HISTORY OF THE GROWTH OF THE INSTITUTE FOR REALITY THERAPY*

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Inception of the I.R.T. Organization
1958-1962

The original idea started to develop when Dr. William Glasser, in his early 30s, was in residency at the Veterans Administration Hospital in West Los Angeles and in training at the University of California at Los Angeles during the 1958-59 school year. Glasser was dissatisfied with what he was being taught in both settings. He planned to go into private practice in West Los Angeles and was working at the Ventura School for Girls as a consultant, first one day a week and later two. He hoped to continue on the clinical staff at U.C.L.A.

During this period one of his teachers was George L. Harrington, M.D. Dr. Harrington, trained at the Menninger Clinic, taught Glasser that what the client was doing or thinking now was far more important than focusing on the past or dealing extensively with feelings as if they were the most important part of the client’s problem.

Glasser felt comfortable telling Harrington that he didn’t think he could use psychoanalysis. Harrington shook Bill’s hand and said, “Join the club.” For the next seven years, Harrington was Bill Glasser’s teacher.

That was really the beginning of the movement which would later be called reality therapy.

The Early Los Angeles Years
1962-1967

Glasser, combining his ideas with those of Harrington, and drawing on his experiences at the Ventura School for Girls, authored his first book, Mental Health or Mental Illness (Harper & Row) in 1960. With the encouragement of, first, Mary Perry and, later, Beatrice Dolan, both superintendents of the Ventura School for Girls, a correctional facility, Glasser began to give speeches to mental health groups in the State of California. As has been his pattern through the years, Glasser was clarifying his ideas as he made speeches to increasingly receptive audiences. He was close to publishing his second book when he was asked to address a large convention in Seattle in 1962.

At that time, Glasser was not the polished speaker that he is today, and was extremely nervous about his speech to this convention. However, he knew one thing — he had to give what he did a name. A psychiatrist in Los Angeles had remarked to him, “I was going to send you a patient for your private practice, but I thought you were too reality oriented for her.” Although Bill thought this was a strange reason not to send a patient, the word “reality” stuck in his mind as he prepared for Seattle.

Leaving for what he considered to be his first major speech, he thought he would call his therapy “reality psychiatry.” Just before giving the speech, Bill realized that the convention was not for psychiatrists, but for all the people in the helping professions. Not wanting the name “reality psychiatry” to discourage the non-psychiatrist participants from using his methods, Bill changed it to the more encompassing “reality therapy.”

When Glasser’s new book, Reality Therapy (1965), became so popular (selling 1,000,000 copies in hardback and paperback), he knew he had made a good decision. It was this book that catapulted him into national recognition and established the very groundwork for what is now the Institute for Reality Therapy.

Worthy of note is that Bill’s first book, Mental Health or Mental Illness, got an excellent review in the New York Times book review section, and that Robert Kirsh of the L.A. Times wrote a good review of Reality Therapy. These reviews plus increased speaking engagements helped him gain national recognition.

The Expansion Years
1967-1977

Due to his success at the Ventura School for Girls, the ideas in his new Reality Therapy book, and increasing speaking engagements, Bill gradually changed from a shy man to a superb public speaker, and attracted more attention nationwide.

About this time, the W. Clement Stone Foundation of Chicago was looking for an influential avenue on the activities in our public schools. Representatives attended one of his public appearances in Illinois, and later visited him in L.A. Glasser was already experimenting with his ideas in schools, the Pershing School in Sacramento and the 75th Street School in the Watts area of Los Angeles. He was ready for a $400,000 grant from the W. Clement Stone Foundation. This money was used to found the Educator Training Center in 1968.

Since the involved legal and other paperwork for the Institute for Reality Therapy had already been completed prior to the Stone Foundation’s approaching Glasser, E.T.C. was set up as a subsidiary of the Institute for Reality Therapy, with the total Stone Foundation grant earmarked for education. Douglas Naylor was the director selected to head the Educator Training Center and remains in that capacity to the present time. He is one of Glasser’s most productive and trusted associates.

At about this time, Richard Hawes, who was experienced both in the field of education and private counseling practice, was invited to join Glasser at the Institute for Reality Therapy in Los Angeles to see private patients and teach at the Institute. Hawes served as vice president of the Institute for many years and is an active member of the organization today.

In the summer of 1968, Glasser, with the support of School Superintendent Harold Santee, requested that Don O’Donnell as principal, and
teachers Keith Maxwell, William Trieglaff, and Glenda Gardner move from the Pershing School in Sacramento to Palo Alto, California, to start the first reality therapy based demonstration school in the fall of 1968. Glasser’s book Schools Without Failure, published in 1968, turned out to be one of the biggest sellers in education since the John Dewey books at the beginning of this century. Reading about this program, many educators wanted to see this kind of school and were able to experience this in Palo Alto.

The number of people and programs instrumental in the success of the E.T.C. are too extensive for this article. However, two E.T.C. programs from the early 1970s should be noted.

From Los Angeles: The Cluster Program. This in-service program, the concepts coming from the texts of Reality Therapy and Schools Without Failure, was well organized and taken to hundreds of local school districts throughout the country. The cluster concept relied on leadership at the local school level. The training for the local school leadership teams, which in turn met with their own staffs at the local school level, was provided by E.T.C. associates.

From Palo Alto: A full-length film (45 minutes) on the Schools Without Failure demonstration school was produced here and shown throughout the country in the 1970s. In 1972, two additional 12-segment T.V. series were filmed at Ventura School. These were followed by many films on individual topics throughout the 1970s. All filming done in Palo Alto on the S.W.F. program was by Dave Bell & Associates of Los Angeles.

Both the Cluster Program from L.A. and the two television series from Palo Alto were taken for credit by literally thousands of teachers and administrators under the auspices of the E.T.C. and LaVerne College.

During the period from 1968 to 1976, when the Educator Training Center comprised the major emphasis of the Institute for Reality Therapy, an added group of counselors, nurses, social workers in all fields, clergymen, and others in the helping professions were increasingly anxious to improve their skills using reality therapy concepts. In response to this need, Bill Glasser, with the assistance of Dick Hawes, established what was called “Intensive Training in Reality Therapy Weeks,” which were originally held at the E.T.C. in downtown L.A. (Glasser’s private office was always in West Los Angeles.)

When it became obvious that Bill and Dick needed more help, Bill invited FitzGeorge Peters to leave his job in drug rehabilitation in New York City and join the L.A. faculty. Later, Gary Applegate also joined the instructor group. Douglas Walker started as an intern in the program with Dick Hawes as his instructor, and soon he, too, joined the I.R.T. as a member of the faculty. Edward Ford, who commuted from Phoenix, Arizona to participate, also joined this otherwise local L.A. faculty. Ed Ford and Gary Applegate have since left the I.R.T. to pursue other interests, but this first L.A. faculty group formed the backbone of the early training of reality therapy in Los Angeles. All of them also spread the ideas most effectively through their constantly increasing teaching (through the I.R.T. intensive training week programs) in the U.S. and Canada.
was established to decide how many regions would be necessary and how the regions were to be divided to insure maximum local participation. The next day, regions were established and Elizabeth Mahoney organized everyone present so that each regional group could become a cohesive unit setting up goals and getting to know each other. Once they were comfortable as a functioning regional organization, each region elected a representative to the first Institute for Reality Therapy Board of Directors.

It was wonderful to observe the large number of competent people who were willing to serve on the first board of the Institute for Reality Therapy, especially since much of that service was at their own expense. (It should be noted that even from the beginning, the position of regional representative has been a non-paying job. Airfare and hotel room expenses for attending board meetings are paid, and that's all.) That first board, elected at St. Charles, Illinois, in 1981, was as follows:

Albert Katz ......................... Northeast Region
Charles Manker (deceased) ........... Southeast Region
Gary Leofanti ......................... Midwest Region
Ray Miller ............................. Mid-America Region
Jeffrey Mintz ........................ Sunbelt Region
Marcie Mann ........................ Mountain Region
Richard Hawes ....................... West Region
Martin Price .......................... Northwest Region
Diane Gossen ........................ Canada
Elizabeth Mahoney ................. Educator Training Center

Since then many have served on the Board of Directors, but I will list only those who have been chairpersons. These are:

Elizabeth Mahoney .................. 1983
Jeffrey Mintz ......................... 1984
Nancy Buck ............................ 1985
La Barbara Gragg .................... 1986
Robert Hoglund ...................... 1987

The initial board of directors had an enormous job to do. They had to establish standards, policies and procedures, clarify curriculum content and establish personnel policies and responsibilities. Committees were formed to allocate responsibilities and distribute the workload as fairly as possible and take into account the personal interests and abilities of each board member. Policies were tried, changed and improved until the board determined its direction. This was hard, wearing work, but it all contributed enormously to the growth of the Institute for Reality Therapy.

As there was not yet an official chairperson nor an executive director, one person was necessary as Dr. Glasser’s liaison to the board and as coordinator of all the activities of the board. Albert Katz, the Northeast’s representative, gave endless hours without financial compensation in this capacity.

When it was evident that it was necessary for someone to work full-time at implementing and supervising the procedures the board had voted to implement, a decision had to be made on how to finance this position. Dr. Glasser had never taken any money from I.R.T. funds for the administrative work he had done. An executive director would need a salary. The board voted to raise tuition for intensive week training with the intention that a certain percentage would go for the salary of the executive director position.

Modern Era
1982-1987

At the Houston convention in 1982, chaired by Jimmy Jackson, a plan was made to select an executive director. At its next meeting in Los Angeles, the Board interviewed Ronald Harshman, originally from Canada but at that time working in Florida. He was Glasser’s choice, subject to Board approval, to be the first executive director of the Institute for Reality Therapy. They were unanimous in approving, and Ron has since then worked with all succeeding boards, implementing policy and supervising the certification process to insure uniformity and maintain high standards of teaching.

The next convention was in Boston in 1983, with David Moran as chairperson. It was the first time the I.R.T. had an official executive director in attendance.

Since the early 1980s, the Institute has kept its membership informed by issuing two publications, the Institute for Reality Therapy Newsletter and the Journal of Reality Therapy. The Institute publishes the newsletter about three times a year: spring, summer, and winter. Automatically mailed to all associates and full members of the Institute, this publication contains information regarding the Institute and its certification program, as well as reports from Glasser, the Executive Director, and the Board of Directors.

The Journal of Reality Therapy, sponsored by the Institute for Reality Therapy, is published twice a year, spring and fall. Lawrence Litwack of Boston, Massachusetts, originated the Journal and is still editor. A nine-member group from various areas in the U.S. and Canada serves as an advisory board. Considered the official publication of the I.R.T., this journal publishes manuscripts concerning research, theory development, or specific descriptions of the successful applications of reality therapy principles in field settings.

With the Spring 1987 issue, the Journal of Reality Therapy completed its sixth year. Now co-sponsored by Northeastern University, the Journal has continued to grow, both in circulation and reputation. In order to meet the increased demand, the printing was raised in 1986 from 1000 to 1500 copies. As the flow of articles increases, efforts will be made to boost the size and frequency of the publication.

As indicated earlier in this article, the I.R.T. Annual International Convention, scheduled each year for the last week in June, has become an integral part of the total organizational pattern of the Institute for Reality Therapy. Attendance has increased and each year provides another opportunity to grow personally and professionally.

The St. Charles, Illinois (1981), Houston (1982), and Boston (1983) convention sites have already been noted. Others were as follows:

1985: Montreal, Canada. This was our first truly international convention, with all proceedings held both in English and French. Chairperson: Francine Belair.


Certification week, which is always scheduled prior to each annual convention in addition to other times, has become a very popular part of the total appeal to new and current members of the Institute for Reality Therapy.

A new program was added at the Seattle Convention in 1986. People certified in reality therapy may now take training at the conclusion of the convention in two additional areas: the Basic Practicum Supervisor Training Program, and the Basic Instructor Training Program. The requirements and procedures for these training programs are pursued with one's regional board member or the Executive Director of the Institute for Reality Therapy.

Another innovation announced in Seattle was the appointment of Alex Bassin as volunteer ombudsman. Bassin was one of the earliest proponents of reality therapy. He has been one of Glasser's steadiest and most loyal supporters, providing both encouragement and intellectual guidance whenever needed. He will continue helping the Institute to grow in positive ways in his new job.

Today, we are an international organization of approximately 2200 individuals certified in reality therapy practicing in many fields in different areas of the U.S.A. and Canada. Our membership also includes people from foreign countries such as Mexico, Norway, Ireland, Yugoslavia, Taiwan, New Zealand, Australia, and the Philippines.

I know that Bill and Naomi Glasser are proud of the development of the present organizational structure and confident of its ability to carry on the work of the Institute for Reality Therapy. They, and many of us, look forward to the future with self-assurance and high expectations. In 1986, they started the Glasser Fund, money set aside to provide scholarships for training in reality therapy and pay for teaching stipends in foreign countries to further spread these concepts.

In closing, I wish to note with pride my twenty-six years as an observer and sometimes-participant in the proliferation of the positive ideas and concepts of Naomi and Bill Glasser in many fields of endeavor. Bill and Naomi, thanks for the memories! As one famous song of my era suggests, "We've only just begun"!

EDITOR'S COMMENT
Larry Litwack

This issue marks several changes in the editorial board of the Journal. Three members of the current editorial board will complete their three-year terms as of December. C. Loleta Foster of North Carolina, Norman Reuss of Vermont, and Karen Sewall of Virginia have been active and responsible board members, contributing much through their skill and experience. Brian Mulherin of Montreal will also be leaving the board through resignation. Two new members will be joining the board immediately. Jim Montagnes has just completed a term on the National Board of Directors representing the Canadian Region. Filling an unexpired term until the end of 1988, Jim brings experience in training and consultation. Edward Chance is Assistant Professor of Educational Administration at South Dakota State University in Brookings. S.D. A Practicum I & II Supervisor, he has been certified since 1982 and has served on the Board of Directors of The Sunbelt Region. Ed brings experience as a teacher, principal, and college faculty member to the board. Three other additions will be announced in the Spring 1988 issue.

Editorial Board

Tom M. Campbell - 1989
Tulsa, Oklahoma
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Brookings, South Dakota
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CONTROL THEORY: THE MISSING CORRELATE IN THE EFFECTIVE SCHOOL MOVEMENT
Edward W. Chance

The decade of the 1980's will be remembered as a time of great change and restructuring of the American educational system. Two distinct movements are having a tremendous impact on schools today, as well as affecting their future. The reform movement in education has received much recognition, and has contributed to the restructuring of this country's educational system as well as altering its educational mission. Another important movement, and one perhaps with a longer lasting impact, is the effective school movement.

Lezotte states that "an effective school is a place where students are able to demonstrate that they have learned what the schools wanted them to learn" (1984, p. 2). Edmonds (1979) of Michigan State University identified five correlates or characteristics of effective schools. These correlates are: strong instructional leadership; high expectations for all students; the establishment of a positive school climate; a well defined, coordinated curriculum; and, regular monitoring of student progress. Many educators have accepted these correlates of effective schooling as the true means of improving the nation's educational system.

Although these correlates are a significant contribution to the creation of effective schools, there is an important missing component. The salient missing element is active student involvement in a manner that enables and facilitates students in creating useful "learning pictures in their head." (Glasser, 1986, p. 38). This author believes that although the five correlates are important and vital, the addition of a sixth correlate will more assuredly create an effective school. That sixth correlate is control theory, which suggests that schools should not only recognize but should actively strive to serve as a facilitator in meeting the basic needs of students and teachers.

Without control theory as an additional component, those desirous of creating an effective school will, instead, create only a mechanistic educational system where students physically attend but may have already mentally dropped out.

The addition of control theory to the correlates provides the much needed augmentation of intrinsic motivation as opposed to the extrinsic motivation utilized by most schools (stimulus-response theory), as well as recognition of students' and teachers' needs, and the opportunity to have pictures that view education as need fulfilling and satisfying. Perhaps one of the best ways to achieve the implementation of control theory as an additional aspect of effective schooling is the use of class or group meetings. This activity is often overlooked by seasoned practitioners as well as novices.

Class or group meetings can provide a necessary milieu that allows students to begin to meet their basic needs while facilitating teacher and student recognition of the pictures in their heads. Class meetings and how to conduct them have been amply discussed by Borgers in A Return to Discipline (1978). The key to these meetings is that they need to be structured so that they provide students an increased sense of power at a time when this need becomes even more important to them (Glasser, 1986). These meetings provide for assiduous interaction between students and teachers; students and administrators; and, students and students.

Class meetings or group meetings have an additional plus, because they teach students to work together, to respect each other's ideas, to learn to evaluate their own needs, and to recognize and understand the pictures of their heads of school. The myth has survived for too long that success, in school as well as society, is predicated totally on competition, when the truth is that cooperation and collaboration are just as essential as competition. Mankind exists in a society where interdependence, interaction, and common societal goals are of paramount importance.

Schools and classrooms exist in a climate of cooperation and collaboration whether they recognize or admit it. Not until those schools striving to become effective recognize that control theory, when viewed as a sixth correlate, serves not only as an additional component, but also as an enabler for the other five, will they be able to achieve the goal of creating schools that are need fulfilling and satisfying.

The goals of the effective school movement to establish an optimum learning environment are actually contingent upon helping students and teachers establish effective control over their lives. The dissonance that often exists when basic needs do not correspond to the perceptions of the world must be recognized. Effective instruction can not be provided unless the basic needs of people are being met. They can not do both without the addition of control theory as a sixth correlate to the effective school movement. Control theory provides the vehicle for the necessary recognition of these needs by educators. Unless this is done, the effective school movement is doomed to increasing frustration and eventual failure as students, teachers, and their needs get lost in a perfunctory, mechanistic organization that emphasizes task over that of a more responsive need fulfilling system that, when properly structured, provides and assures true success. Control theory provides the necessary balance between human needs and institutional goals. Control theory as a sixth correlate guarantees the establishment of an effective school with an environment that provides success for all students as their needs are recognized and met. Only then will the effective school movement be truly effective.

References
PROFESSIONAL ETHICS: HANDLING SUICIDAL THREATS IN THE COUNSELING SESSION

Robert E. Wubbolding

The author is a field faculty member of the Institute for Reality Therapy, is Assistant Director of the Graduate Counseling Program at Xavier University in Cincinnati, and is a member of the American Association of Suicidology.

The extent of the problem of suicide is a current topic in the media. One poll showed that 12% of college students have seriously considered suicide (1983). The Suicide Prevention Center in Dayton, Ohio reports that suicide is the second leading cause of death among college students. It is estimated that the number of college students attempting suicide is 10,000 per year (1986).

The problem is equally as alarming among the general population. The American Association for Suicidology estimates that 35,000 people kill themselves each year, and might even reach 100,000 according to some reports. Evidence indicates that the incidence of suicide is on the rise. The Associated Press reported in The Cincinnati Enquirer that suicide among Americans increased 136% between 1960 and 1980 (1985).

The problem is practical and “real” for counselors and therapists. It is seen from a high level of perception by reality therapists. Many clients make direct or veiled references to suicide as indicated by such statements as: “I can’t take it any longer”; “I don’t think it’s worth it”; “I can’t go on”; “They would be better off if I weren’t around”; and many others. This article is an attempt to describe appropriate counselor behaviors for discussing that suicidal threat with the client. Such behaviors are seen as congruent with the practice of reality therapy and comprise the current “standard of practice” which is the norm for professional ethical behavior. However, no attempt is made to outline the entire process of how to intervene outside the counseling session.

POSSIBLE COUNSELOR BEHAVIORS

When reality therapists hear such veiled threats or even more direct threats such as, “I’m thinking about suicide”, they are faced with a practical decision: whether to discuss this negative, destructive behavior directly or whether to ignore it and to emphasize “positive symptoms” (Wubbolding, 1985). An argument can be made that the best way to deal with negative behaviors is to help the client replace them by positive behaviors. This argument is, at best, seductive and, at worst, dangerous or harmful. It is seductive in that it might be easier for the counselor to avoid an uncomfortable topic than to bring it into the open, and it could be very upsetting and threatening to the counselor to discuss this topic with a client. The therapist might even feel that a discussion of it will help the client perceive suicide in a more favorable light thereby making the choice more likely.

However, a closer examination of control theory and reality therapy reveals a well-grounded rationale justifying a direct and thorough discussion of the threat. It is sufficient to say that “Suiciding Behaviors”, as described here, are primarily “thinking behaviors” which are seen by the client as the best behaviors available at a given moment. Suicide is also seen as a picture in the client’s inner world. To ignore the threat is to avoid a major part of present behavior as well as a picture which is a high priority to the client. Also, there is enough known about suicidal clients to demonstrate that the best way to deal with the threat is to confront the decision or idea head-on by a calm, frank, open, and thorough discussion of it. Therefore, such a discussion will be described below and should be viewed as an effective way to apply the principles of reality therapy.

Finally, the “standard of practice” as indicated in the sources referred to below clearly states that counselors act ethically and appropriately when they handle the threat as suggested in the questions described in this article.

In general, the course of action to be taken by the reality therapist, or any therapist, is as follows:

1. Determine the lethality of the threat and
2. Use direct intervention, if necessary.

ASSESSING LETHALITY

Appropriate action first includes an open discussion of the decision so as to determine the lethality of the threat, i.e., the intensity of the total thinking behavior, and to assist the client to make a decision not to carry out such a decision, and to generate more effective need fulfilling behaviors.

Questions to ask:

1. “Are you thinking about killing yourself?” Gernsbacher (1984) states that the question should be asked bluntly, clearly and calmly. It should not be avoided or glossed over. If thoughts of suicide are brought into the open, clients often feel relieved that they can talk about them. They reply, “Yes, I’ve thought about it”, or “The thought has passed through my mind”, or some equivalent statement. Many times further questioning indicates that no such decision is imminent or even possible. Thus bringing the “threat” into the daylight often results in the removal of suicide from the inner picture album. And so, no further action need be taken. Nonetheless, the question, “Are you thinking about killing yourself” is the crucial first step in assessing the lethality of the threat.

2. “Have you tried previously to kill yourself?” Past attempts comprise the best predictor of suicide, and provide a measure of the seriousness of the present threat. If the person is thinking about suicide presently and has a history, especially a recent history, of attempts, the possibility of such a choice is increased. This “history” is not past, irrelevant behavior. Rather, it is linked to the present by way of current Total Thinking Behaviors, as well as, current Pictures in the Inner World.

3. “Do you have a plan? How will you do it? If the client has a plan for
suicide, i.e., a gun will be used, pills will be taken, the car will be driven into a tree, etc., the lethality of the threat increases.

4. “Do you have the means to kill yourself? If the client has a gun, possesses pills, habitually drives recklessly, etc., the danger of suicide escalates.

5. “Will you make a unilateral contract not to kill yourself accidentally or on purpose? For how long?” If the client will consent to make this a written, firm contract even for a short time, e.g., 2 weeks, the lethality is lessened and the therapist can be less inclined to take further action. This contract should not be seen as merely a negative or a “stop-behavior”. Rather, it is a positive beginning step along the way to more effective living. The Behavioral System will, of course, continue to generate other Total Behaviors. And so, caution is urged, i.e., no absolute statement can be made that a written contract eliminates the possibility of direct intervention. Previous questioning might have indicated that a serious threat is present thereby requiring counselor action.

In describing additional questions to ask clients, McBrien (1983) states, “There is no cut-off score to reply on: it requires clinical judgment based on the training and experience of the counselor, especially empathy and active listening skills”. I would add that such judgment also depends on the reality therapist’s skill in building on this initial contract by assisting the client to examine wants and to insert other pictures into the inner world, as well as to develop more effective need-fulfilling Total Behaviors.

More specifically, the decision should be reviewed at the next session and further contracts made until the danger has passed. The firm written contract should be “unilateral”. In other words, it is not a contract made to the counselor. The therapist does not ask the client to promise him/her (the therapist) not to commit suicide. Rather, it is made as a self-generated plan for which the client assumes total responsibility. If the client refuses to make such a commitment, the therapist clearly should take “appropriate action”. Such appropriate action involves intervening outside the counseling relationship, i.e., informing parents, spouse, physician, school authorities. This should be done with discretion and in consultation with another professional person. Written records of consultations should be kept. The value of the contract is described by Drye et al. They report that of 600 patients making no-suicide contracts, none committed suicide. Unfortunately, not every client chooses to formulate a clear contract not to kill him/herself. Therefore, if the clinical judgment of the therapist is such that the threat is serious, direct intervention should be taken as stated above.

**ETHICAL PRINCIPLES SUPPORTING AND REQUIRING DIRECT ACTION**

The purpose here is to describe the ethical considerations as they relate to counselor behaviors. Though much latitude remains, various codes of ethics of professional groups make it clear that there are times when the counselor must intervene directly and take action. The American Association for Counseling and Development has stated, “When the client’s condition indicates that there is clear and imminent danger to the client or to others, the member must take reasonable personal action or inform responsible authorities”. Similarly, The American Association for Marriage and Family Therapy says that confidentiality should be maintained unless “there is clear and immediate danger to an individual or to society”. Likewise, the Standards for the Private Practice of Clinical Social Work of the National Association of Social Workers emphasizes that “the clinical social worker in private practice may find it necessary to reveal confidential information disclosed by the patient to protect the patient or the community from imminent danger”. And finally, the American Psychological Association states that information should be revealed to others only with the permission of the client “except in those unusual circumstances in which not to do so would result in clear danger to the person or to others”.

Clearly there is ethical basis for taking action in the case of serious threats. Yet the admonition of the AACD should be kept in mind, “the assumption of responsibility for the client’s behavior must be taken only after careful deliberation”.

The above questions represent the ethical “standard of practice” and comprise a schema for determining whether such direct intervention is necessary.

**SUMMARY**

The purpose of this article is to describe in the context of control theory and reality therapy the ethical considerations in determining the lethality of the suicidal threat, as well as the need for direct intervention. It is important to note that much latitude remains in developing further questions from those provided above. Consultation should be utilized each time the counselor determines that the threat is serious. Finally, effective reality therapy should be used to help the client gain better control through plans which enhance involvement with others, increase a sense of accomplishment, make life more enjoyable, and provide a feeling of independence. Such plans should be short-range, specific, and attainable.

**References**

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USING THE CAR ANALOGY TO TEACH CONTROL THEORY TO GIFTED ELEMENTARY SCHOOL CHILDREN

Carleen Floyd

The author is reality therapy certified and a basic practicum supervisor who works as a counselor in North Bend, Ohio.

Teaching people the idea that they are control systems always in control of their own behavior is not an easy task, for it appears that most people believe they respond to stimuli which motivate them to behave (S-R Theory). Control theory is based on the principle that we are internally motivated to fulfill our needs and we have specific pictures of what we want in order to satisfy these needs (Glasser, 1984, 1986). In the book Control Theory (1984), Glasser says, "A control system acts upon the world and itself as part of the world to attempt to get the picture that it wants. . . . Whenever there is a difference between what we want and what we have, we must behave - which means acting, thinking, feeling, or involving our body, all of which are components of the total behaviors we generate as we struggle endlessly to get what we want."

Because children tend to be more accepting of new ideas than adults, they usually more readily accept the concept of themselves as control systems. The difficulty is trying to explain a complex, abstract concept such as control theory in a way that a young child understands. Teachers in elementary classrooms successfully use three dimensional objects whenever possible to help children make the necessary conceptual transition from the abstract to the concrete.

Teaching Control Theory in a Group Guidance Setting

The director of the Three Rivers Local School District's Gifted and Talented Program requested that I work with a group of gifted fourth grade students to help them deal with problems they were having in relating to people. It was mutually agreed that the group meet with the counselor for thirty minute sessions, once a week, for ten weeks during the first quarter of the school year. During the opening sessions, standard group activities were employed to help the students get to know each other better, establish group trust and begin the cohesion process. For example, each student in the group was asked to participate in a round-robin exercise called "The One Minute Life Story". They told the group information about themselves from birth to the present time, but because their time was limited they were forced to choose and prioritize the information they actually shared with the group. There is safety in the brevity of this exercise, yet freedom for the student to risk sharing something of a more personal nature (Stanford, 1972). Knowing a little more about one helped the group become closer.

Another activity to promote the same kind of opportunity for group cohesion was "The Problem Basket." Students were asked to write down a real or hypothetical problem typical of a gifted child. All the problems were then collected and placed, folded, in a large basket. One problem was picked out of the basket at a time and it was then the task of the whole group to discuss possible solutions to these problems.

Construction of the Car

While studying Glasser's new chart (1986), it became evident that the car on the left side of the chart could be used as a valuable teaching aid. A model car could be made with all the parts labeled to represent the various components of the control theory chart.

The help of the high school wood shop teacher was enlisted to draw plans for the car and to actually construct a model. It was to be made of wood with the engine exposed and with four cylinders visible on top of the engine. The plans also called for it to be a convertible with a driver seated inside, behind the steering wheel. When the car was finished, it was pleasing in design and the finish was smooth and sleek with the natural grain of the wood enhancing its visual and tactile appeal. One quarter inch black plastic stick-on letters were used to label all the parts. (Figure I)

The four cylinders were labeled, each with one need, i.e., BELONGING, POWER, FREEDOM and FUN. The base of the engine was labeled SURVIVAL. The center top of the engine read BASIC NEEDS. Each of the four wheels had one of the total behavioral components lettered on it with ACTING and THINKING on the two front wheels and FEELING and PHYSIOLOGY on the back wheel. The steering wheel was labeled WANTS and the interior of the car labeled INTERNAL WORLD, PICTURE ALBUM, and so on.
Using the Car as a Teaching Aid

When the children first saw the car they were very curious. It was explained that the car is like them, using their brains as control systems, moving through life choosing roads that either get them where they want to go or not. They are always in the drivers' seat and in control. The goal is to be in effective control by taking the roads in life that will get them to their destination - need satisfaction. “The control theory explanation of behavior is that we always choose to do what is most satisfying to us at the time” (Glasser, 1986). “As Glasser frequently states, human beings do not fulfill their needs directly, but rather they are met through the inner world of wants (the picture album), the behavioral system which maneuvers the world, and the perceptual system . . . which filters the images of the world” (Wubbolding, 1985).

It was exciting to share the car analogy with the children to illustrate how people behave to get their needs satisfied. Using examples from real life, the children discovered that they all shared the same basic needs, but each of their picture albums contained uniquely different pictures or wants to satisfy these needs. It was easy for the children to see that if even one of their basic needs is not being met, it is like one cylinder in the car out of adjustment. A four cylinder car obviously will not run as smoothly on two or even three cylinders. People function similarly when their needs are frustrated.

Application of the Car Analogy

At this point in the group sessions the children were asked to draw a picture of themselves as they would look if one of their cylinders was not running smoothly. When their pictures were finished they were to explain to the group the story behind the picture. The children liked describing their pictures and often helped each other decide which of the basic needs was not being met and how the specific picture or want in that person’s album was not matching what they perceived in the real world. The purpose of this activity was to “help them sort out and define in precise ways this exciting inner world which linked to the need system is the source of all human motivation” (Wubbolding, 1985).

Benefits of Having Learned Control Theory

After all the other children had had a turn, Jessica, the one and only quiet member of that spirited group, shyly explained her picture to the rest of the children. She had drawn herself, sitting all alone at the bottom of the paper with a very sad face. Above her head she had outlined a large “thought-bubble”, inside of which was a picture of her grandmother living in Florida, whom she had not seen in two years (Figure II). Jessica told the children that she missed her grandmother very much and would like to see her again. The children were quick to point out that Jessica’s need for BELONGING and also for FUN would most certainly be met by such a visit. We asked her if she had shared her needs and the pictures in her album with her parents. The answer was no, not yet. The group suggested that she do so as soon as possible. The next week, Jessica could hardly contain her excitement when group began. She bubbled with the news, “We’re going to visit grandma over the Spring Break! Dad said he didn’t realize how very much it meant to me until I told him about the pictures in my head, my wants, and my need for BELONGING”. 
Another group member, Abby, remarked that because of her new way of looking at people through control theory, she is having fun and relaxing more around her friends. She said she used to “get aggravated at them for being so childish and for picking on her because she gets better grades than they do.” She resented them for seeing her only as “one of those gifted kids” and not as the individual she wants them to accept and like. In Identity Society, (1985), Glasser observed that “... today almost everyone is personally engaged in a search for acceptance as a person or as a person performing a task rather than as a performer of a task alone.” Abby has begun to recognize that she can’t control other people, she can only control how she behaves around them. She said that since she learned this she has more friends.

Bart said that before he knew about control theory he used to worry all the time because his parents expect him to be perfect. He said he recently told them what control theory states - he is always doing the best he can at the time and although he wants them to be proud of him, he has chosen not to worry about it anymore. He knows that if they choose to worry he really cannot take responsibility for their misery. The end result was that Bart was obviously in more effective control of his life because he chose to give up his worrying behaviors by not owning his parents’ anxiety over having a gifted child.

By the end of the first five weeks of the group sessions, the teacher reported that the children were already getting along better with each other. She said at the end of the ten weeks she noticed that most of the children were willing to accept responsibility for their own behavior and were able to see the importance of making choices that would result in positive rather than negative consequences. Having the children evaluate their own behavior in this way was the key to their understanding how each of us is always in control of our lives. Some of the questions originally raised by the children were being answered by them.

They now understood their jealous classmates in terms of control theory and the need for power and competition. They realized that their parents also have certain pictures in their albums of the way their child ought to be and the picture they see of themselves as parents. They now understood that people will do things they see as unpleasant, like homework, in order to fulfill a more satisfying need like acceptance and recognition by the teacher.

Because the car is a tangible object in, and a part of the real world, the children could easily understand the concept that the pictures in their internal world of wants may often be totally different from what they actually perceive in the real world. They could also understand that by behaving, using all four components of the behavioral system, (all the wheels rolling at once), they act on the real world to try to get a match between what they want and what they have. In other words, they could see themselves in the drivers’ seat, not being controlled by others or by stimuli outside themselves.
With the map it can easily be explained that we are always on the “In Control Highway System” of life, but whether we are in effective control depends largely on the roads we take. The children were encouraged to ask themselves the following questions: Is the road I am traveling now getting me where I want to go? Is what I want realistic and is it possible that the road I am taking now will get me there? What will happen if I change direction, or choose another road? If the road I am taking now is not getting me where I want to go, what do I have to do to find a more effective road?

Other Applications of the Car/Road Analogies

The car and road map have been used with a wide range of age groups recently, with similar success. By varying the complexity of the presentation to make it age-appropriate, it has been possible to reach hundreds of people with the control theory message. It was taught last year in North Bend, Ohio, to 75 Taylor High School students in a leadership training program called Project LEAD.

More recently, it was used in a teacher inservice workshop called M.O.S.T. (Motivational Opportunities for Successful Teaching). The importance of teachers taking a different point-of-view from the traditional S - R approach to teaching was stressed in the workshop. Glasser's new book, Control Theory in the Classroom, was an ideal resource for recommended reading. As a result of the workshop, many of the teachers have decided to work in learning teams and complete the entire M.O.S.T. Program, which includes designing lesson plans for learning teams as described by Glasser in the book.

Plans for Down the Road

The car presentation will be used by the Basic Practicum Supervisor to help supervisees understand control theory. It will also be used in neighboring school districts for presentations on control theory at inservice programs and teachers’ meetings. Driven by past success with these presentations, the road ahead is in effective control.

References
Glasser, W. (1986) A Diagram of the Brain as a Control System, (Chart) Institute for Reality Therapy, California

VALUE JUDGMENTS: A SIGNIFICANT ASPECT OF REALITY THERAPY
Janet A. Thatcher

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Why don’t clients readily do as therapists suggest they do? When making plans with clients, why is there resistance? What happens when the therapist’s values are evident in the therapy session? This article will address these and other issues relating to the effects of values within the therapy relationship.

Glasser (1986) states that “the core of reality therapy is to ask the client to make the following evaluation: ‘Does your present behavior have a reasonable chance of getting you what you want now and will it take you in the direction you want to go?’” The idea of asking the client to self-evaluate is unique to reality therapy. Most therapies tend to make the assumption that because the client is participating in therapy, he/she will agree and cooperate with whatever the therapist suggested. With reality therapy, the direction is to give (both directly and indirectly) the responsibility to the client. As a result, the dependency upon the therapist for the direction and the outcome of therapy may be significantly reduced in the perception of the client. The therapist will directly solicit evaluations from the client as therapy proceeds. Indirectly, the therapist does not assume the responsibility when the client attempts to place the responsibility with him/her.

Glasser (1984) discussed the importance of pictures or wants as determinants of the representations in the valuing filter. In control theory psychology, the valuing filter is a component of how the Real World is perceived. Thus, these wants determine how individuals evaluate what is perceived in the Real World and how the total behaviors are viewed. In asking the client to make evaluations, the therapist is asking for an examination of various components of an individual’s being. According to control theory psychology (Glasser, 1984 and 1986), an individual can evaluate the wants, and the total behaviors and behavioral systems in relation to the wants. This operation seems to occur in the Comparing Place where what is perceived and what is wanted are compared. Therefore, the therapist may help the client to examine both the process and the content. By asking evaluative questions, the therapist is helping the client to become aware of the signals of an unbalancing system, i.e., being in less effective control, or of a balancing system, i.e., being in more effective control. The signals of the unbalancing system include a possible slow gnawing discomfort or unsettledness. The signals of a balancing system include a satisfying, pleasuring feeling or a sense of accomplishment. The strength of the signal varies depending on the severity of the unbalancing. The content of the Comparing Place is examined indirectly through the discussion and sharing of the wants or pictures and the describing of the total behaviors.
In summary, the wants determine the values which affect the perception of the Real World. Thus, the perceptions of the Real World and the wants are compared. The therapist assists the client in evaluating the total behaviors and their effects in getting the desired pictures.

The techniques of getting the client to evaluate total behaviors and pictures are called “value judgment” questions in reality therapy. The therapist’s role is to help the client self-evaluate behaviors and wants, and to withhold trying to impose his/her opinion. Many clients wish to conform to whatever the therapist is advocating at the time, but the pictures of the therapist and the client may not be matching. In addition, if the therapist is giving directive opinions which include inherent value judgments, the responsibility may be transferred to the therapist rather than being with the client. For example, clients, such as resistant juvenile delinquents, tend to be unwilling to assume responsibility but wish to appear to be doing so. The behaviors which are used tend to include listening closely to what the authority figure wants, conforming with words and short-term cooperating. If the therapist gives specific pictures or value judgments, the delinquent will have continued difficulty making decisions for self and accepting responsibility. Therefore, the therapist needs to withhold imposing both pictures and opinions.

It should be noted that counseling/therapy is never value-free. By the questions which the therapist asks, the client will be able to determine some of the therapist’s values and pictures. Often, the client will request the therapist’s opinion, and whenever possible and appropriate, the therapist needs to solicit the client’s thinking and then, if necessary, add ideas. Emphasis should always be on the client’s making the decision.

Occasionally, a conflict may occur between the values of the therapist and client. An example is the moral decision regarding abortion. If the difference becomes evident to the therapist, it becomes his/her responsibility to clarify the issue and to establish appropriate limits. To expand on the previous example, if the therapist opposes abortion and the client is seeking support regarding an abortion (past, present, or future), it is the therapist’s responsibility to discuss their differing perceptions and possibility to make a referral.

The therapist may solicit value judgments from the client by asking specific closed-ended questions regarding the wants and total behaviors. Regarding value judgments on the wants, appropriate questions include the following: “Is what you want (using specific descriptions) realistic?”, “Is what you want attainable?”, “Is what you want going to be to your benefit?”, or “Is what you want going to benefit your relationship with so-and-so?” In asking these questions, the therapist is asking the client to evaluate the acquiring of the wants or pictures.

Asking value judgment questions regarding the total behaviors is another effective means of having the client evaluate the situation. The core question in Reality Therapy is “Does your present behavior have a reasonable chance of getting you what you want now and will it take you in the direction you want to go?” Variations on asking the client to evaluate the total behaviors include the following: “Is what you are doing helping you?”, “Is what you are doing to your benefit?”, “Is what you are doing against the rules?”, or “Is what you are doing going to help you in the long run?” Being specific regarding the behavior is important in helping the client to make a clear and precise decision.

Asking the client to evaluate each component to the total behavior is appropriate in reality therapy. By asking a depressing client if depressing is helping or hurting, the therapist introduces the idea of choice to the client in an indirect manner. The evaluation of doing, thinking, feeling, and physiologic behaviors is within the scope of the client’s capability and responsibility. It should be noted, however, that once the decision is made to change, the therapist should focus on the doing and/or thinking behavior with the client. This direction will help the client to gain the most control over modifying the doing behavior, which is the most amenable.

Other areas of evaluation may include helping the client to assess (1) the perceptions, (2) the consequences of the behaviors (present and future), (3) the plans of action, and (4) the commitment to therapy. By asking the client, “Does it help you to view the situation or person in this way?”, the perceptions and thus pictures are being assessed. The consequences are examined by having the client identify them and then asking, “If you do this, will it help you acquire what you want?” or “If this is the consequence, is this going to be helpful to you?” By asking, “Is the plan realistic or attainable?”, the plan of action can be evaluated. The therapist can also ask, “Is it to your benefit to participate actively in this therapy?” or “Will it help you to examine various areas of your life and make decisions regarding changing?” These questions will clarify the commitment to counseling/therapy. Continually, the responsibility is placed with the client.

Lastly, the therapist needs to ask him/herself, “Is what I am doing or thinking helping the client?” By periodic evaluations, the therapist assesses the behaviors within the session, thus taking responsibility for the process of therapy.

In conclusion, it may be helpful for the therapist to remember the following analogy: You can lead a horse to water but you can’t make it drink, although you can continue to walk it around the water until it gets thirsty. The therapist can continue to ask the value judgment questions but need not take on the responsibility for the answers; the responsibility is with the client.

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Bibliography

The author is Assistant Director, Counseling and Care Services, Danville, PA.

Counseling & Care Services committed itself in mid-1984 to adopt reality therapy as the basic theoretical approach in the practice and life of the agency. This article is a report, after two years, to show what progress can be expected if an organization seeks to make thoroughgoing use of reality therapy/control theory.

DESCRIPTION OF THE AGENCY

Counseling & Care Services is a private foster care agency which limits its practice to the treatment of children and youth with special problems. Most of its clients are teenagers. While the types of problems are certainly varied, socially unacceptable behavior is a major factor in most cases. Family dysfunction, diagnoses of emotional or mental disturbance, and mental retardation are common.

The primary treatment provided by Counseling & Care Services is placement in appropriate foster homes. Caseworkers provide case management services, and formal counseling is offered to clients as needed. The experience of the client in the home, learning to function as a member of a successful family, is the basic treatment.

On discharge, clients return to their normal family homes when this is workable. Some are emancipated directly from foster care at age 18. Some go to more restrictive treatment settings when the treatment program at C&CS is not successful.

Counseling & Care Services has five offices in Pennsylvania with a total staff of about 30. Each office has a supervisor, two or three caseworkers, and a secretary.

The foster parents in Counseling & Care Services must be willing to take young people with known problems into their home. Honest information about the clients and the program is given to foster parent applicants. At times the past behavior of clients includes stealing, arson, prostitution, or drug abuse.

A minimum of 18 hours of formal training per foster family per year is required. However, the greatest source of guidance to foster parents comes in the close working relationship with agency staff.

DEVELOPING THE REALITY THERAPY/CONTROL THEORY APPROACH WITHIN THE AGENCY

Selecting the reality therapy/control theory approach - Teamwork within the agency was a major goal when Counseling & Care Services was founded in 1982. One barrier to the development of teamwork was the confusion and difficulty in communication arising from an eclectic approach to counseling, and from a variety of theoretical and common sense understandings of why people behave as they do, and how problems should be solved.

A "single theory" approach was adopted so that terms could be clearly defined and common purposes understood. Ideas and methods from other sources would be added, but only in a manner compatible with the basic theory. But what theory should be used?

An appropriate theory and method would need to meet several criteria. The basic ideas would have to make sense to the team members, and the theory would need to be believable without a great loss of faith, or giving up all prior convictions. The method would have to be teachable to people at varying levels of training, skill and sophistication.

The basic values of acceptance, self-determination, honesty, and respect would remain intact. Safety in application would be fundamental; an unskilled person would need to be able to apply the method without endangering the welfare of others. Speed in application would be critical, since many of the problems encountered would require at least some immediate action.

Practical availability would be critical; literature, training materials, skilled trainers, and measures of skill and accomplishment would be needed. Finally, the approach would have to be recognizable and acceptable to people in county agencies who would refer clients to Counseling & Care services.

Reality therapy/control theory meets these criteria, and thus it was adopted as the basic theory and method of the agency.

Training staff in Reality Therapy/Control Theory - Reading and discussion were the initial means of training. The process picked up speed and depth in August, 1984, when Nancy Buck and Peter Appel conducted a First Intensive Week for four agency administrators, five supervisors, and two caseworkers. A year later, Perry Good conducted a Second Intensive Week, and another first week was held for caseworkers. Major training weeks and practica have been conducted at the agency, rather than at publicly advertised sessions.

As of October 1986, the Counseling & Care Services' staff includes seven persons certified in reality therapy, 14 in training for certification, three who have done some reading or attended some training, and three who are not started or not involved.

Another Second Week is scheduled, and a special day of training for secretaries is on the calendar. The objective (limited only by staff turnover) is to have full applicable training for all staff.

Training foster parents in reality therapy/control theory - Foster parent training is done primarily by staff. A chapter on reality therapy has been written in The Manual for Family Based Treatment (Confer, 1985).
which all foster parents are expected to read. Formal training sessions on reality therapy are held periodically, and the reality therapy/control theory approach is used in training sessions that focus on other topics such as discipline. A videotape, “Fostering Self-Discipline,” was made by the agency; it spells out the basic reality therapy process clearly. Staff assessed the extent of training of foster parents as shown in Table 1.

Beyond formal training, the caseworkers demonstrate and teach the reality therapy/control theory approach as they work with foster families. Caseworkers teach reality therapy/control theory by coaching foster parents, and by demonstrating RT/CT in problem-solving discussions with foster parents and foster children. In one situation, discussion in the home helped the foster children in the home stop harassing each other at school. The manual serves foster parents as a reference, and caseworkers refer them back to the manual as a part of the coaching process.

Caseworkers report that new foster parents often lack faith in reality therapy/control theory. Many do learn it, however, and they use it to handle situations which would previously have required staff intervention. A few lack the flexibility required to learn and use RT/CT, and this can be a signal that they have limited promise as foster parents.

### Table 1

**TRAINING OF FOSTER PARENTS IN REALITY THERAPY**
**OCTOBER, 1986**

<table>
<thead>
<tr>
<th></th>
<th>Foster Mother</th>
<th>Foster Father</th>
<th>Total Mothers and Fathers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has read <em>Manual for Family Based Treatment</em> material on reality therapy.</td>
<td>41 = 61%</td>
<td>27 = 43%</td>
<td>68 = 52%</td>
</tr>
<tr>
<td>2. Has attended formal training on reality therapy.</td>
<td>60 = 90%</td>
<td>50 = 79%</td>
<td>110 = 85%</td>
</tr>
<tr>
<td>3. Has discussed reality therapy with staff.</td>
<td>54 = 81%</td>
<td>44 = 70%</td>
<td>98 = 75%</td>
</tr>
<tr>
<td><strong>TOTAL FOSTER PARENTS</strong></td>
<td>67 (100%)</td>
<td>63(100%)</td>
<td>130(100%)</td>
</tr>
</tbody>
</table>

**TIME WITH COUNSELING & CARE SERVICES:**
**LESS THAN SIX MONTHS**

<table>
<thead>
<tr>
<th></th>
<th>Foster Mother</th>
<th>Foster Father</th>
<th>Total Mothers and Fathers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has read <em>Manual for Family Based Treatment</em> material on reality therapy.</td>
<td>17 = 49%</td>
<td>9 = 32%</td>
<td>26 = 41%</td>
</tr>
<tr>
<td>2. Has attended formal training on reality therapy.</td>
<td>12 = 34%</td>
<td>5 = 18%</td>
<td>17 = 27%</td>
</tr>
<tr>
<td>3. Has discussed reality therapy with staff.</td>
<td>23 = 66%</td>
<td>15 = 54%</td>
<td>38 = 60%</td>
</tr>
<tr>
<td><strong>TOTAL FOSTER PARENTS</strong></td>
<td>35 (100%)</td>
<td>28 (100%)</td>
<td>53 (100%)</td>
</tr>
</tbody>
</table>

Training clients in control theory/realty therapy - Supervisor/Counselors and caseworkers often discuss the RT/CT method of problem solving with clients. They encourage clients to learn the reality therapy process and concepts and to use them in dealing with future situations.

One supervisor has written a booklet explaining personal needs to clients, and showing how to apply the steps to problems (Metcalf, 1987). The booklet emphasizes that the use of reality therapy/control theory is an expression of the staff’s faith in, and concern for, the client.

Questions to staff about their observations produced the responses in Table 2.

### Table 2

**TRAINING OF CLIENTS IN REALITY THERAPY**
**OCTOBER, 1986**

**FOSTER CHILDREN WHO HAVE BEEN IN CARE WITH COUNSELING & CARE SERVICES TWO MONTHS OR MORE**

<table>
<thead>
<tr>
<th></th>
<th>Girls</th>
<th>Boys</th>
<th>Total Girls and Boys</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has listened or been involved in explicit discussion of Reality Therapy/Control Theory.</td>
<td>19 = 76%</td>
<td>23 = 77%</td>
<td>42 = 76%</td>
</tr>
<tr>
<td>2. Has demonstrated understanding of Reality Therapy/Control Theory in some way.</td>
<td>16 = 64%</td>
<td>20 = 67%</td>
<td>36 = 65%</td>
</tr>
</tbody>
</table>

TOTAL CLIENTS STUDIED 25 (100%) 30 (100%) 55 (100%)

Foster children usually demonstrated their understanding of RT/CT by discussing it or by reporting that they had applied it. Uncertainty and bewilderment came to one foster child when the foster family considered accepting a second foster child. The first foster child remembered the RT training and requested a family conference to examine and decide "what we all really want." (They decided they didn’t really want another child at that time.)

One child who wanted to be adopted used her RT/CT training to go forward on her own plan and secure the legal release necessary to clear the way for adoption. Another developed a support system so that she could return home safely even though she was afraid to be alone with a new stepfather.

In one office, eight clients were given instruction in reality therapy just prior to discharge. Seven of the eight learned the reality therapy process well enough to be able to state and describe it back to the supervisor.
EXPERIENCE WITH RT/CT

Assessing the effects of reality therapy/control theory - An interview study was made in three of the five offices: The three selected had minimum recent staff turnover. Staff were asked to report specific observations about each client and foster home served by that office. Staff also were asked about reality therapy/control theory in their own personal experiences in the agency. All staff members in each of the three offices participated in the study. The numerical results presented below all come from this study.

Reality therapy/control theory in counseling - Much of Glasser’s original development of reality therapy was done in counseling youth who exhibited socially unacceptable behavior. The applicability of his method in Counseling & Care Services is obvious. Counseling & Care Services supervisors have been redesignated “Supervisor/Counselor”, and they provide nearly all of the formal counseling to the clients, using the RT/CT method. Prior practice had been to send many clients to professional counselors outside the agency, often in the public Mental Health/Mental Retardation system.

Reality therapy/control theory counseling has been found to be effective in the judgment of supervisors and caseworkers. They reported that 80% of 55 clients aged 11 and over (normal intelligence) responded positively to reality therapy.

One boy came with a record of extreme truancy. In counseling, he clarified his strong desire to be a professional athlete; then he successfully carried out a plan to attend school in order to play on school teams. (There were also positive responses by younger clients and by mentally retarded clients. The numbers involved were small.)

Using reality therapy also means that counseling is consistent with other aspects of treatment, and the former confusion of the client by differing methods is relieved.

Reality therapy/control theory in case management - Caseworkers work with clients, foster parents, county caseworkers, and sometimes natural parents to establish goals for the client to accomplish while in treatment. As an example, a client with school problems may need to learn ways to get along in school without angry outbursts that are met by punishment and suspension.

Traditionally, it has been easy for adults to impose goals on clients as a condition of eventual release from the legal custody of the child welfare system. Reality therapy asks the client to determine what he/she wants, to evaluate present behavior, and to make a plan that will work. This helps the caseworker focus goal setting on the client’s decisions and commitments, rather than on gaining verbal assent to the adults’ “better judgment”.

Undesirable natural consequences (such as suspension from school, prison, and drug dependence) surround many of the options that seem open to Counseling & Care Services’ clients. Reality therapy strategies are very useful in helping clients work out goals that will enable them to successfully get their needs met in the short run and in the future.

Awareness of needs that must be met is also useful in working with foster parents. Many foster parents are not accustomed to think of themselves as having a right to get their own needs met. Thus they tend to tolerate conflicts in the foster home until patience is exhausted, and then to demand the removal of the foster daughter or son.

Caseworkers are called on to help resolve such conflicts, and to train foster parents to avoid them by negotiating with the foster child. Caseworkers report that they regularly make use of reality therapy/control theory in these situations. The needs of both the foster parents and the foster child must be taken seriously. In one instance, foster children used the telephone in a continuous series of 15-minute calls each evening, conforming literally to the foster parents’ rule of 15 minutes maximum. Using RT principles, the caseworker led the family to agree on a limited number of 15-minute calls each evening. Experience in such problem-solving is considered to be a valuable asset for the client (foster child).

Caseworkers also report making conscious use of reality therapy/control theory in coaching foster parents in handling discipline problems in the home.

Use of reality therapy/control theory by foster parents - Foster parents are given specific training in reality therapy/control theory, in order to extend the abilities that they bring to foster parenting. Counseling & Care Services’ clients are usually more demanding to work with than other children they have known or raised.

Staff members were asked whether foster parents reported using reality therapy/control theory. Staff members were also asked if they had observed foster parents using reality therapy/control theory. Positive responses indicated in Table 3 represent a minimum of one instance per foster parent.

The reports and observations listed in Table 3 depend heavily on staff judgment. The instances reported may be as small as focusing on natural consequences when a rule is broken in the home, or as large as major informal counseling by a foster parent when the foster child recognizes a problem such as drug abuse.

Foster parents use the insights of control theory to give foster children choices, and thus power, in deciding what chores they are to do. When children depress because they are not permitted to return to their natural homes, foster parents help them see that their present behavior is not working, and that they can act to help themselves get home.

The figures shown are higher than many staff members expected. Multiple instances by the same person do not show in the figures, and unreported and unobserved instances are not, of course, included. Foster parents with less than six months in the program are considered to be in their initial learning phase.
Total Foster Mothers and Foster Fathers
42 = 63% 31 = 49% 73 = 56%

Use of reality therapy/control theory by clients - Clients' (foster children) are often openly told by staff that reality therapy is basic to the way Counseling & Care Services will work with them. They are invited to understand the method and use it for self-guidance. Thus, it was appropriate to ask staff about reports and observations of the use of reality therapy/control theory by foster children. The results are in Table 4.

Foster children were not systematically asked if they had applied RT/CT; this may help explain why the observed instances exceed the reported instances.

Reality therapy/control theory in lives of staff members - Staff members contributed these observations about the influence of reality therapy/control theory in their working lives:

The use of a common approach and a common language throughout the agency, including the administration, is very helpful. This is especially true when one worker must take over a case from another or represent someone else in a meeting. It is very helpful when a child in care is transferred from one office of the agency to another.

Control theory helps staff members think and act to help each other get their needs met. They report reminding each other to have fun, and being encouraged by colleagues to take time off for themselves without guilt. Staff members report that the use of reality therapy/control theory in the agency helps them take more appropriate responsibility for themselves. They find it easier to avoid taking clients' problems on as their own. They also report a lowered tendency for themselves to make excuses and grumble.

Staff members also report that using reality therapy/control theory results in an increased ability to clarify relationships and responsibilities. They are more likely to state their needs and ask for changes rather than harboring resentment. Some staff report reduction in the use of hierarchical authority to define staff relationships. Reality therapy/control theory has led in the direction of greater equality.

When secretaries have learned the basic ideas of reality therapy/control theory, they are better able to understand and communicate with foster children, foster parents, and staff. In tense situations in the offices or on the phone, secretaries use their understanding to help reduce the anxieties of the persons involved.

Reality therapy/control theory in relationships with cooperating agencies - Clients come to Counseling & Care Services from county child welfare agencies. Staff members at Counseling & Care Services report that reality therapy/control theory helps them keep roles and relationships with county agency staff members clear and friendly, and to deal with those who become angry or demanding. Reality therapy/control theory helps staff know how to clarify what county officials, natural parents, and clients really want in specific case situations.

### Table 3

**USE OF REALITY THERAPY BY FOSTER PARENTS**

<table>
<thead>
<tr>
<th>Time with counseling &amp; care services: six months or more</th>
<th>Foster Mother</th>
<th>Foster Father</th>
<th>Total Mothers and Fathers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has said he/she used reality therapy with foster children.</td>
<td>42 = 63%</td>
<td>31 = 49%</td>
<td>73 = 56%</td>
</tr>
<tr>
<td>2. Has been observed (by staff) using reality therapy with foster children.</td>
<td>42 = 63%</td>
<td>31 = 49%</td>
<td>73 = 56%</td>
</tr>
</tbody>
</table>

**TIME WITH COUNSELING & CARE SERVICES: LESS THAN SIX MONTHS**

<table>
<thead>
<tr>
<th>time with counseling &amp; care services: six months or more</th>
<th>Foster Mother</th>
<th>Foster Father</th>
<th>Total Mothers and Fathers</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has said he/she used reality therapy with foster children.</td>
<td>13 = 37%</td>
<td>8 = 29%</td>
<td>21 = 3%</td>
</tr>
<tr>
<td>2. Has been observed (by staff) using reality therapy with foster children.</td>
<td>7 = 20%</td>
<td>6 = 21%</td>
<td>13 = 21%</td>
</tr>
</tbody>
</table>

**TOTAL FOSTER PARENTS**

67 (100%) 63 (100%) 130 (100%)

### Table 4

**FOSTER CHILDREN WHO HAVE BEEN IN CARE WITH COUNSELING & CARE SERVICES TWO MONTHS OR MORE:**

<table>
<thead>
<tr>
<th>11 Years and older - Normal Intelligence</th>
<th>Girls</th>
<th>Boys</th>
<th>Totals Girls and Boys</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Has reported applying reality therapy/control theory to his or her situations.</td>
<td>7 = 28%</td>
<td>7 = 23%</td>
<td>14 = 25%</td>
</tr>
<tr>
<td>2. Has been observed applying reality therapy/control theory to his or her own life tasks and situations.</td>
<td>16 = 64%</td>
<td>16 = 53%</td>
<td>32 = 58%</td>
</tr>
</tbody>
</table>

**TOTAL FOSTER CHILDREN**

25 (100%) 30 (100%) 55 (100%)
Some county agency and school staff persons have observed the use of reality therapy/control theory at C&CS and have expressed interest. “Informal training” (conversation and some formal training) has been provided by Counseling & Care Services’ staff.

A few county agencies have specified that clients placed with Counseling & Care Services are to receive counseling at Mental Health/Mental Retardation facilities rather than at C&CS. Recently, however, some counties have specifically requested reality therapy for clients placed with C&CS.

Counseling & Care Services’ staff avoid the use of reality therapy/control theory terminology when testifying in court. They believe judges assume “we are giving the kids everything they want.” It is better to say, “the child has worked for this, and we think he will do well,” rather than, “this way is the most promising because it is what the child really wants.”

CONCLUSION

Penetration - In the two years since the first group of staff members entered formal training, reality therapy/control theory has reached nearly every corner of the life of the agency.

Staff have accepted the method, learned it, and taught it. Many foster parents have found it useful and have incorporated it in their methods of working within the foster family. Some clients have consciously used reality therapy/control theory in dealing with their personal needs for behavior change.

Methods of training and expectations for learning reality therapy/control theory are in place. RT/CT as a common language and a generally accepted method is established in the agency.

Evaluation - The desirability and effectiveness of the reality therapy/control theory approach are generally accepted by the Counseling & Care Services’ staff and by a significant share of the foster parents. The method is considered workable and teachable; it is usable in part or in whole, and it has not led to errors or unintended effects.

While some foster parents may still prefer a more controlling type of discipline, many have accepted the reality therapy/control theory approach of helping foster children learn to get their needs met through responsible behavior.

The cost of training staff and foster parents has not strained the agency’s resources, especially since improving the effectiveness of the program improves the financial return. Nearly all staff members have been pleased to receive reality therapy/control theory training. It seems clear that the chance to learn the theory, use it, and achieve certification in it has helped reduce staff turnover in a field noted for high turnover.

Projections Toward the Future - Two years hence the majority of professional staff should be certified. The number of foster parents who are well experienced with reality therapy/control theory (and able to coach other foster parents) should be high.

Further development of training methods and tools is anticipated, and further integration of reality therapy/control theory into methods and practices is planned. For example, procedures for defining treatment plans and goals will be revised to provide for clearer application of control theory in formulating goals, and for better follow-up and clearer evaluation.

References
APPLYING CONTROL THEORY IN THE GIFTED AND TALENTED CLASSROOM

Edward W. Chance
Patti L. Chance

Both authors are at South Dakota State University, Brookings, S.D.

National attention from a variety of sources has been focused on needed reform in education. In his recent book, Control Theory in the Classroom, Glasser (1986) addressed the need for schools to re-structure the classroom learning environment in order to keep students interested and involved in learning. Glasser contended that students are currently not successful in school because school is not part of their pictures which fulfill their basic needs. He proposed the use of a cooperative learning approach which will satisfy students’ basic needs for fun, belonging, power and freedom. By doing so, students will be provided pictures of learning in school which are need-fulfilling. In Glasser’s proposal, he cites America’s current concern with the state of education as indicated by numerous reports.

One particular group of students who are at risk in our educational system are the gifted and talented. Concern for more effective schooling should not ignore the challenge of developing the potential of our brightest youth, who are among those students who Glasser describes as not having their needs fulfilled through school. According to Glasser, “Even the good students don’t feel all that important in school . . .” (Gough, 1987, p. 658).

Developers of gifted programs have been concerned with designing programs which offer differentiated education to meet the needs of the gifted learner. However, many programs focus only on cognitive aspects of gifted students and fail to address their basic needs. Many so-called gifted programs offer little more than enrichment within the classroom, with the result too often being greater quantities of work assigned to gifted students to be performed in isolation from their peers. The quality of programs for gifted students should be of concern to us when we find that fully half the identified gifted students do not perform academically at a level comparable to their ability (Gallagher, 1975). These students, when their needs are not met, often become bored and contribute noticeably to the high school dropout rate (Ming & Gould, 1973).

The model for gifted education discussed here is a wholistic approach designed to provide integrative experiences concerned with the cognitive needs of those students as well as their basic needs of fun, freedom, belonging, and power. The basic tenets of control theory and reality therapy were applied in developing and implementing this model for gifted education which was used successfully by one of the authors while serving as coordinator of gifted programs in two different school districts.

Characteristics and Needs of Gifted Learners

Researchers in gifted education have discussed needs in terms of interactive components within a person’s life. Clark (1979) categorizes the characteristics and needs of gifted learners into five domains: cognitive, affective, physical, intuitive and societal. Clark envisions these domains as interacting and interdependent. Roeper (1982) states that emotions can not be treated separately from intellectual or physical elements, because they are interrelated and influence each other. Similarly, Glasser (1984) describes behavior as having four components: acting, thinking, feeling and physiological.

An examination of gifted students reveals that gifted learners, in a generic sense, do exhibit differentiating characteristics. Among the characteristics of gifted students, as described by Clark (1979), are: advanced comprehension, curiosity about a variety of subjects, high language development, flexible thought processes, early development of differential thought patterns and processes, an evaluative approach to themselves and others, unusual sensitivity to others, a keen sense of humor, feelings of being different, and high expectations of self. The former is not intended as an exhaustive list of differentiating characteristics, but rather as a sampling of characteristics which illustrate that the concern in gifted education does not simply concentrate on the cognitive processes, but on the total person.

The characteristics of gifted children are accompanied by needs and problems related to their giftedness. These needs and problems are manifested in the behaviors of gifted students which call our attention to developing learning programs appropriate for gifted learners. Observed behaviors of gifted students help to define the perceptions that gifted students have of themselves and which others have of gifted learners. In terms of control theory, students behave in such a way as to satisfy their needs. Their perceptions of what is need-fulfilling are stored as pictures in the students’ heads (Glasser, 1986).

Observations of gifted children reveal that their behavior may be either disruptive or withdrawn. Clark (1979) describes disruptive behavior when she observed that gifted children tend to dominate discussions and become angry and frustrated. Roth (1986) found that gifted children may express anger to peers in order to show superiority or may attack authority in order to gain approval from peers. Other gifted students tend to behave in a more withdrawn manner. The withdrawal may be from others, as in daydreaming (Whitmore, 1986) or may be from the intellectual task, which Roepert (1982) refers to in her descriptions of gifted underachievers.

Perceptions

Both disruptive and withdrawn behaviors occur because these students do not perceive school as need satisfying. Based on research, as well as our experience in instruction and class meetings, we have summarized commonly held perceptions of gifted students into three major categories: 1) those that deal with school, 2) those that deal with perceptions of self, and 3) those that deal with interpersonal relations.
Gifted students often perceive school as boring, unchallenging, irrelevant, and repetitious. Students indicate this through their escape into more stimulating daydreaming or more need-fulfilling social interaction (Whitmore, 1986).

Gifted students frequently perceive themselves critically, behaving to meet their picture of perfection (Roepner, 1982; Whitmore, 1986). Gifted students often feel compelled to be perfect because, according to Clark (1979), they “become used to being ‘best’. They begin to consider everything they attempt to be exemplary” (p.80). Related to this idea of perfectionism, Roepner (1982) and Roth (1986) conclude that gifted students can not always live up to their own expectations.

Perceptions of interpersonal relations are often ones of isolation, as indicated through behaviors which communicate their ideas of being superior, singled out, ignored and misunderstood. Johnson (1985), Roepner (1982), and Roth (1986) all identify self-centeredness as a particular emotional problem of some gifted children. That gifted students commonly refer to themselves as being different from their peers has also been suggested by Dirkes (1983) and McCants (1985).

The perceptions of school, self, and others held by gifted students are obviously not part of their pictures which satisfy their basic needs for fun, belonging, power, or freedom. Although gifted children may picture learning itself as fun, they may not find learning to be fun in school. Instead, their picture of learning as an enjoyable event may be hobbies or studies pursued at home or through extracurricular and summer activities.

Gifted students’ interpersonal relationships in the classroom often do not satisfy their need to belong. Therefore, they act out to gain acceptance from others, because classroom relationships as a way to meet their need to belong are not included in their picture album. Clark (1979) states that gifted students may “pretend not to know answers in an effort to seem like everyone else [which] may result in loss of [intellectual] functions” (p.81).

Additionally, gifted children’s perceptions of school do not meet their need for power. That need is often gained by picturing themselves as powerful over others, as indicated in the example given by Clark (1979) of gifted learners who “fool” their teachers by “bluff[ing] their way through educational experiences using their advanced verbal ability or their facile and nimble brain for guessing answers and outcomes (p.80). Roepner (1982) also alludes to power needs when she states that gifted students “need to maintain the illusion of being in charge” (p.22).

Finally, when school is not part of their pictures which meet their need for freedom, gifted students select any number of pictures that will fulfill this need. It may be a picture as simple as their freedom to pursue their own interests outside of school, or one which views freedom as dropping out of school, or even one as dismal as seeing suicide as the answer to their frustrations (Leroux, 1986; McCants, 1985).

A Model for Gifted Education

Educational programs for gifted students must put forth a concerted effort to make school a place where students can fulfill their needs for fun, belonging, power, and freedom. In order to provide an appropriate educational program for gifted students, which will fulfill their basic needs, this model for gifted education was designed to be challenging and stimulating in content, complexity, processes, and structure.

Curricula for gifted students must challenge through content. Limitless possibilities for content exist, but topics chosen should be different from normal offerings in school in the regular classroom. Gifted students need variation of content, not more of the same. The variety will tend to counter the gifted learners’ boredom in the regular classroom and better match with the gifted students’ characteristic curiosity and advanced comprehension of subject matter. Glasser (1986) states that “a monotonous task is always boring” and that “boring is the opposite of fun” (p.29). Therefore, a more challenging curriculum helps fulfill the students’ need for fun.

Once content is selected, it must be organized and designed for complexity. Interdisciplinary topics which require synthesis of a variety of disciplines and skills are ideal. A topical approach to content allows gifted learners to delve more deeply, gives them opportunities to solve problems in diverse ways, and exposes them to more difficult vocabulary and concepts. Learning which is complex and which is rooted in issues and problems which face contemporary society give gifted students a better opportunity to view their education as a way to meet their need for power. Dealing with complex issues allows them to utilize their gifts and talents in areas which are meaningful and relevant. Gifted students view such issues as having merit for study, because solutions to such problems bring recognition and power to those who propose them.

Third, the gifted curriculum must challenge the gifted learner in the area of thinking processes. Activities and lessons designed to encourage students to evaluate ideas and apply their talents stimulate students to become more involved in their learning. Because activities aimed at stimulating thought and ideas are not bound by answers which are correct or incorrect, gifted students are allowed the freedom to express their ideas creatively. This freedom of expression is vital to meet the needs of gifted learners, especially in light of gifted learners’ fear of failure due to extremely high expectations of self, as indicated by Roepner (1982) and Roth (1986).

Finally, and most importantly, the gifted program must be challenging in its structure. By this, it is meant that the learning activities for gifted students must be structured so that there is interaction with peers. By providing students with structured group experiences, they have the opportunity to share ideas, integrate their knowledge with others’, and be exposed to individuals possessing a variety of ability and talents. Group interaction also allows students to share common problems and to develop an understanding of these problems and how to deal with them. The cooperative learning model developed by Johnson and Johnson (1975,
1984) and advocated by Glasser (1986) provides a structure which helps fulfill the basic needs of gifted students.

These four components were put into practice with a program which brought students together in a classroom setting daily. Classes were scheduled for students at the secondary, middle, intermediate, and primary levels. Students at all levels were provided with a curriculum which was differentiated and designed to challenge students' thought processes. Utilizing cooperative learning, the atmosphere established was one of openness and acceptance, where students were encouraged to confront new knowledge, new ideas, and their own feelings.

Involvement with students began the first day when students designed their own classroom rules. Students immediately gained a sense of power over their own lives, at least within this classroom. Students became involved with others and gained a sense of belonging. All students shared in the responsibility to create an atmosphere where learning could take place. Discussion was a key ingredient in the cooperative learning which took place in the classroom. This allowed involvement to continue and also allowed students to formulate intellectual, personal, and social goals. It was important that the involvement within the classroom be one that fostered mutual understanding within an atmosphere which encouraged risk-taking to explore new ideas and to have fun learning.

Indications by Roth (1986) show that some gifted students use criticism as a way to have power over others. Additionally, Glasser (1984) cites criticism as the most destructive behavior used to gain control. Therefore, students were encouraged to express themselves without being critical toward others. Although difficult at times, the expectation that students were not to be critical of others provided an opportunity for students to choose alternative behaviors to meet their need for power.

Students continually appraised what they were doing and evaluated whether or not it was helping. Self-evaluation aided students in determining whether or not they had learned and asked that they make any plans needed for improvement, or to get where they wanted to be. This was an especially valuable method for gifted learners to gain a sense of power and control over their lives and to relate their education today to their future.

The teacher's role is one of utmost importance for this program to succeed. The teacher must act as a facilitator by helping students recognize the pictures in their heads and how they can get their needs met through education. The teacher must also actively assist and guide students in the use of cooperative learning while maintaining the focus on meeting needs, developing academic skills, and expanding social skills. To do all of this, the instructor must be involved with each student, must be knowledgeable about the curriculum, must understand the characteristics of gifted students, and finally must actively use reality therapy as the vehicle that allows students to gain more control over their lives.

The outcome of this model was that gifted students began to greatly enjoy the educational process. Statements such as, “This is my best class; it’s fun” or “I like this class because we listen to each other and work together” became commonplace from students. Parents often remarked: “The gifted class is the only one my child discusses at home” or “My child is excited about school because of this class.”

Conclusion

In summary, the model for gifted education utilizes a curriculum and organization which challenges through content, complexity, process, and a structure based on cooperative learning. It has been developed within the framework of control theory and reality therapy in order to meet the specific needs for gifted learners which, in more general terms, are components of the basic needs of all people. Because the content is different and challenging, learning itself is fun. By working with others on intellectual, social, and personal problems, students gain a sense of belonging. Gifted students who work together to explore topics which require synthesis and application of knowledge realize their own power and control over their role in the learning process. And, finally, this model allows students the freedom to be themselves, without the fear of failure, isolation, or criticism. School becomes a part of students’ pictures that satisfy their needs. Students’ view of school as boring changes to one of exciting, challenging, and fun. Perceptions of isolation change to ones of involvement with others in learning activities. Students of high ability working together learn that they do not always have to be perfect, because not all problems are easily solved. By working together, they are able to recognize others’ talents as well as their own. Through involvement with others who are perceived to have similar abilities and needs, the gifted learners who saw themselves as alone, ignored, isolated, singled out, or withdrawn from others may very well discover that, in the words of John Donne, “no man is an island.”

References


Persons interested in reality therapy are always looking for materials that will help them implement it with a specific population such as elementary or secondary students, learning or emotionally disabled students, parents, administrators, teachers, high risk students, and residents of group homes or correctional centers. Perhaps they have already found books by William Glasser, who originated it, and magazine articles describing it, but they are still seeking “how to do it materials” plus testimonials and/or research data reported by users. They are often unaware of the many documents available to them in Resources in Education (RIE).

RIE is a monthly abstract journal announcing recent literature related to the field of education. Available since 1966, it is sponsored by ERIC, a nationwide information network. It contains abstracts of materials available for purchase in microfiche or paper copy. Locating 46 documents found in major academic libraries with educational collections.

References


   Report of a program in Pinellas County, Florida with the goals of prevention and resolution of student behavioral problems. Program called PASS (Positive Alternatives of Student Suspension). During the two years the program was operated by the PASS schools, there were significantly fewer student suspensions than in the control schools.

   Reviews eight psychological theories and techniques useful to outdoor educators. Reality therapy is included. Gives suggestions on possible uses for each for outdoor leaders.

   A handbook to help counsel American Indian students developed by the North Dakota State Board of Vocational Education. Describes traditional Indian views, the assimilation process, and other factors.

   A description of a discipline plan based on reality therapy used in grades K-5.

   Discussion of the humanism vs back to basics controversy. Includes the role of reality therapy with students for whom the back to basics approach doesn't work.

    Curriculum package based on the use of contracts. One section describes reality therapy sessions.

    Gives assessment results of training on youth at Maine Youth Center.

    Maine Youth Center was established to rehabilitate juvenile offenders. The main treatment approach is reality therapy. Assessment was conducted at 6-month intervals.

    Staff gathered data over a 2-year period to evaluate the effectiveness of reality therapy treatment.

    An interim report.

    Gives summary results of attitudes toward reality therapy, utilization of it, and the success and perceived impact on the Maine Youth Center. Lists 13 recommendations.

Describes the use of reality therapy in a discipline program in a middle school in South Dakota. Some research results stated.


A newsletter containing an article on reality therapy and an interview with William Glasser.


A report from the State Superintendent of Public Instruction in the state of Washington focuses on the improvement of discipline skills and management strategies using four different discipline programs. Reality therapy is one of the four reviewed.


A manual prepared to help regular and special educators in Jefferson County Schools, Lakewood, Colorado improve their skills for working with handicapped students.


Glasser presents his ten-step approach to discipline based on reality therapy. Discusses preliminary results of implementing this approach.


Surveys current literature on educating emotionally disturbed children. Describes use of crisis teachers, reality therapy, and behavior modification.


Includes brief discussion of reality therapy.


Speech describing Glasser approach in humanizing public education in the Madison, Wisconsin schools. Reports research to determine teacher attitude.


Brief mention of reality therapy as a counseling model in parent education.


Cites the accomplishments and impact of 10 youth advocacy teacher corps projects in 1978-79. Includes “Country Living Youth Advocacy and Reality Therapy.”


A discipline module designed for use with preservice education students. Includes reality therapy.


A 3-year (1969-1972) Title III 3R (re-education, reality, and responsibility) Program for 600 emotionally disturbed elementary level students from four Connecticut towns reported.


A guide that synthesizes 3 inservice models for teachers: reality therapy, teacher effectiveness training, and focus. Gives strategies for working with 3 problem behaviors. Includes class meetings and case studies.


Describes investigations on the campus of Pennsylvania State University between 1968-75 to identify and define counseling strategies that assist clients in developing internality. Reality therapy was one approach used.


Gives many “how tos” and “dos and don’ts” for group counseling.


A two-part learning module designed to acquaint community college instructors with the use of group reality therapy and learning contracts in promoting self-awareness and self-determination among high-risk students.


Describes an advanced studies program at Southeastern Community College in Whiteville, North Carolina for freshmen in English, biology, and psychology. Learning activities are individualized and self-paced. Reality-based counseling strategies are used, internality of students increased, grade point averages improved.


A series of workshops for dealing with severely multiply handicapped children outlined.


A programmed text for in-service teacher education on the use of reality therapy in the classroom.


Module designed to help teachers learn the techniques for conducting class meetings.


Western Kentucky University and a junior high school collaborated on planning and implementing a student discipline program over a two-year period (1974-1976) based on reality therapy. Research revealed a decline in student suspensions, expulsions, and days lost.


Discusses preventive classroom discipline stages and dealing with problems through reality therapy, behavior modification, and changing expectations.


Outlines skills that will help teachers have successful class meetings.


Author examines and summarizes several approaches to behavior management including reality therapy.


Reports results of a survey of 143 parents of preschool children to determine their beliefs about discipline at home and school. Reality therapy was one of the approaches used.


Examined the influence that training in reality therapy and class meetings had on teacher and student behaviors.


Proceedings from a 1982 Boston conference on issues concerned with limited English speaking students in special education programs. Includes reality therapy.


Report of a study that examined the relationship between Piagetian-based training and formal operational thinking with 55 education majors. Students assigned to one of four groups including a reality therapy group.


Report of a case study of a two-year Teacher Corps Project in which faculty members of a junior high school were required to change their discipline approach to a reality therapy approach.

### Guidelines for Contributors

a) Manuscripts should be submitted in triplicate to the Editor, Lawrence Litwack, *Journal of Reality Therapy,* at the editorial office address. In the case of manuscripts written by more than one author, the covering letter should indicate the name and address of the author with whom the editor should correspond — that is, the corresponding author.

b) Manuscripts must be typewritten double-spaced on 8½ x11 white paper. The name, highest earned degree and professional notation (e.g., R.N.), title or rank, organization, and address of each author should appear on the back of the manuscript's last page. In manuscripts written by more than one author, the corresponding author should indicate the order in which coauthors' names should appear in *The Journal* if the manuscript is accepted. Rejected manuscripts will not be returned unless a stamped, self-addressed envelope is enclosed.

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g) Manuscripts are received with the understanding they are not under simultaneous consideration by any other publication. "The Journal" will not be responsible in the event a manuscript is lost; and once published, manuscripts may not be published elsewhere without written permission from the corresponding author of the article and the editor of *The Journal.*

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2. Is the manuscript on a problem or topic of sufficient importance in demonstrating Reality Therapy to warrant its publication?
3. Is the content of the manuscript scientifically accurate and philosophically sound?
4. Does the manuscript contain any false or misleading statements?
5. Does the manuscript have readability, i.e., is it clearly written, succinct and easily understood?
6. Will the manuscript require a great deal of revising to make it acceptable?

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