997a, 1997b; Gonçalves, 1994, 1999; Pires, Hutchinson, & Gonçalves, 1994). Also observed among a number of younger Capeverdeans is the development of a combined language form consisting of Capeverdean Creole and English which has been labeled as Creenglish (Lima, 1996, 1997). Integrating CVC, and respecting its linguistic history and importance, enhances the satisfaction of the basic needs of power, freedom, and fun through learning.

Working with Capeverdeans: The Importance of Understanding Culture and Community Connections

The ability to form collaborative connections with Capeverdeans is a necessary ingredient to anyone seeking to provide services within the community. Working with individual Capeverdeans requires not only an understanding of their culture, history, and language, but an exploration of their involvement with various community resources and the importance these networks have in enhancing the efforts towards a Quality World for the client and the community. A major source of support for the Capeverdean community, one that connects Capeverdeans here and in Cape Verde, is the Consulado Geral de Cabo Verde (Capeverdean Consulate), which is located in Boston, Massachusetts. The Capeverdean Consulate is continually involved in the efforts to make more visible Capeverdeans and their efforts towards enhancing their Quality World. Those also wishing to learn more about Capeverdean history, culture and the Capeverdean American Community can find the largest collection of information located in the Capeverdean Archives at Rhode Island College, Providence, RI. The Archives have sought to recognize and affirm the importance of the Capeverdean community and its culture through its unique collection of books, newspapers, videos, and other cultural artifacts.

Conclusion

Capeverdean Americans have been a part of the multicultural history of the United States for a long time. They present a unique history, one that includes a deep struggle to enhance their cultural Quality World. Gaining their independence, redefining and affirming their African heritage, and continuing their efforts to meet basic needs both in Cape Verde and the United States, has been part of the collective pictures of their Capeverdean Quality World. Becoming visible has meant affirming their unique cultural and historical heritage and the centralizing of Capeverdean Creole as their language. The continued support and development of Capeverdean culture through the meeting of basic needs that are contextualized within collective, collaborative relationships, is a vital element in the further enhancement of a Capeverdean Quality World (see Figure 1).

References

Boston Public Schools (n.d.). Bilingual resource programs (information brochure).


Footnotes

1. The various spellings and labels are significant in that they represent the political and contested nature of the language. Lobban (1995) uses the spelling Crioulo, Caswell & Pina-Britt (1998) Cape Verde Creole (CVC), while Gonçalves (1994) and Pires, Hutchison, & Gonçalves (1994) use the ALUPEC spelling of "Kriolu." In this article we have employed the terms Capeverdean Creole or Creole in order to remain consistent, while being aware of the complex cultural and political nature of this language.

2. A great many of the published works on Capeverdeans appear in Cimboa: A Journal of Letters, Arts and Studies, which can be obtained through the Consulado Geral de Cabo Verde, 607 Boylston Street, Boston, MA, 02116. Email: cimboa@aol.com.
Mitigation in Capital Murder Cases: War of the Quality Worlds

Brent G. Dennis

The author is RTC and is an assistant professor of social work at Southern Illinois University, Carbondale, Illinois. He is president of Quest Forensic Services, Inc., a firm that specializes in mitigation investigations on capital murder cases.

ABSTRACT

In America, 38 states employ the ultimate sanction of the death penalty for capital murder. If the defendant is found guilty of capital murder, the mitigation specialist, as a member of the defense team, works to "try to save the defendant's life." During the sentencing phase of a capital murder trial, the courtroom is the setting for a War of the Quality Worlds. The prosecution and the defense teams both maneuver to produce their respective quality world pictures for each jury member to perceive. For each legal team, the hope is that the jurors will adopt its reference signal or quality world that guides their sentencing decisions - death or life for the defendant.

The Legal Backdrop

Throughout American history, capital punishment has remained part of the United States' criminal law. It has been characterized by controversy and disagreement. The United States Supreme Court has never held that the death penalty violates the Eighth Amendment ban on "cruel and unusual punishment." However, in 1972 with Furman v. Georgia, the Supreme Court struck down laws that gave jurors "arbitrary" power to impose the death sentence. In effect, the death penalty was ruled unconstitutional as applied.

In 1976, with Gregg v. Georgia, the Supreme Court, in effect, overruled itself. The Court upheld the constitutionality of the death penalty for first-degree murder as long as the individual character of the defendant and the circumstances of the crime are taken into account. Recognizing that the death penalty is unique in the criminal justice system, the Court ruled in 1976, in Woodson v. North Carolina that "The penalty of death is qualitatively different from a sentence of imprisonment, however long. Death, is its finality, differs more from life imprisonment than a 100-year prison term differs from one of only a year or two."

Strengthening Gregg and Woodson, in 1978, the Court established, as a constitutional matter, in Lockett v. Ohio, that any mitigating evidence relevant to the defendant's character and offense must be admitted during a capital sentencing proceeding. In Lockett, the Court effectively ruled that during the penalty phase of death penalty trials, the defense must be permitted to present "any aspect of a defendant's character" that might warrant a punishment less than death.

Currently, 38 states have death penalty statutes that provide for the ultimate sanction of death. The typical death penalty statute provides for a bifurcated or two-stage process.

A death penalty trial is, by definition, a trial in which the State, or prosecution, is seeking the death penalty for the defendant. The trial is conducted in two stages before one jury. In the first or Guilt, stage, the jury is called on to determine the guilt or innocence of the defendant. If the jury finds the defendant guilty of first degree murder, the second or Penalty stage follows. During the penalty stage, the jury weighs the aggravating and mitigating factors and makes the sentencing decision whether the defendant will spend her/his life in prison or be executed.

Two terms, related to the above, require definition. The Merriam-Webster's Dictionary of Law (1996) defines aggravating and mitigating circumstances or factors. The first term, Aggravating circumstance is, "a circumstance relating to the commission of an act that increases the degree of liability or culpability; also: a circumstance (as lack of remorse) relating to an offense or defendant that receives consideration by the court, esp. in imposing a death sentence." In a capital case, possible aggravating factors include: killing someone during the course of robbery or rape; killing someone in an especially heinous, atrocious or cruel manner; killing someone for money; killing an on-duty law enforcement officer; and killing someone in connection with other contemporaneous crimes of violence. These factors are the focus of the prosecution in the guilt phase of the capital trial. Obviously, during the penalty phase, the prosecution will attempt to keep the jury's attention on the aggravating factors and on the defendant as a killer.

The second term, "Mitigating circumstance" is defined as, "a circumstance in the commission of an act that lessens the degree of criminal culpability; also: a circumstance or factor relation to an offense or defendant that does not bear on the question of culpability but that receives consideration by the court, esp. in lessening the severity of a sentence." State and federal courts have recognized the following as mitigating factors: a defendant's childhood abuse and neglect, poverty, experiences of racial prejudice and violence, drug and alcohol addiction, learning disabilities and mental retardation, witnessing the abuse or violence inflicted on loved ones, committing the homicide under duress, good work record, positive adaptation to incarceration, religious faith, mental illness, and kindness toward others. Actually, any factor arising from the evidence which the jury may consider as a reason not to vote for death is a mitigating factor. These factors are the focus of the defense in the penalty phase of the capital trial. They are emphasized in an effort to humanize the defendant, to allow the jury to see

"In the last analysis, it is our conception of death which decides our answers to all the questions that life puts to us." - Dag Hammarskjold, Markings, 1964
her/him *not as a killer, but as a person who has killed.*

The following sections will focus on the tasks of the mitigation specialist and on the second or penalty phase of the capital trial. The penalty phase obviously follows the defendant's conviction of first degree murder in the first or guilt phase of the trial.

**What is a Mitigation Specialist and What Does S/He Do?**

Mitigation specialists are typically mental health professionals. Due to their firm grounding in systems theory, graduate trained social workers with experience and/or training in forensics function increasingly as mitigation specialists.

A mitigation case typically begins with a call from one or both of the defendant's two attorneys. Ideally, the mitigation specialist joins the defense team three to six months before the case is scheduled for trial to allow adequate time for the myriad of time-consuming tasks involved. Following the Order or Motion to hire the "mitigation expert," an initial task for the mitigation specialist is to review all discovery materials. The next task is to develop a complete social history on the defendant. Up front, this procedure involves going into the defendant's environment to interview all relevant persons who may lend information and perspective on the background and life of the defendant. The mitigation specialist also recommends to the defense attorneys the involvement of other professionals as needed, such as a psychiatrist and/or a psychologist for their respective assessment expertise. Other experts are recommended as needed. The mitigation specialist may assist in jury selection. If the dynamics of the criminal events are unclear, the mitigation specialist may assist the attorneys in the development of a theory of the case.

A crucial task for the sentencing phase is the preparation of a list of statutory and nonstatutory mitigating factors the jury will see and hear in the witnesses' testimonies. This work is actually completed before the beginning of the trial. The mitigating factors emerge from interviews with the penalty phase defense witnesses and are exemplified during their respective testimonies. The defense attorneys submit the mitigating factors to the presiding judge to approve for the jury's deliberations. The mitigating factors will, ideally, enable at least one jury member to vote for a sentence of life.

The primary responsibility for coordination and preparation of defense witnesses during the penalty phase is with the mitigation specialist. This involves the selection and instruction of witnesses. It also involves the preparation of "scripts" or lists of questions for the defense attorneys to use with the defense witnesses, during direct examination, to reveal the mitigating factors for the defendant. The mitigation specialist may testify him/herself. Typically, the mitigation specialist is the final defense witness and ties together "in the final act" the testimony of previous witnesses. Genograms, ecomaps, timelines, and other visual aids may be used in an effort to allow the jury to see the defendant *not as a killer, but as a person who has killed,* and as a person who is worth letting live. The goal is to project a *mitigating play* and to develop the testimony of the selected defense witnesses to tell the story of the defendant's life. Witness testimony is staged to present the mitigating factors the jury will consider in their deliberations of a life sentence versus the death penalty for the defendant.

**The Courtroom as the Stage for the Drama**

Because of the strong *adversary nature* of the criminal court system, and the fact that neither side wants to lose, MacHovec (1987) and Blau (1998) have noted the courtroom as a setting for drama. The idealized notion of the statue of blind justice wielding the double-edged sword, cutting through falsities and opinion to truth is not always realized. MacHovec (1987) notes the following:

> Reality is that court is neither a peaceful, democratic process nor a mutually supportive, open sharing of fact and opinion. It is (intentionally) a conflict situation, a contest between two opposing sides, each represented by attorneys with sworn duties to do all they can to effectively represent their client and win the case. (p. 33)

**The Stage.** The courtroom is a visually distinctive place. Most of the settings and procedures that guide the actors are quite formal. There is a sameness about courtrooms. Most follow the same general architectural plan.

There is an elevated platform called the **bench,** where the judge sits. Surrounded by flags and shields, s/he reigns supreme “above” the proceedings to survey and oversee all aspects of the process, literally and figuratively. Typically, to the judge’s right is the **jury box,** a raised section (but not as high as the judge’s bench), set aside for twelve jurors. The jury box is close to the **witness box** to better see and hear testimony of witnesses. The **prosecution and defense teams** are positioned at tables adjacent to each other facing the bench, but at some distance from each other for a degree of privacy. Each has chairs for the attorneys. The defendant sits at the defense table. The **court reporter** sits near the judge “on stage” to better hear testimony. The **audience,** i.e., family, friends, media, and spectators, are seated theater-like between the entrance doors and the court. A railing or low partition separates the **audience from the cast.**

**The Cast.** Onto the stage steps the cast with all due costumes and props. The **judge** wears a black robe and presides from the bench, which symbolizes the formality and solemnity of the courtroom protocol. For both sides, the **attorneys** usually dress formally, men and women in business suits. The attorneys carry briefs, books, and papers, and spread them out in front of them on their tables. Experienced attorneys struggle for advantage by using their verbal and nonverbal behaviors since their costuming and casting are not distinctive. **Bailiffs,** uniformed officers of the court, with guns and badges, remind all viewers about the orderly and uninterupted processes of the court. The court drama usually begins with a bailiff calling something like: “All rise...” Next, s/he identifies the judge, the court, and the case title. The twelve members, plus alternates, of the jury are ordered to the jury box. They enter the courtroom from a hallway near the jury box. In the course of the trial, bailiffs often usher in **witnesses** and direct them to the corner of the witness box to be sworn in by the **court clerk.**

Much of the trial procedure is like following a script, which is similar from trial to trial with respect to casting and
places on the stage. The sequence of events (who speaks first, next, and last) and the plot development (opening statements, testimony, cross-examination, closing statements, and verdicts) are also scripted by official legal and court procedure.

War of the Quality Worlds

Phillips (1997), citing the results of a jury study by Penington, Penrod, and Hastie, notes that members of a jury generally process information in a trial according to a "story model" (p. 116). Jurors do not gather information throughout a trial, wait until all the information is presented, and then draw conclusions about what happened. Rather, jurors perceive information as it is presented and begin to construct a story of the events and about what happened. As new evidence is presented, jurors try to fit the new evidence into their preconstructed story. This is a fitting backdrop for the War of the Quality Worlds of the capital trial. As Glasser (1999) notes for each of us in relation to other persons,

All we can get from them or give to them is information... Since information does not make us do anything, we can choose to ignore it or act on it any way we see fit... How we deal with that information is our or their choice (pp. 3, 17, 333).

In a related manner, Palmatier (1999), considering the most beneficial philosophical context of adult learners, observed that, "Both William Powers' perceptual control theory and William Glasser's choice theory emphasize to one degree or another, choice, internal control, alignment with intentionality, and responsibility" (p. 10). Both Powers' and Glasser's works are further refinements of systems theory. Both theories denote human thinking and interpersonal interactions as parts of circular and interactional models of negative feedback loops that view causes and effects as interchangeable. The mutually influential closed loop systems models of Powers and Glasser will be used to discuss the conflictual nature of the sentencing phase of a capital trial.

As noted earlier, if the jury in a capital trial finds the defendant guilty of first degree murder in the guilt phase of the trial, a penalty phase will be held. During the penalty phase, the jury has the task to weigh the aggravating and mitigating factors and decide whether the defendant will spend her/his life in prison or be executed.

It is important to remember that for a juror to sit on a capital trial, s/he must be death qualified. Death qualification is the process by which prosecutors may strike for cause those jurors indicating that they could not under any circumstances impose the death penalty (Witherspoon v. Illinois, 1968). For the juror to be death qualified means that s/he has accepted the "control" of the rule of law and procedure to sit on a capital case. The juror is now in a forced-choiced situation – to decide death or life for the defendant. As we shall see, this often represents "true conflict" as both choices may be problematic for the juror. To illustrate, it is instructive to visualize the twelve members of a "death qualified jury" on a continuum defined by the three highest orders of perception.

Deaths Qualified Jury Continuum

<table>
<thead>
<tr>
<th>Systems</th>
<th>Murder is wrong and people who murder should die.</th>
<th>Murder is wrong, but some people may have reasons.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Concepts</td>
<td>With enough evidence to support my belief, it will make sense for me to -</td>
<td>With enough mitigation to support my belief, it will make sense for me to -</td>
</tr>
<tr>
<td>Principles</td>
<td>Vote to execute.</td>
<td>Vote for life.</td>
</tr>
<tr>
<td>Programs</td>
<td>With evidence for the prosecution to support my belief, it will make sense for me to -</td>
<td>With evidence for the defense to support my belief, it will make sense for me to -</td>
</tr>
<tr>
<td>Systems Concepts</td>
<td>With enough evidence for the prosecution to support my belief, it will make sense for me to -</td>
<td>With enough evidence for the defense to support my belief, it will make sense for me to -</td>
</tr>
<tr>
<td>Principles</td>
<td>Vote to execute.</td>
<td>Vote for life.</td>
</tr>
<tr>
<td>Programs</td>
<td>With evidence for the prosecution to support my belief, it will make sense for me to -</td>
<td>With evidence for the defense to support my belief, it will make sense for me to -</td>
</tr>
<tr>
<td>Systems Concepts</td>
<td>With enough evidence for the prosecution to support my belief, it will make sense for me to -</td>
<td>With enough evidence for the defense to support my belief, it will make sense for me to -</td>
</tr>
<tr>
<td>Principles</td>
<td>Vote to execute.</td>
<td>Vote for life.</td>
</tr>
<tr>
<td>Programs</td>
<td>With evidence for the prosecution to support my belief, it will make sense for me to -</td>
<td>With evidence for the defense to support my belief, it will make sense for me to -</td>
</tr>
</tbody>
</table>

Ford (1993, p 38) defines Systems Concepts, Principles, and Programs as follows. Systems Concepts -- values, the way we believe things ought to be. Moral reasoning, a central process for a capital juror, occurs at the systems concepts level. Powers (1990) refers to this highest order type of perception as, "a certain way of being human" (p. 90). Principles -- standards, criteria, or guidelines. These are the rules for thinking and actions which reflect our systems concepts beliefs. Programs -- decisions, the things we decide to do. These are our "if - then" or choice point decisions.

Systems concepts, Principles, and Programs represent the three highest orders of eleven orders of perception (Powers, 1990). They are important for our considerations because the bulk of our higher order thinking, decision making, and actions originate from these three perceptual levels. Think of them also as the highest orders of perceptions in our Quality Worlds, with systems concepts representing What we Want the Most.

In jury selection, the prosecution, seeking the death penalty, wants jurors toward the left side of the continuum. The defense, seeking a life sentence, wants jurors toward the right side of the continuum. The selection of members of a death qualified jury is crucial in that it takes a unanimous vote of all twelve jurors to impose a death sentence. One dissenting vote equals a life sentence for the defendant.

The legal assumption is that any member of a capital jury may vote for death or life during the sentencing phase, depending on the evidence presented. The author's experience is that death qualified jurors take their jobs very seriously and often agonize over the decision of sentencing a capital defendant to death. The task of the mitigation specialist is to introduce sufficient mitigating factors, about the personal characteristics and life circumstances of the defendant, to create frustration signals or inner conflicts in the jurors' quality worlds. The intent is to create conflict or doubt about the application of the death penalty for the defendant.

Because the guilty verdict came as a result of the aggravating factors presented during the recently completed guilt phase of the trial, the goal, in the sentencing phase, is to allow or maneuver the jurors to reorganize their thinking. The goal is to get the jurors to consider new perceptions or frustration signals, via the mitigating factors, about the defendant into their quality worlds. At least one juror, hopefully, will decide that the defendant is a person worth letting live in prison as opposed to being executed.
Mitigating factors as sources of conflict.

It is in the individual and collective quality worlds of the jurors that the mitigation specialist, as part of the defense team, tries to create conflict about the application of the death penalty. Glasser (2000) states the following about the quality world:

In it we store detailed memory pictures of people, things, and systems of belief that have satisfied our basic needs better than anything else... Our quality worlds is the core of our lives because it is our direct motivation - where we always look when we are frustrated (pp. 78-79).

Elsewhere, Glasser (1999) comments on jury trials:

If the defendant is in the quality worlds of the jurors for a variety of reasons, they may pay little attention to the evidence and acquit him. If he is not the kind of person any of the jurors would put into their quality worlds, he is likely to be found guilty even on flimsy evidence (p. 47).

Though the jury has already convicted the defendant, the principles about the quality world remain for the sentencing phase of the capital trial.

Figure 1 represents the individual and collective total behaviors of the prosecution and defense teams and also those of the twelve jurors. As one would observe in a courtroom, the total behavior components of thinking and acting can be surmised and represented in the figure. The legend at the bottom of Figure 1, notes terms that are similar. The standard type notes terms commonly seen in the language of Perceptual Control Theory used by Powers, Ford, and others. The italicized terms are those commonly used in Choice Theory. Also note the obvious, that the diagram is not intended to represent the whole perceptual systems of any of the actors in the courtroom. Rather, the diagram is intended to represent a few of the billions of feedback loops in any living human control system.

Note the heavy dashed line near the top of Figure 1. It represents the fact that there are twelve jurors present, though the feedback loops for just two are diagrammed. It is important to remember that there are ongoing systemic interactions occurring constantly between all members of the prosecution team, the defense team, the twelve jurors, the judge, and other actors in the courtroom.

As with the guilt phase of a capital trial, conflict is a core issue in the sentencing phase. As a prime purpose of the sentencing phase is to present mitigating factors, a shift in thinking occurs. This shift is apparent with an understanding of the logical processes of the social sciences and the law (Wilson, 1997, pp. 7, 14, 70). Criminal law seeks to judge behavior, whereas social science seeks to explain it. Criminal law demands responsibility and tends to discount motives. Social science seeks causation and tries to clarify motives. Criminal law wants to know whether this person acted rightly or wrongly. Social science seeks to understand a person's circumstances and state of mind when that person broke the law.

Clearly, social science and criminal law represent two distinct logical processes. Not right or wrong, better or worse, just different in logic and intent. Herein lies the heart of the conflict during the sentencing phase. The prosecution will continue to focus on the aggravating factors that the jury used to convict the defendant of capital murder. They will also attempt to deflect the mitigation offered by the defense. The conflict for the jury members is to weigh the aggravating factors against the newly presented mitigating factors. The tension is between the legal right and wrong of the guilt phase, and the newly required moral reasoning at the systems concepts level of the sentencing phase.

Drawing from Figure 1, we can understand the conflict. The jury has found the defendant guilty of capital murder in the guilt phase. In the sentencing phase, they must, by having accepted the forced-choice control of becoming capital jurors, decide death or life as one of the two sentencing options for the defendant they just found guilty of capital murder. As they weighed the evidence for guilt or innocence during the guilt phase, the choice now is to weigh the evidence for death or life in the sentencing phase.

Throughout the sentencing phase, the prosecution and defense teams constantly interact with each other as well as with the judge and the jury. As the defense argues for life, the prosecution counters and argues for the defendant's death as the sentence. Both teams carefully observe each jury member for his/her individual actions or self feedback in regard to their efforts. Both teams also monitor closely the collective outputs of the jurors in regard to each other and the prosecution and defense teams as well as the judge's rulings.
The prosecution argues strongly for a death sentence by execution. The defense argues strongly for a life sentence in prison. The conflict is easily viewed as a war by the prosecution and defense teams to infuse their respective controlled variables, i.e., death or life, into the quality worlds of the jurors. Powers (1973) notes:

Conflict is an encounter between two control systems, an encounter of a specific kind. In effect, the two control systems attempt to control the same quantity, but with respect to two different levels. For one system to correct its error, the other system must experience error. There is no way for both systems to experience zero error at the same time. Therefore, the outputs of the systems must act on the shared controlled quantity (controlled variable) in opposite directions. (p. 254)

In a very real sense, the jury is an exposed population being bombarded by the heavy artillery of the prosecution and defense teams. The rules of engagement are the relevant legal precedents. The overall conflict, engagement, and rules of war are guided by the direction of the judge. The legal irony is that the members of the jury decide which ammunition to take up and they determine the winner of the battle by their sentencing votes.

The frontal conflict is between the opposing control systems of the prosecution and defense teams. Each team is trying to control the same thing - the jurors' votes. However, each team has a different reference signal or picture of what they want the jury to decide. In other words, the prosecution and defense teams each have a reference signal or goal that is incompatible with the other. Each team wants its goal to be realized by the jury.

For the prosecution to win, the defense must experience error or lose. Conversely, for the defense to win, the prosecution must experience error or lose. The prosecution and defense teams both cannot have their reference signals accepted by the jury, experience zero error and get the picture they both want. Therefore, the output of the prosecution and defense teams must both act on the same controlled variable, i.e., the jury in opposite directions: death or life for the defendant. The prosecution needs all twelve jurors to vote for its controlled variables - the aggravating factors and death. The defense needs at least one juror to vote for its controlled variables - the mitigating factors and life.

As are all of the actors in the courtroom, each juror is an independent control system. Each juror must resolve the conflicting perceptual input of the controlled variables of the prosecution and defense teams. These perceptual signals or internal perceptions are represented as analogs or elements of the perceived world and processed in each juror's perceptual hierarchy or quality world. The task for each juror is to integrate these new perceptions into his/her systems concepts and construct an acceptable or positive reference signal or picture of the defendant in his/her quality world. Each juror must be able to accept and use this new reference signal as his/her individual and/or collective vote on the sentence for the defendant.

For the mitigation specialist, the task is often to introduce enough positive mitigating factors to create sufficient error in the jurors' previous quality world perceptions of the defendant. At least one juror, hopefully, will reorganize her/his quality world perceptions of the defendant and think in new creative ways about the defendant's circumstances and personality. If at least one jury member can recategorize her/his perceptions of the defendant at the category level from "a killer to a person who has killed," possibly the homicide will be seen at a lower event level and the mitigating factors can be incorporated in the juror's quality world systems concepts. The defendant can then be perceived as a person who has killed, and also as a person who is worth allowing to live in prison as opposed to being executed. This outcome is the goal of capital sentencing mitigation - a life sentence for the defendant.

References


Creating a Quality School Atmosphere in a Post-Secondary Study Skills Class

Shelley Lautzenhiser Parson

ABSTRACT

Glasser’s Quality School precepts, which originally addressed K-12th grade learning, are highly compatible with the adult learning experience. Based on Quality School theory, the author focused on building a supportive team atmosphere within the study skills classroom. Class activities that aid students in becoming aware of their own Quality World pictures and the development of self-assessment skills facilitate individual success in and out of the adult classroom.

In the spring of 1999, several faculty and staff members of a two year college met together and began learning about Glasser’s Quality School precepts in a CT/RT training session. As one of those involved, I was so persuaded by the ideas that I began immediately to use them in the study skills classes that I teach each semester. While many of us exposed to these ideas and concepts hope that eventually our school will officially become the first post-secondary educational facility to be a “Quality School,” I decided at the very least to unofficially create a Quality School classroom.

Many colleges and universities across the country offer a study skills course, and often this is a required course. In our school it is not required, but is very highly recommended for students who test into two or more “remedial” or review classes designed to bring the students’ skill levels up to program level college work. Often, people returning to school after a period of years or decades of being out of school test into these classes, perhaps because they have forgotten some of the reading, math and writing skills they once mastered. Some students graduating from high school simply do not have the basic math, reading and writing skills that they need to survive in college level classes. Remedial or review classes in our school are called “Basic Skills” classes, and the study skills class is designed to help students do well in these beginning classes as well as later program level classes that they will be taking.

Efficacy of the study skills class in increasing retention rates

The study skills class at Ivy Tech State College covers such skills as reading, writing, note-taking and test taking skills. It also addresses “soft” skills and issues such as relationships, diversity, time management and critical thinking. In a study recently done at our school, results clearly showed that students who needed first level reading or writing basic skills classes were much more likely to stay in school a year after starting classes if they took the study skills class.

We have two levels of reading and writing basic skills classes that students must pass or test out of in order to take college level general education courses. Of 174 basic skills first level writing students in the fall of 1998, 70% of those who took the study skills class with the beginning writing class remained in school one year later, while only 47% of those students taking the writing skills class without the study skills class remained in school one year later.

<table>
<thead>
<tr>
<th>Session</th>
<th>Reading Class with Study Skills</th>
<th>Reading Class without Study Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Spring semester, 1999</td>
<td>Retained in fall, 1999 - 40 students (83%)</td>
<td>Retained in fall, 1999 - 19 students (47%)</td>
</tr>
</tbody>
</table>

Of a total of 107 basic skills first level reading class students, 83% who took the study skills class with the reading class remained in school one year later, while only 42% of the students who took the reading class without the study skills class remained in school one year later.

<table>
<thead>
<tr>
<th>Session</th>
<th>Reading class with Study Skills</th>
<th>Reading class without Study Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall semester, 1998</td>
<td>Retained in Fall, 1999 - 54 students (47%)</td>
<td>Retained in Fall, 1999 - 34 students (48%)</td>
</tr>
<tr>
<td>Spring semester, 1999</td>
<td>Reading class with Study Skills - 24</td>
<td>Reading class without Study Skills - 19</td>
</tr>
</tbody>
</table>

Of 90 students enrolled in the first level reading class in the spring of 1999, 95% were enrolled for classes in the fall of 1999, who took the study skills class with the reading class. However, only 48% were enrolled in the fall semester who took the reading class without the study skills class.

<table>
<thead>
<tr>
<th>Session</th>
<th>Reading class with Study Skills</th>
<th>Reading class without Study Skills</th>
</tr>
</thead>
<tbody>
<tr>
<td>Fall semester, 1998</td>
<td>Retained in fall, 1999 - 35 students (42%)</td>
<td>Retained in fall, 1999 - 18 students (95%)</td>
</tr>
<tr>
<td>Spring semester, 1999</td>
<td>Reading class with Study Skills - 71</td>
<td>Reading class without Study Skills - 19</td>
</tr>
</tbody>
</table>

***(Students tracked in the study received a grade for the first writing or reading class and successfully completed the study skills class.)

Glasser’s Quality School as a learning paradigm

Glasser’s Quality School is an educational philosophy based on the belief that elementary and secondary students learn better when learning is fun, relevant and new knowledge can be immediately used. It also holds that a close and caring relationship between instructor and student aids the learning process. There is strong focus on encouraging the student to develop the ability to self assess work and to identify goals and strategies to meet those goals. One of the key mandates for a Quality School is that the idea is to invite the student to learn because learning enriches his or her life, rather than threatening the student to learn or else “I’ll hurt you” with poor grades, more homework, or detention. Perhaps the crux
to Glasser’s Quality School is his belief that all of us want quality in our lives and that we are capable of performing quality work in a supportive, interesting atmosphere.

I have a bachelor’s degree in psychology, and a master’s degree in adult education. Nothing that I learned in the classes I took pursuing those degrees would indicate that adults have learning needs that in any way conflict or differ substantially from those Quality School precepts. Following are some of the ways that I have worked to incorporate Quality School ideals into the study skills classes that I teach.

Helping students get in touch with their Quality World Pictures

One of the things that I do on the first day of class with my college students is to ask them to think back to a learning experience that was really good for them and identify what made that a good experience. From that exercise we then go forward to identify what we want the study skills class to be.

The following are examples of the lists made by students in the classes I am teaching.

What we want this class to be and to give:
• Opportunities for active, hands-on learning.
• Opportunities to make choices and have input.
• Fun.
• An atmosphere of caring and respect.
• A lively learning experience.
• A supportive and encouraging atmosphere.

What we want from the class is:
• There will be lots of group activities.
• The class will be fun and interesting.
• We will become more successful as students and as workers.
  • Our motivation will be increased.
  • We will further develop group skills.
  • Our self-esteem will increase.
  • We will move further toward realizing our natural potential.
  • We will increase organization skills.
  • The class will be a place of safety and mutual respect.

It is interesting to me that much of these two lists directly reflects the needs that Glasser says must be fulfilled in a Quality Learning environment.

Creating a friendly, team-feeling in the classroom

Glasser states that students learn better when the atmosphere is friendly and supportive. Often, businesses report that employees come to them with adequate or better technical or professional skills, but without the people skills, the ability to work together toward quality outcomes that the employers are seeking. In the study skills class, I work to help students build their interaction skills, their team-skills, and their ability to work together toward a common goal that allows for that crucial effect called synergy.

In order to create a friendly team feeling within the classroom, I try to quickly help students feel comfortable with me and with each other. The first day they talk with each other in groups of four, sharing names, majors, goals and things that each student likes and something he/she does well. I also give them an assignment for the following two classes. All students are to make a “pictorial presentation” and share it with the class. They are to show pictures (photos, magazine cut-outs, hand-drawn) of important people in their lives, accomplishments, happy times, and representations of future goals. I tell the students about Glasser’s concept of the Quality World, and how this activity helps us get in touch with what is important to us, and helps us to get and to protect those things. Also this activity helps us to understand and appreciate each other, to learn about the similar goals we share, and also to see the uniqueness inherent in each of us. Initially, I am helping the students get in touch with what they want, and then I move toward helping them identify what they are doing to get what they want, and to self assess, to see if what they are doing is working. By nature, a study skills class helps students identify and build on skills that can help them get closer to attaining future goals. In fact, our class is called “College and Life Success Skills.”

I have found that the work that we do in the beginning of the class to build a trusting, friendly team-work environment pays off, in that there are just no “behavioral problems” that get in the way of the learning experience. Perhaps the reader may be thinking, “well, those are adults, of course there are not problems,” but adult students are just as capable as their younger counterparts of talking when listening is what is called for, of shunning a student that doesn’t seem to fit in, or of finding ways of showing a lack of respect for the instructor or other students. I can honestly say that in my experience, those things just don’t happen in a class where the time has been taken to help students build a team-like supportive atmosphere.

Including everyone in that class team

One semester, I had two students in my class that I was afraid would detract from the total learning of the group. One student had been diagnosed with autism, as well as having an epileptic disorder, and together, these conditions had profoundly and negatively effected his past educational experiences. We do much of our work in small groups, and in fact, all quizzes are done in groups. Immediately, this man’s very intense, slightly hostile, and dogmatic interaction style made group work frustrating. The students, however, managed to challenge ideas and points of view, without challenging his right to be in the classroom, or even in their groups. I believe this was a choice, following the conversation we had in the class about the importance of diversity, and the attitude of respect that we as a class wanted to hold as a value in our classroom. Somehow, this man seemed to be what we have unaffectionately termed, in our society, a “loser.” He had shared in class that he had finally (at the age of 38) gotten his driver’s license, “a goal I had all my life” during his Pictorial Presentation. Quickly, it was apparent this man was “different” than the others in the class. In another presentation, where I have students share one thing they are really
First of all, I wondered if incumbent on me as an instructor, in giving over the grading class self-graded. This was an enormous step for me. Toward this end, I have made all work in the Study of us who partake in life - I have made it a large focus in the picture. A key success skill for students, workers, family members - all help students see themselves as part of their Quality World that one of our most important responsibilities, as well as our privilege as teachers within the Quality School world, is to celebrate our differences, is a wonderful way of helping students see themselves in their Quality World picture. I think that that day this man stepped into his own Quality World picture! Because our class milieu had allowed him to be heard with an open mind, he was one of us, and maybe for the first time, one of any class! A little later in the class we did something I call the synergy quilt, where each student has a "quilt piece" that every other student writes on, identifying something special that made that student important to the class. This man did not read his quilt piece, and when I asked him if he had enjoyed the activity he said he didn't know, and hadn't read his piece. He showed it to me, and I (somewhat timidly) read to myself what the students had written. Soon I began reading aloud, for student after student had written that they appreciated his honest sharing in class, and that they had enjoyed his presentation on golfing. Soon, the man was grinning and took the paper from me so that he could read it for himself. I think he was afraid to read it before. Another student was deaf, and had an interpreter for the class. However, he would try to talk and to share in the class, and in the groups, but it was very difficult to understand what he was staying. I wondered how his group would cope, and how he would be able to manage. The class was always considerate and patient, and the groups went well, with the aid of the interpreter. However, there was no real comradery between this man and other students, no laughing give and take, common between the other students. It was time for this man to give his speech on what he did well. He also brought in newspaper clippings and trophies he had won for football. It turns out he was a star student on the football team in a local high school, setting a number of records to date unbroken. Suddenly this man, too, was shining in the class. People were enthusiastically asking questions and sharing stories. He was in his quality world, and everyone saw him there! He was also a part of the class quality picture. Facilitating students in seeing themselves in their Quality World picture I believe that that exercise, asking students to share what they do well, which we cover in the diversity chapter, as we celebrate our differences, is a wonderful way of helping students see themselves in their Quality World picture. I think that often people who have been on the "losing" side of life too many times, for whatever reasons, have trouble seeing themselves in their Quality World pictures. It is my belief that one of our most important responsibilities, as well as our privilege as teachers within the Quality School world, is to help students see themselves as part of their Quality World picture. Toward Self-Assessment Because self-assessment, the ability to identify what you are doing and if it is working in getting you what you want, is a key success skill for students, workers, family members - all of us who partake in life - I have made it a large focus in the classroom. Toward this end, I have made all work in the Study Skills class self-graded. This was an enormous step for me. First of all, I wondered if I was forsaking an activity that was incumbent on me as an instructor, in giving over the grading to the students. Second, I didn't know how to do it. I had never even heard the term "Rubrics" when I began CT/RT training, and I thought they were referring to the Rubik's cube at first! Last semester I took the plunge, acknowledging to my class that this was new for me, too, and we would work together to make it happen. I had the students take quizzes in groups, and then rate the group's performance, and then their performance within the group. For example, on the writing chapter quiz, I had the group work together to write a paper about a specific subject, using the correct writing form as discussed in class. The students were then asked to review their work looking for specific things such as an introductory statement, and a summary paragraph. As a group, they reviewed their work and gave themselves points based on whether these things were included, but then students were also asked to rate themselves on whether they had added to the group performance. Such self-rating questions included whether they had sought out input from each member of the group, and whether they had offered comments and feedback in the group process. The midterm, also self rated, was in two parts. First, I asked them to create their own mission statement (this could be done in any form they wished, with art, prose, straight paragraphs, and so forth). Second, they were asked to identify how they had prepared for tests/midterms for other classes, what worked, and what they might do differently next time. I ask them in their ratings to look for objective points, such as did the mission statement reflect personal goals (a part of the assignment), or whether the review of test-taking strategies was specific, listing a timeline of their study periods. I also asked them to subjectively look at their work, rating it in terms of quality, and identifying what they might have done differently. I found that again and again my students continually performed at a higher rate of quality than they had in previous semesters. I believe that inviting students to perform quality work and then asking them to evaluate their own efforts shows respect for their own abilities and creative processes. I also believe that learning the ability of self-assessment is germane to success in all areas of life. The students in my class learned to evaluate their own efforts, and to define and pursue quality work. For me as a teacher, this was a taxing but rewarding effort. Conclusion I have enjoyed and been challenged by the efforts that I have made to have my study skills class reflect Quality School principles. The feedback that I get from students is that they have learned much about themselves, they have learned much about working in groups, and have learned to assess their own efforts in a way that makes sense to them. I am eager to share the work I have done in the past year within the college level study skills class. If others are also pursuing the development of Quality School practices in the post-secondary classroom, I would be most interested in learning about their efforts.
Helping Children Make Choices for Life: Glasser’s Choice Theory at Work in A Third Grade Classroom

Constance M. Wittek


ABSTRACT

A brief description of the application of RT/CT in a third grade classroom.

One lovely morning last May while my own third graders were at music, I tuned in on the second grade PE class in progress just outside my open window. Most of the twenty or so students seemed to be “doing their own thing,” not focused on the game being explained –

• One was screaming out an imitation of the BeeGees’ “Stayin’ Alive,”

• Another shouted, “I don’t get this game!” to nobody in particular,

• And a third responded, “I understand it perfectly.”

It was at that moment that I confronted the reality of the upcoming group of students I would be teaching.

Every few years I have been challenged with a group of individuals who are, in some way, more “needy,” (whether academically, behaviorally, or socially,) more volatile than most. This would be one of those years.

I decided last spring that it was time to be proactive. I needed to invest time in my own philosophy and style of classroom management. I wanted to be “armed and ready” for this group. In previous years I sometimes had felt worn down and out of ideas by November. I was determined to be better prepared this year.

Having raised three children and taught a total of ten years, I felt as though my approach to discipline was respectful and consistent. However, when it came to the fine details of managing an entire classroom of sometimes challenging kids, I felt inadequate and ill-equipped. I definitely needed more thought and theory behind what I did.

A bit earlier in the spring of 1999, I had been exposed to William Glasser’s Choice Theory in a mini-workshop offered in my graduate program. I immediately recognized its value for guiding third graders toward being more responsible eight and nine year olds, both in their quality schoolwork and in their behavior choices. I recognized that this approach could more effectively equip third graders with important life skills like:

• Valuing internal motivation;

• Evaluating their own behavior choices in a systematic, non-coercive way that leads toward maturation and positive growth;

• Formulating simple, realistic plans for changing one’s own behavior.

I spent the summer reading works on Choice Theory (CT) (previously called Control Theory), Reality Therapy, and Restitution by Glasser, Kohn, Gossen, Kronenberg, and others. In addition, I took a one-week course on Choice Theory that really helped me become grounded in the principles and gave me some practical experience.

Change is difficult

When my students arrived this past September, I felt better equipped to guide and encourage my new students toward positive behavior choices as well as maximized learning based on intrinsic motivation.

I learned all too quickly, however, that change is difficult, not only in my students, but in myself as a teacher. I have been constantly reminded that the ways that I respond to my students are not always consistent with what I believe. Even an “expert” like Gossen admits that she handles situations with students or with her own children from a choice theory perspective only about fifty percent of the time. (Gossen, 1996).

Beginning the Process

On the first day of school this past Fall, we began with a community-building activity and then each student completed a sheet with six question on it:

1. Who are you?

2. What is most important in your life?

3. What do you want your teacher and classmates to do for you this year?

4. What do you not want your teacher or classmates to do for you this year?

5. What will you do for your teacher and classmates this year?

6. What will you not do for your teacher or classmates this year?

Using chart paper, we recorded responses to each of the questions.

This exercise led nicely into the next day’s task. We brainstormed a list of “Ways We Want Our Class To Be.” I encouraged students to think of qualities of the “perfect” third grade classroom. Their list included being respectful toward each other, having fun, using time well, working hard, doing our best work, listening, being organized. They thought of everything.

I typed their ideas and had it duplicated. I “chose sticks” (tongue depressors with each student’s name on) to assign random partnerships. Pairs were asked to agree on and then circle three to five choices which were the most important to
them. I distributed small strips of paper to each pair. They were instructed to write each of their top choices on a strip of paper. When they had finished, they taped their strips onto the chalkboard.

The process that followed proved to be extremely valuable and highly focused for all of us. I again used the "sticks" to randomly choose students to go up to the board. The first task was to stack all paper strips that were the same. Once everyone had had a turn, all sticks went back into the cup to begin choosing again. Everyone had at least three turns.

Once ideas were sorted, I asked students to group similar concepts. Masking tape rolls on the backs of the strips made it easy to move them around. Higher-order thinking was definitely evident as students came forward to explain why they thought certain concepts belonged together. In the end, three overall areas evolved: 1.) being positive role-models, both in our actions toward each other and in our quality schoolwork; 2.) being respectful toward ourselves and others, toward God (we are a Catholic school), and toward property; and 3.) having fun.

The group agreed on these final three areas. From this process, our Class Belief Statement was born. All students and I signed the final copy, acknowledging agreement about our beliefs. I had it blow up, poster size, for our classroom wall.

A Daily Reminder

Every morning after prayer and the pledge of allegiance, we recite our Belief Statement or Class Creed. It’s not something we talked about long ago and then forgot. We remind ourselves daily in this formal way as well as in all the informal references that we make when discussing behaviors.

Room 107’s Classroom Belief Statement
1999-2000

We, the teachers and learners of Room 107, agree that together we will make this year the best third grade experience possible for all of us.

- We agree to act as positive role models, both in our actions toward each other and in our quality school work.
- We agree to be respectful
  - toward ourselves and other people
  - toward God
  - toward property
- While doing all these things, we also agree to have fun!

I typed another poster which contains all the ideas on the strips of paper that we had organized. It takes the format of stating what each of the major points of our Creed would look like in our classroom. For instance, it asks, What does ‘acting as a positive role model in our actions toward each other’ mean?

- I will be forgiving
- I will share my talents
- I will be cooperative
- I will be friendly, helpful, and gentle.

This addendum to the Belief Statement serves as our classroom rules. We refer to it often.

Students were asked to evaluate the process of writing the class belief statement in a questionnaire. Responses were positive. Students indicated a sense of ownership of our Belief Statement. Fourteen of eighteen students felt the document was written by them or by the combined efforts, of themselves and me. A similar number felt strongly that they could live by our belief statement.

Over the next week or so my students and I created three “Above-the-Line / Below-the-Line” Behavior posters (8½ x 11 on bright colors) for our classroom wall. (Kronenberg, 1997). Each was specific to a certain situation: Mass, bathroom, and outside “jungle-gym” area use. Now, when questionable behaviors arise, just asking whether the action was “above the line or below the line” is sufficient. No additional posters for every situation that comes up have been necessary.

Teaching Choice Theory

At this point, I introduced my students to some of the basic principles of Choice Theory (CT). They learned about the five basic needs, and then the four components of all behaviors (thinking, feeling, acting, and physiology). These led into a discussion of our Behavior Car. The two behaviors that we have the least control over (feelings and body talk or physiology) are like the back wheels, and the two behaviors we can control (thinking and acting) are like our front wheels. We don’t want to “spin out of control on our back wheels”.

Lastly, we shared ideas about making a plan to fix one’s mistake. (Glasser, C., 1996).

Problem-Solving Worksheet

Next I introduced the Problem-Solving Worksheet, which I had been modifying to suit my students’ needs. (Refer to Figure 1.)

My school (K-8) has a written, official “discipline” approach based on 15 behavior expectations. We have created age-appropriate forms to assist students in evaluating their behaviors. Third graders most often used the “Stop-Think-Plan” (STP) sheets which, while good, left something to be desired. Students viewed the STP as a punishment, and saw completing it and getting the required parent signature as the end of the process.

I have found that our “Problem-Solving Worksheet” is viewed more as a new beginning, not an end. It has become a useful tool for creating a plan, not a punishment. To date, two parents have requested a white copy of the form for use at home. One dad’s comment was, “We spent a lot of quality time talking because of this.”
PROBLEM-SOLVING WORKSHEET
My Plan for Solving Problems and Getting What I Need
(Radio Station WDHP)

Name __________________________
Date __________________________

1. What did I **Want** when the problem started? __________________________

2. Which *need* goes with what I want or wanted? (Circle one.)
   - Love & Belonging
   - Power
   - Freedom
   - Fun

3. What was I **Doing**? __________________________________________

4. What do I/we believe about this behavior? (Read over our Belief Statement on the back before you write your answer.) __________________________

5. Is what I am doing **Helping** or **Hurting** my chances of getting me what I want? __________ Could I have done worse? _________

6. Do I want to fix (repair) my mistake? ____ How can I fix it? __________

7. What is my **Plan** in case something like this happens again? __________

8. Do I want help? ______ If so, what help? __________________________

9. Will this plan help me be the kind of person I want to be? ______________

10. How will we know this plan is working? ______________________________

11. I tried my plan today. How did it work out? __________________________

____________________________________  __________________________
Parent/guardian signature               Date

Comments: (use other side, too)

(1-00 C. Wittek; based on Wm. Glasser’s Choice Theory)
Choice Theory In Action

Another instance when our Belief Statement and this worksheet were very helpful occurred in November. I was out ill that morning and one of my students came running up to the sub in tears, saying that classmates had told her that another classmate had been flicking our pet hamster (which she had donated to our classroom) in the head with his fingers.

Wisely, the sub removed the hamster from the classroom until I could deal with the problem. I decided this was a serious enough situation that the offender’s parent was asked to come in for a conference. The student completed the problem-solving worksheet and decided, on his own, that he wanted to write a letter of apology and read it to the class. The parent agreed that this would be a very brave thing to do, and that it would certainly help the student to feel more like the kind of person he wanted to be. (We also agreed that the student would not touch the hamster or other classroom pets until some to-be-determined future date.)

When this student read his letter of apology to the class, there was a quiet moment, and then everyone spontaneously burst into applause of support. What a growth-filled experience this was for all of us. (The hamster seems to be doing just fine, as well.)

Additional applications of Choice Theory in my classroom this year include:

- Using characters in children’s literature to talk about needs, how a person is trying to satisfy his/her needs, is it working?, etc;
- Frequently encourage students to evaluate “how the group did,” for instance, going through the hallways, after bathroom breaks, at the end of an activity.
- Role-play fictitious situations and discuss using Choice Theory vocabulary (“spinning on her back wheels,” What does she need? Is his behavior helping or hurting his chances of getting what he needs?)
- Conduct class meetings to problem-solve, explore theoretical situations, share situations when CT techniques were helpful.

Perhaps the most valuable aspect of Choice Theory for me as an educator has been my ability to focus on those few students who are really struggling in third grade, whether academically, behaviorally, or socially. My observations have zeroed in on signs of “unmet needs.” I have been much more consistent in trying to create conditions that meet those needs and facilitate his or her learning.

Although I have only a half-year’s experience using these techniques in my classroom, I am confident that this group is exhibiting growth in personal responsibility for both learning and behavior. A few positive comments by previous teachers as well as some parents have reinforced my observations.

Making Connections to Current Educational Thought

Since focusing so intensely on Choice Theory, I have found numerous other aspects of current educational thought that support its core tenets, the five basic human needs: survival, love and belonging, freedom, power, and fun (Glasser, W., 1986).

For example, current brain research supports the importance of teaching to a variety of learning styles and intelligences, and giving students choices in order to demonstrate learning. These all support the concept that everyone has a need for freedom (choices).

All the support for building community in the classroom and teaching students to work cooperatively in groups reminds us that learning cannot take place within a negative environment (Schaeffer & Bratter, 1990). Community-building and cooperative learning in the classroom support Glasser’s thesis that “love and belonging” are essential basic human needs.

The use of authentic assessment tools like rubrics gives each student a sense of control (power) over his/her own learning. Students know the expectations and take responsibility for their own learning.

The final of Glasser’s five basic needs is “fun.” A constructivist approach to teaching and learning certainly incorporates this.

In late September of this school year, I shared my interest in Choice Theory with colleagues during a one and one-half hour inservice. There is substantial interest in continuing this exploration of Glasser’s theory. Like me, many of my coworkers see Choice Theory as a further refinement of what we already do at our school.

If this approach to classroom management and personal motivation were applied throughout our school, I believe its effectiveness would be compounded. I see Choice Theory as a way of approaching one’s life in a responsible, thoughtful manner. Its usefulness is evident for family life as well as school.

I am grateful for that warm day last May when I first encountered this year’s students. If the sun hadn’t been shining, and I hadn’t opened my window, I might never have begun this journey:

References


Constance M. Wittek
Is a member of the Eagan-Apple Valley Learning Community.
She can be reached at IHM-St. Luke’s School, 1065 Summit Avenue, St. Paul, MN. e-mail: nwittek@ties.k12.mn.us
Interviewing for Adolescent Substance Abuse Using the Reality Therapy Orientation

Karen Mottarella

The author is in the Department of Psychology at the University of Central Florida in Orlando.

ABSTRACT

This brief paper discusses how a reality therapist can maximize use of the clinical interview to assess for adolescent substance abuse while simultaneously using the interview as a powerful tool to introduce the adolescent to the underlying principles of reality therapy. The focus of this style of clinical interviewing, which includes exploration of the client's current unmet needs and unhealthy choices, begins the process of suggesting to the adolescent that he/she can make healthier choices that lead to need-fulfillment.

Interviewing for Adolescent Substance Abuse Using a Reality Therapy Perspective

The reality therapy model has demonstrated success in treating adolescent substance abuse and other behavioral problems (Glasser, 1984). For the specific assessment of substance abuse, however, no one standardized instrument has been adopted for widespread use (Evans, 1998), and consequently the traditional clinical interview remains paramount (Naaken, 1989). The reality therapist views this interview as a valuable opportunity to introduce the adolescent to the principles of reality therapy.

In the clinical interview as well as the subsequent therapy process, the reality therapist focuses a great deal on present events. The past is explored, but only to put the client’s present into its context. Unlike many other treatment approaches, the primary focus even in the clinical interview is on the present because the reality therapist emphasizes that what the client can change is now. Unlike other treatment approaches, the interview also focuses primarily on the client’s behavior and cognitions, more so than on exploration of feelings (Glasser, 1965). When the adolescent reports unhealthy choices including substance use, the therapist does not convey criticism or punitive messages because these only reinforce the adolescent’s defeating ways of being. Instead, the therapist continues to probe how behavior fits with the adolescent’s expressed goals and needs.

Maintaining present and future-orientations, the clinical interview begins the process of exploring what the adolescent is doing currently, and whether present ways are working for him/her: “Does your present behavior have a reasonable chance of getting you what you want now, and will it take you where you want to go?” These questions are introduced in the clinical interview, and subsequently repeated and re-phrased throughout the therapy process so that the client begins to identify the behavior and choices that are not getting him/her where he/she wants to be (Abbott, 1980; Wubbolding & Brickell, 1998). The interview process determines what needs of the client are not being met; and based on this, allows for formulation of a plan for change with the client. Thus, a young client’s substance use is seen as a choice that reflects unmet needs (Mainous, Martin, Oler, Richardson, & Haney, 1996), and the clinical interview helps identify what these needs are.

It is important for the reality therapist to recognize that for the adolescent who is abusing substances, the abuse is being perceived as need-fulfilling. Youngsters often indicate that substance use fulfills a need for fun, satisfies curiosity/boredom, and provides pleasure. The adolescent with poor social skills, shyness, or low esteem benefits from substance-induced behavioral disinhibition. Quite often the youngster’s relationship with substances can be characterized as compensatory to cope with underlying dysphoric emotion and skill deficits (Nowinski, 1990). This explains why young clients often do not identify substance abuse as the problem in the interview (Evans, 1998), but instead indicate problems in relationships and their performance at home and school as the main issues. In subsequent treatment with the adolescent, a reality therapist’s emphasis will not be on the substances so much as on faulty decision making, and the client’s responsibility for dealing with situations and unmet needs more successfully (Abbott, 1980). The therapist also keeps in mind that adolescents will choose to “fail” when they perceive that they actually get more of what they want through failure. For example, “success” in school may pave the way for increased demands being placed upon the adolescent by authority figures or for a career that the adolescent does not want (Glasser, 1970, p.30).

Even though the reality therapy-based treatment process will focus extensively on replacing substance use with healthier choices and need-fulfilling behaviors, the nature and extent of the youngster’s present substance abuse must be assessed thoroughly and directly in the clinical interview to determine the existence, extent, and intensity of use (Griffin, 1991). However, fitting young people neatly into the adult-oriented DSM diagnostic criteria for the Substance Use Disorders (American Psychiatric Association, 1994) can be tricky. Two key diagnostic questions can be particularly helpful to differentiate adolescent abuse, abuse, and dependence for the purpose of treatment planning. The first is whether the adolescent has tried to cut down or quit and failed. The second key diagnostic question is whether compulsive use is present as evidenced by continued use that is causing or maintaining major problems (Naaken, 1989, pp.76-77).

In the interview, the clinician should also recognize that the adolescent’s responses to questions about substance use are likely to be unreliable. Youth and adults alike tend to underreport. Even with “voluntary” or “motivated” clients, there is shame and embarrassment. The adolescent, in particular, also fears punishment.

Because of the unreliability of self-report, behavioral observations can be very important. When asked directly about substance use, adolescents often seem unable to resist a “conspiratorial smirk” which often confirms use. Moreover,
severe drug abusers and those with addiction often display conditioned behavioral responses elicited when talking about a substance. They may evidence, for example, an increase in agitation, facial flushing, fidgeting, or drug-related behavioral habits (Evans, 1998).

Medical toxicology tests and the reports of parents and others can also serve as invaluable sources of information in order to acquire an accurate picture of the use and related behaviors (Evans, 1998; Kaminer, 1994). Before turning to external sources for information, however, a relationship should be fostered with the adolescent as trust is of paramount importance for therapeutic change. If the youth feels that the therapist and others are simply conspiring to “narc” on him/her, no progress can be expected. When the clinician does interview parents and other members of the child’s social system, the reality therapist views this as a valuable opportunity to urge parents to be negative about the actual drug use but warm/positive toward the child. It is often rejection from the parents, and not the actual substance use, which leads the child to even more unhealthy choices and behaviors.

Thus, from the reality therapy perspective, the clinical interview has dual purposes. While it is a crucial tool to gain valuable information about the nature and extent of substance use for treatment planning, the interview also serves as a powerful means to introduce the client to the reality therapy principles. Even in the clinical interview, the reality therapist emphasizes the present. This focus, which includes exploration of the client’s current unmet needs and unhealthy choices, begins the process of suggesting to the adolescent that he/she can make healthier choices that lead to need-fulfillment.

References
BOOK REVIEW


Thomas Edward Bratter

The author is the head of the John Dewey Academy in Great Barrington, Massachusetts.

It is appropriate Masson, who paid his professional dues by being ex-communicated by the Freudian Society when he disputed Freud’s honesty, is correct to describe Breggin as a “hero.” Masson can advise Breggin how it feels to be a pariah shunned by colleagues because this is the fate which surely awaits the author of Talking Back to Ritalin. Glasser, a major endorser of this book, like Masson, has outraged the same organizations by challenging in-vogue psychoanalytic and psychiatric principles which with the passage of time have fallen into disrepute. To a lesser extent, I (Bratter, 1974) and Casriel & Bratter (1974) provoked the wrath of the medical and psychiatric cartel, being among the first to condemn the myth of the never substantiated metabolic theory which justified prescribing methadone for heroin addicts.

Breggin’s book will alienate and antagonize the American Medical, Pharmacological, and Psychiatric Associations, the pharmaceutical consortium (especially CIBA-Gigy, manufacturer of Ritalin, and Eli Lilly, manufacturer of Prozac), and the Association of Children and Adults with Attention Deficit Disorders (CHADD) which has accepted generous grants from CIBA-Gigy part of the Novartis gigantic international corporation, and the Federal Food and Drug Administration (FDA). By martyring himself, Breggin has accepted a critical heroic, herculean challenge: To convince those who pejoratively prescribe Ritalin to treat hyperactivity to pause before medicating children and adolescents.

Talking Back to Ritalin needs to be mandatory reading for three groups. First: Physicians and psychiatrists who prescribe amphetamines and methylphenidates. Included would be psychologists, social workers, guidance counselors and reality therapists, who inadvertently join the conspiracy to medicate, dogmatically believing medication to be the 21st century panacea to all inter/intrapersonal problems. The search to discover a “magic pill” to solve personal problems is simplistic and doomed to fail much as was Ponce de Leon’s futile search for the fountain of youth during the 1600’s. The reason is obvious. Despite the placebo effect, ingestion of a pill does not cure noxious narcissism, anti-social attitudes, nor produce self-respect. This book will infuriate the potent pharmaceutical industry which makes billions of dollars duping the public to think impulsive, immature, and irritating acts can be cured medically. Second: Parents whose children and adolescents already are medicated or contemplating medicating. At the very least, Breggin’s meticulous review of the literature indicating numerous counter indications for Ritalin and its history will provide these families with an arsenal of information to force physicians to justify prescribing a potential, potent poison. Third: School personnel (especially those who work in quality schools), overwhelmed by overcrowded classrooms, will realize some of the behavior attributed to ADD or ADHD is age appropriate. Teachers, who label students hyperactive, will learn Ritalin is not benign and there are no quick pharmacological solutions to management problems. Glasser (2000) advocates a drug-free, medicine-free school environment:

We believe that the current accepted concept that clients are victims of mental illness caused by a neuro-chemical imbalance over which they have no control [italics in the original] is wrong. If it were true, no psychotherapy could be effective. The so-called neuro-chemical imbalance that is cited as the major cause of mental health is a myth. The brain is not defective. Its chemistry is normal for the behaviors clients choose. Brain drugs, such as Prozac, may make clients feel better but cannot teach them how to connect or reconnect with people they need. (p. 24)

Most insidious when receiving the label of ADD or ADHD, no one is held accountable. Since the brain is “defective”, the youth often is excused for dysfunctional and dishonest behavior and therefore, not held accountable for actions and attitudes.

Forced to teach from a sterile and obsolete curriculum, teachers, who are boring and "burned out," escape blame. Overwhelmed by personal problems, parents are excused for not helping children learn self-control and the love of learning. The ADD label supports the frightening conspiracy by neurological psychiatrists who attribute this concentration problem to a disorder which can be treated medically and in so doing relieve the adolescent from taking control. Clinicians no longer take the time nor are trained how to ask realistic questions such as: “Does distraction occur because there is insufficient intellectual stimulation?” “Are there realistic explanations for behavior and attitude patterns?” “Do multiple tasks challenge or frustrate?” The only valid test for ADD is whether the student can concentrate for more than a half hour without being distracted in any activity. Either the adolescent is ADD or not! Concentration is not selective. It is not unusual to discover the student can listen to music, watch a movie, work on a computer, converse with friends and family members for prolonged periods of time which, if known, would disprove the ADD diagnosis. How do those who claim ADD to be a disease explain that most individuals “mature” and do not need medication after leaving the oppressive-repressive environment of the school?

Generally, ADHD is based on the complaints by the school the student is out of control, cannot concentrate, and/or is disruptive. Psychiatrists rarely take the time to confirm the validity of teacher observations before prescribing. This problem has been exacerbated by what Goode (2000) has described as:
Even when doctors prescribe medication in an... attempt to help a very depressed child, they are operating in a data vacuum; little is known about the effects of psychiatric drugs on the developing brain or the long term impact on social relations, academic achievement or personality in young children who take such drugs. And most of the medications have not been specifically tested or had their dosages calibrated for young children. (Section 4, p. 5)

Strangely, public outrage has been muted despite Kauffman & Julien's (2000a) discovery that the “Pharmaceutical industry's spending for research outside their own labs - including both academic sites and private research companies - increased in the 1990's at a rate of six times faster than the growth of federal grants.” These reporters warn, however, "Drug companies...make it very clear what the results better be if you want any more money from them." (p. A10)

The FDA is not a bastion of integrity because this government bureaucracy violates its mandate to protect consumers. While beyond the purview of this review, frequently, the FDA has been forced to withdraw medication after approval because it proved to be deleterious and toxic. The most recent blunder was after granting "fast track approval" for Resulin, a diabetes pill, in 1997, less than three years post hoc in view of 63 liver-failure deaths, the FDA forced Warner-Lambert/Pfizer to remove this potentially lethal drug from the market. Currently, Avandia, similar chemically to Resulin, still remains approved. Astonishingly, this government bureaucracy has escaped scandal despite many massive class action law suits regarding thalidomide, Redux (dexfenfluramine), “fen-phen” (phentermaine and fenfluramine) to mention only a few.

The diagnosis and treatment of ADD/ADHD is a lucrative industry. The process of approving medication has been corrupted by medical corporations which sponsor academic research, while not only compensating scientists, but also making substantial payments to universities for "overhead" and improving facilities. Kauffman & Julien (2000b) assert that:

The FDA also relies heavily on the same academic researchers who have taken money from the industry, giving the agency a conflict of interest...When new drugs...show promise and prove worthy of full scientific hearings, the agency scours academia for top medical minds...whose recommendations in favor of a drug are almost always accepted..." (p. A8)

These reporters reveal that Congress inadvertently contributes to the conspiracy against the consumer. "The FDA long criticized for its slow pace in approving drugs, began facing pressure in the 1980's to get new therapies quickly into the hands of doctors. By the end of the decade, Congress...transformed the FDA from an adversarial agency into a kinder, gentler bureaucracy [which treated] pharmaceutical companies...as 'stakeholder.' " (p. A8)

Breggin complains "while hundreds of studies have tried to show Ritalin is effective, very few have aimed at identifying adverse reactions. Investigator bias in favor of drugs...encourage the overwhelming tendency to look for good effects rather than bad ones.” (p. 19) Breggin assumes the role of an investigative reporter and corrects this observation by documenting one hundred studies, many of which have been done by the most respected medical researchers and organizations and reported in the most trusted professional publications which support the ominous, but ignored, FDA warning, “Ritalin should not be used in children under six years old, since safety and efficacy for this age group have not been established...Sufficient data on safety and efficacy of long-term use of Ritalin in children is not yet available.” Since the FDA believes Ritalin has the potential to be dangerous, why is this medication used? Zito’s study in The Journal of the American Medical Association documented at least 1.5% of infants between the ages of two and four were medicated with stimulants, anti-depressants and anti-psychotic drugs, despite the alarming reality there is no test confirming safety and long-term effects.

Too many physicians prescribe Ritalin on the basis of complaints by parents and teachers about overzealous children which is similar to giving antibiotics to a whiner who has a cold, not an infection. Recognizing the massive abuse, in May 2000 belatedly the American Academy of Pediatrics finally will issue guidelines identifying ADD/ADHD!

There is no doubt whom Breggin wants the reader to believe when quoting Wender (1995) who writes "genetically transmitted psychiatric disorders are [similar]...I believe that ADHD might be like the disorders of hemoglobin synthesis, such as sickle cell hemoglobin C, and the thalassemias of which there are at least 300 forms, of the more than 200 variants of glucose-6-phosphate dehydrogenase.”

Mender (1994) puts this problem into perspective when asserting:

Neuropsychiatric methods, particularly those based on medication, foster an atmosphere in which the doctor takes control instead of helping the patient control himself as much as possible. Surrender of personal autonomy by patients can have profoundly negative consequences. Since physicians are only human, and since any one of us runs the risk of falling ill, giving doctors too much control over patients opens all of us to errors in treatment. Such mistakes may involve physical manipulations undertaken in ostensible interests of patients. (p. 29)

One of the strengths of Talking Back to Ritalin is its author possesses the expertise to support his assertions by quoting the research, though undoubtedly Breggin’s many critics will contend he took statements out of context.

The subtitle states succinctly the author’s primary goal which he achieves admirably. While critics hoped this psychiatrist would vanish, he has not. Breggin (1999a & b) continues his noble crusade exposing the scandal of treating ADD/ADHD with methylphenidates. He is like David who slew Goliath with a sling shot using research as his weapon. Rather than remaining a solitary Quixote-like figure in this titanic struggle, others join his crusade. Time will tell if Breggin will be the anathema to the pharmaceutical industry as is Ralph Nader to the car cartel.

Approved by the FDA more than a half century ago, Ritalin has been used to treat “hyperkinetic” youth, formerly thought to suffer from “minimal brain dysfunction” (MBD),...
and most recently diagnosed to be Attention Deficit Disordered (ADD) or Attention Hyperactive Active Disordered (ADHD). Having documented the existence of cognitive toxicity produced by prolonged use of Ritalin, Breggin asserts no researcher “has attempted to confirm whether or not the brains of children can recover from the malfunction inflicted by amphetamines.” (p. 49) Almost a quarter of a century ago, in often quoted, rarely challenged, Rie, Rie, and Ambuel (1976) contend Ritalin interferes with learning. The author of Talking Back to Prozac warns, “the notion of a biochemical imbalance in the brains of children diagnosed with ADHD is wild speculation.” (p. 172) It is important to note since there was increasing consternation about adverse effects of Ritalin such as violence, psychosis, dysphoria, and excitability in 1968, Sweden prohibited its use. In 1971, the World Health Organization concluded Ritalin and other stimulants are the “most addictive drugs in medical usage.” The same year, the U.S. Department of Justice affirmed the findings of WHO. During the 1970’s, Japan had an epidemic of amphetamine addiction. Ignoring these disturbing data, it is estimated almost 10,000,000 children and adolescents in the United States currently take Ritalin. Breggin is right when concluding:

More than four decades have confirmed that addiction and abuse are a serious problem with the amphetamine and amphetamine-like stimulants used in the treatment of ADHD... The increasing availability of these drugs to so many people has resulted in a new wave of stimulant addiction and abuse among American children who obtain the drug illegally. It is shocking that many ADHD/Ritalin advocates continue to deny the addictiveness of the stimulants and to show very little concern about making these drugs available to so many children, their families, and their friends. (pp. 66-67)

Assuming Breggin’s assertions are correct, it is scandalous Congress has failed to investigate the existence of a massive pharmaceutical conspiracy with the FDA to misrepresent by ignoring the inherent dangers of Ritalin. It would not be the first conspiracy in which the government has participated. The car industry bribed politicians to vote against establishing public transportation to increase car sales, hence profits. In 1998, tobacco industry executives who issued fraudulent assurances nicotine was not addictive have escaped prosecution. There exists an unholy financial alliance between Novartis and CHADD whose membership is parents whose children have ADD/ADHD, mental health professionals, and educators. Despite obvious conflicts of interest, CHADD continues to solicit funds from pharmaceutical corporations. In the 1999 newsletter “Inside CHADD,” it is reported “Alza Pharmaceuticals has agreed to fund the production of a new member resource manual...[which] will include the fact sheets, as well as articles addressing many issues families face when dealing with the disorder.” (p. 1) CHADD ignores Alchoholic Anonymous, whose integrity is beyond question because this self-help organization refuses to endorse any political/philosophical cause, no matter how legitimate such as Mothers Against Drunk Driving (MADD). In 1994, CHADD incrediby petitioned the Drug Enforcement Administration to down-grade Ritalin from Substance II to III because it “is not a dangerous and addictive substance, and in fact is a beneficial and relatively benign medication which assists millions of children daily.” Breggin's comment is well worth noting. “This...conflicts with three decades of widespread Ritalin abuse and addiction.” (p. 239) In 1993, the DEA concluded “Methylphenidate is a central nervous system stimulant with a high potential for abuse and diversion for illegal purposes.” It is impossible to document the influence, if any, between significant annual “donations” from Gigy to CHADD exceeding hundreds of thousands of dollars to influence the policy to assume “ADD children have neurologically based disorders.” There exists reason to question if this financial alliance is an illicit public relations campaign to promote a dangerous and addictive drug. Kauffman & Julien (2000a) quote Angell, the editor of The New England Journal of Medicine. “Imagine a judge who has before him a case involving two companies suing each other—and he owns one of the companies. And he says, 'Not to worry. I'm a judge and I learned how to evaluate things in a dispassionate way.' He'd be laughed out of court.” (p. A1)

DSM-IV Labelling ignores frightening attempts by neuro-psychiatrists to attribute dysfunction to the unproven assumption there exists a metabolic imbalance which can be treated medically. Most schools of psychiatry emphasize biochemical cures rather than teaching psychiatric interns how to become sophisticated clinicians to ask realistic questions before rendering an assessment. Agreeing with Glasser, Breggin (1991) lambastes neuro-psychiatric/psychological researchers and the profession of psychiatry writing:

Many people continue to think of the psychiatrist as the wise, warm, and caring person who will help them tackle their problems. But the modern psychiatrist may have no interest in “talking therapy.” His or her entire training and commitment is more likely devoted to “medical diagnosis” and “physical treatment.” He or she may look at you with all the empathy and understanding of a pathologist staring through a microscope at germs, and then offer you a drug.” (p. 11)

The 1990’s will be remembered when, “Better living through chemistry” became the rallying call for most psychiatrists. Ritalin has played a prominent part in this war. Breggin (1998) reports:

We are raising a generation of children, many of whom are being told they have something wrong in their brains that won’t ever go away. Not only are they stigmatized in their own eyes; they are stigmatized in the eyes of others. Many of them understand that they have been given pills instead of love, understanding, or attention. Most, of course, will not realize what they are missing from other people. They will assume that adults are supposed to give pills to children instead of giving them psychological and spiritual support. The children will end up blaming themselves for wanting more love and attention than they have been given. (p. 95)

For those who erroneously assumed ADD/ADHD is a disease which can be controlled by medication, Talking Back to Ritalin will be disturbing because Breggin skillfully combines a review of the research with passion to document the damage done to children and adolescents whose only crime may be their enthusiasm, energy, and exuberance. Breggin condemns researchers who have dehumanized
children and adolescents; they forget it is “age appropriate” for them to be distracted, and, at times, disruptive. When viewed from this perspective, prescribing Ritalin is “cruel and unusual punishment” for those who are irritating because taking pills under medical supervision masks the noxious message communicated “there is something wrong with your brain and you need a potent medication to function to be ‘normal.’”

Valenstein (1998) excoriates the psychiatric profession for now blaming the brain for psychological aberrations. Until 1960 “the cause of mental disorders were thought to be rooted in early experiences within the family, but now it is widely believed...the cause is a chemical imbalance in the brain.” (p. 1) Valenstein argues:

The evidence support all these claims about the relationship of brain chemistry to psychological problems and personality and behavioral traits are far from compelling and are most likely wrong. The claim...psychotherapeutic drugs correct a biochemical imbalance that is the root cause of most psychological problems also rests on a very shaky scientific foundation. These ideas are simply a unproven hypothesis. (p. 3)

The metaphor of the school as “jail” cannot be ignored. The classroom needs to be transformed from “custody, control, conformity” to civility and creative communication where thinking skills rather than memorization, are stressed. It is confusing because the diagnostic criteria for gifted and hyperactive are similar. I cannot recall working with an ADHD adolescent whom I thought was not blessed with superior intellectual and creative potential. It is unfair to students to ignore protests their psycho-social-emotional-moral needs are ignored. The curriculum needs to be expanded from the traditional three “R’s” of reading, ‘riting, and ‘rithmetic to include eleven more: Responsibility, Reality, Respect, Responsiveness, Rene-wal, Reason, Reform, Research, Relevance, Reverence, and Reciprocation. (While CHADD and Gigy want to add Ritalin as the twelfth “R,” The John Dewey Academy rejects this proposal.) It needs to be stressed this kind of educational reform does not compromise academic standards. Teachers need to be encouraged, energized and empowered to be more passionate, courageous, and committed to active learning.

Collabolletta, Gordon, and Kaufman (2000) report The John Dewey Academy minimizes claims by psycho-pharmacologists and neuro-psychiatrists intrapsychic problems are caused by metabolic disorders, genetic imbalances, and cellular deficiencies. In contrast, feelings of pain, shame, rage, inadequacy, and fear which overwhelm adolescents are caused by conscious dysfunctional, dishonest, destructive decisions, not biological aberrations. The bio mythology of depression which claims persons are biochemically defective negates the more realistic explanation of destructive decision making. Often when students are asked why they feel depressed or shame, they document tangible reasons. Agreeing with Glasser, Bratter (1993) writes The John Dewey Academy asserts personality and affective disorders rarely are cured by medicinal approaches but rather caused by poor conscious choices. This Academy maintains an anti-medication policy. There are no management/discipline problems at The John Dewey Academy.

Positive peer pressure helps students begin to use, rather than continue to abuse, superior intellectual abilities. This caring community, which can be implemented in a classroom, demands educational excellence and human decency utilizing a model of peer self-help psychotherapy with a behavioral-cognitive-confrontation treatment approach. Bratter, Bratter, Bratter (1995) assert the primary psychotherapeutic goal is to (re)gain self-respect, not the pursuit of pleasure. The John Dewey Academy confronts students to take control of their lives which produces constructive change rather than to join the conspiracy of “better living through chemistry.”

Validating Breggin’s and Glasser’s theories, all John Dewey graduates attend colleges of quality. A third make the Dean’s List. Though viewed to be psychotherapeutic and educational failures prior to attending the John Dewey Academy, more than 80% graduate college. Less than 10% feel the need for psychotherapy/pharmacology. This offers irrefutable evidence when engaged in active learning in an unremitting educational environment demanding students can achieve academic excellence which becomes a positive self-fulfilling prophesy. Such an ambitious goal is realistic and attainable without medication which validates Breggin’s rejection of amphetamines and methylphenidates.

References


SALE
BACK ISSUES OF THE JOURNAL OF REALITY THERAPY

OPTION ONE
COMPLETE SET OF VOL 1-19 OF THE JOURNAL
LIST PRICE FOR 38 ISSUES = $146
SALE PRICE FOR 36 ISSUES = $75

OPTION TWO
PACKAGE OF 25 COPIES OF ANY ISSUE
USEFUL FOR TRAINING/TEACHING
(EITHER SPECIFY ISSUE DESIRED OR ORDER WILL BE FILLED FROM ONE OF LAST FOUR ISSUES)
LIST PRICE = $125
SALE PRICE = $50

SEND ORDER TO JOURNAL OF REALITY THERAPY
203 LAKE HALL, NORTHEASTERN UNIVERSITY, BOSTON, MA 02115
From “Reality Therapy” to “Reality Therapy in Action”

Brian Lennon

The author is a Psychologist and Guidance Counselor working in St. Oliver’s Community College, Drogheda, Ireland. He has been Director of the William Glasser Institute-Ireland, since 1987 and a senior faculty member of the William Glasser Institute since 1995.

ABSTRACT

Tracing the ideas of William Glasser, creator of Reality Therapy, from 1965 to 2000 it is clear that he has made major clarifications and changes in these concepts since publishing “Reality Therapy” in 1965. He has developed Choice Theory, a psychology based on the idea of internal control, and signals external control psychology as the cause of so much human misery. Specifically he targets a breakdown in relationships as the main problem to address in counselling cases. He rejects the current view of “mental illness” and “chemical imbalance” theories. He sees Choice Theory as something to teach to clients in counselling, to students in our schools and to our communities. His publications since 1996 reflect this whole new vision of Therapy and of Psychology.

In 1965, O.H. Mowrer called the book “Reality Therapy” a “landmark in psychotherapy”. Thirty-five years later, Albert Ellis described “Reality Therapy in Action” as “one of the most creative books on psychotherapy ever written”. Between these two publications, their author, William Glasser, had changed many important things and made major clarifications. This article attempts to map these and the journey in between.

1960-1980 Reality Therapy

Glasser’s formal education brought together an interesting set of disciplines: chemical engineering, clinical psychology, medicine and psychiatry. In this learning period, he benefited from a number of very progressive environments. The Western Reserve University School of Medicine was very learning-centered during his years there. In his psychiatric training in the Veterans Administration Center & UCLA, he found a kindred spirit in his tutor, G.L. Harrington. At this time, according to an interview with Glasser, recorded by Wubbolding (2000), Glasser met Hellmuth Kaiser and they shared an office for a time. Glasser added that “he influenced Harrington and Harrington influenced me”. He frequently acknowledges his debt to Dr. Harrington who gave him so much creative space at that time. In the first years of his professional life, he worked in the progressive Ventura Girls’ School, and there his interest and competence in both therapy and education were able to flower.

By 1960, Glasser had produced his first book “Mental Health or Mental Illness?” and already many of the key ingredients of his later work were in evidence. The book originated in a series of lectures to employees of the California Youth Authority. Glasser himself explains today that it was his involvement in public speaking that gave rise to his strong preference for clear language.

Indeed, the 1960 publication already showed his difficulties with the traditional language of psychotherapy. It did not fit well with his emphasis on the client’s active role in the therapeutic process. The book’s subtitle “Psychiatry for Practical Action” is another major theme in the author’s lifelong work. Even at his most theoretical, Glasser is always looking to the practical; he is primarily a behavioral technician. By 1962, Glasser was giving public talks about this new approach that he now called “Reality Therapy”, and from the very beginning his wife, Naomi, was an active collaborator in the promotion of his new ideas. These innovations would become the content of his second and most famous book to date.

The 1965 book “Reality Therapy” was an important landmark for Glasser as he moved from offering opinions on psychiatry to the confidence of initiating a new therapy. This volume openly challenged traditional thinking and practice. In its pages the main ideas of Glasser’s approach were to be found: the centrality of client responsibility, psychiatric problems re-defined in terms of need frustration rather than “mental illness”, a preference for dealing with the present rather than the past, “involvement” as the environment of counselling, a focus on tangible behavior rather than on thinking or feeling, a move away from “insight” and the unconscious, attention to the present and a new stress on the therapist’s active role in counselling. The last chapter introduced the application of Reality Therapy to education, a theme that would become one of the main strands of Glasser’s professional work.

“Reality Therapy” sent shock waves through the system and still does. Dr. Glasser had explained his basic concepts, shown how his views differed from conventional therapy and then gave a series of examples of Reality Therapy in practice. The book was a collection of concepts and valuable practical guidelines. The author had begun a process where he would eventually find support for the concepts in a solid theory and greatly enhance the practical strategies of his therapy.

In 1969 Glasser took up the educational theme again in “Schools Without Failure”, a book that would challenge the foundations of educational practices. The first sentence of the book’s introduction still resonates through Glasser’s current thinking on education: “Too many students fail in school today”. Glasser was to find that underlying all his ideas, whether on therapy or on education, there was a common rationale, but it would be another decade before he would bring all these pieces together for the first time.

In a sense, Glasser uses his books to work out his ideas, and “Identity Society” (1972) was a good example of such exploration. The book also carried a very clear elaboration of the practical components of Reality Therapy (to become eight “steps” in “What Are You Doing?” and in “Stations of the Mind”) although Glasser would later turn his back on the step approach, since many trainees misinterpreted his intentions and used the steps in a mechanistic way.

For any understanding of Glasser’s current thinking, it is important to realize that he has actually rejected or at least stopped using some of the concepts from earlier works. The idea of “morality”, for example, introduced in “Reality Therapy” and later used in “Schools without Failure” is not
mentions so much in his present thinking as it was so easily misunderstood. Even the core idea of “responsibility” is one he uses with care nowadays for the same reasons. He would also abandon the focus on “failure” and “failure identity” in favor of a more positive slant.

An interesting stepping stone from failure to success was the title of his next book, “Positive Addiction” (1976). This did not prove to be a core text in the development of his ideas but the opening line, “Very few of us realize how much we choose the misery in our lives”, made an important step towards a new central role for choice in his thought. The notion of personal responsibility had always implied choice, but it had not been stated so clearly nor so strongly as this. The seventies came to an end with another exploration, this time the area of management in “Both Win Management” (1980), co-authored by C.L. Karrass.

Meanwhile, many people had been learning Glasser’s ideas through his “Institute for Reality Therapy” founded in 1967. With a heightened need for more examples of this therapy, Glasser’s wife Naomi edited a book of case studies in 1980. She used a typical Reality Therapy question as its title, “What Are You Doing?”, and this served the training needs of the Institute very well, fleshing out the ideas of Reality Therapy with real examples. Periodically, Glasser himself would make video recordings using role-plays to illustrate his therapy.

A special characteristic of Glasser has always been his ability to teach very well what he does so well as a therapist and educator. As the seventies drew to a close, many people had learned about his approach but there was one important unanswered question: “How and why does Reality Therapy work?” Glasser needed a theoretical explanation for his ideas and he was about to find one.

1980-1990 Control Theory

Glasser’s search for a theoretical base for Reality Therapy took a huge step forward in the eighties when Sam Buchholtz, a friend of his, encouraged him to read William Powers’ book “Behavior: The Control of Perception” (1973) and, as he himself said, he found the key to much of what he had been looking for. Here were ideas that originated in engineering and were developed by a physics graduate to explain the links between perception and behavior. There was much in Powers’ Control Theory that resonated with Glasser’s thinking: Internal control; people’s reliance on perceptual phenomena rather than any absolute reality; the role of feedback loops in explaining human behavior. The thermostat-like functioning of the brain to behave in order to reduce “perceptual discrepancy” would explain how people behaved in order to meet their needs. Glasser was very impressed, consulted with Powers, and then put together his own understanding of Control Theory in “Stations of the Mind” (1981). Although Powers acknowledged that Glasser’s book did present his own ideas accurately, Glasser adapted these ideas to his own specialty and eventually would produce “Choice Theory” almost two decades later.

“Stations of the Mind” is Glasser’s most technical work, but he now believes that the human brain does not work in such a complex way. Analysis of many different levels of perception, for example, was useful to the research-oriented Powers but Glasser no longer uses these in his work.

By 1984, he was ready to produce his own version of Powers’ ideas adapted to explain Reality Therapy. Although the book was called “Control Theory”, it was already moving away from Powers’ original concepts, and this book was to become a very important milestone in the development of Choice Theory. Rather than trying to explain someone else’s ideas, Glasser made them his own and then set about explaining his own new version.

The use of active forms of verbs (e.g., “to depress” rather than “to be depressed”) to emphasize the chosen nature of human behavior was something briefly introduced in Chapter 10 of “Stations of the Mind”. From “Control Theory” onwards, it was to become Glasser’s preferred style. The Basic Needs, identified as the need “to love and be loved” and “to feel that we are worthwhile” in the original “Reality Therapy”, had become five needs in “Stations of the Mind” and these are clearly identified in “Control Theory” as the need to survive and reproduce, the need to belong, the need for power, the need for freedom and the need for fun. They play a key role in Glasser’s Control Theory and represent a move away from Powers’ model. Perceptions were to become “pictures”, a word that was deliberately chosen simply because it was “easier to understand” than “perceptions”.

Chapter six of this book was also to introduce an important new concept, that of “total behavior”. By seeing human behavior as an inseparable unity of acting, thinking, feeling and physiology, Glasser now had a way to explain how we are responsible for all four components and how we can change all four. This had remarkable implications for our way of dealing with “depressing” and other human behaviors. One of the most striking features of “Control Theory” was the predominance of counselor themes: depression, values, craziness, psychosomatic illness, drugs, and conflict. The new theoretical structures of Control Theory helped Glasser explain “crazy behavior” in terms that were radically different from the “mental illness” theorists. This book represented something Glasser had been seeking, a theoretical explanation of his therapy but it was more than that. It was an explanation of human behavior; it was a psychology.

Five years after the appearance of Glasser’s “Control Theory”, Naomi Glasser edited another book of case studies, “Control Theory in the Practice of Reality Therapy” (1989). In his own public presentations and courses, Glasser himself has always used role-plays of cases to illustrate and teach his ideas. However, in most of his books after the original “Reality Therapy”, he tended to use short anecdotal examples rather than full case studies. The fact that Naomi was editing case studies probably reduced the need for extensive case study examples in William Glasser’s own books.

1990-1996 Quality Schools

Meanwhile, he had set about applying his new theoretical discoveries to education, producing “Control Theory in the Classroom” in 1986. It was seventeen years since “Schools Without Failure” and, just as in the case of his therapy, he was providing a theory to support much of what he had already published. In chapter seven of “Control Theory in the Classroom”, Glasser spoke of the teacher as a manager, and
his new analysis of management found an existing source of similar ideas in the work of W. Edwards Deming, the American statistician who contributed to much of Japan's post-war economic success. Relying heavily on Deming's ideas on quality management and his own modified version of Control Theory, Glasser published "The Quality School" in 1990. The "Quality School Consortium" came into being and now has its own annual conferences.

Even before "The Quality School" was published, there were a number of bulletins in which Glasser elaborated on and expanded the contents of the book. Eventually, they were incorporated into a new edition of "The Quality School" in 1992. Further ideas became yet another book, "The Quality School Teacher" (1993). In his introduction to "Stations of the Mind", William Powers had noted that Glasser learned by writing and Glasser's books read very much like the diary of a discoverer.

"The Quality School" was subtitled "Managing Students Without Coercion", and this reflected an important new theme in Glasser's thought, coercion being the opposite of everything he taught. Reality Therapy had always recognized the individual's own responsibility for his or her life. In "Stations of the Mind" and "Control Theory", he elaborated on the full meaning of internal control. In "Control Theory" (chapter sixteen), he spoke of an alternative explanation of human behavior, one he now sums up as "external control psychology". In his lectures during the eighties, even more so than in his written works, Glasser would compare these two psychologies over and over again. He would become increasingly aware of the vast distance that separated these two points of view and the implications for everyday living of choosing one or the other to run one's life. Increasingly, he would underline the fact that Internal Control and External Control were poles apart.

It was around this time that personal tragedy overtook William Glasser and his family. After a short illness, his wife Naomi died in December 1992. She had contributed greatly to the two case studies books that illustrated his approach. Apart from the enormous personal loss, the passing of such a significant companion and collaborator in his life would lead to a collaborative and friendly learning environment where "discipline" in the traditional sense would not be an issue. On the other hand, time spent on managing a discipline program would delay the creation of Quality School. It could also cloak an agenda to control the students, something Glasser does not see as a primary aim of education. He struggled with the matter for a time, and then, in the summer 1996 newsletter message to Institute members, he wrote, "I object to discipline programs because they focus on fixing the student" whereas the intensive training weeks of his Institute "focus on changing the system". Glasser's opposition to the idea of external control had clarified as never before during this Australian tour.

George Kelly, the Construct Theorist, had pointed to the usefulness of thinking of constructs as bipolar. What a person means by "tall" only really becomes clear when we know what that person means by "short". One way of interpreting Glasser's Australian experience was that he came face-to-face with the opposite of his own underlying belief system and this helped him understand his own stance with greater clarity.

In July 1995, Dr. Glasser married Carleen Floyd who as a faculty member of his institute, was well versed in his ideas and had published works of her own. It was the beginning of a very powerful relationship that merged personal and professional life extremely well. Up to now, Glasser's books had fallen into three groups: therapy, education and management. His next manuscript, "Staying Together" (1995), represented a new direction, exploring Control Theory implications for relationships and personality. In a sense, it reflected the current experiences of his life, but it also represented a closing chapter in Control Theory and a stepping stone to a new phase in his thinking.

1996-2000 Choice Theory and Relationships

One early hint of this change came when Dr. Glasser spoke at the National Convention of the Institute for Reality Therapy in Ireland in October 1995. In questions following his lecture in Waterford, John Murphy, a member of the Irish Institute, asked him about the name "Control Theory" and expressed a difficulty in using the term. Glasser shared the sentiment and said that maybe he would change the name. The word "control" seemed to suggest control of others, something diametrically opposite to Glasser's intended meaning. In any case, Glasser has never liked to use a word that requires extensive explanation.

The following April, the Glassers traveled to Australia and other countries as part of an extended lecture tour. Throughout this journey, the issue of discipline in schools emerged often in his meetings with people. In fact, at that time, Internet searches for "Glasser" or "Reality Therapy" tended to produce a very high proportion of references to discipline. In his books on education, Glasser had certainly discussed the topic as a natural part of talking about schools in general. He had even promoted a ten-step approach to discipline himself. Some of his most senior instructors had created very popular and effective courses in school discipline. But in Australia where the discipline theme seemed to be dominating his tour, Glasser became very uncomfortable with the concept.

Setting up a Quality School following his guidelines would lead to a collaborative and friendly learning environment where "discipline" in the traditional sense would not be an issue. On the other hand, time spent on managing a discipline program would delay the creation of Quality School. It could also cloak an agenda to control the students, something Glasser does not see as a primary aim of education. He struggled with the matter for a time, and then, in the summer 1996 newsletter message to Institute members, he wrote, "I object to discipline programs because they focus on fixing the student" whereas the intensive training weeks of his Institute "focus on changing the system". Glasser's opposition to the idea of external control had clarified as never before during this Australian tour.

Setting up a Quality School following his guidelines would lead to a collaborative and friendly learning environment where "discipline" in the traditional sense would not be an issue. On the other hand, time spent on managing a discipline program would delay the creation of Quality School. It could also cloak an agenda to control the students, something Glasser does not see as a primary aim of education. He struggled with the matter for a time, and then, in the summer 1996 newsletter message to Institute members, he wrote, "I object to discipline programs because they focus on fixing the student" whereas the intensive training weeks of his Institute "focus on changing the system". Glasser's opposition to the idea of external control had clarified as never before during this Australian tour.

George Kelly, the Construct Theorist, had pointed to the usefulness of thinking of constructs as bipolar. What a person means by "tall" only really becomes clear when we know what that person means by "short". One way of interpreting Glasser's Australian experience was that he came face-to-face with the opposite of his own underlying belief system and this helped him understand his own stance with greater clarity.

It also became dramatically clear to him that he was aiming to change the system itself and not simply manage the undesirable consequences of an ineffective system. At his institute's next annual convention (July 1996 in Albuquerque, New Mexico), he would explain that a focus on discipline could not be part of a focus on the Quality School. Eventually, he decided that he could no longer accept the teaching of discipline programs as part of his own work or that of his faculty. As far back as the early eighties, Glasser had said "I do not want to be remembered as the person who brought discipline to the classroom. I want to be remembered as the..."
person who helped the classroom become a place where you do not need discipline.” To engage in fixing disciplinary problems was the antithesis of Glasser’s key ideas and this had become very clear to him.

This was a painful time for Glasser and his associates of many years, some of whom left his institute at this time. The core issue went beyond discipline. It was about a clearer definition of the centrality of internal control in his ideas and its total incompatibility with external control. It was about the need to eliminate external control from all systems and replace it with a new psychology of internal control. It was about working to create an internal control system rather than struggling to make an external control system more humane.

His Institute for Reality Therapy had gone through a brief period called the “Institute for Control Theory, Reality Therapy and Quality Management” and he now decided to call it the “William Glasser Institute” to protect the integrity of his ideas. Finally, he took another important step by acting on that Waterford suggestion and eliminated the term “Control Theory” from his vocabulary, replacing it with “Choice Theory”. This move helped give a new focus and freedom to his own theorizing, and represented a distinctive new phase in his thinking.

In Australia, he had also reached another conclusion, that the human condition had not improved over the centuries. Technology had made rapid advances and, in areas such as civil rights, humanity had made some progress. At a personal level, however, the same old problems of marital conflict, drugs and violence continued. He attributed this to the world’s reliance on external control psychology.

From this point onward, Glasser would see the promotion of “Choice Theory”, an internal control psychology, as an important and necessary attempt to change the biggest system of all, humanity. Choice Theory was the alternative to destructive external control psychology. Not only would the theory be applied to therapy and education, but clients and students would be taught it as a way to manage their lives. In his message in the Spring Newsletter of 1997, and still reflecting on his Australian experience, he wrote, “the goal of what I am trying to do is affect a world-wide change in psychological beliefs”. Already he had begun to write what is undoubtedly his most important book of all, “Choice Theory” and was entering his most productive period of writing and recording ever. The Australian tour of 1996 had been a very important watershed, and Glasser’s writing after that date represented a complete overhaul of his ideas.

“Choice Theory” was published in 1998 and, although at first glance it looked somewhat like the earlier “Control Theory”, it had very different emphases. It was presented as a vital new psychology to replace the external control approach that was doing so much damage. There was a new importance attached to relationships. As an example of internal control psychology in action, Glasser pointed to friendship. External control in contrast distanced people. In fact, before publishing “Choice Theory”, Glasser had considered calling his new approach “the psychology of us” contrasting it with external control psychology, the “destructive psychology of Me”. In his new version of Reality Therapy, he recommended seeking out the relationship issue that he believes is at the heart of the problems people bring to counselling.

In 1996, he had participated in a fascinating series of videotaped role-plays, “Five Approaches to Linda”, made at Lehigh University, Pennsylvania. This series sponsored by a major drug company set out to compare the approaches of different psychotherapists. These recordings helped Glasser realize just how different his own approach was from other therapies and confirmed his confidence in the direction he was leading his therapy ideas. He became more aware of the efficiency of his approach and elaborated on this in the sixth chapter of the new book. Glasser also went back to a theme from the original “Reality Therapy”, mental illness. He reaffirmed his belief that these are chosen behaviors and claimed that the use of drugs would not solve the underlying problems.

He also wrote about the Basic Needs in the context of relationships, and presented his new ideas of “solving circles” and structured marriage counselling. He wrote about families and about the Reality Therapy approach to child abuse cases. In a chapter on the Quality School, he presented his new idea of Total Learning Competency. There was a chapter on lead management. At the end of the book, he wrote about a project that was only just beginning and has since developed very successfully, the Choice Community Project in Corning, New York. Led by Mary Hayes-O’Brien and given research backing by Syracuse University, this project sets out to build better relationships between people from all walks of life who live or work within Steuben County, New York. They hope that this new approach will reduce crime, drugs and even illness in their community while improving education and general respect for different values. It is a long way from the one-to-one therapy relationship where Glasser had first established his reputation.

Not long after the release of “Choice Theory”, the Glassers published a small book, “The Language of Choice Theory” (1998), a comparison of external and internal control language in a variety of contexts showing how the move to a choice theory life-style would reflect in the way we speak to other people. For example, a parent might say to her child, “If you don’t stop fighting over the TV, Dad and I are going to shut it off for a week.” The “Language of Choice Theory” offers this as an alternative approach: “How about this? When we get the TV guide on Sunday we go through it together. We all get a choice and we’ll rotate who goes first to keep it fair. This way the worst that can happen is we’ll only have to fight over the TV once a week.” Instead of controlling, threatening and criticizing, the parent works on collaboration, giving the relationship more importance than the TV issue. The book gives some indication of the extensive impact a Choice Theory approach will have on a person’s life and language.

Once “Choice Theory” had gone to press, Glasser almost immediately began to write a book of case studies. The original “Reality Therapy” (1965) had been a combination of practical ideas and case study examples. Now “Choice Theory” (1998) would present his new theory and the new book, “Reality Therapy in Action” (2000), would carry the bulk of case study examples. The cases he had included in “Choice Theory” had been well received and he followed the same model in “Reality Therapy in Action”. The type of case and the way the details were presented and explained aimed to maximize their teaching purpose. The book presents twelve
carried out extensive reviews of the research reports on Psychiatry" (1991), was the keynote speaker. Breggin has Canada in July 2000, Peter Breggin, author of "Toxi~
specialist audience, he chose to return to the "mental illness"
mental illness, regardless of the causation, are the hundreds
satisfy genetic needs, such as love and power, to the extent
Glasser's (2000) alternative view is that "what is labeled
"mental illness" diagnosis and treatment with drugs to sort
serious obstacle to therapy than traditional psychotherapy is
offering a whole new perspective, a new way for the client to
ask clients what they are going to do to improve their
lives. Rather than seeing the outcome of therapy as fixing
some specific area of the client’s life, Glasser sees it as
offering a whole new perspective, a new way for the client
to live his or her life. Another major change since "Reality
Theory in Action", Glasser is now much more aware of the
differences between a life based on Choice
Theory principles and one relying on External Control
Psychology. Obviously the therapist will not use any form of
external control with the client. Relationships are now central
to his approach to therapy, and it is more important to work at
helping the client fix this than to talk at length about the
symptomatic aspects of the problem.

Glasser is also very conscious of how much progress a client can make even in a first session with Reality Therapy.
He sees therapy as always moving towards change, always asking clients what they are going to do to improve their
lives. Rather than seeing the outcome of therapy as fixing
some specific area of the client’s life, Glasser sees it as
offering a whole new perspective, a new way for the client
to live his or her life. Another major change since "Reality
Theory in Action", Glasser is now much more aware of the
differences between a life based on Choice
Theory principles and one relying on External Control
Psychology. Obviously the therapist will not use any form of
external control with the client. Relationships are now central
to his approach to therapy, and it is more important to work at
helping the client fix this than to talk at length about the
symptomatic aspects of the problem.

In his final comments in "Reality Therapy in Action", Glasser states that the differences between Reality Therapy
and conventional therapy are as true today as when he first
described them in 1965. But, he elaborates, what is a more
serious obstacle to therapy than traditional psychotherapy is
the abandonment of psychotherapy altogether in favor of a
"mental illness" diagnosis and treatment with drugs to sort
out the supposed chemical imbalance in the client’s brain.
Glasser’s (2000) alternative view is that “what is labeled
mental illness, regardless of the causation, are the hundreds
of ways people choose to behave when they are unable to
satisfy genetic needs, such as love and power, to the extent
they want.”

In May 2000, at The Evolution of Psychotherapy Conference (Anaheim, California), Dr. Glasser spoke on the
topic of “Reality Therapy in the Year 2000”. Addressing this
specialist audience, he chose to return to the “mental illness”
and "chemical imbalance" issues. Two months later, at the
William Glasser Institute International Convention in Ottawa,
Canada in July 2000, Peter Breggin, author of “Toxic Psychiatry” (1991), was the keynote speaker. Breggin has
carried out extensive reviews of the research reports on
psychiatric medications and has found them seriously flawed.
They tend to mislead people in two ways: they give the
impression that the drugs are effective in what they propose
to do, and they hide or disguise the evidence of the dangers
associated with these drugs.

Breggin, along with Harrington, Szasz, Rowe, Laing, Glasser and others, rejects the biological explanations of
people with so-called “psychiatric problems”. Glasser is
obviously putting the issue center stage again in the year
2000, and it is clear that his rejection of the “mental illness”
concept in favor of the belief in chosen behavior is in fact a
core component of his ideas.

Since the release of “Reality Therapy in Action”, Glasser has published two other short books developing the theme of
relationships. “What is this thing called Love?” (2000) is a
fly-on-the-wall report of a series of discussions on love.
“Getting Together and Staying Together” (2000) is a

Conclusion
In spite of the revolutionary content of William Glasser’s ideas, they continue to attract new followers around the
globe. His institute is active in Australia, Canada, Colombia,
Croatia, England, Ireland, Israel, Italy, Japan, Korea, Kuwait,
Malaysia, New Zealand, Norway, Scotland, Singapore,
Spain, United States and Wales. There are also members in Argentina, Austria, Brazil, Dominican Republic,
Germany, Indonesia, Mexico, Neth. Antilles, Sweden and
Switzerland. Many of his books have been translated into
Korean, Japanese, Croatian, Spanish and French. The
Institute he founded in 1967 has had its own “International
Journal of Reality Therapy” since September 1981 and has its
own website (www.wglasser.com).

An interesting recent development is the gradual
formation of linkages between the advocates of internal
control psychology. People like William Glasser, Albert Ellis,
Alfie Kohn, Peter Breggin and others are increasingly sharing
conference platforms and exchanging ideas (for example, the
1999 National conference on Internal Control Psychology,
Burlington, Massachusetts, USA). Ellis, the founder of
Rational Emotive Behavioral Therapy, gave Glasser many
suggestions and very positive encouragement for “Reality
Therapy in Action”. Peter Breggin wrote the foreword. The
degree of professional isolation that followed Glasser’s 1965
challenge to traditional psychiatry has transformed into a new
alliance of like-minded thinkers.

A new millennium somehow invites stocktaking, and
containing a review of research into Reality Therapy and
Choice Theory is an example of this, as is this article.
However, looking back at the development of Glasser’s
thought, it is evident that after his experience in Australia in
1996 he chose a very definite overhaul of his ideas since that
time, and the published results of this have happily coincided
with the start of the new century. In the latter half of the year
2000, he has just written one more component of that
overhaul. The book called “Every Student Can Succeed” aims
to detail the practical day-to-day running of a Glasser Quality
School. This new book, together with “Choice Theory” and
“Reality Therapy in Action”, will be Glasser's key texts,
redefining the ideas he initiated in the sixties, ideas he
continues to develop with ever-increasing enthusiasm to this
day.
Acknowledgements

The author wishes to express his gratitude to WGI Faculty member Al Katz for very valuable suggestions and to William Glasser for an interview that helped clarify some of the data for this article.

References


Internet Sites

William Glasser Institute www.wglasser.com
Albert Ellis www.rebt.org
Peter Breggin www.breggin.com
William Powers www.frontier.net/~powers_wp
Alfie Kohn www.AlfieKohn.org
The Quality Schools Forum www.qualityschools.com
Corning Choice Community Project www.comingareaschools.com/choicecommunityproject/