Reality Therapy is a counseling method that was developed by Dr. William Glasser in 1965. However, it is so much more than a counseling technique. Reality Therapy is a problem solving method that works well with people who are experiencing problems they want help solving, as well as those who are having problems and appear to not want any assistance. Reality Therapy also provides an excellent model for helping individuals solve their own problems objectively and serves as the ideal questioning series during coaching sessions.

The underlying key to Reality Therapy is the relationship that is established with the person who needs the help. This is most critical when you are attempting to help someone who doesn’t really want your help, such as a non-voluntary client, a resistant student or your sometimes even your own child. Without a positive relationship, you have no influence. To your helpee, you sound similar to the way adults sound in the Peanuts cartoons, “Whaa, wha, whaa, whaa.” Your helpee doesn’t hear you without the relationship. Gary Zucov says, “Relationship is the root of all influence.” This is certainly true. You can have all the knowledge in the world but if the person you are attempting to help doesn’t believe you care and have their best interests at heart, they, most likely, will not be listening to you.

So how do you build a relationship? Reality Therapy provides a model by instructing helpers to create a need-satisfying environment. The five basic needs of all humans are survival; love and belonging; power; freedom and fun. So, in a helping relationship, the helper must create an environment where it is possible for the person being helped to feel safe; to feel connected to the helper in some way; to be listened to and respected; to have some choices; and to have some fun or learning with the helper. After creating this need-satisfying environment and working hard to maintain it throughout the relationship, the helper can move on to the actual problem.

After hearing the person’s story, the helper needs to determine what the ideal solution would look like from the other person’s point of view. So, for example, if the person were complaining about a fight he had with his girlfriend, ask the question, “What do you want to happen? How do you want this to work out?” It is critical to get a specific picture of what the ideal solution will look like from the perspective of the person experiencing the problem. The helper is leading him or her away from the problem and into a problem-solution mode. In this way, the focus is off the past and the problem, which cannot be changed. The focus instead is on the behavior the person can create to move himself in the direction of the solution he wants.

The next step is to take an inventory of all the things the person is doing to attempt to get the situation to work out the way he or she wants. The helper asks the person to list the steps he or she is taking to move closer to his or her goal. Typically, the person will only list positive things, but the helper needs to ask them to consider everything he or she is doing that is both helping and hindering his or her progress. It is even acceptable for the
helper to add in some observations of his or her own. The point is to get as complete a picture as possible. In addition to considering one’s outward behavior, ask about their thoughts, feelings and physiology (if appropriate), as well.

The next step is the most crucial in the entire process. In the next step the helper asks helpees if their current behavior is likely to get them what they say they want. This is the step where the helper comforts the afflicted and afflicts the comfortable. If the person is already aware that what he or she is doing is not working, then they are already in distress and ready to try something different. So the helper comforts the afflicted by helping them find a solution. On the other hand, if the person is unaware that he or she needs help, this will be the step that drives the point home. Answering this question is likely to afflict the comfortable by holding up a mirror of their own behavior and asking if it is likely to be effective in getting what he or she wants. If the answer is no, then they generally experience enough discomfort to at least look at some alternatives.

The final step in the Reality Therapy process is to help the helpee come up with a plan to do something more effective. This is best accomplished by helping the person focus on those things that are within his or her control—his or her own thoughts and actions. We don’t help a depressed person by simply saying, “Cheer up!” People cannot directly control their feelings but they can directly control their actions and thinking. Similarly, people like to focus their time and attention on what others could and should do to give them what they want but attempting to control others is generally a fruitless activity. Helping people to focus on changing their own behavior and thoughts is generally the goal of Reality Therapy.

Of course there are many subtle nuances to the process and I have only provided a thumbnail sketch of the process, but you can easily see a variety of applications as mentioned in the introduction to this article. If you are interested in further training in the subject, please go to http://www.realitytherapycentral.com

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