

# Ongoing Discussion “Thought Piece”

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Ongoing Discussion Host: Bill Bellows  
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**Background:** This article was prepared in November 2005 and is also available on Dr. Glasser's website at [www.wglasser.com](http://www.wglasser.com). Given the central role of Choice Theory in Dr. Glasser's work, this article was selected as the Thought Piece for those new to his writings and teachings. A list of his many books can be found on his website as well. For those planning to attend the upcoming In2:InThinking Network Forum, where Dr. Glasser will be a keynote speaker on Saturday, April 1<sup>st</sup>, all of his books will be available at a very low price - \$10.00. A copy of his latest booklet, about the difference between Mental Health and Mental Illness, will be given to everyone who wants a copy at the Forum. Also, if you would like a copy of his booklet about education, entitled "The Glasser Quality School", please contact Murray Slater ([murray\\_slater@yahoo.com](mailto:murray_slater@yahoo.com)) by email and he will send you an electronic version of this booklet. Additional details on Dr. Glasser's Forum keynote presentation, plus a short biography, can be found at the end of this Thought Piece.

## **THE ECONOMICS OF CHOICE THEORY FOCUS GROUPS**

### **William Glasser**

As explained in the booklet, *Defining Mental Health as a Public Health Problem*, choice theory offers a solution to one of the most puzzling of all human problems: how to get along much better with each other than we do now. We could do this by making choice theory focus groups available at either low cost to individuals or free as a part of a widespread public mental health program as described in the booklet.

But also, as explained in the booklet, there could be much opposition to the public mental health model from both the psychiatrists who prescribe brain drugs and the powerful pharmaceutical industry that makes and promotes them. There are huge rewards in money and prestige for psychiatrists to continue to use the medical model.

There are no rewards for any of the other mental health professionals such as psychologists, social workers, and counselors who along with a few psychiatrists like myself, do not prescribe. To the contrary, there is also both active and covert opposition from these two groups to the counseling and psychotherapy we do.

I believe the best chance we have to overcome this opposition is for mental health professionals who counsel and teach to join me in pointing out what the continuing use of the medical model is costing our whole society both in untold individual misery and in unbelievable amounts of tax dollars.

### **The Costs Implicit in the Medical Model**

For individuals, the failure of sexual relationships both with and without marriage and the wide fallout from this failure in family problems is by far the greatest source of human misery. In our society, we spend hundreds of billions of tax dollars on a failing attempt to improve education, billions more to control crime, (we have essentially given up rehabilitating criminals) and countless billions to treat pain, fatigue and weakness which have no pathology to explain those symptoms. All of the money spent can be easily traced to a single source: human beings who want to get along better with each other but have yet to figure out how.

### **We Can't Solve This Problem if We Don't Accept Its Existence**

The fact that is most surprising to me is we do not even recognize that our failure to get along with each other is the core problem. It is as if it is such an insurmountable and expensive dilemma that nothing we do can ever solve it. Therefore, we have to try to live with it. Further, we continue to believe that in order to deal with the symptoms of our inability to get along, we must look for pathology that does not exist in the brain, use brain drugs to treat that “pathology”, and worst of all, tell these countless unhappy people they can do nothing to help themselves.

### **Using the Public Health Model there is both a lot we can do and no shortage of people who can help us**

First we have to recognize that getting along better with each other is a public mental health problem, not a medical problem. Second even with all the shortcomings of the medical model under which they are forced to operate to make a living, almost all psychologists, social workers and counselors have still managed to effectively counsel individual clients to help them resolve problems with their marital partners, children, parents, families and other people in their lives. While some of them have learned to counsel using choice theory - my method of counseling - most, who are not familiar with this theory, use other theories equally well.

But if we would revisit all the unhappy people in the external control world in which we all live, it would be obvious that even if we were liberated from the medical model, we would still not be able to help these huge numbers by counseling them individually. Fortunately, any mental health professional who wants to lead choice theory groups can be easily trained to do this by the faculty of The William Glasser Institute. These groups are a good example of how to

deliver public mental health. When they meet they use my 2003 book, *Warning, Psychiatry Can be Hazardous to Your Mental Health* or my 1998 book, *Choice Theory*.

Learning choice theory in these small groups is completely voluntary. People can learn as much as they want and everything they learn will help them to get along better with the important people in their lives. In this instance a little learning can do no harm. The main incentive to learn more is from the theory itself. The more it is learned the better and quicker it works. It does not require any special educational background and it is both easy and pleasant to learn. It is also both politically and religiously neutral. Not one of these sectors has ever voiced any concern with these ideas.

### **Start a Practice by Teaching Choice Theory Focus Groups**

The first worry that crossed my mind when I started my practice in 1956 was where I would I get clients. I got most of them from the women who worked at the desk of the UCLA outpatient clinic where I trained. At that time UCLA charged ten dollars an hour and I told them I would see anyone in my office for that amount as well. From that start I built a small practice and since I was soon writing, consulting and teaching I didn't need more.

If you are starting out with a group or in a clinic under licensed supervision you would not need a license to start a choice theory focus group if your supervisors were willing to follow your progress as you teach the group? That way you could share with your supervisor what you are doing and could be the person who gets this process going in the organization or clinic.

When starting such a program it is very important to explain that this is not group therapy. It is a class that learns choice theory together by discussing the booklet and either the book, *Choice Theory* and/or the book *Warning, Psychiatry Can Be Hazardous to Your Mental Health*. Since the topic of marital problems often comes up in these groups they may want to go on to my book that explains how to put choice theory to work in their marriage, *Getting Together and Staying Together*. You can charge what you want for the groups but my advice is to keep the cost low to start. You can always raise the price if the market will allow.

Some choice theory focus groups that are already in progress are experiencing success dealing with pain management, domestic violence, drug addiction, parenting, recovery from divorce, relationships with teens, problems in the workplace, senior citizen challenges, reliance on psychiatric drugs, working with inmates, probationers, teacher team- building groups, and people on waiting lists at mental health centers.

Many of these groups include people from more than one of the categories listed above and this diversity often increases the effectiveness of the group. It is not necessary to be seriously unhappy to join a choice theory focus group. People who want to experience personal growth and improve their well being are also welcome. How a focus group forms and gets started is described in detail in the book, *Warning, Psychiatry Can Be Hazardous to Your Mental Health*.

Assuming that you get your focus group together and you have a license to counsel, it is very likely that people in the group will want to see you privately about a personal problem. As soon as this happens you should be on your way both as a counselor and a teacher of public mental health.

If you have questions please write to me at [wginst@wglasser.com](mailto:wginst@wglasser.com) I answer all my e-mail.

**Upcoming Keynote Presentation by Dr. Glasser at the In2:InThinking Network's Fifth Annual Forum, March 30<sup>th</sup> – April 4<sup>th</sup>.**

**Title: Defining Mental Health as a Public Health Problem**

**Abstract:** The only mental health problem we have not been able to come close to solving is our inability to get along with each other to the extent we want. There are four major situations in which this problem consistently causes widespread destruction: marriage, child rearing, school and the workplace.

In his presentation, Dr. Glasser will explain that as long as we continue to define mental health as an individual problem as we have for centuries, we not only won't solve it, we will increase it. We need to begin dealing with it as a widespread public mental health problem that is destroying relationships throughout every organization, so managers will finally gain the tools they need to cope with it successfully.

## **Title: What is Choice Theory?**

**(Source: <http://www.wglasser.com/whatisct.htm>)**

Choice Theory® is the basis for all programs taught by the (Glasser) Institute. It states that all we do is behave, that almost all behavior is chosen, and that we are driven by our genes to satisfy five basic needs: survival, love and belonging, power, freedom and fun. In practice, the most important need is love and belonging, as closeness and connectedness with the people we care about is a requisite for satisfying all of the needs. Choice Theory (and the Seven Caring Habits) is offered to replace external control psychology (and the Seven Deadly Habits), the present psychology of almost all the people in the world. Unfortunately, this forcing, punishing psychology is destructive to relationships. When used in a relationship it will always destroy the ability of one or both to find satisfaction in that relationship, and will result in people becoming disconnected from those with whom they want to be connected. Disconnectedness is the source of almost all human problems, such as what is called mental illness, drug addiction, violence, crime, school failure, spousal and child abuse, to mention a few. The 1998 book, Choice Theory: A New Psychology of Personal Freedom, is the primary text for all that is taught by the Institute.



## Relationships and Our Habits

<u>Seven Caring Habits</u>	<u>Seven Deadly Habits</u>
Supporting Encouraging Listening Accepting Trusting Respecting Negotiating differences	Criticizing Blaming Complaining Nagging Threatening Punishing Bribing or rewarding to control

### The Ten Axioms of Choice Theory

1. The only person whose behavior we can control is our own.
2. All we can give another person is information.
3. All long-lasting psychological problems are relationship problems.
4. The problem relationship is always part of our present life.
5. What happened in the past has everything to do with what we are today, but we can only satisfy our basic needs right now and plan to continue satisfying them in the future.
6. We can only satisfy our needs by satisfying the pictures in our Quality World.
7. All we do is behave.
8. All behavior is Total Behavior and is made up of four components: acting, thinking, feeling and physiology.
9. All Total Behavior is chosen, but we only have direct control over the acting and thinking components. We can only control our feeling and physiology indirectly through how we choose to act and think.
10. All Total Behavior is designated by verbs and named by the part that is the most recognizable.

**William Glasser**

Born in 1925 and raised in Cleveland, Ohio, Dr. Glasser was initially a Chemical Engineer but went into psychiatry when it became apparent to him that this was his real interest in life. He attended medical school at Case Western Reserve University in Cleveland, and took his psychiatric training at the Veterans Administration Hospital in West Los Angeles and UCLA (1954-57). He became Board Certified in 1961 and was in private practice from 1957 to 1986.

Very early, he came to the conclusion that genetically we are social creatures and need each other and that the cause of almost all psychological symptoms is our inability to get along with the important people in our lives.

In 1967, he founded The Institute for Reality Therapy. Since that time, over 65,000 people worldwide have taken intensive week training to gain knowledge on how to apply his ideas in their professional life. They have discovered that by using choice theory, their personal relationships have improved as well.

Dr. Glasser maintains a very active schedule and is a much sought-after speaker nationally and internationally. Some of his many accomplishments are as follows: listed in Who's Who in America since the 1970s; in 1990 awarded an honorary degree of Doctor of Humane Letters, Honoris Causa from the University of San Francisco ; in 2003 presented with the ACA Professional Development Award recognizing the significant contributions made to the field of counseling; in 2004, presented with the "A Legend in Counseling Award" by the ACA; in January, 2005, presented with the prestigious Master Therapist designation by the American Psychotherapy Association; and finally, in 2005, presented with the Life Achievement Award by the International Center for the Study of Psychiatry and Psychology for his enormous influence as a psychotherapist and author.