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The International Journal of Choice Theory and Reality Therapy: An On-line Journal

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Table of Contents

	Listings of authors and titles and more	2
	Intro to the IJCTRT editor and the editorial board	3
Thomas S. Parish	An examination of various counseling/psychotherapy and research endeavors viewed from a Reality Therapy, Choice Theory, Lead Management, &/or Quality School Perspective	4
Thomas S. Parish	Effective assessment instruments for reality therapists and choice theorists	25
Robert E. Wubbolding	Where are we going?	64
Brian Patterson	The Choice Theory journey never ends	66
Michael Rice	Is addiction a choice?	71
Steve Hammond (Trans. by Bette Blance)	The story of the Glasser Quality School and how it was installed at St. Patrick's Catholic School in Norfolk, Virginia	75
Wesley Hartman & Jeri L. Ellis	A Choice Theory lens on law enforcement officers' perceptions of spirituality after prolonged exposure to traumatic events	82

NEWS YOU CAN USE . . .

In Spring, 2024, our summary of all our "CT/RT Brief Bios" will be published in that issue of the International Journal of Choice Theory and Reality Therapy. Many members and friends of the Glasser Institute for Choice Theory (GICT) have already provided their CT/RT Brief Bios, which appear in either the Fall 2020 or the Spring 2021 issues of the IJCTRT. Instructions for preparing your "brief bio" can be found in the Spring 2021 issue of the Journal. Furthermore, your listings will be circulated around the world, and it will be done at no cost to you! So please send your "Brief Bio" to me at your earliest convenience. If you don't, just imagine your loss by not sharing with your fellow members and friends of WGI any updates that you have about your accomplishments, past, present, and/or future, plus ways that others can get ahold of you too. Truly, in the words of Dr. Gary Applegate, "Invisible is miserable," so please send your "Brief Bio" to me at parishts@gmail.com so that we can all "reconnect" with one another in celebration of our fond memories of each other. Yes, Bob Hope probably said it best as he ended many of his shows by simply saying "Thanks for the memories!"

Access to Past Issues of the Journal:

Have you been looking for past issues of the *International Journal of Choice Theory and Reality Therapy*? Well, look no more! Just go to: www.wglasserinternational.org and click journals. All the issues from 2010 until now are there, 24/7!

Introduction to the Journal Editor and to the Editorial Board:

IJCTRT Editor:

The Editor of the Journal is **Dr. Thomas S. Parish**, who is an Emeritus Professor at Kansas State University in Manhattan, Kansas. He earned his Ph.D. in human development and developmental psychology at the University of Illinois at Champaign-Urbana, Illinois. He's CTCT certified and has authored or co-authored more than 350 articles that have appeared in more than 30 professional refereed journals. Dr. Parish and his wife recently served as consultants, for the LDS Family Services Group in Independence, MO, and they currently co-own Parish Mental Health and Life Coaching of Topeka, Kansas. **Any correspondence, including questions and/or manuscript submissions should be sent to parishts@gmail.com** You may also contact him by phone at: (785) 845-2044, (785) 861-7261, or (785) 862-1379. In addition, a website is currently available. It can be accessed by going to: www.wglasserinternational.org Notably, the Journal is no longer password protected on the WGI website, so now anyone can gain access to it, anytime, 24/7!

IJCTRT Editorial Board Members:

Editor: Thomas S. Parish, Ph.D., CTCTC, please see listing printed above.

Other Members of the Board:

Janet M. Fain Morgan, Ed.D., is currently a Director of the William Glasser International Board and the Research Coordinator for William Glasser International. She is also a faculty member of the WGI lectures on Choice Theory and Reality Therapy. In addition, Dr. Morgan has an extensive background in counseling and teaching with specialty areas in Military Issues, Grief and Loss, Marriage Counseling, and Domestic Violence Predator Treatment.

Emerson Capps, Ed.D., Professor Emeritus at Midwest State University, plus serves as a Faculty Member of WGI-US.

Joycelyn G. Parish, Ph.D., CTCTC, is a licensed clinical psychotherapist. She earned her Ph.D. from Kansas State University and is a board-certified clinician and certified reality therapist.

Patricia Robey, Ed.D., Full professor at Governor's State University, Licensed Professional Counselor, and Senior Faculty Member of WGI-US and William Glasser International.

Brandi Roth, Ph.D., Licensed Private Practice Professional Psychologist in Beverly Hills, CA.

Jean Seville Suffield, Ph.D., Senior Faculty, William Glasser International, as well as President and Owner of Choice-Makers@ located in Longueuil, Quebec, CANADA.

Robert E. Wubbolding, Ed.D., Professor Emeritus at Xavier University in Cincinnati, Ohio, and is the Director of the Center for Reality Therapy also in Cincinnati, Ohio.

IJCTRT Technical Advisor:

Denise Daub, Web Administrator and Finance Manager for William Glasser International.

AN EXAMINATION OF VARIOUS COUNSELING/PSYCHOTHERAPY AND RESEARCH ENDEAVORS VIEWED FROM A REALITY THERAPY, CHOICE THEORY, LEAD MANAGEMENT and/or QUALITY SCHOOL PERSPECTIVE

Thomas S. Parish, Ph.D., CTRTC Editor, International Journal of Choice Theory and Reality Therapy

Notably, there are many professional journals in psychology that began publishing more than a hundred years ago, e.g., *the Journal of Psychology* (1887), *the Journal of Genetic Psychology* (1891), and *the Journal of Applied Psychology* (1917), to name just a few. These journals, and a host of others, have all continually published articles of interest to the psychological community throughout the United States and the rest of the world. All of these journals, both named and unnamed above, have generally benefitted readers in various ways.

First off, subscribers who have subscribed to them have likely been kept well-informed as a result.

Second, others, however, who are non-subscribers, have generally had to rely upon going to various libraries (particularly university libraries) to remain up-to-date on the findings of various studies published by journals such as these.

Third, another key source is the *Social Science Citation Index* (which is almost always exclusively found at university libraries) that lists all the professionally published articles published since 1982 in the psychological literature, and then also cites all of the references that have subsequently cited these sources since then, thereby more quickly revealing important ideas and/or insights that were published since the original references were published.

Fourth, finally, *Psych Info* currently, and *Psychological Abstracts* previously, have shared brief abstracts or summaries of professional journal articles, which have been incredibly helpful to anyone who wished to stay aware of articles that have been published in professional journals in psychology for many decades. To say the least, *Psych Info's* citations have been integral in providing a quick source to great amounts of knowledge and understanding, especially if the readers then seek out the original works, which would likely be readily available at the same libraries where the abstracts were likely originally found.

Regarding those who wish to access information regarding Dr. William Glasser's writings, per se, he rarely wrote journal articles, but his books have been bought, borrowed, traded away, and/or given away since they concerned numerous, important topics for nearly everyone.

For those who have chosen to have their works published in the following journals, other routes may be taken, besides those listed above, to improve the circulation of their work:

- Journals in question:
1. *The Journal of Reality Therapy* (published from 1981-1997)
 2. *The International Journal of Reality Therapy* (1997-2009)
 3. *The International Journal of Choice Theory* (2006-2008)
 4. *The International Journal of Choice Theory & Reality Therapy* (2010-to pres.)

For those who have received copies of the ***Journal of Reality Therapy*** (1981-1997), and/or the ***International Journal of Reality Therapy*** (1997-2009), and/or the ***International Journal of Choice Theory*** (2006-2008), the plus associated with getting your journal via these three sources was simply that you received your own bound issue of the journal, via US mail, twice a year. If you're among the fortunate few to have received these issues, please hold onto them, for it is unlikely that they will ever be reprinted again, nor be found in libraries, nor be cited in the *Social Science Citation Index*, nor be posted in *Psych Info* any time soon.

For those who have never received any of these issues of these Journals, or who have lost them somehow, there is a way to get single copies of articles from these journals. Just go to the following website: <http://msutexas.edu/academics/education/journalreality/index.php>, and then follow the prompts.

Regarding the ***International Journal of Choice Theory and Reality Therapy*** (2010-present), the plus associated with this particular journal, unlike the former CT/RT journals, is that each issue will be available to you twice a year, by going to www.wglasserinternational.org/journals, and if you need extra copies, you can also copy them off at the same website. The drawback here, though, is that you'll not get a bound copy of each issue, nor will these issues likely be found in libraries, nor will they be cited in the *Social Science Citation Index*, nor will they be posted in *Psych Info*, at least not currently.

Despite the limitations that we're saddled with (as noted above), there are some other pluses that can help us to benefit more from our issues of the various CT/RT journals, if we wish to take advantage of them:

First, every five years a "**topical guide**," as well as an "**author's guide**," has appeared in all CT/RT journals, and will continue to appear in the *International Journal of Choice Theory and Reality Therapy*, in order to provide the reader with summary information regarding what has been published in the last five years that proceeded that particular issue of the Journal.

Second, in the last issue of this Journal (i.e., Vol. XLI-1), I authored an article entitled "William Glasser, M.D., and his impact on **EDUCATION**," pp.4-12. This article describes how Dr. Glasser and his various teachings have greatly impacted "how teachers teach," "how students learn," and includes nearly 200 references that were all drawn from the CT/RT journals that we all have currently at our disposal, from 1981 until present. So, if anyone asks you, "What does CT/RT/QS/LM, etc. concepts have to say about kids in school today, or what's happening to students on college campuses currently, you can lay it all out for them, since it's there for you to read and to share, plus help others to become more aware that we really do greatly care!

Third, in the present issue, we have two other sections that should add greatly to the way CT/RT/QS/LM and other Glasserian concepts are reported to impact other areas besides education. To begin with, we have included the 233 references that have appeared over the last forty years (1981-2021) regarding how Choice Theory and Reality Therapy interact with our various **COUNSELING** and/or **PSYCHOTHERAPEUTIC ENDEAVORS**.

Refer to Tables 1-4

Fourth, also in this present issue of the Journal, we have included 163 references regarding what research we've conducted over the last forty years (1981-2021) as we sought to investigate and report on **RESEARCH** involving Choice Therapy, Reality Therapy, Quality School, and Lead Management strategies and techniques in order to foster more positive changes in various ways.

Refer to Tables 5-8

Thus, in the last two issues of the *International Journal of Choice Theory and Reality Therapy*, we have sought to compile nearly **600 articles** in order to determine how all of these puzzle parts actually fit together with CT, RT, QS, LM and more. In the immediately preceding issue of this Journal, educationally-oriented articles were cited that sought to demonstrate how Choice Theory, Reality Therapy, Quality school, and Lead Management strategies and techniques have been used to further advance our various teaching and/or learning efforts for the last forty years, and what we might still need to do to improve them.

Then, in the present article, we spotlighted how Choice Theory, Reality Therapy, Quality School, and Lead Management strategies and techniques have been applied for the last forty years to investigate and/or enhance our various counseling and/or psychotherapeutic endeavors, as well as our various research endeavors too. To say the least, there is a wealth of ideas and insights waiting to be discovered within all of these journal articles. So please feel free to join us as we endeavor to search through this treasure trove of ideas and insights that are waiting to be discovered on the pages of the articles that are cited here. Just help yourself, since there certainly is plenty to go around!

Finally, there are other sources, too, that spotlight CT and RT, like Larry Litwack's (1994) book entitled: *Journal of Reality Therapy: A Compendium of Articles (1981-1993)*, published by New View Publications in Chapel Hill, NC. Simply put, this book lays out eleven (11) areas of interest, and then lines out articles in this book that address these topics. For instance, regarding "crisis intervention," Litwack includes eight (8) articles on this topic, and regarding "reality therapy practice," Litwack includes nine (9) articles on this topic. In sum, this book is a "goldmine" with forty-one articles spread across eleven topics and can help any researcher who wishes to find such information, which included the best issues published by the Journal from 1981-1993.

Truly, upon closer examination of all the possibilities, many important findings should surely "pop," which should go a long way to demonstrating that such efforts are critical as we strive to fulfill our mission of teaching the entire world about CHOICE THEORY, as well as the other Glasserian concepts too! As we endeavor to do so we will surely uncover many more key questions, important answers, and crucial insights that are all waiting patiently to be found by people who are as curious as we are!

Brief Bio—

Thomas S. Parish, Ph.D., CTRTC, is an emeritus professor of developmental psychology at Kansas State University, College of Education, Manhattan, KS 66506. He has authored or co-authored several hundred refereed journal articles, plus even more presentations at various regional, national and international conferences, and has been the editor of the *International Journal of Choice Theory and Reality Therapy* since 2010.

TABLE #1

Articles Involving *Counseling and/or Psychotherapy and How They Interact with Reality Therapy and Choice Theory . . .*

Which appear in the *International Journal of Choice Theory and Reality Therapy (2010-2021)*

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
T. Parish	Do's/don'ts regarding therapeutic process	40 (2)	9-14
L. Joyce, et al.	Trauma treatment from a CT/RT perspective	40 (2)	15-21
A. Can & P. Robey	Utilizing RT and CT in school counseling	40 (2)	37-45
M. Kaur & J. Kaur	RT: A boon to recuperate from empty nest synd.	40 (2)	46-62
E. Davis, et al.	Reality Art Therapy . . .working w/ children	40 (1)	13-22
T. Parish	Improving choices thru goal setting/plan-making	40 (1)	41-44
J. Morgan	Ways to satisfy needs during this pandemic	40 (1)	45-47
E. Perkins	RT derailing the route to depression	38 (2)	31-32
C. Seehusen	Using RT with clients having chronic pain	38 (1)	6-12
S. Cervantes, et al.	Aligning CT psychology with cognitive psychology	38 (1)	13-20
A. Jegathesan, et al.	Counselors in crisis management. A Malaysian st.	38 (1)	37-46
Y. Arellano, et al.	Grieving through art expression and CT ...	38 (1)	47-57
R. Duncan	Counseling with leadership training	37 (2)	56-57
A. Jusoh	CT and RT in individual and group counseling ...	37 (2)	75-85
B. Lojk	Formulation in RT: Making sense of problems	37 (2)	86-96
L. Lojk, et al.	RT training to improve relationships with others	37 (2)	111-121
C. Mason & L. Dye	Implementing RT in school counseling ...	37 (1)	47-56
A. Jegathesan, et al.	Applications of applying CTRT in counseling grief	36 (1)	54-63
T. Pedigo, et al.	An integration of mindfulness with CT and RT	36 (1)	64-72
T. Parish & J. Parish	A comparison between ext. and int. cont. psych.	35 (2)	10-13
C. Mason	Using RT trained group counselors to reduce AAG	35 (2)	14-24
T. Parish	Improving relationships by using CT	35 (2)	50
T. Parish	Ways to exercise more effective internal control	35 (1)	24-30
A. Jusoh, et al.	Validity/Reliability RT counselor profile question.	35 (1)	37-53
E. Perkins	Is CT an effective client assessment tool?	34 (2)	11-16
S. Lujan	Quality counseling: An examination of CT and RT	34 (2)	17-23
D. Nantz	Exposing the roots of external control psychology	34 (2)	24-34
L. Marlatt	The neuropsychology behind CT: Five basic needs	34 (1)	15-21

G. Cisse, et al.	Sexual offender treatment from a CT/RT pers.	34 (1)	22-27
M. Watson, et al.	CT and RT applied to health care professionals	33 (2)	31-51
D. Jackson	RT counselors using spiritual interventions in ther.	33 (2)	73-77
C. Sori & P. Robey	Finding reality using CT, RT and sandplay	33 (1)	63-77
E. Davis & J. Periera	Combining RT and play therapy with children	33 (1)	78-86
W. Casstevens	Reflections on suicide prevention using CT	33 (1)	102-104
A. Cameron	CT/RT applied to group work and group therapy	32 (2)	25-35
A. Henderson, et al.	Change, choice & home: Glasser & Gottman	32 (2)	36-47
E. Perkins	CT and blame versus responsibility	31 (2)	10-12
S. Dermer, et al.	Compares RT and CT with solution-based therapy	31 (2)	14-21
P. Robey, et al.	CT and RT in counselor supervision	31 (2)	31-41
T. Burdinski, et al.	Extending RT with focusing/CT total behavior car	31 (1)	14-30
R. Mottern	Hypnosis in the practice of RT	31 (1)	53-61
A. Cameron	Using CT/RT's total behavior in psychotherapy	31 (1)	62-72
P. Robey, et al.	Using CT/RT with challenging youth	31 (1)	64-89
A. Cameron	Using CT/RT in therapeutic foster care homes	30 (1)	9-17
I. Pintos-Lopez	Looking at Neurolinguistic programming and RT	30 (1)	23-35
B. Zeman	Beyond CT: Using language to take control of life	30 (1)	36-40
W. Casstevens	CT-based changes in non-profit organizations	30 (1)	64-68
P. Robey	Teach the world CT, w/ new training approaches	30 (1)	41-49
W. Casstevens	Using CT and RT in health & wellness programs	29 (2)	55-58
M. Misztal	Using CT in as program to eradicate poverty	29 (2)	59-69

TABLE #2

Articles Involving Counseling and/or Psychotherapy and How They Interact with Reality Therapy and Choice Theory . . .

Which appear in the *International Journal of Reality Therapy* (1997-2009)

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
A. Schoo	Counseling: Using metaphorical narratives	28 (2)	9-14
J. Duba, et al.	"Basic Needs Genogram" in RT-based...counseling	28 (2)	15-19
G. Louis	Using Glasser's CT to understand Vygotsky	28 (2)	20-23
Y. Barr	RT and the Talmud	28 (2)	31-35
P. Pound/N. Duchac	Driven by goals: CT and the HELP method	28 (2)	36-39
A. Cameron	Regret, CT, and RT	28 (2)	40-42
A. Schoo/M. Schoo	Using CT and counsel. to manage chronic disease	28 (1)	21-29
A. Schoo	How counsel. can improve mental/phys. Wellness	28 (1)	34-40
P. Hillis	How CT and metacognition foster change	28 (1)	57-62
J. Hoogstad	CT and emotional dependency	28 (1)	63-68
N. Minatrea, et al.	RT goes to the dogs	28 (1)	69-77
T. Holmes	Using RT to influence health behaviors	28 (1)	78-80
A. school	Using motivational interviewing & CT on disease	27 (2)	26-29
R. Mottern	CT as a model of adult development	27 (2)	35-39
T. Parish, et al.	The Personal Health Model regard. mental health	26 (2)	41-42
R. Zimmerman	Glasser's CT and allied approaches to counseling	26 (1)	14-17
D. Linnenberg	Thoughts on RT from a pro-feminist perspective	26 (1)	23-26
R. Wubbolding	Evolution of psychotherapy and inner control	26 (1)	35-37
R. Barness/T. Parish	"Drugs" versus "RT"	25 (2)	43-45
D. Sansone	Morita Therapy/Constructive Living=CT/RT	25 (1)	26-29
L. Jones/T. Parish	Ritalin vs. CT and RT	25 (1)	34-35
R. Wubbolding, et al.	Purpose of behavior: Language/Levels of commit.	25 (1)	39-41
S. Petersen	RT and Adlerian psychology: A comparison	24 (2)	11-14
A. Schoo	RT and the human energy field	24 (2)	15-23
J. Claps/A. Katz	A comparison of wellness coaching and RT	24 (2)	39-41
D. Law	A CT perspective on children's Taekwondo	24 (1)	13-17

D. Lawrence	Effects of RT group counseling on the disabled	23 (2)	9-16
R. Renna	Autism spectrum disorders: Blending CT & ABA	23 (2)	17-22
C. Dettrick	RT and Christian belief—Can they be reconciled?	23 (2)	23-26
E. Mickel & S. Wilson	Connecting African family therapy w/ multisys.	23 (1)	31-35
M. Fulkerson	Integrating Karpman Drama Triangle CT/RT	23 (1)	12-15
B. Lennon	Review: Warning: Psychiatry can be hazardous ...	23 (1)	15-16
J. Pierce	Mindfulness based RT (MBRT)	23 (1)	20-23
R. Mottern	Using American Indian stories to teach CT	23 (1)	27-33
B. Yaniger	Self-evaluation of Quality Choice in RT	22 (2)	4-11
W. Howatt	CT: A core addiction recovery tool	22 (2)	12-15
B. Turnage, et al.	RT, domestic violence survivors, & forgiveness	22 (2)	24-27
R. Uppal	Using RT and CT in the field of physical therapy	22 (2)	28-31
S. Rose	Relationship between QS & brain-based theory	22 (2)	52-56
D. Jackson	RT and CT in the group employment interview	22 (2)	57-59
Y. Malone	Social Cognitive Theory and CT: A comparison	22 (1)	10-13
J. Skeen	Using CT virtue ethics, and the sixth need	22 (1)	14-19
R. Mottern	Using CT in coerced treatment for sub. abuse	22 (1)	20-23
D. Kelsch	Multiple Sclerosis and CT: CT works!	22 (1)	24-29
J. Sheil	Management and counseling or catch up w/ LM	21 (2)	15-18
B. Lojk	What is most demanding in ... counseling	21 (2)	19-22
T. Carey	CT and PCT: What are the differences?	21 (2)	23-32
E. Mickel/C. Mickel	Family therapy in transition: CT and music	21 (2)	37-40
E. Tham	The meaning of CT for women in Albania	21 (1)	4- 7
W. Howatt	The evolution of RT to CT	21 (1)	7-12
Y. Kim	The RT parent group counseling program	20 (2)	4- 7
E. Cheong	CT and RT in Korea	20 (2)	8-12
W. Howatt	Coaching choice: Using CT and RT	20 (1)	56-59
N. Minattrea, et al.	Myers-Briggs and RT	19 (2)	15-20
R. Mottern	CT in the Dojang: For martial arts instructors	19 (2)	59-63
R. Wubbolding, et al.	Misconceptions about RT	19 (2)	64-65

A. Ellis	Rational Emotive Behavior Therapy and ICP	19 (1)	4-11
W. Powers	PCT, HPCT, and Internal Control Psychology	19 (1)	12-16
D. Linneberg	Moral education And CT/RT: An initial exam	19 (1)	52-55
J. Skeen	CT and human happiness	19 (1)	56-59
T. Parish	Our thoughts, attitudes and actions, +/- choices	19 (1)	60-61
M. Watson/L. Litwack	Five approaches to psychotherapy (incl. RT)	18 (2)	52-57
R. Wubbolding, et al.	Multicultural awareness: Implications for RT/CT	17 (2)	4- 6
W. Sanchez	Quality World and culture	17 (2)	12-16
M. Burns, et al.	Bringing CT and RT into a deaf community	17 (2)	24-26
R. Wubbolding, et al.	Qualities of the reality therapist	17 (2)	47-49
L. Radtke, et al.	RT: A meta-analysis	17 (1)	4- 9
J. Baca	Gestalt therapy and RT: A review of dissertations	17 (1)	10
E. Mickel, et al.	Addiction, CT & violence: A systems approach	17 (1)	24-28
M. Watson/W. Buja	The application of CT and RT in health care	17 (1)	29-33
R. Edens	The application of CT/RT in sports psychology	17 (1)	34-36

TABLE #3

Articles Involving *Counseling and/or Psychotherapy and How They Interact with Reality Therapy and Choice Theory . . .*

Which appear in the *International Journal of Choice Therapy* (2006-2008)

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
R. Wubbolding	Searching for mental health	1 (1)	5- 6
J. Roy	Dr. Wm. Glasser and the development of CT	1 (1)	7-10
L. Anderson	How Senge's 5 th discipline relates to Glasser's CT	1 (1)	16-20
B. Roth	CT: A world of difference	1 (1)	24
J. Tirengel	CT and global well-being	2 (1)	3- 4
W. Glasser	Counseling addicts with CT	2 (1)	5
R. Wubbolding	More searching for mental health	2 (1)	6- 9
L. Ellsworth	Using RT to treat sexually-abused children	2 (1)	10-13

TABLE #4

Articles Regarding Counseling and/or Psychotherapy and How They Were Found to Interact with Reality Therapy (RT), Choice Theory (CT), and/or Control Theory (CoT). These articles appeared in the *Journal of Reality Therapy* (1981-1997):

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
T. Carey, et al.	A CoT/RT approach to understanding alcoholism	16 (1)	3 -18
W. Mason	CoT, RT, and good health: What are the connect.	16 (1)	19-26
L. Palmatier	Freud vs. Glasser: Pathologizing to talking solutions	16 (1)	75-94
E. Mickel, et al.	Family therapy in transition: Social construct. & CoT	16 (1)	95-101
W. Altamura	Interfacing RT/CT to reduce conflict in families	16 (1)	102-105
E. Mickel	Addicting behaviors: Control the world we perceive	16 (1)	111-117
P. Barbieri	Integrating CoT and mindfulness to confront stress	15 (2)	3-13
Y. Emed	The connection between RT/CoT, and Zen	15 (2)	14-17
W. Sanchez, et al.	Integrating CoT, RT and cultural fatalism	15 (2)	30-38
R. Threadgall	Counseling homosexual men from a CoT/RT view	15 (2)	39-43
L. Matthews	Uncovering basic needs by observing animals	15 (2)	46-50
W. Sanchez, et al.	RT, CoT, Latino activism and social change	15 (1)	3-14
L. Cunningham	CoT, RT and cultural bias (in counseling)	15 (1)	15-22
L. LaFontaine	Regarding sexuality: Is something missing in RT/CoT?	15 (1)	32-36
S. Chapman	Sexual dysfunction: A RT approach	15 (1)	37-45
M. Ignoffo	Using RT/CoT when there is no cure	15 (1)	46-55
B. Greenwalt	Analysis of RT & solution-focused therapy	15 (1)	56-65
W. Scanlan, et al.	RT/CoT and how we manage change	15 (1)	66-70
J. Stehno	Classroom consulting with RT	15 (1)	81-86
T. Davidson	Praying and RT-CoT	15 (1)	87-90
R. Wubbolding	Expanding the theory of the higher level of perc.	15 (1)	91-94
S. Martin, et al.	RT and goal attainment scaling for athletes	14 (2)	45-54
E. Mickel	Andragogy, CoT, and family mediation	14 (2)	55-62

Y. Emed	CoT and spirituality	14 (2)	63-66
P. Barbieri	Using mediation and RFT/CoT to overcome chall.	14 (1)	18-25
E. Acevedo	RT: A way to foster psych. skills in athletes	14 (1)	29-36***
S. House	Blending NLP systems w/ RT counseling environ.	14 (1)	61-65
M. Ignoffo	Comparing neurological hypnosis and RT	13 (2)	20-25
B. Billings	The importance of involvement in counseling	13 (2)	26-30
R. Renna	CoT and persons w/ cognitive disabilities	13 (1)	10-26
E. Mickel	RT based planning model	12 (2)	20-28***
A. Bassin	The RT paradigm	12 (2)	3-14
D. Stanton	Treating sexual offenders: RT as a better altern.	12 (1)	3-10
J. Peacock	Using RT/CT to enhance alcohol use/abuse aware.	12 (1)	19-23
E. Hart	Using RT for exercise initiation	12 (1)	24-31
E. Udry	Interventions for the anxious and depressed	12 (1)	32-36
D. Protheroe	RT and cognitive developmental stages	12 (1)	37-44
C. Barrett	Substance abuse: A window of opportunity	11 (2)	20-21
M. Croll	Emerson's Self-Reliance and Glasser's RT	11 (2)	22-26
Parish, T	Ways of assessing & enhancing stud. motivation	11 (2)	27-36
B. Cockrum	Never give up	11 (2)	46
R. Wubbolding et al.	Chartalk: A valuable tool for learning	11 (2)	47-50
R. Renna	Cot/RT with out-of-control students	11 (1)	3-13
T. Parish	Attitudes and beliefs in the classroom & beyond	11 (1)	14-20
A. Peterson, et al.	Basic week studs. & grad. counseling: A compar.	11 (1)	31-37
A. Katz	Renegotiation: What to do next?	11 (1)	63-65
C. Kitchen	Crisis intervention using RT for sexual assault vict.	10 (2)	34-39
M. Fanelli	Grief recovery and RT	10 (2)	40-43
C. Iadeluca-Myrianthis	Use of RT in back rehabilitation	10 (2)	51-54***
E. Mickel	Family therapy using RT: A systems perspective	10 (1)	26-33

T. Parish	Resolving conflicts in life	10 (1)	71-72
L. Lojk	Reflections on the meaning of RT and CoT	10 (1)	73-77
L. Palmatier	RT and brief strategic interactional therapy	9 (2)	3-17
E. Chance, et al.	Lifeline: Drug/alcohol treatment program for addicts	9 (2)	33-38
J. Maloney	CT psychology & crisis intervention counseling	9 (2)	50-52
S. Wigle	CoT and the paradigmatic perspective of Thomas Kuhn	9 (1)	30-33
L. Geronilla	Neuro-linguistic programming compared to RT	9 (1)	13-19
A. Honeyman	Counseling addiction ... Powerlessness and CoT	9 (1)	20-24
S. Haddock	Making metaphors in (the) therapeutic process	9 (1)	25-29
S. Wigle/F. Gilbert	Dealing w/ feelings: The process of psychomaturation	9 (1)	30-33
T. Parish	Ways to take effective control & enhance self-concepts	9 (1)	34-38
T. Bratter, et al.	Mentoring: Extending the psychotherapeutic relationship	8 (2)	3-12
E. Johnson	The theories of B. F. Skinner and Wm. Glasser ...	8 (2)	69-73
B. Emerson/J. Hinkle	A police peer counselor uses RT	8 (1)	2- 5
S. Hallock	Understanding negotiating styles contributes to RT	8 (1)	7-12
H. Radda	Extending the therapeutic alliance: Mentorship	8 (1)	44-50
Hallock, S.	CoT contributes to effective RT w/ suicidal students	7 (2)	9-17
T. Parish	Why RT works?	7 (2)	31-32
J. Thatcher	Value Judgments: A significant aspect of RT	7 (1)	23-25
N. Corwin	Social agency practice based on RT/CoT	7 (1)	26-35
R. Conner	Faith counseling: Meeting new needs & accept. new real.	6 (2)	33-36
N. Buck	Are you willing? The process of bridging the gap	6 (2)	37-38
K. Geronilla	Handling patient non-compliance using RT	5 (1)	2-13
V. Whipple	The use of RT with battered women ... in shelters	5 (1)	22-27
L. Geronilla	Helping clients to assess and evaluate their needs	5 (1)	31-35
R. Wubbolding	Paradoxical techniques in RT, Part II	5 (1)	3- 7
D. Morawski	Treatment team integration of RT	5 (1)	13-15

P. Appel	Using RT in counselor supervision	4 (2)	16-22
G. Parr/A. Peterson	Tech. to enhance effectiveness of group ... supervision	4 (2)	23-32
R. Wubbolding	Using paradox in RT, Part I	4 (1)	3 – 9
M. Hanna	RT: An approach to comprehensive...counseling	4 (1)	10-16
R. Silverberg	Enhancing life: RT and terminal care	4 (1)	21-27
M. Ballou	Thoughts on RT: From a feminist	4 (1)	28-32
D. Whitehouse	Adlerian antecedents to RT and CoT	3 (2)	10-14
D. Evans	RT: For physicians managing alcoholic patients	3 (2)	20-26
R. Silverberg	RT with men: An action approach	3 (2)	27-31
R. Mattimore-Knudson	RT in a social service agency as an assess. Tool	3 (2)	32-36
P. Appel	Adult development from an RT perspective	3 (1)	5-10
B. George-Mrazek	RT in the Air Force	3 (1)	10-11
J. Banmen	RT revisited: What stations of the mind	3 (1)	12-16
N. Reuss	A positive recovery program for chem. dep. people	3 (1)	17-19
L. Kriner et al.	Plan-centered test interpretation ... insight	2 (2)	10-13
P. Haines	RT for self-help	2 (2)	21-23
R. Mattimore-Knudson	Using RT as a judicial officer in av residence hall	2 (1)	11-14
L. Barnard, et al.	A RT staff development model	2 (1)	23-27
J. Young	The morality of RT	1 (2)	8-11
G. Vey/T. Yuki	Crisis intervention: A reality-based approach	1 (2)	12-17
K. Sewall	Comparing ... RT & Rational Emotive Therapy	1 (2)	18-20
J. Thatcher et al.	Assertiveness: A choice	1 (2)	26-31
N. Martin	Ethics in RT	1 (1)	26-31

TABLE #5

Research-Related Articles Involving Reality Therapy (RT), Choice Theory (CT), Quality School (QS), and Lead Management (LM) Techniques . . . Which Appear in the International Journal of Choice Theory and Reality Therapy (2010-2021):

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
B. Blance	An example of LM: New Zealand style	41 (1)	18-20
R. Wubbolding	A research base for CT and RT	41 (1)	21-23
C. Barker	Infusing CT into ... behavioral assessment	41 (1)	35-47
C. Mason, et al.	Enhancing academic achievement In P-12 using CT	41 (1)	48-58
T. Larijani, et al.	Effect of CT on nursing students' happiness	40 (1)	27-31
C. Mason, et al.	Decreasing academic ach. gap in P-12 schools with CT	39 (1)	20-26
C. Seehusen	Using RT with clients experiencing chronic pain	38 (1)	6-12
C. Mason, et al.	Using LM to reduce academic achievement gap	38 (1)	21-32
R. Duncan	Counseling with leadership training	37 (2)	56-57
L. Lojk, et al.	RT training improves relationships and well-being	37 (2)	111-121
S. Patkar	RT: From theory to practice – an expert survey	37 (2)	130-158
N. Ismail/A. Jusoh	CT's effect on truancy in Malaysia	36 (1)	104-121
C. Palmer	Using RT trained counselors to decrease acad. ach. gap	35 (2)	14-24
T. Christiansen, et al.	Promoting changes in schools using Glasser's QS	35 (1)	7-13
A. Jusoh, et al.	Validity and reliability of RT counselor profile	35 (1)	37-53
T. Seta, et al	Effort to measure the level of internal & external control	34 (1)	33-37
T. Parish	Ways to assess attitudes & behaviors of youth	33 (2)	12-18
T. Parish/J. Parish	The Multicultural Sensitivity Enhancement Scale	33 (2)	19-22
S. Mohamadi, et al.	Quality of Marital Relationships Scale (Based on 7 sins)	33 (2)	52-72
N. Mateo, et al.	Enhancing students' self-efficacy using CT	33 (2)	78-85
C. Sori/P. Robey	Finding transitions in children using CT, RT, & sandplay	33 (1)	63-77
J. Cameron/P. Robey	Healing through healing with CT	33 (1)	87-98
T. Burdinski, et al.	Perceptions regarding teacher quality & classroom envir.	33 (1)	105-124
W. Casstevens	Health and wellness—A CT based approach	32 (2)	48-53

C. McClung & B. Hoglund	A Glasser QS leads to choosing excellence.	32 (2)	54-64
T. Parish	The best choice is the most caring or efficient choice	32 (2)	65-70
T. Parish	Time-tested means of assessing themselves and others	32 (2)	71-77
R. Turner	A systemic approach to changing criminal minds	32 (1)	27-34
B. LaFond	Validation of a CT basic needs scale	31 (2)	54
O. Klanipour/H. Barzan	Effect of CT on teachers' teaching effectiveness	31 (2)	55-63
P. Robey, et al.	Applications of CT and RT with challenging youth	31 (1)	84-89
D. Hinton, et al.	Choosing success by building student relationships	31 (1)	90-96
M. Watson, et al.	CT and RT: Perceptions of efficacy	31 (1)	97-108
J. Hale/J. Maola	Enhancing student successes through RT/CT	31 (1)	109-127
B. Faulkner, et al.	Empowering ... math students to satisfy basic needs	31 (1)	128-141
P. Robey, et al.	Counseling students share their CT/RT stories	30 (2)	45-51
B. Smith, et al.	Using CT to reduce alcohol-related aggression	30 (2)	52-60
C. Palmer/J. Duba	Using CT principles to enhance academic achievement	30 (2)	61-72
E. Villares, et al.	Building Quality Worlds for students	30 (1)	52-61
T. Burdinski, et al.	Empowering students to satisfy their basic needs	30 (1)	73-97
B. Smith	The role of Wm. Glasser Institute for Research	29 (2)	4-10
S. Bilodeau	Project: Impact R. T.	29 (2)	70-105

TABLE #6***Research-Related Articles Involving Reality Therapy, Choice Theory, Quality School, and/or Lead Management Techniques . . .******which appear in the International Journal of Reality Therapy (1997-2009)***

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
T. Burdinski, et al.	Impact of Scholars' Project on teach. & research	28 (2)	43-49
M. Shillingford, et al.	Using CT w/ student whose parent is incarcerated	28 (1)	41-44
J. Kim	RT group counsel. on internet addiction + esteem	27 (2)	4-12
L. Fox/E. Delgado	Mission accomplished: CT	27 (2)	50-51
L. Litwack	Review dissertations using CT & RT (1970-2007)	27 (1)	14-16
J. Kim	RT group counsel. and an internet recovery meth.	26 (2)	3- 9
M. Burns, et al.	Student Needs Survey of the five basic needs	25 (2)	4- 8
S. Prenzlau	Using RT to reduce PTSD-related symptoms	25 (2)	23-29
	Research on RT In Korea	20 (2)	16
J. Song	Effect of RT upon ego concept of unemployed Ss	20 (2)	18
L. Hye	Effect of group RT on internal control & esteem	20 (2)	19
N. Ho	The effect of RT program on students' anxiety	20 (2)	19
J. Jang	Adjustment-reinforcement of boys thru RT	20 (2)	20
S. Lee	A RT counseling program decreased aggression	20 (2)	20
Y. Kim	Enhanced responsibility of children through RT	20 (2)	21
M. Seok	RT for problem middle school students	20 (2)	22
S. Chung	The effects of 3 learning methods on achievement	20 (2)	22-23
W. Aeryung	Develop. study of social work program using RT	20 (2)	23
K. Young	Effect of RT couple program on various social fact.	20 (2)	24
K. Soonup	RT program applied to clients' mental health	20 (2)	24-25
T. Carey	Redirecting awareness in the change process	20 (2)	26-30
M. Missel	The use of CT in animal-assisted therapy	20 (2)	40-41
A. Pease/J. Law	CT/RT/LM and student conduct: A 5 year study	19 (2)	4- 9
K. Sherman	CT/RT in chronic pain management	19 (2)	10-14
E. Mickel/R. Spencer	Moving to RT based case planning	19 (2)	21-23
N. Sharon	Israel: "Hatikva" and the Quality World	19 (2)	35- 37

Research-Related Articles—2

P. Fox/M. Bishop	The remaking of character via self-eval.	19 (2)	46-51
R. Renna, et al.	Use of RT with disabled students (1992-1998)	19 (1)	21-26
M. Harel-Hochfield	Practicing CT and RT in Israel: A case study	19 (1)	32-34
D. Sansone	Research, Internal Control & CT	17 (1)	39-43
D. Jones	A Family's journey from boss to lead managem't	17 (1)	50-52

TABLE #7

Research-Related Articles Involving Reality Therapy, Choice Theory, Quality School, and/or Lead Management Techniques . . .

Which appear in the *International Journal of Choice Therapy* (2006-2008)

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
R. Klm/M. Hwung	A meta-analysis of RT and CT programs for SE/LC1	(1)	25-30
C. Marcotte, et al.	RT/CT In group homes: A research project	2 (1)	16-18
M. Finnerty	CT training: Effects on locus of control & self-est.	2 (1)	31-34

TABLE #8

The Following Citations are of Research-Related Articles Involving Reality Therapy (RT), Choice Theory (CT), Control Theory (CoT), Quality School (QS), and/or Lead Management (LM) Techniques ...which appeared in the *Journal of Reality Therapy* (1981-1997):

<u>Author(s)</u>	<u>Title</u>	<u>Vol.</u>	<u>Page</u>
L. Murphy	Efficacy of RT in schools (1980-1995)	16 (2)	12-20
E. Bowers	The effect of CT/RT-“Quality School “ tech.	16 (2)	21-30
K. Pepper	From boss manager to lead manager	16 (2)	31-44
A. Peterson	Effects of RT on locus of control in school	16 (2)	80-87
K. Rose-Inxa	Making the world I want: Based on RT	16 (1)	26-35
A. Rehak	Understanding my Quality World	16 (1)	36-38
E. Mickel	Self-evaluation for quality: Method & model	15 (2)	71-77
J. Barry	Fifteen RT/CoT doctoral dissertations ('90-'95)	15 (2)	100-102
M. Chung	Can RT help delinquents in Hong Kong?	14 (1)	68-80
M. Watson/M. Fetter	Using CoT for exercise initiation and compliance	14 (1)	81-87
A. Peterson, et al.	Pathogram to measure success of drug program	14 (1)	88-93
T. Parish, et al.	Professors and students Are their views in accord?	14 (1)	94-99
S. Bannigan	Intervention w/ a chemical dependent individual	13 (2)	14-19
T. Parish, et al.	Correlates of ... professors' actions	13 (2)	47-48
T. Parish, et al.	Assessing professors'/students' behaviors	13 (2)	48-50
M. Franklin	Learning teams & class meetings: Bio. resources	13 (2)	55-60
A. Peterson, et al.	Quantitative analysis of Choice Drug Educ. Program	13 (1)	40-45
E. Mickel	RT intervention for the crack exposed child	12 (2)	20-28
P. Comiskey	Using RT group training w/ at-risk freshmen	12 (2)	59-64
T. Parish/J. Parish	Validating a method to identify “at-risk” students	12 (2)	65-69
M. Franklin	Eighty-two RT doctoral dissertations (1970-1990)	12 (2)	76-82
R. Williamson	Using group RT to raise self-esteem in adol. Girls	11 (2)	3-11
P. Cobb, et al.	A Quality Day ... The insight club	11 (2)	12-16

Research-related articles involving RT, CT, CoT, QS, &/or LM Techniques----- 2

Parish, T., et al.	Enhancing convergence between real/ideal selves	11 (2)	37-40
Peterson, A. et al.	Basic needs: Competitive or complementary	11 (2)	41-45
D. Duncan	RT/CoT in a treatment foster care network	11 (1)	46-49
S. Barlow	RT: For rehab. counselors in Maine	11 (1)	56-62
J. Ingram/J. Hinkle	RT and the scientist-practitioner approach	11 (1)	54-58
A. Gramstad	Application of RT in a problem driver program	11 (1)	66-70
S. Broadus	Gaining control: My story	11 (1)	39-41
T. Blakey	RT: Improving my life	9 (2)	42-45
L. Lafontaine	CoT & the learning team approach for sp. needs	9 (2)	46-49
A. Honeyman	Perceptual changes in addicts from RT based treat	9 (2)	54-59
J. Fried	Reality & self-control: Applying RT to person. work	9 (2)	60-64
R. Sullo	CoT and RT principles in cooperative learning groups	9 (2)	67-70
R. Conner	Applying RT to troubled marriages via "Perm. Love"	8 (1)	13-17
A. Smadi/G. Landreth	RT supervision w/ a counselor from another orient.	7 (2)	18-26
H. Perkins	P.A. and running: A report on a replication study	7 (2)	27-30
M. Franklin	RT: Bibliographical resources I n education	7 (1)	42-46
P. Yellin	Special friends: Play therapy based on CoT	6 (2)	2 – 9
M. Marzilli-Fahrney,etal.	Interrelationship of prin. of RT and group dynamics	6 (2)	10-18
P. Yarish	RT and the locus of control of juvenile offenders	6 (1)	3-10
C. Heuchert, et al.	Using RT to increase appropriate behaviors in youth	6 (1)	11-20
R. Rosser	RT with the Khmer refugee resettled in the U.S.A.	6 (1)	21-30
L. Geronilla/D. Walker	An alternative for single adults using RT	5 (2)	11-14
C. Slowik, et al.	Effects of RT on locus of control & self-concepts ...	3 (2)	1- 9
F. Cooper	Two approaches on self-esteem among the elderly `	3 (1)	32
E. Ford	Case examples of the application of RT to family therapy 2 (2)		14-20
E. Ford	Case examples of the therapeutic process in fam. Therapy 2 (1)		3-10
S. Norman	Evaluating counselors' or students' knowledge/use of RT 2 (1)		15-17

Research-related articles involving RT, CT, CoT, QS, &/or LM Techniques ——— 3

A. Peterson/G. Parr	Pathogram: A visual aid to obtain focus and commitment 2 (1)	18-21
J. Banmen	RT research review 2 (1)	28-32
F. Falher	RT: A systems level approach to treatment ... 1 (2)	3- 7
R. Drummond	Determinants of attitude toward RT 1 (2)	22-25
L. Molstad	RT in residential treatment 1 (1)	8-13
D. Evans	Schools without failure in action 1 (1)	16-21

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56

EFFECTIVE ASSESSMENT INSTRUMENTS FOR REALITY THERAPISTS AND CHOICE THEORISTS

Thomas S. Parish, Ph.D., CTRTC, Editor, International Journal of Choice Theory and Reality Therapy

Social scientists, reality therapists and choice theorists often seek to acquire knowledge about our behaviors, thoughts, attitudes, perceptions, actions, viewpoints, and more. As they endeavor to acquire such information, they need to acquire assessment instruments that will provide highly analyzable data that has great heuristic value.

What follows are a number of assessment instruments that were created for this purpose. More specifically, these instruments seek to provide either interval or ratio forms of measurement which are appropriate for parametric (e.g., t-tests, AOVs) types of analysis.

Section A includes assessment instruments that have been used in studies published in Choice Theory/Reality Theory (CT/RT) journals. **Section B** also includes assessment instruments that have been published, but in other professional journals. **Section C** includes similar scales that have been used in research studies presented at regional, national, and international meetings, but is now being published here for your use. All of these scales have been created by my associates and me. Further, the references for the assessment instruments in Sections A and B, plus copies of all of these instruments, can be viewed in the final section of this article.

While potential researchers should certainly consider using these assessment instruments presented here (in Sections A, B & C), they might also review other sources for such scales too. For instance, the introduction of similar scales is often included in issues of *Educational and Psychological Measurement*. This source has been around for several decades and frequently publishes assessment instruments that can help us to better understand ourselves and others, and how Choice Theory, Reality Therapy, Quality Schools, and Lead Management concepts can be effectively implemented to help us take more effective control of our lives while teaching, learning, counseling, doing business, and beyond.

"A" SCALES were drawn from CT/RT Journals

	<u>SCALES</u>	<u>NATURE</u>	<u>STATISTIC</u>
A1.	"Love/Hate Checklist"	Ratio	Parametric
A2.	"Love/Hate Checklist for Children"	Ratio	Parametric
A3.	"Nonsexist Personal Att. Invent. Child. Ratio		Parametric
A4.	"Personal Attribute Inventory"	Ratio	Parametric
A5.	"Personal Attribute Invent. Children"	Ratio	Parametric
A6.	"Right Stuff Scale, V#2"	Ratio	Parametric
A7.	"Right Stuff Scale, V#3"	Interval	Parametric
A8.	"Rating Students' Classroom Behav."	Ratio	Parametric

"B" SCALES were drawn from OTHER Journals

	<u>SCALES</u>	<u>NATURE</u>	<u>STATISTIC</u>
B1.	"Revised Love/Hate Checklist"	Ratio	Parametric
B2.	"Revised Person. Attribute Inventory"	Ratio	Parametric

"C" SCALES not previously published, but are published here for the first time

	<u>SCALES</u>	<u>NATURE</u>	<u>STATISTIC</u>
C.1	"Parental Rating Scale"	Interval	Parametric
C2.	"Parent/Child/Family Quest. #1"	Ratio	Parametric
C3.	"Parent/Child/Family Quest. #2"	Ratio	Parametric
C4.	"How I See Myself Scale"	Interval	Parametric
C5.	"Student Rating Scale"	Ratio	Parametric
C6.	"Leadership Rating Scale"	Ratio	Parametric
C7.	"The "Right Stuff" Scale	Ratio	Parametric
C8.	"Questions That ... Enhance"	Informational	
C9.	"Student Behavior Survey/Teach"	Ratio	Parametric
C10.	"Teacher Connectedness Survey"	Ratio	Parametric
C11.	"Student Behavior Survey/Stud."	Ratio	Parametric
C12.	"Survey of Student Satisfaction"	Interval	Parametric
C13	"Student Survey"	Ratio	Parametric
C14.	"Parent Survey"	Ratio	Parametric
C15.	"Fears & Phobias Scale"	Ratio	Parametric
C16.	"How Well Do You Juggle Scale"	Interval	Parametric
C17.	"Friendship Scale"	Ratio	Parametric
C18.	"Rate Others/Rate Yourself"	Interval	Parametric
C19.	"How Do You Feel About Yourself" Sc.	Interval	Parametric

REFERENCES FOR THE ASSESSMENT INSTRUMENTS CITED ABOVE

A. Assessment Instruments Published in CT/RT-Related Refereed Journals:

#	<u>Author(s)</u>	<u>Title</u>	<u>Source</u>
1.	Parish, T.	The Love/Hate Checklist (for Adults)	IJCTRT, 2013, 32 (2), 71-77
2.	Parish, T./Necessary, J.	The Love/Hate Checklist for Children	IJCTRT, 2014, 33 (2), 12-18
3.	Parish, T./Rankin, C.	Nonsexist Personal Attribute Inventory for Children	IJCTRT, 2014, 33 (2), 12-18
4.	Parish, T./Bryant, W. & Shirazi, A.	The Personal Attribute Inventory (for adults)	IJCTRT, 2013, 32 (2), 71-77
5.	Parish, T./Taylor, J.	The Personal Attribute Inventory for Children	IJCTRT, 2014, 33, (2), 12-18
6.	Parish, T.	The Right Stuff Scale #2	IJCTRT, 2013, 32 (2), 65-70
7.	Parish, T.	The Right Stuff Scale #3	IJCTRT, 2013, 32 (2), 65-70
8.	Parish, T./Parish, J.	Rating Classroom-Related Behaviors	IJRT, 2005, 25 (1), 24-25

B. Psychological Assessment Instruments Published in Other Refereed Journals:

#	<u>Author(s)</u>	<u>Title</u>	<u>Source</u>
1.	Parish, T./Necessary, J. (1993)	The Revised Love/Hate Checklist	<i>Adolescence</i> , 28, 186-188.
2.	Parish, T./Necessary, J. (1996)	The Revised Personal Attribute Inventory	<i>J. Inst. Psy.</i> 23 (2), 109-10.

C. Other Psychological Assessment Instruments Available for Your Use:

#	<u>Author(s)</u>	<u>Title</u>
1.	Nunn, G./Parish, T.	The Parental Rating Scale.
2.	Parish, T.	Parent/Child/Family Relationship Questionnaire
3.	Parish, T.	Parent/Child/Family Relationship Questionnaire II
4.	Parish, T.	The How I See Myself Scale
5.	Parish, T.	Student Rating Scale
6.	Parish, T.	The Leadership Rating Scale
7.	Parish, T.	The "Right Stuff" Scale
8.	Parish, T.	Questions That Can Enhance Social Intelligence
9.	Parish, T./Parish, J.	Student Behavior Survey for Teachers
10.	Parish, T./Parish, J.	Teacher Connectedness Survey
11.	Parish, T./Parish, J.	Student Behavior Survey for Students
12.	Parish, T./Parish, J.	<i>Survey of Student Satisfaction</i>
13.	Parish, T./Parish, J.	<i>The Student Survey</i>
14.	Parish, T./Parish, J.	Parent Survey
15.	Parish, T./Gates, A.	The Fears & Phobias Scale

#	<u>Author(s)</u>	<u>Title</u>
16.	Parish, T./Beckman	How Well Do I Juggle Scale
17.	Parish, T./Turner, D.	The Friendship Scale
18.	Parish, T.	Rate Others/Rate Yourself Scale
19.	Parish, T./Rehbein, G.	How Do You Feel About What You Do Scale

For everyone's convenience, copies of all of these Assessment Instruments appear in the next section. Notably, Section A stands alone (A1-A8), as does Section B (B1-B2), but a brief introduction precedes the scales included within Section C (C1-C19), which will complete what I intended to share with you in this article.

THE LOVE / HATE CHECKLIST

Please read through this list and select exactly 25 words which seem to best describe how _____ act(s) toward _____. Indicate your selection by placing an X in the appropriate space next to each word.

- | | | |
|---|--|---|
| <input type="checkbox"/> Abrasively | <input type="checkbox"/> Encouragingly | <input type="checkbox"/> Peacefully |
| <input type="checkbox"/> Abusively | <input type="checkbox"/> Endearingly | <input type="checkbox"/> Playfully |
| <input type="checkbox"/> Accusingly | <input type="checkbox"/> Excitedly | <input type="checkbox"/> Pleasingly |
| <input type="checkbox"/> Adoringly | <input type="checkbox"/> Faithfully | <input type="checkbox"/> Pleasurably |
| <input type="checkbox"/> Affectionately | <input type="checkbox"/> Fantastically | <input type="checkbox"/> Praisingly |
| <input type="checkbox"/> Angeringly | <input type="checkbox"/> Favorably | <input type="checkbox"/> Protectively |
| <input type="checkbox"/> Antagonistically | <input type="checkbox"/> Furiously | <input type="checkbox"/> Punishingly |
| <input type="checkbox"/> Appreciatively | <input type="checkbox"/> Generously | <input type="checkbox"/> Quarrelsomely |
| <input type="checkbox"/> Approvingly | <input type="checkbox"/> Gently | <input type="checkbox"/> Radiantly |
| <input type="checkbox"/> Argumentatively | <input type="checkbox"/> Gleefully | <input type="checkbox"/> Rejoicingly |
| <input type="checkbox"/> Backbitingly | <input type="checkbox"/> Glowingly | <input type="checkbox"/> Respectfully |
| <input type="checkbox"/> Badly | <input type="checkbox"/> Happily | <input type="checkbox"/> Rudely |
| <input type="checkbox"/> Belovedly | <input type="checkbox"/> Harshly | <input type="checkbox"/> Scornfully |
| <input type="checkbox"/> Beneficially | <input type="checkbox"/> Hostilely | <input type="checkbox"/> Sincerely |
| <input type="checkbox"/> Blessedly | <input type="checkbox"/> Impolitely | <input type="checkbox"/> Sneeringly |
| <input type="checkbox"/> Caringly | <input type="checkbox"/> Inconsiderately | <input type="checkbox"/> Sweetly |
| <input type="checkbox"/> Charmingly | <input type="checkbox"/> Inhumanely | <input type="checkbox"/> Tenderly |
| <input type="checkbox"/> Coldly | <input type="checkbox"/> Insensitively | <input type="checkbox"/> Terribly |
| <input type="checkbox"/> Combatively | <input type="checkbox"/> Insultingly | <input type="checkbox"/> Thankfully |
| <input type="checkbox"/> Cooperatively | <input type="checkbox"/> Intimately | <input type="checkbox"/> Thoughtfully |
| <input type="checkbox"/> Cruelly | <input type="checkbox"/> Irritably | <input type="checkbox"/> Trustingly |
| <input type="checkbox"/> Damnably | <input type="checkbox"/> Lively | <input type="checkbox"/> Truthfully |
| <input type="checkbox"/> Deceitfully | <input type="checkbox"/> Loyally | <input type="checkbox"/> Unappreciatively |
| <input type="checkbox"/> Deceptively | <input type="checkbox"/> Magnificently | <input type="checkbox"/> Unreliably |
| <input type="checkbox"/> Degradingly | <input type="checkbox"/> Maliciously | <input type="checkbox"/> Viciously |
| <input type="checkbox"/> Delightfully | <input type="checkbox"/> Meanly | <input type="checkbox"/> Vindictively |
| <input type="checkbox"/> Devotedly | <input type="checkbox"/> Miserably | <input type="checkbox"/> Violently |
| <input type="checkbox"/> Disagreeably | <input type="checkbox"/> Mockingly | <input type="checkbox"/> Wonderfully |
| <input type="checkbox"/> Discouragingly | <input type="checkbox"/> Monstrously | |
| <input type="checkbox"/> Ecstatically | <input type="checkbox"/> Nastily | |
| <input type="checkbox"/> Elatedly | <input type="checkbox"/> Negatively | |

Table 3a. The Love/Hate Checklist for Children

Please read through this list and select exactly 10 words that best describe how _____ acts toward _____. Indicate your selection by placing an X in the appropriate space next to each chosen word.

- | | | |
|---------------------------------------|--|---|
| <input type="checkbox"/> Abusively | <input type="checkbox"/> Fantastically | <input type="checkbox"/> Nastily |
| <input type="checkbox"/> Accusingly | <input type="checkbox"/> Gently | <input type="checkbox"/> Negatively |
| <input type="checkbox"/> Badly | <input type="checkbox"/> Happily | <input type="checkbox"/> Peacefully |
| <input type="checkbox"/> Belovedly | <input type="checkbox"/> Harshly | <input type="checkbox"/> Pleasingly |
| <input type="checkbox"/> Blessedly | <input type="checkbox"/> Impolitely | <input type="checkbox"/> Thoughtfully |
| <input type="checkbox"/> Coldly | <input type="checkbox"/> Inconsiderately | <input type="checkbox"/> Trustingly |
| <input type="checkbox"/> Cruelly | <input type="checkbox"/> Inhumanely | <input type="checkbox"/> Truthfully |
| <input type="checkbox"/> Damnably | <input type="checkbox"/> Lively | <input type="checkbox"/> Unappreciatively |
| <input type="checkbox"/> Delightfully | <input type="checkbox"/> Loyally | <input type="checkbox"/> Violently |
| <input type="checkbox"/> Faithfully | <input type="checkbox"/> Miserably | <input type="checkbox"/> Wonderfully |

Table 1
The Nonsexist personal Attribute Inventory for Children

Read through this list of words, then put an X in the box beside the 10 words which best describe you.

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Angry | <input type="checkbox"/> Helpful* |
| <input type="checkbox"/> Awkward | <input type="checkbox"/> Honest* |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Jolly* |
| <input type="checkbox"/> Careless | <input type="checkbox"/> Kind* |
| <input type="checkbox"/> Complaining | <input type="checkbox"/> Lazy |
| <input type="checkbox"/> Cowardly | <input type="checkbox"/> Lovely* |
| <input type="checkbox"/> Dirty | <input type="checkbox"/> Mean |
| <input type="checkbox"/> Dumb | <input type="checkbox"/> Nagging |
| <input type="checkbox"/> Fairminded* | <input type="checkbox"/> Nice* |
| <input type="checkbox"/> Foolish | <input type="checkbox"/> Polite* |
| <input type="checkbox"/> Friendly* | <input type="checkbox"/> Rude |
| <input type="checkbox"/> Gentle* | <input type="checkbox"/> Ugly |
| <input type="checkbox"/> Good* | <input type="checkbox"/> Unfriendly |
| <input type="checkbox"/> Greedy | <input type="checkbox"/> Wise* |
| <input type="checkbox"/> Happy* | <input type="checkbox"/> Wonderful* |
| <input type="checkbox"/> Healthy* | <input type="checkbox"/> Wrongful |

*indicates positively evaluated words.

THE PERSONAL ATTRIBUTE INVENTORY

Read through this list and select exactly 30 words that seem to be typical of _____. Indicate your selection by placing an X in the appropriate space next to each word.

<input type="checkbox"/> Active	<input type="checkbox"/> Foresighted	<input type="checkbox"/> Organized	<input type="checkbox"/> Snobbish
<input type="checkbox"/> Affectionate	<input type="checkbox"/> Forgetful	<input type="checkbox"/> Original	<input type="checkbox"/> Spineless
<input type="checkbox"/> Alert	<input type="checkbox"/> Gloomy	<input type="checkbox"/> Patient	<input type="checkbox"/> Stable
<input type="checkbox"/> Appreciative	<input type="checkbox"/> Good-natured	<input type="checkbox"/> Pleasant	<input type="checkbox"/> Steady
<input type="checkbox"/> Awkward	<input type="checkbox"/> Greedy	<input type="checkbox"/> Poised	<input type="checkbox"/> Stingy
<input type="checkbox"/> Bitter	<input type="checkbox"/> Handsome	<input type="checkbox"/> Prejudiced	<input type="checkbox"/> Strong
<input type="checkbox"/> Calm	<input type="checkbox"/> Hasty	<input type="checkbox"/> Progressive	<input type="checkbox"/> Sulky
<input type="checkbox"/> Careless	<input type="checkbox"/> healthy	<input type="checkbox"/> Quarrelsome	<input type="checkbox"/> Sympathetic
<input type="checkbox"/> Cheerful	<input type="checkbox"/> Helpful	<input type="checkbox"/> Queer	<input type="checkbox"/> Tactful
<input type="checkbox"/> Clear-thinking	<input type="checkbox"/> Hostile	<input type="checkbox"/> Quitting	<input type="checkbox"/> Tactless
<input type="checkbox"/> Complaining	<input type="checkbox"/> Humorous	<input type="checkbox"/> Rational	<input type="checkbox"/> Thankless
<input type="checkbox"/> Conceited	<input type="checkbox"/> Imaginative	<input type="checkbox"/> Rattlebrained	<input type="checkbox"/> Tolerant
<input type="checkbox"/> Confident	<input type="checkbox"/> Impatient	<input type="checkbox"/> Relaxed	<input type="checkbox"/> Touchy
<input type="checkbox"/> Confused	<input type="checkbox"/> Industrious	<input type="checkbox"/> Resentful	<input type="checkbox"/> Trusting
<input type="checkbox"/> Conscientious	<input type="checkbox"/> Initiator	<input type="checkbox"/> Resourceful	<input type="checkbox"/> Undependable
<input type="checkbox"/> Cooperative	<input type="checkbox"/> Intolerant	<input type="checkbox"/> Rude	<input type="checkbox"/> Understanding
<input type="checkbox"/> Cowardly	<input type="checkbox"/> Inventive	<input type="checkbox"/> Self-centered	<input type="checkbox"/> Unfriendly
<input type="checkbox"/> Cruel	<input type="checkbox"/> Irresponsible	<input type="checkbox"/> Self-confident	<input type="checkbox"/> Unintelligent
<input type="checkbox"/> Deceitful	<input type="checkbox"/> Irritable	<input type="checkbox"/> Self-controlled	<input type="checkbox"/> Unkind
<input type="checkbox"/> Dependable	<input type="checkbox"/> Jolly	<input type="checkbox"/> Self-pitying	<input type="checkbox"/> Warm
<input type="checkbox"/> Despondent	<input type="checkbox"/> Kind	<input type="checkbox"/> Selfish	<input type="checkbox"/> Weak
<input type="checkbox"/> Determined	<input type="checkbox"/> Mannerly	<input type="checkbox"/> Shallow	<input type="checkbox"/> Whiny
<input type="checkbox"/> Energetic	<input type="checkbox"/> Masculine	<input type="checkbox"/> <u>Shiftless</u>	
<input type="checkbox"/> Fairminded	<input type="checkbox"/> Nagging	<input type="checkbox"/> Show-off	
<input type="checkbox"/> Fickle	<input type="checkbox"/> Natural	<input type="checkbox"/> Sincere	
<input type="checkbox"/> Foolish	<input type="checkbox"/> Obnoxious	<input type="checkbox"/> Slipshod	

Personal Attribute Inventory for Children (PAIC)

Read through this list of words, then put an X in the box beside the 10 words that best describe

_____.

- | | |
|--------------------------------------|-------------------------------------|
| <input type="checkbox"/> Angry | <input type="checkbox"/> Helpful |
| <input type="checkbox"/> Awkward | <input type="checkbox"/> Honest |
| <input type="checkbox"/> Calm | <input type="checkbox"/> Jolly |
| <input type="checkbox"/> Careless | <input type="checkbox"/> Kind |
| <input type="checkbox"/> Complaining | <input type="checkbox"/> Lazy |
| <input type="checkbox"/> Cowardly | <input type="checkbox"/> Lovely |
| <input type="checkbox"/> Dirty | <input type="checkbox"/> Mean |
| <input type="checkbox"/> Dumb | <input type="checkbox"/> Nagging |
| <input type="checkbox"/> Fair-minded | <input type="checkbox"/> Nice |
| <input type="checkbox"/> Foolish | <input type="checkbox"/> Polite |
| <input type="checkbox"/> Friendly | <input type="checkbox"/> Rude |
| <input type="checkbox"/> Gentle | <input type="checkbox"/> Ugly |
| <input type="checkbox"/> Good | <input type="checkbox"/> Unfriendly |
| <input type="checkbox"/> Greedy | <input type="checkbox"/> Wise |
| <input type="checkbox"/> Happy | <input type="checkbox"/> Wonderful |
| <input type="checkbox"/> Healthy | <input type="checkbox"/> Wrongful |

The Right Stuff Scale, Version #2

Kindly rate yourself along each of the continua provided below, i.e., Do you have the “right stuff”, “wrong stuff”, or are you somewhere in-between?

POTENTIAL . . . Are YOU striving to reach YOURS?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

DESIRE . . . Do YOU display it for all to see?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

PERSONAL MOTIVATION . . . Do YOU set GOALS for YOURSELF?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

ENTHUSIASM . . . Are YOU excited about what YOU can do?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

SELF-CONFIDENCE . . . Do YOU have faith in YOURSELF?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

WORK . . . Are you doing what needs to be done, and nothing less?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

HABITS . . . Do YOU consciously control what YOU do?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

CHANGE . . . Do YOU seek to adapt when problems arise?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

ATTITUDE . . . Do YOU maintain a positive one?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

SUCCESS . . . Do YOU strive to do well at any/every task?

Never I ___ I ___ I ___ I ___ I ___ I ___ I ___ I Always

The Right Stuff Scale, Version #3

According to the "Right Stuff Scale, Version #3," which was also recently developed by the senior author for inclusion here, the respondent(s) is (are) asked to "Kindly indicate if s/he/they think that s/he/they have the 'right stuff,' 'wrong stuff,' or if s/he/they is (are) somewhere in-between. In total, there are fifteen descriptors, with one side composed of "right stuff" items, and the opposite side composed of items representing "wrong stuff" descriptors, e.g., "Always Patient" to "Never Patient." One's score is the total number of points accumulated, across descriptors, which range from as low as fifteen (15) points to as many as one seventy-five (75) points, with the higher scores representing higher marks in terms of the respondent's "right stuff" score. (See Table 3 to peruse the "Right Stuff Scale, Version #3").

Table 3

The Right Stuff Scale, Version #3

Kindly rate yourself along each of the continua provided below, i.e., Do you have the "right stuff," "wrong stuff," or are you somewhere in-between?

"Wrong Stuff"		"Right Stuff"	
Never focused	I _____ I _____ I _____ I _____ I _____ I	Always focused	
Never goal-oriented	I _____ I _____ I _____ I _____ I _____ I	Always goal-oriented	
Never planning	I _____ I _____ I _____ I _____ I _____ I	Always planning	
Never committed	I _____ I _____ I _____ I _____ I _____ I	Always committed	
Never enthusiastic	I _____ I _____ I _____ I _____ I _____ I	Always enthusiastic	
Bad reputation	I _____ I _____ I _____ I _____ I _____ I	Good reputation	
Never confident	I _____ I _____ I _____ I _____ I _____ I	Always confident	
Never respectful	I _____ I _____ I _____ I _____ I _____ I	Always respectful	
Never honest	I _____ I _____ I _____ I _____ I _____ I	Always honest	
Never considerate	I _____ I _____ I _____ I _____ I _____ I	Always considerate	
Low self-esteem	I _____ I _____ I _____ I _____ I _____ I	High self-esteem	
Never patient	I _____ I _____ I _____ I _____ I _____ I	Always patient	
Never optimistic	I _____ I _____ I _____ I _____ I _____ I	Always optimistic	
Never willing to try	I _____ I _____ I _____ I _____ I _____ I	Always willing to try	
Bad attitude	I _____ I _____ I _____ I _____ I _____ I	Good attitude	

RATING of STUDENTS' CLASSROOM-RELATED BEHAVIORS**Thomas S. Parish & Joycelyn G. Parish**

1. How often do you treat your teachers with respect?

Never | ___ | ___ | ___ | ___ | ___ | ___ | Always

2. How often do you do your best to learn?

Never | ___ | ___ | ___ | ___ | ___ | ___ | Always

3. How often do you work cooperatively with others?

Never | ___ | ___ | ___ | ___ | ___ | ___ | Always

4. How often do you treat other students with respect?

Never | ___ | ___ | ___ | ___ | ___ | ___ | Always

5. How often are you happy at school?

Never | ___ | ___ | ___ | ___ | ___ | ___ | Always

Your gender: ___

Your grade: ___

Your age: ___

Revised Love/Hate Checklist

Please read through this list and select exactly 10 words which seem to best describe how your father (mother) acts toward your mother (father). Indicate your selection by placing an X in the appropriate space next to each word.

- | | |
|--|--|
| <input type="checkbox"/> Abusively (01) | <input type="checkbox"/> Insensitively (21) |
| <input type="checkbox"/> Accusingly (02) | <input type="checkbox"/> Lively (22) |
| <input type="checkbox"/> Appreciatively (03) | <input type="checkbox"/> Loyally (23) |
| <input type="checkbox"/> Backbitingly (04) | <input type="checkbox"/> Miserably (24) |
| <input type="checkbox"/> Badly (05) | <input type="checkbox"/> Nastily (25) |
| <input type="checkbox"/> Belovedly (06) | <input type="checkbox"/> Negatively (26) |
| <input type="checkbox"/> Blessedly (07) | <input type="checkbox"/> Peacefully (27) |
| <input type="checkbox"/> Coldly (08) | <input type="checkbox"/> Pleasingly (28) |
| <input type="checkbox"/> Cruelly (09) | <input type="checkbox"/> Pleasurably (29) |
| <input type="checkbox"/> Damnably (10) | <input type="checkbox"/> Praisingly (30) |
| <input type="checkbox"/> Delightfully (11) | <input type="checkbox"/> Rudely (31) |
| <input type="checkbox"/> Discouragingly (12) | <input type="checkbox"/> Sweetly (32) |
| <input type="checkbox"/> Faithfully (13) | <input type="checkbox"/> Terribly (33) |
| <input type="checkbox"/> Fantastically (14) | <input type="checkbox"/> Thankfully (34) |
| <input type="checkbox"/> Gently (15) | <input type="checkbox"/> Thoughtfully (35) |
| <input type="checkbox"/> Happily (16) | <input type="checkbox"/> Trustingly (36) |
| <input type="checkbox"/> Harshly (17) | <input type="checkbox"/> Truthfully (37) |
| <input type="checkbox"/> Impolitely (18) | <input type="checkbox"/> Unappreciatively (38) |
| <input type="checkbox"/> Inconsiderably (19) | <input type="checkbox"/> Violently (39) |
| <input type="checkbox"/> Inhumanely (20) | <input type="checkbox"/> Wonderfully (40) |

The Revised Personal Attribute Inventory by T. Parish and J. Necessary

Read through the list and select 20 words which seem to be typical of yourself. Indicated your selection by placing an X in the appropriate space next to each word.

- | | |
|---|---|
| <input type="checkbox"/> Affectionate (01) | <input type="checkbox"/> Nagging (42) |
| <input type="checkbox"/> Alert (02) | <input type="checkbox"/> Obnoxious (43) |
| <input type="checkbox"/> Appreciative (03) | <input type="checkbox"/> Organized (44) |
| <input type="checkbox"/> Awkward (04) | <input type="checkbox"/> Patient (45) |
| <input type="checkbox"/> Bitter (05) | <input type="checkbox"/> Pleasant (46) |
| <input type="checkbox"/> Calm (06) | <input type="checkbox"/> Posed (47) |
| <input type="checkbox"/> Cheerful (08) | <input type="checkbox"/> Prejudiced (48) |
| <input type="checkbox"/> Complaining (09) | <input type="checkbox"/> Progressive (49) |
| <input type="checkbox"/> Conceited (10) | <input type="checkbox"/> Quarrelsome (50) |
| <input type="checkbox"/> Confident (11) | <input type="checkbox"/> Relaxed (51) |
| <input type="checkbox"/> Confused (12) | <input type="checkbox"/> Resentful (52) |
| <input type="checkbox"/> Conscientious (13) | <input type="checkbox"/> Resourceful (53) |
| <input type="checkbox"/> Cooperative (14) | <input type="checkbox"/> Rude (54) |
| <input type="checkbox"/> Cowardly (15) | <input type="checkbox"/> Self-confident (55) |
| <input type="checkbox"/> Cruel (16) | <input type="checkbox"/> Self-controlled (56) |
| <input type="checkbox"/> Deceitful (17) | <input type="checkbox"/> Self-pitying (57) |
| <input type="checkbox"/> Dependable (18) | <input type="checkbox"/> Selfish (58) |
| <input type="checkbox"/> Despondent (19) | <input type="checkbox"/> Shallow (59) |
| <input type="checkbox"/> Determined (20) | <input type="checkbox"/> Show-off (60) |
| <input type="checkbox"/> Energetic (21) | <input type="checkbox"/> Sincere (61) |
| <input type="checkbox"/> Fair-minded (22) | <input type="checkbox"/> Stable (62) |
| <input type="checkbox"/> Foolish (23) | <input type="checkbox"/> Steady (63) |
| <input type="checkbox"/> Forgetful (24) | <input type="checkbox"/> Stingy (64) |
| <input type="checkbox"/> Gloomy (25) | <input type="checkbox"/> Strong (65) |
| <input type="checkbox"/> Good-natured (26) | <input type="checkbox"/> Sympathetic (66) |
| <input type="checkbox"/> Greedy (27) | <input type="checkbox"/> Tactful (67) |
| <input type="checkbox"/> Hasty (28) | <input type="checkbox"/> Tactless (68) |
| <input type="checkbox"/> Healthy (29) | <input type="checkbox"/> Thankless (69) |
| <input type="checkbox"/> Helpful (30) | <input type="checkbox"/> Tolerant (70) |
| <input type="checkbox"/> Hostile (31) | <input type="checkbox"/> Touchy (71) |
| <input type="checkbox"/> Imaginative (32) | <input type="checkbox"/> Trusting (72) |
| <input type="checkbox"/> Impatient (33) | <input type="checkbox"/> Undependable (73) |
| <input type="checkbox"/> Initiative (34) | <input type="checkbox"/> Understanding (74) |
| <input type="checkbox"/> Intolerant (35) | <input type="checkbox"/> Unfriendly (75) |
| <input type="checkbox"/> Inventive (36) | <input type="checkbox"/> Unintelligent (76) |
| <input type="checkbox"/> Irresponsible (37) | <input type="checkbox"/> Unkind (77) |
| <input type="checkbox"/> Irritable (38) | <input type="checkbox"/> Warm (78) |
| <input type="checkbox"/> Jolly (39) | <input type="checkbox"/> Weak (79) |
| <input type="checkbox"/> Kind (40) | <input type="checkbox"/> Whiny (80) |

**ASSESSMENT INSTRUMENTS THAT MAY BE USED TO MEASURE THE
EFFECTIVENESS of CHOICE THEORY and/or REALITY THERAPY,
AND HOW THEY APPLY TO OUR RELATIONSHIPS WITH OTHERS**

C1. “The Parental Rating Scale” by Gerald D. Nunn & Thomas S. Parish

Basically, subjects are asked to pinpoint on two dimensions (i.e., Restrictiveness-Permissive, Warmth-Hostility) their views regarding how they were treated within their families by their parents, and how they, in turn, treated their parents. See Questionnaire #1.

C2. “Parent/Child/Family Relationship Questionnaire” by Thomas S. Parish

This scale asks adults to describe his/her childhood and/or adolescence by answering fourteen prompts regarding how well they interacted with their parents/other family members. Responses range from “Never” to “Always.” See Questionnaire # 2.

C3. “Parent/Child/Family Relationship Questionnaire II” by Thomas S. Parish

This scale asks youth/adolescents to describe his/her childhood and/or adolescence by answering fourteen prompts regarding how well they interact with their parents/other family members. Responses range from “Never” to “Always.” See Questionnaire # 3.

C4. The “How I See Myself Scale” by Thomas S. Parish

This scale presents ten (10) continua (e.g., “polite-to-impolite) and asks the respondent (i.e., adolescent or adult) to place an A at a point on each continuum describing where s/he is right now, and then place a B on the same continuum describing where the respondent would like to be ten years from now. See Questionnaire #4.

C5. “The Student Rating Scale” by Thomas S. Parish

This scale lists seven (7) descriptors (e.g., self-confident) and asks the respondents to indicate how well these descriptors actually apply to them by rating themselves (or someone else) on a five-point continuum ranging from “Never” to “Always.” See Questionnaire #5.

C6. “The Leadership Rating Scale” by Thomas S. Parish

This scale lists ten (10) descriptors (e.g., Likeable) and asks the respondents to indicate how well these descriptors actually apply to them as leaders by rating themselves (or someone else) on a five-point continuum ranging from “Never” to “Always.” See Questionnaire #6.

C7. The “Right Stuff” Scale by Thomas S. Parish

This scale consists of twelve (12) items. Each item encapsulates an attribute or a trait, and the respondent is asked to describe how the person in question (i.e., either himself/herself or someone else) might be rated regarding how often s/he or they employ each attribute or trait. See Questionnaire #7.

C8. “Questions That Can Enhance Our Social Intelligence” by Thomas S. Parish

This questionnaire poses eleven (11) questions that can prompt the respondent to develop positive alternatives that may help him/her, and/or others, in various ways. It should also demonstrate to the respondent that life should always be a search for positive alternatives. See Questionnaire #8.

C9. “The Student Behavior Survey for Teachers” by Thomas S. Parish & Joycelyn G. Parish

This survey asks teachers to rate students on five (5) school-related behaviors, each on a five-point continuum ranging from “Never” to “Always.” See Questionnaire #9.

C10. “The Teacher Connectedness Survey” by Thomas S. Parish & Joycelyn G. Parish

This survey simply seeks to ask teachers how often they do things for students that demonstrate that they truly value them and that they wish to help them. In all, there are twelve (12) questions, each accompanied by a continuum ranging from “Never” to “Always.” See Questionnaire #10.

C11. “The Student Behavior Survey for Students” by Thomas S. Parish & Joycelyn G. Parish

This survey requests students to rate how well they do things at school. In all, there are only five self-descriptors, each accompanied by a continuum ranging from “Never” to “Always.” Notably, it has been consistently reported previously that students who check “Always” on this survey do much better in school, while students who check “Never” consistently do more poorly in school. Could it be that both are simply “CHOICE” behaviors? See Questionnaire #11.

C12. “Survey of Student Satisfaction” by Thomas S. Parish & Joycelyn G. Parish

This survey focuses on nine (9) aspects of school (e.g., teachers, classmates, homework), and asks students to rate them all on five-point continua, ranging from “Awful” to “Terrific,” in order to provide some insights regarding their views of their educational experience. It is a quick and easy scale to complete, and might best be used as a pre-post survey, though it won’t provide much detail regarding specifics of any problems that the students have encountered in school. See Questionnaire #12.

C13. “The Student Survey” by Thomas S. Parish & Joycelyn G. Parish

This survey is much more multifaceted than the one above and would therefore be more likely to provide greater insights about various areas (i.e., school, classmates, office staff, teachers, and the student specifically). However, all the areas studied (via 21 inquiries) are done so using continua, with answer options ranging from “Never” to “Always.” The reverse

side of the survey, however, can be used for written responses, if the respondent is inclined and/or able to write more in-depth descriptions of these areas. See Questionnaire #13.

C14. “Parent Survey” by Thomas S. Parish & Joycelyn G. Parish

This survey consists of twelve (12) items, along with five-point continua for each, ranging from “Never” to “Always.” Though this survey is intended to be completed by parents, it is identical to the Teacher Connectedness Survey (see Questionnaire #14), giving rise to being able to compare the two surveys at any time during or after any investigation in order to determine how they compare to one another. See Questionnaire #14.

C15. “The Fears and Phobias Scale” by Thomas S. Parish & Ashley Gates

This scale lists twenty-four types of fears which many people might manifest. Each respondent is asked to go through this scale, note the targets, and indicate how much fear, or how little fear, is elicited by each. Beside the name of the target, is a 5-point continuum for each target, which ranges from “Never” to “Always,” so the researcher can readily determine how phobic the respondents are in just a couple of minutes. Notably, the respondents, too, will likewise be able to quickly discern their phobic reactions to each if they have been honest in completing the scale. With these scores we can then begin a “desensitization program,” in order to reduce the respondent’s fear(s) accordingly. See Questionnaire #15.

C16. “The How Well Do You Juggle Scale” by Thomas S. Parish & Brenda Beckman

This scale lists thirteen (13) potential problem areas. On subscale #1, each respondent is asked to estimate how much of a problem each problem area is for him/her on a seven-point-continua, ranging from “NO PROBLEM” to “BIG PROBLEM.” On subscale #2, each respondent is asked to estimate how well s/he is able to handle these stressors on a seven-point-continua, ranging from “VERY POORLY” to “VERY WELL.” This scale should be very helpful for therapists seeking a way to assess their clients’ fears, and/or how well they’re doing at overcoming them. See Questionnaire #16.

C17. “The Friendship Scale” by Thomas S. Parish & Derek Turner

This scale lists ten (10) ways to befriend others, and then asks respondents to rate themselves on how well they are doing at being friends to others. For example, one item on this scale asks: Do you try to go the extra mile for others, and then go ten miles after that.” Respondents then turn to seven-point-continuum ranging from “Never” to “Always,” and indicate their answers accordingly. Basically, a lot of “ALWAYS” answers are best, while a lot of “NEVER” answers score a lot less. See Questionnaire #17.

C18. “Rate Others/Rate Yourself” by Thomas S. Parish

As William Glasser once noted, for most needs (i.e., Love & Belonging, Fun, Freedom, Survival) most couples would benefit from being alike, but for people who are both into high power, it’s most likely that things—for them--are going to go sour! Of course, people can vary greatly from one another, and there might be no problem at all, but even still it is more likely that we should check, rather than get “check-mated” some day in divorce court. To this end this survey is dedicated. See Questionnaire #18.

C19. “How Do You Feel About What You Do?” Scale by Thomas S. Parish & Gary Rehbein

This scale basically provides a list of ways by which one can describe one’s-self and what s/he does, or how s/he feels, in general terms. For instance, one question asks, “Do you resent being told what to do by others?” To this inquiry there is a range of options to choose from ranging from “strongly agree” ☐ ☐ ☐ ☐ ☐ ☐ ☐ to “strongly disagree.” The intent here is to determine how pliable people are in working with others in various settings. See Questionnaire #19.

The Parental Rating Scale

Gerald D. Nunn & Thomas S. Parish

College students were presented the following two grids with the accompanying instructions:

Restrictiveness | ____ | ____ | ____ | ____ | ____ | ____ | ____ | Permissiveness

Warmth | ____ | ____ | ____ | ____ | ____ | ____ | ____ | Hostility

1. Each student was asked to place an F (on both of these continua) at the point that best describes how his/her father raised him/her, particularly during the last five (5) years that s/he lived at home.
2. Each student was asked to place an M (on both of these continua) at the point that best describes how his/her mother raised him/her, particularly during the last five (5) years that s/he lived at home.

PARENT/CHILD/FAMILY RELATIONSHIP QUESTIONNAIRE

Thomas S. Parish, Ph.D.

Upper Iowa University

During your childhood and/or adolescence please describe the following:

1. Ate together as a family. Never I _ I _ I _ I _ I _ I _ Always
2. Had regularly scheduled family activities or traditions. Never I _ I _ I _ I _ I _ I _ Always
3. Had parents talk with you, and NOT just to you. Never I _ I _ I _ I _ I _ I _ Always
4. Had parents who drank alcoholic drinks regularly. Never I _ I _ I _ I _ I _ I _ Always
5. Had parents who smoked. Never I _ I _ I _ I _ I _ I _ Always
6. Had parents warn you of the dangers of drinking or smoking. Never I _ I _ I _ I _ I _ I _ Always
7. Had routinely received spiritual training. Never I _ I _ I _ I _ I _ I _ Always
8. Had one or more parents place top priority on job/not family. Never I _ I _ I _ I _ I _ I _ Always
9. Had parents who openly disregarded "minor" laws. Never I _ I _ I _ I _ I _ I _ Always
10. Had parents who quickly corrected your mistakes. Never I _ I _ I _ I _ I _ I _ Always
11. Had family members who went to the medicine chest for relief. Never I _ I _ I _ I _ I _ I _ Always
12. Had someone pick up after you. Never I _ I _ I _ I _ I _ I _ Always
13. Had someone make decisions for you. Never I _ I _ I _ I _ I _ I _ Always
14. Had someone shield you from frustration & discouragement. Never I _ I _ I _ I _ I _ I _ Always

PARENT/CHILD/FAMILY QUESTIONNAIRE II

Thomas S. Parish, Ph.D.

Upper Iowa University

Kindly describe your family's interactions on the scale below:

1. Do you eat together as a family? Never I__I__I__I__I__I__I__I Always
2. Are family activities regularly scheduled? Never I__I__I__I__I__I__I__I Always
3. Do parents (i.e., you) talk with children, rather than to them? Never I__I__I__I__I__I__I__I Always
4. Do parent(s) (i.e., you) drink alcohol? Never I__I__I__I__I__I__I__I Always
5. Do parent(s) (i.e., you) smoke? Never I__I__I__I__I__I__I__I Always
6. Do parent(s) (i.e., you) warn children about alcohol and smoking? Never I__I__I__I__I__I__I__I Always
7. Do children received spiritual training? Never I__I__I__I__I__I__I__I Always
8. Do parent(s) (i.e., you) place top priority on job/not family? Never I__I__I__I__I__I__I__I Always
9. Do parent(s) (i.e., you) disregard "minor" laws? Never I__I__I__I__I__I__I__I Always
10. Do parent(s) (i.e., you) quickly correct children's mistakes? Never I__I__I__I__I__I__I__I Always
11. Do family members go to the medicine chest for relief? Never I__I__I__I__I__I__I__I Always
12. Do parent(s) (i.e., you) pick up after your children? Never I__I__I__I__I__I__I__I Always
13. Do parent(s) (i.e., you) make decisions for your children? Never I__I__I__I__I__I__I__I Always
14. Do parent(s) (i.e., you) shield your children from frustration? Never I__I__I__I__I__I__I__I Always

The “How I See Myself Scale”

Name: _____

Place an **“A”** on the following continua regarding where you are right now . . .

Place an **“B”** on the following continua regarding where you would like to be in ten years . . .

Polite	°	Impolite
Gentle	°	Rude
Thoughtful	°	Thoughtless
Humble	°	Prideful
Kind	°	Unkind
Obedient	°	Disobedient
Reverent	°	Irreverent
Listens to Guidance	°	Fails to Listen to Guidance
Seeks to CTR	°	Fails to CTR
Serves Others	°	Serves Self

The Student Rating Scale

Kindly rate _____ on the following rating scale.

Note: a rank of 1 = NEVER, while a rank of 5 = ALWAYS.

Thank you for your participation in this study. It's appreciated!

SELF-CONFIDENT |__1__|__2__|__3__|__4__|__5__|

TRUSTWORTHY |__1__|__2__|__3__|__4__|__5__|

UNDERSTANDING |__1__|__2__|__3__|__4__|__5__|

DILIGENT |__1__|__2__|__3__|__4__|__5__|

EAGER |__1__|__2__|__3__|__4__|__5__|

NICE (as in you strive to be __) |__1__|__2__|__3__|__4__|__5__|

TACTFUL |__1__|__2__|__3__|__4__|__5__|

The Leadership Rating Scale

Kindly rate yourself on the following scale. Note: a rank of 1 = Not at all or Never, while a rank of 5 = Always. Thank you for your participation in this study. It's greatly appreciated.

Likable	I_1_I_2_I_3_I_4_I_5_I
Enthusiastic	I_1_I_2_I_3_I_4_I_5_I
Able-Minded	I_1_I_2_I_3_I_4_I_5_I
Diligent	I_1_I_2_I_3_I_4_I_5_I
Eager	I_1_I_2_I_3_I_4_I_5_I
Reliable	I_1_I_2_I_3_I_4_I_5_I
Sincere	I_1_I_2_I_3_I_4_I_5_I
Humane	I_1_I_2_I_3_I_4_I_5_I
Innovative	I_1_I_2_I_3_I_4_I_5_I
Patient	I_1_I_2_I_3_I_4_I_5_I

THE “RIGHT STUFF” SCALE

Thomas S. Parish, Ph.D.

On the following continua, how would you generally describe _____.

“RIGHT STUFF”

“WRONG STUFF”

Always focused	_ _ _ _	Never focused
Always goal-oriented	_ _ _ _	Never goal-oriented
Always planning	_ _ _ _	Never planning
Always committed	_ _ _ _	Never committed
Always enthusiastic	_ _ _ _	Never enthusiastic
Always confident	_ _ _ _	Never confident
Always respectful	_ _ _ _	Never respectful
Always honest	_ _ _ _	Never honest
Always considerate	_ _ _ _	Never considerate
Always patient	_ _ _ _	Never patient
Always optimistic	_ _ _ _	Never optimistic
Always willing to try	_ _ _ _	Never willing to try

Questions That Can Enhance Our "Social Intelligence"

Thomas S. Parish, Ph.D.

- 1. What can you do today to help to like himself/herself?**
 - 2. What can you do today to become more valiant in your interactions with others?**
 - 3. What can you do today to demonstrate to that you truly care for him/her?**
 - 4. What can you do today to be more empathetic in your interactions with others?**
 - 5. What can you do today to avoid creating disharmony and/or stress?**
 - 6. What can you do today to show that you genuinely wish to help him/her?**
 - 7. What can you do today to help to succeed?**
 - 8. What can you do today to make feel more welcome in your presence?**
 - 9. What can you do today to make a difference in 's life?**
 - 10. What can you do today to improve 's communications with you?**
- 1-10. At the end of the day please take note regarding how many of these items you actually managed to fulfill!**

Remember, we may not ever reach perfection, but trying to become more perfect is easily attained by all of us, if we always make an honest effort every day to do things the best that we possibly can!

Bottom line: We need to always look for positive alternatives in all that we think, say, and do, and then be absolutely sure that we always follow through!

STUDENT BEHAVIOR SURVEY for TEACHERS

Thomas S. Parish and Joycelyn G. Parish

Student's name: _____

Please rate this student's performance by filling out the appropriate bubble.

1. This student treats teachers with respect at this school.

Never |__|__|__|__|__| Always

2. While at this school, this student seems to be very happy.

Never |__|__|__|__|__| Always

3. At this school, this student does his or her best to learn the things presented in class.

Never |__|__|__|__|__| Always

4. This student works cooperatively with other students at this school.

Never |__|__|__|__|__| Always

5. This student treats other students at this school in a caring and respectful manner.

Never |__|__|__|__|__| Always

TEACHER CONNECTEDNESS SURVEY

Thomas S. Parish & Joycelyn G. Parish

1. Did you show _____ that you care for her/him? Never |__|__|__|__|__| Always
2. Did you appreciate the good work done by _____? Never |__|__|__|__|__| Always
3. Did you give _____ choices rather than ultimatums? Never |__|__|__|__|__| Always
4. Did you help _____ to like herself/himself? Never |__|__|__|__|__| Always
5. Did you strive to help _____ succeed? Never |__|__|__|__|__| Always
6. Did you present material that was compatible with
_____’s learning style? Never |__|__|__|__|__| Always
7. Did you strive to be fair and helpful to _____? Never |__|__|__|__|__| Always
8. Did you make a special effort to involve _____’s
family members in her/his education? Never |__|__|__|__|__| Always
9. Did you seek to provide _____ with a safe, nurturing
and supportive environment for her/him? Never |__|__|__|__|__| Always
10. Did you encourage _____’s involvement in
school-related activities and organizations? Never |__|__|__|__|__| Always
11. Did you demonstrate to _____ a positive attitude
about being a teacher? Never |__|__|__|__|__| Always
12. Do you experience the “joy of teaching” even when
placed in challenging situations? Never |__|__|__|__|__| Always

STUDENT BEHAVIOR SURVEY for STUDENTS

Thomas S. Parish and Joycelyn G. Parish

Student's name: _____

Please rate this student's performance by filling out the appropriate bubble.

1. This student treats teachers with respect at this school.

Never |__|__|__|__|__| Always

2. While at this school, this student seems to be very happy.

Never |__|__|__|__|__| Always

3. At this school, this student does his or her best to learn the things presented in class.

Never |__|__|__|__|__| Always

4. This student works cooperatively with other students at this school.

Never |__|__|__|__|__| Always

5. This student treats other students at this school in a caring and respectful manner.

Never |__|__|__|__|__| Always

Kindly rate the following people/items by circling the appropriate number:

Awful **Terrific**

0 1 2 3 4 5

Awful						Terrific
0	1	2	3	4	5	

Regarding My Classmates:

1. Students of different backgrounds enjoy working and doing things together at this school.
Never 1 2 3 4 5 Always
2. At this school my classmates seem to care about me.
Never 1 2 3 4 5 Always
3. There is a feeling of cooperation among students at this school.
Never 1 2 3 4 5 Always

Regarding My School:

1. This school offers courses and programs that I find interesting.
Never 1 2 3 4 5 Always
2. I generally find this school to be a safe and friendly place to learn.
Never 1 2 3 4 5 Always
3. I enjoy my involvement in school activities and organizations at this school.
Never 1 2 3 4 5 Always
4. Teachers and staff members make special efforts to keep my family involved in my education.
Never 1 2 3 4 5 Always

Regarding School Office Staff:

1. School office staff members are responsive to my needs.
Never 1 2 3 4 5 Always
2. The office staff at this school promote positive student behaviors and attitudes in a caring manner.
Never 1 2 3 4 5 Always
3. School office staff members at this school display respect for me.
Never 1 2 3 4 5 Always

4. The office staff members at this school are concerned about my progress.
Never 1 2 3 4 5 Always

Regarding Teachers:

1. My teachers recognize and appreciate the good work that I do.
Never 1 2 3 4 5 Always
2. My teachers give me choices rather than telling me what to do.
Never 1 2 3 4 5 Always
3. My teachers care about me and are concerned for my welfare.
Never 1 2 3 4 5 Always
4. My teachers help me to succeed.
Never 1 2 3 4 5 Always
5. My teachers are highly competent and knowledgeable in their subject areas.
Never 1 2 3 4 5 Always

Regarding Me:

1. I treat my teachers with respect at this school.
Never 1 2 3 4 5 Always
2. While at this school I am very happy and feel good about myself.
Never 1 2 3 4 5 Always
3. At this school I do my best to learn about things I need to know to prepare for my future.
Never 1 2 3 4 5 Always
4. I work cooperatively with other students at this school.
Never 1 2 3 4 5 Always
5. I treat other students at this school in a caring and respectful manner.
Never 1 2 3 4 5 Always

PARENT SURVEY

C14



1. Do you show _____ that you care about him/her?

Never 1 2 3 4 5 Always

2. Do you appreciate and recognize the good work done by _____?

Never 1 2 3 4 5 Always

3. Do you give _____ choices rather than ultimatums?

Never 1 2 3 4 5 Always

4. Do you help _____ to like himself/herself?

Never 1 2 3 4 5 Always

5. Do you provide opportunities for _____ to succeed?

Never 1 2 3 4 5 Always

6. Do you take into account _____'s special qualities as an individual?

Never 1 2 3 4 5 Always

7. Do you strive to be fair, courteous and helpful?

Never 1 2 3 4 5 Always

8. Do you make a special effort to involve _____ in family activities?

Never 1 2 3 4 5 Always

9. Do you seek to provide _____ with a safe, nurturing and supportive home environment?

Never 1 2 3 4 5 Always

10. Do you encourage _____'s involvement wholesome activities?

Never 1 2 3 4 5 Always

11. Do you demonstrate to _____ a positive attitude about being a parent?

Never 1 2 3 4 5 Always

12. Do you experience the "joy of parenting" even when placed in challenging situations?

Never 1 2 3 4 5 Always

The Fears and Phobias Scale

Thomas S. Parish and Ashley Gates

Upper Iowa University

Listed below are various types of fears that people may manifest. Kindly rate yourself on the scale beside each of them (by placing an X in the appropriate space), ranging from 1 (NEVER) to 5 (ALWAYS) regarding how often you might experience that particular type of fear.

<u>DESCRIPTOR</u>	<u>FOCUS OF FEAR</u>	
Ailurophobia	Cats	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Arachnophobia	Spiders	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Cynophobia	Dogs	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Entomophobia	Insects	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Musophobia	Mice	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Brontophobia	Thunder	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Frigophobia	Cold	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Nephophobia	Clouds	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Phonophobia	Loud noises	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Photophobia	Light	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Belonophobia	Pins/Needles	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Hemophobia	Blood	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Odynophobia	Pain	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Parasitophobia	Parasites	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Poinophobia	Punishment	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Cainophobia	Novelty	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Claustrophobia	Closed spaces	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Ochlophobia	Crowds	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Scotophobia	Being looked at	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Gephyrophobia	Crossing bridges	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Catoptrophobia	Mirrors	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Kakorrhaphiophobia	Failure	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Logophobia	Words	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always
Triskaidekaphobia	Number 13	Never <u>1</u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u> </u> I <u>5</u> Always

HOW WELL DO YOU JUGGLE SCALE

Thomas S. Parish and Brenda Beckman

Upper Iowa University

Please estimate how much of a problem each of the following factors seem to be for YOU by placing an X in the appropriate space below:

MONEY	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
SIGNIFICANT												
OTHER	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
CHILDREN	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
SCHOOL	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
EXTRA CUR.												
ACTIVITIES	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
WORK	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
FAMILY	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
HEALTH	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
SLEEP	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
EATING	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
SOCIAL-												
IZING	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
RELAXATION												
TIME	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM
RELIGION	NO PROBLEM	I	1	2	3	4	5	6	7	8	9	BIG PROBLEM

Kindly estimate how well you believe you handle each of these potential stressors in your life by placing an X in the appropriate space below:

MONEY	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
SIGNIFICANT												
OTHER	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
CHILDREN	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
SCHOOL	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
EXTRACUR.												
ACTIVITIES	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
WORK	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
FAMILY	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
HEALTH	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
SLEEP	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
EATING	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
SOCIAL-												
IZING	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
RELAXATION												
TIME	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL
RELIGION	VERY POORLY	I	1	2	3	4	5	6	7	8	9	VERY WELL

Kindly indicate your gender: Male ___ Female ___ Your GPA: ___

Kindly indicate if you are an ... On-campus student ___ Off-campus student ___

THE FRIENDSHIP SCALE

Thomas S. Parish and Derek Turner
Upper Iowa University

1. Do you accept others for who they really are, and/or who they want to be?

Never I _ I _ I _ I _ I _ I Always

2. Do you believe in others, and see them the way they wish to be seen?

Never I _ I _ I _ I _ I _ I Always

3. Do you encourage people when other shrug, 'cause you feel they really need a great big hug?

Never I _ I _ I _ I _ I _ I Always

4. Do you try to go the extra mile for others, and then ten more after that?

Never I _ I _ I _ I _ I _ I Always

5. Do you ignore others' negative remarks, and look for the good in others instead?

Never I _ I _ I _ I _ I _ I Always

6. Do you openly tell others about the good things people do, and never complain like others might do?

Never I _ I _ I _ I _ I _ I Always

7. Are you pleased by what others might do that show they really care for you?

Never I _ I _ I _ I _ I _ I Always

8. Do you quickly seek to determine others' needs, and then do what you can to help them with lightning speed?

Never I _ I _ I _ I _ I _ I Always

9. Do you seek to understand others' wants, needs, and fears, particularly as they try to smile through their fretful tears?

Never I _ I _ I _ I _ I _ I Always

10. Do you try to welcome others with a great big smile, and always convey to them that they have "real style"?

Never I _ I _ I _ I _ I _ I Always

Table 1

RATE OTHERS/RATE YOURSELF

A. SURVIVAL	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
B. LOVE	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
C. POWER	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
D. FREEDOM	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
E. FUN	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High

A. SURVIVAL	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
B. LOVE	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
C. POWER	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
D. FREEDOM	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
E. FUN	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High

A. SURVIVAL	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
B. LOVE	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
C. POWER	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
D. FREEDOM	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High
E. FUN	Low I__1__ I__2__ I__3__ I__4__ I__5__ I High

“How Do You Feel About What You Do” Scale

Thomas S. Parish and Gary Rehbein

Upper Iowa University

1. Are you committed to doing your work?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

2. Do you think of your work as a reflection of yourself?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

3. Would you proudly display your work before others?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

4. Do you think that what you do should be important to you?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

5. Do you like to decide what to do on your own?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

6. Do you resent being told what to do by others?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

7. Do you like being told what to do by someone who is less competent than you?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

8. Does your boss's words inspire you to do better work?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

9. Do you really hate having someone stand over you, tell you what you need to do?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

10. Do you like being told what to do, rather than have to make individual decisions?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

11. Do you resent others' intrusions upon you when you're working hard on something?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

12. Do you find great satisfaction from doing your work?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

13. Do you enjoy being part of the team, to the point that you think of them first?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

14. If you worked with close friends, would you subsequently produce better?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

15. Do you gain joy through what you do?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

16. Do you resent it when you are compared unfavorably to others?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

17. Do you like it when others come to you for tips on what to do?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

18. Do you like being told what to do?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

19. Is money or recognition the key to enhancing your productivity?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

20. Do you wish to be given a job, and then to be left alone to do it?

Strongly disagree I ___ I ___ I ___ I ___ I Strongly agree

WHERE ARE WE GOING?

Robert E. Wubbolding, EdD, LPCC, BCC

Abstract

Now that the world has dealt successfully with the need for survival and self-preservation, the Institute is beginning to regain its footing. Whether it survives and flourishes will depend on how it collectively answers several important questions. These are enumerated in this article. One significant question focuses on appropriate or inappropriate changes and extensions of Glasser's contributions to mental health. In other words, as we drive our institutional car into the future, are we able to maintain a clear vision of the future while also focusing on our rearview mirror?

A question the GIFCT will need to answer in the future is, "Where is our current Institutional behavior taking us? In fact, it is a question that we have always discussed. In the past the organization has followed the direction of William Glasser, MD, the charismatic, innovative and intellectual leader of the Institute he founded in 1968.

There are many questions that we will need to answer. One of them is how can we preserve Glasser's legacy and simultaneously extend it? Even a cursory review of his books reveals how he continually extended and changed his ideas. He even totally discarded some of them such as his famous "10 Steps of Discipline" which was widely accepted by classroom teachers, but which he himself rejected in the 1990's. (1965, 1968, 1972, 1981, 1984, 1992, and 1998).

The question is "how can the Institute remain faithful to the teachings of this great man and also remain faithful to his other legacy? i.e., altering and extending his ideas (Wubbolding, 2017, 2019). Among the topics to be discussed by the institute members at large, not merely committees or advisory boards are:

1. Can we add to the list of needs? Is there a need for purpose and meaning? For faith or belief in something outside of us? Are these motivators also genetic instructions?
2. With the advances in the study of trauma and its effects (e.g., PTSD's), do we need to redefine the nature of "current" behavior?
3. What is the relationship between the principles of choice theory/reality therapy and diagnosis as represented in the *Diagnostic and Statistical Manual of Mental Disorders*? After all, Dr. Glasser often referred to this source as "a big book of bad words." Therefore, is this relationship really compatible or incompatible?
4. Why (*really*) is the Institute low on cash?
5. How can we better involve the membership in promoting our training programs?

In 2009, I spoke to the Institute International Conference with the question: "In 20 years 2029, will we be known as a headline or a footnote? Will we be mainstream or backwaters?" Seven years from now the question remains. "Will we be a headline or a footnote? Mainstream or backwaters?"

Please send me your comments. I would like to publish them in a future article.

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THE CHOICE THEORY JOURNEY NEVER ENDS!

Brian Patterson, M Ed, Psy M, LSSBB, CTRTC

Executive Director, Glasser Institute for Choice Theory- US

As a high school teacher and coach, I had great reviews from students, parents, and administration. My students had usually seemed happy and successful. A basketball team I coached even went to the state finals for small schools. I stepped away from education to work for a nonprofit and after three years, it folded due to lack of funding.

As I pursued a new job, it was back to education. A local charter school for at-risk high school students had a part-time opening in the night session, so I took it. I soon realized that my skills as an educator with mostly compliant students was inadequate. I was frustrated and angry at the end of every session. It seemed that I was the one who was at-risk, especially my ego.

I looked at the classified ads in the newspaper, seeking other employment where I wouldn't feel like a failure. I did this every night for a couple of weeks. Then, I stopped. Even though I felt totally ineffective, I began to love these kids, I asked myself, "If I can't help them, who will?" That was the beginning of my new and fantastic journey.

Since I had taken the job in December, I had not been given the full training that others received at the beginning of the school year. I requested the training materials and began to study them immediately. The history of this Arizona charter school had started as an alternative school in North Chicago, Illinois in 1976. Mr. James Boyle, a school principal, had begun an alternative program to reach the large percentage of students who had dropped out or had been expelled from the school district. He had been greatly influenced by the work of Dr. William Glasser and his writings. For over 25 years, these alternative schools had expanded into 22 states, using individualized instruction and the Quality Schools approach as taught by Dr. Glasser.

In the training materials was a poorly copied chapter from a book, *Schools without Failure* by Dr. William Glasser. Written in 1969. The chapter was Chapter Two, and I read:

"Students are responsible for fulfilling their needs, they are responsible for their behavior, they are not mentally ill but are making bad choices when their behavior is deviant; nevertheless, they can't make better choices, unless they are strongly and emotionally involved with those who can. In education, involvement starts with one teacher, or a counselor, or an administrator...To become involved we must understand that although a child has failed in the past, he can succeed in the present if the necessary teacher-pupil involvement concerns the problems of the present. A failing child will continue to fail if the teachers who work with him remind him of his failure." (Glasser, 1965, pp. 21-22)

I decided then that I would be that teacher. I read as many Glasser books as I could find. As the second semester began, I was moved to full-time status. That was when the application of what I was learning was applied-and it worked! I read Choice Theory by Dr. Glasser (1998), plus I developed more skills and greater understanding. The environment in our learning center began to change. It became a more joyful place. Unfortunately, however, the center director was not on board. Her choice theory was, "It's my way or the highway." I began to make in-roads with the students, and they taught me a great deal about how this relationship could work. Along with Dr. Glasser's writings, I gained

knowledge about questioning techniques from the TV detective, Columbo, and about psychological behavior from The Dog Whisperer.

In the summer, I found out that there was a Basic Intensive Week being offered in nearby Tempe, Arizona. Bob Hoglund, senior faculty member with William Glasser Institute, was facilitating it. Participating in the first day of basic with Bob, the time flew by. As I drove home, I said aloud, "This is it! This is what I have been looking for." I thoroughly enjoyed the knowledge I gained from Bob. I planned on using everything in the upcoming school year and immediately signed up for the Basic Practicum.

The next school year was a series of improvements in relationship-building and student success. After that year, while continuing to study Glasser and buying every related book, our Arizona Operations Manager asked me if I would like to serve as the Director of one of our other learning centers. I jumped at the chance to create a Quality School environment for these 'at-risk' students. They were the children who had been left behind. A 17-year-old would often arrive for an intake with his parole officer and a parent. When tested, these students would often score at a 3rd grade reading level and a 4th grade math level. They would have normally been a junior, but they would only have 3- 5 credits. They had until age 22 to complete their credits. We usually would have them at grade level and graduating on-time, or be a semester late. This was all due to the creation of a warm, inviting environment.

The students understood the concepts more quickly than most teachers. They thrived in a non-coercive, nonjudgmental, no-excuses environment. They took the personal responsibility concept as what they had been looking for in school. School, as they had known it previously, returned to their Quality World. They would often discuss their current decision-making process using Glasser's Chart. Most teachers enjoyed adapting to the new style of relationship as mentor and paraclete (one who walks beside). During this time, I completed a Master's in Education with Emphasis in Quality Schools though Graceland University. The papers were easy to write because I was seeing the incredible value of Choice Theory every day. Every writing prompt could be addressed with Glasser concepts. I also completed my Glasser Advanced Intensive Week and Practicum Experience with Bruce Allen and Bob Hoglund.

The data from those days in the learning center were astounding. From students who had not seen the reason for school and had never been successful, absenteeism was suddenly minimized. Attendance was at 92%. In four years, as I directed that learning center, we had one fight and one incident of graffiti. At-risk high school students in Arizona had a graduation rate of 47%. Ours was 95%. We had room in two sessions per day for 80-90 students. We were almost always at-capacity, and we also had a waiting list of another 80 potential students. We moved to a larger space to accommodate 50% more students and added a night session, and we still had more students on the waiting list. Kids who had been told by teachers elsewhere that they were losers and would never graduate were going to college and trade schools. Several started their own successful businesses.

After 4 years there, the company asked me to teach these concepts to other staff and directors in 22 states as the National Director of Leadership and Student Engagement. I jumped at the chance! I crisscrossed the country doing workshops, sometimes in three different states in a week. I had finished my Glasser Certification with John Brickell and continued toward Faculty status. At the Glasser Conference in Nashville, I was proud to tell Dr. Glasser that we had gotten Carleen Glasser's Classroom Meetings tools into 120 learning

centers. We also used Wubbolding & Brickell's *Getting Yourself Together* and Dr. Glasser's *Choice Theory* in every learning center, which served 15,000 students. I trained staff in the use of these tools because they had been so pivotal in our learning center's positive environment.

Often, in the 4 years I was traveling, I was only given a few hours or a day, at most, to teach these concepts. I found that frustrating because mental paradigm shifts do not occur that quickly. There were always some adults who were ready to implement these concepts and they were also quite successful in creating opportunities for students to turn their own lives around.

Then, the company shifted its focus more toward Positive Behavioral Interventions and Support programs due to acquiring an autism-focused system of schools. Applied Behavior Analysis seemed to management as the superior approach. I think that external control psychology is seductive to leaders who want to see quick results. They don't realize that long-term gains are the result of connecting with students who are intrinsically motivated.

I was soon looking for another job. I found it at the Arizona Department of Economic Security in the Leadership Development Program. As one of three specialists, I was tasked with creating and delivering courseware for 1500 leaders, leading 8000 employees, who serve 2.9 million Arizonans every year, often during the worst days of their lives.

As I had been studying group psychology and leadership, I thought about that first Glasser quote I had read and applied it to work instead of school. What if it read this way: "Workers are responsible for fulfilling their needs, they are responsible for their behavior, they are not mentally ill but are making bad choices when their behavior is deviant; nevertheless, they can't make better choices, unless they are strongly and emotionally involved with those who can. In the workplace, involvement starts with one supervisor, one leader, or one administrator...to become involved we must understand that although a worker has failed in the past, he can succeed in the present, but only if the necessary leader-worker involvement concerns the problems of the present. A failing worker will continue to fail if the leaders who work with him remind him of his failure." (Glasser, 1965, pp.21-22, adapted).

I created Bridging the Communication Gap, which has activities and concepts teaching Choice Theory and Reality Therapy tools to leaders as they learn to understand the Quality and Perceived Worlds for themselves and their team members. Many leaders still have a WDEP poster (Robert Wubbolding's adaptation of Glasser's steps for Reality Therapy) in their office or cubicle that leads them through significant conversations with employees. I also created Critical Thinking and Decision Making and Coaching Leadership, which both are based in Glasser's teachings. I was able to finish a Master's in Psychology and the Lean Six Sigma Black Belt through Villanova University during that time and used my Glasser training to shape my writings throughout. In Lean Six Sigma, I encountered W. Edwards Deming and remembered that he had inspired Dr. Glasser in the concept of Quality. I felt like I had found an old friend.

I left the Department of Economic Security for a Leadership Development job with Goodwill of Central and Northern Arizona and was able to design two classes there that incorporated many of Glasser's concepts. In fact, the manager who hired me was specifically looking for me to use my knowledge for that application. After only a year there, the pandemic panic hit the industry and my world was rocked. I was laid off for the first time in my life. I was

afraid that, at my age, no one would hire me again. The marketplace was uncertain, and I didn't know where to turn.

I internalized my struggle and disappointment. I suddenly had incredible lower back pain. (The physiological back wheel of the Total Behavior Car?) My wife had to help me in and out of bed, I was walking with a cane, and I thought my life was essentially over. I thought that I, as a Glasser aficionado, should handle this better. All that I had learned about choosing my direction in the face of difficult odds was tested. I cried and moaned a lot. My doctor couldn't do anything. The lockdowns severely limited activity.

I asked myself, 'What do you really, really want?' I took a while to answer that question. I finally determined that I still wanted to work and be significant. I could not give up. Our motto at our learning center, adapted from Glasser, was: "Never give up. No punishment. No failure. No excuses." So, I wrote a book: *Connect & Lead: Choice Theory Leadership at Work*. I redoubled my efforts at applying and interviewing for jobs on Zoom. I got a job, again with the State of Arizona.

Then I asked myself, "What are you doing about it?" Groaning, and pitying myself mostly. "How is that working for you?" It's not working at all for me or my wife! "What is your plan?" I knew that I had to find physical help and get back to work! An incredible chiropractor helped me return to full-strength. Finding new ways to share my knowledge with others through interviews and podcasts lifted my spirits. I also reread Viktor Frankl's *Man's Search for Meaning*.

The Department of Economic Security needed my expertise in teaching Lean Six Sigma and Leadership classes because no one else but me had the unique combination of experience and knowledge that they needed. As I now teach the Lean/Six Sigma classes, I related many quotes from W. Edwards Deming who was the Quality guru who established the base upon which I now lean. The leaders I facilitate training for also hear much of Glasser's concepts and quotes.

Currently, I also serve as the Executive Director of the Glasser Institute for Choice Theory-US. In this capacity, I always strive to show reverent honor for the power of Glasser's concepts-not only to teach the world . . . but to change the world too! We have the tools to change, at least our part of the world, into a noncoercive, nonjudgmental place. Teaching the world Choice Theory, however, doesn't only happen in a Basic Week Intensive Training experience. So, we must expand our vision of how to teach CT/RT in different ways. Because the person, whose concepts we teach, is gone, we can no longer be a person-centered organization. We can, however, remain true to his concepts and become a purpose-centered organization. There are many little Choice theory sparks around. It's time to simply fan these sparks into a flame, unite as one, forgiving any slights and hurts, and move forward to make the world a more need-satisfying place.

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Brief Bio (of sorts)—

“To laugh often and much; to win the respect of the intelligent people and the affection of children; to earn the appreciation of honest critics and endure the betrayal of false friends; to appreciate beauty; to find the beauty in others; to leave the world a bit better whether by a healthy child, a garden patch, or a redeemed social condition; to know that one life has breathed easier because you lived here. This is to have succeeded.”

IS ADDICTION A CHOICE? –

Michael Rice, LISAC, CTRTC

I'm often asked, "If we choose all that we do, then why do people choose to be alcoholics?" I am asked this question often by those wishing to challenge the concept that we choose our behaviors. Is alcoholism a choice? Before I respond to that question, we need to look at why people drink alcohol in the first place.

Over the last 25 years, eighty per cent of my clients have been substance abusers or compulsive drinkers/users. I've had a passing fancy with it myself. You can say it is my specialty as I have worked with thousands of alcohol and drug abusers and addicts over the years. The average person has their first drink of alcohol around the age of 15. The first time you had an alcoholic drink, you might recall that it did not taste good at all. What it did do, however, was create a feeling of euphoria. It could be said that your first drink was a sensation more than it was a taste.

From the sensation came the desire to experience the sensation again, regardless of the taste. In simple terms, you liked the way it made you feel. If it didn't do that, you couldn't give it away. The more the sensation was desired, the more one is able to acquire a taste for it. In other words, we become accustomed to the taste for the sake of the sensation. You liked how you felt, and you became indifferent about how others thought of you, or what image you felt you had to project to others. Your inhibitions lowered so much that you began to feel relaxed, worry-free, and perhaps experienced some feelings of elation.

Current emotions would become exaggerated. You felt pleasure which you confused for happiness. You were in the midst of others who were experiencing the same things along with you. Everyone saw each other as pleasing, fun, and acceptable. You probably laughed more and talked more. If an introvert, you became an extrovert. If worried, you felt apathetic toward whatever was bothering you. If weak you became fearless. You came out and said things that you would normally keep bottled up inside and now was easing all of your tension and stress. You had found a magic elixir that released you from all of those things that were consuming your unpleasant thoughts and unhappiness.

Not everyone who consumes alcohol has this awareness, acquires a taste, or has a fondness for the potion. There are those who feel they don't like to lose control of their thoughts and behaviors. If they drink at all, it would be sparingly and in social situations only. They may even opt for some other beverage rather than alcohol. The same applies for those who use drugs. There are also those who may have a glass of wine occasionally when dining out. They generally won't have more than one or 2 glasses of wine and then stop. There are also those who may wish to have a drink when they come home from work . . . to "relax" or "unwind." Again . . . they are drinking for the effect more than for the taste.

So why do people drink? For the effect. They like how it makes them feel. Is there anyone who has not heard or is not aware of the fact that alcohol is an addictive substance? If you are aware that what you are consuming is addictive and yet you continue to consume it anyway . . . is that not a choice?

In Choice Theory, we know that the four components of Total Behavior are Thinking, Feeling, Physiology, and Acting. Of those four components, we have direct control of only two of them: Thinking and Acting. But there is always an exception to the rule. There are two things that DO have a direct effect on one's emotions and physiology: Alcohol and drugs, including prescription drugs. There are very few prescription drugs that cure any of the major illnesses from which people suffer. A great many of our prescription drugs, at best, only mask symptoms by drugging the brain or keep the condition in-check without a cure. Illegal drugs and alcohol can do much of the same thing and one doesn't generally have to wait very long for them to take effect.

I don't know of anyone who has said, "I think I'll become addicted to alcohol (or meth, cocaine, heroin, cannabis, etc.). All addicts/alcoholics have several things in common. One of those commonalities is how they became addicts/alcoholics in the first place. They discovered that they got pleasure from drinking and using as well as it being a cure, albeit temporary, for those things that are pressing on their mind. They are actually anesthetizing their brain and numbing all of their unwanted emotions.

To seek the pleasant to satisfy the unpleasant is a natural human behavior. We go from minute-to-minute, from day-to-day choosing behaviors that are purposefully designed to create happiness or pleasure. If cold, we turn up the thermostat or add clothing. If too hot, we turn the thermostat down or dress more lightly. If we have an upset stomach, there are antacids to ease the discomfort. If we get caught in the rain, we seek shelter. If hungry, we eat. If thirsty, we drink. The actions we take to satisfy these unpleasant situations are all choices. Alcohol and drugs provide relief from other displeasures such as conflict with spouses, relationships, jobs, kids, debt, grief, anger, disappointments, tension, anxiety, and sadness.

While being fully aware that drugs and alcohol are addictive substances, the false belief that one is in control of his/her use is why they become addicted. They believe they will be able to recognize if and when their use becomes a problem. The addiction will always be recognized by others long before the alcoholic or addict ever sees it. Once the cellular structure of one's brain, organs, and muscles, have been altered due to regular and continued use, the body can no longer function without the substance without going through physical and emotional discomfort. This condition is more commonly recognized as withdrawal symptoms.

Withdrawal symptoms can be very severe and are always unpleasant. They can even lead to death. After any period of deprivation, when the cells do not receive their alcohol/drugs, they sort of revolt and readjust causing some physical complications and emotional distress. So, if we can control our temperature discomfort, our hunger/thirst discomfort, and our need for shelter, we can also control our withdrawal symptoms by giving the cells that which they are

accustomed that will end the suffering . . . drugs and alcohol. Ironically, the substance that is the cause of the suffering is what is being relied upon to end the suffering.

The most insidious aspect of addiction is that the addict/alcoholic is totally unaware that they are addicted even when everyone else around them can see it. This phenomenon is known in the psychiatric world as “anosognosia.” Both the physical body and the socio-psychological part of the brain have become dependent on the substance. When an unhappy person is faced with the reality that they don’t have the things they want in life that provide them with happiness; adding the idea that they are out-of-control and addicted will only add fuel to their unhappiness. When all their present known abilities to satisfy their unhappiness has failed, they have learned that drugs and alcohol will always make them feel better, if only on a temporary basis. Therefore, they have to continue to drink or use in order to feel better. By not drinking or using, they would feel much worse. On top of that, they know no other way to ease their frustration. It would be too painful, emotionally and physically, for them to stop drinking or using.

So is their addiction a choice? Yes! However, it is an indirect choice. One first becomes reliant on drinking/using to satisfy social needs and interacting with others is a spirit of happiness. . . a social addiction. About the same time, one learns that drugs/alcohol is a quick fix to overcome unwanted emotions from unwanted situations. This is a psychological addiction. The perception of their use at this time is not one of “addiction.” Rather, it is one of “relief.” The next stage is when one crosses over the line into cellular adaptation as a result of regular or consistent use of the substance. The cellular structure of anybody eventually adjusts to the regular presence of the substance. The addict/alcoholic gets blindsided and therefore doesn’t see it coming. They are now physically addicted and still refuse to believe it.

The overall dependency is now so strong that they refuse to believe they are out-of-control. They believe that they actually need it in order to survive and/or feel “normal.” And when they eventually do realize they are addicted, they are still defiant against sobriety because they don’t possess the means to deal with their unhappiness without it. They have tried everything else that they know in order to find happiness so they are not aware of anything else they can do besides rely on their drug of choice. They know they can rely on their drugs or alcohol, and it has practically instant results. Most likely, nothing else will work as quickly. If given a choice between instant gratification versus 5 days of detoxification and 90 or more days of rehab and months or years of learning new ways to deal with life on life’s terms . . . which one do you think they will actually choose?

If someone has to put something into their body in order to feel happy, they are only temporarily masking their unhappiness and their life is still out-of-control. They have not learned how to find happiness by breathing pure air. There is no happiness pill. There are only brain and emotional numbing drugs to mask unhappiness.

It is often said that an addict or alcoholic must hit bottom before they make an effort to get clean and sober. Unfortunately, many alcoholic/addicts die before they ever reach "rock bottom." The onset of using alcohol or drugs is a choice. Crossing the line to biochemical addiction is not a choice but the result of their choices and not recognized by the drinker/user until they reach full-blown addiction (if ever).

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THE STORY OF THE GLASSER QUALITY SCHOOL AND HOW IT WAS INSTALLED AT SAINT PATRICK'S CATHOLIC SCHOOL IN NORFOLK, VIRGINIA

As told by Steve Hammond, and as transcribed by Bette Blance

Steve Hammond is the founding principal of St Patrick Catholic School, Norfolk, Virginia, in the US, which has been a Glasser Quality School for 15 years. He spoke to the Glasser Quality School sub-committee of William Glasser International on 11th February 2022

It is a pleasure to be here. I always feel a very special kinship when I am among colleagues that embrace Choice Theory, Reality Therapy and the Glasser Quality School. We are all people of peace. We want peace in the world, and we want people to have happiness and peace. It's just a pleasure to catch the energy and ride on it, so thank you for allowing me to be here with you.

I first read about William Glasser in 1969 or 1970. This is where the story starts. I was a freshman in college. I was there on a wrestling scholarship, and I was in the bookstore. I looked down and there was a book. It said, "Schools Without Failure." And I thought that is the most absurd thing I have ever heard in my life. It was so absurd that I got the book and I read it. Not that I had any intention of going into education, I was truly going into medicine. That is where my vision was. But I read this book and because of it I went against everything that my childhood, my parents, coming from the Deep South had shared with me, that I had experienced, I had a mother that whenever we misbehaved, she says OK. And she just pointed outside to the peach tree, and we went down to the peach tree and got swishes and came back in and gave it to my Mumma. And boy did we get it. And this is what I grew up with. I didn't know anything different,

So, I put the book down, and truly I didn't think about it for a long time. Notably, though, it really had an impact on me and it would catch up with me over the course of quite a few years. It rearranged my thinking about what schools might be.

To fast forward from that point. I was quickly diverted into education. My high school principal in my senior year when I was getting ready to take my ??? (guessing it was his final exams) contacted me.

He said, "Steve my biology teacher has just quit and has gone to a pharmaceutical position. Thus, I have no biology teacher. It is late in the spring I know, and I know you're majoring in biology. Could you come over here and teach biology?" This was a priest, Father Connor.

I said, "Father Connor. I don't think I can do that. I'm sorry, I'm still at school. The only thing I could think of is that if you worked it out with my professors, perhaps I could do a study of some sort and maybe I could come and help you out." He did. I did. I went over to Notre Dame High School one I think of thousands in the world. I looked very young in those days. Before I quit school, I got myself a briefcase and I carried it into the school. The briefcase had nothing in it, and it never did. I carried it in there and very proudly put it on the desk where all the kids could see, to try and create some sense of respect. I muddled through that year, and I liked it. I liked it a lot. The principal asked me back for the next year and I said yes, and I decided that if I really liked education, that I should go into education, and so I did.

Several years later, I was asked by a nearby pastor to become a principal, even though I didn't know anything about being principal. He said, over and over I'll give you a try, and I think that it would be a good payoff." I did it and it was wonderful. I got to work with these little kids. From teaching at high school my thought was that in an elementary school, these people really work hard. I know in a high school I had some downtime but in elementary school they don't have much downtime. They work extremely hard. Beautiful, beautiful experiences there,

The Bishop called a few years later, saying Steve, "I want you to become a Superintendent" It was over about 30 schools. I said, "Bishop, I don't know anything about being a Superintendent". He said, "I think maybe you'll do OK". I stayed there for 18 years. During that time, I started looking, in the 80s and the 90s and I started hearing about Dr Glasser's work. By this time, I had done quite a bit regarding school organization.

We started with six schools. I had the opportunity to start to use some of Glasser's principles that I came across. I decided I would go ahead and take a basic course, then a practicum, advanced intensive and went on to get certification. Now I am finally basic program faculty.

It started to work. This was at the end of my tenure there and I was excited about it. Then the school Board from California asked me to come and help start a school. It was a big high school that had 2,500 kids so we started that and introduced Glasser's principles into the school, But I never saw it to fruition.

Then I got this call from Norfolk, Virginia, and they wanted somebody that could come and build a new school. I had an interview with the Board and they basically said. "You can build it any way you want". I really couldn't believe it. How many times does this opportunity land in your lap? It was just the proverbial offer I couldn't refuse. I knew at that moment that this was going to be a Glasser Quality School. I was very excited. In fact, I'm still very excited!

It was a strange thing. I started building the program, building a team, and started hiring my teachers and I was telling them what the school was going to look like, and what it would do for kids, and the things that we would do, and some of them started crying, almost sobbing. I said, "Why are you crying?" On more than one occasion the teachers would look up and they would say, "I always thought it could be this way. I always thought it, but I have never experienced it". What they were trained for, they were shackled by tasks where there was almost a functionary phantom script. They had no power or freedom. The principals were all looking over their necks to make sure that they did everything. That belonging and the love we had all over our windows. Well, they were not there. Who's needs were met? It wasn't any fun. It really was pretty miserable for these folks!

To tell you the truth, it was grace working overtime. I got some of the greatest teachers right off the bat. Many of them were "gifted, trained teachers." I think that all the folks were gifted, and I say that all the time. So, if you have done a study in gifted education, you know all of these skills. It is just beautiful, wonderful education. Every child in the world should be taught this way.

As a gifted educator and as an administrator, I started with the Glasser Quality School and the need to get some training. We had this big old picture glass window that

overlooked a river. And we started the school by doing this, Lees put everything we want for the kids on that window. We're going to start with one thing. Let's just start. We had all these post-it notes, so we started writing ideas down. We started sticking them up on the window and by the end of the day this big old window was completely covered with little post-its. You could not see outside it was so covered. We were just greatly excited about it. I started thinking about it as an organizer and a time sequence and a time frame. We couldn't fit it all into a five-day week, so a friend of mine said why don't we make up our own week? We'll have a six-day week. So, believe it or not, we still have a six-day week.

We called the mascot for the school Wolfhound after an Irish Wolfhound, and the days are H O U N D S, and that is how we know what day it is. Very exciting. And as you can imagine that a big part of that was all integrated with Bill Glasser's precepts.

I have a confession to make. We got this thing started and the staff knew about it. They knew it was Choice Theory and Reality Therapy and this was going to be a Glasser Quality school. I never told the Board off-the-bat, because I knew I only had eight months to build this thing. It was incredibly intense, so I couldn't have any opposition. I didn't have the time to even address that, it was that intense. I knew from other schools that I would definitely get some pushback. There would be legitimate questions. I don't mind that, but it would get in the way. There wasn't time. We went on for a couple of years and I started to get some significant pushback, mostly from the military because Norfolk is a big military city. And I think the largest military fleet in the world, the US Navy. A lot of military minds are closed to this kind of thing, I got some pushback on it, and I knew we had to get over it. But we were very patient, and we took a lot of time. As soon as we heard something, we called these people and we explained what it was all about in such a way that at the end of those conversations, most of them were onboard.

And why wouldn't you be? We are teaching Reality Therapy. We're really teaching great decision-making. How to make great decisions?

"Would you like your children to be able to be great decisionmakers?"

"Of course, you would."

"This is our curriculum. Would you like them in their decision-making to be solving pretty complex problems?"

"Of course, I would".

"Well, this is exactly what we want. We will be solving really sophisticated problems. Would you like your child to be able to self-reflect and look with honesty and transparency within themselves? Be able to self- evaluate?"

"Yes, I would"

"Well, this is what this is all about.

And so we got over a big, big obstacle. It was not insignificant that we could have been derailed the Glasser Quality School precepts under different conditions. But one thing, in a short amount of time I think what sold the school to the community was the results. The results were so profound! The kids were so happy in the first year they left school and without exaggeration, they were crying because they had

to leave the school. And parents said, "What's going on?" and the teacher said it was this wonderful, marvelous cathartic experience. But they loved the results and that really meant that they were wanting to know what's going on. Remember the song Something's going on? What it is ain't exactly clear. Buffalo Springfield, 1963. Well, that's what they were saying. Something's happening here.

I had one parent. I caught him in the parking lot, and he had been to a presentation and was talking to another person. I came up and he started talking about the schooling. "You know that all you have to do at this school is get your kid into this school and he turns out great!

I had this little fellow - he was in the 3rd grade and somebody in the 3rd grade, a boy, sat on Bella and knocked the wind out of her. So, this was a major thing. Everyone knew the boy who did it. They were all sitting in my office. They were sitting everywhere. I said I guess we're here to find out... (now Bella was tough, she was tougher than 90% of the kids in the room. She could hold her own.) "So somebody did it. Who did it?" A sea of hands went over to Carl, who looked like a fish all around him.

"Carl did it, Card did it, Carl did

it." "I didn't do it" "Yes, you did"

"No, I didn't do it"

I thought I would try some of my soft skills I said "Carl, you know that you're saying you didn't do it, but everyone else is saying that you did do it. Maybe you did do it".

"I didn't"

"So, what am I going to do now I said to Carl, Let's go back to the fundamentals. You're not in trouble and you're not going to get punished".

He said "I did it"

"Well, I said, "Carl, I guess we can get on and get Bella in here and we can solve this problem. I guess we can do that."

Carl said, "I guess so."

We did, and Bella came in and the guys stood up and were fine and Carl was fine, and Carl was good and happy. When those things get around in the parent community, things can go really great!

I had two eighth graders come to my office, and they were squabbling 8th grade girls. They were at each other big time. I pulled my chair back and they sat down just squabbling. Finally, after a few minutes they kinda recognized that I was there, and they finally stopped talking and they looked over to me. We had this kind of "moment".

I said "Well, what do you want?" They looked kind of stunned by that question and they looked at each other and they said, "We want to be friends". They were just about ready to scratch each other's eyes out a few minutes before. "We wanna be friends." "What can you do to be better friends?" I asked.

They started talking and talked for a few minutes and then they turned back to me and said "You know what we could do. We could do a service project. We could lead our class and a service project, and we'd get to know each other better and maybe

we would do something good for the class as well." "Would you let me know how it went."

They said, "yeah".

So, they went out and they led their class in a service project, did it well and got to be better friends. I've never seen RT work so seamlessly in all my life. A quintessential example!

At this time, we were teaching the kids CTRT and doing a lot of role-playing. They got to be quite good at it and things just went on, and it's been increasingly powerful ever since.

All the teachers are trained. We do a training every year in what we call our spiritual retreat. Kim Olver has been doing some training, in fact, this month she's doing training for us. We've done lots and lots of training, different kinds of training so everyone is moving forward to their certification and in their training.

One of the things we could stop and say right now is, "Do you know why we are the only school in America that is a Glasser Quality School. It's not an easy thing to stay, because like any system you have to pour energy into it and if you let go the energy it will entropy, it will take over and it will collapse in on itself. If I've learned anything in this experience it is that you have to keep the training going to keep the message going, and to keep yourself true to yourself. You can't falter in doing these precepts... No coercion!

I should tell you that concomitant to Glasser's work you should know that this is part of the school. This is something I have been working on for years. I call it "Intentional Total Formation." Everybody's heard about whole child education. This is an aspect of that, but I have taken what I think are the aspects of a complete human person and put them into a chart or matrix and organized them into these domains:

- The life of the mind

- The life of the spirit - not necessarily religion, but what enlivens the spirit of the child.

- The life of a relationship

- The physical life

- Vocation, a calling - being a servant leader

We told the kids on the first day that we were going to serve, i.e., that's going to be our purpose. If we are going to serve you, you'll need to come up with the projects because the adults are not going to do it, so you need to. Our first year we had 43 schoolwide projects. It had always been into the 30's ever since.

Remember when the big tsunami hit Japan a few years ago. We were having chapel and after chapel this little 5 year-old, you would have been so proud of him, he stood up in front of the whole assembly of 400 people and said "We have got to do something for the Japanese people. Do you know what happened?" He went on to account what happened and then he said, "We have to do something".

His name was Joseph. We snatched Joseph up and took him into the boardroom. We filled it up with adults and his parents. We were going to make it a big deal. It was a big deal principle. He was about to do something big. We asked Joseph your business plan." Well - he had a list. My business plan, Mr. Hammond, is to have a lemonade stand on every corner in the neighborhood.

"Everyone?" I asked. "Every corner not just one here and there,"

"Everyone, lots and lots and lots of lemonade stands." Not a bad thing for a 5-year-old.

"Joseph, how much money do you think you can make?"

He said, \$42,000, Joseph didn't make \$42,000 but he made \$4,000! This is what this little 5-year-old did who was empowered with this big dream. He messed around, got so many people involved and got lots of donations. He turned around and made \$4,000. We were able to make this check for this organization that had a 1% admin costs, and little Joseph and all of his partners did something really, really big.

The whole notion of Intentional Total Formation is kinda like Glasser Quality School on steroids because they are not doing it just for the academics. It was in every aspect of their lives, and they reflected on it just like we asked them to reflect on their academics. They reflected on their growth and development in each one of these domains in a journey portfolio. They kept this with them from the time they started until the time they ended at the school. By the time they ended they had these huge tomes. They ended up as part of their eighth-grade year, that terminal year. The whole first part was spent writing a high-quality essay. The task was to tell us their growth and development since they had been at the school. So, they had to dig deep. You don't go ankle-deep. You have to be honest and go waist-deep and maybe chest-deep. They did the most amazing transparency. The reduction of fear was just crazy good. They will always be honest about where they are in their life.

In the second part of the 8th grade year, they spend time preparing for a panel where they got in front of community leaders for about 20 minutes with 10 minutes Q & A afterwards. They told them who they were. Socrates know thyself - calling in all their powers of introspection, analysis being able to put that on the table in a creative way. The kids say that if there is one thing the school cannot drop it's that whole experience of the 8th grade experience. Bill Glasser is the glue that moves through all of that. It doesn't work without it, because it is all done by invitation. It is just an amazing thing.

Now, at the critical part where I'm leaving {St Patrick}, of course I am concerned about the continuation of the culture and primarily how the Glasser Quality School would fare when I leave. So, for the last three years I have been organizing and reorganizing to make sure the right people are in the right place to protect the Glasser Quality School.

We hired a wonderful lady from New York and part of hiring her was the expectation that this person would buy into the culture and a big part of that is Glasser. So, she has all the books and everything that she had already readily learned. She read them all before she came for the interview. Then we established a Culture Sustainability Committee, including parents and teachers. These parents understood the work of

Glasser. That is one of the great components, and that is moving forward. We captured each in video with kids leading the video.

Ashby Kendall, from the former principal from Murray high school in Charlottesville, Will be the lead agent in the co-verification process for us in April. We are going to keep that co-verification going forward.

The Glasser Quality School committee has created a rubric, going back to the six criteria. In the US rubric there are only five.

It's just set up a cycle where every 2 1/2 years the Glasser Quality School will be assessed in the Co-verification process. God willing, changes in leadership can't turn it upside down.

Going to change the mission where being a Glasser Quality School is part of the mission statement. That's important, though it hasn't been done before.

The Board is now 100% behind the Glasser Quality School and the "Intentional Total Formation."

A CHOICE THEORY LENS on LAW ENFORCEMENT OFFICERS' PERCEPTIONS of SPIRITUALITY AFTER PROLONGED EXPOSURE to TRAUMATIC EVENTS

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Abstract

Research indicates that trauma exposure impacts spirituality negatively while increased spiritual well-being may improve symptoms. There is limited knowledge of the contributing factors that impact the perceptions of spirituality in law enforcement officer (LEO) populations. Choice theory was combined with social cognitive theory as the theoretical lens to answer the research question: How do law enforcement officers describe their perceptions of spirituality, practices, and beliefs after prolonged exposure to work-related traumatic events? The LEOs' perceptions provide information educators and mental health professionals can leverage to understand the unique needs of LEOs, including what some consider spiritual distress. By focusing on LEOs, this study explored the transferability of existing trauma theories to LEO populations. A generic qualitative inquiry approach captured the participants' beliefs, attitudes, opinions, and reflections pertaining to their spirituality and actual world experiences. Twelve LEOs from five geographic locations were interviewed. Theoretical analysis (ThA) was used to analyze the data that were identified as six overarching themes and 11 subthemes. The six main themes were identifiable practices and beliefs in understanding spirituality, connection to interpersonal relationships, changes after work-related trauma exposure, guidance for conduct and motivation, improvement in mental health, and cause for distress. New perspectives on research findings provided insight into how spirituality is impacted by prolonged exposure to traumatic events in LEO populations. Implications for future research are included.

Keywords: Spirituality, choice theory, social cognitive theory, law enforcement officers, first responders, generic qualitative research

By the very nature of their jobs, law enforcement officers (LEOs) are exposed to traumatic events daily (Lanza et al., 2018; Papazoglou & Andersen, 2014). This study about how LEOs perceive their experiences of spirituality, practices, and beliefs during and after prolonged exposure to work-related traumatic events was designed to gain insight into the aspects of spirituality that are impacted by such prolonged exposures. The frequency of traumatic exposure often does not allow the first responder (e.g., law enforcement officers, firefighters, emergency medical service personnel (EMS), and military personnel time to process the events before engaging in yet another traumatic event (Papazoglou, 2013). Some responders have reported beliefs that sharing their physical and emotional stress about the traumatic events may be considered a personal weakness (McCormack & Riley, 2016; Thomas & Taylor, 2015). First responders then perceive their organization may question their fitness for duty (Malmin, 2013; Papazoglou, et al., 2019; Stuart, 2017). Therefore, responders with traumatic stress-related symptoms are experiencing vicarious trauma (VT), but often refuse to seek professional help and therefore, attempt to self-manage symptoms (Malmin, 2013).

First responders with trauma exposure symptoms articulated what has been termed spiritual distress (Currier, et al., 2015; Harris, et al., 2015, 2018). Due to the lack of information

about the qualitative constructs of spirituality, this study was structured to understand how and if spirituality is disrupted in LEOs exposed to traumatic events and creates a sense of spiritual distress. In the environmental context, spiritual distress is more prevalent and the consequences are not well known (Harris, et al., 2018). The study proposed that LEO populations exposed to high-risk situations and traumatic incidents experience changes in perceptions, practices, and beliefs related to spirituality, which may be key factors in the development of VT symptoms.

Spirituality is a complex facet of human experience and encompasses a wide-range of individual beliefs making it difficult to provide a one-size-fits-all approach in the professional workforce (Currier, et al., 2015). Most studies on the symptoms of VT in LEOs mention possible changes in how they perceive their spirituality without addressing specific spiritual issues (Currier, et al., 2015; Malmin, 2013). To complicate the issue of addressing spirituality, professionals in LEO work environments may not consider it significant. The lack of addressing spirituality in counseling also may be a reluctance to discuss spiritual issues because they underestimate the role of faith and possible opposition in incorporating spirituality in treatment (Currier, et al., 2015a; Harris, et al., 2018). However, the literature has supported the significance of spirituality in treating and decreasing VT symptoms (Arble, et al., 2018; Currier, et al., 2015a; Hamaoka, et al., 2010).

An LEO's worldview in perceived moral decline in society is another factor that may further impact the officer's perceptions of their degree of spiritual well-being and contribute to the development of VT symptoms (Blinka & Harris, 2016; Shay, 2014). LEOs may experience a perceived moral injury when their deep spiritual and moral convictions, expectations, or general acceptance of society has been negatively impacted (Blinka & Harris, 2016; Currier, et al., 2014; Doehring, 2015; Harris, et al., 2015; Kopacz, et al., 2016; McCormack & Riley, 2016; Smith et al., 2015). Due to increased rates of suicide among LEO populations (Klinoff, et al., 2015; Malmin, 2013; Ramchand, et al., 2019), the information gained adds to the protective effects of spiritual well-being after exposure to trauma (Milstein, 2019). Studying the aspects of spirituality impacted by prolonged exposure to traumatic events is crucial due to the estimated 250,000 first responders in the United States needing treatment for trauma disorders (Molnar, et al., 2017).

In order to improve current treatment programs, the qualitative constructs of spirituality need to be identified according to LEOs' specific descriptions of spirituality and the significance of spirituality they attribute to their profession. These emerging qualitative constructs are examined through the theoretical lenses of choice theory (Glasser, 1998) and social cognitive theory (Bandura, 1986). Choice theory (Glasser, 1998) provides a lens proposing that every action is a choice from a concept called total behavior that includes all aspects of acting, thinking, feeling, and physiological responses (Bradley, 2014; Glasser, 1998). The interactions of these four behavioral factors produce an individual's total behavior, with acting and thinking directly controlling feelings and physiology (Bradley, 2014). When any of these factors change, the others will be influenced with the most controllable aspects of total behavior (Cameron, 2011; Robey et al., 2017). As an internal control psychology, people lose their personal freedom unless they choose to understand how every choice affects their lives for better or worse (Glasser, 1998).

Research Questions

The research question focused on understanding LEOs' perceptions of spirituality, practices, and beliefs as they interact within the communities they serve (Caelli, et al., 2003; Percy, et al., 2015). As a former LEO, first responder, and military service member, the research question was based upon pre-knowledge and pre-understandings about the topic and

focused on identifying the participants' descriptions and perspectives about their regular interactions with traumatic events (Percy et al., 2015). The focus of the questioning was on the actual world experiences through a generic qualitative inquiry approach (Caelli, et al., 2003; Percy, et al., 2015). The guiding questions were:

Guiding Interview Questions:

1. How would you describe/define spirituality, including perceptions, practices, and beliefs?
2. What role do your perceptions of spirituality, practices, and beliefs play in your work?
3. What role do your perceptions of spirituality, practices, and beliefs play in your off-duty life?
4. Please tell me what part perceptions of spirituality, practices, and beliefs play in prolonged exposure to traumatic events in your line of work.
5. What was the perceived quality of your perceptions of spirituality, practices, and beliefs prior to entering a law enforcement career?
6. How have your perceptions of spirituality, practices, and beliefs changed from when you first came into the law enforcement field and now?
7. If you have noticed a change in your perceived spirituality, including your, practices, and beliefs, how has it affected your daily life and work performance?
8. What personal goals and expectations do you have regarding your future perceptions of spirituality, practices, and beliefs?

Methods

The purpose of the generic qualitative inquiry was to explore how LEOs described their perceptions of spirituality, practices, and beliefs after prolonged exposure to work-related traumatic events. LEOs perceived prolonged exposure to traumatic events in examples such as community social unrest, physical and/or verbal assaults, and/or natural or manmade disasters. The generic qualitative inquiry derived data from face-to-face and online video conference semi-structured interviews (open-ended) and participant observation (Percy, et al., 2015). Data was obtained from the LEOs' descriptions concerning real world events, processes, and experiences to acquire a broad range of opinions, ideas, and reflections (Percy, et al., 2015). The researcher collected data from officers who have responded to traumatic events and identified themes related to their perceptions of spirituality, practices, and beliefs (Percy, et al., 2015).

The data collection process involved interviewing 12 participants each taking part in an interview lasting approximately 60 minutes. This gave the participants sufficient time to elaborate on their experiences. The guiding interview questions were pre-structured based on the researcher's prior knowledge and the research question (Percy, et al., 2015). The participants were asked semi-structured open-ended questions that focused on obtaining data to identify theoretical concepts and structural descriptions of the participants' perceptions of spirituality, practices, and beliefs (Kennedy, 2016; Percy, et al., 2015; Thomas, 2006). The researcher also asked detailed questions pertaining to the phenomenon, causal conditions, strategies, and consequences to help shape the coding phase (Creswell & Creswell, 2018).

Generic Qualitative Inquiry

The selection of the research topic and generic qualitative inquiry approach evolved as the aim of the study became more clearly defined. The strengths and weaknesses of phenomenology, ethnography, case study, and grounded theory research methodologies

were evaluated and it was concluded that the approaches were too structured to fully capture the participants' beliefs, attitudes, subjective opinions, and reflections pertaining to outward actual world experiences (Kahlke, 2014; Percy, et al., 2015). The emphasis on bracketing in qualitative methodologies also was a factor limiting the use of the researcher's pre-knowledge/pre-understandings pertaining of the research question in seeking the perspectives of the participants (Percy, et al., 2015).

A qualitative design was chosen because it provides the opportunity to analyze and seek some interpretation about perceptions of how people experience their place in the world (Chenail, et al., 2011; Daher, et al., 2017; Levitt, et al., 2019). The generic qualitative inquiry methodology was chosen to gain an understanding of "how people interpret, construct, or make meaning from their world" by studying their outward actual world experiences (Kahlke, 2014, p. 39). The study approached the topic from an interpretivist (social constructivism) approach (Thanh & Thanh, 2015). The research focused on understanding how LEOs described their spiritual realities (ontological), and how their understanding of spirituality was impacted by trauma exposure (epistemological) (Gopinath, 2015; Lucas, 2014). The study considered the researcher's values (axiological assumptions) while analyzing the participants' subjective values to minimize researcher bias, and while identifying social constructs related to the role of spirituality in the LEOs' work lives and resilience (Biddle & Schafft, 2015).

Theoretical Assumptions

The topic was examined through the theoretical lenses of choice theory (Glasser, 1998) and social cognitive theory (Bandura, 1986). The use of both theories provided a methodological paradigm that allowed the researcher to both analyze data and develop generalizations (Kline, 2017). The concepts of choice theory (Glasser, 1998) directly addressed the phenomenon being studied. Inquiry related to the phenomenological concepts of perception and quality addressed in the research questions were studied utilizing the choice theory (Glasser, 1998) framework. Choice theory (Glasser, 1998) states that people are always consciously or unconsciously choosing their behaviors in an attempt to control their life and satisfy one or more of their five basic needs of belonging, freedom, fun, power, and survival (Bradley, 2014; Prenzlau, 2006; Wubbolding, 2015). Choice theory (Glasser, 1998) explains the cognitive functioning related to the LEOs' perceived world, known as the quality world, and their ability to satisfy basic needs (Bradley, 2014; Cameron, 2011; Dermer et al., 2012; Glasser, 1965; Glasser, 1998; Henderson, et al., 2013; Prenzlau, 2006; Wubbolding, 2011; Wubbolding, 2013a; Wubbolding, 2013b; Wubbolding, 2015).

Perception includes an individual's worldview, which is based upon the accumulation of individual behaviors, experiences, and interactions with the environment (Wubbolding, 2013a). Every person has a unique human experience resulting in different individual perceptions or perceived world. Choice theory (Glasser, 1998) proposes that knowledge and values are partially influenced by the perceptual system (Mickel, 2013; Wubbolding, 2015). The sensory system filters the information received from real world and the perceptual system interprets the information received (Mickel, 2013; Mickel & Miller, 2013). The basis of choice theory (Glasser, 1998) is that human perception is influenced by total behavior, or acting, thinking, feeling, and physiological reacting. Individuals often attribute their feelings to other people, for example, but feelings are cognitive responses to information received through the five senses.

Choice theory (Glasser, 1998) also describes the mental processes humans use in decision making. Glasser (1965) identified survival, power, freedom, fun, and love and belonging as the five basic psychological needs. When any of the basic needs are not met, the individual may exhibit emotional and/or behavioral distress until needs are satisfied or achieved. All

behavior serves a purpose and is the individual's response to variances between wants, needs, and what is being acquired (Bradley, 2014; Wubbolding, 2015). When needs are satisfied, people experience a sense of control which other theories have referred to as self-actualization, self-fulfillment, or being fully functional (Wubbolding, 2013b). Humans are only capable of indirectly controlling behaviors related to feelings and physiology, which are the two factors often related to individuals seeking therapeutic intervention (Cameron, 2011; Libby, 2014).

The conceptual framework of the social cognitive theory (Bandura, 1986) was added because it is based upon the individual developing and embracing a worldview that agrees with and represents the larger group's construction of reality (Parker & Taylor, 2015). The social cognitive theory (Bandura, 1986) proposes that our prior experience and learning are used to guide our expectations and knowledge as we interact with new environmental stimuli (Brod, et al., 2015; Parker & Taylor, 2015). Social cognitive theory (Bandura, 1986) provided a theoretical framework that addressed the schemas that LEOs maintain about themselves, their environment, and their world (Litz, et al., 2009; McCormack & Riley, 2016). The theory proposes that there is a reciprocal and bidirectional relationship between beliefs, behavior, and the environment, due to their constant influence and interaction with each other (Parker & Taylor, 2015).

According to Wurthmann (2017), the individual's perception and attention of environmental factors affects his or her awareness of moral issues, judgments, goals, and behaviors. Environmental stimuli that present morally intense issues will heighten moral awareness because they are more noticeable and produce a need to direct more attention to the issue (Wurthmann, 2017). Social cognitive theories (Bandura, 1986) of trauma-related disorders explain how traumatic events conflict with people's existing schemas, environments, and worldviews (Litz, et al., 2009). The social cognitive model (Bandura, 1986) addressed the impact of VT and moral injury (i.e., spiritual wounds) in the areas of altered world beliefs, self-efficacy, competency, and symptomology. The social cognitive model (Bandura, 1986) helped explain the impact of VT and moral injury in the areas of altered world beliefs, self-efficacy, competency, and symptomology. The use of choice theory (Glasser, 1998) and social cognitive theory (Bandura, 1986) together provided a methodological paradigm that allowed the researcher to both analyze and develop generalizations to add to the current body of knowledge.

Participant Recruitment and Demographic Characteristics

The population was current LEOs who had experienced prolonged exposure in responding to traumatic events and social unrest while performing their duties. The selection of the target population and representative sample was crucial to identifying generalizations from the research findings (Kline, 2017). To enhance the transferability of the findings, the study provided detailed descriptions of the participants, strategies for recruitment, and methods of data collection and analysis (McInnes, et al., 2017). By providing rich descriptions of the research, readers can transfer the findings to other settings based upon shared population characteristics (McInnes et al., 2017).

Approval was received from Capella University's IRB. All aspects of the study were conducted in accordance with the Code of Federal Regulations, Title 45, Public Welfare Department of Health and Human Services, Part 46, Protection of Human Subjects (45 CFR 46) (Office for Human Research Protections, n.d.). The following strategies were implemented to protect human subjects involved in the study: maintained an awareness of and respect for cultural, religious, gender, and other differences; obtained consent; avoided possible researcher/participant power imbalances in knowledge production (Ross, 2017),

and exploiting participants; refrained from collecting harmful information; protected non-sharing of personal and sensitive information; and stored data and materials for 7 years according to 45 CFR 46 and IRB requirements. The research posed a minimal risk for retraumatizing the participants due to excluding volunteers currently under mental healthcare for PTSD or self-reporting trauma-related symptoms. Adherence to protective measures enabled the researcher to establish rapport, which helped facilitate an open dialogue with the participants. Following the interview, the participants were debriefed. Had any participants reported distress following the interview, they would have been evaluated and referred to services as needed.

The research also adhered to the Belmont Report standards that require respect for persons, beneficence, and justice for research involving human subjects (U.S. Department of Health and Human Services, 1979). Respect for persons required the researcher to treat participants as autonomous agents and ensured that all persons with diminished autonomy were allowed protection. To extend beneficence, participants were treated in such a way to prevent harm by maximizing potential benefits from the study while minimizing possible harm. Participants were treated justly by providing equal opportunity to contribute to the study by sharing their perceptions without coercion to ascribe to a particular spiritual or societal belief. Due to the sensitive nature of law enforcement work, there was a need to protect the participants from identifiable information, which if disclosed could result in stigmatization (Stuart, 2017) or officer safety issues if their confidentiality had been jeopardized. To protect identities, the interviews were conducted in a confidential place away from the workplace.

Protecting participants formally began during the informed consent process. After each participant contacted the researcher by telephone and completed the screening process, a copy of the informed consent was emailed to them. Immediately prior to the interviews, the researcher reviewed the informed consent with the participants and the informed consent form was signed by each. For participants who were interviewed via an online conference, the signed informed consent was faxed to the researcher prior to the interview. There were no mitigating circumstances that influenced the interviews or distressed the participants, with no participants withdrawing their consent to participate.

The study included 12 active-duty law enforcement officers. Details of the demographics of the participants are included in Table 1, including ethnicity, age, gender, and race. Five participants were detectives, three were uniformed federal officers, one was a Deputy Sheriff, one was a uniformed patrol officer, one was a civilian military police officer, and one was an Immigration and Customs Enforcement (ICE) agent. Participants were employed in five different states and in four U.S. geographic regions, and some worked in rural areas while others worked in metropolitan areas.

Table 1
Participant Demographics (N=12)

Participant	Sex	Race/Ethnicity	Age	U.S. Region
P1-01	Male	European American	38	Mountain
P2-01	Male	European American	59	South Atlantic
P3-01	Male	European American /Hispanic/Native American	39	West South Central

P4-01	Male	European American	37	South Atlantic
P4-02	Male	European American	32	South Atlantic
P4-03	Male	European American	33	South Atlantic
P4-04	Male	Hispanic	38	South Atlantic
P4-05	Male	European American	49	South Atlantic
P4-06	Male	European American/Hispanic	56	South Atlantic
P4-08	Female	European American	34	South Atlantic
P4-09	Male	European American	47	South Atlantic
P5-01	Male	European American/African American	43	Mountain

Data Collection Procedures

Recruitment of participants began by contacting commanding authorities and requesting permission to study in areas where the researcher would have travel access and were varied in terms of location geographically and by demographic size and makeup. The researcher contacted the departmental leadership (e.g., Directors, Police Chiefs, etc.) of potential sites by emailing a letter of information about the proposed need for the study along with a site permission form. The researcher also was available to discuss any issues or concerns site leadership may have had pertaining to the study. For example, the study might have needed review by other officials, such as internal affairs and/or the police union. Once the study was approved by the department's command, the researcher obtained written authorization to conduct the study. After site permission was granted, the law enforcement agency was requested to email the recruitment flyer to all LEOs. An email message script with a disclaimer to avoid undue influence or coercion for the person distributing the recruitment flyer was provided.

The researcher collected data from officers who have responded to traumatic events and identified themes related to their perceptions of spirituality, practices, and beliefs (Percy et al., 2015). Face-to-face and online video conference semi-structured interviews (open-ended) and participant observation were the data collection procedures (Percy, et al., 2015). The participants were asked semi-structured open-ended questions that focused on identifying theoretical concepts and structural descriptions of their perceptions of spirituality, practices, and beliefs (Kennedy, 2016; Percy, et al., 2015). The researcher also asked detailed questions pertaining to the phenomena, causal conditions, strategies, and consequences to help shape the coding phase. Data obtained from the LEOs' descriptions concerning real world events, processes, and experiences acquired a broad range of opinions, ideas, and reflections (Percy, et al., 2015).

A screening script was used that provided an introduction to the study, description of protective measures, and researcher contact information. All recruitment materials included the following: researcher name, contact information and Capella University affiliation; the explicit term research; purpose of the research; the inclusion/exclusion criteria used to

determine participant eligibility; enrollment details; a brief explanation of study; time and participation requirements; and interview locations. Eligible participants must have experienced response to traumatic events, such as vehicle accidents, assaults, fires, violent deaths, horrific injuries, handling dead body/parts, violence against a co-worker, witnessing suicide or suicide attempt, witnessing death/injury to co-worker, etc. (Ramchand, et al., 2019; Regambal, et al., 2015). Participation in the study was open to officers of all religious or spiritual practices and beliefs, including no formal affiliation with religious organizations. Recruitment materials also included a crisis hotline telephone number for counseling in the event discussing past events caused concerns or discomfort (Hall, 2014). After potential participants indicated an interest to participate in screening and following interview, the researcher provided a copy of the informed consent form via email to review 24 hours prior to the interview. After consent had been granted, interviews were scheduled.

The interview sites selected and agreed upon by the participants were located away from the police departments to protect the participating officers' confidentiality. Depending on availability in the local community, the researcher reserved a private meeting room at a public library or similar public facility. Field notes and observations during the data collection were kept to supplement information derived from the transcripts of the recorded interviews (Sorsa, et al., 2015; Tufford & Newman, 2012). Examples were nonverbal expressions (banging on table) and level of engagement (relaxed or in a rush to finish), which were added in transcription and analysis. The participants' expressions of emotions were also used to monitor for signs of re-traumatization and distress. Notes about the interview environment included location, background distractions, time of day, and time related to the beginning or end of shift. This process was continuously used throughout the data collection and analysis process to document any potential unacknowledged preconceptions that could jeopardize the study findings (Tufford & Newman, 2012).

Data Analysis

The data were organized using a systematic transcript reading and coding process to identify, analyze, and interpret emergent major themes (Clarke & Braun, 2017; Percy, et al., 2015). The generic qualitative analysis performed using theoretical analysis (ThA) to examine predetermined categories or themes (Clarke & Braun, 2017; Percy, et al., 2015). The analysis involved the use of systematic procedures to generate codes and themes derived from the data and organized according to appropriate preexisting themes, while considering new themes related to the research topic (Clarke & Braun, 2017; Percy, et al., 2015). Analysis included the computer software MAXQDA analytical tool to assist in organizing and managing the themes during the coding process.

Thematic analysis is frequently used in generic qualitative studies (Bellamy, et al., 2016). The first step in ThA required familiarization with the data through reading, reviewing, rereading, and highlighting meaningful content (Percy, et al., 2015). By transcribing the interviews, familiarity with the data started with listening to the recordings while transcribing the participants' statements. The data became 12 transcript documents that were uploaded into the MAXQDA analytical tool to code. For step 2 in ThA, the data were reread and compared to the research question to determine what were related (Clarke & Braun, 2017; Percy et al., 2015). Pertinent data were highlighted using the MAXQDA software tools while leaving unrelated data to the research question for future reevaluation (step 3).

A coding system was developed with Percy's et al.'s (2015) step 4 of ThA. Data were coded based upon the descriptive data characteristics resulting in 858 coded statements. In the MAXQDA system data were sorted by participant identifiers. The data items were clustered

according to their relationship or connected patterns (step 5). Five predetermined categories (Percy, et al., 2015) were created and color-coded in MAXQDA. ThA utilizes predetermined categories in situations when the research questions are structured on theoretical pre-knowledge and pre-understandings about the topic, which were related to the theory, previous research, and research questions. Still, the study remained open to emerging themes from the analysis (Percy, et al., 2015). The patterns and associated quotes were grouped into categories of themes (step 6). The patterns not related to the preexisting themes were stored for reevaluation (step 7). Continued review by combining and clustering the data identified emerging overarching themes in an iterative process (step 8). Themes were then arranged to correspond with the supporting patterns in step 9 (Percy, et al., 2015).

The MAXQDA creative coding tool (link analysis) was used to arrange the themes in patterns and to merge overlapping codes. The stored patterns that did not match predetermined categories were reevaluated to identify emergent patterns and themes related to the research question (step 10). For example, the theme of moral injury emerged from the data along with the subtheme of interpersonal relationships that emerged in all the categories. The following sections offer discussion and interpretation of the scope and substance of each theme along with quotes that support the data (steps 11 and 12) (Percy et al., 2015).

Results

Data analysis generated six major themes: identifiable practices and beliefs in understanding spirituality, connection to interpersonal relationships, changes after work-related trauma exposure, guidance for conduct and motivation, improvement in mental health, and cause for distress. Eleven subthemes also emerged where participants provided various descriptions of what they considered spiritual beliefs and practices as a LEO and identified aspects of their spiritual life that had changed since entering law enforcement. These included interpersonal relationships, strength and quality of spirituality, conduct and motivation, and mental health and mood.

Participants also described experiences of spiritual distress and moral injury. The aspects of spirituality negatively impacted by prolonged exposure to traumatic events were generally defined as spiritual distress. Identified were LEOs' perceptions of spiritual, practices, and beliefs changed after prolonged exposure to work-related traumatic events impacting the officer's sense of wellness, quality of life, and work performance. Also identified was that with some LEOs, exposure to work-related traumatic events resulted in a perception of enhanced spiritual well-being and stronger resilience. The findings support the need for new approaches that incorporate aspects of spirituality into treatment programs. Also identified were strategies LEOs used to improve trauma exposure symptoms, which could be limited by traditional approaches but may assist others.

Identifiable Practices and Beliefs in Understanding Spirituality

The first theme provided context for interpreting how the participating LEOs defined their spiritual perceptions, practices, and beliefs. Spirituality in general was defined as how you perceive yourself, the people around you, and your environment and actions through the eyes of God. All participants described spiritual beliefs and some kind of spiritually oriented practice. Exploring the context of the participants' spiritual beliefs and practices provided a framework and context used to gain awareness of and respect for participants' religious and spiritual customs to uphold professional ethical standards and to avoid a negative evaluation of the participants' spiritual perceptions, practices, and beliefs (Currier, et al., 2015). The

negative things witnessed on the job were viewed on the same level as any violation of God's law and as the work of the devil.

The theme defining LEOs' spiritual beliefs and practices had four subthemes. These were a belief in a superior being, spiritual practices connected to institutional or organized religion, devotion to spiritual practices, and the introspective nature of spirituality. Exploring their spiritual perceptions, practices, and beliefs was important because researchers have indicated that having spiritual participation in memorials, vigils, and anniversaries helps facilitate healing and growth, and reasserts identity, relatedness, positive core social values, and resilience (Currier, et al., 2014; Doehring, 2015; Smith, et al., 2015).

Belief in A Superior Being. Various descriptors identified the participants' beliefs in a superior being: God, Jesus Christ, the Devil, a superior being, a higher power, higher positive power, all-encompassing power, a higher being, supreme knowledge, a creator, the creator of the universe, and absolute truth of the Bible. Generally, spiritual beliefs were described as the act of believing in a superior being or higher power. A belief in a higher power was described as something that guides the LEOs' actions. Seeking a higher authority and dedicating your life to a higher power was something that enabled officers to do law enforcement work correctly because it is not an easy job. Faith in God was a factor that helped to maintain a positive outlook while dealing with negativity witnessed on the job. Belief in a superior being was described in the context of everything is gifted from God, though none are deserving.

Seeking that higher power and dedicating your life to that higher power. Law enforcement is not an easy job and I think for me personally, I have to seek a higher authority, a higher power to believe in, doing the job and doing it correctly.

Spiritual Practices Connected to Institutional/Organized Religion. Participants associated their spirituality within the context of their participation in institutional or organized religion. Institutions or organizations identified by the participants included church and small groups. The practice of attending church was described in a variety of ways, such as frequency of and benefits of attendance, and the origin of church belief. Participants described church attendance from every Sunday to having a desire to attend more frequently. Attending church also was connected to the source of strengthening and sharing faith. Church and spiritual group attendance also was linked to maintaining a positive outlook.

Attending church and small groups is helpful. I surround myself with people at church or small church groups. Keeps me positive 'cause they're like-minded and it lets me see that, hey, there's other things other than the constant negativity that I am seeing at work.

Devotion to Spiritual Practices. Spirituality was described as devotion to a superior being or God that included daily practice of spiritual activities and beliefs. The act of devotion was described as specific spiritual behaviors, such as reading and studying the Bible, reading a devotional, listening to music, and "taking a moment to sit down in your body, and prayer." Prayer was discussed in the context of thanksgiving, communicating with God, and an act that strengthens faith. Prayer was considered a framework and a form of mental support for processing events and a means of affirmation from God in the decisions and activities performed. Prayer also was described as a constant activity in the decision-making process.

Introspection. Spirituality was framed as being introspective and as self-examining personal qualities, behaviors, and connecting with something beyond yourself. Spirituality

was described as having an awareness of how one fits in the scheme of things that are occurring and “the bigger things that are going on beyond your spirit.” This outward awareness was contingent upon the participant having a perception of the inner self. Described as a state involving how a person perceives themselves, an awareness of your own issues before being able to help others was how participants phrased their perceptions. Being good with yourself in order to be good to others was stated as an important inward aspect of spirituality. Having a spiritual background was described as an internal strength that helps in avoiding negative things. Spiritual beliefs also were described as a lifestyle and not just something compartmentalized to specific areas of life.

My spirituality helps me [pause] but I also know myself [bangs table] and the way I was raised [pause]. That even if I did not have the spiritual belief, I have the strength, the internal strength. I was going to say strength of character but it’s not even that. It’s just an internal strength that is bred into my family where I would not fall prey to that stuff [bangs table]. Even without a spiritual background, but I know [double bangs table] not everybody is as strong as I am.

Connection to Interpersonal Relationships

Throughout the interviews the overarching theme was connections made to interpersonal relationships while discussing spiritual beliefs and practices on and off duty. Subthemes of improvement in the work and off-duty environments, improvement as future spiritual goals and expectations, and negative perception of people and society were noted. This theme with people impacted by trauma exposure was evident in literature pertaining to first responders from both negative and positive symptomology. Compared to the general population, LEOs may be at a higher risk of mental health problems including PTSD, depression, substance abuse, suicide, employment-related stress, and relationship issues. Problems with relationships were expressed by participants. In some cases, exposure to trauma may result in positive psychological changes including a greater appreciation of life, stronger resilience, improved intimate relationships, enhanced spiritual wellbeing, realignment of life priorities, and openness to new opportunities. The findings from this study are significant due to the participants reporting both the negative and positive changes in their interpersonal relationships, and protective factors of their spirituality and family relationships after trauma exposure.

Improvement in The Work and Off-Duty Environments.

Participants reported their spirituality improved interpersonal relationships in their on-duty work environment. Spirituality was discussed as not only directing the way people are treated but also as the source of kindness. “Treating other people the way you would want your family to be treated” was expressed as a principle that directs practicing law enforcement personnel, according to the interviewees. Another principle discussed was regardless of what someone has done, they should be treated as a person and LEOs should always try to see the good in people and help those people.

Spirituality sometimes provided a perspective to understand where people were coming from in the work environment. One such view was stated in that nobody is perfect except God and that “we are all sinners.” Having a spiritual perception on the job helped LEOs witnessing and dealing with the worst of society by knowing “God has grace for them because they are still God’s loved children and He called us to love them, too.” Helping others was reported as part of their spirituality. One participant felt “called to save lives”. Another officer reported being “spiritually called to help mistreated and vulnerable people” when others are not helping.

Participants also reported that their spirituality improved interpersonal relationships in their off-duty environment. Spirituality controls thinking by "trying to be honest and treating people right." People know the officers in the community, thus creating an environment where they feel they are never off duty. On a daily basis, Christian values in off-duty life were a factor in guiding interactions with all people. This consistency in interpersonal behaviors was referred to as "trying to do the best in everything and trying to be the same no matter the location." The predominant interpersonal relationship response among the participants in their off-duty life was related to spiritual practices with their family. Striving to maintain quality standards to be a reflection of spirituality in God's presence was expressed as a way to be a good representative for the family. Practicing spirituality at home with the family was a way to gain strength, peace, and the ability to ask for help.

Participants reported a shift in the way they perceived people after exposure to work-related traumatic events. A negative worldview was associated with the view that "the world is a bad place with bad people." Having a spiritual perspective when exposed to work-related traumatic events helped to consider that people thought to be the "underbelly of society" are going to be turned around and come out on the good side of things. Placing events witnessed on the job on the same level as any other violation of God's law was a way to mitigate the events as evil and then move on to the next situation. People engaged in murder, rape, violating children, and torture were viewed as sinners. People, and especially law enforcement, tend to see such crimes much worse than "God who considers it all sin, and it is the officer's duty to love them because they are still God's children."

During the interviews, participants reflected on their own family while discussing what part their perceptions of spirituality, practices, and beliefs played in prolonged exposure to traumatic events. Spirituality and family were described as anchors when dealing with work-related traumatic events. Spirituality was discussed as having a positive impact on marriage after exposure to work-related traumatic events and was a contributing factor for one participant being married for 36 years. A lack of spirituality was reported as a reason some co-workers were no longer married or had gone through a couple marriages.

After exposure to work-related traumatic events, a greater appreciation of life was often experienced. Becoming a parent strengthened life appreciation due to a new perspective of how life is valuable and fragile. While engaged in law enforcement work, the birth of a child led to a realization that life changes were needed in order to be a role model and example. Participants described their spiritual practice in the context of teaching their children moral and spiritual principles. The participants discussed raising their children in a family environment of biblical principles, beliefs, and morals. Instructing children in moral and spiritual principles involved teaching specific Christian beliefs, teaching kindness towards others, and treating and interacting with family in a way to be a good role model.

We treat others as I would want to be treated or treat others as I would want my friends and family to be treated. So, I attempt to do my job and practice law enforcement in a way that I would want someone to do that for my family, and at the end of the day to serve God and serve the people that I'm sworn to protect.

Improved Relationships as Spiritual Goals and Expectations. Participants reported their future spiritual goals and expectations were to have improved interpersonal relationships. One goal was sharing faith with other people. Other LEOs expressed a goal to write more stories and poems for suicidal law enforcement officers. Participants expressed the goal and expectation to spiritually help their families and children by exposing children to different religions, teaching children not to misuse powers, improve being a family leader,

communicating spiritual practices to help children, and gaining more spiritual knowledge to share with family.

Negative Perception of People and Society.

This negative perception of interpersonal relationships was expressed on a world, community, and family level. Law enforcement work was described as an eye-opening experience due to seeing everybody at least 90% of the time in their worst moments. The change in interpersonal relationships was directly connected to observing what happens in people's lives behind the scenes. Naivete to the world before starting law enforcement was due to a lack of awareness of what happens behind the scenes, such as going into other people's houses and seeing fights and how people really are when they are not putting on an acceptable face in stores, at church, or at community events. Daily witnessing of negative aspects of society produced a wavering spirituality in the perception of how people really are and the world being mostly good, and then negatively changed after entering law enforcement which has taken a personal toll.

Witnessing specific traumatic events was attributed to a negative perception of people and society, such as the terrorist attack of 9/11. That attack was reported as a point when the world and society had changed in their perceptions, and everyone became more alert to the fact that there are threats in this country intending to harm us and change the way we think. Witnessing crime such as murder, rape, child neglect and abuse, and torture in the performance of law enforcement duties was described as causing a transition from a sense of innocence. Hearing people's troubles and dealing with the stress everyone's drama at work led to avoid interacting with people while off-duty.

Trusting people was reported as an issue after entering law enforcement. Participants expressed how it became harder to trust people resulting in guardedness. The guardedness and lack of trust that most law enforcement officers feel towards the general public was reported as a result of seeing people at their worst, whether it was because of their own poor choices or in their moments of pain, sorrow, or trauma. One participant reported that the stereotypes he held prior to law enforcement work were brought into his job, and the stereotypes were based upon how he was raised.

People are in usually a sad state or a panic state or a confused state. I don't think I see the world the same as the average person. We people of this profession see the absolute best and the absolute worse that society has to offer. I was overly positive about society, you know, I would give more people the benefit of the doubt. Like, if I go into a situation, before law enforcement, somebody would have to do something negative for me to not trust them. Now, I find it really hard to give people my trust just because I'll never know what their intentions are.

Changes After Work-Related Trauma Exposure

This subtheme of having a stronger spirituality prior to law enforcement was placed in the context as "being more like a Christian" from the interviewees. Having a higher quality of spirituality before entering law enforcement was linked to more activity in religious customs and practices, a closer spiritual connection with God, a better outlook on life, and a very untainted, pure, and clean spirituality. A closer relationship with God and more activity in church groups when first starting the job was reported as being important and part of the officer's identity. However, their spiritual perception changed after entering their law enforcement career. Participants reported that their exposure to the risks and events associated with law enforcement work heightened spiritual awareness. "When people feel

like they have become more vulnerable, their spirituality becomes important.” Witnessing traumatic events in law enforcement led to questioning spirituality and beliefs, such as if there is a God and a bigger meaning to the things they were experiencing.

The level of awareness was different for new LEOs than officers that had more time on the job. After time on the job, one participant reported that he came to realize that most things such as arresting or not arresting a person for an offence was not as important as they first seemed when he entered the job. The change in awareness also transferred to the home environment. Sharing awareness gained from law enforcement work with family was expressed as a way to remind them how good they have it. After entering law enforcement, faith was reported as strengthening after gaining an awareness of the severity of the job due to the number of bad people in his community and the need to help facilitate a positive change.

In responding to work-related events, participants reported that their spiritual perceptions had helped them handle work-related situations. When positive thinking gets reinforced, negativity diminished. Having knowledge of a higher justice or someone potentially watching over them helped officers daily deal with offenders. Over the course of 20 plus years, one officer stated his situational awareness had increased due to realizing that his understanding of spirituality was not complete, and his guardedness was impacting his experiences, insight, and knowledge. Difficulty finding balance between personally held beliefs and the job was the biggest change early in one officer’s career until his mindset changed and he accepted that this is what he is supposed to be doing.

I’ve come to an awareness that I don’t know everything, and I don’t have a complete grasp and understanding on the spiritual world and the way it impacts me and people around me in society in general. I know more than I did [knocks table] 20 odd years ago. I have realized how being guarded like that can actually deprive me of experiences or deprive me of insight or deprive me of knowledge. So, instead of closing myself off to all those experiences, I try to leave myself open, but just increase my situational awareness.

Guidance for Conduct and Motivation

Participants reported that their spirituality guides their conduct and motivation. The majority described their spirituality playing an important role in their moral integrity and was a source of motivation in pursuing a law enforcement career. Spirituality was directly associated with moral conduct and career motivation was connected to a feeling that law enforcement work was a “spiritual calling”. Having something to believe in was expressed as a source of motivation for being in law enforcement. Motivation was linked to a perception of a battle between good and evil in the world. Conduct towards others was described as guided by the officer’s spirituality. Concerns about the afterlife were articulated as affecting interpersonal actions, such as in the way we portray ourselves and act towards others. Spirituality was associated with influencing multicultural interpersonal interactions on the job to help whoever needs justice. Spirituality was directly linked to on-the-job moral integrity. Decision-making on the job was reported as being influenced by spiritual beliefs to consider if decisions are morally acceptable.

Improvement in Mental Health

Participants reported that spirituality improved their overall mental health and mood. This theme included the subthemes of improvement during prolonged exposure to traumatic events in the work environment and improvement in the transition between work and off-

duty environments. The literature pertaining to spirituality improving mental health and serving as a protective factor after exposure to traumatic events was supported by this study. These findings are important due to prolonged exposure to different types of traumatic events in law enforcement work posing a potential direct or indirect risk to the LEOs' physical and mental health, and their personal, family, and professional life.

Improvement During Prolonged Exposure to Traumatic Events in The Work Environment.

Participants reported spirituality improved their mental health during prolonged exposure to traumatic events in the work environment. They described how having a spiritual connection and belief in a higher power improved their overall emotional and psychological well-being. Based on experience, officers reported those who have a spiritual connection and belief in a higher power fair better overall emotionally psychologically from repeated trauma exposure. Spirituality was reported as taking posttraumatic stress away because spiritual beliefs keep the mind clear, prevent anxiety for nothing, and help to remaining careful in managing trauma exposure stress.

Spirituality, practices, and beliefs were associated with a sense of peace, avoiding negativity, and an improved outlook. Participants reported their spirituality, religion, and faith helped in retaining a positive outlook when faced with constant work-related negativity and trauma exposure. One participant discussed how specific traumatic events resulted in an enhanced sense of spirituality and appreciation for life. Specific practices such as engaging in prayer, scripture reading, and going to church were discussed as sources of mental support while processing traumatic events. Both attending church and having a private spiritual connection were identified as ways to seek peace.

Improvement in The Transition Between Work and Off-Duty Environments.

Spirituality, practices, and beliefs were reported as significant in reducing stress and negativity. Often, such feelings are brought home from the job. Issues including dealing with stress, trying to remain positive, and managing anger were identified as problems associated with transitioning between off-duty and on-duty environments. Officers discussed the methods they used to improve their mental health and mood. Framing stressors in a spiritual context as the work of the devil helped some manage stress. When addressing negative issues, positive thinking coping skills improved their ability to remain optimistic. Listening to spiritual media was identified as a way to change negative thoughts. Spirituality also was used as a way to improve anger management by following the tenets of faith that emphasize being kind and treating others as you would want to be treated. A personal relationship with Christ was articulated as something that helped in coping with job stress because the spiritual relationship reduces worry and questioning why something happens.

It helps me with [pause] I guess the adjustment between being on duty and off duty and what I have to deal with on duty. It just kind of keeps me going when I start to feel, ya know, stressed out or something. A lot of times I pray and try to pray for peace and try to be peaceful, especially at some of the end of some of the days I've been working, and it is a little bit more stressful. I mean after all day dealing with other people's problems, and then I have to come home, and I have my own life which has its own problems that I have to deal with, and without feeling the support from God then I wouldn't have the energy and strength to do it all the time.

Cause(s) for Distress

The subthemes of spiritual distress and moral injury emerged after participants expressed thoughts and feelings related to prolonged exposure to traumatic events in the work environment. These subthemes are consistent with literature indicating that after exposure to the environmental risks associated with police work, the officers' physical, psychological, and moral well-being can be negatively impacted by a sense of isolation and a lack of validation from their organizations. Often then, there is a resulting internalization of shame and guilt. These findings are significant due to the potential risk factors in LEO populations that pose an additional risk for work-related stress, depression, and/or suicide.

Spiritual Distress.

The theme of spiritual distress was described by participants in discussing their law enforcement work experiences or responding to traumatic events. Participants shared sentiments related to why bad things happen to good people, gruesome deaths on highways, murders, suicides, children dying, robberies, burglaries, and sexual assaults. Spiritual distress was conveyed as questioning faith, challenging to hold on to beliefs, searching for meaning, and decreasing church participation.

Officers reported that what they witnessed on the job as a LEO had led to questioning their spiritual beliefs as they searched for meaning. Exposure to work-related traumatic events resulted in some officers questioning the very existence of God and wondering if there was a bigger meaning to the things they were experiencing. After witnessing events, officers questioned how God could allow evil to exist. Distress was also expressed in discussing law enforcement partners who had abandoned their faith because they could not harmonize why a loving, all-knowing powerful entity would allow harm to happen to innocent people. Spiritual distress was described as questioning human morality after experiencing the suicide of two co-workers and their possible lack of spirituality.

Participants reported the law enforcement career and exposure to work-related trauma makes it harder to hold on to beliefs and maintain a spiritual connection. Holding on to spiritual beliefs and practices in law enforcement work became harder the longer the officer was exposed to negative and traumatic events. The diminished spiritual closeness also led to God seeming miles away, which created a hard time focusing during prayer and other activities. Their law enforcement career was described as a harsh environment making it difficult to find a place as a Christian. One participant reported it had been stressful having a wavering perception of spirituality and searching for meaning in his life with a LEO mindset. Spiritual distress was also a factor related to decreased church participation after entering the law enforcement field. Faith in organized religion was reported as severely diminished resulting in no church attendance due to lower confidence in religious institutions. Church participation also was reported lower than prior to entering law enforcement due to wanting to take a passive role, which resulted in less connection with a community of parishioners.

Participants reported that their spiritual distress after entering law enforcement had impacted various aspects of their mood and overall well-being including anger, jaded and cynical feelings, and difficulty turning off horrendous experiences for some officers. While interacting with offenders, officers reported struggling with having grace and feeling angry about forgetting to hate the sin and not the person. After entering the job, officers constantly working in an environment with offenders perceived as negative led to cynical thinking and viewing everyone as a perpetrator. Spiritual distress was expressed in discussing coworkers that cannot separate themselves from the horrific work experiences and

LEO suicides. Participants reported counseling as an option for help in processing law enforcement stress and possibly reduce LEO suicides.

The utter depravity of man and just the heartache and the heartbreak and the victim's tears and the spilled blood and the ruined dreams and ruined lives that law enforcement officers see. They just couldn't deal with it, they couldn't figure out a way to understand both, they couldn't harmonize the idea between a loving, all-knowing powerful entity allowing something to happen to innocent people.

Moral Injury

Participants reported different aspects of moral injury including a violation of personal beliefs and values, a negative perception of people and society, a negative public perception of being a LEO, a lack of management support, and choices to go against agency policy. Also described was that being a LEO sometimes requires violating personal and Christian beliefs and values while conducting the requirements of the job. Spiritual and moral conflict were experienced because of a requirement to use inappropriate language and physical altercations in a law enforcement capacity with people daily.

Negative aspects of society were witnessed on the job that violated their moral values. The public's negative perception, hate, and disrespect for LEOs made the job more difficult in the community and changed the officers' image of society. Many experienced distress and a violation of personally held moral values when trying to comprehend the tragic events they responded to on the job such as why and how a person could harm a child, for example. Trying to manage society's unrealistic expectations for justice is more stressful than working the crime scene. Moral distress was expressed within the confines of the LEOs' work organization when an officer may have to go against agency policies at work, such as not following a use of force policy to save a life. Spiritual beliefs may cause officers to go against coworkers when they violate work values and ethics.

The LEOs' management was also identified as another source of moral injury. A lack of leadership support was described as placing the officers in positions where beliefs affect work performance and officer safety and even suicide. When management support is lacking, an environment is created with excessive work demands that cause more stress than working with the criminals. Until LEOs start seeing their leadership involved at the same level in the mission, the risk of suicide is not likely to change.

Our society wants instant justice. It's 2 o'clock in the morning, a crime just happened, and you half a description of something. By 6 o'clock in the evening, they want somebody in jail. Sorry, it does not work that way. I guess it's the lack of patience that our society has, and sometimes even our government. The lack of patience bothers me more in the process than 99% of the things that I see around here and deal with at an actual crime scene.

Discussion

This study supports the literature that indicated a person's spirituality may be impacted by secondary trauma (Lanza et al., 2018) and provides an in-depth description of how exposure to work-related traumatic events impacts an LEO's spiritual perceptions of spirituality, practices, and beliefs. Exposure to trauma may affect the perceived quality of one's relationship with God, which may directly impact mental wellness and worldview (Currier, et al., 2015; Doehring, 2015; Litz, et al., 2009; Magezi & Manda, 2016; Malmin, 2013; Milstein, 2019; Patricia & Hook, 2016; Smith, et al., 2015). The LEOs' experiences of

a perceived moral injury after their deep spiritual and moral convictions, expectations, and general acceptance of society had been negatively impacted also validated previous research findings (Blinka & Harris, 2016; Currier, et al., 2014; Doehring, 2015; Harris, et al., 2015; Kopacz, et al., 2016, p. 29; Litz, et al., 2009; McCormack & Riley, 2016; Smith, et al., 2015). Thus, the results of this study support the constructs found in the literature of the protective factors of spirituality in exposure to traumatic events in other populations (Currier, et al., 2015; Doehring, 2015; Lanza, et al., 2018; Litz, et al., 2009; Magezi & Manda, 2016; Malmin, 2013; Milstein, 2019; Patricia & Hook, 2016; Smith, et al., 2015; Wang, et al., 2014).

The six themes derived through this study provided rich information and insight into how LEOs described their perceptions of spirituality, practices, and beliefs after prolonged exposure to work-related traumatic events. Their responses allowed the uncovering of how that exposure impacted their perceptions in the areas of interpersonal relationships, strength and quality of spirituality, conduct and motivation, and mental health. The interview responses were viewed through the choice theory (Glasser, 1965) and social cognitive theories (Bandura, 1986) to provide an explanation of the participants' descriptions and overall experience.

Theory

From a choice theory perspective (Glasser, 1998), incongruence between the LEOs' perceived worlds and quality world spiritual cognitive images produced a frustration signal experienced as spiritual distress due to a perceived need to connect with something beyond the self (Litwack, 2007; Wubbolding, 2013b). Comparing the information derived from the themes to choice theory (Glasser, 1998) concepts, identifiable practices and beliefs in understanding spirituality, connection to interpersonal relationships, changes after work-related trauma exposure, guidance for conduct and motivation, improvement in mental health, and cause for distress, are noticeably similar to the quality world, and the ability to satisfy basic needs (Bradley, 2014; Cameron, 2011; Dermer, et al., 2012; Glasser, 1965; Glasser, 1998; Henderson, et al., 2013; Prenzlau, 2006; Wubbolding, 2011; Wubbolding, 2013a; Wubbolding, 2013b; Wubbolding, 2015).

The LEOs' moral decisions were based upon preexisting schemas that align with choice theory's concepts of the quality world, perceived world, total knowledge filter, and valuing filter (Glasser, 1998). Every LEO has a unique experience based upon their individual perceptions of the information received from the real world through the five senses that form their perceived world image. The sensory system filters the input received from the real world and the perceptual system interprets the information received (Mickel, 2013; Mickel & Miller, 2013). The total knowledge filter compares the received information to the individuals learning and experiences throughout their lives (Glasser, 1965). If the information is perceived as meaningful, it passes to the valuing filter. The information that passes through the valuing filter is given a value of pleasurable (positive), painful (negative), or neutral (Glasser, 1965). Moral and spiritual issues experienced by LEOs link their knowledge filter with their valuing filter which determines what they consider as important or unimportant, and/or meaningful or senseless (Wubbolding, 2013b). The LEOs' future spiritual goals to improve interpersonal relationships also was associated with the incongruence between their perceived worlds and their quality world images (Glasser, 1965, Haskins & Appling, 2017; Prenzlau, 2006).

Glasser stated long ago that any psychological problem is related to a relationship issue (Glasser, 1998). The participants' frequent references to their interpersonal relationships in their on-duty and off-duty communities and family interactions relate to attempts to gain an

internal sense of control in their lives (Robey et al., 2017). This attempt to gain control over their relationships was described in their awareness of how their exposure to work-related traumatic events and the rigors of the job had resulted in a negative perception of people (perceived world) and their distress in this negative perception not matching the relationships they want to have (quality world) (Glasser, 1998). Feeling a lack of control over a situation denies satisfaction of the need we all have for power, which is personal power or ability to make choices (Glasser, 1998).

The themes also align with social cognitive theory's (Bandura, 1986) concepts of trauma-related disorders which propose that traumatic events conflict with people's existing schemas, environments, and worldviews (Litz, et al., 2009). The moral injury distress described by the LEOs was a result of trying to make sense of work-related environmental stimuli. Social cognitive theory (Bandura, 1986) proposes that morally intense issues will heighten the individual's perception and attention of environmental factors and affects his or her awareness of moral issues, judgments, goals, and behaviors (Wurthmann, 2017).

Trying to gain an internal sense of control in relationships is also consistent with the social cognitive theory (Bandura, 1986) view that people use their worldviews to both develop and maintain their specific values and beliefs which involves developing social environment beliefs based upon prior experience and behave in ways that are consistent with validating their beliefs (Gopinath, 2015; Lucas, 2014; Parker & Taylor, 2015). Considering the reported attention to environmental factors and heightened perceptions, social cognitive theory explains effects on officers' awareness of moral issues, judgments, goals, and behaviors (Wurthmann, 2017).

Conclusions

As noted, the dominant theme overall for the participants in the study was related to interpersonal relationships. Study participants shared that their interpersonal relationships in their on-duty and off-duty environments were improved because of their spirituality, which is important due to the negative shift in the way they perceived people on a world, community, and family level after exposure to work-related traumatic events. This awareness of how the job had influence was a source motivation for future spiritual goals related to improving interpersonal relationships. Significant in the data were concerns about the welfare of suicidal law enforcement officers. The perceptions of how their spirituality improved interpersonal relationships in their on-duty and off-duty environments were consistent with previous research that indicated the first responder's perception of optimism, support system, family relationships, spirituality, and an interpersonal characteristic may serve as protective factors (Lanza et al., 2018). In some cases, experiencing a traumatic event may produce a positive psychological change referred to as posttraumatic growth, and these positive psychological changes may include a greater appreciation of life, stronger resilience, improved intimate relationships, enhanced spiritual wellbeing, realignment of life priorities, and openness to new opportunities (Acquaye, 2017; McCormack & Riley, 2016; Nakagawa, et al., 2016; Thomadaki, 2017).

Having a spiritual connection and belief in a higher power played a significant role in improving mental health according to the present study. The participants' spirituality was directly linked to improving their overall emotional and psychological well-being during and after prolonged exposure to traumatic events. Spirituality, practices, and beliefs also were a significant factor in reducing stress and negativity that is often brought home from the job. These findings were consistent with research indicating that spiritual connection through participation in memorials, vigils, and anniversaries helps facilitate healing and growth, and reasserts identity, relatedness, positive core social values, and resilience (Currier, et al.,

2014; Doebling, 2015; Smith, et al., 2015). Evidence supports there is a direct relationship between the perceived quality of a persons' spirituality and their mental health wellness, including managing anxiety (Ellison, et al., 2014). The perceived quality of one's relationship with God may directly impact mental health wellness and worldview (Currier et al., 2015; Doebling, 2015; Ellison, et al., 2014; Lanza, et al., 2018; Litz, et al., 2009; Magezi & Manda, 2016; Malmin, 2013; Patricia & Hook, 2016; Smith, et al., 2015). Spirituality also provides protective factors in mental health, including resilience, self-compassion, and self-care (Currier, et al., 2015; Doebling, 2015; Lanza, et al., 2018; Litz, et al., 2009; Magezi & Manda, 2016; Malmin, 2013; Milstein, 2019; Patricia & Hook, 2016; Smith et al., 2015).

In this study, there is a clear association between exposure to high-risk situations and traumatic incidents and changes in perceptions, practices, and beliefs related to spirituality. The impact of prolonged exposure to work-related traumatic events on spiritual perceptions is more than a minimal significance since it has the potential to affect the LEO's mental health wellness, interpersonal relationships, conduct and motivation, community and social interactions, worldview, and may be a cause for distress. In keeping with the participants' concerns, the findings of this study become even more crucial when considering the growing suicide rate among LEOs (Klinoff, et al., 2015; Malmin, 2013; Ramchand, et al., 2019; Violanti, et al., 2016).

Future Research

Understanding the specific traumatic events that may have caused spiritual or moral distress could possibly help in the development of preventive programs to improve future resilience. Investigating how the LEO's work-related spiritual or moral distress impacts the family relationship through the perspective and experience of the spouse/partner would be enlightening. The participants in this study discussed their perceptions of how prolonged exposure to work-related traumatic events affected their interpersonal relationships. Thus, having the spouse/partner's insight could help in the development of family-oriented programs.

Another area for further research would be replicating this study in various locations with larger populations due to interviewing officers from only five geographical locations throughout the United States. The participants in this study predominantly held Christian beliefs, therefore, replicating this study with various other religious orientations would add additional validity, credibility, and generalization to these findings. Furthermore, exploring how prolonged exposure to work-related traumatic events impacts the LEO's perceptions of spirituality and the resulting impairments in many areas of functioning from a theoretical perspective could improve future counseling outcomes for an at-risk population.

Interventions

Choice theory (Glasser, 1998) provided a theoretical framework to this study and explains the cognitive functioning related to the LEOs' perceived quality world and their ability to satisfy basic needs (Bradley, 2014; Henderson et al., 2013; Wubbolding, 2012; Wubbolding, 2013a; Wubbolding, 2013b; Wubbolding, 2015). Delivered through the use of reality therapy, understanding that behavior is considered purposeful, counseling interventions can utilize the goal-directed analysis of total behavior (Wubbolding, 2011). What is left after this study are necessary interventions that assist the LEOs and other first responders to develop healthy strong behavior choices that are satisfying and provide for the internal locus of control that can be strengthened through spiritual practices and beliefs. Counselors can help such clients to grasp their perceptions that may be distorted so that appropriate choices can

lead to satisfaction of their wants and needs. LEOs desired a job that is not only helpful to their communities but also provides a meaningful relationship with others that is communicated through messages that are perceived by others as “assertive, courteous, and considerate” (Wubbolding, 2011, p. 50). A strong relationship with the counselor enables clients to self-evaluate their actions, thoughts, feelings, and physiological reactions and change them.

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Brief Bios:

Wesley B. Hartman, PhD, LPC, is an instructor in the School of Education and Human Services at Amridge University. His current research examines the aspects of spirituality impacted by prolonged exposure to traumatic events for law enforcement officers who have experienced work-related traumatic events. Prior to receiving a Master's in Professional Counseling from Amridge University and a PhD in Counselor Educational and Supervision from Capella University, Dr. Hartman spent over 30 years of combined service as a law enforcement officer, firefighter, and active-duty military service member. His experience gained in the field provides insight into the roles and responsibilities of law enforcement officers, the demands of the job, and the emotional toll on responders and their families.

Jeri L. Ellis, EdD, LPC, is a Core Faculty member at Capella University and Program Coordinator for the CES doctoral program. She has been in teaching and supervision for 18 years. Dr. Ellis was one of a CTRT training group called the Glasser Scholars and has been active with the Research Committee for the William Glasser Institute for many years. She maintains a very small private practice where she utilizes primarily Choice theory in the Reality therapy framework. Since teaching at Capella for over 11 years, she regularly provides role play demonstrations for Reality therapy for master's counselors in training. Dr. Ellis's research interests are qualitative and focused on a wide variety of topics. I give thanks and consideration to my training with Dr. Robert Wubbolding, John Brickell, and of course, Dr. William Glasser.