

Volume XLII  
No. %

Fall 2022

International Journal of  
Choice Theory® and  
Reality Therapy



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

**Volume XLII, No. 1, Fall, 2022**

## **Table of Contents**

	Listings of authors and titles and more	
	Intro to the IJCTRT editor and the editorial board	2
	<b>"CT/RT Brief Bios" Needed</b>	3
<hr/> <b>Thomas S. Parish</b>	The world really needs your "brief bio"!	5
<hr/>	<b>Good opportunities to become published in IJCTRT</b>	6
<b>David Jackson</b>	You think deeper than the rest of us!	8
<b>I. Deniz &amp; S. Sevim</b>	Can Reality Therapy increase psychological need satisfaction and subjective well-being of teachers? A study from Turkey	11
<b>Thomas S. Parish</b>	So, what do you expect? How teachers' cognitive/behavioral choices can ultimately influence their stresses and successes	37
<b>Robert E. Wubbolding</b>	Self-evaluation: The bullseye in Choice Theory/Reality Therapy	41
<b>S. Lopez &amp; P. Robey</b>	Utilizing Choice Theory to empower parents of children who are at-risk of school failure	46
<b>E. Davis &amp; B. Torres</b>	Using Reality Therapy to counsel elementary students with chronic conditions	54
<b>Jane V. Hale</b>	Ways to facilitate improvements within the educational community through the use of Choice Theory, Reality Therapy, and other Glasser-related concepts	61
<b>B. Birnbaum &amp; L. Frey</b>	Using Total Behavior and basic needs to enhance educator and student well-being	64
<b>S. Bogolepov</b>	Total behavior of the holy fool	74
<b>Cynthia P. Mason</b>	Some better ways to teach Total Behavior	76
<b>C. P. Mason, L. Dye &amp; L. Bennett</b>	Book review of mindfulness strategies for helping college students manage stress: A guide for higher education professionals	82

## **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](mailto: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](http://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.

**Jeri Ellis**, Ed.D., Licensed professional counselor in Atlanta, GA, and has also served for many years on the Research Committee for William Glasser International.

### **IJCTRT Technical Advisor:**

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

# "CT/RT BRIEF BIOS" NEEDED!

## HAVE YOU SUBMITTED YOUR "BRIEF BIO " for INCLUSION in the SPRING 2024 ISSUE of the *INTERNATIONAL JOURNAL of CHOICE THEORY and REALITY THERAPY?*

On April 15, 2024, our FINAL summary of all our "CT/RT Brief Bios" will be published in the Spring issue of the *International Journal of Choice Theory and Reality Therapy*. Many members and friends of the Glasser Institute for Choice Theory (GIFCT) have already provided their CT/RT Brief Bios, which have previously appeared in either the Fall 2020 or the Spring 2021 issues of the *International Journal of Choice Theory and Reality Therapy*. Those inclusions will be once again included in the 2024 issue of the Journal unless you submit a more current copy in the interim (i.e., between now and then) that updates your professional activities for all to appreciate. However, many more members and friends of GIFCT have not done so yet! If you're among those that have submitted your CT/RT Brief Bio before, please (1) update your CT/RT Brief Bio for us (if you wish), or (2) if you haven't yet, you should do so if you wish to be included in this timely record of GIFCT. Please note that everyone should be included for everyone's sake. Please allow me to explain why this is so.

First, there is no charge to you, or to anyone else, for providing you this service. In other words, it's FREE!

Second, this is a great way to keep track of people, to see what they've done, what they're doing, and possibly find out what they're planning to do!

Third, this should be a great source of information regarding how we could communicate with each other, with updates appearing annually thereafter at the William Glasser International website (i.e., [www.wglasserinternational.org/updates](http://www.wglasserinternational.org/updates)).

Fourth, our CT/RT Brief Bios should also be helpful to those who wish to collaborate with you on various projects or seek to retain your services for doing in-services, presentations, and/or other similar professional activities. Importantly, your professional summary listed within your CT/RT Brief Bio should serve you nicely to familiarize everyone with what you've done, what you're doing, and/or what you plan to be doing for many years to come. Furthermore, your CT/RT Brief Bio will be circulated to all of our members and friends around the world, and will be available on our website, too, at no cost to you!

Fifth, once you've done this most everyone will likely be able to "look up" who you are and what you've done, but if you don't submit your CT/RT Brief Bio for inclusion in the upcoming 2024 issue of the Journal you'll likely not be remembered for all that you did as a William Glasser "contributor" and/or "collaborator."

Sixth, while there are many members and friends still with us, some are not! That being the case, we need to also remember those who have passed on and how they would like to be remembered. Those of us who have known him/her, and revered him/her, should write up a brief note for him/her, too, acknowledging the wonderful things that s/he did for all of us. In the Fall 2020 issue of the IJCTRT I included such a note for Dr. Lawrence Litwack, who was a dear friend as well as the editor of the *Journal of Reality Therapy* (1981-1996) and the *International Journal of Reality Therapy* (1996-2009). My tribute to Larry appears on page 119 of that issue of the *Journal*. Now, if you are so inclined, you might follow suit and write a tribute of your own, for someone who did himself/herself proud as a member of GIFCT, but has passed on, and submit your tribute to me ([parishts@gmail.com](mailto:parishts@gmail.com)) at your

earliest convenience, but no later than February 1, 2024. Allow me to assure you that you'll be glad you did!

Directions regarding how to prepare your CT/RT Brief Bio can be found in this issue of the Journal (please see below). So please send your "CT/RT Brief Bio" to me at your earliest convenience, but not later than February 1, 2024. If you don't, just imagine your loss by not sharing with your fellow members and friends of GIFCT 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 "CT/RT Brief Bio" to me at [parishts@gmail.com](mailto: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!"

### **Directions for Submitting Your "CT/RT Brief Bio" for Inclusion in the Spring 2024 Issue of the International Journal of Choice Theory and Reality Therapy**

The only requirement is that each "CT/RT Brief Bio" should be no longer than two (2) pages in length, prepared in Verdana, ten-point type, and be sure to include Name, Address, e-mail Address, and Phone Number at the outset of page 1.

If you wish to include special skill sets and/or experiences that you've had or possess that would be especially helpful in dealing with specific populations, such information may be included on a third page.

Otherwise, the best counsel that I can provide the potential submitter is that s/he should review copies of available "CT/RT Brief Bios" and decide what might work best for him/her and what s/he is seeking to do! These copies are readily available in Volume 40 (#1) and 40 (#2) of the *International Journal of Choice Theory and Reality Therapy*, which are located at the following website:

[www.wglasserinternational.org/journals](http://www.wglasserinternational.org/journals)



# **The World Really Needs Your “Brief Bio”!**

**In many ways your “brief bio” is much like a seed,  
which, if properly used, could help us all to succeed!  
Yes, the seed needs to be planted and allowed to grow,  
while your “brief bio” needs to be shared, this much we all know!**

**If this doesn’t happen, then our lives will not likely be improved,  
and crucial opportunities could be lost if they’re not properly used.  
So kindly plant your seeds and submit your “brief bios,” too,  
because if you don’t all of us will very likely lose!**

**Notably, since this opportunity may never come again,  
we’ll likely wonder what message our actions will send.  
But if you do so many benefits will likely accrue,  
besides, it simply is the “right thing” for you to do!**

**So, please make your move, and just do what you need to do,  
so that people everywhere will come to learn more about you!  
By doing so, you’ll likely benefit many who need you right now,  
but that won’t happen until you tell them about yourself somehow!**

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

## GOOD OPPORTUNITIES to BECOME PUBLISHED in IJCTRT

I was once told that "I should never worry about whether or not I had a 'good' opportunity. Rather, I simply needed to be 'good' to 'every opportunity.'" Well, I have lived my life as much as possible according to this saying or motto. How about you? Another notion that caught my attention was the great value of "paying it forward", in order to help other people to more likely excel.

Notably, I actually put these two ideas together a few months ago and sent out letters to many people inviting them to write a one-to-five page paper to the Journal describing how William Glasser's Reality Therapy, Choice Theory, or other Glasser-related concepts or teachings might relate to various topics. But wait, there's more.

I then asked those who were willing to write such a paper to do so by starting out like this:

Your mission is to describe in what ways does Choice Theory, Reality Therapy, and other Glasser-related concepts interact with any of the following topics:

A. Trauma treatment and/or the therapeutic process	Taken
B. What the world needs now	Open
C. Self-evaluation	Open
D. Ways to find suitable employment	Open
E. Ways of fostering better relationships with others	Taken
F. Ways of promoting academic achievement	Taken
G. Dealing with the "empty nest syndrome":	Taken
H. Promoting excellence in the mental health field	Open
I. Facilitating improvement within the educational community	Taken/Done
J. Ways of connecting and/or becoming more involved w others	Taken
K. Research techniques within the psychological sciences	Taken
L. Ways to facilitate better leadership skills	Taken
M. Ways of impacting various forms of behavioral assessment	Open
N. Ways of enhancing locus-of-control and self-concepts	Taken
O. Other counseling and therapeutic techniques	Open
P. Our various research efforts and assessment techniques	Open
Q. Addictions in their various forms	Open
R. New ways to promote better law enforcement techniques	Open
S. Better ways to teach Total Behaviors	Taken/Done
T. Ways to help people to achieve greater happiness	Taken
U. Ways to deal with health-related and age-related challenges	Taken
V. Ways to improve our goal-setting and plan-making endeavors	Open
W. How we might improve ourselves in various ways	Taken
X. Ways by which we can better meet our various needs	Open
Y. Total Behavior: Energy-field and self-feeling	Taken
Z. Ways to enhance relationships between CT/RT practitioners	Taken
AA The need to think deeper	Taken/Done
BB _____	_____
CC _____	_____
DD _____	_____
EE _____	_____
FF _____	_____
GG _____	_____

Regarding sign-ups so far, I've had fifteen members of GIFCT sign-up, but only three (3) members have actually gotten their submissions in and had their articles published in the Fall 2022 issue of the *International Journal of Choice Theory and Reality Therapy*, which leaves twelve (12) that have chosen to wait and write a paper for submission for publication in the Spring 2023 issue, plus there are additional slots (see 11 "open" slots), too, with other topics of your own choosing (i.e., BB, CC, DD, EE, FF, HH), and if you want any of these spaces you should drop me a line ([parishts@gmail.com](mailto:parishts@gmail.com)) telling me what topic you wish, and please do so as soon as you can, because there can only be so many slots that will actually be available, and they will be distributed purely on a first-come, first-serve basis. Be sure to mark your request in the space provided "Slot requested" and then indicate the topic of your choice. This is very likely your best opportunity to publish your ideas, in a comfortable format (requesting submissions of only 1 to 5 pages). Remember, formatting of these articles will simply be like the ones published in this issue, so don't delay! Sign up for your chosen topic and be sure to do it today!

Deadlines for all publication-related submissions to the Journal have been set for February 1, 2023!

If the potential author has any questions and/or concerns regarding any part of this process of becoming an author, just call me and I'll be glad to help you through this entire publication process.

Thomas S. Parish, Editor, IJCTRT  
e-mail: [parishts@gmail.com](mailto:parishts@gmail.com)  
Phone: (785) 845-2044



## **YOU THINK DEEPER THAN THE REST OF US**

David Jackson, Ed.D.

### **Abstract—**

The mission interest that Dr. Glasser proposed is primarily active in three institutions in the United States. They are education, corrections, and mental health. This paper examines Dr. Glasser's comment on deep thinking and proposes a way of going beyond just three institutions in promoting his mission. An outline is provided to obtain this goal of promoting Dr. Glasser's mission to the public-using sitcoms.

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It was 2004, and Dr. Glasser asked me and Sharon if we would be willing to help him and Carleen in their book booth at the American Counselors Annual Conference. He proposed taking care of all our expenses that included one night stay at the hotel and the conference costs so that we could attend some of the workshops. He also said that I could display my books in the booth. Sharon and I agreed to the proposal, and we met them in their book booth. Dr. Glasser had been asked to give the opening address to start the conference. When he finished, he came back to the booth and asked me if I would like to go with him to Bob Wubbolding's workshop. I joined him and we walked down to Bob's workshop. We said nothing as we walked along. About halfway to the workshop, however, Dr. Glasser said, "You think deeper than the rest of us." HUH, came to my mind but I said nothing. Here is this giant thinker, this genius telling me that I think deeper than he does! As I walked back to the booth, I began to recall incidents that he was most likely referring to.

The first incident occurred in 1991 when I was the Assistant Administrator. The first day on the job in 1989 the Administrator said, "You might want to attend a workshop we have going regarding Glasser's Reality Therapy. Ms. Jeanette McDaniel, one of his instructors is conducting it." I did as he suggested and was immediately interested in learning more. Jeannette suggested I enroll in the Basic Week she was beginning the next week. I signed up and the next week I began my journey to become a part of the Glasser organization.

Over a period of 18 months, I completed the Basic Week, the Basic Week Practicum, the Advanced Week the and the Advanced Practicum and Certification. During this period, I was busy scheduling training for twenty-six members of the probation staff. When all twenty-six were ready for Certification we could not afford to send all of them to the WGI office in California at the same time. At that time there were only two places offering certification classes. The main office and at the city where the annual conference was being conducted each July.

I called the main office and Dr. Glasser answered the phone. I told him my dilemma and asked him if he could send 2 or 3 instructors to provide a Certification Week at our juvenile court. I said that we would provide the classroom space for them and provide room and board. The phone line became quiet. After a few seconds Dr. Glasser said, "I will have to run this by the Advisory Board and see what they decide. Well, this was a bit misleading. When I became a member of that Board, I soon learned we made few decisions. We were advisory. Non-Profits must have an advisory group to receive the tax breaks they do.

A few weeks after my call to Dr. Glasser, the president of the Board, Tom Smith, called me. He informed me that Dr. Glasser had shared his conversation with him and that the advisory board had decided it would set a precedent that they could not afford to follow.

A few years went by, and I had left the court when the Institute decided to take Certification to those sites that would sponsor them. The first one they went to was, the court where I had the twenty-six people ready for certification.

Another incident occurred when I became a member of the Advisory Board. I was elected Director of the Mid-America region and served in that capacity for 6 years. When you are Director of a region you automatically become an advisory board member. We were flown to the institute for board meetings at least twice a year. In one of the meetings Linda Harshman, Director of the Institute, had as an item on the agenda, "How to increase the number of Basic Weeks that were being taught." There was some discussion but nothing concrete was decided about what to do. I spoke up and said, "We need a promoter to work up an advertising plan including TV appearances. Glasser said, "Advertising does not work for Non-Profits." I waited a few seconds as everything got very quiet, then I reluctantly contradicted Dr. Glasser. I said, "Well, I know it does because I have done it. When I was Director of Mental Health in Tulsa, Oklahoma, I appeared on television numerous times at no expense. The TV stations must provide a certain amount of time for non-profits by law. When I became CEO of the Fort Worth Boys Club, I appeared on TV recruiting volunteers and money too. It was free and very successful." Everything was quiet in the room and Linda moved on to the next item on her agenda. A few months later Glasser hired a man to promote Choice Theory and Reality Therapy. The guy had no idea what he was promoting, and it flopped. What Glasser and I forgot to focus on was that the person had to know what he was promoting.

The next experience that Glasser may have been referring to happen a few meetings later. I proposed we consider working up a sitcom based upon Choice Theory and Reality Therapy. Nothing more was said of the idea at the time. A week later Linda called me and asked if I would be willing to play a young Dr. Glasser in a play they were working on? I told her I would be honored to do so. Dr. Glasser could not give up the limelight. He and his daughter, who was a movie actress, worked up a skit and he played a young, a middle aged, and an older Dr. Glasser. They performed before a live audience without any preliminary information to them about what they were going to see. As a result, the skit flopped.

In their February/March magazine AARP published some information on over forty sitcoms and the message they brought to their audiences was that they had the greatest influence on our collective culture. I have included a list of ten sitcoms copied below. To read the entire article of over forty sitcoms you may go to [aarp.org/magazine](http://aarp.org/magazine) and order a copy.

The name of the article is THE TV SHOWS THAT CHANGED AMERICA. They start out with ALL IN THE FAMILY with Archie Bunker. They describe it as a BARRIER-BREAKING SITCOM.

I am ninety-two and this is probably my last deep thinking as Dr. Glasser would describe it. A committee of three, six or nine people who have had some experience with proposals and/or grant writing should work up a proposal for presenting a sitcom to conduct Dr. Glasser's stated mission. The committee would then approach

foundations and companies who had sponsored the forty sitcoms that AARP wrote about in their article. I would suggest starting out with the Ford Foundation and Hallmark since they are quite generous in sponsoring programs designed to make people's lives better.

This is an idea that deserves to be examined and implemented, probably as soon as possible. The future of the entire organization very likely hangs in the balance! After all, when it takes off it could readily be "the talk of the town" all over the nation and possibly all around the world! Basically, we simply need to say to ourselves that, "Either we can, or we can," and then explore how best to make it all happen, and then DO IT!! Truly, we need to stop "burning daylight," and seek to develop all the insights needed to make this process work to WGI's benefit!

### **Brief Bio—**

Dr. David Jackson is professor emeritus at Texas Christian University. He served two terms as the Director of the Mid-America region and was on the Advisory Board for Dr. Glasser. He is a Senior Instructor with the organization. He has written seven books on Choice Theory and Reality Therapy. He and his wife, Sharon, reside in Excelsior Springs, Missouri.

# **CAN CHOICE THEORY/REALITY THERAPY INCREASE THE PSYCHOLOGICAL NEED SATISFACTION AND SUBJECTIVE WELL-BEING OF TEACHERS? A STUDY FROM TURKEY**

Dr. İbrahim DENİZ  
Prof. Dr. Seher SEVİM

## **ABSTRACT**

The aim of the present study was to examine the effect of a Choice Theory/Reality Therapy (CT/RT) based psychoeducation program on the psychological need satisfaction and subjective well-being levels of teachers. This study was conducted with paired experimental and control groups with pre, post and follow up measures with a quasi-experimental 2x3 factorial design. Within the scope of the study, a psychoeducation program of six sessions was developed, and this program was administered to the teachers on a once-a-week basis. As data collection instruments, Positive and Negative Affect Schedule-PANAS (Watson et. al., 1985), The Satisfaction with Life Scale-SWLS (Diener et. al., 1985), and The Psychological Needs Inventory-PNI (Eşici, 2014) were used. The data were analyzed with a mixed-design ANOVA. As a result of the present study, it was observed that for the experimental group that received the psychoeducation program, the SWLS, the Positive Affect (PA) subscale of the PANAS, and the PNI scores of participants were significantly increased compared to the control group, whereas the Negative Affect (NA) subscale of the PANAS scores were significantly decreased compared to the control group. The demonstrated changes were also observed to continue in the follow-up tests.

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## **INTRODUCTION**

The qualification of the teacher is one of the most important factors that influences educational outcome. In the literature, there is no consensus on the qualification of the teachers. However, it is accepted that the quality of the teacher is the most important school-related factor on the academic success of students (McCallum et al., 2017; Organization for Economic Co-operation and Development [OECD], 2005). The teacher is the main actor of the education process, and the leader of the learning environment in the class. The Teacher is the person that determines the class and the learning climate to a large extent and the person that students mostly interact with. Furthermore, teaching as a profession is differentiated from other professions by the long term and significant relationships formed between the teacher and the students (Klassen et al., 2012). Even though such long-term and significant relationships might also be formed in the healthcare field or other various professions, almost none of the professional members and the service recipients in other professions spend as much time together as the teachers spend with the students. The relationship that teachers establish with the students is one of the important factors that directly affects the cognitive, emotional and social development of the students (Brown, 2011).

There are many research studies in the literature that investigated the effect of the teacher-student relationship on the academic success of students. The results of these studies demonstrated that the academic success of the students who had established good relationships with their teachers was higher (Cornelius-White, 2007; Çelik et al., 2018;

Hamre & Pianta, 2001; Roorda et al., 2011;). Furthermore, the effects of good student-teacher relationships are not only limited to enhancing academic success. In addition, students that have good relationships with their teachers more often employ intrinsic motivation (Bieg et al., 2011), and have a more positive attitude toward learning subjects and toward school (Roeser et al., 1996). Such students show fewer problematic behaviors and form better relationships with their friends (Obsuth et al., 2016), and have a better sense of belonging to the class and get involved less often in peer conflicts (Barr & Parret, 2001). Furthermore, various studies demonstrated that the healthy relationships established with teachers helped students to be happier individuals by increasing their psychological need satisfaction (Aldridge & McChesney, 2018; Froiland et al., 2019).

Despite the substantial effects of teachers on students and educational outcomes, expectations from teachers are changing and becoming more complicated depending on changing roles and functions of schools in many different countries (Organization for Economic Co-operation and Development [OECD], 2009). With advancements in the information and communication technology arena, schools are saturated with children and young people that are more aware of the limitations of schooling and teachers (Day & Qing, 2009). Although teachers strive to fulfill the difficult task of providing an efficient education for students that are from various cultures and socioeconomic backgrounds, with different personality and educational needs, and in many instances, they are disadvantaged or have behavioral problems, while often stuffed in mostly crowded classrooms. In order for the education and training process to reach its goals, the teachers have tasks such as planning the course of learning, initiating and administering such processes, developing assessment instruments, and applying and evaluating such instruments. In addition to all these tasks, motivating students to the subject of learning, establishing and maintaining an effective communication link with parents, making an effective use of computer and internet technologies, and working with various boards, units or commissions are some examples of duties that the teachers often have (OECD, 2005).

To establish healthy relationships with students and to be effective actors in education and training, it is certain that having a high level of subjective well-being is one of the most important requirements for teachers. It is not realistic to expect teachers who are not happy teaching to adequately promote the establishment of healthy relationships with students and be a veritable fountain of effective and efficient educational and training practices. The subjective well-being of most teachers is thought to be deeply attached to the quality of the work done by the teachers (Centre for Education Statistics and Evaluation [CESE], 2014). Teachers with high subjective well-being levels appreciate their students more and have a healthier class management style (İhtiyaroğlu, 2018). Such teachers use more effective teaching strategies (Moè et al., 2010), and are better able to help their students in situations that put a strain on the students' mental health (Sisask et al., 2014). In addition, high levels of well-being in teachers makes a positive contribution to the teachers' performance as a whole, to the development of any/all teacher-student relationships, and to the improvement of students' well-being (Glazzard & Rose, 2019).

Especially in recent years, the observed and increasing amounts of insufficiency in the number of teachers; leaving the profession early; and the decrease in the attraction of

teaching as a profession have led to increased attention towards teachers' well-being (Viac & Fraser, 2020). In this context, a substantial amount of research has been conducted regarding the well-being of teachers. The majority of these studies focused on discovering variables that are related to the subjective well-being of teachers. The research has basically demonstrated that the well-being of teachers is related to various personal characteristics such as self-esteem and self-efficacy (Kılıç et al., 2013; Zee & Koomen, 2016); gratitude, forgiveness and the orientation toward being happy (Chan, 2013); psychological capital (Soykan et al., 2019); emotional intelligence (Vesely et al., 2013); and high job satisfaction levels (Terzi, 2017; Vanteenkiste et al., 2007). The research also demonstrated that the well-being of teachers is related to organizational attributions such as the quality of school life (Önder & Sarı, 2009); school climate (Collie et al., 2012; Gray et al., 2017); and leadership style of school administrators (Haddad & Ahsqar, 2020; Heidmets & Liik, 2014). In addition, there are also studies in the literature that have examined the effects of various intervention programs on teachers' subjective well-being. For example, Chan (2010) reported that the eight-week gratitude intervention program increased the subjective well-being levels of teachers. In another study, Rahm and Heise (2019) demonstrated that a five-week intervention program that included emotion regulation, time management, gratitude and various positive psychology interventions increased the subjective well-being levels of the teachers.

Dr. William Glasser has also emphasized the importance of happiness of teachers on subsequent educational outcomes. Dr. Glasser (1999b/1990, 2000a/1992), stated that teachers should learn and apply the principles of Choice Theory and Reality Therapy (CT/RT) in order to help students to be happier and more successful in school. According to Glasser, teachers that learn the concepts and principles of CT/RT, that increase their awareness regarding such principles, and apply these principles to their lives will meet their psychological needs more effectively and responsibly, which will enable them to be happier, more functional and more effective educational leaders. According to Dr. Glasser, the teachers, principals, students and auxiliary staff are parts of the school system, and it is crucial for all the school staff to learn to meet their psychological needs effectively and responsibly and become happier and more productive individuals in order to increase the quality of education as a whole and accomplish the goals of schools. Almost all theories of psychotherapy focus on increasing individual happiness of the people. Unlike many other theories, though, CT/RT offers comprehensive and functional explanations on how its principles can be applied in schools. In addition, CT/RT includes practical and easy-to-teach educational models and skills. This training provides important concepts that have proven helpful, even in crowded schools that have a very limited numbers of mental health workers.

There are several studies that have been conducted in Turkey regarding the effects of CT/RT interventions in various educational environments. Some of these studies have demonstrated the effectiveness of the CT/RT-based interventions on increasing the sense of a success identity and responsibility levels which can be useful today with primary school students (Yalçın, 2007), as well as school bonding, school attendance and learning skills levels of the secondary school students (Bellici, 2012). Some other studies conducted in Turkey also demonstrated the effectiveness of CT/RT-based interventions on decreasing career problems (Gül, 1996) and cyberbullying behaviors (Tanrıku, 2013) among high school students; social anxiety levels (Palancı, 2004), academic procrastination behaviors (Çelik, 2014), and anger levels (Özmen, 2004) of university students. The effects of CT/RT-based interventions were also investigated in other countries. For example, Nematzadeh and Sary (2014) examined the effect of group RT on the happiness levels of teachers. In this



quasi-experimental study, which was conducted with pre-test, post-test, and control groups, the experimental group received a group RT that lasted for 10 weeks, whereas the control group did not receive any treatments. The researchers reported that the group RT program was effective in increasing the happiness of the teachers. Some other research conducted in other countries demonstrated that the interventions based on CT/RT was effective in increasing high school students' perceptions of need satisfaction (Loyd, 2005), the subjective well-being and interpersonal relations of nursing students (Lee, 2015) and the internal locus of control and responsibility levels of primary school students (Kim, 2002).

When all these studies are examined, it can be stated that the effects of CT/RT on students has attained a significant level of attention in both Turkey and the other countries. Nevertheless, apart from the research of Nematzadeh and Sary (2014), no research intended for teachers had been conducted. Glasser (1999b/1990, 2000a/1992), argued that gaining knowledge, skills and awareness about CT/RT would increase the psychological need satisfaction and happiness of teachers, and emphasized the importance of educating the teachers about CT/RT. On the other hand, the empirical research testing the ideas of Glasser are very limited. The present study will likely fill this gap in the literature. In this context, the following hypotheses were tested in this study:

**H1:** At the end of the experimental procedure, there will be a significant increase in the level of psychological need satisfaction of the experimental group compared to their pre-test measurement, and post-test measurement of the control group. Furthermore, the difference in the post-test measurements of psychological need satisfaction between the experimental and control groups will persist in the follow-up measurement as well.

**H2:** At the end of the experimental procedure, there will be a significant increase in the life satisfaction level of the experimental group compared to their pre-test measurement, and the post-test measurement of the control group. The difference in the post-test measurements of life satisfaction between the experimental and control groups will continue in the follow-up measurement as well.

**H3:** At the end of the experimental process, there will be a significant increase in the level of positive affect of the experimental group compared to their pre-test measurement, and the post-test measurement of the control group. Once again, the difference in the post-test measurements of positive affect between the experimental and control groups will continue in the follow-up measurement as well.

**H4:** At the end of the experimental process, there will be a significant decrease in the negative affect level of the experimental group compared to their pre-test measurement, and the post-test measurement of the control group. The difference in post-test measurements of negative affect between the experimental and control groups will continue in follow-up measurement as well.

## **METHOD**

### **Research Design**

The research was conducted as a quasi-experimental study with a pre-test, a post-test, and a follow-up test for both the experimental group and the control group. Paired design with 2X3 factors was used in the present study. The first factor corresponded to the independent treatment groups (experimental group and control group), whereas the second factor corresponded to the repeated measurements of the dependent variables (pre-test, post-test, and follow-up test). In this study, the control group was formed by one-to-one matching with the experimental group based on the gender and PNI scores of the participants, rather

than randomly assigning the participants to experimental and control groups. In the present study, the pre-test was applied to the experimental and control groups one week before the experimental process started; the post-test was applied one week after the completion of the experimental process; and the follow-up test was applied five months after the completion of the experimental process. After the psychoeducation program was developed, it was piloted with a group of 18 senior grade Psychological Counseling and Guidance students from Ankara University before being applied to the teachers in the present study.

## **Participants**

The participants consisted of teachers working in Altındağ region of the Ankara province. In the scope of the research, two schools were selected with the convenient sampling method (Fraenkel et. al., 2018). Potential subjects were notified about the psychoeducation program with an announcement, and the teachers were invited to participate in the proposed psychoeducation program. The 17 teachers who volunteered to participate in the study were all assigned to the experimental group. In forming the control group, 52 teachers were drawn from using the convenient sampling method. They all worked in the same region, but not in the same schools as the teachers in the experimental group. Both groups of teachers were administered the various instruments three times in accordance with the proposed schedule. The control group was formed by a one-to-one matching method with teachers that showed similarity with the participants in the experimental group based on their gender and PNI scores. The participants consisted mostly of middle aged, somewhat experienced, female teachers. It was seen that the experimental and the control groups were remarkably similar in terms of their demographic characteristics (See Figure 1).

Figure 1. Demographic Characteristics

<b>Characteristics</b>	<b>Experimental Group</b>	<b>Control Group</b>
<b>Gender (f, %)</b>		
Female	14 (82.4)	14 (82.4)
Male	3 (17.6)	3 (17.6)
<b>Marital Status (f, %)</b>		
Married	14 (82.4)	14 (82.4)
Single	3 (17.6)	3 (17.6)
<b>Institution Worked (f, %)</b>		
Primary School	10 (58.8)	11 (64.7)
Secondary School	7 (41.2)	6 (35.3)
<b>Graduation Level (f, %)</b>		
Bachelor's Degree	16 (94.1)	15 (88.2)
Master's Degree	1 (5.9)	2 (11.8)
<b>Age (<math>\bar{X}</math>, ss)</b>	40.06 (1.82)	39.06 (2.07)
<b>Tenure (<math>\bar{X}</math>, ss)</b>	14.47 (1.77)	15.94 (2.09)

### Instruments

In the present study, The Satisfaction with Life Scale-SWLS (Diener et. al., 1985), the Positive and Negative Affect Schedules-PANAS (Watson, et. al., 1985), and the Psychological Needs Inventory-PNI (Eşici, 2014) were used as the data collection instruments.

### SWLS

SWLS is a self-report scale including five items with a seven-point Likert-type rating, developed by Diener et. al. (1985). This scale's reliability and validity for Turkish subjects was conducted by Durak et. al. (2010). According to Durak et. al. (2010), the data were collected by applying the scale to university students, which were then analyzed by conducting a confirmatory factor analysis (CFA) of the SWLS. The fit indices of the scale that belonged to the corresponding group were reported as  $\chi^2=10.129$ ,  $\chi^2/sd=2.026$ , IFI=.99, TLI=.99, CFI=.99, SRMR=.020 and RMSEA=.043. In the same study, the Cronbach alpha and the item-total score correlation coefficients were calculated within the scope of the reliability analysis of the scale. For the university students, the calculations demonstrated the internal consistency coefficient as .81, and the item-total score correlations as ranging from .55 to .63. The scale was utilized in many other studies which were conducted on adults in Turkey.

## **PANAS**

PANAS is a 20-item self-report scale developed by Watson et. al. (1988), in order to measure the affectivity of individuals. The instrument has two sub-scales that measure Positive Affect (PA) and Negative Affect (NA). While an increase in PA score indicates that the individual's level of enjoyment of life is high, an increase in NA sub-scale scores shows that the individuals had experienced elevated stress levels. The scale was adapted to the Turkish language by Gençöz (2000). In the study conducted by Gençöz (2000), a factor analysis was run in the scope of the validity analyses, and it was reported that the two-factor structure of the original form of the scale was also confirmed for the Turkish version of the instrument. Cronbach's alpha reliability coefficient was computed for the reliability analysis of the instrument, and the alphas were reported as .83 for PA, and .86 for ND sub-scales. In addition, the test-retest coefficients of the instrument were reported as .40 and .54, respectively, for the PA and NA (Gençöz, 2000).

## **PNI**

PNI is a self-report scale including 25 items with a five-point Likert-type rating, developed by Eşici (2014). The scale was developed based on the Choice Theory Axioms of Glasser; this scale measures to what extent the four psychological needs for love and belonging, power, freedom, and fun are met, consistent with the theoretical basis. In the scale, the need for love and belonging was measured with seven items; the need for fun was measured with eight items; the needs for freedom and the power were measured with five items each (Eşici, 2014). Prior to the present study, the PNI was administered to 250 teachers that were reached via the convenient sampling method in order to measure the reliability and the validity of the scale in the teacher group. A CFA was run with the obtained data, and the results for the four-factor measurement model of the scale were reported as  $\chi^2=706.36$ ,  $sd=269$ ,  $\chi^2/sd=2.63$ ,  $p<.001$  for the fit statistics;  $RMSA=.088$  for the fit indices; and  $RMR=.027$ ,  $CFI=.93$ ,  $NFI=.89$  and  $GFI=.79$  for the goodness of fit index. The Cronbach's Alpha reliability coefficients of the instrument that was calculated with these data collected from the teacher group were reported as .88 for the Love and Belonging, .72 for the Freedom, .78 for the Power, and .86 for the Fun subscales.

## **Analysis**

A Two-factor mixed-design ANOVA was used as the statistical analysis in the study. Before the ANOVA, the data set was tested for the assumptions of ANOVA (Field, 2009) which include normality, homogeneity of variance-covariance, and the sphericity. The results indicated that all the assumptions were met by the SWLS, PNI and the NA scales. However, for PA scale, the sphericity assumption was not met ( $\chi^2(2)=7.34$ ,  $p=.02$ ). Therefore, for the analysis of the PA data, a Huynh-Feldt correction ( $\epsilon=.89$ ) was applied based on the recommendations by Field (2009).

## **Development of the Psychoeducation Program Based on CT/RT**

In the process of development of the CT/RT psychoeducation program, the design model of psychoeducation program of Nazlı (2016) was taken as basis. Nazlı (2016) stated that the process of the development of a psychoeducation program should be handled under two

main headings, which were the preparation of the infrastructure of the psychoeducation program and the design process of the program. The preparation of the infrastructure generally consisted of three steps: 1) Determining the philosophical and the theoretical foundations of the program, 2) Determining the characteristics of the group that were being studied, and 3) Determining the purpose of the program. Within the scope of the model, the psychoeducation program was based on the humanistic and existential philosophy; and as the program was intended to be implemented on adults, a literature review was made on the subjects of adults and the education of adults. The purpose of the program was defined as to inform the teachers about the CT/RT, and to increase their awareness about the concepts of the CT/RT.

According to the model of Nazlı (2016), the design process of the program was based on decisions regarding: the gains of the program, the content of the program, how the process will be carried out, and how the evaluation will be done. During the development of the psychoeducation program, studies that are examining the effects of the programs that are created based on the CT/RT from Turkey (Bellici, 2012; Çelik, 2014; Gül, 1996; Özmen, 2004; Palancı, 2004; Tanrikulu, 2013; Yalçın, 2007) and some other countries (Hale & Maola, 2011; Holliman, 2000; Kianiapor & Hoseini, 2012; Kim, 2002; Kim, 2006; Lawrance, 2003; Lee, 2015; Loyd, 2005; Petra, 2000) were examined. When these programs were inspected, it was determined that a concept, information or skill of the CT/RT was discussed; and activities in accordance with such content were carried out in each individual session. In addition to these programs, resources by Driscoll (2015) and Olver (2010) were also used to make decisions regarding the design of the program. Based on the literature review, the psychoeducation program was structured as follows:

**Session 1.** The session was started with a warm-up activity. Information regarding the group rules and how many weeks and hours the groupwork would continue was provided to the participants. It was ensured that the members talk about the participation agreement and sign the contract. The questions of the members were answered. A paper and a pen were provided to the members in order that they could write down their personal goals regarding the group process. It was mentioned that the papers in which the personal goals were written would be used in the last session. Participants were given introductory information about the basic concepts of CT/RT such as the basic needs, the quality world and the perceived world, and the total behavior. Participants were given the homework of reading the introductory information that was found in the work booklet before the next meeting in one week. The session was ended.

**Session 2.** The session was started with a warm-up activity. The previous session was briefly summarized. A powerpoint presentation was used to narrate the basic needs. The Psychological Needs Assessment Form (PNAF) that was developed by the researcher and based on Pete's Pathogram was administered. The extent to which the needs of the participants were met was found out. The willing participants were asked to describe their life experiences. A short passage regarding the basic needs was discussed and the teachers were asked to consider it further as their homework. The session was ended.

**Session 3.** The session was started with a warm-up activity. Group members were asked if they had anything to share regarding the agenda from the previous week. The group members were asked to discuss the issues that they wished to share. A powerpoint presentation regarding the subjects of the quality world, perceived world and the comparing place were presented, and information about such topics was also provided. The forms in the work booklet were used to reveal the discrepancy between the quality world and the perceived world of the group members. The forms provided the possibility to make a comparison of the time periods when the group members felt very happy with the extent to which their psychological needs as group members were being met at present. After the forms were filled, the group was separated to form subgroups of two members and for them to share within their subgroups. Afterward, the members shared with the entire group. A reading passage was given as homework regarding the topics mentioned. The session was ended.

**Session 4.** The session was started with a warm-up activity. Group members were asked if they had anything to share regarding the agenda of the previous week. A powerpoint presentation regarding total behavior, the seven deadly habits, the seven caring habits and the 10 axioms of the CT was presented. Group members were divided into subgroups of three; and each of the subgroups were asked to find a nickname for their subgroup. Following this, the subgroups were asked to discuss the seven deadly habits, the seven caring habits and the 10 axioms of the CT within their subgroups and state their opinions regarding the information and the suggestions found in the mentioned subjects. Each subgroup chose a spokesperson and shared the evaluation of their subgroup regarding the mentioned concepts with the entire group. A reading passage was given as homework about the topic. The session was ended.

**Session 5.** The session was started with a warm-up activity. Group members were asked if they had anything to share about the agenda of the previous week. A powerpoint presentation about the WDEP system (by Dr. Robert Wubbolding) was made, and the properties of a good plan were discussed. Afterward, the group was divided into subgroups of three members. The members were told that there would be a role play event; and each member would take the roles of a teacher, a student, and an observer alternately. According to the script, a student consulted the teacher; and the teacher tried to help the student by utilizing the WDEP system. After each member of the subgroups assumed each of the roles, the process of sharing with the entire group began. The teachers were given the homework of solving the problem of one of their students using the WDEP system during the week. The session was ended.

**Session 6.** The session was started with a warm-up activity. Experiences regarding the homework given in the previous week were shared. Group members were asked to specify who was the most responsible person in their environment. Members were requested to introduce this person to the group and to share the similarities and the differences of this person with themselves and with the group. In order to evaluate the group experience, the members were asked to take out the papers that they filled out in the first session that showed the personal goals of the members regarding the group. Members were asked to what extent they achieved their personal goals; and to evaluate the group experience in



general. Also, what goals did the group achieve over the last six sessions? The session was ended.

In summary, the psychoeducation program was conducted in six sessions of one and a half hours each. At the beginning of each session, half an hour of information regarding the content of that session was provided, and then activities were carried out to raise awareness about the content. All the forms used in the program and the information about CT/RT were collected in one work booklet and distributed to the teachers one week before the program started so that the teachers could prepare themselves for the psychoeducation process.

## RESULTS

Research findings of the hypotheses are listed below in their respective order.

### Psychological Need Satisfaction

When the descriptive statistics of the experimental and control groups regarding the PNI scores were examined, a difference was observed between the post-test and follow-up test scores; while there was not a difference between the pre-test scores of the groups.

Figure 2. The Descriptive Statistics and the ANOVA Results of the Psychological Need Satisfaction Scores of the Experimental and the Control Groups

<b>Psychological Need Satisfaction</b>	<b>Group</b>	<b>n</b>	<b><math>\bar{X}</math></b>	<b>ss</b>
<b>Pre-test</b>	Experimental	17	104.71	7.94
	Control	17	104.65	7.28
<b>Post-test</b>	Experimental	17	111.35	9.68
	Control	17	104.24	8.09
<b>Follow-up test</b>	Experimental	17	114.06	6.71
	Control	17	105.35	7.45

  

<b>Sources of Variance</b>	<b>Sum of Squares</b>	<b>Degrees of Freedom</b>	<b>Mean of Squares</b>	<b>F</b>	<b>P</b>	<b><math>\eta_k^2</math></b>
<b>Measurement</b>	438.25	2	219.13	6.07	.004	.16
<b>Group</b>	714.71	1	714.71	6.18	.018	.16
<b>Measurement* Group</b>	360.18	2	180.09	4.99	.033	.13
<b>Error</b>	2309.57	64	36.09			

As seen in the Figure 2, the results of the ANOVA demonstrated that the main effect of the measurement ( $F_{(2,64)}=6.07, p<.05$ ) and the main effect of the group ( $F_{(1,64)}=6.18, p<.05$ ) were both significant. The interaction effect of the measurement and the group ( $F_{(2,64)}=4.99, p<.05$ ) was also significant. Eta squared ( $\eta^2$ ) was calculated in order to see the effect size of the measurement\*group interaction effect, and its value was found as .12. According to the criteria of Cohen (1988), the value found corresponded to an effect of medium size (Leech et. al., 2015).

A Bonferroni test was conducted in order to see the source of the difference in PNS scores. For the mean scores of psychological need satisfaction of the teachers in the experimental group, the results demonstrated a significant difference between the pre-test and post-test measurements ( $q = -6.65, p<.05$ ), and between the pre-test and follow-up test measurements ( $q=-9.35, p <.05$ ). However, the difference between the post-test and the follow-up test scores was not significant ( $q=-2.71, p>.05$ ). On the other hand, for the PNS scores of the control group, it was found that the differences between the mean scores of the pre-test and post-test ( $q=.41, p>.05$ ); post-test and follow-up test ( $q=-1.12, p>.05$ ); and the pre-test and follow-up test ( $q=.71, p>.05$ ) were not significant. Based on these results, it can be stated that the psychological need satisfaction scores of the experimental group was increased after the experimental procedure, and the increase in the scores was maintained in the follow-up measurement, whereas the psychological need satisfaction scores of the control group remained constant throughout the pre-test, post-test and the follow-up test measurements.

### Life Satisfaction

When the descriptive statistics of SWLS scores of the experimental and the control groups were examined, a difference of 2.5 points between pre-test scores of the two groups was observed. The difference between the scores diminished in the post-test measurement, while it increased again in the follow-up test (Figure 3).

Figure 3. The Descriptive Statistics and the ANOVA Results of the Satisfaction with Life Scores of the Experimental and the Control Groups

Satisfaction with Life	Group	N	$\bar{X}$	ss
Pre-test	Experimental	17	21.29	1.19
	Control	17	23.76	1.59
Post-test	Experimental	17	26.76	.84
	Control	17	25.65	1.39
Follow-up test	Experimental	17	28.76	.62
	Control	17	24.12	1.22

Sources of Variance	Sum of Squares	Degrees of Freedom	Mean of Squares	F	P	$\eta_k^2$
Measurement	327.24	2	163.62	14.16	.000	.31
Group	30.74	1	30.74	.63	.043	.19
Measurement *Group	215.31	2	107.66	9.32	.000	.22
Error	739.45	64	11.54			

As seen on the Figure 3, the results of the ANOVA demonstrated that the main effect of the measurement ( $F_{(2,64)} = 14.16, p < .05$ ) and the main effect of the group ( $F_{(1,64)} = .63, p < .05$ ) were both significant. The interaction effect between the measurement and the group was also significant ( $F_{(2,64)} = 9.32, p < .05$ ). Eta Squared ( $\eta^2$ ) was calculated to determine the size of the measurement\*group effect, and it was found as .17. According to Cohen (1988), the obtained value indicated a large effect size (Leech et. al., 2015).

A Bonferroni test was run to see the source of the difference between the life satisfaction scores. The results demonstrated that the differences between the mean scores of life satisfaction levels of the pre-test and post-test measurements ( $q = -5.71, p < .05$ ), and the pre-test and follow-up test measurements ( $q = -7.47, p < .05$ ) of the teachers in the experimental group were significant, while the difference between the mean scores of the post-test and follow-up test measurements ( $q = -2.00, p > .05$ ) was not significant. When the differences between the pre-test, post-test and the follow-up test scores of the control group was examined, it was seen that the differences of mean scores between the pre-test and the post-test ( $q = -1.88; p > .05$ ), the post-test and the follow-up test ( $q = 1.53; p > .05$ ), and the pre-test and the follow-up test ( $q = -.35; p > .05$ ) were not significant. Based on these results, it can be stated that the life satisfaction scores of the experimental group increased after the experimental procedure, and the increase was preserved in the follow-up test, whereas the satisfaction with life scores of the control group remained the same.

### Positive Affect

The descriptive statistics of PA scores for the experimental and the control groups demonstrated that there was an average of 2.5 points difference between the pre-test scores of the two groups in favor of the control group. However, the difference between the post-test scores of the experimental and the control groups increased in favor of the experimental group, and the difference increased again in favor of the experimental group in the follow-up measurement (Figure 4).

Figure 4. The Descriptive Statistics and the ANOVA Results of the Positive Affect Scores of the Experimental and the Control Groups

Positive Affect	Group	n	$\bar{X}$	ss
Pre-test	Experimental	17	30.29	1.39
	Control	17	32.94	1.88
Post-test	Experimental	17	42.11	1.26
	Control	17	37.41	1.38
Follow-up test	Experimental	17	42.35	1.49
	Control	17	32.29	1.61

  

Sources of Variance	Sum of Squares	Degrees of Freedom	Mean of Squares	F	p	$\eta_k^2$
Measurement	1188.76	1.78	666.06	22.50	.000	.41
Group	416.04	1	416.04	6.48	.006	.17
Measurement *Group	691.78	1.78	387.60	13.09	.000	.29
Error	1690.78	57.11	29.60			

As seen on the Figure 4, the results of the ANOVA demonstrated that the main effect of the measurement ( $F_{(1.78,57.11)}=22.50, p<.05$ ) and the main effect of the group ( $F_{(1,57.11)}= 6.48, p<.05$ ) were both significant. The interaction effect of the measurement and the group was also significant ( $F_{(1.78,57.11)}=6.48, p<.05$ ). Eta squared was calculated to see the effect size of the measurement\*group interaction effect, and the value was found as .19. According to Cohen (1988), the obtained value indicated a large effect size (Leech et. al., 2015).

A Bonferroni test was run to see the source of the difference between PA scores. The results indicated that the difference between the mean scores of positive affect of the pre-test and post-test measurements ( $q = -11.82, p<.05$ ) and the pre-test and the follow-up measurements ( $q=12.06, p<.05$ ) of the teachers in the experimental group were significant, whereas the difference between the mean scores of post-test and the follow-up test ( $q = -.23, p>.05$ ) was not significant.

The Bonferroni test of PA scores showed an increase in the post-test scores of both the experimental group and the control group compared to the pre-test scores of the groups, and a decrease in the follow-up score of the control group, while the follow-up score of the experimental group remained similar. As the post-test scores of the experimental and the control groups were both increased, an independent samples t-test was conducted to compare the difference between the scores of simultaneous measurements of the experimental and the control groups in order to make a better evaluation of the effects of the experimental procedure on the experimental group. The results of the independent

samples t-test demonstrated that while there was not a significant difference between the pre-test scores of the experimental and the control groups ( $t_{(32)}=-1.13, p>.05, r=.19$ ), there was a significant difference in favor of the experimental group between the post-test scores ( $t_{(32)}=2.51, p<.05, r=.41$ ), and the follow-up test scores ( $t_{(32)}=4.59, p<.05, r=.63$ ) of the experimental and the control groups. According to the results, the greater increase in the post-test score of the experimental group compared to the increase in the post-test score of the control group, as opposed to the pre-test scores of the groups, was interpreted as the effect of the experimental procedure.

### Negative Affect

When the descriptive statistics of NA scores of the experimental and the control groups were examined, it was seen that there was an average of one point difference between the pre-test scores of the groups. The difference between NA scores increased in the post-test measurement, which was followed by an increased amount of difference in NA scores in favor of the experimental group in the follow-up test (Figure 5).

Figure 5. The Descriptive Statistics and the ANOVA Results of the Negative Affect Scores of the Experimental and the Control Groups

Negative Affect	Group	n	$\bar{X}$	ss
Pre-test	Experimental	17	21.35	1.50
	Control	17	20.24	1.49
Post-test	Experimental	17	12.59	.54
	Control	17	15.35	1.18
Follow-up test	Experimental	17	14.71	.97
	Control	17	21.29	1.88

  

Sources of Variance	Sum of Squares	Degrees of Freedom	Mean of Squares	F	p	$\eta_k^2$
Measurement	800.18	2	400.09	17.99	.000	.36
Group	64.05	1	64.05	4.17	.049	.11
Measurement *Group	252.37	2	126.18	5.68	.005	.15
Error	1422.78	64	22.23			

As seen on the Figure 5, the results of the ANOVA demonstrated that the main effect of the measurement ( $F_{(2,64)}=17.99, p<.05$ ), the main effect of the group ( $F_{(1,64)}=4.17, p<.05$ ), and the interaction effect of the measurement and the group ( $F_{(2,64)}=5.68, p<.05$ ) were all significant. In order to see the size of the interaction effect of the measurement\*group, the Eta squared ( $\eta^2$ ) was calculated and the value was found as .11. According to Cohen (1998), the calculated effect size corresponded to a medium size of effect (Leech et al., 2015).

A Bonferroni test was conducted to see the source of the difference in NA scores. The results indicated that the differences of the NA levels of the teachers between the pre-test and post-test ( $q = 8.76, p < .05$ ), and the pre-test and the follow-up test ( $q = 6.65, p < .05$ ) measurements were significant. However, the difference between the post-test and the follow-up test ( $q = -.2.12, p > .05$ ) measurements was not significant. When the differences between the pre-test, post-test and the follow-up test scores of the control groups were examined, it was seen that the differences between the mean scores of the pre-test and post-test ( $q = 4.88; p > .05$ ), and the post-test and the follow-up test ( $q = -5.94; p < .05$ ) of the control group were significant, while the difference between the mean scores of the pre-test and the follow-up test ( $q = -1.06; p > .05$ ) was not significant.

The Bonferroni test regarding NA scores demonstrated a decrease in the post-test scores of both the experimental and the control groups compared to the pre-test scores. The results also indicated that NA scores of the control group increased in the follow-up test, whereas the scores of the experimental group remained similar. As the post-test scores of the experimental and the control groups were both decreased compared to the pre-test scores, an independent samples t-test was conducted to compare the difference between the scores of simultaneous measurements of the experimental and the control groups in order to make a better evaluation of the effects of the experimental procedure on the experimental group. The results demonstrated that there was a significant difference between the experimental and the control groups in favor of the experimental group in post-test scores ( $t_{(32)} = 2.13, p < .05, r = .35$ ) and follow-up test scores ( $t_{(32)} = -3.11, p < .05, r = .48$ ), while the difference between the pre-test scores ( $t_{(32)} = .53, p > .05, r = .09$ ) was not significant. According to these results, the greater decrease in the post-test score of the experimental group compared to the decrease in the post-test score of the control group, compared to the pre-test scores of the groups, was interpreted as the effect of the experimental procedure.

## **DISCUSSION**

The results of the present study indicated that while the psychological need satisfaction, the life satisfaction, and the positive affect levels of the teachers that participated in the psychoeducation program, which was developed and based on the CT/RT, increased, their negative affect levels decreased. The results of the research also demonstrated that the increase observed in the scores of the experimental group was preserved in the follow-up test that was conducted after five months. The results were consistent with the results of many previous studies that examined the effects of the CT/RT-based interventions on the several variables (Bellici, 2012; Çelik, 2014; Hale & Maola, 2011; Holliman, 2000; Kianiapor & Hoseini, 2012; Kim, 2002; Kim, 2006; Lawrance, 2003; Lee, 2015; Loyd, 2005; Özmen, 2004; Palancı, 2004; Petra, 2000; Tanrikulu, 2013).

Glasser (1999a/1998) stated that in order to improve the psychological need satisfaction, individuals should acquire information regarding the nature of their own needs; gain awareness regarding their needs that they can and cannot meet; and learn new and responsible behaviors in order to satisfy their unmet needs in a more efficient manner. In this CT/RT psychoeducation program, various activities were carried out to increase the psychological need satisfaction of the teachers. For example, in the second session, after



giving information about the psychological need satisfaction, an activity was carried out to reinforce the topics, such as discussions of activities that the teachers enjoyed doing and that made them happy, the frequency they performed these activities, and whether they performed the activities alone or with others. At the end of this event, one of the members stated that she realized that she had not been to the cinema for a very long time, despite the fact that her favorite thing was to go to the movies. Another group member stated that they always attended cheaper activities due to the financial difficulties they experienced after buying a house. Another member said that they always conducted solitary activities yet realized that such activities did not make them happy. In the third session, the group members were asked if they had anything to share regarding their experiences of the previous session. One of the members responded to this question that they often went out for a week and felt much better because they noticed spending lots of time at home in the previous session. Another member replied that they went to the cinema as that was the thing that they wanted to do for a long time and doing so made them feel good. In this context, it was concluded that one of the reasons that increased the psychological need satisfaction levels of the experimental group was the group members' realization of their unmet psychological needs; and embracing more effective behaviors to meet those psychological needs.

Another factor that increased the psychological need satisfaction of the experimental group involved the revealing of the discrepancy between the quality world and the perceived world of the group members. Glasser (1965) stated that the difference between the quality world and the perceived world was the main motivator of individuals, and a significant difference between the two worlds would make individuals unhappy. According to Glasser, when people feel a gap between their quality world and perceived world, they will take action to close this gap. In accordance with this idea, an activity was carried out in the third session to reveal whether there was a discrepancy between the quality worlds and the perceived world of the participants. Following this activity, one of the group members stated that he wanted to be a teacher that effectively managed his students and make them listen to his words; however, without the proper tools or skills, he mentioned feeling as an inept teacher as ever in managing his students. Another member, regarding the need for love and belonging, stated that he had pictures of a warm and close mother-child relationship in their quality world with their adolescent child, yet in reality they would often argue with their child. In addition to this, in the fourth session, when the participants were asked whether they wanted to share their experiences about the previous session, most of them stated that they could not spare enough time to meet their specific needs, and they stated that this made them unhappy when they realized it in the previous session. For example, one of the members reported that they devoted a lot of time to having fun during their college years, and was very happy; however, as they noticed focusing almost entirely on their responsibilities and procrastinating having fun in the last years, they purposely spent more time having fun in the week following this realization. Another member stated that they enrolled in a hobby course as they noticed that their need for freedom was not met as due to constantly living according to their spouse's wishes. In this context, group sharing was effective in demonstrating the difference between the quality worlds and the perceived worlds of the group members. As a result, it can be said that choosing more effective behaviors to meet base needs helps group members to increase their own psychological need satisfaction.

Another result of the study was that the developed psychoeducation program was effective in increasing the subjective well-being level of the experimental group. These results were consistent with the results of the study conducted by Nematzadeh and Sary (2014). Subjective well-being is the cognitive and affective self-evaluation of an individual regarding their life (Diener, 2000). Cognitive evaluation is about life satisfaction. The life satisfaction of an individual is high if the individual's evaluations about his/her life are positive, and the individual is satisfied with his/her life. An individual is said to have a higher subjective well-being if s/he has more positive emotions and less negative emotions (Diener, 2000). One of the reasons that the developed psychoeducation program was successful in increasing the subjective well-being levels of the participants was considered as the positive effect of the program on the emotional awareness levels of the participants. Emotional awareness is the ability to recognize and be aware of the emotions of others and oneself (Croyle & Waltz, 2002). Individuals with high emotional awareness have higher skills of identifying and understanding their own emotions and those of others, while without such skills individuals with low emotional awareness do more poorly (Kilian, 2011). This program was structured to help participants become aware of their feelings, and this program often allowed group members to share their feelings with the rest of the group. For instance, one member stated that they almost never participated in activities that they liked due to spending a lot of time on their responsibilities and their family, and that they noticed that this made them feel badly. After noticing that, the member stated that they spent more time doing the things they wanted. In the session where the ten axioms of CT were being studied, another member stated that the proposition of "The only person whose behavior we can control is our own." made them feel particularly good, since they realized that they were constantly trying to control their students, which only caused them stress. Another group member stated that he was not very successful in changing his negative feelings in his personal life; however, he reported that the metaphor of the total behavior car was good for him, since he could find happiness more readily by simply change his emotions through focusing on his thinking. In line with the feedback obtained from these sharings, it can be said that the experience of the psychoeducation program increased the positive emotions and decreased the negative emotions that the participants experienced by increasing their emotional awareness, which helped them to increase their subjective well-being levels, in turn.

Another factor that was effective in increasing the subjective well-being levels of the experimental group was the increase in the psychological need satisfaction of the experimental group members. As it was also mentioned in the section of the paper where the findings regarding the psychological need satisfaction were discussed, as a result of the increase in the awareness of one's emotions, the quality world, and the choices of the participants, choosing new behaviors in order to meet basic needs in a more fulfilling manner was considered to increase the psychological need satisfaction of the members.

Psychological need satisfaction is one of the most important components of achieving subjective well-being, and there are many studies in the literature that demonstrated that individuals who met their needs in a healthy and satisfactory ways had higher levels of subjective well-being. (Chen et. al., 2015; Church et. al., 2013; Cihangir-Çankaya, 2009). In this context, it can be stated that the CT/RT psychoeducation program that the experimental

group attended had a positive effect on increasing the subjective well-being levels of the experimental group by increasing the psychological need satisfaction of the participants.

Lastly, it can be stated that the CT/RT psychoeducation program itself was effective in increasing both the psychological need satisfaction and the subjective well-being of the experimental group. Yalom and Leszcz (2005) referred to factors like instillation of hope, universality, imparting information, interpersonal learning, developing relationships between healthy individuals, and gaining insight as therapeutic factors. According to Yalom and Leszcz (2005), the presence of such elements in group psychotherapy had important effects on both the recovery of the individuals and the increase of their own well-being. Similar to these considerations, Reality Therapy also emphasizes the importance of a supportive environment that is based on respect. Both in the development, and the application of this psychoeducation program, creating a group environment that is supportive and is respectful to individual differences was a point of great interest. In addition, it was also observed that the participants avoided words, attitudes and behaviors that could cause other members to feel bad, and they made a concerted effort to positively contribute to the group process. All of these factors that are mentioned here were thought to be helpful in increasing the psychological need satisfaction and the positive affectivity of the participants (who received the CT psychoeducational program), while decreasing their negative affectivity as well.

### **LIMITATIONS**

Notably, the present study's findings may be somewhat limited in the following ways:

1. The samples were not able to be drawn or assigned randomly, but they were matched across groups based on pretest data.
2. Females were overrepresented in this study, but that is normally the case since grade schoolteachers are typically (and universally) females.
3. While the present study may be a little light in terms of its internal validity (i.e., its internal control within the data) and its external validity (i.e., the external control relative to groups outside the study), it does have great heuristic value since these findings truly demonstrate the remarkable value of Reality Therapy, Choice Theory, and Quality School concepts in school settings such as these.
4. While this may not be "The perfect research study," it definitely does provide a large number of relevant studies that the world has been looking for in order to provide insights into the possible impact of the pandemic and how best to deal with it.

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## **SO, WHAT DO YOU EXPECT? HOW TEACHERS' COGNITIVE/BEHAVIORAL CHOICES CAN ULTIMATELY INFLUENCE THEIR STRESSES AND SUCCESSES**

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

### **Abstract**

For people generally, and for teachers, more specifically, many of our stresses and successes seem to be of our own choosing. In this brief article, I will describe in some detail, how we do this, plus provide examples of ways that we bring to pass many of the problems and/or solutions that we ultimately manifest.

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According to Lujan (2015), Choice Theory posits that humans possess free will and purpose. In addition, Glasser (1998) believed that we control most aspects of our mind and body. Glasser labeled this concept as "Total Behavior." Glasser also said that people construct a mental "Quality World." According to Lujan (2015), "This Quality World" contains a unique picture of perfection or utopia. Furthermore, since Choice Theory suggests that all that people can do is behave—and behavior is an attempt to match their quality world pictures, they often (can) act irrationally and dangerously in driving the system to get what it wants" (Lujan, 2015, p. 17). Thus, individuals may engage in "inefficient behaviors" in order to get what they want, i.e., they will do things that satisfy one or more of our needs (e.g., power & freedom), but at the same time they might also create new needs (e.g., loss of love & belonging and/or loss of fun). Of course, these same individuals could also choose to engage in "efficient behaviors" instead, which could also serve to match their Quality World pictures, but these actions would do so by satisfying one or more needs without also creating any new needs. Although this process can frequently be applied to almost anyone, this paper will generally focus upon how it can be applied to the thinking and/or the behaviors that teachers use in the classroom. That is, teachers can also make choices that will be either inefficient or efficient at any given time, i.e., it's always their choice!

### **Inefficient vs. Efficient Thinking and/or Behaviors**

Through the use of inefficient or efficient thinking and/or behaviors, people are always seeking to employ the best choices that they can at any point-in-time. Unfortunately, when one employs inefficient choices, they satisfy some need(s) (e.g., power), but sacrifice other needs concurrently. In contrast, when one employs efficient choices, one will usually satisfy the need(s) in question but will do so without creating any new needs at the same time!

Consider Henry Ford. One of his most popular quotes was, "If you think you can, or you think you can't, you're absolutely right" (cited in John-Roger & McWilliams, 2005)! Wow! That strongly suggests that whatever outcome you may eventually reach could well be determined before you even start. Along these same lines is the notion that people are weak who believe that their emotions control how they act, but that people are strong who tell themselves that it's their behaviors that control their emotions and how well they do overall (Mandino, 1969). There's also a book entitled "*You Can Never Afford the Luxury of a Negative Thought*" by John-Roger and Peter McWilliams (2005). This book is filled with key

quotes regarding this matter and helps readers to better understand that one's perceptions are critical as one begins to do what many may think is impossible.

### **Inefficient Thinking and/or Behaviors by Teachers**

Like everyone else, teachers are always making choices, sometimes inefficient and at other times, efficient! In this next section, we'll focus on some inefficient choices that teachers may engage in to satisfy their needs but may actually create new needs in the process.

For instance, . . .

- Teachers who think/act inefficiently often demonstrate how their own negative perceptions, and/or negative expectations, can rule their day, and may torment themselves, and/or their students, as they do so.
- Teachers who think/act inefficiently see themselves as being in deep trouble since they consider themselves to be members of a "Mission Impossible" team, but really can't imagine why they ever put themselves in this predicament in the first place.
- Teachers who think/act inefficiently often believe they've contracted a terrible illness, since they seem to have become really "sick of school"!
- Teachers who think/act inefficiently have generally become totally indifferent about wanting to make a difference!
- Teachers who think/act inefficiently tend to see themselves as imperfect and believe that erasers and liquid paper were actually created especially for them!
- Teachers who think/act inefficiently see their teaching as being totally unfulfilling, and they believe that their students would generally agree with that assessment!
- Teachers who think/act inefficiently believe that their students really want to drive them crazy but are reasonably sure that none of them even have a driver's license.
- Teachers who think/act inefficiently believe that they can't "make a difference," especially with "indifferent students."
- Teachers who think/act inefficiently believe that nobody cares for them, and therefore often checks to see if they're even listed in the local phonebook.
- Teachers who think/act inefficiently seem to tire quickly at school. In fact, they're often already tired of school, before 8:00 in the morning!
- Though teachers' thinking/acting have been shared with students for many years, these teachers often wondered if their students had ever LEARNED anything!

### **Efficient Thinking and/or Behaviors by Teachers**

While the first section (above) portrays how teachers could be described as their own worst enemies, there are other teachers who convey very different messages. These "efficient" teachers maintain very positive perceptions and/or expectations of their teaching and how they do/did it, often by wearing a smile on their faces every day! For instance, . . .

- Teachers who think/act efficiently tend to believe that “success comes in “cans,” while failures come in can’ts!”
- Teachers who think/act efficiently tend to avoid stumbling blocks of adversity but climb up stepping-stones to success!
- Teachers who think/act efficiently generally use past failures as guideposts to success.
- Teachers who think/act efficiently have realized that LIFE is only as good as they make it!
- Teachers who think/act efficiently generally strive to achieve change since they believe that they can make a difference.
- Teachers who think/act efficiently typically believe that they possess competence and confidence, and gladly share these attributes with their students.
- Teachers who think/act efficiently generally care enough to give their very best!
- Teachers who think/act efficiently typically believe that IF they teach enthusiastically that their students will learn enthusiastically.
- Teachers who think/act efficiently often find that when wishing won’t work, work will!
- Teachers who think/act efficiently tend not to dwell on what students can’t do but focus more on what they can do instead.
- Teachers who think/act efficiently have learned that doing their best means they always need to do better!
- Teachers who think/act efficiently have often discovered that teaching is learning twice and that it’s also the best way to learn!
- Teachers who think/act efficiently have realized that ATTITUDE is the mind’s paint brush since it can color any situation!
- Teachers who think/act efficiently have found that KINDNESS, and not COERCION, will bring them true joy!
- Teachers who think/act efficiently have frequently discovered that nobody rises to low expectations . . . not even them!
- Teachers who think/act efficiently show their optimism by smiling through their tears!
- Teachers who think/act efficiently have discovered that LIFE is a challenge, but only if they challenge themselves.
- Teachers who think/act efficiently have determined that nobody ever hits the target by accident.



- Finally, teachers who think/act efficiently have learned that either they can, or they can!

While I have borrowed all of these ideas from a book that we compiled more than twenty-five years ago (Parish, Necessary & Spencer, 1996), these notions still seem to hold true today, and maybe more so than ever before. After all, we've experienced a pandemic, the use of zoom to teach students, and the interruption of comfortably interacting with students, face-to-face, for a couple of years if not more.

### Bottom Line

Teachers, as well as everyone else, need to put on their "smiley faces" again, and go out into the world and make lots of friends! With input from our five-year-old daughter I even created a special button for just such an occasion, which reads: **"You are my friend, I just don't know your name yet!"** Next, put this button on and venture out to meet others again. Otherwise, our fears and dire concerns that lurk within our minds may drag us down, as we continue to wear an unfriendly frown, and become the loneliest person in town. Yes, let us conquer our lonely "uncontrolled perceptions" (i.e., the lonely pictures that linger about), and do all that we can to have more good times (i.e., more "controlled perceptions") instead! Of course, we should always allow our common sense to prevail, as we fulfill all of our "basic needs", and yet avoid finding ourselves in a hospital or in a jail! Now, by all means, **MAKE IT A GREAT DAY!**

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### Brief Bio—

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## **SELF-EVALUATION: THE BULLS-EYE IN CHOICE THEORY/REALITY THERAPY**

Robert E. Wubbolding Ed.D.

### **Abstract:**

The art of self-evaluation continues to evolve and takes many forms. Some are explicit and some are implicit. The fork-in-the-road metaphor provides an implicit method for helping individuals and groups evaluate their own behavior. One road is situation A, which includes ineffective or harmful choices. The other road is situation B, which includes effective or helpful, positive choices. A skillful counselor can assist clients or client groups to decide which pathway is better for them. This initial self-evaluation should be firm and unchangeable with the passage of time.

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Self-Evaluation constitutes a central principle, a bullseye in the practice of Reality Therapy and in its justifying theory, Choice Theory (Glasser, 2005). Wubbolding has extended this principle with Dr. Glasser's endorsement (2000, 2011, 2017). And yet, self-evaluation contains a deeper more basic dimension. The following dialogue develops and illustrates this notion (an idea to be discussed in a subsequent book).

Jeddy, a 26-year-old male repeat offender, referred by the court system after several arrests for robbery, sexual abuse, forgery, auto theft, the use of illegal drugs, and most recently, disorderly conduct. In the counseling literature, such a client is often referred to as "reluctant." The counselor has provided information, as is done in the practice of any theory: confidentiality and its limitations, informed consent, duty to warn, disclosure of professional credentials, etc.

J = Jeddy      C = Counselor/Therapist

C: Jeddy, we've talked about your troubles. What do you think about what's happening to you?

J: They're after me.

C: How far back does this go? When did this stuff start?

J: In high school – until I quit.

C: The teachers and other authorities were out to get you?

J: Yeah. They ganged up on me and kicked me out when I was 17 years old.

C: I'm curious. Why do you think they waited so long?

J: I don't know.

C: Okay. We'll get back to that. Do you think you deserved expulsion?

J: No. Other kids did the same things that I did. They got high and came to school that way.

C: Did they break as many rules as you did or not as many?

J: Some more and some less.

C: It sounds like you got caught more often.

J: Yes.

C: And all these problems have carried on for the last 9 years?

J: I'm always getting accused of something.

C: Are you telling me that all your accusers were wrong – just making up crimes that you committed?

J: No, I did a lot of those things. But they were out to nail me.

C: I noticed you said "were". We'll get back to that. But for now, let's not spend any more time looking back. We can't change your past history anyway. Is that okay?

J: That's fine with me.

C: Jeddy, I think this is a big moment for you – right here, right now. How about I explain this to you?

J: What do you mean?

C: I believe you came to the right place at the right time – right here, right now. How about I also explain this to you?

J: Yeah, I'd like to know what the big deal is. What are you talking about?

C: I can't tell you how important this is. Are you ready, Jeddy?

J: Yeah, let's get on with it.

C: It is absolutely clear, indisputable, and very important for me to tell you that today as you sit here, that you are at a fork-in-the-road. You're standing here at this very moment looking down two pathways and you can decide which one is better for you.

J: What the hell are you talkin' about?

C: I can't tell you how important this is for you. You have a very important choice to make: you can either go up "happiness highway" or down "awful avenue." (Counselor shows Jeddy a simple diagram illustrating the "fork-in-the-road." The counselor also uses his own arms to illustrate the two directions of the fork.)

J: What are you talkin' about?

C: You're wondering if I will unravel this mystery. That is mostly what I do for my other clients and I will do it for you, i.e., I'll unravel your mystery. Awful avenue means you make choices that get you into trouble: little ones and big ones. I could enumerate a few of them for you by reading your case history. Drugs, assault, resisting arrest . . .

J: All right, all right, I got it. No need to give me a list.

C: These are choices that you could make in the future: today, tonight, tomorrow, and every day. Do you agree?

J: Yeah, I've done a lot of those things. But not everything.

C: But a lot of people think you have done those things and they have the power to you into an inmate or as we're supposed to say now an "incarcerated person." What I'm saying is that you have the ability to choose Awful Avenue. But you know what that road is like. Is that what you want? Or do you want the other road?

J: I'd like "happiness highway." But I don't know what it means exactly, but I know it's better than the other road.

C: So, I hear you saying that in your gut you want to be free of people getting on your back and that means living a productive life and making choices different than the ones you've made up 'til now.

J: Yeah, I don't want to deal with the same crap I've been dealing with.

C: I can help you with the crap-free highway. I can help you if you stumble and I can help you evaluate specific choices. Are you willing to take the first step down "happiness highway?"

J: I'm willing to give it a try.

C: That's all anyone can ask. How about trying "happiness highway" for 3 days?

J: Sounds good.

C: I'll be as near as my office telephone.

Commentary: The above dialogue illustrates one way (there are many other ways) of initiating the counseling process with a "reluctant" or "resistant" client who is coerced into receiving mental health services. This dialogue is a summary of what usually requires more interactions than can be stated briefly. Nevertheless, the dialogue illustrates the following principles.

KIS: Keep It Simple. I prefer to use two roads, not a crossroad. The crossroad allows for too many choices. The fork-in-the-road makes concrete Situation A and Situation B (Glasser, 2005).

The client is asked to evaluate which road is better for him/her. The possible choices are presented in what some people describe as an unequal and slanted manner. The choices are presented in a way that leads a reasonably rational person to select the better road. The effective use of reality therapy must be based on values, one of which is "It is better to live a life free of trouble than to live a life characterized by harmful choices."

The dialogue represents a basic and foundational form of self-evaluation. It is more fundamental than the usual and very necessary interventions such as "When you did such and such, did it help you?" "When you got in trouble by doing xyz, were your actions against the law, the rules. Were they acceptable in a peaceful society." These interventions are necessary. Yet, the above dialogue is intended to illustrate an additional, more basic form of self-evaluation.

The metaphorical use of two pathways has proven through clinical experience to be concrete and specific, therefore easily remembered by clients, especially when counselors help clients identify specific benchmarks for success and for failure.

Notable also is how the counselor describes problems in the past tense and successes in the future tense. This design communicates in a manner just below the level of explicit apprehension that misery and failure are past and that a new life lies in the future.

In summary, the use of the fork-in-the-road illustrated in the above dialogue applies to individual students, classrooms, school buildings, school districts, families, agencies of all kinds, and to businesses too. Readers are invited to send the author examples of how you have used this metaphor in your professional lives. E-mail: [wubsrt@fuse.net](mailto:wubsrt@fuse.net)

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**Brief Bio--**

Robert E. Wubbolding, EdD, LPCC, BCC is a professor emeritus at Xavier University and has taught reality therapy around the world specializing in cultural adaptations. He has expanded the principles of reality therapy especially in the area of self-evaluation. Besides maintaining a private psychology and counseling practice, he has taught courses for Johns Hopkins University, Boston University, and the University of Southern California.

## **UTILIZING CHOICE THEORY TO EMPOWER PARENTS OF CHILDREN WHO ARE AT-RISK OF SCHOOL FAILURE**

Shaalein Lopez, Ph.D. and Patricia Robey, Ed.D.

### **Abstract**

Obtaining academic support beyond standard classroom instruction should be within reach for any school student in need. The active participation of parents in efforts to secure this support is essential but can feel overwhelming for parents who are unfamiliar with the internal procedures of the school system or the educational access rights that are available for students. School Psychologists are specially trained to help parents and families understand the needs of their children and to help them develop strategies for more effective collaboration. Choice Theory provides a conceptual model for understanding and empowering parents and students to get their needs met within the context of school systems.

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Essential education legislation such as the Individuals with Disabilities Education Act (IDEA, 2004) and the "Every Student Succeeds Act" (ESSA, 2015) stipulate that all schools receiving federal funds must not only provide an appropriate education for students with disabilities, but also must implement school-wide interventions, both academic and social-emotional, to improve learning outcomes for all students. Furthermore, key legislation, including IDEA and ESSA, also stipulates that the meaningful participation of parents and families in the education of their children is an essential component in the improvement of their educational outcomes. Despite the value placed on parental involvement, however, understanding the complexities of intervention and special education processes can be overwhelming for parents. Gaining a clear picture of acceptable expectations and guaranteed rights often requires parents to read multiple lengthy documents or reports that may be technical or confusing. Helping their children also requires that parents understand multiple-step procedures that are unfamiliar to them as they are outsiders to the daily workings of schools. These potential hurdles can be even more cumbersome for parents who do not speak English fluently, or for parents who are unaccustomed to digesting the types of written information required.

It is no surprise that many parents of students who experience difficulties in school feel overwhelmed and powerless when it comes to advocating for additional support for their children. Findings from numerous studies document parent frustration in this respect. For instance, Stoner et al. (2005) uncovered parental dissatisfaction with the process for obtaining an Individualized Education Plan (IEP) for their children with autism, noting that the process was confusing and even traumatic for some parents. Through interviews with Chinese parents, Lo (2008) found parents who reported feeling stressed, overwhelmed, undervalued, and confused during IEP meetings. In a 2015 study, Wilson highlighted multiple findings that, despite wanting to be a critical part of the IEP process, parents reported being hindered or impaired as meaningful contributors due to "cultural, educational, or social constraints" (p. 38). These instances represent the historical persistence of feelings of powerlessness and confusion that parents and families often feel as they seek to gain support for their children.

Helping parents build or recapture power and clarity in relation to obtaining academic and social-emotional intervention and special education support for their children is critical. Key aspects of Choice Theory offer a promising means by which this empowerment may be achieved. Choice Theory is described, “first and foremost...[as] a model of hope and empowerment” (Moré, 2019, p. 6). This cognitive theory, developed by Dr. William Glasser, in response to his observation that a new psychology that is easy to understand and use was needed in order to achieve true progress (Glasser, 1998), guides individuals to improve outcomes by focusing on what they can do as individuals to reach this improvement. First developed to focus on improved connectedness in critical relationships (husband-wife, parent-child, teacher-student, and manager-worker) (Glasser, 1998), Choice Theory has evolved into a confidence-building toolkit designed to be used by anyone working through difficult circumstances (Moré, 2019).

### **The Pervasive Usefulness of Choice Theory**

Evidence of Choice Theory’s positive effect in a wide range of situations is abundant. For instance, in 2011, Cisse and Casstevens discussed the impact of using Choice Theory as a tool to empower community change in a small, southern, rural community in the United States in which about 32% of the residents’ incomes placed them below the poverty line at the time of the inception of the community-center-housed program. Beginning with a presentation on Choice Theory and following up with a series of workshop sessions, members of the community, working from a Choice Theory point of view, worked to identify what to them was a Quality Community. Participants then explored actions consistent with Choice Theory’s five Basic Needs (Survival, Love and Belonging, Power, Freedom, and Fun) (Glasser, 1988) that could lead to the realization of their vision of a Quality Community. In addressing Power, for instance, residents affirmed that the attainment of a Quality Community required that community leaders, including the mayor and members of the City Council, hear their voices. Choice Theory’s emphasis on taking control of one’s personal actions by “[changing] what you are doing to get what you want” (Moré, 2019, p. 74) was used to motivate the residents to have the courage to act for change and improve the quality of life within their community.

In another example, Mateo et al (2014) described a study wherein they analyzed the impact of a Choice Theory-based psychoeducational program on college student self-efficacy, which correlated positively with academic performance (Bandura, Barbaranelli, Caprara & Pastorelli in Mateo et al., 2014). The participants in this study, which took place in Manila, Philippines, were chosen based on being identified by the university’s counseling department as being at-risk for developing psychological problems (Mateo, 2014). After participating in 4.5 hours of Choice Therapy education and intervention (in 3 sessions over 2 weeks), a significant improvement in mean self-efficacy scores was found. During the sessions, the college students were introduced to the basic tenets of Choice Theory as well as Glasser’s concept of Total Behavior, which includes actions, thinking, feeling, and physiology (Glasser, 1998), and how these behaviors relate to the individual’s power to take actions that lead to the realization of their Quality Worlds. Students were coached to combine this understanding with Wubbolding’s WDEP system (Wants, Doing, Evaluation, Planning) (Wubbolding, 2000) as a discrete means by which the ideas of Choice Theory could be implemented, analyzed, and revised as needed.

A myriad of additional examples exist that discuss the positive impact of Choice Theory on improved life outcomes. Authors such as Holland & Walker (2018), Dziordz (2019), and Parish & Parish (2019) investigated Choice Theory in relation to religion. In another



instance, Masa and Duba (2011) have used Choice Theory and the Choice Theory Career Rating Scale for Children and Adolescents to help improve student choices and student planning for the future. Others still, such as Soltanifar et al (2019), Safaei Nezhad et al (2020), and Ghajari (2020) investigated the impact of Choice Theory-derived strategies on marriage. Even recently, authors such as Mason & Mason-Bennett (2021) and Vincenzes (2022) explored the power of Choice Theory as an effective means of approaching the difficulties precipitated by the Covid-19 pandemic. Choice Theory has been a positive tool for improvement in a diverse number of circumstances.

### **The Intersection of Choice Theory and Student Support Outcomes**

The successful expansion of Choice Theory beyond the realms of traditional relationships (i.e. husband-wife, parent-child, teacher-student, and manager-worker) suggests promise for the adaptation of Choice Theory into another arena, namely the arena wherein parents who have children struggling in school are at the center. Choice Theory can provide a means by which these parents regain power and control to help their children get what they want and need, that is, a quality education and learning experience. Choice Theory is, at its core, a tool for “hope and empowerment” (Moré, 2019, p. 6).

Turning our attention first to a consideration of Choice Theory’s Five Basic Needs, it is notable that Glasser, in his debut writings on Choice Theory, postulated that any misery an individual experiences can undoubtedly be tied to a failure to have achieved satisfaction of one of more of the basic needs (Glasser, 1988). In further writings, such as *Take Charge of Your Life: How to Get What You Need From Choice Theory Psychology* (Glasser, 2011), Glasser associates various properties to each of these basic needs:

<b>Basic Needs of Choice Theory</b>	<b>Properties Associated with Each Basic Need (Glasser, 2011)</b>
Survival	safety, security, wellness, procreation
Love and Belonging	relationships, connectedness, intimacy, membership
Freedom	independence, mobility, choice, creativity
Fun	amusement, joy, laughter, learning
Power	control, achievement, competition, influence

In terms of helping parents navigate the intervention and special education processes that are available for struggling students in schools, we begin to get a notion of how Choice Theory can be an aid. In contemplating the properties associated with Glasser’s Basic Needs, power is immediately relevant. In fact, as described earlier, parents often express feelings of powerlessness when working with professionals in schools to obtain support services for their children. Related to power as a concept of Choice Theory, is the need to feel competent and respected, without necessarily being the leader in a situation. It is important, however, to be a valued team member whose efforts make an impact and result in success (Moré, 2019).

But how does a parent accomplish this? From a Choice Theory point of view, it begins with the actions the parents can control, namely their own. One critical act involves seeking to gain knowledge about the options available to their children. Choice Theory tells us that “the

more knowledge you have, the better chance you have of understanding your situation and possible choices you may have”, (Moré, 2019, p. 61) and that parents must change their actions so that their actions are directly related to getting the help they desire for their children. Building strong relationships, another focus within Choice Theory, can also play a role here. Strong relationships spring forth through the practice of what Choice Theory calls “caring”, or “connecting” habits, which include supporting, encouraging, listening, accepting, trusting, respecting, and negotiating differences. (Glasser, 2011; Moré, 2019). Behaviors at the other end of the spectrum, which include criticizing, blaming, and complaining (referred to as “deadly” or “disconnecting” behaviors), on the other hand, erode relationships. Putting these ideas together, then, Choice Theory encourages parents seeking to gain support for their children struggling in school to deliberately choose to act to gain the knowledge they need to help their children, partially through connecting or building strong relationships with stakeholders (teachers, administrators, school psychologists, school social workers, etc.). Taking charge in this way can lead parents to regain power in the situation and move them closer to obtaining the results they envision for their children. While true that a parent can only control their own personal actions, it is also true that approaching the problem in ways consistent with Choice Theory is likely to result in improved relationships and thus, improved results (Moré, 2019).

### **The School Psychologist as an Empowering Ally**

Despite its promise, Choice Theory’s emphasis on gaining relevant information and building strong relationships as tools of empowerment for parents and other caregivers seeking to secure specialized services for their children may be daunting tasks for some parents. Fortunately, and perhaps not clearly realized by parents, School Psychologists are specially trained to mitigate this difficulty. In considering the ten domains of practice (NASP, 2020) in which School Psychologists receive specialized training, the majority of these fundamental best-practice areas emphasize skills that work toward empowering families to understand the needs of their children and to having those needs met. Perhaps of most importance to parents in terms of increasing their personal competence is “Domain 2: Consultation and Collaboration” (NASP, 2020). This domain charges School Psychologists to become versant in multiple models of consultation and collaboration and to seek to effectively employ these skills through effective communication with families and others to promote positive outcomes for students. Parents, therefore, have a natural ally in the School Psychologist. Parents can readily expect their inquiries and concerns to be heard, addressed, and shared by the School Psychologist, which will inevitably help them to gain the knowledge they need to have some control and influence over their children’s education.

To add emphasis to the empowering nature of a parent-school psychologist relationship, it is important to note that the main imperative of the School Psychologist is to be a well-informed advocate for children, regardless of need. School psychologists have specialized training in development, learning, mental health, behavior, data-based decision making, special education law, ethics, and numerous related areas. These invaluable skills, combined with their duty to collaborate with families and others, ensures that the School Psychologist is a natural ally to families who can penetrate beyond the surface to fully understand the needs of children as well as the strategies most likely to make a positive difference. (These strategies proposed by School Psychologists, according to their charge, must be evidence-based, and thus represent well-supported potential paths to Choice Theory’s basic need for Freedom.) The specific role the School Psychologist will take on with each child will necessarily vary based on student needs, but in each case, parents can expect the School Psychologist to carefully gather and analyze the data required to understand the needs (learning, behavior,

mental health) of their children through multiple sources including the children themselves, teachers, and other educational professionals, family members and others who know the student, and even the student's peers, as relevant (for instance, collecting data that allows for environmental comparisons). Parents can also expect the School Psychologist to personally assist them in understanding what the data reveals about their children, and the process and procedures in place to secure the support needed by their children. School Psychologists can further be expected to help parents understand their rights and options when planning or intervention teams disagree, as well as when they agree. Some topics about which parents may wish to approach the School Psychologist include:

- The Response to Intervention (RTI), Multiple Systems of Support (MTSS), Positive Behaviors Intervention Support (PBIS), or other intervention programs in their child's school
- The initial evaluation for Special Education process
- Review or reconsideration of existing Individualized Education Plans
- Consideration or evaluation for 504 Plans
- Procedural safeguards and rights related to Special Education and Section 504 Plans
- Evidence-based approaches to instruction and intervention
- Student data interpretation
- Understanding mental health, academic Learning, and behavioral profiles
- Meeting students' needs at home
- Finding relevant mental health, learning, or behavior support in the community

Overall, School Psychologists can be expected to serve as a bridge that strengthens the connection between parents to other members of intervention and Individualized Education Planning teams in such a way that parents feel connected, informed, valued for their insights, and integral members of any decision-making group with respect to their children's needs. It is important to note, however, that the parent-school psychologist relationship is a two-way road. School psychologists can be expected to be attuned to the need of parents to feel welcomed in the school and to seek out parental involvement in the problem-solving process, but parents should position themselves to take full advantage of the School Psychologist's expertise. Doing so certainly coincides with the tenets of Choice Theory.

### **Basic Needs Beyond Power**

While satisfying the basic need for Power as described above is a clear way for parents to secure the help that their children need, aspects of Glasser's other Basic Needs are also important to understand. From the student's perspective, doing well in school contributes to mental wellness (and even physical awareness later in life), which relates to Survival. Feeling comfortable in the school setting promotes the development of healthy connections with peers and other members of the school community. The failing student often feels shy or defensive, and thus may not satisfy the need for Loving and Belonging. The need for Freedom involves developing a sense of independence and the ability to exercise choice. It is clear that school failure limits choice later in life (and potentially in the present depending on the immediate consequences of their failure). Additionally, students who experience failure may not gain the confidence of context to make positive choices. Even the need for Fun is relevant in this case inasmuch as students burdened with school failure and its consequences may be less readily available to experience joy and amusement. Coincidentally, as School Psychologists are uniquely trained and positioned to empower parents, so too are School Psychologists involved with helping students meet these basic needs in schools.

In addition to empowerment, parents who successfully obtain additional support for their struggling children, either through general education intervention or special education instruction, satisfy additional areas of Choice Theory's basic needs. Feeling mentally well because their child is getting needed support (survival), becoming an integral part of the school community through their actions (belonging), gaining knowledge that builds confidence and supports informed choice (freedom), and being able to celebrate in light of what has been accomplished (fun), are all consequences related to satisfying aspects of Choice Theory's Basic Needs. But parents and students are not alone. Working with professionals in schools, such as the School Psychologist, can enhance the accomplishment of these goals. In summary, the tenets and methods of Glasser's Choice Theory represent a promising tool for parents seeking to gain support for their children who are struggling in school.

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## Brief Bios--

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# **USING REALITY THERAPY TO COUNSEL ELEMENTARY SCHOOL STUDENTS WITH CHRONIC CONDITIONS**

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## **ABSTRACT**

Providing counseling services to students with chronic conditions has become an increasing concern in elementary school settings. While elementary school counselors are frequently called on to provide these counseling services to students, they often lack proper training, effective strategies, and professional development. Failure to properly address chronic conditions in elementary schools can result in negative behavioral, social, and academic outcomes. Consequently, it is paramount for elementary school counselors to have access to a variety of interventions to counsel students with chronic conditions. We will discuss options for employing reality therapy as a means for effectively working with this unique population.

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Chronic conditions are defined as being persistent for at least 3 months, result in an overall decrease in quality of life at home and school, and include medical and behavioral conditions such as asthma, ADHD, and diabetes (Centers for Disease Control and Prevention [CDC], 2016, 2017; Lum et al., 2019). It is estimated that approximately 25% of children in the U.S. are affected by a chronic condition resulting in significant problems related to school performance (Emerson et al., 2015; Lum et al., 2017; Newton, 2021). For example, students with chronic conditions are 3.8 times more likely to repeat a grade and 4.9 times more likely to have absenteeism issues than their healthy peers (Lum et al., 2019). Parents and family members also report increased stress levels associated with the diagnosis, accompanying medical issues, and academic accommodation procedures (Distelberg, et al., 2014; Nutting, 2015). While significant educational and social ramifications can exist for students dealing with chronic conditions, especially in early grades, American public schools often lack proper information and training to address this population's needs (Miller et al., 2016; Newton, 2021). Notably, though, school counselors can be a valuable resource in enhancing and understanding the needs for education, advocacy, and interventions for elementary students with chronic conditions.

School counselors are in a prime position to address the concerns and issues raised for students and families facing chronic conditions. This role is especially relevant considering that 97% of school counselors reported working with students with chronic conditions (Hamlet et al., 2011). One of the critical components of responsive services outlined in the ASCA National Model© (American School Counselor Association [ASCA], 2019) states that school counselors must be "prepared to recognize and respond to student mental health crises and needs and to address these barriers to student success by offering education, prevention, and crisis and short-term intervention" (p. 86). This duty is of vital importance because for most students, school is seen as an essential aspect of quality of life. Unfortunately, the mental health and educational needs of students with chronic conditions go largely undetected or unresolved in school settings (Davis et al., 2020; Emerson et al.,

2015; Lum et al., 2019). Elementary school counselors often provide guidance for school absences and reentry, community resources, academic strategies, and counseling interventions, as well as helping school stakeholders gain awareness of signs of fear, depressed mood, somatic complaints, isolation, and academic underachievement (D'Agostino et al., 2011; Davis et al., 2019; Merianos et al., 2015).

School stakeholders must also be considered in addressing chronic conditions in elementary settings. Parents and caregivers may require a great deal of support in addressing chronic conditions for their children including need for solid communication, awareness of stress management techniques, plus familiarity with academic and behavior strategies (Distelberg et al., 2014; Peery et al., 2012). Dealing with chronic conditions can elicit increased stress for students and stakeholders. Consequently, elementary school counselors must embrace the role of mediating with teachers, resolving school conflicts, providing safe spaces to explore feelings, educating stakeholders on appropriate child-based interventions, and utilizing school resources (e.g., nurses, physical education teachers, paraprofessionals) (Bergen, 2017; Kourkoutas et al., 2015; Peery et al., 2012). For example, professional collaboration with school nurses is essential in developing education and interventions based on current and accurate information to address the health concerns of students and their caregivers (Davis et al., 2020; Lum et al., 2019; Merianos et al., 2015).

Despite the increased incidents and impact of chronic conditions and their impact on the school environment, school counselors typically receive minimal training for responding to students' emotional and psychological needs (Compas et al., 2012; Hamlet et al., 2011; Lum et al., 2019). Further, school counselors report a lack of communication, information, and adequate training, and unsupportive or insufficient school system policies related to dealing with issues such as chronic conditions (Crump et al., 2013; Miller et al., 2016; Newton, 2021). Considering these deficits, it is important for school counselors to consider potential emotional, behavioral, and academic issues prior to the onset of critical events to ensure that adequate preparation and information are in place to effectively work with the diagnosis and symptoms of chronic conditions (Davis et al., 2019; Emerson et al., 2015). Because of the increasing cases and impact of chronic conditions in schools, it is paramount that elementary school counselors be equipped with proper strategies and interventions to work with this unique population.

Considering the need to meet the academic and personal issues of students with chronic conditions in schools (Davis et al., 2019; Emerson et al., 2015; Losinski et al., 2016), it is imperative to employ targeted and innovative interventions for elementary school counselors. It is also critical that counseling interventions are capable of integration into existing responsive service delivery and align with best school-based practices (ASCA, 2019). One counseling approach often applied in schools that adheres to these many of these needs and guidelines is William Glasser's (1998) reality therapy. Reality therapy provides an approach for helping students make appropriate choices to effectively meet their basic needs for love and belonging, freedom, power, fun, and survival. Reality therapy has been shown to be effective in areas such as perceived academic efficacy, self-esteem,



and classroom behaviors (Davis et al., 2015; Mason, 2016; Mason & Dye, 2017; Wubbolding, 2017). Further, reality therapy has also shown to be effective at relieving stress for people with health-related issues (Davis et al., 2020; Pedigo et al., 2018).

A crucial component of reality therapy when addressing chronic conditions is the focus on the counseling relationship to understand the children's current behavior choices related to their situation and exploration of alternative behavior options for the future (Roche, 2018; Wubbolding, 2017). In the case of chronic conditions, students may be demonstrating negative behaviors related to frustration, embarrassment, or confusion connected to their diagnosis and symptoms. Focusing on a collaborative relationship can foster connection while developing problem-solving skills resulting in moving toward a more authentic meeting of needs and wants to elicit meaningful change (Mason & Dye, 2017; Robey et al., 2011; Stutey & Wubbolding, 2018). Such relationships are paramount in understanding the quality world of children (Bradley, 2014; Davis et al., 2015). The development of need-fulfilling relationships especially holds true for students with chronic conditions as they often deal with bullying, lack of proper medical care or resources, and misunderstanding of their conditions in the school setting (Davis et al., 2019; Bergren, 2017; Lum et al., 2017).

Aspects of reality therapy, such as the WDEP method, lend well to working with students facing chronic conditions in developing a map for goals and plans to address wants and needs (Sori & Robey, 2013). Reality therapy can be adapted to visually creative, familiar, and developmentally appropriate methods such as art and play which is essential in working with elementary school students (Davis et al., 2015; Davis et al., 2019; Stutey & Wubbolding, 2018). Ensuring the proper cultural and developmental process of the child's wants, doing, evaluation, and planning is essential in fully understanding the child's quality world resulting in more realistic and attainable goals (Wubbolding, 2017). Further, allowing students to process their unique wants, needs, and behaviors in a safe, familiar, and trusting relationship leads to internal motivation and change (Davis et al., 2020; Roche, 2018; Stutey et al., 2019). Children have also reported reality therapy as less coercive and more encouraging than other counseling approaches (Mason, 2016). Helping children find their voices through the cooperative and collaborative counseling process when dealing with the complicated issues such as the diagnosis of a chronic condition can provide opportunities to make choices to help them feel in charge, make decisions, develop ownership, and solve problems more effectively (Davis et al., 2019; Roche, 2018; Stutey & Wubbolding, 2019).

Through the implementation of these strategies, the practitioner engages with the child to explore and incorporate significant aspects of reality therapy related their chronic conditions. The counselor and child can assess and develop insights into the child's wants, needs, doing behaviors, plans, and quality world pictures with a process that is developmentally and culturally appropriate to address a multitude of potential issues faced by children in society today. The use of reality therapy also provides an essential component of any counseling intervention, the relationship. The relationship established between the

counselor and child is paramount in helping the child recognize their quality worlds, needs, wants, and behaviors while developing new strategies in facing their chronic conditions to create a healthy, productive, and satisfying outcome.

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**Brief Bios—**

Dr. Eric S. Davis is an Associate Professor in Counselor Education at the University of South Florida with over 10 years of experience. He is a certified school counselor, a National Certified Counselor, and Registered School-Based Play Therapist. Dr. Davis has served as a school counselor at the elementary and high school levels. He has researched, published, and presented on topics related to creative counseling and pedagogy strategies, school-based play therapy, and counseling students with chronic conditions.

Bonnie Gómez Torres has taught English and Spanish languages for more than 7 years and has worked with college students in Institutional Diversity, Multicultural Affairs and Student Success positions. Bonnie has a passion for supporting students' growth via intersectional lenses. In 2020, she began her Ph.D. studies in Educational Leadership and Policy at the University of South Florida. Bonnie's current research interests are Latinx success, retention, and persistence in college, Hispanic serving institutions, and first-generation identity development and self-concept of Latinx University Students.

## **WAYS TO FACILITATE IMPROVEMENTS WITHIN THE EDUCATIONAL COMMUNITY THROUGH THE USE OF CHOICE THEORY, REALITY THERAPY, AND OTHER GLASSER-RELATED CONCEPTS**

Jane V. Hale

I can remember trying to figure out my professional role in my first school counseling position. While I knew that I was tasked with providing supportive services to students to be successful in the realm of the personal/social, career, and academic domains, I also knew that I had a responsibility to engage with the entire community that has an impact on these students. In other words, I was aware that I was not working with the students in isolation. Therefore, I knew that I had to address the larger systems that are part of each student's world. In my eyes, the educational community consists of the students, parents, teachers, counselors, paraprofessionals, cafeteria workers, custodians, security guards, nurses, administrators, outside service providers, and all staff that are part of and interact with the school district. As I reflect on my feelings when I was in that position, I can remember how overwhelmed I felt. I viewed this task as insurmountable and next to impossible.

Thankfully, I had one administrator who believed in the value of choice theory and reality therapy. She was the person that hired me and was also the person that promoted training me in Glasser's ideas with the intention of teaching his concepts to fellow staff members. I was so grateful for her wisdom and dedication to integrate choice theory and reality therapy into the school setting. The theoretical lens I was learning gave me a realistic approach to handle an overwhelming task. My job was two-fold; How do I integrate Glasser's ideas into the lives of my students and all of the adults that work and support the students in the school. I was eager to apply Glasser's concepts to my job. My first responsibility was to help the students integrate the school into their Quality Worlds, my other job was to do the same with the rest of the educational community.

I was the only school counselor in a building that had six grades and over 500 students, so I had to put my role in perspective. I could only do so much, but one thing I did have control over was to start with myself and view my own experiences through choice theory and reality therapy. If I didn't have a good understanding of myself, how could I apply it to my relationships with others? How was I getting my power, freedom, fun, love/belonging, and survival needs met in the school? Did I find joy in my job, and if not, what behaviors did I need to engage in to help to get my needs more adequately met? I felt really powerful as I sought to create a program to help others and was able to verbalize my own ideas about how to create a culture where ALL individuals in the educational community saw the school as part of their Quality Worlds. I had fun interacting with co-workers during lunch and laughing at parts of our day that were humorous. I was starting to make better choices to get my basic needs met and felt less overwhelmed, frustrated, and burnt-out. As a result, I was more patient with my students and colleagues and that allowed me to create more positive relationships with everyone.

I started to pay more attention to how the adults in the school and community were getting their basic needs met. The regimented approach of the educational system doesn't allow for much choice throughout the day for many school employees. Even the basic needs of using the restroom or taking a break when needed is difficult for educational staff to meet in the structure of most schools. I would see teachers struggle to get their power needs met, feel isolated from peers, experience threats to their freedom, and have difficulty getting their survival needs met in the structure of the "typical" school system. As a school counselor, I had more freedom and power than the teachers and paraprofessionals in the classroom. I was able to be creative in my approach to helping students, organize my own schedule, and take a restroom break at my own convenience. Of course, everyone has a different need attainment level. I had to realize that I have a large freedom need and would find it difficult to adhere to a strict daily schedule. It was important for me to pay attention to the unique ways that all individuals in the schools got their basic needs met.

Parents were also struggling with their own difficulties in managing their personal lives and parenting in the modern world. I started to be more understanding and less reactive with parents who were angry and frustrated when they interacted with school. What need wasn't being met for them? What need was threatened? I started to build better relationships with them when I recognized that maybe their power need was threatened and to find balance, they would try to get in a power struggle with me or the teacher. I learned how to diffuse this power struggle by using WDEP. I asked them what they Wanted and we would usually find that we shared the same Want and then were able to maximize our work together. Our shared Want was some form of having their child succeed. We had common ground to develop a relationship. The challenge was for me to be self-aware and not take the behavior that parents exhibited personally. As a result, parents started to view their relationship with me and the school more favorably.

After completing a Basic Level Training in Choice Theory and my first practicum through The Glasser Institute, I was able to provide trainings to educational staff about using Glasser's ideas in the schools. The training included learning about the concepts of choice theory and reality therapy and how to integrate them into the classroom. Part of this training also involved recognizing how the participants were experiencing choice theory in their own lives. The optional trainings were attended by a small percentage of teachers, but the ones that attended really started to see the value in Glasser's ideas. They recognized they would like to find other ways to get their basic needs met in their educational roles. Through teamwork with the principal, a fellow teacher, and an administrator, we started providing a support group to interested school staff. We started a group called "Chicken Soup for the Teacher's Soul," where we infused the concepts of choice theory in a group setting. This was a place where teachers were nurtured, their stories were valued, we connected with one another, exchanged ideas, and learned new things. One constant was that there always was chicken soup. I was a co-facilitator with a 4<sup>th</sup> grade teacher. We worked together to design the program, and the administration aided us with funding and a space to meet. One of the goals that we all shared was to eventually publish a book about uplifting stories that the teachers told during our sessions. Even though the book isn't completed yet, it was something we were embarking on together that had real meaning to all of us.

Coming together as an educational community isn't an easy task at all. So many individuals have different experiences, ideas, and beliefs that aren't always congruent with those of others. We are all experiencing our basic needs differently and behaving in diverse ways to get them met. Our consistent commonality is that we all inherently have the same basic needs of love/belonging, fun, freedom, power, and survival, and we are constantly choosing behaviors to help us get these needs met. Applying Glasser's ideas to building a cohesive community creates an emphasis on understanding ourselves and others which promotes lots of opportunities to create positive relationships throughout the entire building. If the educational community can become part of all members' "Quality Worlds," then it is plausible to suggest that improvement within the educational community will surely be experienced as long as we share that vision, as well as the "Quality World" that we all ultimately wish to achieve.

### **Brief Bio--**

Jane V. Hale is an Associate Professor in the Department of Counseling and Development at Slippery Rock University where she coordinates the School Counseling Program and also teaches in the Clinical Mental Health Counseling Program. Dr. Hale has an extensive resume of practitioner experience in both the mental health and school counseling fields. She has worked as a therapist in a family-based program, started a private practice specializing in the treatment of adolescents and families, has served as a professional school counselor at the elementary school level, and provided counseling services to students in a public special education school. Dr. Hale holds certification as a k-12 school counselor and is a Licensed Professional Counselor in the state of Pennsylvania. She is certified in Choice Theory and Reality Therapy through the Glasser Institute for Choice Theory and infuses Glasser's theories and models into her counseling, teaching, and supervisory roles.



## USING TOTAL BEHAVIOR AND BASIC NEEDS TO ENHANCE EDUCATOR AND STUDENT WELL-BEING

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### Abstract

The present article presents an educator self-reflection for well-being process that integrates the concepts of Choice Theory with the Applied Behavior Analysis Model to support educators' understanding of the cause-and-effect relationship of behavior and the environment in which it occurs. The educator self-reflection for well-being is a proactive process that uses the Choice Theory concepts of Basic Needs and Total Behavior with ABA behavior pathways. Through examination of their perceptions and their own basic needs, educators can gain insights about their personal well-being and subsequent actions (total behavior). Improved educator well-being is anticipated to also benefit and enhance student well-being being in the classroom.

Keywords: choice theory, total behavior, applied behavior analysis, behavior pathways

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### Applied Behavior Analysis and Functional Behavior Assessment

Applied Behavior Analysis (ABA) is widely used in public schools in the United States through a data collection process referred to as Functional Behavior Analysis/Assessment (FBA) (Kerr & Nelson, 2006; Van Houten & Hall, 2001; Yell, Shriner, & Meadows, 2009). General principles of ABA are that behavior is: (a) controlled by its consequences, which need to be immediate and consistent, (b) strengthened or maintained by reinforcement, and/or (c) strengthened, weakened, or maintained by modeling (Sullivan, Crosland, Iovannone, Blair, & Singer, 2021). Behavior can be seen and measured with an analysis of collected data to identify the cause-and-effect relationship of a specific behavior and the environment in which it occurs. This is depicted in the following 3 behavior pathways (desired behavior, problem behavior, replacement behavior):

Setting Event-Antecedent-Desired Behavior-Maintaining Consequences (Function)

Setting Event-Antecedent-Problem Behavior-Maintaining Consequences (Function)

Setting Event-Antecedent-Replacement Behavior-Maintaining Consequences- (Function)

The desired behavior is a specific setting acceptable behavior that is observed to align to the guidelines, rules, and/or expectations for the setting. The problem behavior is a specific behavior that is observed to not follow the guidelines, rules, and/or expectations for the setting. The replacement behavior, an approximation of the desired behavior, follows the guidelines, rules, and/or expectations for the setting. By learning it, the individual gets closer to demonstrating the desired behavior (Moreno, Wong-Lo, & Bullock, 2017).

Moreno et al. (2017) found that setting events refer to the conditions, both internal and external that influence the probability and form of behavior demonstrated by an individual. An antecedent is the thing or event that occurs precedes, occurs before the event or response. A maintaining consequence is what occurs directly after a behavior that either increases, decreases, or maintains the behavior. The function is defined as the purpose of the behavior for the individual (Lloyd, Torelli, & Bullock, 2020). Function is relevant across each pathway (i.e., Why is the individual displaying the behavior? What does the individual get out of displaying this behavior? What is the unmet need that this behavior seeks to satisfy for the individual?). Data collection across the pathway process leads to the development of a hypothesis of the function of the behavior, which increases understanding of the cause-and-effect of the behavior (Barker, 2021; Frey & Wilhite, 2005; Lloyd, Randall, Weaver, Staubitz, & Parikh, 2020; Yell et al., 2009; Young, Andrews, Hayes, & Valdez, 2018).

### **The Focus on Student Behavior**

In a school setting, the FBA process implemented by educators is typically activated with the perception that a student is demonstrating a *problem behavior* that has a frequency, intensity, and/or chronicity that is perceived to inhibit the student's success. The problem behavior may also have a negative impact on other students in the classroom or school environment. The intent of the FBA is to collect data to understand the cause-and-effect relationship of the student's problem behavior with the environment through data collection on setting, antecedent, behavior, and consequences. This leads the educators to understand the function of the behavior for the student.

### **The Data Collection Depends on the Educational Team Implementing the FBA Process.**

When the FBA process does not fully explore the environment in breadth and depth, it can minimize the breadth and depth of data collection for a comprehensive understanding of the behavior which will negatively impact problem-solving for the student. Overemphasis during the data collection on the student who demonstrates the problem behavior can lead the educators to perceive that the root cause of the problem behavior is the student. This can imply that the problem, the root cause is within the student. This puts the team at risk to extend to a perception that a student is willful and purposeful in displaying the problem behavior. An incomplete understanding of student behavior will impede future work to help a student decrease problem behavior, learn a replacement behavior, and display a desired behavior. An FBA process will be more robust when it explores all aspects of the student's school and classroom environment. This includes educators and the component of an educator self-reflection for well-being.

### **Introducing Educator Self-Reflection into the FBA**

The authors present an educator self-reflection for well-being as a component to the FBA process. The educator self-reflection for well-being is a check-in with self that integrates the concepts of Choice Theory (Glasser, 1969; Glasser, 1992; Glasser, 1998; Glasser, 2013) with the ABA model (setting event-antecedent-behavior-maintaining consequences-function). The Choice Theory concepts of basic needs and total behavior are highlighted. The educator self-reflection for well-being component can be a first step for educators to check-in with self. Educators can gain insight to understand their own basic needs, respond proactively through total behavior that meets their basic needs as they observe and perceive student behavior in the classroom and school setting.

## **Choice Theory Overview**

Choice Theory presents a perceptual system with the intent of helping participants understand how and why individuals behave so they learn how to take more effective control or choice over one's life (Glasser, 1969; Glasser, 1992; Glasser, 1998; Glasser, 2013). The foundation of Choice Theory postulates that all behaviors in humans are internally motivated, purposeful, flexible, and creative. Fundamentally, in our constant attempt to gain more effective control, we as humans (control systems) behave in the world to get the picture (quality world) that we want at the time.

Glasser presented the foundation that people are intrinsically motivated to meet five innate basic needs: survival, fun, power, freedom, and love and belonging. The needs are universal and overlap with one another (Glasser, 1969; Glasser, 1992; Glasser, 1998; Glasser, 2013; Marlatt, 2014; Pedigo, Robey, & Tuskenis, 2018). Survival is the basic physiological need to survive as individual, includes our physical needs for food, water, air, safety, shelter, warmth, physical health, and sexuality. Fun is a psychological need is enjoyment, the desire to enjoy a job, have a sense of humor, to engage in a hobby, to have interest, and to feel excitement about a work project or leisure time activity. Power is a psychological need is for a sense of empowerment, worthiness, self-efficacy, and achievement. The need to be able, to be capable. It is an inner sense of, accomplishment, pride, importance, and self-esteem. Freedom is a psychological need is for independence and autonomy; the ability to make choices, create and explore, to express oneself freely; have sufficient space to move around, feel unrestricted in determination of choices; free will. Love and Belonging is a psychological need to love and care for others and to believe that we are loved and cared for. Connectedness with people includes family relationships, friendships, working relationships, and acquaintanceships.

As an individual makes choices to meet needs, balance pain, and/or enjoyment, an individual acts through total behavior (thinking, acting, feelings, & physiology). Total Behavior is our best attempt to our needs met (Glasser, 1998; Glasser, 2013; Rapport, 2020). Every and all behavior is total behavior. Within Choice Theory, the visual of a car with delineation of the wheels is used as the depiction of Total Behavior, our behavioral system. The front wheels of behavior are (1) Thinking and (2) Acting. The rear wheels are (3) Feelings and (4) Physiology. Our thinking wheel is what is going on internal with our thoughts. Our acting wheel is our doing behavior (i.e., talking, walking, etc.). Our feelings wheel are our emotions (i.e., sad, angry, happy). Our physiology wheel is our physical symptoms (i.e., knees shaking, heart racing, body tensing). In a real car, all the wheels move at the same time to make the car go anywhere. The same applies with each individual and total behavior. All four components of total behavior are all interconnected to make our behavioral system. Wherever your thinking and actions takes you, your feelings and body physiology will follow. Pausing to think and reflect can help look at options for actions. Changed actions can adjust feelings and physiology. An individual can increase likelihood of meeting basic needs.

## **Educator Self-Reflection of Basic Needs and Total Behavior**

Self-reflection is a standard component in and Choice Theory as it supports self-responsibility to understand basic needs and action for change (Kianipour & Hoseini, 2012; Larijani, Ghadirian, Saatchi, Layegh, & Arishiha, 2020; Marlatt, 2014; Morgan, 2020; Palmer Mason & Mason-Bennett, 2021; Parish, 2020; Rapport, 2020). Glasser believed that individuals are successful if they take responsibility for their choices (Glasser, 1969;

Glasser, 1992; Glasser, 1998; Glasser, 2013). Choice Theory has a long history of application and integration in school settings (Barker, 2021; Frey & Wilhite, 2005; Glasser, 1969; Glasser, 1986; Glasser, 1992; Glasser, 1997; Glasser, 2002; Hammond, 2022; Harvey & Retter, 2002; Hinton, Warne, & Wubbolding, 2011; Ignoffo, 1999; Kianipour & Hoseini, 2012; Ludwig & Mentley, 1997; Palmer Mason & Mason Bennett, 2021; Rebane, 2000; Robey, Beebe, Mercherson, & Grant, 2011; Wittek, 2000).

Educator behavior is part of students' environment. Educator behavior contributes to the cause-and-effect relationship of student behavior and the environment of which students demonstrate behavior (desired, problem, and replacement). It is important for educators to understand their own basic needs and the subsequent impact of their needs on students they work with in the classroom and school setting. Basic needs self-reflection questions for educators can assist them to tune into themselves at any moment in time when they are working with students.

### **Setting Event-Antecedent-Behavior-Maintaining Consequences (Function)**

Educator self-reflection for well-being is directly applicable to each stage of the behavior pathway both for the educator and is relevant to the impact of the educator's behavior on students. The opportunity with the educator self-reflection for well-being provides a process for educators first to understand their own needs and behavior before they set-out to interpret a students' behavior.

The proposed array of educator self-reflection for well-being questions are shared as a starting point and crosscut the 3 behavior pathways. These questions can be used proactively throughout the day by educators. They can be used by educators when they are happy, tired, excited, hungry, upset, energized, angry, and/or overwhelmed (to just get started). The questions are relevant when educators notice they are making internal negative or less than positive self-comments about student behavior. The educator self-examination for well-being is also extremely helpful for educators and students when observing positive student behaviors.

Ideas for Educator Self-Reflection for Well-Being: Educator Basic Needs Check-in:

- What is status of my five basic needs today? Is there one or more that feels unmet to me? Is this negatively impacting me in the classroom at this time?
- What is the status of my five basic needs today? Is there one more that feels met and satisfied to me that I want to maintain and focus on?
- What is going on in my life that has a positive impact for me that can help me with positive student interactions today?
- What is going on in my life that may have a negative impact for me in my interactions with students today?
- What is the status of my Love and Belonging need at this specific point in time?
- What is the status of my Survival need at this specific point in time?
- What is the status of my Fun need at this specific point in time?
- What is the status of my Freedom need at this specific point in time?
- What is the status of my Power/Self-Worth need at this specific time?

- What is occurring in the current classroom or school setting events that is either helping or challenging my basic needs?
- What is occurring in my five basic needs that can be a positive antecedent to my response to my needs?
- What is occurring in my five basic needs that may be a negative antecedent to my response to my needs?
- How are my 5 basic needs contributing to the function of my behavior?

Ideas for Educator Self-Reflection for Well-Being: Educator Total Behavior Check-in:

- What do I want my desired behavior to be so I can meet my basic needs and promote a classroom environment that meets student needs?
- How can I use Total Behavior to continue my own desired behavior pathway? (feelings, physiology, action, thinking)
- How can I use Total Behavior to change my own problem behavior pathway? (feelings, physiology, action, thinking)
- How can I use Total Behavior to make progress on my own replacement/alternative the desired behavior pathway? (feelings, physiology, action, thinking)
- Am I driving my Total Behavior car forward for my optimal behavior in the school setting?
- What is the status of my feelings behavior? How is it impacting my Total Behavior?
- What is the status of my physiology behavior? How is it impacting my Total Behavior?
- What is the status of my action behavior? How is it impacting my Total Behavior?
- What is the status of my thinking behavior? How is it impacting my Total Behavior?
- How is my Total Behavior contributing to the function of my behavior?
- What are my unmet needs (the function) that I might be bringing into the classroom?
- What impact does my current Total Behavior have on my basic needs?
- What impact does my current Total Behavior have on students and their basic needs?

### **Educator Self-Reflection for Student Well-Being**

Simultaneously as educators are trying to gain control and choice over their life, students are doing the same. In the classroom setting, students' total behavior is their best attempt to meet their needs. The application of educator self-reflection for well-being to student well-being provides an opportunity for educators to gain insight on the impact of their behavior on students' needs, students' total behavior, and overall students' well-being.

Student Desired Behavior Pathway: Educator Reflection for Student Well-Being

The student is perceived as displaying acceptable behavior (i.e., is following guidelines, rules, expectations for the school setting). The following are questions educators can ask themselves for increased insight for student well-being:

- What student(s) needs are being met in the classroom at this time?
- What is supportive and proactive for students in the classroom, school setting that supports students' positive, desired total behavior?
- What are the supportive and proactive antecedents in the classroom, school setting for the students that supports students' positive, desired total behavior?
- What is following, or occurring after the positive, desired total behavior? What am I, as the educator, doing to help the student(s) to continue this positive total behavior? What can I continue to do?

#### Student Problem Behavior Pathway: Educator Reflection for Student Well-Being

The student is perceived as displaying a problem behavior (i.e. is not follow guidelines, rules, expectations for the setting). The following are questions educators can ask themselves for increased insight for student well-being:

- What student(s) needs are not being met in the classroom at this time?
- What is not supportive and proactive for the student(s) in the classroom, school setting to contribute to the challenging student total behavior?
- What is not supportive and proactive antecedents in the classroom, school setting for the student(s) in the classroom, school setting to contribute to the challenging student total behavior?
- What am I doing that directly or indirectly contributes to students' unmet needs that contribute to challenging total behavior? What can I do to help the student(s)?
- What is my personal attitude and perspective about the problem total behavior being displayed by this student(s)? Am I letting a personal attitude negatively impact positive teacher-student classroom interactions? Am I unintentionally contributing to the student's display of challenging total behavior?

#### Student Replacement Behavior Pathway: Educator Reflection for Student Well-Being

The student is perceived to need a new behavior, a replacement to the problem behavior that is incompatible with the problem behavior. The new behavior is learned through a teaching process that replaces the current problem behavior and builds a scaffold to eventually display the desired behavior in the setting. The following are questions educators can ask themselves for increased insight for student well-being:

- What student(s) needs are being met in the classroom that help support the replacement total behavior?
- How will the replacement total behavior to assist the student to replace the problem total behavior? What student needs should be met to assist the student with the new, replaced behavior?
- What is supportive and proactive for students in the classroom, school setting that supports students' positive, replacement total behavior?

- What is the supportive and proactive antecedents in the classroom, school setting for the students that supports students' positive, replacement total behavior?
- What should directly follow the display of the replacement total behavior to meet student needs and increase the display of this new skill?
- What am I doing to help the student(s) to continue this replacement behavior? What can I continue to do?

### **Educator Well-Being for Student Well-Being**

The presented educator self-reflection for well-being component presented in this article is fundamentally a focus on teacher well-being in the pathway process to maximize student well-being. The proposed educator self-reflection for well-being check-in integrates the concepts of Choice Theory and the Applied Behavior Analysis implementation of a Functional Behavior Assessment. The use of ABA and FBA are common in public school settings in a wide-range of decisions regarding student behavior. It is highly likely their use in school settings will continue. The Choice Theory foundations have an extensive history of use in understanding behavior, including use in school settings. It is relevant and applicable, to integrate Choice Theory into the FBA process for students and educators. Assisting educators to implement effective self-reflection supports their perceptual system of optimal behavior change. Through the use of self-reflection for well-being, educators help themselves by tuning into their own basic needs (met and unmet) so they can apply the concept of Total Behavior first to themselves as a first pathway for behavior change. They can enhance their well-being and share their optimal well-being with students.

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## TOTAL BEHAVIOR OF THE HOLY FOOL

Sergei Bogolepov, MD, CTRTC

"Yurodstvo," or "Foolishness for Christ," is well known in Russian culture. St. Basil Blazheny, the Cathedral at Red Square in Moscow, is one of the main symbols of Russia. In all, the Russian Orthodox Church officially venerates 36 Holy Fools. There are fairly detailed descriptions available of the life of these unusual people and such descriptions provide a good opportunity to make psychiatric retro-analyses. It is especially important to note that these Holy Fools are believed to have adopted this peculiar form of behavior absolutely consciously and/or intentionally. Some of them (e.g., Xenia of St. Petersburg), were examined by authorities and declared to be mentally sound. I would like to stress this point that this was "at the beginning of their way".

With William Glasser's (1998) concept of Total Behavior in mind, let us examine the behavior of the "Holy Fools."

### 1. Acting.

Typically, the Holy Fool acts pretty insane, violating all possible social rules and norms. They show two types of behavior: aggressiveness and passiveness. Using an aggressive type of behavior, the Holy Fool shouts insulting phrases, throws stones, destroys objects, even holy icons (St Basil), which are considered to be great offenses in Russian culture. Passive behavior resembles a catatonic form of schizophrenia. Typically, a Holy Fool stands, sits, and/or lays in a fixed posture for a long period of time.

### 2. Thinking.

Regarding the Thinking Component of Total Behavior, it can often be judged by the verbal behavior of these people. Most of the sayings of Holy Fools are recorded. These recorded sayings typically take the form of predictions, accusations and/or prophecies. Frequently the speech of a Holy Fool was not coherent and required a great deal of interpretation. Predictions and prophecies, in turn, were gloomy and filled with ideas of evil forces and human sinfulness. Modern Psychiatrists would most likely diagnose such behavior as a paranoid form of schizophrenia. When the public health care system was formed in Russia, Holy Fools began to end up in mental hospitals and the main diagnosis they received was schizophrenia.

### 3. Feeling.

According to the description of witnesses, Holy Fools often experience an emotional excitement, intense anger and sometimes, great fear. There are paintings that reflect these emotional states of Holy Fools. I would like to mention that according to written descriptions, these feelings were the result of the Acting and Thinking components of their Total Behavior.

### 4. Physiology.

The most mysterious part of Total Behavior of Holy Fools might be physiology. Despite experiencing insufficient nutrition, constant lack of sleep, and hectic lifestyles, Holy Fools were actually distinguished by their excellent health. They were also often characterized by their exceptional endurance and their ability to tolerate very low temperatures. Most of them lived outdoors in below freezing temperatures, practically naked or with little clothes on. It seems that the laws of physics had little or no power over them. I personally know

one individual who pretends to be Holy Fool but failed the “physiology test” when he got severely frostbit and had several fingers amputated.

According to Choice Theory, every behavior is purposeful. Holy Fools often had opportunities to say and do whatever they wanted in front of some of the highest authorities. They had something like diplomatic immunity. Their words and actions were nearly never punished. I dare to say that this form of Total Behavior seemed to guarantee satisfaction of their Power and Freedom needs. In other words, in a country where External Control historically prevails, it can be a good way to maintain their own Freedom and Power, all under the guise of being “Holy Fools.”

The phenomenon of “Jurodivy” (Holy Fool) may be important for understanding the nature and development of schizophrenia. Perhaps not as a mental disease, but as a function of Choice of Total Behavior to satisfy basic needs. Of course, most of the people who choose schizophrenia are not Holy Fools, but to a great extent their Total Behavior is very similar.

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## **Brief Bio—**

Sergei Bogolepov, MD, CTRTC, has been a Senior Faculty Member of WGI since 1998. Sergei’s training was under the direction of William and Carleen Glasser. Sergei is currently employed as a psychotherapist and tries to “spread the word” regarding Choice Theory and Reality Therapy throughout Russia.

## **SOME BETTER WAYS TO TEACH TOTAL BEHAVIOR**

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### **Abstract**

This manuscript was designed to examine the ways by which we can better teach total behavior. Initially, total behavior is defined using a choice theory/reality therapy framework. Choice theory teaches that total behavior is made up of four distinct components – acting, thinking, feeling, and physiology. This theoretical approach emphasizes thinking and acting. The primary emphasis is on what the client is doing and how the doing component influences the other components of total behavior.

*Keywords:* total behavior, choice theory, reality therapy, therapeutic relationship, choices

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### **Ways by Which We Can Better Teach Total Behavior**

Glasser (1986) has stated that human beings are driven to behave and that human behavior originates from within a person, not just from outside stimuli. Whether this behavior is effective or ineffective, it is aimed at maneuvering the external world so that human needs and wants are fulfilled. Choice theory expands the single word *behavior* to two words *total behavior*. Total, because behavior always consists of four components: acting, thinking, feeling, and the physiology associated with all our actions, thoughts, and feelings (Glasser, 1998). It is important to note that although all four components are always operating when a total behavior is chosen, individuals have direct control only over their actions and their thoughts. In the following paragraphs, total behavior and how we can better teach total behavior will be explored using a choice theory/reality therapy framework.

### **Choice Theory**

Choice theory was developed by William Glasser (1998); it explains why and how people function. This theoretical approach is the basis for reality therapy. Reality therapy provides the delivery system for helping individuals take more effective control of their lives. Therapy consists mainly of helping clients to make more effective choices as they deal with various people and situations in their lives. For therapy to be effective, it is essential for the therapist to establish a satisfactory relationship with the client. After this, the skill of the therapist as listener and teacher assumes a central role.

Choice theory posits that we are not born blank slates waiting to be motivated by forces in the world around us. Rather, we are born with and motivated by five genetically encoded basic needs that drive us all of our lives (Glasser, 1998). These needs are survival, love and belonging, power or achievement, freedom or independence, and fun. Each person has all five needs; however, they vary in strength and/or priority. This approach emphasizes that shortly after birth and continuing all through life, individuals store information inside their minds and build a file of wants called the *Quality World*. This is the world we would like to live in if we could. It is completely based on our wants and personal needs, and these are very specific. This somewhat imaginary world consists of specific images of people, activities, events, beliefs, situations, and possessions that are thought to fulfill our needs (Wubbolding, 2000, 2011a).

People are the most important components of the *Quality World* and these are the individuals that clients care about and want most to have a relationship with. Choice theory explains that everything we do is chosen and every behavior is our best attempt to get what we want to satisfy one or more of our basic needs (Glasser, 2001). For therapy to be successful, the therapist must be the kind of person the client would consider putting in his/her *Quality World* (Glasser, 2001).

Choice theory practitioners stress the importance of the therapeutic relationship which is the foundation for effective counseling outcomes (Wubbolding & Brickell, 1999). The atmosphere is one of firmness and friendliness (Wubbolding, 2000). Choice theory counselors are usually able to develop effective therapeutic relationships with individuals because they possess the personal qualities of warmth, congruence, sincerity, acceptance, concern, understanding, openness, and respect for the individual (Corey, 2009, 2017).

Choice theory teaches that total behavior is made up of four distinct components – acting, thinking, feeling, and physiology – that accompany all our thoughts, feelings, and actions. This theoretical approach emphasizes thinking and acting. The primary emphasis is on what the client is doing and how the doing component influences the other components of total behavior. Behavior is purposeful because it is designed to close the gap between what we want and what we perceive we are getting. Our behaviors originate from within; therefore, we choose our destiny.

## **Reality Therapy**

Reality therapy is a method of counseling and psychotherapy that was developed by William Glasser (1965); it is based on choice theory principles. Reality therapy emphasizes the importance of the therapeutic relationship which is the foundation for effective counseling outcomes (Wubbolding & Brickell, 1999). Client relationships are enhanced when counselors eliminate the seven deadly habits of criticizing, blaming, complaining, threatening, punishing, nagging, and rewarding for control. These toxins must be replaced with the seven caring habits of supporting, encouraging, listening, accepting, trusting, respecting, and negotiating differences. For this approach to be successful, a therapist must be the kind of person the client would consider putting in his/her *Quality World* (Glasser, 1998).

The atmosphere in any setting must be one of friendliness and firmness; therapists/teachers establish this by involving, encouraging, and supporting clients/students. This interaction helps to build trust. It is through this relationship with the therapist that individuals begin to drop their defenses and learn from them.

The acronym WDEP was developed by Wubbolding (2000); it is a pedagogical tool that is useful for understanding and teaching the concepts of reality therapy to clients and students. Each letter represents a cluster of appropriate skills and/or techniques for assisting clients to take better control of their lives and thereby fulfill their needs in ways that are satisfying to them and to society. Wubbolding has expressed these elements in a way that makes them easy to remember, for instance: W=wants, needs, and perceptions; D=direction and doing; E=self-evaluation; and P=planning. The art of counseling is to weave these components together in ways that lead clients to evaluate their own lives and then decide how, when and where they might wish to move in order to more effectively obtain what they want.

Reality therapy has been used in virtually every kind of setting from private practice to prisons; moreover, this method is applied to individual, group, and also family therapy. Regardless of the setting, the goal or desired outcome for reality therapy is to create a

change in behavior resulting in need satisfaction and greater happiness. Therefore, the procedures are basically the same for individuals in various settings.

Prior to the first session of therapy, specific ethical issues should be discussed as the therapist attempts to develop a positive working relationship with the client. These usually include the therapist's credentials, informed consent, confidentiality and its limitations, rights and responsibilities of both client and therapist, and other professional details common to most counseling approaches. This information is typically followed by the therapist's discussion of professional details which include the procedures used in treatment.

At this point, it is important to allow the client to tell his/her story as s/he sees it. This will help the therapist to determine the perceived locus of control of the client; that is, how much responsibility the client has taken for past behavior. This will also indicate how much responsibility the client can realistically be expected to assume for immediate future choices (Wubbolding, 2000). When this has been achieved, by means of skillful questioning, the therapist would move to the WDEP procedures and use them as a guide.

Reality therapists help clients to discover their wants, needs, and perceptions. All wants are related to the five basic needs and the key question is, "What do you want?" Clients would be asked to describe what they want ("W") for themselves, the world around them, and from the therapy process itself. They would also be asked about their level of commitment (Wubbolding, 1988, 1996b) as in "How hard are you willing to work at solving the problem or gain a better sense of control over it?"

Wubbolding and Brickell (2009) have included questions focused on perceptions:

1. What is your perspective of the situation?
2. What do you think you can control?

These are important questions for discussion as most people have more control in their lives than they often perceive, and these questions are designed to help them move from a sense of external control to a sense of internal control. This line of questioning sets the stage for moving through the other procedures in this theoretical approach. It is an art for counselors, teachers, and professors to know which questions to ask, how to ask them, and when to ask them. Relevant questions help clients gain insight and prepare them for developing plans for change. Notably, though, counselors are usually cautioned about asking "why," because that type of question usually draws a lot of excuses by clients or blame for the problem on someone else.

The next step in the procedures is the "D" which involves questions about what the client is doing and where the client's current behavior is taking him/her. Even though problems may be rooted in the past, clients are encouraged to learn to deal with them in the present by learning better ways to get what they want. Early in the counseling process, it is essential to discuss with clients the overall direction of their lives, including where they are going and where their behavior is taking them. Clients are asked if their current behavior is leading them in the direction where they want to be in a month, a year, or two years. The focus at this time should be on helping clients to increase their awareness of what their choices look like from a distance. Reality therapy focuses on gaining awareness of where they are in the scheme of things, and what behaviors they might need to change in order to avoid any pending "train wrecks."

At this point, ("E"), clients are asked to conduct a searching inner self-evaluation. Self-evaluation is the cornerstone of the WDEP system. Glasser (1990a, 1990c) described it as the core of reality therapy; and Wubbolding (1990, 1991a) viewed it as the keystone in the arch of procedures. Reality therapists ask clients to describe their behavior, their wants, their perceptions, and their levels of commitment; they also ask them to make judgments about them. Clients are asked to consider whether their present behavior is helping them or hurting them, important or unimportant, meaningful or meaningless, and to their advantage or not to their advantage. Glasser (1972) described evaluation as the "basis for change." Furthermore, he suggested that the specific time when people begin to change is when they evaluate what they are doing and then begin to answer the question, "Is it helping?" Usually, people do not change until they decide that what they are doing is not helping them to accomplish what they want.

Artful questioning assists clients in evaluating their present behavior and the direction it is taking them. Wubbolding (2000, 2011a, 2015b) suggests the following questions:

1. Is what you are doing helping or hurting you?
2. Is what you are doing now what you want to be doing?
3. Is your behavior working for you or against you?
4. Is what you want realistic or attainable?
5. Is it true that you have no control over your situation?

It is the counselor's responsibility to assist clients in evaluating the quality of their actions and to help them make better choices. Without an honest self-assessment, it is unlikely that clients will ever change.

The last step in the system of procedures is the "P" which refers to the action plan. The expected outcome of reality therapy is the formulation and follow-through of an effective action plan. Clients are asked to formulate a plan of action with the assistance of the counselor that fulfills their wants and needs without infringing on the rights of others. Effective plans are simple, attainable, measurable, immediate, consistent, committed to, and controlled by the client (SAMIC). The most effective plans originate with the client.

Individual and organizational change happens when clients evaluate their own unique and systemic behaviors and follow up with the formulation and implementation of specific plans. If the initial plan does not work for any reason, the therapist/teacher and client/student need to work together to devise a different plan. The plan is important; it gives the client/student a starting point. These procedures (WDEP) are universal; they would be followed with a college student who is concerned with academic problems, an individual who is experiencing financial difficulty and has looked unsuccessfully for a job, a client having difficulty accepting a divorce, and/or an individual who is having trouble making friends in his/her new environment.

## **Discussion**

It seems reasonable to suggest that ways by which we can better teach total behavior involves a process. When focusing on teaching total behavior, it is important to start by emphasizing the significance of the therapeutic relationship which is the foundation for effective counseling outcomes (Wubbolding & Brickell, 1999). Client relationships are enhanced when counselors implement the seven caring habits of supporting, encouraging, listening, accepting, trusting, respecting, and negotiating differences. For this approach to be successful, a therapist must be the kind of person the client would consider putting in his/her Quality World (Glasser, 1998).



It is also important to teach clients choice theory. Prior to the first session of therapy, tell them that all anyone can do from birth to death is behave and that all conscious behaviors, that have anything directly to do with satisfying basic needs, are chosen. When we want to stop choosing a painful behavior like depressing, these are our choices: (1) change what we want, (2) change what we are doing, or (3) change both (Glasser, 1998).

At this point, it is important to allow the client to tell his/her story as s/he sees it. After some skillful questioning, the therapist should move to the WDEP procedures and use them as a guide. Choice theory practitioners have been trained to use the WDEP system to create awareness and encourage behavior change. Artful questioning assists clients in evaluating their present behavior and the direction it is taking them. It is the counselor's responsibility to help clients make better choices. The expected outcome of reality therapy is the formulation and follow through of an effective action plan. Plans are empty unless there is a commitment to carry them out. It is up to clients to determine how to take their plans outside the restricted world and into the everyday world. An effective therapeutic process can be the catalyst that leads individuals to become more self-directed, behavior change and responsible living.

And be willing to make changes that would truly get them what they want IF they see the plan through to fruition. After all, it should be the client's plan, and only the client makes the commitment to work it. If s/he doesn't follow through, all you can do is ask:

1. Is the PLAN still doable?
2. Do s/he still seek to fulfill the PLAN?
3. If the answer is "YES", then recommit him/her to the original goal!
4. Otherwise, s/he will never be successful because s/he no longer believes s/he can achieve the goal or doesn't want that goal. Either way, it's time to move on!

If the answer is "NO", however, have him/her choose a different goal, and/or a different "doable" plan, that s/he will commit to pursuing! Have them commit to the plan, and don't accept any irrational excuses! Remember, that every plan needs to end in success, so always encourage him/her to never settle for anything less!

In the words of Og Mandino (1969), weak is s/he whose feelings control his/her behaviors, but strong is s/he who believes that his/her behaviors can always control his/her feelings!

Conceive it!  
Believe it!  
Achieve it!

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### **Brief Bio—**

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**BOOK REVIEW of MINDFULNESS STRATEGIES for HELPING COLLEGE STUDENTS  
MANAGE STRESS: A GUIDE for HIGHER EDUCATION PROFESSIONALS  
(ISBN 978-0-367-35940-9)**

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**Abstract**

This practical resource offers a much-needed introduction to the what, why, and how of supporting college students through mindfulness and stress-releasing strategies. Higher education professionals are in a unique position to support, coach, and teach students to manage anxiety and emotional distress. Drawing on experience from the disciplines of Mental Health, Counseling, and Student Affairs, the authors (Dye, Burke, & Mason, 2021) provide evidence-based practices and tangible techniques supported by the latest brain-based research and neuroscience. The theoretical framework of choice theory, a counseling paradigm, and the WDEP procedures will serve as the structure for discussing how higher education professionals can help college students understand how they make decisions that can add to or subtract from their overall well-being.

Keywords: anxiety, stress, mindful strategies, evidence-based techniques, support, student well-being

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The authors (Dye, Burke, & Mason, 2021) of "Mindful Strategies for Helping College Students Manage Stress: A Guide for Higher Education Professionals" have compiled a valuable resource. The purpose for publishing this book was to offer insights and information about the why, what, and how of using the mind-body-spiritual and community connections, decision-making processes for change, wiring of the brain, and mindfulness activities and strategies to help reduce stress and anxiety for college students. The book is written for professionals who are new to mindfulness and mind-body wellness; however, it can also provide significant reminders for those with a more advanced awareness.

The book is well organized, starting with the table of contents, which lists information about the table of contents and the titles of the seven chapters. Each chapter includes "Take a Moment" which are sections that allow the reader to reflect upon the information shared. These thought-provoking queries, which can be considered individually or with others, can aid readers in clarifying their approaches to using mindfulness strategies with students. "Voices" are also shared in each chapter; these provide insights about the basics of mindfulness practice. In addition, this book includes activities, worksheets, assessments, and comments from students and faculty about the effectiveness of their experiences with mindfulness strategies.

This review will provide a brief account of the main points of each chapter and a more in-depth summary of Chapter 6, "Helping Students with Focus and Choices for Change," using a Choice Theory® Framework. The theoretical framework of choice theory, a counseling paradigm, and the WDEP procedures will serve as the basic conceptual structure for discussing how higher education professionals can help college students understand how they make decisions that can add to or subtract from their well-being. Choice theory

teaches that we choose all that we do, and we are responsible for what we choose, meaning that we choose both our misery and our happiness.

**Chapter 1, "Mind, Body, and Spirit: Community Connection and Relationships Matter,"** focuses on college life where students are in the midst of emerging adulthood that comprises identity exploration, instability, self-focus, feeling in between taking responsibility for themselves and not completely feeling like an adult, as well as possessing possibilities and unparalleled opportunities (Arnett, 2004). While attempting to balance the many responsibilities and expectations of college life along with their navigation into adulthood, college students are at risk of developing unhealthy behaviors and adverse consequences associated with their mental, emotional, cognitive, spiritual, and physical well-being at the micro (e.g., students and their performance in the classroom) and macro (e.g., academic, residential, and social) levels of the campus community. Such experiences and emotions can impact a variety of aspects of college students' lives, which underscores the need for them to learn strategies to help them through life's difficult moments.

Higher education professionals are in a unique position to understand and support students' psychological and social resources, which can amend their experiences with overwhelming stress. Psychological resources (e.g., an individual's attitudes and dispositions) are what we are taught and what is modeled for us by mature adults in our lives. These resources are our perspectives – such as hope, patience, and encouragement – and the skills we learn – such as relaxation, mindfulness, asking for help, and tolerating anxiety (Burke, Laves, Sauerheber, & Hughey, 2020). Social resources are, essentially, the people with whom we have relationships or can be found in the groups we belong to or are affiliated with at the time. Having a support system (e.g., family, friends, and acquaintances) and the relationship skills to find and maintain relationships with these supportive people can also help to buffer the effects of stress (Burke, Laves, Sauerheber, & Hughey, 2020). Higher education professionals can aid students by working with them to help mitigate their stress and by securing resources to offer appropriate support. Understanding the connection between the mind, body, and spirit and the relevance of our connection to others is a first step toward helping college students to manage stress.

**Chapter 2, "Brain Basics,"** stresses the significance of teaching students at all educational levels about how the brain operates and how it can be used to control their cognitive and emotional health as well as their overall learning. The brain is an amazing organ that is generated by interactions in the world, and even more wonderful is the fact that each of our brains is generated in its own special way. It is brilliant how quadrillion moments of change occur within each person's life that account for the miraculous person that each of us becomes. Every skill learned and every action taken is a product of this change; this is neuroplasticity.

Neuroplasticity is the bi-directional (incline or decline) as well as structural and functional ability of the brain to change throughout a person's life. It encompasses the following: a. Structural neuroplasticity, which is the brain's ability to change its physical structure because of learning; and b. Functional neuroplasticity, which is the brain's ability to move functions from a damaged area of the brain to an undamaged area of the brain. Broadly defined, neuroplasticity includes our nervous system's ability to respond to intrinsic and extrinsic stimuli by recognizing its structure, function, and connections at many levels; from molecular to cellular to systems to behavior (Cramer et al., 2011). Higher education

professionals can share information about how the brain is wired and how brain activities can improve an individual's well-being while reducing the symptoms of stress and anxiety.

**Chapter 3, "Relax and Release,"** focuses on the findings of the 12th Annual Stress in America Survey (2018) conducted by the American Psychological Association (APA). Stress occurs when environmental demands exceed an individual's perception of their ability to cope. As Fink (2016) noted, stress is "a highly personalized phenomenon that varies between people depending on individual vulnerability and resilience, and between different types of tasks" (p.3).

College students will experience stress at some point and to some degree during their collegiate career. Prolonged stress is a risk to physical, emotional, and mental well-being. It is important for these students to work toward preventing stress from dominating their lives and significantly disrupting their daily functions. As higher education professionals, we can be a part of a support system to assist students with reducing stress and enhancing their well-being. Using relax and release activities with a student or a group of students is a beneficial way to help students develop moment-to-moment awareness, focus, and mindful connection.

**Chapter 4, "A Meditation a Day,"** focuses on mindfulness practices. Mindfulness is a process of being fully present in the moment, suspended from judgment or corrections, and starting with a simple awareness of one's body and thoughts (Kabat-Zinn, 2003), without attachment to a particular point of view, resulting in freedom from automatic, habitual views of the self and others (Martin, 1997). Mindfulness can be promoted through formal (e.g., meditation or yoga) or informal practice (e.g., noticing the natural landscape while on a walk).

In practice, mindfulness training can provide an individual with opportunities to develop tools for cultivating internal skills such as empathy and self-efficiency; increasing awareness of their internal thoughts and feelings; remaining non-judgmental; focusing on the present moment; using coping skills when faced with stressful situations; and managing stressful and anxiety-provoking situations (Baer, 2003; Greason & Cashwell, 2009; McKay, Wood, & Brantley, 2007). Mindfulness practice gently counters the mind's inherent need to evaluate experiences as positive or negative. Instead, the mind begins to observe experiences with an attitude of curiosity and suspended judgment, and without worry about the future or regret about the past.

With many of our lives being filled with busy schedules, it is easy to get caught up in our thoughts, emotions, and lists of things to do. Our minds wander often – reflecting on what has happened, what could have been, and what could be. With such competing thoughts, it can sometimes be difficult to focus on the present. Higher education professionals can be an important part of the restoration of their students' emotional health by using simple breath work and mindfulness/meditation practices.

**Chapter 5, "Mindful Movement,"** focuses on body movements – the way you move your body, the way you sit, the way you walk, the way you breathe, or even the way you think. Mindful movement is an aspect of yoga called asana. Asana, a Sanskrit word that means "seat" or "posture," is the physical practice and movement of the body that unites the inner and outer person.

Movement is like a language that communicates with us and between us without words. Movement shows the inseparability of our mind and our body (Clark et al; 2015). Therefore,

if we bring mindful awareness to movement, we have found a way to reclaim our bodies. Mindful movements that bring awareness to the breath as well as the inner and outer body are believed to produce change and healing, including feelings of relaxation, happiness, and interconnectedness (Freiler, 2008; Kirkcaldy, 2018; Young, 2008).

Sometimes, movement is what the body and mind need. In a study conducted by Penn State (2018), researchers found that when students were more mindful and more active than usual, they reported being less stressed while on their feet and moving. Being more active can reduce negative affect, but by also being more mindful than usual simultaneously, the effect was amplified. With this type of mindfulness of the body, students can observe and learn to handle their bodies, their breathing, their feelings, their mental states, and their consciousness. Mindful movements can help students to reactivate the self-sensing systems of their bodies during times of stress. In heightened body awareness, students are able to access, detect, and be in touch with their breath, their heartbeats, and their body tensions. Therefore, mindful movement can serve as a needed and effective facilitator towards healthy, holistic living for students.

This chapter provides directions for several body movements that higher education professionals may use with a group of students or with an individual student. These exercises can be done alone or in a sequence. After each activity, invite students to discuss what they noticed or felt during the movements. Hopefully, after the practice of these poses, students will be open and encouraged to seek out a regular practice facility on campus or in their local community.

**Chapter 6**, “Helping Students with Focus and Choices for Change,” is about choice theory and how higher education professionals can use this paradigm to help college students to enhance their focus in their decision-making and to implement basic strategies to bring about change. Choice theory teaches that for all practical purposes we choose all that we do (Glosser, 1998, p. 3), and we are responsible for what we choose (Glasser, 1998). For some college students, making choices involves directing their attention to their present situations without fully reviewing their past experiences and contemplating their futures. During this time, regardless to what their situations seem to be or why, it is important for higher education professionals to be prepared to implement strategies to help them to focus, manage stress, and assume a higher level of responsibility for their decisions which will impact their education, their relationships, and their overall well-being.

Of course, college can be challenging and overwhelming, but college students are also emerging adults who make choices, with consequences, and behave accordingly. College students are presented with numerous opportunities to make choices about their lives, such as choosing a major, joining an organization, drinking, smoking, completing an internship, and beginning a job search. Once in college, students are asked to take a higher level of responsibility for their education and their decisions. Although taking on this role can present challenges for students, the process of making decisions during college can help prepare students for navigating the complexities of adulthood.

Higher education professionals can help students by providing them with information and strategies that could enhance their focus, decision-making process, ability to make a change, and management of their negative emotions while facilitating their understanding of taking personal responsibility. Within the context of choice theory, there is focus on the present with emphasis on a person learning to develop a strong internal locus of control (i.e., belief that one can attain desired results through one’s choices) and a strong sense of

responsibility for one's behavior (Glasser, 1998). Choice theory teaches that we choose (almost) all that we do, and we are responsible for what we choose, meaning that we choose both our misery and our happiness.

Choice theory, developed by William Glasser (1998), explains why and how people function. An internal control psychology, choice theory explains how and why we make the choices that determine the course of our lives. This theoretical approach is the basis for reality therapy, which provides the delivery system (WDEP) for helping individuals take more effective control of their lives. This system is a set of procedures that can be used to help students discover what they want, identify their choices, and evaluate how their behaviors contribute to or detract from the achievement of their goals.

### **Applying WDEP to Help College Students**

The acronym WDEP was developed by Wubbolding (2000), and each letter represents a cluster of appropriate skills and techniques for assisting others to take better control of their lives and thereby satisfy their needs in ways that are satisfying to them and to society. Wubbolding expressed these elements in a way that makes them easy to remember: W=wants, needs, and perceptions; D=direction and doing; E=self-evaluation; and P=planning. The goal is to weave these components together in ways that can lead individuals to evaluate their lives and to decide to move in more effective directions. The goal or desired outcome is a change in behavior resulting in need satisfaction and greater happiness. This process is effective for individual sessions and for groups – following is an example of how higher education professionals may use the WDEP system to help students with focus and choices for change in a group format.

### **Using WDEP for Groups with a Circle**

The use of circles with groups offers a safe, welcoming, and receptive space that moves from person to person, where everyone can see each other and talk honestly, and where all voices can be heard. As such, the circle creates a place that invites sharing and story and facilitates group cohesion. Circles also offer an opportunity for all involved to collectively learn and find solutions and build their confidence and skills. With a focus on everyone in the group, the use of solving circles with groups tends to be progressive, change-oriented, and innately democratic. A common factor in the success of circles with groups is the value of relationships through building collaboration and respect within the group.

The Circle-Up is a powerful communal learning tool that gives students practice in speaking and listening while satisfying the need for belonging and connection (Glasser, 2008). Perhaps the real power of Circle-Ups is that the students first have an opportunity to connect with one another and talk freely about their problem with attention focused on them when it is their turn.

An emphasis should be made to students about how the system works by explaining that the only person you can control is yourself, so each person in the Circle-Up is responsible for deciding what they will do to solve their problem regardless of what others think. Be sure to tell them that everyone will respect everyone, and only one person will speak at a time. Notably, in facilitating the Circle-Up, higher education professionals must possess the personal choice theory qualities of warmth, sincerity, congruence, understanding, acceptance, concern, openness, and respect for the individual (Corey, 2017).

To begin the first Circle-Up, ask students to arrange their chairs in a circle. You can say, "Notice, I could have arranged the chairs in the circle before you arrived and designated specific seats for each, but I thought it would be more effective for us to do this together. This is our group and the more you bring things up for discussion, the more we will be able to help one another." Next, tell them some things about yourself, what you do, and why. Then, ask members of the group to introduce themselves.

Next, introduce the WDEP system to the students – as a pedagogical tool useful for understanding and teaching the concepts. Let them know that the process is easy to follow. Explain that each letter represents a cluster of possible skills and techniques for assisting individuals to take better control of their lives and thereby satisfy their needs in ways that are helpful to them and to society.

### **Wants, Needs, and Perceptions (W)**

Ask for a volunteer to start the discussion by talking about what they want or need help with at this time. Ask each student to identify their "wants" and "needs." Continue this discussion until each student has had the opportunity to participate. Allow students to discuss what they have heard and tell them that the group will discuss the area of "doing and direction" next. Be sensitive to students who are reluctant to talk and gently encourage them to get involved, but do not pressure or coerce students. Some may sit quietly, participating little, yet benefit from the process. For most of them, the idea that they have learned something that is relevant and useful outside of class could be a very positive revelation.

### **Direction and Doing (D)**

Next, as a group, discuss what we are "doing" and the "direction" this is leading us in. Present ideas for consideration to the students when necessary. This point is to focus on helping the students to increase their awareness of the possible consequences of their choices. It is essential to discuss with students the overall direction of their lives, including where they are going, and where their behavior is leading them.

### **Self-Evaluation (E)**

After exploring wants, needs, and perceptions and discussing direction and doing, "self-evaluation" is the next step, which is the cornerstone of the WDEP system and the basis of change. Ask the students to describe their behavior, wants, perceptions, and levels of commitment and then to self-evaluate. Through questioning from the facilitator (i.e., higher education professional) and comments from peers in the group, students are helped to determine if what they are doing is helping them and leading them in the direction they want their lives to go, as they work toward reaching their goals or moving them further away from what they say they want. After a rigorous discussion, students can be more prepared to explore other possible behaviors and formulate plans for action.

### **Planning (P)**

At this point, the focus is on helping students formulate structured plans for change. The process of developing and carrying out plans enables students to begin to gain more effective control of their lives. The plan gives students a starting point. The most effective plans originate within students and should be stated in terms of what the students are



willing to do. They should be flexible and open to revision as students gain a deeper understanding of the specific behaviors they want to change.

Encourage students to put their plans in writing. If needed, Circle-Ups can be scheduled periodically through the semester to see how students are doing. Be sure to always listen when students want to talk and support them as they attempt to make more effective and responsible choices related to their wants and needs.

**Chapter 7**, “Self-Care is the New Health Care: Prescriptions for Well-Being and Being Well,” includes important information about self-care and health care. Our health is an asset. It allows us to invest in our talents and passions, to fully participate in our close relationships, to be of service to our communities, and to be productive in the workplace. We need energy, endurance, and well-being to carry out our life’s purpose. When we are healthy, we are able to invest in our human capital.

Self-care is taking the time to be mindful and pay attention to yourself in a way that ensures there is intention to sustain your mental, emotional, and physical health. The idea is that we should not focus on our health only when we are sick but put forth initiative toward maintaining our health consistently. Essentially, self-care is everything we do to deliberately maintain our mental, physical, and emotional well-being.

Self-care is personal, and there is no general rule that will always work for everyone. Self-care is based on internal motivation that gives you energy. Self-care is about keeping the commitments you make to yourself to focus on you for the short term and the long term. Self-care requires personal initiative, and to some degree, it is a matter of self-help and self-regulation (Moses, Bradley, & O’Callaghan, 2016). In the end, self-care practices are self-initiated activities that maintain and promote our physical and emotional health (Myers et al., 2012), which can include healthy eating, sleeping, stillness, exercising, and engaging with your surroundings and others.

## **Conclusion**

This book is a valuable resource for higher education professionals and their students. Aligning choice theory principles and practices with mindful strategies can provide a significant framework for the process of personal growth and well-being for both groups. It is important to note that all mindful strategies discussed in this book are appropriate options for inclusion in students’ plans for change (WDEP) when selected and have the potential to enhance the effectiveness of their efforts to manage stress and anxiety.

One of the strengths of this book is the number of strategies and the level of detail provided for the reader. The directions are well-defined and clearly written; professors and students will benefit tremendously from these. Perhaps, the greatest strength is that the authors provide evidence-based practices and tangible techniques supported by the latest brain-based research and neuroscience. In addition, all strategies and techniques are appropriate for use with individual students or in classroom settings. We believe the authors achieved their goal and have made a significant contribution toward enhancing the overall well-being and future success of college students.

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