### CHAPTER \_ I

### EDUCATION, PSYCHOLOGICAL EDUCATION, REALITY THERAPY

#### 1.1 Introduction:

The present study deals with "Reality Therapy" - a psychological education program in schools. In order to properly situate the study and Reality Therapy in the context of education, the investigator has attempted to start this research report with a brief account of the concept of education itself.

#### 1.2 Concept of education:

Since the word "education" is used in so many ways, the concept of education is much difficult to define. Different educational thinkers have given different definitions of education in different ages. From all these definitions one could find out what education means to different persons and how its meaning had been altered from time to time, from society to society and from culture to culture.

Plato wrote, "By education I mean that training which is given by stable habits to the first instincts of virtue in children when pleasure and pain are rightly implanted in non-rational souls. The practical training in respect of pleasure and pain which leads you to hate and love, what you ought to hate and love is called education." (Plato, Republic 1945)

Russell defined education as follows, "I call therefore a complete and generous education that which fits a man to perform justly, skillfully, and magnanimously all the offices both public and private of peace and war". (B.Russell - Education and the good life 1926)

Lodge wrote "Education is equivalent to experience - the experience of a living organisms interacting with its normal environment." (Lodge, R. - Philosophy of Education 1937)

According to Horne, "Education is the eternal process of superior adjustment of the physically and mentally developed free conscious human being to God as manifested in the intellectual, emotional and vocational environment of man." (Horne, Herman - The democratic Philosophy of Education, 1935)

Langford suggested, "Education is an activity which aims at theoretical results". (Feeling & Form, 1953)

Sometimes one also speaks of life itself as being educational and in this sense one usually has in mind the idea that if school room activities are educational then there are many similar ones taking place outside the school that have the same kind of impluence on us.

Education in this sense designates the broader process whereby we come to accept the goals and values of our society and for this we can talk of education as being a lifelong process ( Hopkins 1941 )

Again we can say that the term 'education' designates that basic social process whereby individuals acquires the culture of their society, we call this the process of socialisation, which is acquired through both formal and informal means.

But education is also equivalent to socialisation and in this sense it is a wholly conservative process. This conception has always been criticised and attacked be cause it provides no wider goals for men. Western civilisation has developed a third level of meaning for the term "education", that is adaptation with the environment. According to this view some degree of adaptability to varying circumstances must occur if it is to survive.

Besides all the above mentioned views there are various view-points about education and the learned people differ among themselves to come to a precise definition of education.

#### For example :-

- Is education the process of drawing out of children, ideas' that lie implicitly imbedded in their minds?
- Is it the process of developing abilities that are innately part of everyone's human nature?
- Is it the process of activating the brain so as to acquire record and store organized bodies of fact and value?
- Is it the process of writing and rewriting social experience on the "tabuls Rasa" of the individual?
- Is it the process of raising children to adjust to and live in a certain kind of society?

These questions though they have different conceptions, imply the following conclusion.

First, education cannot be all of these things, because the above mentioned views are contradictory and they cannot exist with each other to give an adequate definition of education.

Secondly, whatever education may or may not be, it is evidently a process.

Thirdly, a more careful inspection of these alternatives reveal atleast three basic approaches to the process of education.

They are :-

- a) Education as manifestation
- b) Education as acquisition
- c) Education as transaction.

### a) Education as manifestation:

According to this view Education is the process of making manifest what is latent in each child (Brauner, 1964)
Those who adhere to this view believe that education can be described as an analogy to the growth and development of flowers in which the latent potentialities of the seed bloom into the manifested splendor of the mature flower.

Analogically the child is the seed in which all the unrealized potentialities lie dormant, the teacher is the gardener whose tender loving care will help to unfold these hidden promises and education is the teaching of gardening process by which these unseen capacities will become visible through the judicious choice of fertilizers.

### b) Education as acquisition:

This approach to education places more emphasis on the ability of man to acquire information by inquiry into the nature of the mexternal world (Cowley 1957). Here inquiry is more a process of taking in what exists outside then learner, rather than a process of bringing out what exists internally in him.

This school believes that the brain of the child like a sponge never completely dries out, for it exists in a world that is constantly spraying it with drops of information.

#### c) Education as Transaction:

A third view sees education as transaction (Scheffler, 1960), the process of give and take between man and his environment. Through this process, man develops the skills needed to modify and improves the conditions of his environment and which guides his efforts in guiding and reconstructuring the human as well as physical nature.

## 1.3 The Goal of Education:

However, the goal of the education from society's view point then is the production of adequate person - people who can be counted upon the behave effectively and efficiently and to contribute freely to the welfare of all.

The term adequate person may be defined as one who :-

- a) perceives himself in essentially positive ways.
- b) is open to his experience and capable of accepting self and others.
- c) is strongly and broadly identified with others.

These perceptual characteristics of adequate persons define more specifically the goal of education. An adequate educational system which produces these kinds of perceptual characteristics in its students is successful. A system which fails to affect these important criteria has no doubt failed.

Therefore the broad purpose of education is to facilitate the integration of a student's total personality in such a way as to maximize knowledge and skill development for productive living.

When we educate students we help them to develop their own unique personalities by sbringing out their ideas and feelings into communication with others, breaking down the barriers that produce isolation in a world where for their own mental health and physical well-being they must learn to be a part of the human race (Rogers, 1961).

Similarly Hopkins (1941) advanced the idea that education is a continuous and lifelong process and should therefore also be concerned with life coping skills not just the classroom or academic subjects isolated from the larger world.

Therefore it seems reasonable to help students to develop the skills necessary for establishing and maintaining an effective interpersonal relationship.

Clearly our schools have a tremendous important role to perform in our culture. Unfortunately, we have not always provided our teachers with the proper training that would help to ensure the development of adequate personality in the students' best interest. However in considering where to concentrate our efforts at creating a healthier society, psychological education is emerging as a potential force in the schools. The main purpose of psychological education is to use classroom situations as a means for promoting personal growth and development.

More specifically, psychological education :-

- a) Accepts the learners' needs and purposes and develops experiences and programs around the unique potential of the learner.
- b) facilitates self-actualization and strives to develop a sense of personal adequacy.

- c) fosters acquisitions of basic skills necessary for living in a multicultural society including academic, personal, interpersonal, communicative and economic proficiency.
- d) personalizes educational decisions and practices.
- recognizes the primacy of human feelings, personal values and perceptions as integral factors in educational processes.
- f) develops a learning climate that is challenging, understanding, supportive exciting and free from threat.
- g) develops in learners genuine concern and respect for the worth of others and skill in conflict resolutions.

The programmes of psychological education promise to meet all these demands.

Having inquired into the concept of education in general and psychological education in particular, we may turn our attention to one of the prominent form of Psychological Education Program prevalent especially in the American schools, namely the Reality Therapy of Dr. William Glasser.

## 1.4 Reality Therapy - its nature and concept:

Reality Therapy was developed by Dr.William Glasser who founded the Institute for Reality Therapy in Los Angeles, California (U.S.A.) in 1967. He believes that all people are born with atleast two built in needs.

- a) The need to belong and to love.
- b) The need to compete for worth and recognition.

According to Glasser, we spend our lives struggling to satisfy these needs and when we can't, we suffer. Through a series of well defined steps Reality Therapists teach people who struggle unsuccessfully to satisfy these needs more effectively.

#### 1.5 History and Development:

When Dr. Glasser finished Western Reserve University Medical School in Gleveland Ohio (U.S.A.) in 1953 and later in his psychiatric residency in Los Angeles, he had been taught that the psychiatric patients were the victims of people and events beyond their control. To help them he would have to deal extensively with their past and concentrate on how they feel about those events.

His early work was in a California School for delinquent girls, the Ventuara School, where he learned quickly that unless he developed a better way to help these girls to deal with the world, they would probably return, With G.L. Harrington he developed the ideas which soon came to be known as Reality Therapy. A detailed description of the development of this therapy can be found in Glasser's book "Reality Therapy - a new approach to psychiatry". (1965) N.York Harper & Row.

Since then Glasser and those he has trained have taught Reality Therapy to people working in every possible therapeautic situation—individual and group therapy, school counseling, rehabilitation, correction, Mental hospitals and others specific cases showing the diversity of the use of Reality Therapy, and are described in the book "What are you doing" (1980, Glasser). It shows how the basic theory has been applied not only to widely diverse individuals but also to entire programs such as schools, correctional facilities, and mental hospitals.

There is example that entire school districts have trained personnel to understand, teach and discipline their students following Glasser's book "School without failure".

The detailed description of the therapeutic process of Reality Therapy is as under.

### 1.6 The Therapeutic Process of Reality Therapy:

a. Therapeutic Goals: The overall goal of Reality Therapy is for individuals to find more effective ways of meeting their needs for belonging power, freedom and fun. At his workshop Glasser stresses that counseling consists of helping clients to learn ways to regain control of their lives and to live more effectively. This includes confronting clients to examine what they are doing, thinking and feeling to figure out if there is a better way for them to function.

Reality Therapy focuses on what clients are conscious of and then to increase their level of awareness. All clients become aware of the ineffective behaviours they are using to control the world, they are more open to learning alternative ways of behaviour. Unlike many other approaches, Reality Therapy is concerned with teaching people these more effective ways to deal with the world. The core of Reality Therapy is to help clients to evaluate whether their wants are realistic and whether their behaviour is helping them. It is the clients who decide if what they are doing is getting them what they want and they determine what changes if any they are willing to make. After they make this assessment they are

assisted by the counselor designing a plan for change as a way of translating talk into action.

Glasser (1989) emphasizes that the only person's behaviour that we can control is our own which means that the best way to control events around us is through we do.

b. Therapist's function and Role: The reality therapist's job is to get involved with clients and to develop a relationship with them that will lay the groundwork for the rest of the counseling process. The counselor functions as a teacher by being active in the sessions, helping clients to formulate specific plans of actions offering them behavioural choices and teaching them control theory. Therapist challenge clients with the basic question of Reality Therapy.

Is what you are choosing to do getting you what you want.

If the clients make the judgement that what they are doing is not working, therapist may suggest an alternative course of action (William Glasser 1989). The counselor also teaches clients how they can create a success identity by recognizing and accepting accountability for their own chosen behaviours (Glasser, 1986). This role requires counselor to perform several functions.

- a) providing a model for responsible behaviour and for a life based on a success identity.
- b) establishing rapport based on care and respect.
- c) focusing on the individual's strengths and potentials that can lead to success.

- d) actively promoting discussion of client's current behaviour and discouraging excuses for irresponsible or ineffective behaviour.
- e) introducing and fostering the process of evaluating realistically attainable wants.
- f) teaching clients to formulate and carry out plans to change their behaviours.
- g) establishing a structure and limits for the sessions.
- h) helping clients find ways to meet their needs and refusing to give up easily even if clients become discouraged.
- c. Application Therapeutic techniques and Procedures:

  The practice of Reality Therapy can best be conceptualized as the cycle of counseling which consists of

two major components.

- a) The counseling environment and
- b) The specific procedures that lead to changes in behaviour.
- d. The Counseling Environment: Personal involvement with the Client: The practice of Reality Therapy begins with the counselor's efforts to create a supportive environment within which clients can begin to make changes in their lives. To create this therapeutic climate counselor must become involved in the clients' lives and establish rapport. This involvement occurs through a combined process of listening to the clients' story and skillfully questioning.

## e. Counselor's attitudes and behaviours that promote change:

Counselor consistently attempts to focus clients on what they are doing now. They also avoid discussing client's feelings or physiology as though these were semerate from their total behaviour. Counselors help their clients to see connections between what they are feeling and their concurrent actions and thoughts. Although Reality Theraphsts focus on the actions and thoughts of clients they consider it guite legitimate to talk about feelings and physiology. When people begin to act differently they also begin to feel differently. Counselors hope to teach their clients to value the attitude of accepting responsibility for their total behaviour. Thus they accept no excuses for irresponsible behaviour, even though they recognize that ineffective behaviour is still the client's best attempt to get what is wanted. If clients do not follow through with their agreed plans for change, counselors are likely to help them reassess the situation. yet they are firm in their refusals to accept excuses. Reality Therapists show clients that excuses are a form of self-deception that may offer temporary relief but ultimately leads to failure. By refusing to accept excuses counselors convey their belief in the clients' ability to regain control. Reality Therapy holds that punishment is not useful means of changing behaviour. Instead of being punished individuals can learn to accept the reasonable consequences that follow from their actions. By not making critical comments by refusing to accept excuses and by remaining nonjudgemental, counselors are in a position to ask the clients if they are really interested in changing.

f. Procedures that lead to change: Exploring wants needs and perception: In this phase Reality Therapists ask "What do you want? Through the therapist's skillful questioning clients are encouraged to recognize, define and refine how they wish to meet their needs. Part of counseling consists of the exploration of their picture album and the ways in which their behaviour is aimed at moving their perception of the external world closer to their inner world of wants. The skill of Reality Therapy involves counseling in a noncriticizing and accepting way so that clients will reveal what is in their special world. Clients are given the opportunity to explore every facet of their lives, including what they want from their family friends and work. Furthermore, it is useful for them to define what they expect and want from the counselor and from themselves (Wubbolding 1988).

This exploration of wants needs and perceptions should continue throughout the counseling process because the client's pictures'change. After clients explore their picture album they are later asked to look at their behaviour to determine if what they are doing is getting them what they want.

g. Focus on current Behaviour: Reality Therapy stresses current behaviour and is concerned with past event only in so far as they influence how the client is behaving now. The focus on the present is characterized by the question so often asked by the reality therapist what are you doing? Even though problems may be rooted in the past clients need to learn how to deal with them in the present by learning better ways of getting what they want. Glasser (1989) contends that no matter how frustrating the past was, there is way through which either the client or the therapist can undo these frustrations. What can be done now is to help clients make more need satisfying choices.

Reality Therapy concentrates on changing current total behaviour, not mere attitudes & feelings. That doesn't imply that attitudes are dismissed as unimportant, rather total behavioural change is easier to effect than attitudinal change and it is of great value in the therapeutic process. For that reason a client who expressed feelings of helplessness would not be questioned about the reasons for the feelings but would be encouraged to describe a time when he was not helpless. What was he doing then that is different from what he is doing now.

Although the Reality Therapist might encourage the client to discuss feelings, the focus would be clearly on the acting and thinking part of the total behavioural system. The therapist would urge the person to identify those thoughts and actions that accompanied the feelings. The aim is to help clients understand their responsibilities for their own feelings: Questions such as the following are likely to be asked.

- What are you doing now?
- What did you actually do this past week?
- What did you want to do differently this past week?
- What stopped you from doing what you say you want to do?
- What will you do tomorrow?

Listening to clients talk about feelings can be productive but only if it is linked to what they are doing.

When clients talk about problems-feelings the counselor rather than focusing on these feelings needs to encourage them to take action by changing what they are doing and thinking. According to Glasser (1980,81,85,89) what we are doing is easy

to see and impossible to deny and thus it serves as the proper focus in the therapy. Discussions centering on feeling without strongly relating them to what people are doing are counterproductive (Glasser 1980) Briefly then the focus of Reality Therapy is on gaining awareness of current total behaviour because this process contributes in helping a person get what he or she wants and to develop a positive self image.

#### h. Getting Clients to Evaluate their Behaviour:

Asking clients to evaluate each component of their total behaviour is a major task in Reality Therapy. When therapists ask a depressing client, if this behaviour is helping in the long run, they introduce the idea of choice to the client. The process of evaluation of the doing thinking feeling and physiological components of total behaviour is within the scope of the client's responsibility. From the reality therapist's perspective it is acceptable to be directive with certain clients at the beginning of the treatment. This is done to help them recognize that some behaviours are not effective. ing with clients who are in crisis, it is sometimes necessary to suggest straight forwardly what will work and what will not. Other clients need direction early in the course of treatment such as alcoholics and children of alcoholics, for they often do not have the thinking behaviour in their control, to be able to make consistent evaluations of when their lives are seriously out of effective control. These clients are likely to have blurred pictures and at times not to be aware of what they want or whether their wants are realistic. As they grow and continually interact with the counselor they learn to make the evaluations with less help from the counselor (Wubbolding 1988) Some clients insist that they don't have a problem and that their behaviour is not getting them into trouble. It is essential counseling can't be successful unless the counselor can accept that what the client perceives may be far different from what the counselor and tother who are close to the client may see (Glasser, 1986). In such cases Glasser (1986) suggests that counselor should then continue to focus on the client's present behaviours through the process of skillful questioning. He says that patience is important, for difficult clients may take considerable time to realize that certain behaviour pattern are not getting them what they want and that their behaviour is not taking them in a direction they want to go.

Planning and Commitment: Once clients determine what they want to change, they are generally ready to explore possible behaviours and formulate an action plan. After plans have been formulated by a joint effort between the counselor and the client a commitment must be made to carry them out. Much of the significant work of counseling consists of helping clients identity specific ways to fulfill their wants. The process of creating and carrying out plans is how people gain control over their lives. This is clearly the teaching phase of counseling which is best directed toward providing clients with new information and helping them find more effective ways of getting what they want. The purpose of the plan is to arrange for successful experiences. Throughout this planning phase the counselor continually urges clients to assume responsibility for their own choices and actions. This is done by reminding them that no one in the world will do things for them or live their life for them. Wubbolding (1988) devoted a full chapter to planning & commitment explaining that clients gain more effective control over their lives with plans that have the following characteristics.

- (a) The plan should be within the limits of the motivation and capacities of each client. Skillful counselors help members identify plans that involve greater need fulfilling payoffs.
- (b) Good plans are simple and easy to understand. Although they need to be specific, concrete and measurable, they should be flexible and open to modification as clients gain a deeper understanding of the specific behaviours that they want to change.
- (c) Plans should be realistic and attainable. Counselors can help clients recognize that even small plans will help them take significant steps towards their desired changes. The plan should involve a positive action & it should be used in terms of what the client is willing to do.
- (d) Counselors should encourage clients to develop plans that they can carry out independently of what others do. Plans that are contingent on others lead clients to sense that they are not steering their own ship but are at the mercy of the ocean.
- (e) Effective plans are repetitive and ideally are performed daily. For example clients can choose to take the initiative by approaching others first to achieve something to have fun and to act independently.
- (f) Plans should be carried out as soon as possible.

  Counselors can ask questions as what are you willing to do
  to day to begin to change your life?

The client may say that he would like to stop depressing. What are you going to do now to attain this goal.

- (g) Effective planning involves process centered activities. For example clients may plan to do any of the following.
  - a) Apply for a job.
  - b) Write a letter to a friend.
  - c) Take a yoga class etc.

Before clients carry out their plan, it is a good idea for them to evaluate it with their therapist to determine if it is realistic and attainable and if it relates to what they need and want.

After the plan has been carried out in real life it is useful to evaluate it again. The counselor needs to ask:

Is your plan helpful ?

If a plan does not work it can be reevaluated and alternatives can be considered. In order for clients to commit themselves to their plan, it is useful for them to firm it up in writing.

Resolutions and plans are empty unless there is a commitment to carry them out. It is up to each client to determine ways of taking these plans outside the restricted world of therapy and into the every day world. Effective therapy can be the catalyst that leads to self-directed responsible living.

### 1.7 Special Procedures in Reality Therapy:

Four special procedures that can be appropriately used to augment the practice of Reality Therapy are:

- a. The skillful use of questioning.
- b. Self-help techniques for a personal growth plan.
- c. The use of humor, and
- d. Paradoxical techniques.
- (a) The art of skillfull questioning: Because Reality Therapy uses questioning to a greater degree than many other approaches, counselors need to develop extensive questioning skills.

Four main purposes for questioning procedures are :-

- a) To enter the inner world of the client.
- b) To gather information.
- c) To give information.
- d) To help clients take more effective control of their lives (Wubbolding 1988).

Questioning is often misused by counselors especially those who are inexperienced. Closed questions or ones that simply tap information can be overdone and tend to result in defensiveness and resistance. Open questions that are well timed, however, can lead clients to think about what they want and to evaluate whether their behaviour is leading them in the direction they want to go.

(b) <u>Self-help procedures for a Personal growth program</u> Wubbolding describes his version of an approach to personal growth in his replacement program. This program helps clients to identify specific need fulfilling wants as well as targets

for change. Replacements include do it behaviours in place of give up behaviours and positive symptom behaviours instead of negative symptom behaviours, key questions help clients focus on what they are doing and thinking and how they are feeling. Strategic questions can have the effect of getting clients to identify specific ways in which they can replace a failure identity with a positive identity.

- (c) The use of humor: Several practioners have written about the role that fun and humor have in Reality Therapy. Therapetic humor has an educative corrective message and it helps clients to put situations in perspective. Such humor does not involve hostility, ridicule or lack of respect.
- (d) Using Paradoxical Techniques: Clients in Reality Therapy are generally encouraged to change by direct and straightforward procedure. Yet there are times when clients seems especially resistant to making plans or if they do make plans, they may be resistant in carrying them out. Paradoxical techniques place clients in a double bind so that therapeutic change occurs regardless of the paradoxical directives. Clients may be asked to exaggerate a problematic behaviour. Clients who complain that they can't sleep, are directed to attempt to say awake. By accepting the therapist's directives and thus maintaining the symptom, clients demonstrate control over it and are no longer helpless. And if clients choose to resist the directive and let go of a particular symptom, the behaviour is not merely controlled but eliminated. Paradoxical procedures are usually not used until the more conventional procedures of Reality Therapy have been tried.

### 1.8 Reality Therapy Programmes in School:

Glasser's book "Schools without failure" present an understandable way to apply the idea of Reality Therapy to Schools. Published in 1967, it was the largest selling American book on education during the 1970's. Enthusiasm from educators who were using the ideas of Reality Therapy helped Glasser to found the Educator Training Centre in 1968 to teach how to use the concepts in school. Starting with the educational films and inservice Training programme - The Educator Training Centre has expanded until the staffs now help universities. For example the University of Wisconsin of La Crosse effers Master degree on these concepts.

At least 300,000 teachers in the U.S.A. have been specifically trained by the Educator Training Centre and countless others have taken courses by those who have had this training.

The Educator Training Centre has developed programs which help school personnel to help students and involve them in their learning in a way that helps them to accept responsibility for their behaviour.

Schools which have applied this program report decreases in suspension by 50-80% in junior and senior high schools and vandalism by 40-90%. Improvement in teacher morale and professional growth was also cited as being significant gains by schools.

The implementation of this program can be further understood by reading a book by a principal, Bill Borger's (1979) "Return to Discipline" who applied the principles of Reality Therapy to the students, teachers and counselors in his school. He found that by having everone understood how to help students take responsibility for their own behaviours, school could function in a way that produced more learning.

### 1.9 Criticism of Reality Therapy:

The critiques however did not fail to criticize this therapy. One group argued that this therapy has considerable weaknesses because it attempts to describe the condition of all children in all urban schools rather than focusing on specific types, cases or clearly described student population. They added that the examples of negative school experience are cognate but not necessarily ubiquitous. It was the critiques opinion that most curriculum theorists would agree with some of the criticism of education cited but no evidence is given to support the contention that success will automatically follow if Glasser's teaching strategies are adopated.

The critiques argued that Dr.Glasser had ignored much of what social scientists describe in various Theories of identity, anxiety, perception and motivation. Major curriculum innovations have been ignored in Glasser's Therapy. Fenton's History programme, Hanvey's anthropology programme, Oliver's controversial issue project and Taba's teaching strategies are nowhere to be found in his therapy. Many will find some of his own thoughts about the problems of education expressed in his books, the professionals on the other hand will question the stated etiology of school failure and will be disappointed with the lack of evidence in support.

The critiques thought that the solution which Dr.Glasser proposes offer very little hope to anyone who wants to believe that his impossible dream will be obtained.

The critiques also disagreed with Glasser in his general denial of the significance of the past in understanding behaviour in the present. One critique argued "I do not believe in the game of archaeology or digging in the past, but neither do I believe that, we can totally ignore the past. To me the man who ignores his past is like the one who stands in the rain, arguing about its witness, while becoming drenched". (Thomas Harris 1969)

In answer to that Glasser states "We do not get involved with the patient's history because we can neither change what happened to him or accept the fact that he is limited by his past".

Critiques argued that it is true we can not change the past. Yet the past invariably, insinuates itself into our present life.

Critiques also argued that Glasser has not provided answer to what is wrong with people who cannot perceive reality or whose perception is distorted. What is the answer to those who know what they must do but continually fail to do it?

Another reservation about Reality Therapy is that it does not have a special language with which to report what happened. Glasser states 'the ability of the therapist to get involved is the major skill of doing Reality Therapy but it is most difficult to describe. How does one put into the words the building of a strong emotional relationship quickly between two relative strangers.

According to the critiques Glasser's insistence on a firm commitment would seemingly limit the number of students with whom this approach can be used. Many of the trouble-some

students find their misbehaviour very rewarding and are therefore not inclined to make commitment to change their ways.

Others have already turned out because of early failure
experiences. Commitments does not come easily for such youngsters for they have reached the point where they no longer care.

Another criticism about Reality Therapy is that as valuable as class meetings can be, many teachers feel uncomfortable in conducting class meeting. Some teachers are too authoritarian to use this approach effectively. Other simply lacks the skill required in getting meetings underway and in keeping them going in meaningful ways. Still others are afraid that class meetings will give the student too much power and that they will then take over the class.

But taking into consideration all the above mentioned views one must admit that Reality therapy is a straightforward approach that has considerable appeal. Its stress on the development of personal responsibility, its concern with the child's problems in the real world, its teaching of children to use their brains in the solution of social problems and its reliance on logic and behaviour rather than insight will definitely earn this approach high marks from the practitioner.

# 1.10 Rationale of the study:

Psychological education programme which aims at developing personal aspects of students is totally absent from the Indian educational scene. There is a dire need to introduce such programmes in school education. Today it is emerging as a potent force in the schools and colleges. The main purpose of the present study which is nothing but a psychological education programme is to use the classroom as a means of

promoting personal growth and development. Reality Therapy is nothing but a way of integrating learning about oneself into education systematically - which is an urgent need of the day. In a world that is changing so fast - our well being and effectiveness will depend on how well we are able to relate, communicate understand ourselves and others. Reality Therapy is a way to this goal. When the learning climate is one of acceptance of the learners, as he is and his needs for security and self-esteem are satisfied he can explore new avenues of growth and drive for self-actualization. Reality Therapy contributes to the awakening of interest in the neglected aspects of education. The investigator personally feels that Reality Therapy has great impact on the emotional and personal life of the adolescent students.

With these ideas in mind the investigator wanted to use this therapy practically on groups of school students and tried to find out how far this therapy is effective in the context of Indian educational scene.

### 1, 11 The present study:

The present study is on a psychological education programme based on Dr.William Glasser's Reality Therapy, is a comprehensive approach to organise psychological education in the classroom and to study the impact of Reality Therapy on some selected variables both cognitive and affective. The study is titled as "Preparation, Tryout and study of effectiveness of a Psychological Education Programme on High School students based on William Glasser's Reality Therapy".

### 1.12 Limitation of the study:

It is not possible for a researcher to study a set of phenomena at all a levels and from all possible angles in a time bound research. Limitations of time and resources compels every researcher to delimit his/her research endeavour in respect of scope and level at which the study is ultimately conducted and the present study is no exception, and it has been delimited on the following aspects.

- a) The study will be limited to only a small sample of students. To her knowledge, the present investigator is the first person who has introduced Reality Therapy in the Indian school system. Therefore she will introduced this programme on a small number of students and if it proves effective for the Indian students it can be introduced on a large scale.
- b) The study was restricted to three English medium schools of Baroda. Again, the investigator took a small number of students from each school for the cause mentioned above and conducted the same study in the three schools.
- c) It will be restricted to the students who have learning & other behavioural problem.
- d) It will be restricted to the standard IX students. The investigator had no option in this regard she had to depend totally on school principals opinion on the availability of students.