REALITY THERAPY IN ATHLETIC COUNSELING:APPLICATIONS FOR COLLEGE STUDENT-ATHLETES

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ABSTRACT

Reality Therapy is a useful theoretical framework when working with the college student-athlete population. With its biological foundation in Control Theory, Reality Therapy offers an explanation of how and why human beings behave in this world and provides specific procedures to help clients make positive changes in their lives. This paper briefly outlines the major principles of Reality Therapy/Control Theory and applies them to some common issues facing college student-athletes.

INTRODUCTION

A number of writers (Ferrante & Etzel, 1991; Hurley & Cunningham, 1984; Jordan & Denson, 1990) have described the unique demands imposed on students who choose to participate in intercollegiate athletics. These demands—which include balancing academics and athletics while also developing personal identity and interpersonal relationships—require counselors working with student-athletes to choose appropriate theoretical frameworks. The nature of the student-athlete experience may render some orientations more useful than others. Because time is at a premium and attention is already diverted in a number of directions for both student-athletes and counselors, the most effective approaches are likely to be those which are reasonably easy to understand, comfortable and natural to apply, and versatile enough to be useful in treating a variety of issues. One such framework is Reality Therapy.

William Glasser founded Reality Therapy nearly three decades ago (Glasser, 1965). He has since developed and refined his ideas and has incorporated Control Theory to explain how and why human beings behave in the world (Glasser, 1972; 1985; 1989). This paper briefly outlines the major principles of Reality Therapy/Control Theory and applies them to some common issues facing college student-athletes.

THEORETICAL OVERVIEW

An understanding of the major principles in Control Theory and Reality Therapy is essential for counselors working with student-athletes.

Control Theory

Control Theory makes the argument that all human behavior is a purposeful, internally generated attempt to fulfill four fundamental needs (Glasser, 1985). The four basic needs are belonging/love, power (achievement, self-worth), fun, and freedom. Glasser (1989) explains that human behavior always represents people's "best attempt to control the world so that they may best satisfy their needs" (p. 5). Human beings are said to have "pictures" in their heads of what they would like to be (their "ideal self") and the internal world in which they would like to live.

Out of this internal world human behavior is generated. People sense (look, listen, touch, taste, smell) the world around them and compare what they have to what they want (i.e., the pictures in their heads). When there is a discrepancy between what people have and what they want, the behavior they choose is an attempt to reduce that discrepancy (Glasser, 1989). Control theorists also contend that our behavior is made up of four components: acting, thinking, feeling, and physiology. The operational term for this is "total behavior" (Glasser, 1985).

The following example illustrates the conceptual framework of Control Theory. A client enters therapy and states that he/she is depressed. By using the word "depressed," the client assumes the posture of a victim. The depression is seen as something that simply happened to him/her. Control Theory argues against this mode of thinking. Instead, the client is choosing to depress, and his/her total behavior can be broken down in this manner: feelings (misery, pain); actions (staying in bed, moping around the house); thoughts ("why bother," "I give up," "there's nothing I can do"); and physiology (insomnia, nausea) (Glasser, 1985).

Quite simply, Control Theory states that "we choose all of the important things we do with our lives, which includes how we feel, and to a great extent, even our health" (Glasser, 1989, p. 2). Most importantly, the theory asserts that the only behavior human beings have control over is their own (Glasser, 1985). These ideas provide the foundation for Reality Therapy.

Reality Therapy

Reality Therapy refutes the medical model of mental illness. The term "medical illness" implies that the responsibility for healing someone lies more with the treating agency (i.e., the therapist) than with the client (Glasser, 1965). This theory posits that the problems people encounter occur because they are unable to fulfill their essential needs in a responsible way, often denying the reality of the world around them. In this model, responsibility is defined as the ability to fulfill one's basic needs and to do so in a way that does not deprive others of their ability to satisfy their own needs (Glasser, 1965; 1989).

It is the belief of reality therapists that the concept of responsibility can be learned at an early age by human beings, through exposure to people who care for and discipline them. The key, in terms of this healthy development, is that each individual has one person in this world who genuinely cares and for whom, in turn, he/she cares. In order to learn how to be responsible, people need to love and be loved, as well as feel worthwhile to themselves and others (Glasser, 1965).

The actual practice of Reality Therapy is based on these tenets in addition to the biological foundation provided by Control Theory. There are two major components in the practice of Reality Therapy: (1) establishing a counseling environment conducive to change; and (2) adhering to specific procedures that lead to these changes (Glasser, 1990).

Creating a Safe Environment. To create a warm, safe, supportive environment conducive to change, counselors should consistently follow these five directions (Glasser, 1990; Wubbolding, 1988):

(1) Be friendly with clients. Establish feelings of involvement and trust. Use attending behaviors such as eye contact and non-verbal communication, paraphrasing, summarizing, and self-disclosure. Use humor. Share yourself. Be firm. Be enthusiastic. Be determined. Be ethical.

(2) Avoid discussing the client's past, unless events of the past are easily related to present situations.

(3) Relate the client's feelings and/or physiology to the concurrent actions and thoughts over which they have more direct control. Avoid discussing them as though they were separate entities.

(4) Do not accept excuses for irresponsible behavior. A primary example is the clients not doing what they said they would do.

(5) Avoid punishing and/or criticizing. Avoid protecting clients from the reasonable consequences of their behavior but allow the consequences to occur.

Encouraging Positive Change. There are also specific procedures used by therapists in Reality Therapy to encourage positive change on the part of their clients (Glasser, 1990; Wubbolding, 1988):

(1) Focus on the total behavior of clients (actions, thoughts, feelings, and physiology). Help them to learn the often difficult and painful lesson that all total behaviors are chosen.

(2) Ask clients to describe what they want now (i.e., their present pictures). Expand this discussion to cover the directions in which they would like to take their lives. A simple but useful question to ask the client is, "What do you really want?"

(3) Ask the core Reality Therapy question, "Does your present behavior have a reasonable chance of getting you what you want now, and will it take you in the direction you want to go?"

(4) Often, clients answer "no," which means that where they want to go is reasonable and makes sense, but their present behaviors will not get them there. Counselors should help these clients plan and practice new behaviors.

(5) Sometimes the clients answer "no" but then seem unable to get where they want even though they may try very hard. Counseling should help these clients change directions.

(6) If the clients answer "yes," this means that they do not see anything wrong with their present behavior or the direction in which they want to go. Counselors must then be patient, focus on the clients' present total behaviors, and keep repeating the core question in a variety of ways.

(7) Form a plan. The client and counselor should first agree that the plan has a good chance of succeeding, that it is realistic and attainable. Once a plan is agreed upon, ask the client to make a commitment to follow through with it. Commitments may be oral and/or written. Assigning homework is an option.

(8) Do not give up. Even if the client does not follow through with the plan, stay determined. If the counselor gives up, that may confirm the client's belief that no one cares enough to support and help.

APPLICATIONS FOR STUDENT-ATHLETES

These guidelines and procedures are extremely appropriate for work with college student-athletes. Student-athletes are faced with the challenge of balancing a full-time academic courseload with full-time participation in intercollegiate sports (Jordan & Denson, 1990). Added to the mix must be some time devoted to socializing and sustaining relationships. In order for student-athletes to succeed in all of these areas, personal responsibility and discipline are placed at a premium. Reality Therapy stresses the concept of responsibility. If they are to succeed in their college educational lives, student-athletes are forced to make good choices and maintain a sense of control. Control Theory supports this notion. In addition, the practice of Reality Therapy is designed to be a relatively short-term, intensive, teaching/training therapeutic model (Glasser, 1965; Wubbolding, 1988). Because of the time

constraints facing student-athletes, a great deal of work must be accomplished in a limited amount of time. Again, Reality Therapy is compatible with the needs of college student-athletes.

In the next three sections of this paper, the applicability of Reality Therapy to the academic, career, and athletic issues often encountered by student-athletes will be briefly detailed. The fourth section will include a summary and offer several conclusions.

Academic Performance

Of all the aspects of their college lives, the most important one for student-athletes to succeed in is academics. Three central types of academic development can be observed among this population: (1) student-athletes who do outstanding schoolwork in college and earn solid grades, much as they did during their high school years; (2) student-athletes who demonstrated some intellectual ability in high school but have not successfully navigated the transition to college-level work; and (3) student-athletes who have shown neither strong aptitude nor achievement in high school and maintain that pattern in college.

The first type of student-athlete generally does not occupy a great deal of the athletic academic advisor's time and/or resources. Simply encouraging the use of previously successful strategies may be sufficient for these individuals. However, the other two types of student-athletes may benefit from some of the procedures outlined in Reality Therapy.

Student-athletes in academic jeopardy may be scheduled into weekly meetings with counselors for the purpose of checking on their progress. These meetings, which usually do not last longer than thirty minutes, serve many important objectives. The student-athletes and counselor can review the past week and discuss the tasks the student-athletes must accomplish in the weeks ahead, especially in terms of academics. A calendar or planner can also be maintained to help further improve time management skills, and "to do" lists can be prepared for the upcoming week.

When the student-athletes fulfill their tasks and complete their required assignments in a responsible manner, it is critical for the counselor to be very enthusiastic and supply positive reinforcement. Words of praise and congratulations, hand shakes, back slaps, and even "high five's" are often warmly received by student-athletes and help to encourage increased responsible behavior in the future.

In the event that student-athletes neglect their responsibilities, the counselor must not accept any excuses for this behavior. It is important not to criticize or punish, nor to spend time dwelling on the problems the irresponsibility may have caused. The best response is to help these young people plan what they need to do now to rectify the situation. The counselor must allow the consequences of irresponsible behavior to occur (e.g., poor

grades or disciplinary action) and then focus on the necessary changes the student-athletes must make to prevent this situation from repeating itself. Always remember this key question when dealing with the irresponsible behavior of any client: "What do you really want?" Most often, the student-athletes want to do well in school, and it is the counselor's job to help them plan and practice new behaviors (e.g., new study skills) in order to realize this goal.

A simple case example may provide additional clarification of these points. I recently began to see a first-year student-athlete who was doing very poorly in his second semester of classes. "Bob" is a gifted football and baseball player, as well as an extremely personable and bright individual. When I received his mid-semester academic report cards, I noticed a significant drop-off in his grades compared to the previous semester. I called him and asked him to stop by the office the following day.

This student-athlete did come to the office the next day. It should be mentioned that, if he had not come to see me within a couple days of my call, I would not have initiated contact again. The student-athletes make the decision/choice either to accept or reject the support that is available if they choose to use it. In addition, a key concept of Reality Therapy is encouraging an increased sense of responsibility on the part of the clients.

When Bob and I met, I expressed my concerns. I told him that I was surprised to see his poor mid-semester grades because they were not usual for him. He agreed and explained that he was simply not doing the work he needed to do. I did not focus on the trouble he had caused himself as a result of this behavior or spend a great deal of time trying to find out why he was acting irresponsibly. I simply asked Bob if he wanted to improve his academic standing, and he said that he did. Together, we discussed the changes he needed to make, charted the academic tasks he needed to accomplish, and planned future meetings. We shook hands as a symbol of our commitment to see this situation through, and the student-athlete went to work.

The specific Reality Therapy techniques for creating a safe environment and encouraging positive change were invaluable in this case. Of particular importance were the following: (1) avoiding punishment and criticism; (2) clarifying the client's wants; and (3) devising strategies to help the client achieve these wants. Bob did not suddenly become an "A" student, but his grades did improve and he learned how he needed to behave in order to achieve his wants and goals.

Career Development

In a sense, applying Reality Therapy to the career development of student-athletes is related to its application in terms of academic progress. In order to achieve career goals, it usually helps to attain a certain level of success in school. It is important to point out to all student-athletes that the chances of their making a living as a professional athlete are extremely small. Therefore, the type of career they have following graduation will be determined in large

measure by the choices they make while in school and the level of academic performance they maintain. In other words, the better they do in school, the more marketable they make themselves and the easier it will be for them to realize their career goals.

The crucial application of Reality Therapy to career development has to do with the exploration of the student-athletes' wants or "pictures" in their minds. The counselor needs to find out the type of career they want to pursue. Discussions must next center on the skills, interests, and values they possess. Standardized tests like the Strong Interest Inventory are often very helpful in that process. In addition, the young men and women must be cognizant of how their choices will affect others and others' expectations of them, especially parents. It is often helpful to prepare student-athletes for the possible repercussions of their decisions. Finally, student-athletes must conduct research to determine how the requirements and characteristics of particular jobs and careers match potential college majors and minors, as well as their own wants, skills, and values.

Once again, the core Reality Therapy question is meaningful: "Does your present behavior have a reasonable chance of getting you what you want now and in the future?" The counselor must consistently help student-athletes evaluate how their behavior is or is not moving them closer to achieving their goals. Behavior that is successful should be reinforced. Inappropriate or irresponsible behavior should be identified, and the planning and practice of new behaviors needs to begin.

On a number of occasions, student-athletes have come into my office to discuss possible changes in majors or minors. If the change has not yet occurred, this presents a nice opportunity to begin working on career issues. In one case, a student-athlete passed me in the arena and casually stated that she was thinking about changing her major from Physical Education to English Education. I asked her to see me the next day to talk about it. In our subsequent discussion of her career goals and wants, she repeated over and over her strong desire to teach English at the high school level following her college education.

I referred this second-year student-athlete to the university's counseling center to take the available interest and skill inventories and to use the career library for further research into the occupation of high school teacher. In addition, I directed her to the English Education Department to discuss the applicability of that particular major to her career interests and to find out the specific academic requirements of the program.

Following the clarification of her interests, skills, and values (determined through our discussions, standardized testing instruments, and her own research in the career library and the academic department), we settled on a plan to pursue her intended career as a high school English teacher. The plan included such elements as getting accepted into the major, scheduling the proper courses, and speaking with her own high school English teacher about

the field. I followed up with her regularly, often informally, and was extremely pleased that she was finding great satisfaction with her choice of major and overall career development.

In this case example, the answers to the key Reality Therapy questions (i.e., "What do you really want?" and "Does your present behavior have a reasonable chance of getting you there?") provided the foundation upon which to make specific plans, implement those plans (behaving, "doing"), and evaluate progress. This is a systematic, short-term, action-oriented approach to career development issues.

Athletic Performance

Perhaps the psychological element most crucial for successful athletic performance is control. It is extremely difficult to perform well in sports without a sense of being in control. Many student-athletes can describe how their coach will not play them, how the officials are out to get them, how the conditions of the field or gym are hampering them, how certain distractions are bothering them, and so on. With student-athletes who have performance-related issues such as these, the concepts detailed in Control Theory and Reality Therapy are useful.

As mentioned elsewhere in this paper, Control Theory emphasizes that the only behaviors a person can truly control are his/her own, and this holds true in sports. Thus, the student-athlete and counselor focus and concentrate only on the student-athlete's own total behavior, not the behavior of the coach, officials, parents, or teammates. Playing conditions and other common distractions such as travel, weather, and crowd conditions can also be ruled out, since they affect all participants. The student-athlete's performance must be dissected, with particular attention paid to what the student-athlete is doing. The student-athlete and counselor can then plan ways to improve upon those aspects of play that are unsatisfactory.

For example, a women's lacrosse player recently was referred to me by her coach because of poor play. I sat down with this student-athlete and asked her to describe everything that she was feeling, thinking, and doing when she competed (i.e., her total behavior). She listed several very common symptoms, including nervousness and anxiety (feeling), lack of focus and a sense of being out of control (feeling), thinking that she was a terrible player and that her teammates and coaches were thinking and saying the same thing about her (thinking), and not being able to catch the ball (doing).

After only two sessions, I helped her to realize that the feelings and thoughts she was having were all related to what she was doing—dropping the ball. I helped her to realize that the only thing she could control was her own behavior and her own play. She had no control over what her teammates and coaches were thinking or saying about her, nor did she have control over the tests and schoolwork she chose to worry about while she played. We did some relaxation and imagery training, but the key component in her eventually

improved play was the fact that she understood clearly that she had to focus and concentrate only on those things over which she had control, i.e., watching the ball right into her stick and letting her body instinctively take care of everything else while she played. As she practiced focusing solely on the ball while competing, the other aspects of her total behavior (e.g., nervousness and negative thoughts) disappeared. She took command of the only behavior over which she had control—concentrating on the ball.

CONCLUSIONS

Reality Therapy, with its basis in Control Theory, is an exceedingly useful tool for work with student-athletes. In several ways, this therapeutic model espouses many of the same ideas and philosophies found on the field of competition. Reality therapists, coaches, and athletes alike all stress present behaviors, acting responsibly, accepting no excuses, setting goals, and devising plans (game plans). These parallel processes are part of the reason why this unique form of therapy works well with student-athletes. Therapy takes place in a context with which they are familiar and comfortable. In addition, Reality Therapy is a very active, intense, relatively short-term intervention. This perfectly suits the time demands faced by college student-athletes, as well as closely mirroring the nature of athletic competition.

This paper has been an attempt to demonstrate how Reality Therapy/Control Theory can be applied to potential academic, career, and athletic issues that student-athletes must confront while in college. These same processes apply just as easily to personal counseling (e.g., with respect to relationships). The basic technique includes an exploration of wants ("pictures") and how total behaviors (acting, thinking, feeling, and physiology) are an individual's best attempt to satisfy these desires. When this present behavior is not working, new total behaviors are planned by the client and the therapist. The plans are then executed by the client alone. Evaluations are made, and the process continues. Amid all of this, the most crucial element must be in place: a friendly, safe therapeutic climate must be established by the counselor and perceived by the client. Without such an environment, it is extremely difficult to accomplish anything else.

The ideas and observations outlined in this paper are largely personal and anecdotal. The next important step is to perform more experimental research on the actual effectiveness of applying these concepts to the college student-athlete population. One possibility might be to do a detailed case study. Another may be a correlational investigation, comparing the grade point averages of student-athletes who have been counseled in Reality Therapy to a similar group who have not. Whatever the design, the most critical goal must always be kept in mind: improving the academic, career, athletic, and/or social development of college student-athletes.

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