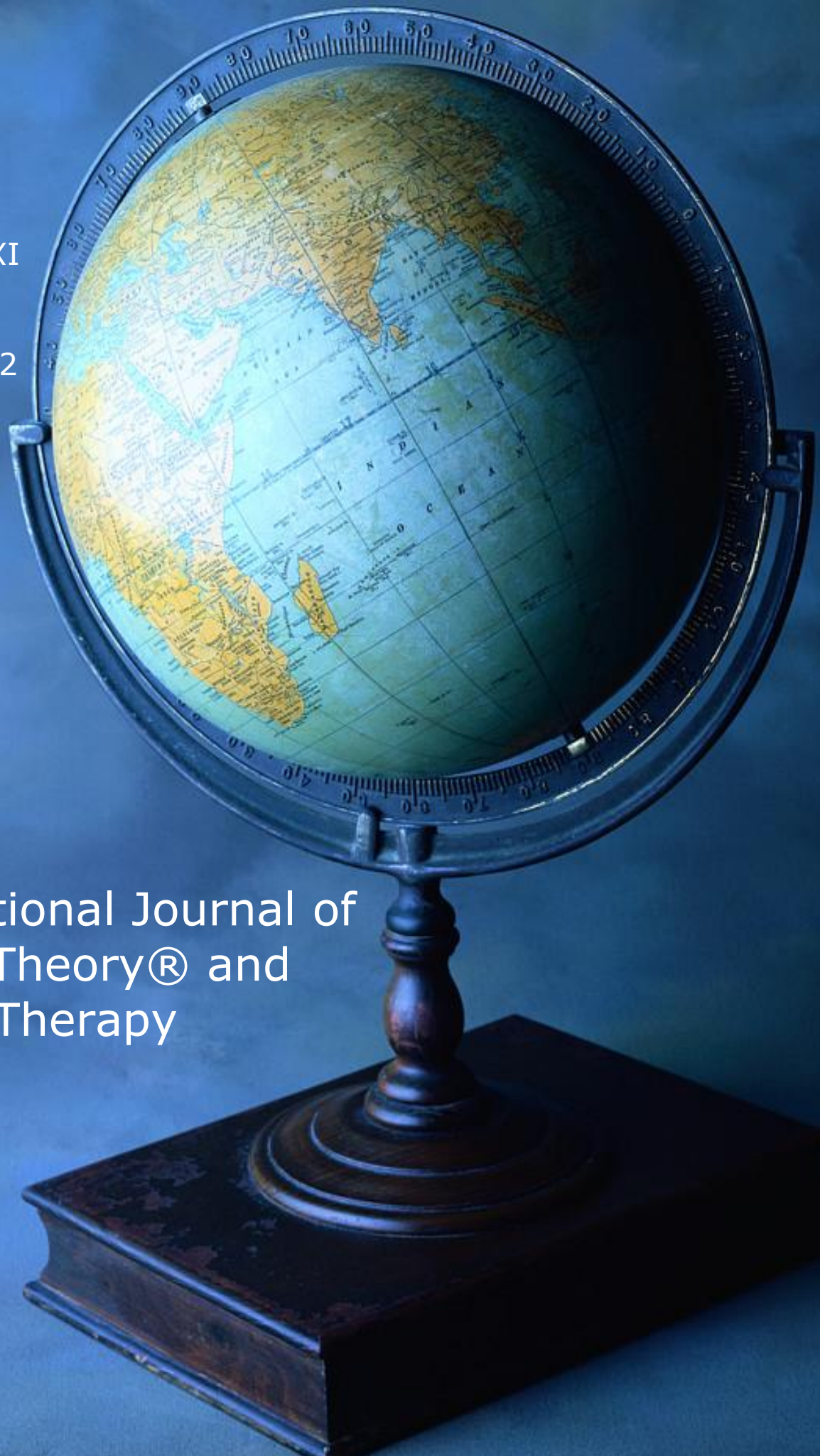# International Journal of Choice Theory® and Reality Therapy

International Journal of Choice Theory and Reality Therapy: An On-Line Journal
Vol. XXXI, No. 2, Spring, 2012

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TRIBUTES honoring **Al Katz** are to be included in the next issue of the Journal. Please submit your testimonial for Al by September 1, 2012, to parishts@gmail.com

INTRODUCTION to the JOURNAL, ITS EDITOR, and ITS EDITORIAL BOARD

Welcome to the *International Journal of Choice Theory and Reality Therapy*. **This is Volume XXXI, No. 2, SPRING, 2012.**

IJCTRT Editor:

Previously, this journal was published as the *International Journal of Reality Therapy* (1997-2009), and as the *Journal of Reality Therapy* (1980-1996). The previous editor of the Journal was **Dr. Larry Litwack**, who served as editor from 1980-2009. His efforts, on behalf of the WGI membership, plus many others who were also interested in William Glasser's ideas and the research that supported them, are legendary.

The current editor of the *International Journal of Choice Theory and Reality Therapy* is **Dr. Thomas S. Parish**. Dr. Parish is Professor Emeritus at Kansas State University in Manhattan, Kansas. He earned his Ph.D. in human development/developmental psychology at the University of Illinois in Champaign-Urbana, Illinois, and subsequently became Reality Therapy Certified (now called CTRTC) in 1980, specializing in the areas of mental health, educational counseling, and marriage and family counseling. He has authored or co-authored scores of RT/CT related articles that have been published in numerous professional journals, including the *Journal of Reality Therapy* and the *International Journal of Reality Therapy*. He also has an extensive background in designing and conducting research studies and developing strategies for the implementation of Choice Theory and Reality Therapy.

Any correspondence, including questions and/or paper submissions, should be sent to Dr. Parish at: parishts@gmail.com   You may also call him at (319) 230-9970. In addition, a web-site is currently operational for the Journal. It is http://www.*ctrtjournal.com*. Plus the Journal is no longer password protected, so anyone can gain access to it through The William Glasser Institute website as well.

IJCTRT Editorial Board:

Besides **Dr. Thomas S. Parish**, who currently serves as the editor of the *International Journal of Choice Theory and Reality Therapy* (*IJCTRT*), there is also in place an outstanding team of individuals who have agreed to serve on the editorial board of *IJCTRT*. They are:

Thomas Burdenski, Ph.D., Licensed psychologist and Assistant Professor of Counseling Psychology, Tarleton State University, Ft. Worth, TX.

Emerson Capps, Ed.D., Professor Emeritus at Midwestern State University, and serves as a member of The William Glasser Institute Board of Directors and as a faculty member of The William Glasser Institute.

Janet Morgan, Ed.D., Licensed private practice professional counselor in Columbus, GA.

Joycelyn G. Parish, Ph.D., former Senior Research Analyst for the Kansas State Department of Education in Topeka, KS.

Jean Seville Suffield, M. A., President and Owner of "Choice-Makers," located in Longueuil, Quebec, Canada.

Robert Wubbolding, Ed.D., Professor Emeritus at Xavier University in Cincinnati, OH, and is currently serving as the Director for the Center of Reality Therapy in Cincinnati, OH.

IJCTRT Technical Advisor:

Finally, since the IJCTRT is to be an on-line journal, we also have chosen to have a "Technical Advisor" working with the editor and the editorial board. He is Mr. **Glen Gross**, M.Ed., Distance and Distributed Learning Specialist, from Brandon University in Brandon, Manitoba, Canada.

IJCTRT Mission:

The *International Journal of Choice Theory and Reality Therapy* is directed toward the study of concepts regarding internal control psychology, with particular emphasis on research, theory development, and /or descriptions of the successful application of internal control systems through the use of choice theory and/or reality therapy.

Publication Schedule:

The International Journal of Choice Theory and Reality Therapy is published on-line semi-annually in the fall (about October 15) and spring (about April 15) of each year.

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Indices of Previous Authors and Titles are Located in the Following Volumes:

Vol. 1-5 in 6-1; 6-10 in Vol. 10-2; 11-15 in Vol. 16-2; 16-20 in Vol. 20-2; 20-25 in Vol. 25.2; 26-30 in Vol. 30.2.

EDITORIAL: EVERYTHING YOU WANTED TO KNOW ABOUT THE INTERNATIONAL JOURNAL OF CHOICE THEORY AND REALITY THERAPY, BUT DIDN'T KNOW WHERE TO LOOK OR WHO TO ASK!

Thomas S. Parish, Ph.D., CTRTC
Editor, t*he International Journal of Choice Theory and Reality Therapy*
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To find authors, titles, and often abstracts of CT/RT articles, too, the reader is urged to explore the listings of articles that appear by author and by subject matter in the last two issues of the *International Journal of Choice Theory and Reality Therapy*, i.e., in Vol. 30 (#2, pp. 73-140) and Vol. 31 (#1, pp. 173-187).

To acquire recent copies (Vol. XXIX, #2, to the current issue) of the *International Journal of Choice Theory and Reality Therapy* the reader should go to one of the following: http://www.ctrtjournal.com or to The William Glasser Institute website, then go to the link entitled "*International Journal,*" located on its Introductory Page.

To acquire earlier single copies from the *Journal of Reality Therapy* and/or the *International Journal of Reality Therapy*, that are from prior issues (Vol. I, #1, to Vol. XXIX, #1), the reader is urged to go to the following website:

http://education.mwsu.edu/

Next, on the left hand side under the Links Area, you will see the hyperlink "*International Journal of Choice Theory and Reality Therapy*." Click on this link and it will take you to the Journal page. On this page there will be hyperlinks to abstracts and a form to request a copy of the full article(s) free-of-charge.

This service is being offered through Dr. Matthew Capps, Dean of the West College of Education at Midwestern State University located in Waco, Texas. Notably, the WCOE at MWSU is the sole sponsor of the *International Journal of Choice Theory and Reality Therapy* and has agreed to provide this service for the foreseeable future.

Notably, for those who wish to receive printed copies of entire journals from either the *International Journal of Reality Theory and/or Journal of Reality Therapy* (for a minimal fee), arrangements are currently being made to make this possible, though nothing definitive has been developed as yet.

To publish articles in the upcoming issues of the *International Journal of Choice Theory and Reality Therapy* the reader is urged to e-mail his/her/their submission(s) to the following address: parishts@gmail.com

Instructions to contributors:

Types of articles requested: Articles that focus on Choice Theory, Reality Therapy, Quality School, Lead Management or other Glasserian concepts. These articles should focus upon on or more of the following themes: IDEAS/INSIGHTS, INNOVATIONS, RESEARCH FINDINGS.

These articles should be prepared in accordance with the following instructions:

Submit documents as MS Word documents.
Kindly keep text formatting as simple as possible.
Avoid using tabs to indent paragraphs. Paragraphs are generally indicated by a blank line preceding the text.
Please use Verdana 10 point type.
Limit use of paginated lists unless absolutely necessary.
Limit use of tables/figures unless absolutely necessary.
Understand that "word wrapping" will occur for users with different size screens.
Use underlining on the web for hyperlinks, and avoid using it otherwise.
Use bold in regular text for emphasis.
Left-justify everything, unless absolutely necessary to do otherwise.
Assume that pictures will appear left-justified below your text.
Use the default line and paragraph spacing.
All capital letters on the internet generally indicate that you're shouting. Kindly reserve all caps for use in the titles of the articles only.
Be sure to include a "Brief Bio" of each author at the end of your submission.

Evaluation Criteria for the *Journal*. All submissions should . . .

Be clearly and concisely written.
Provide Choice Theory/Reality Therapy insights.
Provide significant heuristic value to the readership.
Be broadly applicable.
Be recommended for publication by two or more members of the IJCTRT Editorial Board.

Evaluation criteria for all research-based submissions to the *Journal*. Each research-based submission should . . .

Be found to be "internally valid" (i.e., key variables in the study should be controlled).

Be found to be "externally valid" (i.e., the findings reported by the study should have broad applicability).

Instrumentation used within the study should be "reliable" (i.e., consistent).

Instrumentation used within the study should be "valid" (i.e., the instrument should truly assess what it says it is assessing).

Hypotheses/Questions should be directly and completely answered.

The above information regarding publishing instructions to potential contributors was derived from Parish, T. S. (Fall, 2010). "Editorial—Readership and contributor guidelines for the International Journal of Choice Theory and Reality Therapy." *International Journal of Choice Theory and Reality Therapy, 30* (#1), 6-8. The reader is urged to peruse this article to gain added insights regarding other criteria and/or information that might be useful in preparing his/her/their future submissions to the Journal.

SUCCESS OF GLASSER'S IDEAS IN EUROPE: AN UPDATE

Boba Lojk and Leon Lojk

Abstract

While Dr. William Glasser's ideas that focus on Choice Theory® (CT), Reality Therapy (RT), Lead Management (LM), Quality Schools (QS), and Mental Health as a Public Health Problem (MH) are becoming more and more internationally recognized, we feel honored and privileged to inform WGI and WGAI board members, as well as the WGI general membership, about additional successes (which will be described below) regarding these various theoretical and methodological approaches in Europe.

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We are all aware that CT/RT supporters are in the minority, compared with the majority, who believe in 'external control' psychology. Our vision to build a more humane culture, or *CT Culture* as we like to call the struggle to spread Dr. Glasser's ideas, means to build a new kind of connectedness among people. Understanding human beings as undetermined, free creatures, who can always choose their behaviors, has been expressed in different ways by several anthropologists, philosophers, and other scientists, but never in as usable a form for everyday life as Glasser's Choice Theory and Reality Therapy.

Like every minority, we will have to make more efforts to spread Dr. Glasser's ideas in a broader context. There is a great deal of work in front of us and one component that could add to the development in this field is sharing the information of these endeavors and successes of CT/RT in different parts of the world. Here are examples from Europe and Slovenia. We believe our success is, in fact, a success of the entire CT/RT community.*

What We Have Achieved in Europe

EART* (European Association for Reality Therapy)

At the 4th European International Conference in Edinburgh 2008, we presented information regarding the growth of the European Association for Reality Therapy (EART). This is an association of European CT/RT institutes, associations and the group of CTRTC individuals from the countries without organized associations. In the framework of EART, there is the possibility to share experiences and to act together when facing national or EU authorities in the field of Mental Health, Quality Schools, Lead Management, and Well-being, etc. For example, in the future, we can jointly apply for financial support from the European Union Developmental Fund.

Therefore, EART has a mission to facilitate and support the development of the above-quoted fields. We made some exchanges in the field of Glasser Quality Schools, but our main focus during the last few years within the framework of EART was to win recognition of the New Reality Therapy (or Counseling with Choice Theory) as Psychotherapy.

In spite of our concordance with Dr. Glasser, who does not attribute any importance to the difference between counseling and psychotherapy, we headed for psychotherapy because we believe that RT—based on CT—can be an excellent ground for the activity defined as psychotherapy in the European Association for Psychotherapy. Additional

* Kindly note that we are very thankful to Dr. William Glasser and Carleen Glasser, and to all the European and American faculty, that have helped and supported this project.

training after WGI certification was required, including clinical practice and organized supervision.** We believe that acceptance of Reality Therapy in the field of psychotherapy could attract the attention of various professionals and others to CT/RT. In addition, along with one's certification in Choice Theory and Reality Therapy (CTRTC) may go the title of counselor, which would be more readily recognized and accepted throughout the world.

EART as EWAO (European Wide Accrediting Organization)

At the 4th European International Conference in Edinburgh 2008, we also presented how the EART has succeeded in becoming recognized as the European Wide Accrediting Organization (EWAO) for psychotherapy by the European Association for Psychotherapy (EAP).

To become a European Wide Accrediting Organisation (EWAO), the organisation has to demonstrate that its training and accrediting process is at or above the level of the European Certificate for Psychotherapy (ECP). In addition, the modality represented has to be either clearly distinct from any other modality represented by another EWAO, or represents the largest number of practitioners in this modality. It has to be the only EWAO in this particular modality within the EAP.***

Slovenia

EAPTI**** (European Accredited Psychotherapy Training Institute)

Reality Therapy was recognized as a scientific psychotherapeutic method matching rigorous criteria for scientific validation established by the European Association for Psychotherapy (EAP) in Brussels in June 2008. EART was recognized as the European Wide Accrediting Organization (EWAO). After that the national CT/RT associations and institutes joined, the EART were expected to organize 'integral psychotherapy training' – one of the most appreciated formations of the integral psychotherapy training is the European Accrediting Psychotherapy Training Institute (EAPTI).

The Institute for Reality Therapy (IRT) in Slovenia has become EAPTI on the 19th of February 2011 after the visit by two International Experts of the EAP: Peter Schulthess, MSc, Gestalt Therapist EAGT, ECP, Zurich, Switzerland, and Elisabeth Kremer, Person Centered Psychotherapy, ECP holder, Dijon France and their report to the EAP Board.

EAPTI is entitled to the following*****
     1. Call itself an "European Accredited Psychotherapy Training Institute" and to use this title in all public business dealings;
     2. Conduct candidates' training through completion with the guarantee that they are entitled to be awarded the ECP in accordance with the formal examination carried out by the EAP and its constituent bodies;

**See http://www.realitytherapy-europe.org Also see the Book of Regulations for Reality Therapy Psychotherapy Training.

***About EART and EWAO read the article *4th European International Conference in Edinburgh* written by Leon Lojk and edited by R .E. Wubbolding. (IJRT 2009, Volume XXIX, No1 and IJCTRT 2011, Volume XXX, No 2.)

**** See also http://www.institut-rt.si/ the documents are in Slovenian and Croatian language; the English version will be uploaded soon.

***** See also http://www.europsyche.org/

3. Appear on the EAP's website as "European Accredited Psychotherapy Training"
4. Present the institute's program and activities on the website;
5. Broadcast information about institute training worldwide, as a result of the close cooperation between the EAP and the World Council for Psychotherapy (WCP).

RT Psychotherapist and European Certificate of Psychotherapy

Graduated participants obtain the title of the Reality Therapy Psychotherapist (RTP) and they also gain a European Certificate of Psychotherapy (ECP), if the National Awarding Organization (national branch of the EAP) in respective countries agree with it.

The European Association for Psychotherapy (EAP) awards the "European Certificate of Psychotherapy" (ECP) as part of its initiative for quality control of psychotherapy in Europe. The ECP is a European recognition and not a National one. The Strasburg Declaration and EAP rules provide the bedrock from which all requirements stem.

For instance, in some countries, the practice of psychotherapy is restricted by the local law to psychiatrists and psychologists, so a practitioner, who reaches EAP requirements, may obtain the ECP even if he is not allowed - at this moment - to be recognized as a "psychotherapist" in his/her own country.

The IRT, as a legal entity of civil law in the Republic of Slovenia, performs its activities as EAPTI also worldwide.

Despite these successes, there is still work to be done in Europe since we must seek to raise the general awareness of the usefulness of CT/RT. Nevertheless, we encourage faculty from other parts of the world to learn and benefit from our experiences as they go forward to broaden their own fields of endeavor through the application of William Glasser's ideas in counseling, psychotherapy, education, leadership training, and more.

Brief Bios

Leon Lojk is a senior faculty member of the William Glasser Institute, and has played a major role in establishing the Croat Association of Reality Therapy, and the European Accredited Psychotherapy Training Institute. He has authored several professional articles in the Slovenian, Croat, and English languages. Besides working with different kinds of clients, Leon has focused upon working primarily with emotionally and/or behaviorally disturbed youth in group homes as well as in private practice.

Boba Lojk is also a senior faculty member of the William Glasser Institute, and is currently a psychotherapist in private practice. She, too, was one of the initiators of the Croat Association of Reality Therapy and the European Accredited Psychotherapy Training Institute.

CHOICE THEORY AND BLAME VERSUS RESPONSIBILITY

Ernie Perkins, Th.D., D.Min., Ed.D., Ph.D., CTRTC, Faculty Member, Glasser Institute
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The first step towards developing an understanding of something comes about by defining it. In other words, until we can define an issue, we can have no clear understanding of it. Thus, I begin this article with a definition of the following words, i.e.,

"Blame" – 1. Consider someone responsible. 2. Criticize by finding fault with someone.*

"Responsibility" – 1. Accountability, the state, fact, or position of being accountable to somebody or for something. 2. Blame, the blame for something that has happened. 3. Something to be responsible for, somebody or something for which a person or organization is responsible. 4. Authority to act, authority to make decisions independently.*

While there are some similarities regarding these two concepts, and there are times when they have been used interchangeably, I will attempt to show their differences and how using Choice Theory can help one live a happier and healthier life if these differences are fully understood.

More specifically, one of the first principles frequently taught in the study of Choice Theory and Reality Therapy is the principle of personal responsibility. Thus, the only person whose actions one has control over is his/her own. Therefore, if my life is not as I would want it to be, the first person who has responsibility for changing it is me.

Interestingly, this notion seems to fly in the face of most people's typical responses. That is, many are always ready to find reasons for the manner in which their lives are going and those reasons will usually be externally-oriented and blame-related. "I am unhappy," they may say, "because of the situation I have at home. My spouse has made my life miserable and my spouse has made me very unhappy." Thus, my life is as it is because of the person that I married. If I had not married anyone, or if I left this person to find another, my life would be happier. The only reason I haven't a happy life now is because of the actions of someone else, e.g., my spouse.

This is the blame syndrome illustrated by a marriage relationship. In truth, the illustration could have used the work setting, the neighborhood, or any other situation where other persons are involved with one's life. If I blame others, I am finding an excuse for my own lack of taking control of the situation and doing something about it.

Another principle I have found in Reality Therapy, though it is hidden, can be summarized by the statement, "As I do, so will I be." I identify this principle as my own way of identifying the strengths of Reality Therapy. If I activate my behavior in a certain manner, the emotions will inevitably follow.

If I would be happy, I will do happy things. If I would continue to be in love and thrilled by my spouse, I will do loving and thrilling things with and for her. If I would find satisfaction in my situations, I will look for those things that satisfy instead of focusing on those things that do not. "As I do, so will I be."

*Definitions provided via the Microsoft program on my Apple Computer.

Reality Therapy is built on the truth that our five needs, or desires, are in fact very similar to dominoes when they are lined up for each to knock down the next. This domino effect is frequently the direct cause for depression (see Perkins, 2007). For example, consider this scenario.

John works in a hospital as a nurse. He finds great joy and satisfaction in his work and feels that he is a good nurse. However, he has a new supervisor who is continuously finding fault with his work. The more faults the supervisor finds, the more John feels his power, or significance need, is not being met. Because John identifies himself as a nurse, and because he finds his significance in what he is rather than who he is, he feels that to reject him as a qualified nurse is to reject his person. Therefore, he reasons that the supervisor is rejecting his skills because, in fact, the supervisor is rejecting him. This means his love and belonging needs are currently not being met. This causes him to lose the freedom to do his work as he has previously done realizing that everything he does is being scrutinized. Thus, his freedom need suffers too. Without the freedom to do his work as he had previously done it, he loses the joy of his work and his fun needs fall. Consequently, he goes to each work day with acute apprehension and dread, and the last domino is knocked down as he begins to worry about his job survival.

The most likely response for John to have in this scenario is to be angry, but anger is not a safe emotion to express in this situation. He then moves to a safer emotion, and that is depression. Depression is not only safer, but it is also a way to ask for help without verbalizing it. It postpones having to make decisions, and it gives him an excuse to hide himself in his bedroom (or bathroom) all day. Depression in this case is a choice based on a blame game. "I wouldn't be feeling this way," John argues, "if it were not for that supervisor. She is making me feel very depressed."

The fact is, however, that John is blaming another for his own choices. No one can make another feel angry, sad, or depressed unless we give them permission to affect our emotions accordingly.

John may tell himself that he has no choices in the matter, but the fact is life is full of choices. He can choose to find another job, or he can choose to ignore the fault-finding supervisor's criticism, or he can choose to confront the supervisor and share how he is interpreting her fault-finding nature. The choices are his and his alone.

To be able to make these choices, however, takes a spirit of personal responsibility. I am responsible for my life. I will not let the actions of another govern how I feel about myself or my situation. Currently, the total population of the world is approximately six and a half billion people. If John lets this one person determine how he is to feel about himself, his situation, and/or his worth, he has determined to let $1/6,500,000,000^{th}$ of the world's population determine his value and run his life for him instead of running it himself. This is a silly decision to reach. If one person doesn't like him, there are about 6,499,999,999 others out there who might. He certainly should not yield to the value-determination of just one demeaning individual.

The Bible gives an excellent example of blame versus accepting personal responsibilities in its story of the first two kings of Israel. The first king, Saul, was rejected by the Divine as king and another, David, was chosen in his place. David remained in good favor with God, even though when the sins of the two are examined, it would seem that David's sin was tremendously more serious than was Saul's sins. The difference between the two kings was

not the sin, nor even the severity of the sin, but the attitude of the sinner when the sin was discovered. More specifically, Saul played the blame game. He blamed every disapproving thing he did on others. David, on the other hand, readily accepted responsibility for his sin and immediately asked for and received forgiveness.

We are, to use Albert Ellis's words, a fallible and imperfect people. We all will face those times when life has not turned out as we would like. Our "quality world pictures" and the real world will be in conflict. The degree to which we get our expectations and the realities in balance can be determined to a large degree by the extent to which we are willing to accept personal responsibility for what is happening and make correct choices toward handling our own lives. Said somewhat differently, life should basically be the search for positive alternatives, and the willingness to accept responsibility when we fail to achieve this (these) end(s) when it is due to our own faults and/or shortcomings.

To paraphrase the current statement found at the end of nearly all political ads, "I am Ernie Perkins and I approve of this message (i.e., this article)." Which is another way of saying, "I take personal responsibility for the things expressed here, and I'll hold no one else accountable or responsible for them!"

References
Perkins, E. (2007). *Ministerial Suicide.* Oklahoma City: Encounter Publishing Co.

Brief Bio
Ernie Perkins is a motivational speaker, an educator, a counselor (CTRTC, WGI Faculty Member), a humorist, and a frequent contributor to the *International Journal of Choice Theory and Reality Therapy*.

INNOVATION: ONE WAY TO TEACH THE WORLD CHOICE THEORY

Beverly LaFond, CTRTC

In his book "Counseling with Choice Theory" (2000), William Glasser, M.D., presents the case of an unhappy married couple, Bea and Jim (pp.37-55). He uses structured reality therapy which works by asking the couple five questions: (a) Are you here because you want help for your marriage? (b) Whose behavior can each of you control? (c) What's wrong with the marriage right now? (d) What's good about the marriage right now? (e) What's one thing that you could do all this coming week that you think will make your marriage better?

This highly structured approach to marital counseling requires only one or two sessions. If both partners are able to answer all five questions satisfactorily, then they go home and do what they think will make the marriage better for one week. If they don't do it, or if it doesn't help the marriage, then the counseling is over and there is no charge. At the discretion of the counselor, the process could be repeated. Most couples answer the questions satisfactorily and go home to do what they think will make the marriage better. The second and final session provides them with a lifetime plan for resolving such issues.

Jim has had an affair and he won't talk about it. It happened three years ago and it is over now. He loves his wife and refuses to say any more because he thinks she will rehash the details for the rest of their lives. Bea loves her husband, but wants to know who, where, and when this happened. They have suffered for three years. Dr. Glasser guided them through the five questions. They did what they said they would do and returned for the second and last session. Dr. Glasser taught them how to use the Solving Circle whenever there is a problem and gave them a copy of his book "Choice Theory."   (See Glasser [2000] for detailed information regarding how to conduct a Solving Circle.)

On page 55, Dr. Glasser gives us a golden opportunity for teaching the world Choice Theory. He says that divorce is not the best solution in many cases and neither is his structured marital therapy approach. Learning Choice Theory, of course, would be best for those considering marriage, but should be helpful for those already married too.

Twelve years ago I made an appointment at our Catholic Archdiocesan offices to make an offer. Since the divorce rate was about 50%, I asked if I could teach half of the applicants Choice Theory while the other half took the traditional training. Then we would follow the couples for at least ten years to see if the CT couples had a lower divorce rate and were happier. My proposal was politely rejected.

Today the divorce rate still hovers around 50%, and many couples only stay together because of economic, religious, and/or cultural concerns. Here is my innovation: I invite WGI faculty worldwide to go to their local churches, temples, synagogues, and/or mosques and offer to teach Choice Theory to those preparing for marriage. A method of following up on the CT couples would be essential. In some cases it might be possible to be paid, though likely not in every instance. Of course, many more may be receptive if there is no cost to the religious facility and/or its members. It's certainly worth a try. Good luck as you go forward to truly teach the world Choice Theory!

Brief Bio
Beverly LaFond, Ph.D. WGI faculty member, and is also the current Sunbelt Representative to WGI-US.

A COMPARISON OF REALITY THERAPY AND CHOICE THEORY WITH SOLUTION-FOCUSED THERAPY

Shannon B. Dermer, Ph.D., LMFT
Patricia A. Robey, Ed.D., LPC, CTRTC
Shea M. Dunham, Ph.D.

Abstract

There are over 400 models available to inform therapeutic thinking and practice (Norcross, 2005). Synthesizing models may be useful in providing rich resources for interventions, but clinicians without a clear understanding of theory may be employing techniques that are incongruent with the theoretical model. Assimilative integration allows for the integration of techniques, but with clear direction. Reality Therapy/Choice Theory and Solution-Focused Therapy are models that clinicians may consider for assimilative integration. This article provides a brief history and comparison of these approaches.

Theory informs how we understand what is happening with our clients; techniques and interventions are how we put this understanding into action in session. Clinicians used to be required to choose one theoretical framework, and rarely deviated from their allegiance to one model, but in the last twenty years the mental health fields have moved to combining (through various methods) theoretical frameworks and interventions (Norcross, 2005). When clinicians were expected to be purists, choosing a theory and model was a serious decision because one was expected to utilize it for the rest of his or her clinical life. Now, the pressure is less on choosing one theory and model that must be adhered to, and more on how to make sense of the sheer number of therapies in order to decide what and how to incorporate them into an understandable model. There are over 400 different therapies from which one may choose and there is little training on merging such diverse models (Norcross, 2005).

According to Norcross (2005), while a blind allegiance to one school of thought is not necessary, synthesizing various models and interventions should be a systematic and considered process. Norcross has described several methods for unifying disparate models, including *technical eclecticism* and *assimilative integration*. Technical eclecticism involves choosing interventions from various models, but the disadvantage is that that the clinician may have no clear conceptual framework to work from and may be employing techniques from incongruent theories. Eclecticism may be like driving into unfamiliar territory without a map. The driver is making right and left turns, but without a clear direction or understanding if those choices will get him or her to the desired destination. Another method of synthesis, assimilative integration, allows integration of techniques from different models and maintains a clear direction. This method directs a clinician to choose one conceptual framework while maintaining willingness, in a considered fashion, to integrate concepts and interventions from other schools of thought.

Assimilative integration answers some of the problematic issues of eclecticism, but there are still obstacles to enacting assimilative integration for the typical clinician. First, is the lack of training regarding the process of assimilative integration (Norcross, 2005). Second, are the ontological and epistemological differences between theoretical frameworks (Messer, 1992; Norcross, 2005; Simon, 2002). Trying to integrate interventions from various theories and models into one's conceptual framework may result in giving clients, clinicians, and supervisors "theoretical whiplash." In order to avoid the feeling of starting, stopping, and moving in new directions in a disjointed way, clinicians need to, with forethought, choose

and utilize ideas and interventions in a way that stays true to the underlying principles of the clinician's chosen model.

Trying to integrate models and interventions haphazardly because there are attractive components to each is kind of like trying to be Catholic, Jewish, Muslim, and Buddhist all at the same time. While each of these religions has attractive and useful qualities, they have fundamental differences in their underlying beliefs that make it impossible to hold certain ideas at the same time. A Catholic can make use of Buddhist meditation, but the Catholic does so for different reasons and integrates meditation in a way that does not exclude fundamental beliefs of Catholicism. The same is true for models of counseling and therapy. One must know the fundamental beliefs and values embedded in each so that when borrowing a technique from one model, it can be integrated with another model in a way that preserves the main model's fundamental ideas.

Two models' trainees and clinicians considered for integrative assimilation are Reality Therapy (RT) and Solution-Focused Therapy (SFT). On the surface, these two models have similarities which make them particularly attractive. They are pragmatic, optimistic, goal-oriented approaches. Recognizing their similarities, Greenwalt (1995) considered the possibilities of integrating Reality Therapy and Solution-Focused Therapy, but he focused more on the compatibility of the techniques, rather than the underlying similarities and differences in theory and values. At that time Greenwalt treated SFT as if it were atheoretical and RT as if it were based on Control Theory rather than the more current Choice Theory. This article provides an updated review of the similarities and differences between RT and SFT.

Theory

Both the RT and SFT models are rooted in theory, though SFT is sometimes discussed as if it is atheoretical. Although Glasser developed Reality Therapy in 1965 as a practice without a theoretical foundation, RT now has the advantage of being clearly associated with Choice Theory, so much so that that Glasser (2000) maintained that in practice one cannot separate RT from Choice Theory. For SFT, the story is not as clear because the theory that informs it is postmodernism and the sub-theories (depending on which author one reads) constructivism or social constructionism. Postmodernism, constructivism, and social constructionism all share the assumption that reality is subjective. Constructivism focuses on reality being unique to each individual and social constructionism focuses on how realities can be shared and influenced through shared meaning. Because of the lack of theoretical musings on normal development, models based on these schools of thought are sometimes mistakenly seen as lacking a theory. Nevertheless, SFT, like RT, has assumptions about: reality; how problems are created and resolved; pathology; therapeutic relationship; resistance; and time-orientation.

Brief Overview of Reality Therapy and Choice Theory

Reality Therapy

William Glasser developed RT in an effort to find a treatment method for helping clients make more effective behavioral choices and to learn to take responsibility for their behavior, thus getting their needs met while not imposing on the needs of others (Glasser, 1965; Wubbolding, 2011). In 1965 Glasser wrote that the primary problem for people requesting psychiatric services was an inability to meet their basic physiological and psychological needs. At that time Glasser noted two psychological needs: the need to "love and be loved

and the need to feel that we are worthwhile to ourselves and others" (1965, p. 10). An essential component of RT was an understanding that people who love and are loved will feel worthwhile and can give love in return. When people are unable to get these needs met, the painful perceptions they experience provide an internal motivation to relieve the pain.

Reality Therapy was initially made up of three interwoven procedures: 1) creating involvement; 2) helping the client identify ineffective behavior while still maintaining the therapeutic relationship; and 3) teaching the client more effective ways to meet basic needs (Glasser, 1965). A cornerstone of the RT process was its emphasis on accepting clients uncritically and understanding their behavior. In contrast to the psychoanalytic approach, Glasser stated that "the therapist must be able to become emotionally involved with each patient. To some extent he must be affected by the patient and his problems and even suffer with him" (1965, p. 28). Focusing on the present to work toward the future, and on the client's ability to only control his/her own behavior, the therapist facilitated the process so that the client ultimately decided whether his/her behavior was responsible and whether to change it. By 1972, the process had evolved to include seven principles: 1) involvement; 2) identifying current behavior; 3) evaluating behavior; 4) planning responsible behavior; 5) making a commitment; 6) accepting no excuses; and 7) imposing no punishments. The application of these principles could vary but overlapped (Glasser, 1972).

Today, RT is no longer a step-by-step process. Practitioners of RT recognize that relationship problems are at the core of clients' problems and help clients become closer to the people they need. The focus is on making change in the present and making change to self, not others, which is all we can control. Discussion of symptoms is avoided since this is a way to distract from the real work of therapy. While feelings are respected, clients are encouraged to spend more time on how they think and what they do, the components of total behavior that are easier to change. The therapist remains supportive and encouraging throughout the process, focuses on specifics, helps clients evaluate their own behavior, and assists in making workable plans for reconnecting with others (Glasser, 2000).

Choice Theory

In 1984 Glasser extended William Powers' (1973) study of the brain as a control system. Glasser incorporated the concepts of five basic needs or genetic instructions as the source of human behavior and created *Control Theory* (Wubbolding, 2011). In time, to more accurately represent what he was teaching, Glasser changed the name of his theory to Choice Theory (1998).

The process of RT is now firmly grounded in understanding Choice Theory. Choice Theory teaches that all people have five basic needs: love and belonging, power, freedom, fun, and survival. These needs are met through the very specific people, places, things, values, and beliefs that are considered to be part of what Glasser (1998) calls our *Quality World*. We are constantly evaluating our perception of what we have in comparison with what we believe we want (our quality world pictures). The result of this comparison is an internal signal that informs us that we need to choose or maintain behavior that will influence our world so we can get our wants and needs met. Behavior is total and consists of acting, thinking, feeling, and physiology (Glasser, 1998, 2000; Wubbolding, 2011).

An essential concept of Choice Theory is that all long-lasting problems are relationship problems. People can have problems related to money, health, or other issues, but they are likely to weather these problems if they have happy and healthy relationships. Relationship problems develop as a result of externally controlling behaviors which Glasser & Glasser

(2000) labeled *deadly habits* (criticizing, blaming, complaining, nagging, threatening, punishing, and bribing or rewarding to control). The alternative is the use of *caring habits* (listening, supporting, encouraging, respecting, trusting, accepting, and always negotiating disagreements).

The WDEP Model

The use of acronyms has been helpful in organizing concepts for practice in therapeutic settings (e.g. REBT, BASIC-ID) (Wubbolding, 2011). The WDEP model provides a framework for organizing a therapeutic session and for helping clinicians recall Choice Theory concepts in their work. The "W" reminds therapists to search for clients' *wants,* which relates to the identification of quality world pictures and basic needs. The "D" refers to clients' *doing*, that is, their total behavior in relation to their current situations. The "E" stands for evaluation, represented in Choice Theory by the concepts of scales which compare clients' perceptions of what they want vs. what they perceive they are getting. The "P" stands for planning, which may involve a change in quality world pictures, perceptions, or total behavior (Wubbolding, 1989; 2011).

Wubbolding (1988) noted that the plan should be tied to a need or a want or it will be meaningless and will be less likely to be carried out by the client. The client should identify what he/she wants to accomplish and the plan should be created with detail and structure to ensure the best possibility that it will be successful. Wubbolding (1988) suggested that plans be: simple; attainable; measurable; something that can be done immediately; dependent on the client, not on others; something to do, rather than stop doing; specific; repetitive; realistic; consistent; and committed to.

Solution-Focused Therapy

Solution-focused therapy has its roots in, ironically, problem-focused therapy (de Shazer, et al., 1986; Duncan, Miller, & Sparks, 2003). The Mental Research Institute (MRI) revolutionized family therapy with its emphasis on problem sequences and interrupting patterned, systematic sequences of behavior before, during, and after problems. The basis for much of what was considered revolutionary about the MRI approach was grounded in Milton Erickson's viewpoint (Duncan, Miller, & Sparks, 2003). Erickson emphasized active intervention, goals tailored to the client rather than being theory-determined, and co-constructed conversations where the client's worldview took precedence over the clinician's. Erickson believed clinicians should tailor their approaches to clients', "unique worldview, expectations, and preferred method of working," and "magnify resources, rather than disabilities, and that change can happen quickly and often in dramatic, unexpected ways" (Duncan, Miller, & Sparks, 2003, p. 116). The MRI group expanded Erickson's ideas and de-emphasized pathology and emphasized that problems were primarily the outcome of ineffective ways of solving everyday problems and life transitions (Weakland, Fish, Watzalwick, & Bodin, 1974). The MRI focused on shared meaning around the problem, interrupting the problematic problems so solutions could emerge, and the idea that a solution to a problem often did not resemble the original difficulty (Watzalwick et al., 1974).

Therapeutic Focus

Both MRI and SFT clinicians focus on shared meaning, active interventions, briefness, a de-emphasis on insight, and resources that clients already possess. There is also an emphasis on concrete goals and solutions in each. However, the MRI group focuses on interrupting

patterns of human problems and letting new solutions emerge; whereas, SFT only focuses on the change part of the equation.

Steve de Shazer, the creator of solution-focused therapy, questioned if one needed to focus on problems in order to find their solutions. Unlike other models, solution-focused therapists do not hypothesize about problem-formation/causation (de Shazer, 1988; Duncan, Miller, & Sparks, 2003). The interview process is one that is focused on creating new stories for clients through conversations that allow them to see old solutions or free them to create new ones. de Shazer's model is defined by its emphasis on solution-focused language, client strengths and resources, exploration of pre-session change, scaling questions, exception questions, questions that orient clients toward a future without problems (e.g. miracle question, magic wand question, crystal ball question), compliments, and homework assignments (Dermer, Wilhite, & Russell, 1998; de Shazer, 1991; Gingerich & Eisengart, 2000; Duncan, Miller, & Sparks, 2003). Solution-Focused Therapy emphasizes perceptions and behaviors related to goals. Solution-Focused Therapy focuses on behavior and goals rather than hypothesizing, insight, or explanations (Dermer, Hemesath, & Russell, 1998).

Basic Assumptions

The basic assumptions embedded in a model stem from its ontology and epistemology. These philosophical assumptions lead to pragmatic differences in everyday choices clinicians make—what to assess, how the therapeutic relationship should be structured, what questions to ask, who to invite to session, and what type of interventions should be chosen. The basic assumptions of SFT guide the practice of the model (Berg, 1994, de Shazer, 1988; 1991; Duncan, Miller, & Sparks, 2003; Trepper, Dolan, McCollum, & Nelson, 2006): 1) Change is constant and inevitable; 2) Small change leads to bigger changes The past cannot be changed; 3) Clients are experts on themselves; 4) Every human being, relationship and situation is unique; 5) What people do has an impact on other people; 6) Every problem has at least one exception, and; 7) Changes come from many directions. In summary, SFT is a strength-based, future-oriented model that emphasizes the impact of language on clients' reality. The focus is on the future, where problems can be solved, rather than on the past (the past cannot be changed) or the present where people tend to be constrained by narrow views of themselves and their strengths. People tend to get stuck in problem-focused thinking which obscures their view of successes they have already had or could have in the future. The therapist helps clients identify exceptions to the problems and amplify successes.

Comparison of Solution-Focused Therapy and Reality Therapy/Choice Theory Areas of Agreement

1. Both RT and SFT are rooted in theory; RT in Choice Theory and SFT in postmodernism (e.g. constructivisim or social constructionism)
2. Insight into the problem is not necessary
3. Neither RT nor SFT accept the concept of resistance.
4. Clients are helped to make specific, workable plans.
5. Reality therapy focuses on thoughts and actions—solution focused therapy also focuses on the "viewing" and "doing".
6. Responsibility for change rests on the client.
7. The only person one can control is himself or herself.
8. There is no use talking about things that one cannot change.
9. Reality therapists don't listen much to complaining, blaming, and criticizing. SFT guides people to solution talk.

10. Rejection of the medical model: CT suggests that mental illnesses are the result of chosen behavior. SFT also rejects the medical model, but for different reasons.
11. Both RT and SFT don't focus on the past except for past success
If the client wants us to talk about past successes, the therapist will listen, but will only devote enough time to the past to assure clients that they are not being rejected.

Areas of Disagreement

1. Choice Theory posits that most, if not all, long-lasting problems are relationship problems. SFT does not hypothesize about problems. However, SFT counselors agree that people sometimes get so focused on problems that they cannot see their own strengths and resources. The way people use language tends to open up solutions or keep people stuck in problems. Counselors need to help clients define goals and move toward reaching them.
2. The role of the therapist in RT is to remain non-judgmental and to encourage clients to self-evaluate whether their behavior is helping them get closer to the people that they need in their lives. If it is not, then clients are encouraged to find or create new behaviors that will create that connection. In SFT, the counselor questions whether what the client is doing will help them get to their goals, but counselors do not insist that relationships need to be part of the goals. Goals are created by the client.
3. Counselors using RT/CT are encouraged to teach CT to clients and to teach clients that reconnecting to the important people in their lives is the best solution to their problems. RT is used to help clients understand, through teaching them choice theory and encouraging them to read the book, Choice Theory: A New Psychology of Personal Freedom (Glasser, 1998), that whatever their complaint, reconnecting is the best possible solution to their problem. SFT does not focus on problems or have an explanation for problems. SFT does not focus on teaching.
4. Reality therapy focuses on using verbs to convey the idea that we choose behaviors. SFT uses pre-suppositional language to emphasize that change is possible (e.g. "when your problems are gone," rather than, "if your problems are gone"). In addition SFT adopts the language of clients to demonstrate collaborativeness and to emphasize the importance of the client's goals and aspirations.
5. RT teaches clients to stop making destructive or self-destructive choices; SFT does not judge if a behavior is destructive or not, only if it moves someone toward his/her goals.
6. Therapists must have satisfying relationships in their own lives. SFT doesn't focus on therapist except for attitudes and behaviors that allow one to join and be collaborative.
7. What is a "satisfying life?" Choice theory partially answers this for clients by saying someone must have at least one satisfying relationship. SFT helps clients answer the question "what is a satisfying life" for themselves.
8. The concept of the Quality World question "What do you want?" is similar to the Miracle Question, but the purpose behind the question is different.

Conclusion

The purpose of this article is to provide a brief background and comparison of the theories and interventions used in Reality Therapy/Choice Theory and Solution-Focused Therapy. While the interventions used in both approaches are compatible and may be integrated, it is clear that the theoretical model and explanation for each approach differs. Therapists who adopt either model to guide their counseling work would be wise to orient themselves to the

underlying principles of their chosen theory to avoid confusion in the application of interventions.

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IMPLEMENTING ONE CARING HABIT: LISTENING WITH REALITY THERAPY PROCEDURES, PART I

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Abstract

Choice theory (Glasser, 1998) provides a comprehensive explanation of human behavior. Human beings are driven by internal motivations – needs and wants, to attain inner satisfaction. Behavior is an attempt to satisfy these current inner drives. Its purpose is to impact the outside world (Glasser, 1998), as well as to send a message to the world (Wubbolding, 2011). Glasser has presented a general direction for human beings wishing to implement Situation B behaviors as described in the classic chart *How the Brain Works* (Glasser, 2010). He calls this direction the seven caring habits (2005): supporting, encouraging, listening, accepting, trusting, respecting, and negotiating differences. This article presents specific actions, i.e., techniques for listening as a methodology for implementing this relationship-building habit.

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Listening to the Quality World

Contained in the quality world are specific desirable pictures of persons, places, ideas, and things that satisfy the needs for survival or self-preservation, love and belonging, power or inner control, freedom or independence, and fun or enjoyment. This complex content can be summarized in one letter **W** or word: *Wants* (Wubbolding, 1991, 2000, 2011). Utilizing this component implies paying close attention to what the client, student, employee, spouse, child, parent, or friend wants, values, as well as his/her worldviews, i.e., how s/he perceives the world around him/her. Below is a partial list of questions and active listening techniques that can be used to facilitate more satisfying relationships.
- Tell me in general what you want from the world around you.
- What do you want from your family, friends, job, career, community, religious institution, government, etc.?
- Describe what you are getting from the list above.
- State in detail what you want from the list above that you are not getting.
- How intensely would you like your want fulfilled?
- Explain how much energy you are willing to expend to get what you want (Cf. levels of commitment, Wubbolding, 2011, pp. 76ff).
- When you look at the world around you – family, etc., what do you see? Describe in detail whether that person, place, idea or thing is a plus or a minus for you. Use as many adjectives as you can to describe it.

- When you view yourself in the world, what do you see? How do you see yourself in relation to your job, family, etc? Tell me how you want to be able to perceive the same.
- Describe the ideal situation that you are seeking. What will you settle for? What can you live with?
- Describe the same situation with a 10% improvement.
- Tell me what you would have to alter in your own behavior that would move you toward the outcome that you desire?
- List one, two or three parts of your life that you believe you have control over.
- Cite a few examples of parts of your life that you have little control over.
- How much responsibility do you wish to take for the unhappiness you are now experiencing? For your current success? For your future behaviors?
- How much responsibility do you think you have for other individuals' behavior at home, in the work place, etc.?
- What do I need to know in order to help you?
- Is there anything that we should not discuss?
- Describe the resources that you have available to you: people, things, opportunities, etc.
- One of the purposes of all human behavior is to send a message or a signal to the world around you. What message are you attempting to communicate by what you say, how you say it, and how you act?
- In your opinion, do the people around you accurately receive the message? Are they understanding the same message that you intended to give them?
- What message would they like to receive from you?

It is evident that listening involves more than a barrage of questions. It includes reflective summaries, paraphrasing and similar skills. Wubbolding, Robey, and Brickell (2010) state: "The effective use of reality therapy procedures can encompass more than just asking questions. Even in the formative days of reality therapy Glasser (1972) described the 8 steps, but did not identify or limit them exclusively to a series of questions" (p. 32).

Quality World Obstacles to Listening

The content of the quality world can increase or decrease effective listening. Below are some examples of how this content can block effective listening:
- Focusing on or being distracted by one's own agenda, such as the importance of one's own quality world pictures, with the result that the other person's message is tuned out.
- Holding different or contradictory quality world pictures such as beliefs or values different from those of the speaker. The listener can appear to be, in fact, listening but is actually distracted and thus misunderstands or fails to grasp the "felt sense" of the message conveyed by the speaker.

An illustration of the above obstacles could be a drug and alcohol counselor (who's "heard it all before"). The counselor interviews a client in the early stages of recovery who fails to see the negative impact of drug and alcohol abuse. Due to the counselor's contradictory quality world values and beliefs about the harmfulness of drug abuse, s/he may well experience annoyance and impatience and thereby "tune-out" what the client is trying to convey. In doing so the counselor could miss a key piece of information and/or the deeper meaning of the client's message.

It is rare indeed the person who can remain open and fully "tuned-in" to someone who conveys a conflicting value, belief or opinion. To do so is most certainly a skill as well as a positive and compassionate choice.

Case Example

Bill requested counseling services to deal with his recovery from cocaine addiction, which was complicated by depression and a variety of self-reported health problems, including hepatitis C, arthritis, degenerative joint disease, and a high prescription dosage of methadone. In the initial interview with Bill, the counselor used the "WDEP" system (Wubbolding, 1999), (a) to explore with Bill his **W**ants and help him to clarify his goals for therapy and for himself, (b) to ask Bill what he was **D**oing to meet his goals, (c) to encourage him to conduct a self-**E**valuation about the effectiveness and appropriateness of his behaviors, and (d) to focus on facilitating Bill to make a commitment to a **P**lan of action.

The counselor listened carefully for Bill's reasonable and positive wants related to the five basic needs. The cue that Bill presented that indicated that he was not fully meeting his basic needs was a comment he made about "wanting something to look forward to." The counselor used questions and listening techniques to clarify specifically what Bill meant by "something." Bill reported that he felt a lack of control in his life and wanted to feel that he could control his drug use as well as have a say in his health care. Bill also reported that he felt disconnected from his family and friends. He was very lonely and wanted to develop a support system.

Future counseling sessions would focus on Bill's desire for "something to look forward to" as a theme while continuing to listen for implicit messages about Bill's current level of commitment to act on his own behalf. Wubbolding (2011) defined five levels of commitment:
(a) "I don't want to be here and I won't do anything."
(b) "I want the pleasure resulting from change, but I don't want to make the effort."
(c) "I'll try."
(d) "I'll do my best."
(e) "I'll do whatever it takes."

As a voluntary client, Bill came into counseling at commitment level b. Bill reported feeling defeated and lacking enthusiasm for the work he would have to do to get his life back in control. After the counselor helped Bill shift his focus from his problem talk to a discussion of goals, Bill's level of commitment moved from level b to level c. In future sessions, the reality therapist will encourage Bill to move to an even higher level of commitment (level d or level e), resulting in greater satisfaction of Bill's basic needs by fulfilling his specific wants. Moving to a higher level of commitment to change always depends on the client's willingness to make choices congruent with his wants as well as a willingness to follow through on them.

Subsequent Application of Procedures:

In the short term, Bill would be helped in the following ways:
1. Develop a more consistent exercise program, e.g., using the treadmill every other day. (Survival and Power or Achievement needs)
2. Change his self-talk to "I'm one in a hundred." He would have a specific plan for repeating this. (Power or Achievement needs)

3. Other affirmations would help him move from his implicit "I can't" to "I can" and "I have unlimited (or at least a few) choices." This would build on his insight that he has already changed his action, thereby changing his feelings, such as when he chose to get angry at the hospital and took charge of his operation. (Power or Achievement needs)
4. Search for some initial ways to establish more satisfying relationships by engaging his brother in conversation, by going to church groups, or by going to a 12-step program once a week even though he is at present less than enthusiastic about the program. (Belonging and Fun needs)
5. Teach him the basics of choice theory, i.e., the importance of relationships in recovery as well as the five levels of commitment which are part of the reality therapy process. (Power or Achievement needs)
6. Help him discuss the many decisions that he has already made and continues to make. Then help him make more short-term decisions related to his wants. (Freedom or Independence needs)

In the long term, more remote plans and direction might focus on the following:
1. Establishing a relationship with a woman. (Belonging and Fun needs)
2. Developing a network of friends. (Belonging and Fun needs)
3. Working the 12-step program. (Power or Achievement and all other needs)
4. Volunteering again at the VA Hospital. (Belonging and Power or Achievement needs)
5. Obtaining at least a part-time job. (Power or Achievement needs)
6. Dealing with the spiritual aspects of recovery, such as the ultimate purpose of recovery and his perception of his higher power. (All needs)
7. As he recovers, helping him to get beyond merely being abstinent. His issues will include establishing a predictable structure and daily routine, finding ways to deal with stress and anxiety, being willing to read and to write, and making plans for maintaining recovery and engaging in contributing and productive behaviors. (All needs)

The success of the above plans depends on the skill of the therapist as well as the receptivity and ability of the client. The formation of a connection and relationship between the therapist and client is essential. Still, the client himself must want to change and be willing to make the effort to adopt new behaviors.

Summary

The above suggestions and case illustration are not recipes for intervention. Rather, they comprise topics that can be tailored to fit specific issues that many people deal with in their personal and professional interactions. These ideas are not intended to be the final word on questioning and active listening. They are intended to trigger added ways to listen and practice this crucial caring habit. They illustrate topics related to the quality world: wants, perceptions, ideas, level of commitment and perceived locus of control. A subsequent article, Part 2, will focus on listening as it relates to current behavior: action, cognition, emotions as well as self-evaluation and positive planning.

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RESOURCES FOR TEACHING AND LEARNING CHOICE THEORY AND REALITY THERAPY, PART II

Robert E. Wubbolding, Ed.D., Director of the Center for Reality Therapy, Professor Emeritus, Xavier University and former Director of Training of The William Glasser Institute (1988-2011)

John Brickell, D.C., Director of Training for The Institute for Reality Therapy United Kingdom, and Director of the Centre for Reality Therapy United Kingdom.

Abstract

This article is the second in a series that reviews resources for learning and practicing choice theory and reality therapy. Applications are made to counseling, classroom teaching, training in reality therapy, the certification process, quality schools, and lead management.

History
In Part I of this series of reviews (Wubbolding & Brickell, 2010), the authors provided the following background. It is again presented in order to provide a context for the reviews below.

"William Glasser developed reality therapy in a correctional institution and a mental hospital and published his seminal book *Reality Therapy* in 1965. The ideas spread to schools (1968, 1990, 1993), marriage relationships (Glasser, 2007), and to management situations (Wubbolding, 1996). Others have further extended the ideas (Wubbolding & Brickell, 1999), researched the effectiveness of reality therapy procedures (Lojk, 1986), (Parish & Parish, 1999), (Passarro, Moon, Wiest, Wong, 2004). A vast number of training DVDs are now available from a variety of publishers. Books have been translated into Japanese, Korean, Spanish, Croatian, Hebrew and other languages to serve populations around the world.

Because the materials reviewed below are, for the most part, privately published they have not received the notoriety they deserve. These reviews attempt to acknowledge the contributions of authors who have developed tools for a wide range of consumers."

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Class Meeting Flashcards for Elementary School Students (2008), Carleen Glasser

Publisher: William Glasser Inc.
Intended Audience: Elementary School Teachers
Carleen Glasser has developed an excellent series of flashcards for conducting class meetings in elementary school. This series contains a description of the format to be followed: define a topic, personalize it, and challenge the students. Topics include: the human needs, helpful and harmful behaviors, the components of choice theory and an excellent meeting on self-evaluation. The meeting on self-evaluation contains such thought-provoking questions as: "What does it mean to evaluate yourself?" "When is self-evaluation hard to do?" and "What is the real purpose of self-evaluation?"

The series describes a step-by-step process for conducting meetings as well as sidebars with notes to the teacher.

Intervention Strategies: From Theory to Practice, (2012, 5th Edition), Robert G. Hoglund

Publisher: Bob Hoglund, Inc.
Intended Audience: Classroom Teachers
A seasoned teacher of choice theory and reality therapy applied to schools, Bob Hoglund continues to develop and implement functional and constructive tools for increasing the quality of learning in the classroom. His appeal to teachers lies in his formulation of guiding principles described as responsibility training. One of his many contributions is the integration of quality concepts as described by W. Edwards Deming and other management giants. Especially useful are his intervention strategies described as "quick hitters," such as questions focusing on "What are you doing" and "Is this helping you get your work done?" These interventions are supplemented by an excellent series of suggested teacher interventions (p. 53). This brief booklet is amazingly comprehensive and eminently useful for both the neophyte and experienced educators too.

Peaceful Parenting, (2000), Nancy S. Buck

Publisher: Black Forest Press
Intended Audience: Parents
Nancy Buck has creatively applied choice theory and reality therapy to parenting and emphasizes a most hopeful fact: Parenting can be a joyful and rewarding experience when applying the life-enriching principles developed by William Glasser, M.D. Among her many helpful suggestions is the value and legitimacy of parents satisfying their own needs. She also presents guidelines for family discussion, such as conducting a meeting on family rules (p. 149). This book deserves a unique place among the many books written about parenting. It is also unique in that it most effectively applies the principles of CT/RT to the increasingly challenging responsibility of raising children. Finally, it is part of her widening repertoire of offerings for people wishing to learn the art of parenting.
http://www.peacefulparenting.com/home.asp

A Role-Play Notebook, (2006), Jean Seville Suffield

Publisher: www.choice-makers.com
Intended Audience: Persons wishing to learn choice theory/reality therapy and its many applications to their own lives and the lives of students, clients and supervisees.
In the words of the author, "This role-play notebook is designed to help people make connections with others and build the relationships they want to live happier lives." In endorsing the book, William Glasser, M.D., states, "Her presentation of role-play activities is fun and full of many learning opportunities." Among the strengths of this book is that Jean Suffield provides dozens of activities with precise steps for implementation. She presents them with approximately the same format: providing an explanation of a concept or a scenario, followed by "Let's Practice," "Self-Evaluation Reflection" and, when appropriate, "De-Briefing." This excellent and practical resource can be used in whole or in part by educators, trainers and teachers.

Role-Play Handbook, (2008), Brandi Roth and Carleen Glasser

Publisher: Association of Ideas Publishing
Intended Audience: Therapists, Teachers, and William Glasser Institute Faculty Members teaching William Glasser's theories on reality therapy, choice theory, lead management and quality schools.

This compilation of role-play activities teaches the art of instructing by using simulated cases and suggestions, and yet it is more than a book of activities. It contains an explanation of The William Glasser Institute certification process, the rationale for role-play, ethical considerations and a summary of reality therapy skills, techniques and procedures. This comprehensive treatment of the utility of role-play leaves no doubt about the efficacy, the structure, and the unlimited application of role-play practice. Included in this book are quality school activities that clearly indicate that the value of role-play extends beyond counseling and therapy. Persons interested in understanding and teaching choice theory/reality therapy will benefit from this contribution of two very experienced and highly respected instructors.

Giving Birth To Your "Self", (2009), Russell Turner

Publisher: rcturner@windstream.net
Intended Audience: Anyone interested in their own personal development
Although this book is spiritual in nature its ideas are stunningly practical, grounded and helpful to anyone and at any stage of their own personal development. Brilliantly written, this book is certainly in harmony with both choice theory and reality therapy. It provides valuable self-reflective exercises and practical steps for the reader to evaluate the meaning of being "genuine" (as opposed to "fake" or "imitation") as part of the journey and internal drive to connect one's inner-self or true-self with their outer-self.

Choosing a Quality Loving Sexual Relationship, (2000), Maureen Craig McIntosh

Publisher: Moncton Reality Therapy Consultants
Intended Audience: Anyone involved in the wellbeing of young people
The intent of this resource book is to give young people the opportunity to reflect upon and evaluate their own values, pictures and behaviors when choosing a quality sexual relationship. In so doing, the intent is to help prevent the possibility of unwanted pregnancies, an issue that is unquestionably relevant at any point in history.
Whether used as a resource for group discussions or one-to-one conversations this book provides a range of key questions for young people to consider and to use in their self-evaluations. Using choice theory, they are asked to self-assess in such areas as: What is a destructive sexual relationship? How to go about leaving a harmful sexual relationship and what is a quality, loving sexual relationship? Used properly, this book provides guidance for teachers of human sexuality who wish to assist young people to live more responsible and meaningful lives.

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Brief Bios

Robert E. Wubbolding, Ed.D., is the Director of the Center for Reality Therapy, has authored eleven books and scores of articles on reality therapy, and is Professor Emeritus at Xavier University. His most recent book is *Reality Therapy: Theories of Psychotherapy Series* (2011). It is the first reality therapy book published by the American Psychological Association. In their endorsement of this book, Dr. and Mrs. Glasser stated, "*We hope this will be the gold standard for people wishing to learn and practice choice theory and reality therapy.*"

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CHOICE THEORY AND REALITY THERAPY IN COUNSELOR SUPERVISION

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Abstract

Supervision is a process in which an experienced person (supervisor) advises a less experienced person (supervisee) (Bradley & Kottler, 2001). Supervision is most successful when it follows a supervision model. When Choice Theory is the theoretical model for supervision, the supervisor is able to understand the supervisee's behavior in counseling and in supervision sessions. The Reality Therapy process in supervision is used to establish goals, evaluate the counseling and supervisory process, and to make plans for continued growth for both the supervisee and supervisor. This article explores the use of Choice Theory and Reality Therapy in counselor supervision, including reviews of prior articles by Appel (1985), and Peterson and Parr (1989). A case study demonstrates how these practices could be used in supervision with a counselor-in-training. More research is needed to evaluate the efficacy of these processes in counselor supervision.

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The purpose of supervision is to facilitate the supervisee's professional and personal development, enhance the supervisee's competencies, and promote accountable counseling services and programs (Bradley & Kottler, 2001). This occurs when supervisees open themselves to the supervisor's challenges, as well as the supervisor's encouragement. Utilizing a supervision model allows for a supervisor to provide the best supervision possible because it provides a framework on which to make sense of a process that might otherwise be overwhelming (Bernard & Goodyear, 2009).

Viewing the supervision process through the lens of Choice Theory explains what is occurring at multiple levels: (1) Choice Theory explains the intrapersonal struggles of supervisees as they struggle through the developmental process; (2) Choice Theory explains client process; and (3) Choice Theory explains what is occurring in the supervisor/supervisee relationship. The Reality Therapy process is used as the delivery method for building the supervisory relationship, facilitating goals, identifying behaviors, evaluating learning, and making plans for maintenance of successful skills or for behavioral change.

Key Concepts

Choice Theory explains human behavior and motivation (Glasser, 1998; Wubbolding, 2011). It is based on the idea that human behaviors originate within individuals and are not forced on them from people or events outside themselves. According to Choice Theory, we are motivated by five *basic needs*: love and belonging, power, freedom, fun, and survival. These needs drive human behavior. The needs are general, universal, and innate. Basic needs are met through the very specific pictures of the people, places, values, beliefs, and things that we find to be need-satisfying, which Glasser (1998) referred to as our *quality world* pictures. All behavior is generated in an effort to get our needs met through the attainment of our quality world pictures.

The Choice Theory definition of behavior refers not only to actions, but also thinking, feeling, and physiology. All of these components occur simultaneously. Glasser (1998) defined this as *total behavior*. All actions are accompanied by thoughts, feelings and

physiology. Skilled practitioners see these behaviors as choices and treat them as choices even if clients assert that they have little control over specific total behaviors, such as feelings of anger, depression, resentment and/or indifference (Wubbolding & Robey, 2012).

All behavior is our best attempt to impact the external world to get what we want, which satisfies one or more of our basic needs. Reality therapists help clients shift from an external to an internal locus of control. A foundational principle of Choice Theory is that we can control only our own behavior, primarily our actions and secondarily our thinking, which will result in control over the accompanying feelings and physiology. Therefore, reality therapists help clients realize that they have control only over their own behaviors.

The practice of *Reality Therapy* (Glasser, 1965) is now firmly rooted in Choice Theory, but Reality Therapy has its own identity and procedures. Reality Therapy has been used successfully in mental health, corrections, psychotherapy, education, management, parenting, and supervision, as well as for personal development (Wubbolding, 2011). The process begins with establishing a warm therapeutic relationship. After a brief discussion of the presenting problem, the therapist shifts the focus to identify what the client wants instead of dwelling on the problem (the quality world picture of the ideal outcome). Reality therapists identify the current total behaviors that the client is choosing to get what he/she wants and assist the client in evaluating the effectiveness of these behaviors and making plans for change. A basic principle of the Reality Therapy process is that clients can only control their own behavior; therefore, clients are helped to make plans that focus on what they can, and are willing to change.

WDEP

The acronym WDEP (Wubbolding, 1989; 2011) is a useful tool for beginning therapists to use when learning Reality Therapy. Each letter represents a concept of Choice Theory as applied to Reality Therapy: *W* stands for *wants*, or quality world pictures, *D* represents *doing*, or the exploration of total behavior, *E* signifies the *evaluation* component of the Reality Therapy process, and *P* denotes the creation of a *plan* for change. It is important to note that this is not necessarily a linear process; the WDEP process is fluid and can begin at any point based on where the client is at in his/her own stage of counseling. Glasser and Glasser (2008) have endorsed the use of the WDEP system, stating "this system helps to formulate and deliver questions and offer mental health workers, educators, criminal justice personnel, organizations and others a practical method facilitating solutions that are internally motivational" (p. 1).

Choice Theory and Reality Therapy in Counselor Supervision.

Choice Theory and Reality Therapy can be applied to any situation that involves understanding of an individual's internal processes and in facilitating growth or change. Supervisors who work with Choice Theory as their model of counselor supervision approach supervision with several assumptions: (1) that supervisees are motivated by basic needs; (2) that supervisees get their needs met through very specific pictures in their quality worlds; and (3) that supervisee behavior is generated in an effort to get these needs met. The Reality Therapy process is adapted for use in lead management and is used to put Choice Theory into action in supervision.

Appel's Four Principles

The concepts now known as components of Choice Theory were introduced by Glasser in his book *Control Theory* (1984), and were incorporated by Appel (1985) into four principles of the Reality Therapy process as it applied to counselor supervision. The first principle is that supervisees are internally motivated by their own ideas of what can/should/will happen in session. Supervisees develop pictures of what they expect from their supervisor, their clients, and themselves. These pictures may be realistic, idealized, or otherwise. For example, some supervisees maintain pictures of themselves as being able to facilitate change in all clients and that every session will result in insight.

According to Appel (1985), the second principle is that supervisees are motivated by their needs: the need to belong (love and belonging); the need to see themselves as being effective and continually improving their skills (power/control); the need to enjoy counseling and the supervision process (fun); and the need to try new things (freedom). The third principle is that supervisees will choose their acting, thinking, feeling, and physiology (total behavior) in counseling and in supervision in an attempt to get their own needs met. Supervisees will use behaviors that worked in the past, behaviors that are currently working, and will also attempt to create new behaviors. For example, supervisee behavior that satisfies the need for love and belonging may be excessive praise or agreement with the supervisor. On the other hand, a supervisee with a high need for power and control may choose resistance or show disregard for supervisor feedback. Supervisees with a high need for fun may not take the supervision process seriously or may use that desire for fun playfully in counseling and supervision sessions, while supervisees with a high need for freedom may not follow directions well, may be late for supervision, and/or may express freedom by engaging in creativity while in counseling sessions.

Choice Theory supervisors understand that these behaviors are need-satisfying for the supervisee. Supervisees are taught the concepts of Choice Theory and learn to evaluate the effectiveness of their behavior by comparing what they want to what they perceive they are getting. Supervisors model the desired behavior by changing their own actions in an effort to facilitate supervisee growth. Modeling this behavior teaches supervisees how to be flexible in their behavior when helping clients get their own needs met - Appel's fourth principle. At the same time, supervisors work to meet their own needs as well as the needs of the system – hopefully achieving a "win-win" for all.

The Supervisory Relationship

Bernard and Goodyear (2009) defined three separate roles that supervisors play in supervision: teacher, counselor, and consultant. Boyd (1978) included another role, that of evaluator. Supervisors must train supervisees both personally and professionally in order to promote the health and welfare of the supervisee's clients and the counseling field (Appel, 1985). There are three main goals to supervision: 1) assistance of the counselor's personal and professional development, 2) advancement of counselor competencies, and 3) advancement of accountable counseling and guidance services and programs (Boyd, 1978). Supervisors are expected to be experienced and effective counselors, to be able to think conceptually, to have an awareness of ethical and legal standards, to be multiculturally competent, and to be able to support supervisee development while supporting and challenging them (Fall & Sutton, 1999). Supervisors are also charged to act as gatekeepers to the counseling profession. Their task is not only to facilitate the development and growth of supervisees, but also to ensure the safety and ethical treatment of clients. Because supervisors have this agenda, the title of *manager* can be added to the list of supervisor roles.

The effectiveness of the supervisory process depends not only on strict adherence to the legal and ethical codes and on feedback regarding counselor skills and behavior, but also on *how* the supervisor works with the supervisee. The supervisory relationship is hierarchical, with evaluation as a key component. Some supervisors look at the evaluation process with a love-hate relationship, finding it to be necessary and useful, yet difficult to provide without negatively influencing their relationship with the supervisee(s) (Bernard & Goodyear, 2009; Fall & Sutton, 1999).

Neufeldt (1999) suggested that supervisors should facilitate the development of the supervisee in becoming a *reflective practitioner*. This practice requires the supervisor to create an environment that is open and supportive, in which supervisees feel comfortable exploring and reflecting on their personal and professional experiences. Reflective practitioners approach their work as a form of scientific inquiry, allowing them to identify problems and work creatively to find alternative directions to address problems. To qualify as a reflective event, the supervisee must change his/her behavior following the event. This may be a change in understanding clients, the counseling process, and/or themselves as a result of the reflection.

The importance of the environment is stressed when facilitating a reflective process (Neufeldt, 1999). From a Choice Theory perspective, this means replacing boss management with lead management in the supervision process. Glasser (1998) wrote that boss management, which he described as using external control in the workplace, creates distrust and fear between workers. In the supervisory relationship, boss management occurs when the supervisor sets tasks and standards without consulting the supervisee, when the supervisor does not ask for input from the supervisee, when evaluation is external rather than concurrent, and when perceived supervisee resistance is met with threats or punishment.

The Choice Theory model of counselor supervision relies on the use of lead management in supervision. Lead managers constantly convey the message that "*We care about you*" (Glasser, 1998, p. 290). In supervision, lead management involves: (1) engaging supervisees in discussion of what is quality performance and what is needed to be successful; (2) modeling the expected behavior and skills, while also encouraging the supervisee's input; (3) encouraging supervisees to self-evaluate their own work; and (4) teaching that quality involves continual improvement and that the supervisor will provide the tools and training needed to encourage that improvement.

Lead Management vs. Counseling

Glasser (1994) noted that the difference between lead management and friending, teaching, or counseling is that the manager has an agenda – to meet the needs of the system while also meeting the needs of the workers. Supervisors are accountable to the systems in which they work, to the supervisees in training, to the sites in which supervisees are working, and to the counseling profession itself. When setting the stage for a facilitative supervisory relationship, supervisors are encouraged to introduce themselves by explaining the following: Who I am; What I believe; What I will ask of you; What I won't ask of you; What I will do for you; What I won't do for you. Questions like these can be answered by explaining the essence of the supervisory relationship. Fall & Sutton (1999) proposed that supervisors explain their qualifications, their theory or model of supervision, the roles they expect to play and what those roles entail, and their expectations of the supervisee. Supervisors will ask trainees to answer similar questions, including what the trainee hopes to learn, trainee goals, and what the trainee needs to meet his/her goals.

Glasser also defined conditions for quality in a learning relationship: (1) the environment must be need-satisfying; (2) all work will be useful and meaningful; and (3) self-evaluation will be encouraged. These qualities, as well as the expectations stated in the previous paragraph, can be presented in the supervisor's disclosure statement. For example, Robey's disclosure statement explains:

I will help you [the supervisee] feel a sense of power and achievement by acknowledging your effective work, by challenging you to do better, and by recognizing the steps you have made on the road to competence. I will encourage your creativity by allowing you to make choices and by listening to your rationale for what you are doing when working with your clients. I will help you have fun in the process of supervision, through the joy that comes with learning and from success and even from the learning that occurs from missed opportunities. I will do my best to facilitate your learning, to be honest and supportive, to provide meaningful feedback and encouragement, and to work with you to evaluate your progress.

Bernard & Goodyear (2009) also emphasized the importance of self-evaluation. They reported that helping supervisees learn to accurately evaluate the effectiveness of their behaviors can have an effect that outlasts the supervisory relationship. Supervisees may establish self-evaluation as a habitual practice that will be useful throughout their careers. However, self-evaluation without feedback is not enough. Feedback from the supervisor "makes learning conspicuous to the supervisee and helps them to set a pattern of self-evaluation" (Bernard & Goodyear, 2009, p. 35).

Peterson and Parr's Five Cycle Process

Peterson and Parr (1989) wrote about a five cycle supervision process that incorporated Reality Therapy and concepts from what was known in 1989 as control theory and is now known as Choice Theory. In this process, the first step is pre-observation. In the pre-observation stage the supervisor presents the supervisee with a supervision contract. The contract discusses the goals and expectations for both the supervisor and supervisee. During this time the supervisee is asked what his/her specific needs and wants are for supervision and for training. The supervisor then explains his/her own expectations.

The pre-observation process sets the stage for the evaluation process that would occur later in the cycle. The supervisor determines what assessments will be used. Assessments might include a skill checklist, a counselor evaluation form, audio-recordings, or feedback provided on notes. As part of the pre-observation stage, supervisees are encouraged to share their strengths as counselors as well as areas for improvement. This process helps to build a positive environment as supervisees' tension and anxiety is relieved when they understand that the supervisor would build on strengths.

The second stage in the cycle is observation. The supervisor observes the supervisee based on what was discussed in the pre-observational cycle. After the observation, the third cycle, analysis, begins. During the analysis stage the supervisor ties together what he/she had seen in the observation cycle and creates a plan for presenting the feedback to the supervisee. Since the Reality Therapy process focuses on the importance of self-evaluation, the supervisor might have the supervisee do a self-critique at this stage and use the supervisee's self-evaluation as a starting point for feedback, which occurs in the fourth cycle. During the feedback cycle the supervisor implements the plan for delivering feedback

that was made in cycle three. Peterson and Parr suggested that positive feedback should be presented first, followed by a plan for continued growth and development.

The fifth cycle is critical to the process and incorporates concepts of lead management as the supervisor encourages sharing of perceptions about the supervisory process itself. Both supervisee and supervisor evaluate the process and brainstorm possible direction(s) for improvement in the relationship. Plans are made for implementation of changes and include details regarding the logistics of the changes and follow up.

Reality Therapy in Supervision

According to Appel (1985), when using Reality Therapy in the supervisory relationship, the essential *first step* in supervision is involvement. During involvement a relationship is established between the supervisor and supervisee. The supervisor begins the consultant role by asking the supervisee "What do you want?" or "What do you want to accomplish in your counseling?" If a supervisee is unsure of what he or she wants then the supervisor becomes a teacher, counselor, and/or an evaluator. In the teacher role, the supervisor lets the supervisee know what to expect or gives the supervisee information for improvement. If the supervisor as counselor is the necessary role, the supervisor looks at what personal issues could be affecting the counseling. In the evaluator role, the supervisor looks at the relevance of the supervisee's goals, supervisee's skills, or the application to skills in session, then works with the supervisee to facilitate self-evaluation and to offer feedback.

The *second step* in using Reality Therapy as part of the supervision process entails dealing with present behavior. The supervisor focuses on the doing behaviors of the supervisee, with some attention also paid to thinking and feeling behaviors. At any time the supervisor may refer back to the first step if it will help the supervision process. During the second step it is important to connect the consequences of the behavior to the behavior itself, providing a teachable moment. *Step three* involves self-evaluation and concurrent evaluation through supervisor feedback. Throughout the supervision process the supervisor and supervisee are evaluating the supervisee's work. The supervisor teaches supervisees how to evaluate their work so they can eventually self-evaluate on their own. In this step the supervisor may have to play the role of a counselor by examining issues such as a supervisee's desire for perfection. If the need for long-term counseling presents itself, however, the supervisor must ethically refer the supervisee for counseling.

The *fourth step* includes making plans for both the supervisee and supervisor. The supervisor encourages the supervisee to come up with a plan for counseling sessions that is simple, measurable, and specific. Since the supervisor plays a consultant role, the supervisor and supervisee make supervision plans together. *Step five* is making a commitment to putting the plan into action. Appel (1985) noted that this is where supervision differs from counseling. Supervisees are expected to have higher levels of interest than clients; therefore, it is expected that supervisees will put their plans into action. The supervisor teaches the supervisee how to make responsible commitments. Finally, supervisors follow up on the plans made in supervision. When following up on plans it is critical that the supervisor does not accept excuses, but also does not punish supervisees when plans fail and does not give up on them either.

Strategies and Interventions

Appel (1985) wrote about six strategies to use in Choice Theory Supervision. The first is to "use the role to teach the role; use the step to teach the step" (p. 21). This strategy focuses

on parallel process. If a supervisee is stuck getting a client to be more specific, the supervisor might ask the supervisee to be more specific in supervision sessions. The second strategy is working to improve the supervisee's self-evaluation skills. It is important for a supervisee to internalize the process of evaluation in an operative, realistic way. The third strategy is to use supervision goals for integration of skills, planning, and personal development. By the time the supervision process is over, the supervisee should have realistic, appropriate expectations and strategies about what is expected in counseling. The fourth strategy is to incorporate Reality Therapy as a part of the supervisory planning. The supervisor asks him/herself the Reality Therapy questions: What do I want to accomplish in this session? What am I doing to get what I want? Is it working? What else can I do? When will I do it? The fifth strategy involves understanding the supervisee's growth as a developmental process. As the supervisee moves through supervision he/she should grow in terms of self-knowledge, counseling skills, and conceptual ability. The sixth and final strategy is to use terms to help the supervisee learn how to avoid linear thinking. This includes using terminology such as: *pictures in the head, wants, really wants, and choosing to do*. In order to accomplish these strategies the supervisor may use interventions such as role playing, modeling, brainstorming, confrontation, exemplification, joint case conceptualization, instruction, live observation, live supervision, or tape critique.

Case Study

Beth was a 35 year-old student working toward her master's degree in mental health counseling. She had already completed the first course in her practicum requirement and was now in practicum two. The practicum courses require counselors-in-training to work with clients from the community who request services from the university's counseling lab. Although Beth had worked with a client for 12 sessions in her first practicum and had experienced supervision with another supervisor, she still appeared to be nervous about the process when she came for her first supervision session.

Because the university supervisor had taught Beth in a course prior to practicum 2, they already had experience with one another and had a comfortable relationship established. Beth was a shy and quiet student, who excelled in her written work but was reluctant to participate in class. The supervisor knew that Beth tended to be a perfectionist. Rather than take a chance at making a mistake, Beth would retreat into herself.

In a previous class, Beth had written in her journal that she wanted to be the best counselor possible and that she feared harming clients by doing something wrong. Beth's quality world picture of herself as the perfect counselor was idealized and difficult, if not impossible, for her to attain. In her first practicum, Beth realized that her skills were not even close to her idealized picture of how she wanted to be. Therefore, Beth had chosen the total behavior of avoidance; she was sick to her stomach at the thought of seeing another client, she felt anxious, she thought she would never be able to do well with a client, and she delayed setting up appointments with a new client.

Through the lens of Choice Theory, the supervisor understood that Beth was feeling a lack of power and achievement, that Beth was experiencing no enjoyment of the learning process, and that Beth's creativity was inhibited as a result of her fear and anxiety. The supervisor was responsible for Beth's skill development, but also for ensuring that the clients who had requested services from the counseling lab received the best care possible. Therefore, the supervisor's plan was to help Beth get her own needs met while also meeting the needs of her client and the university system requirements. The supervisor assumed the roles of teacher, counselor, and lead manager in the first session with Beth.

Pre-observation cycle

The supervisory session began with building the relationship and setting ground rules. The supervisor discussed the disclosure statement, expectations, counseling lab requirements, program requirements, and assessments. The supervisor then began to work with Beth on setting mutual goals for supervision and for counseling skill development.

Supervisor: *Beth, I am so pleased to be sharing this part of your learning journey with you. I know that you are a hard worker and that you want to do well. Why don't you begin by telling me what you hope to accomplish during this phase of your training and in our supervision together?*

Beth: *Well, after reviewing my recordings from practicum one, I realized that I need to be more active in counseling sessions. I noticed that my client went on and on, while I was afraid to interrupt her or to do any meaningful interventions. I was afraid that she might be upset if I interrupted her and that she wouldn't come back. But when I watched the videos, I saw that I missed a lot of opportunities to help her. I feel like I don't know what I'm doing and it shows. So I just shut down.*

Supervisor: *It's good that you have insight into your own process, Beth. I think we can work together to help you develop the skills and confidence you need to feel more confident in your work this semester. It sounds like you are aware of your areas for growth. What strengths do you bring to this process that we can expand on in your work with your next client?*

The supervisor was working with Beth to identify her quality world pictures of what she wanted from supervision and what she wanted for her own development. The supervisor's plan was to help Beth add another picture of herself in her quality world, a picture that might be easier to match. That picture might be more focused on what an effective trainee would look like, rather than a perfect counselor. The supervisor began the self-evaluation process by asking Beth to identify strengths she could bring to her work. Beth had a difficult time finding her strengths, so the supervisor used an assessment form that identified desirable counseling skills and asked Beth to self-evaluate using that form. To her surprise and pleasure, Beth realized that she was doing some things well. The assessment form also gave Beth and the supervisor very concrete ideas of the skills Beth wanted to enhance.

The supervisor commented on Beth's change in behavior so that Beth would be aware that she had made a shift.

Supervisor: *As I'm looking at you now, Beth, it seems like your energy has changed a bit. You are sitting upright in your chair and you are smiling. Tell me what you are thinking right now?*

Beth: *I guess I didn't realize that I actually was doing some things well. When I look at the skills I need to work on, they don't seem so abstract or something that I can't do. I am feeling a little better.*

Supervisor: *I think we can capitalize on that thinking a little bit while you are in session. When you are working with your clients and find that you are thinking about what you are doing "wrong" versus what you are doing well, what can you do to shift your thinking so you can work from your strengths?*

Beth: *Hmmm, that's a good question. It's awfully easy to slip back into feeling afraid!*

Together Beth and the supervisor worked to create a plan for how Beth could practice her skills prior to counseling sessions and how Beth could restore her confidence if she felt lost in sessions. Beth said that when she started to doubt herself, she could remind herself that she was in training and was actually doing some things well. She could also do a check-in with her client and get feedback on what the client would like to see happen in sessions and whether the client believed those goals were being met. The supervisor suggested that Beth write down a list of her strengths and to put that list in her pocket while she was counseling. When Beth needed confidence, she could put her hand on her pocket and would be reminded of her strengths.

Cycles two through five: observation, analysis, feedback, and evaluation

As the practicum progressed, the supervisor observed Beth's work by watching video recordings and using live supervision when possible. The supervisor looked for opportunities to use Beth's areas of strength as well as areas for growth. In supervision sessions the supervisor used the Reality Therapy process to facilitate the discussion.

Supervisor: *Beth, I've been observing your work for several weeks now, and we've discussed areas in which you are doing well and areas in which you want to grow. What is it you want from our session today?*

Beth: *Well, I feel like I am doing much better than when I started this practicum, and I feel much more confident than I did then. What I still need help with is to give up on problem-solving. I feel like I have some great ideas, but I know I'm not supposed to give advice.*

Supervisor: *What happens in your session when you have this urge to problem-solve?*

Beth: *When I get into a problem-solving mode, I get too much in my head.*

Supervisor: *I hear that it is important for you to see some behavioral change in your client and you have some good ideas for how that could happen. On the other hand, you are feeling conflicted over how to share your ideas without imposing them. When you think of your goals for your skill development and for what you want to see happen in session, and look at your actual behavior in your sessions, how is your behavior helping you to meet your goals for yourself and your client?*

Beth: *Not very well! I feel like I lose track of what is actually going on with my client. Once I actually found I wasn't listening to her because I was arguing with myself about what to do!*

Beth had self-evaluated that her behavior was not helping her accomplish what she wanted to do, which was to help the client choose to make behavioral changes. Beth and the supervisor brainstormed some ideas about what Beth might do in the next session to facilitate this process. They discussed how Beth could share the information and ideas she had without imposing her agenda on her client. Finally, Beth made a plan for putting these ideas into action in the next session. In follow-up sessions, Beth and the supervisor worked together using this framework for supervision and together they evaluated the effectiveness of the supervision process and made plans for what they wanted to accomplish together.

Future Direction and Research

Bernard and Goodyear (2009) reported that publications on supervision have focused on conceptual and practitioner processes. They noted that there is a dearth of research on supervision, especially when compared to the volumes of research on counseling and psychotherapy. Suggested topics for research include the relationship of supervised counseling to client outcomes and the influence of mediators and moderators on the supervisory process. There are few journal articles related to Choice Theory and Reality Therapy in counselor supervision. However, Wubbolding (2000) found research about the use of Choice Theory and Reality Therapy in school systems. Some of this research could be generalized to support the use of Choice Theory and Reality Therapy when the supervisor is in the teacher, consultant, evaluator, or manager role. Of additional significance is research conducted by Dr. Thomas Parish, professor at Kansas State University. Topics of Parish's studies included investigations into the use of Reality Therapy to foster personal responsibility and an internal locus of control, the use of quality school procedures to teach a research methods course, the use of quality school procedures to teach statistics, and a study that investigated at-risk students and drop-out rates. While information from these studies could be used to support the efficacy of Choice Theory, Reality Therapy, and lead management in supervision, additional research is still needed to specifically address issues related to supervision.

Conclusion

The use of Choice Theory and Reality Therapy as a model of counselor supervision enables supervisors to focus on teaching techniques, ethics, self-evaluation, and case conceptualization, and allows for personal integration of all of the above in order to become a successful counselor (Appel, 1985). The supervisor plays the role of consultant, teacher, counselor, and evaluator. The Choice Theory supervisor knows that supervisees' behaviors are motivated to get their needs met through attainment of the very specific pictures they have in their quality worlds. To put this knowledge into action, the supervisor uses the Reality Therapy process as a lead manager. The supervisor helps supervisees get their needs met while also working to ensure that the needs of clients and systems are also met.

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Brief Bios

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TOWARD A CURRICULUM FOR LEAD MANAGEMENT: AN OUTCOMES-BASED APPROACH TO A CERTIFICATE?

Michael Bell and Sylvia Habel

Abstract

The theory and practice of lead management has advanced since its conceptualization by Glasser in 1994. However, there remains considerable potential for development in terms of material support to both instructors of Choice Theory and students considering its applications to the organisational environment. This article extends a framework for a curriculum of lead management that may begin to address this issue and open the way for a Certificate of Lead Management. In doing so, it expands the conceptualization of both Choice Theory and Lead Management as they apply to leadership formation, relate to leadership and management, and might be practiced in more generative forms. In particular, we focus on the potential for such an approach to move from a managerialist position toward leadership that is intentionally generative. We argue that Choice Theory equips us with an understanding of humans as generative beings who have an extraordinary capacity to create alternate sustainable futures. Further we contest that this is the role of leadership in our communities and discussion of it must embrace this capacity and further its potential.

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According to Glasser (1994), Rensis Likert's (1976) research provided us with evidence that lead management approaches are more effective than boss management and laissez-faire approaches. System Four teams have between 10% and 40% greater productivity than teams operating under Systems One through Three (variations on boss and laissez-faire management) (Likert & Likert, 1961). Glasser describes Likert's System Four as "essentially lead management" (1994, p. 122). A closer reading of Likert's substantial work defines the bottom line of System Four teams as "where…each member will, in the light of his/her background values and expectations, view the experience of all relationships and interactions as supportive and one which builds and maintains a sense of **personal worth and importance**" ([emphasis added] 1961, p. 104). This defining feature aligns productivity with a sense of personal worth and certainly is in accordance with the foundational propositions of lead management.

Notably, however, this places it at odds with other forms of leadership. Control and command styles (Wheatley, 2005) place increased productivity as the primary objective of management operations leaving personal worth a distant second (if it appears at all). This fundamental difference between the approaches highlights a core feature of developing the capacity to lead manage where in fact, the team member's "perception that all interactions are supportive and build and maintain a sense of personal worth" (Likert, 1961, p. 104) marks the road to increased productivity. The lead manager must have the ability to sustain that perception.

Managing others' perceptions so they conclude that "the sum of all interactions builds a sense of personal worth" would appear an impossibility given the complexity of organisations, the variety of backgrounds of team members, and the demands on leaders and managers. Indeed, operating from an external control perspective, attempts to influence another's perception invariably ends up as either rewarding or coercion (albeit sophisticated and subtle in form). Each of these is at odds with a sustainable sense of personal worth (Deci & Ryan, 2000; see also Ryan & Deci, 2006). Deci and Ryan (2000) cite

research that supports the view that personal autonomy is a critical element of personal worth. In their modeling, autonomy of perception is at the core of genuine autonomous responses.

Thus, lead managers take as their agenda the building and sustaining of a perception of personal worth in others without the use of coercion or reward. The only means through which this can be achieved is through a thoroughly integrated grasp of internal control and the techniques that enhance this integration. In most cases, individuals attempting to implement lead management will have been indoctrinated into the mental models and behavioural forms of external control. Thus, for most students of lead management, a complete paradigm change is needed.

This paradigm change will mean a shift in pictures, perceptions and behaviours. A reconstruction of the individual's system that is grounded in the real work of leadership as it is enacted. Leadership, by its very nature, must be proactive and responsive rather than reactive and so the reconstruction process becomes an act of self-generation. Indeed, the potential of lead management is such that it generates the conditions under which human beings thrive. Where there are thriving human beings there is innovation and increased productivity. Thus, lead management becomes generative at the interpersonal level.

The authors of this paper reported the results of using Choice Theory and its applications to leadership formation (Bell & Habel, 2009, 2010). In these works we established that an applied understanding of the chart, together with rigorous and consistent use of self-evaluation questions whilst practicing leadership in a given context could create measureable character and performance shift within 6 months. This measureable shift is a demonstration of formation that is integral to lead management. In fact, we would argue that to practice lead management one must acknowledge the need to remain constantly *in formation* as a response to shifting pictures, perceptions and behaviours within one's self and one's team.

A curriculum for lead management that will equip leaders of today with the skill sets they need must integrate the capacity to be self-generating as well as teaching lead managers how to create the conditions for others to become generative.

We offer a framework that we have developed to achieve those ends.

Rationale for competency based approach

Leading is a verb. If all we can do is behave (Glasser, 1998, p. 63) then being is a constant state of doing. Thus any curriculum approach that describes lead management must be action-oriented. Competency or outcome-based approaches use high order (complex) verbs to describe the actions that must be demonstrated. The authors developed the framework that follows, grounded in outcomes-based curriculum, to address the need for clear, transparent description of the skill sets needed for students, coaches and instructors.

Outcomes-based curriculum takes a design-back approach (Spady, 1994). It starts by asking what the stakeholders want the graduates to know and be able to do. These are summarized in "Exit Outcomes" (See Figure 1, far right), and then made explicit in smaller chunks in the culminating outcomes. These culminating outcomes are then broken down into discrete abilities that come together to allow an individual to demonstrate a culminating outcome.

Let's take tying shoelaces as a culminating outcome. It is observable and so can be demonstrated and assessed. It is also made up of a series of discrete teachable skills. Tightening the lace, forming a loop, forming a knot and tightening the bow might be the discrete outcomes in this case. The culminating outcome can be demonstrated in multiple contexts; a classroom, at home getting ready to go out and in the middle of a game of competitive sports. This gives us a clear demonstration of the student's ability and can be assessed as achieved.

Figure 1
Outcomes Based Curriculum Design
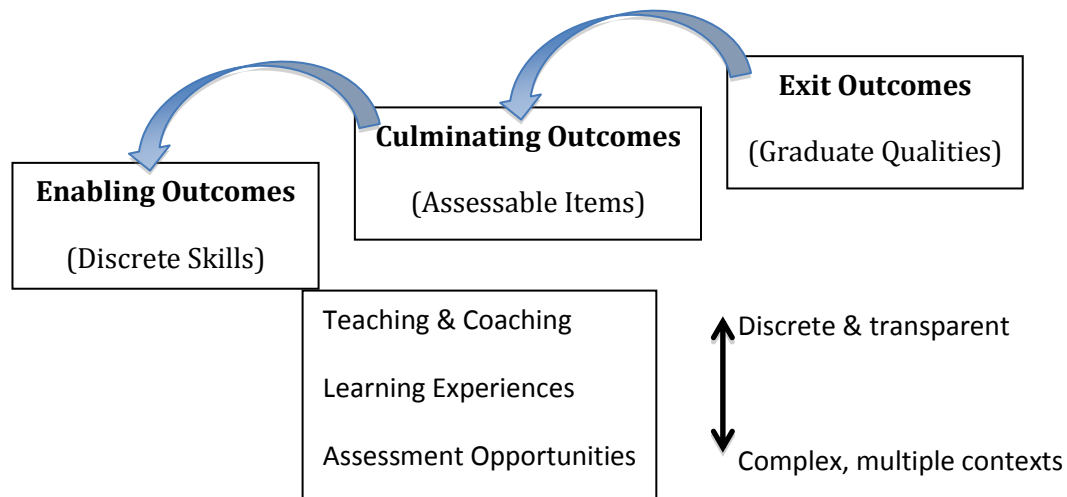
The sum total of these enabling and culminating outcomes must then be taken by skilled educators and turned into teaching and learning experiences. Assessment opportunities need to be designed for complex environments across multiple contexts (as with the shoe laces). This paper will not address this dimension of the process except to say some modifications to the current structures available to instructors of Basic and Advanced Intensive Trainings, combined with practica, would provide ample scope for such work.

The outcomes described in this article are examples only and are offered as a discussion point for developing a Certificate in Lead Management. It is the authors' view that the first two domains (see below) provide ample focus and scope for instructors of lead managers *in formation* within that Certificate.

While we recognise the fact that outcome-based approaches rely on observable demonstrations in multiple, complex contexts for assessors, we also understand that the non-observable (meta-cognitive, cognitive and affective dimensions) inform the practice of real leaders in real situations. As skilled, quality self-evaluation is integral to the practice of lead management, this framework would provide support across observable and non-observable dimensions for lead managers in formation.

The creation of curriculum often requires us to make divisions that do not exist in reality. However, for the purposes of providing both instructors and students with a transparent description of lead management, the authors have offered a number of divisions. These

come through models and they serve to highlight relationships between elements of lead management as it is enacted. They also create tensions that--in reality--do not exist to the same extent.

Domains of leadership

While any enactment of leadership will find the individual concerned deeply engaged across a diversity of scenarios, with multiple individuals and at various levels, it is possible to consider these as falling within four major domains. Figure 2 illustrates these domains and their relationships. The figure (adapted from Page & Wong, 2006) suggests that leaders operate across the domains of character, people, task and processes (called Systems in Figure 2). Each of these domains will be explicated briefly in the paragraphs below and then in considerable detail throughout the rest of the paper.

Figure 2
Domains of leadership underpinning curriculum organisation (Adapted from Page & Wong, 2006)
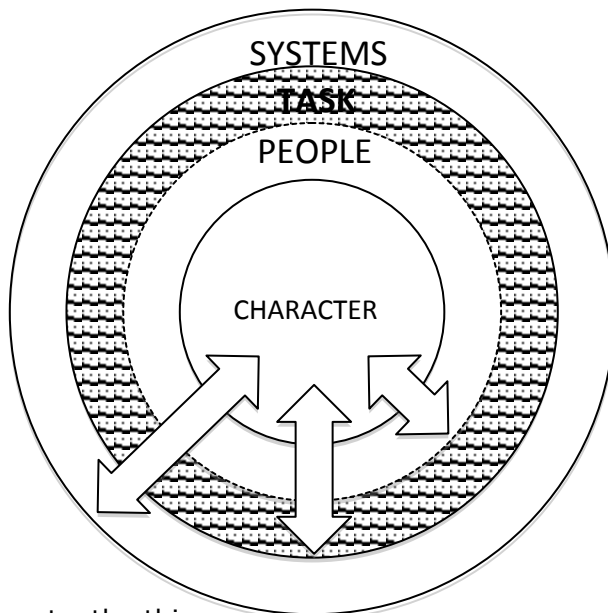
Character: Activity within the quality world, perceptual system, and behaviour system as they are operated by the individual.

People: Interpersonal activity that is concerned with developing and sustaining the people within one's sphere of influence.

Task: Activity related to achieving productivity and success.

Importantly, this conceptualization places the character of the leader in the centre and understands that all leadership begins with and is sustained by one's character. From a Choice Theory perspective, this would include self-management and self-evaluation of one's system in action.

The model moves from the intra-personal to the inter-personal in the next domain. The whole raft of relationship building and sustaining practices are included here: care, respect, trust and inclusivity, as well as the 'tough' negotiating differences conversations that are part of leading in complex contested environments. The connecting habits would certainly fall into this domain. Additionally, a conceptualization of humans as operating at optimal capacity when they are self-managing and self-evaluating needs to be operationalized through relationships here. We would advocate a conscious shaping of the relationships between team members, as well as between the leader and the team.

Page and Wong (2006) offer Task as the next domain. Broadly speaking, these are the role requirements of the leader as determined by their context. As they are context-specific some of these will be absent from a general curriculum. The authors have included much of the general material from this domain into the People domain. This integrates task and relationship as a single domain with the same agenda as is described earlier in this article: increased productivity through an increased sense of personal worth.

The final domain describes the Systems within and across which the leader must operate, as well as those he/she shapes and forms. These would include the kinds of systems described by Deming (See Walton, 1986), but is also cognizant of broader systems thinking about which leaders must be aware (León, 2008).

In Figure 2, the three arrows highlight the first of the tensions created by drawing artificial boundaries. They acknowledge that while the leader's character (as defined in Figure 2) impacts each of these domains, that character is permeable. Indeed, a generative lead manager needs to operate his/her brain-body system as open to new information and responsive to the changing features of each of the other domains.

Within the domains – Character

To further explicate the transparency of activity within the domain of character, the authors suggest a means for locating the skills of the lead manager according to the brain-body system (as laid out in the chart) and three states across which the brain-body system is able to effectively operate. The three points of change have been translated into leadership terminology in Table 1.

Table 1
Three points of change and their leadership terminology equivalents.

Choice Theory Term	Leadership terminology
Quality World	Motives, Goals & Vision
Perceptual System	Perceiving, understanding & building knowledge
Behavioural system	Skills, capabilities & capacities

We describe the leader as operating within three distinct states. These states are self-managing, self-evaluating and self-generating and are defined below.

Self-Managing: Needs-meeting Total Behaviour that does not interfere with others' needs-meeting without significant change at any of the three points.

Self-Evaluating: Comparing across or within the three points of change. Identification of where change is needed (followed by planning).

Self-Generating: Intentionally undertaking self-development within or across all three points of change (adding or creating information/learning).

These states are not mutually exclusive and it is probable that the demands of a complex leader position will require a leader to operate within all three at any one time. In this sense the states are not described as linear or finite. The capacity to self- manage can only occur through self-evaluating and self-generating. Then in turn, self-generating allows us to

increase our capacity to self-manage either across a range of contexts, in more complex contexts or completely new contexts. There is a sense in which the three states provide a potential cycle of continuous development (or *becoming*) for the individual.

The impetus for the moving through the cycle may be internally generated or as a response to external information. The impulse to self-evaluate or self-generate is always a response to the internal drivers of behaviour. However, it is possible to produce a range of less effective behaviours in response to a perceived threat to one's needs. These behaviours include angering, depressing, stressing and spiking. It is the intention of this framework to help leaders recognise these choices and self-direct away from ineffective choices toward more effective choices. The lead manager's capacity to recognize the internal signals (e.g. uncomfortable physiology/emotion) that it is time to shift state and begin self-evaluating or self-generating are highlighted in this model.

In Table 2, the authors have offered some potential culminating outcomes that a generative lead manager would need to demonstrate. We arrived at these through a workshop process that identified what was possible within each point of change, distributed these possibilities across the three states and then translated these into the language of a leader in context. These statements have been further tested against other leadership literature, though for the purposes of this discussion this will not be described here. The outcomes offered are intended to be examples only and not exhaustive.

Table 2
Some potential culminating outcomes – Character Domain

3 POINTS OF CHANGE	3 GENERATIVE STATES		
	Self-Managing	**Self-Evaluating**	**Self-Generating**
Vision, Goals & Motives	Enact a clear, coherent & compelling personal vision for leading.	Evaluate personal goals in terms of credibility.	Generate a responsible, flexible vision that enhances the capacity of others.
Perceiving, understanding & building knowledge	Articulate and manage perceptual bias.	Evaluate perceptions in terms of their role in supporting goal achievement.	Expand knowledge in areas that will increase goal achievement.
Skills, capacities & capabilities	Act and think in ways that optimize own performance.	Evaluate the effectiveness of specific behaviours to increase goal achievement.	Expand personal capabilities to increase effectiveness in new situations.

Each cell of the table carries a culminating outcome. These would be used as points of demonstration. In that sense, a full set of culminating outcomes could provide a student of lead management with a transparent set of indicators for self-assessment and self-improvement. If a set of assessment indicators were developed, instructors and supervisors could co-verify demonstrations made for Certification purposes.

Each of these culminating outcomes are supported by a series of enabling outcomes. For example the culminating outcome described in the first cell (third column third row) has a series of discrete teachable enabling outcomes (see Table 3).

Table 3
Enabling outcomes that lead to culminating outcomes.

Enabling Outcomes						Culminating Outcomes
Articulate personal motives (pictures) and vision.	Articulate how these motives are driven by your needs.	Adjust the motives in response to context.	Choose or prioritise motives or goals for optimal satisfaction	Describe the influences of the leader's motives on the team.	Adjust your vision according to the needs of the team.	Enact a clear, coherent & compelling personal vision for leading.

Further, the outcomes in Table 3 operate in whole columns. That is, at any one time, the individual leader will be engaged in a total behaviour that includes wanting, perceiving and doing (thinking and acting). This looped system involves the leader in either acting to close a gap between perceiving and wanting or acting to maintain a match between perceiving and wanting (Morris & Morris, 2003). Thus, column one (Table 3) describes what the lead manager could be doing at all three points of change whilst self-managing.

The authors assert that a generative leader needs to be aware and able to evaluate and to change at all three points of the brain-body system. While there is a latent possibility within each of us to do this – the generative lead manager is able to do so largely unaided or with minimal prompting from a coach. This enables the generative lead manager to operate in a coherent, flexible and expansive way in most leadership interactions.

Within the domains – People

The authors underpinned this domain with two primary concerns. As stated earlier, we have conceptualized human beings *as operating at optimal capacity when they are self-managing and self-evaluating.* Further, like the domain of character where formation (and paradigm shift) underpin success, the outcomes in this domain are premised on a similar shift within teams. Socialization, as well as industrial relations may have enforced an external control view of the world among most team members. This means their pictures of ideal leaders and ideal leader-follower relations will reflect such a view. Expectations of and responses to leaders may include; being told what to do, being motivated externally (reward or coercion), and avoiding responsibility for outcomes. These are not optimal responses, but may have been learned and so need to be 'unlearned' if the team is to succeed at a System Four Level.

Our second concern is that System Four team members "experience of **all** relationships and interactions" ([emphasis added] Likert & Likert, 1961, p. 104) as adding to personal worth. Thus, the way members interact with one another is part of the equation for lead managers.

A three by three table (Table 4) presents a means to capture the culminating outcomes of this domain. The authors used the same 3 points of change and intersected them with core dimensions of teams that succeed (Laub, 2005). The first column concerns itself with leader-follower relations and establishing a foundation of Caring and Valuing. This would include the connecting habits of respect, support, encouragement and trust. The second column is focused on growth and meeting goals in ways that are grounded in caring and valuing and increase the sense of personal worth whilst achieving the desired results. The final column is focused on community and builds in notions of shared responsibility, innovation and team learning. Each column describes what the lead manager needs to be doing.

Table 4
Some potential culminating outcomes – People Domain

3 POINTS OF CHANGE	DIMENSIONS OF EFFECTIVE TEAMS		
	Caring & Valuing	**Empowering & Developing**	**Building Community**
Vision, goals & motives	Engage others actively in the ongoing creation & enactment of the organisational vision and values.	Coach others to evaluate specific personal goals and motives in terms of the organisational vision.	Coach others for a shared understanding of the alignment of goals and the indicators of success.
Perceiving, understanding & building knowledge	Co-construct shared understandings of effective practices.	Co-develop responsive feedback systems for effectiveness.	Generate innovation through shared problem identification, team learning and risk taking.
Skills, capacities & capabilities	Maintain effective behavioural choices for collaboration, success and progress.	Support the development of key capabilities of others that are needed to meet strategic plans and vision.	Prioritise the gaining of key capabilities across the team.

Within the domains - Systems

To some degree, operation across the Systems domain may depend on positional power

	ORGANISATION	
LEADER'S ACTIONS	**External**	**Internal**
Respond	Monitor, interpret and navigate external pressures and opportunities.	Harness, align and develop internal resources and strengths with strategic outcomes.

(e.g., a formal role in management). However, all team members operate within and across systems. Not all have the power to create or change systems embodied in their roles. It would be consistent with lead management principles to suggest that there is always an avenue for influence on the systems that shape our collective activity. To this end at least, the Systems Domain is outlined in Table 5.

This table offers 5 culminating outcomes. It suggests that four of these are related to either an internal or external position for the organisation or team (columns) and require a responsive or driving role (rows) from the lead manager.

Table 5
Some possible culminating outcomes – Systems Domain

	Identify, gather and analyse data for continuous improvement	
Drive	Establish, evaluate and progress systems, networks and processes for increased stakeholder satisfaction.	Design, establish and improve structures for learning and service/product responsive to continuous improvement.

In the centre of these is the need to grapple with the relevant data that informs our decision-making.

A brief review of this table would suggest there is an entire field of learning that would contribute to an effective demonstration of any one of those outcomes even within a limited field of practice. The authors would argue that systems thinking needs to be introduced to lead managers, but that it is beyond the scope of a Certificate in Lead management. These outcomes are more likely to be achievable after post-graduate study.

Conclusion

The framework advocated in this paper offers a foundation for an understanding of the lead manager as *in formation* through a self-determining, generative process. The framework captures the agency available within the three points of change and uses this to leverage a series of transparent capabilities that if enacted, will lead to a paradigm shift and a continuing alignment of wanting, perceiving and acting. It proposes that *what is good for the goose is good for the gander* in two ways. One, that lead managers must themselves be prepared to go through the internal changes they ask of their teams and secondly, that teams must be enabled to go through these changes with the same respect for their dignity and autonomy as their leaders.

The curriculum is founded on the principle that all productivity is the effect of a basic perception of team members that they are valuable and have personal worth. The outcomes describe what the leader must do in order to achieve and sustain that perception among the team members.

The authors offer this paper as the starting point for further discussions. We acknowledge that the language and even the conceptualization of leadership may not match that of others who have worked closely with lead management for many years. If this were to be accepted (albeit with modifications) as the foundation for the development of a outcomes-based framework for demonstrating lead management there is still much more work to be done.

This work would include, but not be limited to:

- Development of a full set of culminating outcomes
- Rigorous trialing of the culminating outcomes to see if they 'stack up' in teaching and enacting lead management
- Crafting enabling outcomes for each culminating outcome
- Developing self-assessment and instructor-assessment tools
- Developing instructor materials
- Designing learning opportunities for student lead managers

- Designing rich, complex 'real world' assessment tasks for student lead managers

If the qualification were to gain credit with various industry sector bodies across the world, the requirements for gaining this credit would need to be considered in its development.

The great strength of an outcomes-based approach is that individual instructors can teach specific processes, such as Rapid Control Resolution™ (Walker & Sorkin, 2007), that are well suited to their students' context and have those demonstrate an outcome. Meanwhile, another instructor may use another technique and still have the students demonstrating the outcome against the same assessment criteria.

The development of proformas for (self) assessment would greatly aid the work of instructors and supervisors acting as coaches. Further, it would help establish the position of lead management techniques in the world of leadership and management. Individuals and whole organisations could take these on as performance management self-review processes for aspiring and long-term leaders.

Lead management offers us more than merely alternate or sophisticated ways to gain compliance from employees. Such an agenda reduces the nature of leading to being driven by managerialist (Locke, 2009) and capitalist agendas that diminish 'real people' to the level of instruments of the economy. Lead management offers us a viable means for achieving a life beyond the level of 'a cog' in the corporate machine. It offers us and those we might lead, a tangible means of becoming the agents of our own destiny, collaborators in a shared and compelling future and the designers of more just systems. This is the role of leaders with a vision that stretches beyond the merely organisational to the communal and ultimately the global level. If we are to support the generation of leaders with this vision and the ability to realize it, there is work to be done. The road is clear, the path may be difficult, but the satisfaction will be unsurpassed.

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Brief Bios

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GLASSER'S APPROACH TO RELATIONSHIPS: VALIDATION OF A CHOICE THEORY BASIC NEEDS SCALE

Beverly LaFond, CTRTC

Context: Glasser has hypothesized that consideration of five basic needs is an important element for individuals who desire to negotiate lasting relationships. He proposes two major reasons why relationships fail: (a) an inherent incompatibility of the basic needs, and (b) the belief that we can change each other.

Objective: To construct and validate an instrument that operationalizes Glasser's five basic needs of Survival, Love & Belonging, Power, Freedom, and Fun, called the Choice Theory Basic Needs Scale (CTBNS).

Design: The researcher created a scale to measure the strengths of the needs by taking quotes from Glasser (1981-1998). Fifteen faculty members associated with the William Glasser Institute provided consensual evidence of face validity. The Snyder Marital Satisfaction Inventory-Revised (MSI-R) was given to establish concurrent validity. To assess the veridicality of the data the Marlowe-Crowne Social Desirability Scale was also used. Confirmatory Factor Analysis was conducted using EQS 4.02 structural linear equation modeling developed by Bentler and Wu (1993).

Participants: There were 265 participants, ranging in age from 19 to 87, with a Mean of 42.5 years, Median of 42 years and Mode of 39 years. There were 135 females and 75 males. Ethnicity consisted of Asian (1), Black (7), Hispanic (64), Native American (3), White (132), and Other (4).

Settings: Schools (2), Colleges (1), Universities (6), Churches (3), Businesses (2), and Retirement Centers (1).

Main Outcomes: (a) The Choice Theory Basic Needs Scale model converged after nine iterations to produced a statistically significant chi-square goodness-of-fit estimate, (b) Item–to-scale items were only modest to weak, and (c) Retest reliability showed modest stability of the factors.

Results: The factor correlation matrix showed oblique relationships, but they were not strong enough for scale purposes.

Conclusions: (a) The low concurrent validity between the CTBNS and Snyder MSI-R indicates that the instruments do, indeed, measure two different constructs, (b) Each of Glasser's five basic needs is, in fact, multi-factorial, and (c) At least at this point in time, it seems that creating a discussion with couples about how they understand their own basic needs may remain the only theoretically consistent and valid method for finding solutions that actually might reflect how best to implement Choice Theory.

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AN EXAMINATION OF THE EFFECTIVENESS OF CHOICE THEORY ON TEACHERS' TEACHING EFFECTIVENESS AND STUDENTS' SUBSEQUENT ACADEMIC ACHIEVEMENT

Kianipour. Omar[1]
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Abstract

Improvement of students' academic performance is one of the main concerns of any educational system. Psychological and counseling theories may be applied in an attempt to reach that end. The research reported in the present paper investigates the effectiveness of using Glasser's (1998) Choice Theory to enhance teachers' efforts to improve students' academic performance. The design used in this study was a One-Group Pretest-Posttest Quasi-Experimental Design. The population of interest included all teachers of the Sarv Abad Education Office (a city in Iran, Kurdistan Province) and the teachers in the Ghaleji Secondary School. Eight sessions of Choice Theory training were provided for teachers. Within-Subject ANOVA was applied to analyze the data. Results showed significant differences in students' scores in pre-and post-academic tests (P<.01). The results of this study provide support for the hypothesis that teacher training in Glasser's Choice Theory will help to improve students' subsequent academic performance.

Keywords: academic qualification, choice theory, Glasser, Sarv Abad

Introduction

Educating today's children is in constant flux. Keeping students motivated and eager to learn is an important task. Educators must use effective strategies that keep students engaged in their learning and provide an education that will meet the needs of today's society. According to Hatch and Bowers (2002), the primary mission of school counselors is to support and encourage academic achievement. Many school counselors often try to work in isolation to meet the needs of students, even though the ratio of students to counselors is usually very high. This approach might indicate success, but only for a small number of students, usually the very high or very low achieving students. The American School Counselor Association (ASCA, 2005) has provided a clear and concise definition of what constitutes a school counseling program in the modern age: A school counseling program is comprehensive in scope, preventative in design, and developmental in nature. *The ASCA National Model: A Framework for School Counseling Programs* is written to reflect a comprehensive approach to program foundation, delivery management, and accountability. School counseling programs are designed to ensure that every student receives the program benefits.

School counseling programs exist to provide services and implement programming that has a positive impact on student achievement. In this study, the influence of a school counselor-

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directed training program for educators that teaches the theory and methods of William Glasser's Choice Theory and Reality Therapy was examined. The beliefs behind the teacher training program are that school climate will improve, and as a result achievement scores will increase. William Glasser's model focuses on improving the responsibility level of students by helping them realize that they are in control of themselves. This often increases one's intrinsic motivation. One of the theories about why achievement will increase as a result of using choice theory and reality theory methods is because students will become more intrinsically motivated to learn.

The ASCA Model (2005) suggests that school counselors need to be more active in the systemic processes of the school and collaborate with teachers, parents, administration, and outside services to provide comprehensive services to a larger number of students. A school counseling-based intervention program of training teachers and staff is one way that a school counselor can use systemic methods to collaborate with school personnel to reach more students (ASCA, 2005).

Training teachers how to utilize the theory and strategies of William Glasser's (1998) CT/RT is an example of a collaborative and systemic intervention program that is aligned with ASCA (2005) and the Education Trusts' definition of the role of the school counselor (The Education Trust, 2009). The premise of the program operates on the belief that if the classroom climate is a positive learning environment, then motivation will increase, behavioral problems will decrease, and school attendance will improve, which ultimately leads to enhanced academic success (Glasser, 2010).

The main precept of choice theory is based on the idea that people choose behaviors to attempt to meet their basic needs. Glasser describes the five basic needs that all humans possess as love and belonging, fun, freedom, power, and survival. The needs do not exist on a hierarchy; rather, everyone has different levels of need strength (Glasser, 1998). Glasser (1998) believes that relationships are paramount to living a healthy life and that all ills can be traced back to a relationship deficit or problem.

Theoretically, if a person's basic needs are not met, then he or she will act in a way to get his or her needs met. For instance, a student who does not feel powerful may be disruptive in class to feel more in control. If a teacher recognizes that the student does not feel powerful in his or her life, then a teacher might respond with giving the student an opportunity to gain power in a healthier way. As a result, the need for power is met in a positive way and the desire to disrupt to meet his or her power need will dissipate. Many times teachers might have to share their power to allow students to have some influence on the classroom climate and rules. This can be very difficult for teachers to do; however, the results are usually worthwhile. A high school teacher in Detroit, Michigan, who uses reality therapy in her classroom reports, "I had to give up power, to gain power" (Agency for Instructional Technology DVD, 1994). She has seen an increase in student participation, motivation, and achievement, and a decrease in discipline infractions (Agency for Instructional Technology DVD, 1994).

Glasser believes that CT/RT is a perfect match for improving achievement in schools. He wrote the books *Schools without Failure* in 1969, *Control Theory in the Classroom* in 1986, *The Quality School* in 1990, and *Every Student Can Succeed* in 2000. Many schools across the country have incorporated Glasser's ideas within their teaching regimens. There are even some schools that are labeled as "quality schools," located across the United States today (Wubbolding, Roby, & Brickell, 2011).

Glasser purported that part of the reason CT/RT is effective in the classroom is because students begin to operate from an internal locus of control, rather than an external locus of control. In other words, he act of learning becomes a part of each student's quality world, and intrinsic motivation becomes more meaningful than extrinsic rewards (Glasser, 1992/1998). Deci, Ryan, and Koestner (1999) completed a meta-analysis of research studies measuring the impact of intrinsic rewards compared to extrinsic rewards to change behavior. The results showed that intrinsic rewards were significantly better than extrinsic rewards for creating positive change. Extrinsic rewards might work at first, but after the extrinsic reward was removed, the unwanted behaviors often resumed (Deci,Ryan, & Koestner, 1999).

Parish (1992) discussed the importance of teachers being able to model efficient behaviors that help students learn about CT/RT. If teachers are continually operating from an external focus, then it will be next-to-impossible for students to be able to operate from an internal locus of control and get their basic needs met (Parish, 1992). Therefore, teachers need to realize how they feel when they are valued, given tasks they perceive as meaningful, and not coerced to behave in certain ways as an educator, spouse, parent, etc.(Glasser,1990; Parish, 1992). Chances are that teachers will feel more motivated to perform well in their role, whatever it might be, just as students will be more motivated to achieve when they're treated similarly.

As mentioned above, the role of the school counselor is to remove barriers to learning that ultimately affect school achievement. A school counseling-based intervention program of training teachers and staff is one way that a school counselor can use systemic methods to collaborate with school personnel to reach more students; so the intent of this study is to determine if sharing Glasser's Choice Theory with teachers serves to improve students' academic performance.

Method

The present study was a One Group, Pre-Post Test, Quasi-Experimental Design. The population of interest included all teachers of the Sarv Abad Education Office (a city in Iran, Kurdistan Province) and teahers in Ghaleji Secondary School who were selected as a sample of convenience. After giving monthly report cards to students in September, teachers in one classroom (which included 24 students) were asked to participate in a training course that covered the basics of William Glasser's recommended classroom strategies in order to improve the academic performance of students. A school counselor taught the Choice Theory course. Eight sessions of Choice Theory training were provided over a one-month time-frame. Researchers compared scores of students of these teachers in September and then again in December. Within-Subject ANOVA was applied to analyze the data. A description of the eight training sessions is provided in Table1.

Table1. Summary of 8 sessions

Session no	Session description
1	Introduction of the project, commitment to perform the project
2	Changing attitudes of teachers from previously applied methods to the new pattern
3	Discussion and debate about job satisfaction and its relationship with the concept of "joyance," which is often neglected in most schools
4	Description of theoretical basis of Choice Theory, quality world, involvement, failure identity, self-worth, love and being loved
5	7 harmful behaviors and 7 positive alternative behaviors in Glasser's Choice Theory to create a better life
6	7 harmful behaviors and 7 positive alternative behaviors in Glasser's Choice Theory for application in the classroom and beyond
7	More formative evaluation and attention to aptitude-based tasks
8	Review of previous sessions, clearing up any ambiguities and misunderstandings, making one's self ready to teach and perform in the school using Choice Theory

Results

As mentioned earlier, in the present study students' scores at two different periods (before training and after training) were compared. Table 2 displays pre-training data; and Table 3 displays post-training data.

Table 2. Pre-training Scores.

Lessons	N	Mean	Std. Error	Std. Deviation	Variance
Persian literature	24	13.625	0.654	3.207	10.288
Persian language	24	13.917	0.444	2.175	4.732
Mathematics	24	12.625	0.53	2.597	6.745
Chemistry	24	13.5	0.4	1.972	3.891
Biology	24	13.688	0.446	2.186	4.779
Theology	24	14.979	0.493	2.415	5.837
English language	24	13.396	0.543	2.662	7.087
Arabic language	24	14.062	0.428	2.097	4.398

Table 3. Post-training Scores

Lessons	N	Mean	Std.Error	Std. Deviation	Variance
Persian literature	24	14.917	0.505	2.474	6.123
Persian language	24	15.875	0.408	2.001	4.005
Mathematics	24	14.25	0.5	2.453	6.022
Chemistry	24	15.75	0.441	2.161	4.674
Biology	24	15.042	0.487	2.386	5.694
Theology	24	18.062	0.334	1.637	2.681
English language	24	14.292	0.454	2.225	4.955
Arabic language	24	14.458	0.434	2.126	4.52

As seen in Tables 2 and 3, the mean of scores in all academic areas were higher post-training compared to pre-training. Within-Subject ANOVA results are shown in Table 4.

Measure: MEASURE_1   Table 4. Tests of Within-Subjects Effects

Source		Type III Sum of Squares	Df	Mean Square	F	Sig.	Partial Eta Squared
factor1	Sphericity Assumed	32.736	1	32.736	101.774	.000	.816
	Greenhouse-Geisser	32.736	1.000	32.736	101.774	.000	.816
	Huynh-Feldt	32.736	1.000	32.736	101.774	.000	.816
	Lower-bound	32.736	1.000	32.736	101.774	.000	.816
Error(factor 1)	Sphericity Assumed	7.398	23	.322			
	Greenhouse-Geisser	7.398	23.000	.322			
	Huynh-Feldt	7.398	23.000	.322			
	Lower-bound	7.398	23.000	.322			

As shown in Table 4, there was a significant difference between pre and post training scores ($F_{(1,23)}$=101.774, P<0.001 η^2=0.816). These data support the hypothesis that providing teachers training in Glasser's Choice Theory(C/T) did, indeed, result in higher academic achievement scores.

Discussion

Findings from the current study support the hypothesis that sharing Choice Theory/Reality Therapy with teachers may improve academic achievement of their respective students, and is consistent with the observations by Egan and Judson (2008), and Mitchell, Bradshaw, and Leaf(2010) that the school/classroom climate plays a role in improving student achievement. In Mitchell, Bradshaw, and Leaf (2010), school climate was defined as "the shared beliefs, values, and attitudes that shape interactions between the students, teachers, and administrators (p. 3)". The belief that students need to experience a positive environment in the classroom, consisting of mattering (Dixon & Tucker, 2008), love and belonging (Glasser, 1988), and safety (Heydenberk, Heydenberk & Bochnowicz, 2006) is essential for students to experience positive educational outcomes. Neibuhr and Neibuhr (1999) found that high school freshman who reported experiencing positive student-teacher relationships had higher grade point averages than their peers.

Motivation is often connected to academic success. In educational research literature, there are two commonly defined philosophies of motivation: 1) extrinsic motivation and 2) intrinsic motivation. Extrinsic motivation consists of giving a student an external incentive or reward for completing a task. Rewards might be tangible, such as candy or a special privilege, or might consist of praise or receiving a high grade. The avoidance of an unpleasant activity or punishment is another method of employing extrinsic motivation methods (Dev & Poonam, 1997). Extrinsic motivation can be beneficial at first, but not long-lasting (Glasser, 1988). Intrinsic motivation, in contrast, is defined as "the performance of activities for their own sake in which pleasure is inherent in the activity itself (Berlyne, 1965; Deci, 1975 as cited in Gottfried, 1985, p. 631)." Academic intrinsic motivation is characterized by a mastery orientation, curiosity, persistence, a high degree of task involvement, and the learning of challenging, difficult, and novel tasks (Gottfried, 1990). Gottfried's (1990) findings showed that students in grades 4-9 with higher levels of academic intrinsic motivation showed significantly lower academic anxiety, higher school achievement, and reported more positive perceptions of their academic abilities than their peers who had lower levels of academic intrinsic motivation. In younger elementary students, the findings remained consistent and showed that academic intrinsic motivation was significantly related to achievement (Gottfried, 1990). An approach that some elementary schools use to increase student achievement is through increasing intrinsic student motivation (Covington, 2000). It has been recognized that intrinsic motivation level and achievement level are positively correlated (Gottfried, 1990). The integration of reality therapy methods in the classroom is one technique used to increase intrinsic motivation of students (Glasser, 1992/1998). If a student has his or her basic needs met through experiencing a positive school climate, then motivation to learn may increase and students will work harder, thus improving achievement (Neibuhr & Neibuhr, 1999).

Another explanation for the findings in this study is related to teacher-student relationships. What is taught and how it is taught exert tremendous influences on student performance and learning. "Children," Ashworth (1990) asserts, "are keenly aware of where they stand in the school community and of how they are perceived by other students and teachers" (p. 3). "By nature," Ashworth (1990) adds, "human beings are social creatures…biologically intended to live, work, play and succeed together…deeply influenced by others and how they treat us" (p. 6). For Perry (2001), the "capacity to form and maintain relationships is the most important trait of humankind—without it, none of us would survive, learn, work, or procreate" (p. 32). In positive teacher-student relationships, Payne (2005) states "emotional deposits are made to the student, emotional withdrawals are avoided, and

students are respected" (p.111). Moos (1979) and Goodenow (1993) suggested that teachers who show personal involvement with students show those students that they are respected. These feelings of respect motivate and engage students toward increased positive productivity and academic achievement (Wentzel, 1997). There is abundant research stressing the importance of teachers caring for their students and believing that these students can learn, and maintaining an expectation that they will succeed (Barr & Parrett, 1995). Numerous studies suggest a connection between teacher beliefs and how they teach or fail to teach children (White-Clark, 2005). The relationship between a teacher and a student, therefore, is the foundation upon which learning rests. For many students, their successes or failures are largely dependent upon the relationships they enjoy or fail to enjoy with their teachers. Kohn (2006) suggests that most children do not fail due to their cognitive abilities, but because they feel unwelcome, detached, or alienated from significant others in the educational environment. Effective teachers care about their students and demonstrate that they care in such a way that their students are aware of it. According to Thayer-Bacon and Bacon (1996), "Teachers who care about their students (as opposed to those who do not), are remembered, effect change, stimulate growth, and are more likely to be successful at teaching their students" (p. 255). Research indicates that children who are securely attached to significant adults become more curious, self-directed and empathetic. Such relationships foster achievement, autonomy and altruism (Brendro et al., 1990). Students need to feel affirmed and to be assured they are valued. They need to be challenged and they need to know they can succeed at a high level of expectation. Teacher expectations can be very powerful and can influence a student's attitudes and actions and lead to success or failure (Tomlinson & Eidson, 2003). The research supports the notion that relationships between teachers and students are critical for academic achievement and school success. According to its 2002 *Set for Success* report, the Ewing Marion Kauffman Foundation (Blankstein, 2004) asserts, "positive relationships are essential to a child's ability to grow up healthy and achieve later social, emotional, and academic success" (p. 59). Lewis (2000) also concluded that fostering relationships between children and adults provides opportunities for them to "see each other in new ways" (p. 643). According to Glasser (1992), "The better we know someone, and the more we like about what we know, the harder we will work for that person" (p. 30). Similarly, Ryan and Patrick (2001) found that students who believe that their teachers care about them perform better on tests.

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THE REAL REASON I WANT TO TEACH THE WORLD CHOICE THEORY: A TESTIMONIAL

Anonymous

My mother was admitted to an insane asylum when I was seven, my sister was six, and my brother was four years old. We children were told to stay on the back porch, but I swung out as far as I could to see what was happening. Two people, dressed all in white, were leading my mother to a black car. That was the last time I saw of her for over three years.

She had been a kind, loving mother. It was hard to understand why she just stood in front of the stove in her bathrobe, warming her hands. Her younger sister had come to live with us, but auntie was unhappy and angry. My report card from 2nd grade shows that I missed 12 days of school and then transferred. One day after an angry outburst, my auntie pushed us down the basement stairs and locked the door. There was coal under the window and we piled it up high enough to help each other to crawl out. It was winter and we were freezing, but we ran down to the bus stop to wait for our father. He understood and took action.

Years later I learned the details. I'll call my father's people the Hatfields. They were British, Protestant, Republican, talented, and college-educated. My mother's people will be called the McCoy's: Irish, Catholic, Democrat, junior high school-educated, and mill workers. At one time my parents were madly in love and married despite their differences. Eventually they tried to change each other. That's when the trouble started.

Father met someone else more compatible and asked for a divorce. My mother's Catholic upbringing forbade such a thing and she became hysterical. To complicate the situation, her younger sister arrived at our door unmarried and pregnant. She wanted to have the baby at our house and have my parents say that it was theirs. After the 'great escape' our aunt was taken to a home for unwed mothers, our mother went to the mental hospital, and we three children went to live with relatives until they placed us in an orphanage.

Three years later my mother won a custody battle to take us to live with her and her two bachelor brothers. The rule there was that children should be seen and not heard. We were forbidden to speak of anything from the past, and after a few slips, we adjusted to the new rules. All three of us did well at school and made good lives for ourselves. We felt loved by both parents, even though they could not get along with each other. We also felt loved by the Hatfields who placed us in the orphanage because they never missed a visiting day in three years. The McCoys fought bitterly and one drank heavily, but they loved our mother and tolerated us.

One day William Glasser, M.D., gave a workshop nearby. He explained how the brain works and how and why we behave. That is exactly what I wanted to know. Choice Theory gave a logical explanation for my mother's breakdown. She was not mentally ill, as diagnosed. She was simply unhappy because her two most important relationships were not working, i.e., her relationships with her husband and her sister. Furthermore, none of her usual behaviors seemed to be very effective, so she created a new one.

It dawned on me that I may not live forever as planned, so I better let the Glassers, the Wubboldings, and all who teach Choice Theory know how grateful I am and why. You have all helped me understand my past. You have all taught me how to create a quality life for myself now and in the future. Thank you to everyone in the William Glasser Association International community for your invaluable ongoing assistance and friendship.

A NOW A FEW WORDS ABOUT BOB, i.e., Dr. Robert E. Wubbolding

A tribute to Bob Wubbolding:

Bob Wubbolding is a remarkable human being and underlying all his achievements is the personality of an easy-going, joke-telling, fun-loving, charming man, with rock-solid principles and a generous spirit. When our college here in Ireland (IICP Education and Training) sought validation for an undergraduate degree from the Government appointed Higher Education and Training Awards Council, Bob was contacted by the Council in his role as International Expert on Reality Therapy (our core model). They invited him to come to Ireland and sit on a Panel of Academic and Professional Experts in pursuit of this accreditation. In the blink of an eye Bob took on the task to make the long journey and was so kind and generous with his time and expertise. Needless to say we succeeded in our efforts and achieved validation of the programme. Bob's place in our triumph is forever written into our history. I am personally eternally grateful to him for his gracious spirit and guiding helping hand throughout that process. Bob also did a workshop with our students before leaving the country and it was a magical day for all of us. After managing an unwieldy and at times difficult panel (or maybe because of it!) he had the energy to produce one of his finest workshops I have ever had the pleasure to witness. Poetry in motion – he lives the model! That day is remembered fondly and often (as is Bob) by those of us privileged to have witnessed it. He demonstrated the superiority of his knowledge, skills and expertise, leaving his audience both awed and inspired. While Bob is known and recognised internationally as a teacher, author and practitioner of CT/RT/LM, my experience of him is that he constantly searches for the highest standards both from himself and from those with whom he works. In this search for high standards and evidence-based practice (or practice-based evidence!) he has helped promote Dr. Glasser's ideas worldwide both academically and professionally. Excellence in its purest form is most easily recognised by others in a particular field. I am honoured to be part of those paying tribute to Dr. Robert Wubbolding, a man with a mastery of the techniques of Reality Therapy borne of a unique creativity and an extraordinary character and expertise. Bob, I wish you ever-increasing happiness, success and joy in all your endeavours and look forward to your next trip to Ireland.

Marcella Finnerty
William Glasser Institute Ireland

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A tribute to Dr. Robert Wubbolding:

Bob's contribution over the years to Reality Therapy has been of great importance to the William Glasser Institute because it has helped the Institute and its ideas on psychotherapy been known and recognized as sound and effective around the world. Bob's analysis of Reality Therapy and its delivery system has been important for teaching and understanding its concepts and framework.

Juan Pablo Aljure

A tribute to Dr. Robert "Bob" Wubbolding:

Bob is a friend, a mentor, a teacher, a colleague and an inspiration. He shares his life with Sandie who is equally sensational and a gift to know. Bob has very useful and very specific ideas.

Bob ran a quality program as director of training for the William Glasser Institute. He was also very valuable during the process of training for certification as a Basic Week Instructor. He was at the training sites and available as a teacher and for lunch and a chat. He was and is always available to explore, confirm and expand Choice Theory/Reality Therapy ideas. As a master of paradoxes I am sure Bob is going to have something to say about this, something like "Oh, it was just lucky…" No! It was hard work and dedication.

Counselors the world over reference Bob's writing and ideas and use his publications to demonstrate Reality Therapy ideas. Bob's work and his contributions to professional publications lend credibility to both his ideas and to the visionary ideas of Choice Theory. The brilliance of Bill Glasser's work is unique in the ways it covers four domains of application; personal, work environments, counseling and education (quality schools). Bob's useful tools of WDEP and his countless other ideas have led to changes in relationships around the world.

Thank you Bob!
Brandi Roth, Ph.D.
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This is my tribute for Bob:

I met Bob personally only a year ago, but until that time I had met him through his books and articles which had been a great inspiration to me. What I think about Bob is that he is a very impressive man. Besides his great knowledge and experience, I always felt his big willingness to learn and readiness to listen to others. In addition, he impressed me with his deep conviction that everyone has to say something and get something for themselves.

One of his interviews which I came across on the Internet helped me to strengthen the idea of the utility and necessity of religious principles, which are very important to me.
As mentioned earlier, last year I was with Bob at a Glasser Conference in Chicago. Although we didn't meet before, he was a real support to me, which made the Conference even more beautiful and useful. We went together to mass and I was impressed to find out that Bob had some workshops with the congregation, something similar to what we have in Croatia and call it "spiritual revival." I experienced his support, his trust that anything you do you do your best at that time with the capacity of the moment, to satisfy your needs. To say the least, I have appreciated the various insights he has shared with me, on paper and in person.

Thank you,
Sister Marinela from Croatia

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A tribute to Bob Wubbolding:

It is a truly pleasure to write a tribute for Bob Wubbolding. He is now professor emeritus at Xavier University after teaching 32 years in the graduate counseling program. As an expert in various schools of counseling and therapy he chose to specialize in reality therapy and choice theory, rather than choosing from among many more famous schools of therapy. As

a connoisseur of CT/RT, he has made this system his life's work as illustrated in his book Reality Therapy for the 21st Century. This huge project is an excellent book on the history of CT/RT and a futuristic announcement of its larger meaning for the mental health of all people. He definitely possesses an encyclopedic knowledge and has added quality to the development of RT, CT and LM.

In addition, Bob's work as an individual thinker is indispensable for learning CT/RT around the world. We have been very fortunate to have him teach in Slovenia and Croatia. As the first director of training for the William Glasser Institute he has thus made major contributions to the development of reality therapy and choice theory. He has authored 12 books and a huge number of essays thereby earning my life-long respect. I hold him in high regard not only because of his professionalism, but also because of his honesty. In his writings he is willing to cite the writings of other people, even authors who have made the slightest improvements and applications of CT/RT

Thanks for all that you have done and continue to do,
Leon Lojk

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A tribute to Bob Wubbolding:

To write a fitting tribute to Bob is difficult because one is tempted to break into punnish prose, but nothing can compare to his collection of ear-snapping, eye-popping, attention getting humor, which always peppers his more serious messages, particularly of the Choice Theory variety. It's clear that Bob's fun need is not only high, but his satisfaction of that need is high as well. I'll not forget the time he and I cruised a shopping mall at a conference and purchased a garish tie and hanky set, which I still hide at the bottom of my drawer. But I'm sure that Bob still wears his, just as he consistently wears a warm smile to greet the next person he sees. I would say something about trying to one-up Bob, but I'm afraid that would just remind him of a story. It has been good to know my Irish friend from Cincinnati.

Wishing you all the best,
Peter Appel

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A tribute to Bob:

I first met Bob Wubbolding in the summer of 1992 in Drumcondra, Dublin. I was a newcomer to the Institute and felt a bit in awe in the presence of an experienced presenter such as Bob Wubbolding. However, when it came to coffee time, I discovered that Bob was one of us as he mixed around among us wanting to get to know as many of the Irish as possible. With a McCarthy in your ancestry, it is small wonder that he liked the Irish! Bob always seemed to me to wear his position in the Institute very lightly. It was no big deal that he was Director of Training. I saw him as a quiet gentleman, totally unassuming. It was as if he had totally internalised Choice Theory and knew that all motivation comes from within.

Bob agreed to do some training in October of that same year and I felt very privileged to have the opportunity to be part of the group of six taking that Basic Practicum Supervisor Programme. It was a wonderful experience for me, truly a quality school experience. We learned by doing and self-evaluating. We knew of the 20 aspects of self-evaluating long before the book 'Reality Therapy for the Twenty First Century' ever came out! An onlooker

would be forgiven for asking the question: 'Where is the facilitator of this group?' Bob had taken a back seat but missed nothing! Oh yes there were moments when he moved to the front and modelled this or that in an inspiring manner. One of the participants gave me a really difficult client. She [playing the role of a man who did not want to be in my office] refused to sit down. What was I to do? I used every skill I had to persuade her to sit, but when that failed I just carried on counselling. When I looked for direction from Bob afterwards he just gave me a gentle hint: 'The counsellor could stand too'. What a simple way to solve a problem!

Ever since, it has always been a joy to meet Bob at Conventions. It was good to participate in his workshops, nice to share with him over a cup of coffee, especially good to share the Eucharist. I can still visualise a group of five or six of us on a Saturday evening mounting a cab as we headed for the church of St. Elizabeth Seton in a parish in California for mass. UCD 2005 was an especially memorable occasion of learning. Bob, with the help of Linda Harshman, gave a workshop on counselling for faculty members. He shared so many skills in that hour that I knew we were in the presence of a true master of the art.

I take this opportunity, Bob, to thank you most sincerely for all your warmth of personality and generosity of spirit, your simplicity of approach and humility of manner, your dedication to quality and patient guidance. For all you have taught me about the meaning of life, many thanks! I will finish with a blessing in Irish: Beir bua agus beannacht agus go raibh míle maith agat! [May achievement and blessing and a thousand [times] good be yours!]

Sincerely,
Sister Claire Sweeney

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A Tribute to Dr. Robert Wubbolding:

I am pleased to write this tribute to Bob, who has been my teacher, mentor, colleague and friend.

I first met Bob when I attended my Basic Intensive Week in 1992. I was inspired by his passion for Glasser's ideas and immediately saw how they could be useful in my personal and professional life. Eventually I was elected to serve on the WGI Advisory board. I remember how nervous I was during my first meeting, as I sat at the table with board members who were "famous" within the institute. I felt intimidated and wondered what contribution I could add. Bob must have sensed this, because he took time to pull me aside and offer encouragement and reminded me of what I had to offer. It was this kind of support that helped me develop a new picture of myself as a competent individual. Bob continued to support my growth as a faculty member of the WGI but also as I pursued higher education and earned my doctorate in counselor education and supervision.

I could write pages on what Bob has meant to me over the years, but I would like to focus instead on Bob's contribution to the popularity of Glasser's ideas in the counseling community. Bob is a tireless promoter of these ideas and presents at local, regional, national, and international events. He is a regular presenter at the American Counseling Association Conference and the Association for Counselor Education and Supervision Conference, where competition for presentation time is fierce and winning a slot is an honor. His presentations are always well-attended and enthusiastically received. Bob teaches but also demonstrates the applications of these ideas in role-plays. What I appreciate about his role-play skill is his obvious mastery of reality therapy, but also that he is willing to take on the tough cases that counselors struggle with on a day-to-day basis.

This is what people want to learn about when they come to conferences. I believe that it is Bob's demonstration of the effectiveness of reality therapy that "grabs" the audience and encourages them to learn more about reality therapy and choice theory. My students are always amazed that someone they have read about in texts and admired as a presenter is so approachable. Those who have attended presentations or training with Bob come back with rave reviews and excitement over what they have learned.

Another contribution Bob has made comes in the form of the numerous books he has written. I appreciate his writing style, which is engaging, easy to read, and useful. Bob was invited to write a book on reality therapy for the American Psychological Association, which is recognition of Bob's skills as a writer but also is an important milestone for the ongoing marketing of reality therapy and choice theory. In addition to the books he has written, Bob has made friendships and connections with prominent textbook authors and Glasser's work continues to be part of theories texts and counselor education. There are countless new theories and approaches being developed for counseling, so it is critical that these connections continue to be made to keep Glasser's ideas in the texts. In an effort to change the perception that reality therapy and choice theory is only useful for individual counseling, Bob and I have worked together on a book that focuses on the application of Glasser's ideas in couples counseling. The book includes chapters on a variety of issues related to working with couples and includes chapters authored by many of our WGI colleagues.

Bob's work with the Glasser Scholars has heightened the development of choice theory and reality therapy at universities around the country. The scholars have contributed numerous articles to the IJCTRT and in other journals. They have sponsored and/or taught intensive trainings at their universities and in their communities and have inspired their students to adopt reality therapy and choice theory in their practices. The work that Bob has done has trickled down to serve the community and to make a difference in the lives of the people who have benefitted from experiencing choice theory and reality therapy.

As many of you know, Bob watches TV with a note pad and pen nearby, so he can write down the pithy comments he hears. It amazes me how he can remember them and pulls them up at just the right time when he is presenting. So, with that in mind, I would like to close this tribute with some appropriate quotes from Yogi Berra.

Remember, Bob, "When you arrive at a fork in the road, take it." Keep in mind that "If you don't know where you are going, you might wind up someplace else."

When you are teaching, don't forget that "In theory there is no difference between theory and practice, but In practice there is."

If you find that "It was impossible to get a conversation going, everybody was talking too much," you will realize that "You can observe a lot by just watching."

And if you find yourself getting a big head after reading your tributes, remind yourself that "It ain't the heat, it's the humility."

Finally, although "It gets late early out there", "It ain't over till it's over." I am looking forward to continuing our relationship for many more years to come!

Pat Robey, WGI Senior Faculty

PS to Bob: I ran into those three instructors the other day. They said their lives have been changed because of all you taught them. They appreciate that you keep mentioning them in training. Funny how they show up in the most surprising places!

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A few timely words about Bob:

I had the opportunity to work on the Professional Development Committee with Bob while serving on the board several years ago. I always felt heard and respected, and always enjoyed his sense of humor. We also brought Bob to Moncton for a one day seminar which received rave reviews. People loved that he showed them "the How." He has always shown his commitment to the William Glasser Institute and its vision of Teaching the World Choice Theory. Bob was and is a great resource person to us all.

Thank you,
Maureen Craig McIntosh

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A tribute to Dr. Bob Wubbolding:

I have known Bob Wubbolding for over 15 years in a variety of settings. He was first my professor at Xavier University in Cincinnati, Ohio. Dr. Wubbolding taught me Family Systems and Ethics and was an excellent instructor. One of the great memories of his classes was the end-of-class parties. He always invited his classes to his and Sandie's home at the conclusion of each class to celebrate accomplishments and allow networking with other colleagues.

Fortunately, I have been able to attend and learn from Bob's presentations at several conferences I have attended. He has presented multiple times at the Kentucky Counseling Association conferences and I had the pleasure of watching him lead a mock group session based on Reality Therapy techniques at the American Counseling Association and The William Glasser Institute's International Conference. It is a joy to watch him as he leads a group to the theory and techniques to which he has devoted his life.

It is difficult to find strong enough adjectives to describe Bob Wubbolding. He is definitely professional, consistent, dedicated, gifted, and persistent….. To me, he is also a friend, colleague, mentor, co-author and incredible human being. The word that describes him most is self-actualized. Self-actualization is characterized as someone who fully exploits talents, has sovereign drive and attains the basic needs of safety/security, love/belonging and self-esteem . . . it fits Bob perfectly.

The contribution Bob Wubbolding continues to make to the counseling profession is infinite. Thank you Bob for all you have done for me, and for countless other professionals, all of whom have had the opportunity to learn from you. I also want to thank you for introducing me to Reality Therapy and promoting this exceptional tool for so many people.

Dawn Hinton

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A tribute to Dr. Robert Wubbolding:

There is surely nobody who has contributed more to the promotion, teaching, and/or practice of Dr. Glasser's ideas and, in particular, the development of Reality Therapy around

the world, than Bob Wubbolding. When he first came to the UK, back in 1990, to try to help us establish CT/RT within the country, he very rapidly created such a positive impact within counselling and psychotherapy circles, by teaching and demonstrating so skilfully and effectively at conferences and workshops, that CT/RT was very quickly established as a "new" and up-coming method to take notice of. All thanks, not only to Bob's undoubted knowledge and skill, but also to his persistence, willingness, and determination to to "teach the world Choice Theory and Reality Therapy," and do so with such warmth, humour and genuineness, to anyone and everyone keen to listen.

The interesting thing is, that at the age of 74, Bob is still creating such an impact! He's still teaching and presenting with the same captivating style and wonderful sense of humour; still demonstrating Reality Therapy with a level of skill that is so often simply awesome; still writing books and articles with enthusiasm and creativity; and still genuinely representing Dr. Glasser and his ideas by the way he and his wife Sandie, choose to live their lives. I'm most certainly proud to know Bob as a friend as well as a mentor and as a colleague.

Best wishes,
John Brickell
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A tribute to Dr. Robert E. Wubbolding--

In December, 1989, I had just completed one of a two semester course in Reality Therapy taught by Bob Cockrum at Kentucky Wesleyan College. Bob Cockrum always had good taste when it came to recommending books, so when he recommended something I always listened. He recommended "Using Reality Therapy" by Dr. Robert E. Wubbolding. This small, paper-back book was filled with valuable ideas and practical information regarding reality therapy. Dr. Wubbolding's book inspired me to take the second semester of the course. It was during this second semester course in reality therapy that I became "sold" on reality therapy and decided to complete certification in choice theory/reality therapy. At my certification week in Providence, Rhode Island (1991) I got the opportunity to meet Bob Wubbolding for the first time. I discovered Dr. Wubbolding to be a down-to-earth, humorous, and very humble gentleman, in spite of his many, many accomplishments.

Since then, Dr. Wubbolding has continued to inspire me with his books, lectures, articles and training seminars. Everything he does is guaranteed quality. Bob has helped add credibility to reality therapy. Through his leadership, reality therapy has become more respectable and respected. I would like to thank Bob Wubbolding for his inspiration throughout my entire career and his invaluable contributions to the William Glasser Institute.

Mike Fulkerson
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A tribute to Dr. Robert Wubbolding:

Dr. Wubbolding's contribution to Choice Theory in general, and to Reality Therapy in particular, has been major by any standard. His published books range from very practical teaching aids to academic summaries of research. His articles cover many themes, such as ethics, group work, multi-culturalism and mental health. He has also produced a range of audio and video recordings.

For many years he was the Director of Training in the William Glasser Institute.   As a leading member of the Institute, Bob has been active in promoting a higher profile for our work, with a special interest in the academic area. This interest led to the creation of the special "Scholars' Program," which aimed very successfully to involve more university personnel in our training. Bob is also one of our truly international faculty members having taught Choice Theory right around the world and is a popular presenter at conferences.

It is probably unfair to focus on any one talent in a person who possesses so many, but Bob's ability to teach through role-play is, I believe, unparalleled.   As a person, Bob is a great friend and is blessed with a fine sense of humour.

In Ireland we owe special thanks to Bob and his wife, Sandie, for their wonderful contribution to the success of the International Conference held here in 1994. We also take special pride in knowing that, deep down, he is one of us. On his mother's side he is a McCarthy from County Cork.

The William Glasser Institute owes a huge vote of thanks to Bob for his tireless work over the years, and it is both a pleasure and an honour to have this chance to sing his praises.

Brian Lennon
Chairperson, William Glasser Association International
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A tribute to Dr. Robert Wubbolding:

"I can't begin to sing my praises to Dr. Wubbolding, also known to me as Uncle Bob. He has taught me that Reality Therapy is not just something I teach my grad students; it's something I now LIVE. He is supportive of creative endeavors, and helps others find their own power in creating the life they want to live, choice by choice!

Thanks for your endless guidance and assistance,
Tammy Shaffer
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A tribute to Dr. Robert Wubbolding:

I appreciate you so much for your contribution in Japan.
Everything was because I was able to attend your seminar 24 years ago;
since then I was able to spend a wonderful life.

I believe that so many people have learned many important messages about life from your books. Of course, I am one of them. Your messages made me truly want to spread the concept of Choice Theory in Japan.

I thank you so much for becoming an advisor of our company.
This is our 25th year, and now we have spread the idea to more than one million people, across both public and to private sectors.

Everything started from your seminar in Japan.
This year, we had a terrible disaster. We are now moving forward to make it get better.

On October 13th, 2012, we are going to hold our 25th year event.
If you can make it, we definitely want you to be here with us with Sandie.
We want to thank you for your long-term contributions to Japan.
Best wishes for your future.

Satoshi Aoki,
CEO of Achievement Corp.

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A tribute to Dr. Robert Wubbolding:

If Bob Wubbolding would have said that he helped a native to a country whose language he doesn't speak by translating English to that unknown language, people might have thought that he was kidding, as he often does while building a rather serious, even if a metaphoric, message. When I told my friends in Romania that he helped me to translate the pretty compact English phrase 'Reality Therapy' (RT) to Romanian, they thought that I was kidding, although I was only telling the truth. In a nutshell, what Bob did then epitomized what CT/RT training is all about; provide the conditions for the learner to understand in his/her own 'language' through experience, knowledge, and skills useful to fulfill his/her own needs. Besides being a personal meaningful experience for me, that moment was, unwittingly, the beginning of a road leading to the development of a CT/RT movement in Romania to which my mentor and friend Bob Wubbolding has brought a significant personal contribution; not only has he guided my training, but enthusiastically shared his lifetime RT experience with my colleagues in Romania. Thank you Bob, for your friendship, sense of humor, willingness to help out, and for the actual efforts on our behalf.

Ilie Puiu Vasilescu

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This is my tribute for Bob Wubbolding:

My dear Guru Bob: No words can express, no act of gratitude can relay my heartfelt appreciation for the excellence and dedication you have exemplified in teaching and nurturing me through my Reality Therapy journey. Your kindness and support is always remembered fondly. You bring a nobility to our profession , of which I am so proud to be part of, and your teaching and writing has not only made a difference in myself but helped me make a difference in the lives of others. If I tried to tell you how much I appreciate you, I'd be talking the rest of my life - but I simply say - THANK YOU MY MENTOR BOB and hope to give back to those I teach at least a fraction of Reality Therapy that you have taught me.

Farida D'Silva Dias, MBA, MA, CTRTC
Center for Reality Therapy—INDIA

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A tribute to Dr. Wubbolding:

In 2010 I had the privilege of meeting Dr. Bob Wubbolding in person at my certification week for which I had developed a set of children's books based on Dr. William Glasser's basic needs. He had a fabulous sense of humour and you could see his passion for Choice Theory/ Reality Therapy/Lead Management.

Based on encouragement from Dr. Bob I have benefitted greatly in the development of these children's books. He didn't think twice to support me and give me tips and resources to help me navigate through the publication process.

Dr. Bob is a true inspiration to others. His dedication to sharing the work of Dr. William Glasser with the world is encouraging and motivating. Thank you Dr. Bob for all that you do!!!!

Diane Leger, MEd, CTRTC

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A tribute to Bob Wubbolding:

Thank you Bob Wubbolding for the numerous hours you have contributed to making our Institute successful and professional.

Thank you for mentoring me through to become an instructor when others refused. You are one in a million for all the people you have trained throughout the years.

I remember the hours we spent on the professional development committee when we worked until three in the morning completing a project. Your leadership has inspired me and numerous others throughout the years.

I am proud to have experienced the quality time spent with Sandie and you in your home where you welcomed so many people from our country and many other countries. Your friendship, professionalism, and dedication will long be remembered throughout the world.

Thank you for this opportunity to share my love and thoughts with you and Sandie.

Jeanette McDaniel

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A tribute to Bob Wubbolding:

I would like to say a few words about my teacher and my friend.

I met Bob in the eighty's when he came to Zagreb, Croatia. It was a gift having him in Zagreb, learning from him. Bob's way of supporting Glasser's ideas, his way of presenting them, was like looking through a new window for me. In particular, I am happy with the books he has written. I love all his books and I am very thankful for them. They are course books for me and for many teachers and students of reality therapy. His books are very useful for understanding and using reality therapy. I can say if Glasser's books are "role," Wubbolding's books are "play."

I was honored to write an article with him (Bob Wubbolding, R.E., Al Rashidi, B., Brickel, J., Kakitani, M., kim, R.I., Lennon, B., Lojk, L., Ong, K.H., Honey, I., Stijacic, D., Tham, E., [1998], Multicultural awareness: Implications for Reality Therapy and Choice Theory. International Journal of Reality Therapy, 17, 4-6). I perceive Bob as a supporting, understanding, inspiring, enlightening and caring person. There is a shining mark of Bob Wubbolding in my life. I have had the opportunity to met Bob a few times and we developed a very friendly relationship. That is an important value in my life. I'm looking forward to meeting him again.

Dubravka Stijačić
President of Croatian Association for Reality Therapy, Zabreb, Croatia

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A tribute to Bob Wubbolding:

Bob has been an inspiration and a friend. In my early days as a new instructor I attended as many of Bob's presentations as I could, to learn effective ways to present the ideas of CT and RT. I owe him my gratitude for his recommendations to the folks in Korea and Singapore that they invite me to teach in Asia. Waiting for an airplane one day I spent an hour getting to know him personally, and have enjoyed many informal hours with him and Sandy and my husband. Bob's kindness, sense of humor, intelligence, and energy make him number one in modeling the concepts of choice theory. I thank God for Bob.

Barbara J. Jacobson, Ph.D.

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A tribute to Dr. Bob Wubbolding:

This is Eun-Jin Kim, and I am a senior instructor in Korea. Prof. Rose In-Za Kim invited Dr. Wubbolding to Korea as a BIW Instructor in 1991. Later, I participated in his workshops (CERT, BPSP, and BIWI) held in Korea. In 2002, I finally became a senior Instructor because he was very inspiring to me and my colleagues when we first met him. He was a marvelous instructor, counselor and teacher - he was just superb. As a trainer, he was not only excellent in teaching theory, but also very kind and culturally competent. His lectures were clear and concise. The atmosphere of his workshops was warm, friendly, and humorous. Even though Reality Therapy was generally preconceived as a superficial problem-solving method in Korea at that time, we began to respect Glasser's Ideas more and became more proud of studying RT. Currently I work with Prof. Rose Kim in KCC for workshops (CERT, BPSP & APSP, BWI), and just finished translating his new book, *Reality Therapy*, with Prof. Park, who is a Basic Instructor. I hope that this wonderful book will enrich the quality of Glasser's ideas one step further.

Thanks so much,
From Eun-Jin Kim Ph.D

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A tribute to Dr. Bob Wubbolding:

Bob never fails to extend his friendship and care as a teacher and a mentor.   His empathetic sensitivity about another's feelings is such that no words need to be said to prompt him to show his concern. I am indebted to him for his friendship; his care, his acceptance and his honesty in saying what he thinks if he thinks it needs to be said. To me, he exemplifies the essence of Choice Theory.   I am grateful and humbled by his constant friendship over the last 20 years, and I hope many more years to come. For me, my friend Bob is a living legend and one who is truly congruent with self and others.

 Ong Kwee Hiong, Clare (PhD)
Senior Faculty William Glasser Institute.

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A tribute to Bob Wubbolding:

Ever since I have known Bob, which is now over seventeen years ago, I've considered him one of the people who convey a sense of direction, purpose, and meaning to members of the Institute and to the public about our work.

He makes doing RT look deceptively easy even casual. I think he is in fact a keen and insightful therapist. I learned from him more than anyone else the need to monitor yourself, withhold judgments, be flexible and creative.

I am particularly appreciative of his help with my senior faculty role plays some years ago. His advice was clear, constructive and professional. Certainly it has made me a better trainer and therapist. It is also thanks to him and his writing that I have a better appreciation of where we need to take our training and our theory. Thanks Bob.

Rolf Ahrens , Senior Faculty
President William Glasser Institute – Canada
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A tribute to Dr. Robert Wubbolding:

Compared to many of you I am a relative newcomer to the Glasser organization, yet I soon recognized the importance of Bob Wubbolding's contributions to the Institute. I received my Certification Week training from Bob and it was a pleasure to observe him teach how a well-worded question could positively change the tone of a role play. He is a real expert at that. His support has meant a lot to me as I have worked to complete Glasser's biography, a project that is almost finished. Bob has been involved with so much of the history and success of the Institute that a simple tribute doesn't seem like enough. It's a start, though.

Jim Roy
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A tribute to Dr. Bob Wubbolding:

It is hard to limit my thoughts to a few sentences about Bob. He is one outstanding man.

When I first read Choice Theory I asked a person who was certified, what else I could read? He recommended Bob's *Reality Therapy for the 21st Century*. After reading his book, I was sold on Reality Therapy and I decided I wanted to learn from him. During my Basic week I realized that he wasn't just informing us about Choice Theory; he embodied it. I had never been in such a freeing learning environment. I made up my mind after that experience that I would work toward certification and that I would change the way I taught all my college courses. I am deeply thankful for Bob's wisdom, encouragement, faith, as well as his gentle and kind spirit.

With warmest regards,
Nano Farabaugh CTRTC
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A tribute to Bob Wubbolding:

Dr. Wubbolding introduced me to Choice Theory through The William Glasser Institute's Glasser Scholar Program. He was a gifted instructor during training, and has been a valued mentor subsequently. I cannot thank him enough for his efforts to expand the writing and research base for this approach. His encouragement and support of the research process has contributed towards advancing Choice Theory and Reality Therapy as a research-informed intervention. On a personal note, I would like to thank Bob for both prompting my own research agenda and giving me a new and wonderful way to look at teaching and the classroom as I moved towards university tenure.

W. J. Casstevens, PhD, LCSW, MSW

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A tribute to Dr. Robert Wubbolding:

When I took over as Midwest Region Director eight years ago, Bob Wubbolding was there to help and support our efforts. He played an active role in the International Conference that we hosted in 2004, as well as the 1990 International Conference. He has shared presentations and role plays at numerous Midwest conferences, as well as at almost all of the International WGI Conferences. I had the opportunity to sit in on a Certification Week that Bob facilitated which helped improve my skills and abilities to facilitate Cert. weeks as well as other trainings.

Bob had been a wonderful asset to the entire country and world with his work as Director of Training and on the Professional Development team. He encouraged us to share our ideas and concerns and kept the Advisory Board Members focused. I am proud to have Bob in our region and to count him as a friend.

Sincerely,
Judy Comstock, WGI Consultant for Faculty Programs

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A tribute to Dr. Robert Wubbolding:

In your mind's eye, visualize a glossy smooth lake and now throw a pebble into the deeper part of the lake. We all know what happens, ripples filter out becoming larger in circumference the farther away from the center. That small pebble made a change in the lake including the person throwing the pebble. I am reminded of this image when I think of Bob. I met Dr. Wubbolding in the early 90's in Germany and that week became the analogy to the pebble in the lake in my life. I cannot even begin to give honorable accolades to Dr. Wubbolding and his teaching of Reality Therapy, which has affected my life in a few short sentences. This challenge becomes more magnified when I consider the influence his mentorship had on me; and, in turn, upon my clients, supervisees, students, clinical programs, writing, and research. That one pebble back in the early 90's is still radiating "Dr. Wubbolding's" ripples, therefore, my life has been forever changed.   I am forever grateful I signed up for that first basic intensive week of Reality Therapy training and since that time Bob and Reality Therapy have a permanent home in my quality world. Thank you!

Neresa B. Minatrea, PhD.
LPCC, Certified Reality Therapist, Supervisor and Instructor

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A tribute to Dr. Robert Wubbolding:

I am delighted to have the opportunity to provide a tribute to Dr. Wubbolding. He has been a significant mentor and also a great colleague to me. It is always a pleasure to be in his presence. He is an expert at teaching Choice Theory, Reality Therapy, and Lead Management; he has a way of including and involving everyone. His training, encouragement, and support have had a very positive impact on my professional career.

Dr. Cynthia Palmer Mason, CTRTC

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A tribute to Dr. Robert Wubbolding:

It is my honor and my pleasure to know Dr. Robert Wubbolding as a friend, teacher, and colleague. Fondly known to me as a part of the Glasser Scholars' training group as "Uncle Bob", I have spent about five years with Bob in learning about Choice Theory/Reality Therapy. My own passion for the theory and practice of Reality Therapy comes from my excellent training experience where I saw 100% of the concepts lived out in Bob's personal and professional life. With his wife, Sandie, I have so much more than an educational knowledge of the theory and practice. I have real world examples of how the language of Choice Theory relates to my chosen profession of counselor educator and supervisor. I consider Bob my role model for teaching, training, counseling, supervising, coaching, and living as a person who has Quality in her world. Thank you, Bob!

Jeri L. Crowell, Ed.D., LPC, NCC, CTRTC, DCC, Glasser Scholar

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A tribute to Bob Wubbolding:

As a friend, colleague and mentor you have shared your knowledge, wisdom, expertise and humor. I value our friendship and appreciate having had the opportunity to work with you on the advisory board, as well as during your tenure as director of training. You have had a profound impact on me, as well as on others who have had the opportunity to learn from you. You've shown me and others how to lead by example.

Thank you for all you have done in the fields of psychology, counseling and education furthering the growth of people and institutions through the expansion of the ideas of Choice Theory and Reality Therapy.

Did you hear the joke about the lawyer who became certified in CT/RT?
It's not funny!

In friendship,
Al Katz, Senior Faculty, WGI

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A tribute to Bob Wubbolding:

Dr. Wubbolding has been influential in my study and application of Choice Theory and Reality Therapy. He is a teacher par excellence with that wonderful ability, like Socrates, to bring out what is within the student to catalyze learning and application of learning to life situations. I have profitted from his writing and even more, have enjoyed working

personally with him. His warm cordiality is very affirming and his relaxed style with groups is a wonder to see.

I believe Bob Wubbolding truly deserves the title "Doctor," which finally means nothing less than "teacher."

Dr. Ken Larsen, CTRTC

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A tribute to Dr. Bob Wubbolding:

I continue to be impressed by Bob's long dedication to Dr. Glasser's work and his commitment to teaching and promoting the William Glasser Institute. His consistent and tireless work as the Institute's Educational Director, his contributions to the Professional Development Team, and his academic publications, have contributed to the growth and world-wide influence of Dr. Glasser's work. Of equal importance to me is his openness, honesty, and availability, which have often led to many hours of personally rewarding discussions.

Frank Dunn
WGI MSR Regional Director/WGI USA Advisory Board Chair

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A tribute to Dr. Bob Wubbolding:

Bob is an excellent teacher, counselor, mentor and friend. Bob has incredible integrity. I trust him to have researched all that he teaches and that he practices. He is an erudite speaker, who uses humor and memorable quotes that anchor the message in the listener's mind. I have always admired his ability to take complex concepts and re state them in very learnable, practical ways. Bob never holds himself above his listeners, his students, his employees. He is collegial and shares his knowledge and skills with all. His books are a legacy of functional steps to understanding and working with others, written with a flair that engages the reader; as does Bob in person. His care for the Institute and the training of certified practitioners of Reality Therapy is legion; encouraging us to stay fresh, creative and helpful.

Blessings,
Sarah (Sam) Elliston, CTRTC

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A Tribute to Dr. Wubbolding

Dr. Wubbolding is the first RT instructor I have met in Korea. We, the thirteen Korean participants who attended the first BIW in 1991, were more than happy to have him as our instructor. We were very impressed with his profound knowledge and devotion to Reality Therapy. I personally owe him a great deal for my own career. Without his inspiration and encouragement it would not have been possible for me to become a RT senior instructor. I really appreciate his warm concern and support that he has shown to me as a good mentor. I also admire him as a great scholar, and as an excellent writer and a good person. It has been my great pleasure to spend time together with him and his wife Sandie in Korea and at International Conferences. All the Korean Instructors and supervisors have been

immensely influenced by Dr. Wubbolding , but we will always remember him as a competent instructor, a strong motivator, a reliable mentor, and also as a very good friend.
There is no doubt that he has been doing outstanding work in Korea. More than anything, he is one of the most beautiful human beings I have ever met in my life.

Aeryung Woo, Ph.D., Korean Senior Instructor

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A tribute to Dr. Robert Wubbolding:

Through the years Bob has been a great friend! He is always caring and very approachable.   He listens with respect to opinions, ideas and innovations. He is a role model of both Reality Therapy and Choice Theory. His books have been very helpful in my position as Practicum Supervisor. His humor goes a longway. Truly, Bob is a great human being!

Barbara Hammel Olsen

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A tribute to Dr. Robert Wubbolding:

I have had the privilege and honor to work under Bob's mentorship for the last 4 years. Words cannot express how much I have come to value Bob's patience, compassion, genuineness and integrity. If there is anyone who lives Choice Theory to its full potential, it is Bob. It was a gift and a blessing to be chosen as a Glasser Scholar, however the most priceless gift was having the opportunity to be mentored by Bob. While he may have referred us to various resources, the greatest teacher and model of Choice Theory was HIM as a Person, Professional and Friend. Bob was and still is one of my finest teachers.

Jill Duba Sauerheber, Ph.D., LPCC, NCC, RTC, EMDR Trained

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A tribute To Dr. Robert Wubbolding:

Next to Dr. Glasser, the work, teaching, creativity, publications, research, leadership and over-all world wide contributions of Dr. Robert Wubbolding stand unsurpassed in furthering the mission of the William Glasser Institute. If anyone could claim the title of teaching choice theory to the world, it has been Bob. He drilled down to the essence of choice theory's practice with the brilliance embodied in simply W-D-E-P, and then successfully demonstrated counseling role plays with the most challenging clients. Bob's stories, sense of humor, professional integrity, courage, spirituality and inspiring neck ties has emboldened, enkindled and cheered us all. I know him as Roberto, and to him, I am Rhonaldo, friends now and forever.

Rhon V. Carleton
Senior Faculty, WGI

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A tribute to Bob Wubbolding:

In the spring of 2007, I had supervised six counselor interns as counselor/principal of an at-risk charter high school in rural, central Texas. The amount of work that was required just

to keep the students enrolled in school was burdensome, however, these interns did a magnificent job and received a very rich intern experience. The staff/faculty at the school had done a basic week with Nancy Dees in January of that year and we were on our way to becoming a quality school, or so I thought. In May, due to a series of poor choices by the administration, I decided to resign my job from the charter school. I took a few adjunct teaching assignments, but was looking for something more. In October, there was an article in Counseling Today about The Glasser Scholar's program created by Dr. Bob Wubbolding and Dr. Emerson Capps from Midwestern State University.

I knew Dr. Wubbolding as the author of a chapter in several textbooks we had used in my graduate counseling program and I had attended several presentations by Emerson Capps and his wife at professional development conferences with the Texas Counseling Association. I had observed first-hand how Choice Theory had worked miracles at the charter school for students, staff and faculty to say nothing of the six counselors interns. So, I applied to become a Glasser scholar and, to my surprise, was selected. Thus began a 2 ½ year study with Bob Wubbolding, Choice Theory/Reality Therapy and the other Glasser scholars.

Bob Wubbolding, "Uncle Bob" as we know him now, imparted his wisdom and passion for CT/RT over that 2 ½ year study. Although we were all miles apart, the Glasser Scholars dissected "how the brain works' or "the chart" and learned how to role play as if we were going to be considered for the Academy Awards. Bob Wubbolding brought Choice Theory and Reality Therapy to life and helped make it second nature for use "Scholars," whether we were in an intense counseling session or just trying to make a decision about everyday life. Bob Wubbolding only asked that we be true to the theory and true we were, to Choice Theory/Reality Therapy and to "Uncle Bob."   I completed the Glasser Scholar program, fulfilled my obligation of doing research with two published articles based upon several studies Tom Burdenski and I did with college freshmen and need satisfaction. Becoming a Glasser Scholar under the tutelage of Bob Wubbolding led to my application to the Doctoral Program in Educational Leadership and Policies Studies. My qualifying exams are in September and I hope to complete my dissertation by March of 2013. It will include my previous research as well as a dedication to Bob Wubboldling, his leadership and passion for Choice Theory and Reality Therapy and his desire to make sure this life-changing theory never dies.

Thanks,
Brenda Faulkner
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A tribute to Bob Wubbolding:

Bob is not only one of the OLDEST members of the Institute, in every way (duration with us, but years since birth as well), as is obvious when you look at him, but he's clearly one of the BEST in every way as well. That's also obvious when you watch him.

About a year ago, in my work using these ideas with leaders and managers in corporate America, I began reducing the needs for them to focus on to two, i.e., Love/Belonging and Power. come to believe that if a manager diligently manages those two things, s/he and the business s/he manages will be fine.

Bob takes care of people. Whether the skill with which he moderates meetings with divergent views in play, or the care with which he quietly greets all persons at events, Bob

focuses on others in ways that we all feel loved, like we're each his best friend.

Bob takes care of business. Whether standing behind a vendor table selling books, facilitating training sessions, serving as an officer of the institute, or following up with event details, Bob pays attention to things that need doing and stays with jobs until they are done.

If Bad People can be defined as people who meet their own needs at the expense of others, Good People are those who meet their needs while not adversely impacting the needs of others, Great People are ones who meet their needs by helping other people meet their's, and Heroes as people who meet other people's needs even at the possible expense or frustration of their own...Then Bob Wubbolding is always Great...and Sometimes he's actually a Hero!

I love you Bob! For all you've given, shared, created and taught... Thank You!

Doug Walker
Senior Faculty (One of the original "Resident Faculty" Members)
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A tribute to Bob Wubbolding:

Bob has contributed to the Institute in a variety of ways, most notably by forwarding the concepts of Reality Therapy to the global professional community through his books and journal articles. Bob has always been willing to share his expertise, both in writing and through demonstration. Perhaps the biggest compliment I can pay to Bob is to acknowledge his courage in never avoiding a request to demonstrate his RT skills in front of a group, large or small. Those of us who are instructors recognize how difficult it can be to put your skills and reputation on the line in front of others.

My biggest learning experience from Wubbs involved a method to increase my credibility as a teacher. I was always impressed with Bob's use of quotations in his presentations, but it didn't seem to fit my style. It dawned on me that it wasn't speaking the actual quotes, but rather the concept that engaged me. I have been able to take that concept and use it in a way that works for me. What a huge learning - take the concept you are learning and make it your own; but don't just copy what you admire. Thanks, Wubbs!

Bob Hoglund

A tribute to Dr. Robert Wubbolding:

Dr. Robert (Bob) Wubbolding, was the first person I ever talked to in the Willam Glasser Institute. His warm welcome and appealing teaching abilities drew me into the fold. He constantly pulled me forward by his gentle manner and invited me to challenge myself to learn. His easygoing style is somewhat enhanced by his 'Lawyer' jokes and his off-the-wall humor. He is the person who gathers everyone together for fellowship and congenial discussion. For the Catholic members, he locates a suitable church and makes sure that they have the opportunity to attend Mass. He is a leader, a role model, a mentor, a teacher and a friend. As the Institute continues to expand and grow, his guidance and leadership will be instrumental to future success. Enough cannot be said about the enormous contribution that Dr Wubbolding has made to the William Glasser Institute, its members,

myself and ***especially*** the members of society that have been helped and guided by the efforts of the Institute.

Janet Fain Morgan

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A tribute to Bob:

Bob is the first one to come to root RT/CT & LM in Korea, starting l990. Since then he has visited Korea several times. He still is our only and best Advisor for Korean Association of Reality Therapy. Not only because of his wide span of sources and his perfectly complete knowledge of RT, CT & LM, but more with the delicacy and timing of deliverance of those contents when he was teaching us, we were deeply moved by. The difference of psychological cultures, the variation of professional fields, diversity of age and difference of sex, he has created no confusions nor any perplexity for us, but all of us were astonished by his unique way of presentations and his endless examples and role plays etc. Since then, we do have taught QS, Quality Management, besides RT Counseling faculty trainings to more than ten thousand (10,000) participants, and have written more than 500 academic theses, including MA & PhDs' (2011 January). We even went out of Korea, to such countries as Indonesia, Singapore, and Sydney for Korean residents, to teach them RT & CT. Also since April, 2011, KART has proudly became a professional counseling association. Therefore, we want to share all of these outstanding harvests with Bob, along with Dr. William Glasser, the founder of CT/RT.

Bob, you are 'THE ETERNAL GOD FATHER of KART." We extend our deepest gratitude to your dedicated assistance that you so freely offered us for these many years. So together we now can march on to bring a speedy Peace to the World !!

Lovingly Yours,
Rose-Inza Kim, President of KART

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In appreciation of Dr. Bob Wubbolding (aka, "Uncle Bob")

It was nearly five years ago that someone handed out flyers at a Texas Counseling Association conference luncheon announcing the *Glasser Scholars* program. As an Assistant Professor in a master's of counseling program eager to beef up my vitae in preparation for tenure, it was an opportunity that looked too good to be true—an opportunity to become certified in choice theory/reality therapy along with various professors from around the U.S. and world who were eager to collaborate on research to support Dr. Glasser's theory and approach to counseling.

Because I had fallen behind on my scholarly output at that point, my involvement with the William Glasser Institute through the scholars program, the successful research studies that Brenda Faulkner and I conducted on teaching choice theory/reality therapy to provisionally-admitted incoming college freshman, and my involvement with Dr. Tom Parish helping to edit the *International Journal of Choice Theory and Reality Therapy*, my involvement with the WGI was instrumental in putting me "over the top," and led to becoming a tenured Associate Professor of Psychology and Counseling at Tarleton State University.

As much as I have learned from you about choice theory/reality therapy and how to pass it along to counseling students and others involved in becoming certified through the institute,

I am even more grateful to you for helping to show me how to live my life. The mentoring that you provided me during that training period was exceptional. You showed great patience, vast knowledge of CT/RT, and the humility that made it easy to approach you and learn from you on a very personal basis. Throughout the process, Sandie (Bob's wife) was by your side, supporting you and your mission, which modeled to me that I can be successful in my career and also live a balanced life.

Participating in the Glasser Scholars program and going on to become certified as a basic and advanced practicum supervisor and a basic intensive instructor have been major highlights in my career and I am very privileged to have you in my life. I now look forward to "passing forward" the many wonderful ideas you have helped Dr. Glasser develop and refine to the next generation of counselors!

Dr. Tom Burdenski, LPC, LMFT, CTRTC, Licensed Psychologist, Associate Professor of Psychology and Counseling (as of 9/1/ 2012) at Tarleton State Univ., Ft. Worth, Texas

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A tribute to Dr. Robert Wubbolding:

Bob Wubbolding and Rhon Carleton helped us to establish the William Glasser Institute in Japan. In addition, Dr. Wubbolding's teachings greatly facilitated our subsequent growth and development. We are very grateful for his contributions.

Thank you,
Masaki Kakitani for WGIJ

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A tribute to Dr. Robert Wubbolding:

I am delighted and honored to pay tribute to Dr. Robert Wubbolding who has dedicated his life to making our world a better place by teaching, demonstrating and researching Choice Theory, Reality Therapy, and Lead Management in concert with the tenets advocated by Dr. William Glasser.

As a Glasser Scholar, Dr. Wubbolding served as wonderful mentor instructor. His incredible talent, patience, knowledge, and skills were constantly on display as he role-played Choice Theory and the WDEP model. He truly is a model of integrity, living his life in concert with the theory he teaches and advocates. As a result of Dr. Wubbolding's incredible passion, energy, courage, and character, he has been able to articulate an approach that is both need satisfying and effective. His impact and resulting legacy will affect all eternity has he will always be considered a seminal leader in the counseling field.

Dr. Mark J. Britzman, LP, NCC, CCMHC, CTRTC

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A tribute to Dr. Robert E. Wubbolding:

Since I completed my own certification in Reality Therapy in 1980 I have been able to work alongside Dr. Robert Wubbolding on many, many occasions. Notably, in each instance Bob has demonstrated to all concerned his outstanding talents as a presenter, author, role player, therapist, researcher, and (most of all) as a friend. Bob really goes the extra mile in every instance to always help others to like themselves, and strives to help them to gain in

knowledge and understanding. In my estimation, Bob truly is a "Master Teacher" in every respect, and (besides Dr. Glasser himself) has been the strongest advocate I have ever known for Choice Theory and Reality Therapy. As an editorial board member of the International Journal of Choice Theory and Reality Therapy Bob has labored tirelessly to help me provide the membership with a highly professional journal that should be an asset to all who read it. Furthermore, Bob is the most published author in the WGI organization, and his works are often considered to be the "final word" for those involved in Choice Theory, Reality Therapy, Quality Schools, and/or Lead Management. I consider it to be a great privilege to have worked so often with Bob on several worthwhile projects, and am fully aware that he is 110% committed to advancing Choice Theory-like concepts both nationally and internationally. Above all, Bob is truly loyal and totally committed to promoting these concepts and the individuals who share them with others. He is a special friend to all, for which I am very grateful.

Best wishes to Bob, and to Sandie, too, since they have continually worked together to aid Bill and Carleen Glasser in all that they wished to do. The fact that so many testimonial letters have been submitted to attest to the fine efforts by Bob, on behalf of so many that he has helped, further attests to Bob's unceasing desire to aid and assist in any way possible, all those with whom he has interacted throughout his involvement with The William Glasser Institute, its members, and its friends. He has been a true benefactor to so many, hence, it's time that we gratefully thank him (and Sandie too) for all they have done so often in the past, and likely even more in the years yet to come!

Thank you for the fond memories, past, present, and future.

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

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A tribute to Dr. Robert Wubbolding:

Hats Off Tribute to Bob Wubbolding as Director of Training. Yes, everyone associated with WGI should publically join with me to acknowledge his fine work as the Director of Training for twenty-eight years, and for many other contributions, e.g., (a) promoting the growth of reality therapy and choice theory in many cultures worldwide by personally going to those countries, teaching the ideas there and helping them develop their own organizations, (b) calling for research on the use of those ideas in various cultures, (c) seeing the ideas reflected accurately in universities and within counseling organizations, (d) writing books, (e) dealing with ethical issues, (f) serving on the Advisory Board and Professional Development Committee, and (g) having a presence at Certification functions and conferences. Bob made himself available to discuss Institute business 24/7 whether or not he was in town or not. His commitment to our mission and the survival of our organization into the future is unquestionable. He has also been active in sharing his ideas on the Interim International Board of Directors. One of my greatest joys at certification sessions was to watch a true Master Teacher at work as he role-played with challenging clients. It was such a privilege to watch his creativity – his sensitivity to the client's world, his attention to ethical issues, his use of paradoxical techniques and well-timed humor.

On behalf of the Glassers and myself, thank you Bob for all you have given through many exciting and challenging years with The Institute. We have entered a new phase of growth

as an organization and I know you will continue to teach these ideas to the world and touch the lives of many. I know you already have.

Your Associate and Friend,
Linda S.Harshman, MSW

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A tribute to Dr. Robert Wubbolding:

Bob Wubbolding has been a loyal advocate of my ideas since the earliest days of the Institute Training Programs. He has diligently held various important leadership roles at the Institute and contributed greatly to the spread of my ideas as a master instructor, presenter, and author of many books and articles on Reality Therapy and Choice Theory.

I appreciate his huge contributions and his outstanding innovations in the teaching and understanding of Reality Therapy. We are all indeed fortunate to have Dr. Wubbolding in our organization for all these years and hopefully for many more years to come. I personally am very grateful to have him as a valued colleague and true friend.

Sincerely,
William Glasser,M.D.

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A special tribute to Bob Wubbolding:

Every person above the ordinary has a certain mission that they are called to fulfill.
- Johann Wolfgang von Goethe

We may attribute genius, talent and many God-given gifts to Bob, but *extraordinary* encompasses all of these for me: a person of moral character, outstanding knowledge, excellent skill, and sharp wit. *Extraordinary* as prolific author, consultant, counsellor, humanitarian, mentor, psychologist, practitioner of reality therapy, teacher, trainer, and friend. Thank you, Bob, for your friendship and support and may our new organization continue to seek your counsel so we may tap into the wealth of qualities and talents you possess.

Jean Seville Suffield, WGI
Senior Faculty