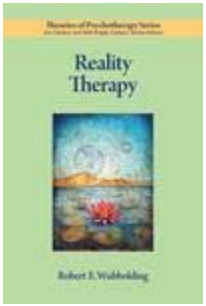
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Helping Clients Gain Control, Evaluate Choices, and Fulfill Needs: The History and Contemporary Practice of Reality Therapy

A Review of

Reality Therapy
by Robert E. Wubbolding
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Reviewed by

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Over a 50-year span, psychiatrist William Glasser has authored 30 books and countless articles in which he has put forth a conceptual framework (choice theory) and clinical counseling method (reality therapy). The task of condensing this erudite and wide-ranging volume of work has been undertaken in impressive style by Robert Wubbolding. *Reality Therapy*, a title in the American Psychological Association's (APA) Theories of Psychotherapy series, conveys, in just 162 pages, the essence of Glasser's work and successfully summarizes both theory and practice; a reader who has never been introduced to Glasser will have a keen understanding of the evolution and the actual practice. Never before have we seen such a thoughtful and useful abridgment as that achieved by Wubbolding.

The first part of Wubbolding's book focuses on the evolution of choice theory and its relationship to analogous psychotherapeutic concepts such as rational emotive therapy, multimodal therapy, Adlerian psychology, and gestalt therapy. Parenthetically, we would add two comparable models to the list: positive psychology and invitational education. Shawn Achor's (2010) research in positive psychology at Harvard over 10 years has demonstrated the impact of changing present behavior to increase happiness and accomplish personal goals.

Glasser (2003) has also written of the association between happiness and mental health. Purkey's extensive work in invitational education and counseling cites the importance of a person's perceptual world, parallel to Glasser's quality world (Zeeman, 2006).

Wubbolding correctly likens Glasser to the existential therapists who "emphasize our freedom to choose what to make of our circumstances. We are not victims of circumstance because, to a large extent, we are what we choose to be" (p. 29). The author writes of Glasser's mentor, G. L. Harrington, who advocated "a more democratic doctor–patient relationship, which he believed promoted mental health more efficiently, thus deviating from the traditional theory and methodology that pervaded the psychoanalytic approach to mental health" (p. 10).

Even in his very first book, Glasser (1960) wrote, "What is important is what is happening now . . . recounting of the past serves to insulate the patient from the important details of the present where his defective ego is now functioning" (p. 168). This seminal idea of Glasser paved the way to choice theory, as Wubbolding

succinctly elaborates in the section Human Motivation—Human Needs: Why People Do What They Do (p. 31). As Glasser (1984) himself is widely quoted, “It is almost impossible for anyone, even the most ineffective among us, to continue to choose misery after becoming aware that it is a choice” (p 77).

The author provides a lucid account of Glasser’s explanation of basic human needs: survival, belonging and affiliation, power, recognition and self-esteem, freedom and autonomy, fun and enjoyment. Wubbolding goes on to explain the essential concept of *quality world* and how it relates to goal-directed, purposeful behaviors. The author successfully integrates theory and practice with case studies, therapist–client discourse, helpful charts, and the fundamental acronym WDEP: W = discovering what the client wants and the level of commitment; D = what the client is doing, also described as total behavior; E = evaluating the behavior; and P = developing a plan for the future.

As Wubbolding illustrates, total behavior consists of acting, thinking, and feeling, and also one’s physiology. We can modify our thinking and acting and in so doing improve our lives for greater happiness. Another of Glasser’s disciples, D. Barnes Boffey (1993), has called this process “reinventing yourself” and “becoming the person you want to be” (p. 121). Wubbolding makes clear that reality therapists consistently underscore that “the only behavior we can control is our own” (p. 61). As Glasser (2005) wrote:

> External control is very simple. In a relationship it is a belief that what we choose to do is right and what the other person does is wrong. Husbands know what’s right for their wives and wives for their husbands. The external control attitude, I know what’s right for you, is what people driven by power use when they are in an unhappy relationship. One or both may use it but even if only one uses it consistently it will eventually destroy that relationship. As I said, we are social creatures. We need each other. Teaching everyone the dangers of external control and how it can be replaced with choice theory, is the heart and soul of a successful public mental health program. (pp. 20–21)

Glasser (2000, p. 13) has extended this psychology to students and teachers: “Keep in mind that the success of any human endeavor—learning in school certainly included—is directly proportional to how well people involved in the endeavor get along together.” Although Wubbolding’s focus is on choice theory and reality therapy, he does acknowledge Glasser’s (1969) contribution to education, citing the publication of *Schools Without Failure* and briefly discussing Glasser’s concept of quality schools.

Wubbolding illustrates clearly the differences between reality therapy and other approaches, particularly Glasser’s emphasis on therapist and client as full partners. “As with all therapy theories and methods, well-timed interventions based on a firm therapeutic alliance are central to a client’s decision to alter behavior resulting in improved mental health” (p. 47). The author cites a sampling of studies supporting the efficacy of reality therapy and exploring its applicability across cultures. He points out that the effectiveness of reality therapy is well established in many varied settings. However, he recognizes that “more research is necessary” (p. 113).

One of our favorite sections is the author’s explanation of “relationship toxins” and “relationship tonics” (p. 72). He goes on to describe that another essential ingredient of the therapy process is ascertaining the client’s level of commitment. These descriptions, and many others, provide precise guidance for the practitioner. He is also careful to explain that reality therapy is compatible with APA ethical guidelines. Notably, the author is vigilant in reminding the reader to practice with empathy, circumspection, and caution. Wubbolding continually reviews basic principles before presenting each new concept, providing a concise yet comprehensive guide to the reality therapy system.

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