

## The Compatibility of Reality Therapy with Turkish Culture

*Mehmet Kaya*

Department of Psychological Counseling and Guidance Hendek,  
Faculty of Education, Sakarya University, Sakarya, Turkey

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**Abstract:** Various methods of psychotherapy have been developed in the last century for curing behaviour disorders and reality therapy is one of those methods. Considering the fact that most of the psychotherapy approaches were formed by analysing the individuals of western societies, the compatibility of a psychotherapeutic intervention with cultures apart from western societies is an issue of research. This article discusses the compatibility of reality therapy developed by William Glasser- who had rejected the traditional approaches in helping the clients- as well as the underlying principles and his method of psychotherapy with Turkish culture.

**Key words:** Reality Therapy • Turkish Culture • The Process of Reality Therapy

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### INTRODUCTION

Reality Therapy is an approach which was first developed by Dr. William Glasser in Los Angeles during his specialization education in California University in 1956. Glasser suggested that we would be responsible for all the choices that we made through reality therapy in our life; and that we would be willing to make more effective decisions and would live a more responsible life in a friendly, accepting and non-punishing therapeutic environment [1].

Initially, Glasser's efforts of establishing his views targeted the system rather than individuals. Later he explained with control theory that we functioned physiologically and psychologically not only as individuals but also in groups and as societies; and then he connected reality therapy with control theory. Originally control theory does not belong to Glasser, yet he made efforts to apply the theory to schools and administrations [2]. Glasser's publications were usually on such issues as forms of teacher-student interaction, relations between learning at school and learners' lives, contribution of schools to "unsuccessful identity" and on how to change all these things so as to re-activate learning [3]. On reviewing the literature relevant to later research, applications of reality therapy mostly to child and adolescent groups might be found.

Reality therapy, which is based upon satisfying needs in an appropriate way and being able to take responsibility for life, explains that our level of achievement in satisfying our needs has a direct influence on our happiness. All the choices (behaviours) individuals make in satisfying their basic needs are under their own responsibility [4]. Glasser [5] points out that people's problems all actually stem from human relations. Besides, reality therapy rejects the concept of psychological illness and thus displays its difference from traditional psychiatry approaches. It tries to explain psychological illnesses through the concepts of "choice of behaviours" and "taking responsibility for behaviours", unlike traditional approaches; and makes it clear that those illnesses are indeed individuals' own choices [5, 6, 1, 3].

**The Principles of Reality Therapy:** Reality therapy is composed of seven stages each of which is built upon the previous

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**Corresponding Author:** Dr. Mehmet Kaya, Department of Psychological Counseling and Guidance Hendek,  
Faculty of Education, Sakarya University, Sakarya, Turkey

one and is placed inside another [7]. The stages are taking interest, focusing on the present behaviour, evaluating the behaviour, planning the responsible behaviour, commitment, refusing excuses and giving no punishment. These principles include new ways teaching the client to satisfy his needs [7]. Some of these stages are discussed below for compatibility with the structure of Turkish society.

**Taking Interest, Establishing Relationship:** Therapist tries to set up friendly, close, emotional relationship with the client in order to cope with his loneliness in reality therapy. This is the most important and the most difficult stage of therapy. The cases where reality therapy fails are usually the ones where the therapist fails to establish friendly relations. What the client needs is somebody who he feels emotionally close and who will persuade him that he will be able to assist him in meeting his needs. It is important to impose honestly and through human relations on the client that a person is available to accept, to show interest in and to help him in meeting the real life needs [3, 8].

According to reality therapy, a counselor should not set up love relations with clients and should regard them without criticism. He should also be interested, sympathetic and sensitive towards the client. When the client's values, interests, hopes and fears are talked about, he shares his problem. The counselor should also approach the client in integrity and in a transparent manner [3, 8, 7].

This condition aims at establishing a friendly and close relation in a therapy environment similar to the humanist approach which is commonly employed in Turkey and which is concerned with an individual's phenomenological world. In Turkish society, who is cold to psychological help, clients come to counselling with shyness and anxiety stemming from insufficient knowledge about counselling. They show their insufficiency of knowledge about psychotherapy through such statements as "come on! analyse me and tell me what sort of person I am" or "you will make me lie on bed and take me down to my past, won't you?" when they encounter a person of psychology related occupation. People either mostly know nothing about psychotherapy or they think of analytic methods when they hear the concept. This leads to prejudice of cold, passive relations in clients. This principle of reality therapy is important for Turkish individuals to adopt positive perspectives and positive attitudes towards therapy and to join the interviews with reduced levels of anxiety knowing that they won't be criticised or judged.

**Focussing on the Present Behaviour:** Traditional therapies focus on a patient's past. According to reality therapy, this practice brings about very few changes in the client; moreover this can show the importance of past events and the connections of past events with present behaviour; it can reinforce the connections and thus can even be harmful. Reality therapy focusses on the client's present behaviour rather than dealing with needless accounts of a present behaviour concerning the past. Most of the clients are not aware of effects of their behaviours on them and on others. Reality therapy emphasises that behaviours also include emotions. Behaviours and emotions are not separated. Focussing only on emotions as if they were separated from behaviours results in not facing the individual's behaviour and avoiding taking on responsibility. Therefore, reality therapists focus on what the client does rather than on what he feels. Emotions are significant only when they clearly affect what is done. However, ignoring emotions does not mean hindering the client's probable attempts at talking about his emotions. In this case the client is carefully listened to and is directed to the behaviour of the moment through such questions as "I see you are sorry, but what are you doing to overcome this?" The question of "what are you doing" rather than "why?" is stressed [3, 8].

Although the Turks are more emotional than other nations, they have difficulty in expressing especially the positive emotions in words to other individuals. In most sub-cultures where several traditions and customs are influential, logic and rules rather than emotions are considered important. A child raised in such an environment uses words of emotions as rarely as possible in communication. Speaking through emotional words is considered feminine manners in the case of boys. Therefore, this causes being despised and isolated by other individuals and by authorities in society. Talking about behaviours more than emotions and specifying the relations between behaviours and outcomes clearly is important in reality

therapy. By applying this principle, clients who have difficulty in expressing their emotions due to the above mentioned reasons will have opportunity to express themselves more easily during the interviews. Focusing on behaviours will be a *positive* and *facilitating* factor for Turkish society both in counseling process and in clients' attitudes towards the process of psychotherapy.

**Evaluating the Behaviour:** At the point where the clients become aware of individual behaviour, they should question whether or not their behaviours help to meet their needs and should make an evaluation prior to conducting the change. They should determine whether or not their behaviours are useful and whether or not they are socially acceptable. Since individuals act in accordance with their choices, they should also decide on whether they would like to sustain their behaviour or not. Therapists do not consider value judgements as imposing, advising or as society's expectations (must's and "mustn't's"). Instead, they help the client to revise his behaviour through questions such as "is this best solution you can find at the moment?" or "will the consequence be different if you behave differently?" [3, 8].

Although density of population moves from rural areas to urban areas in Turkey, patriarchal family structure is still dominant in Turkish society. This case leads to a society in which decisions are made by the elder person of the family and value judgements are strict and restrictive; and in consequence the society becomes accustomed to being advised. In Turkish society - in which individuals are accustomed to being advised by father, mother, grandfather, grandmother or the oldest member of the family until school age and are advised at school age by an authority such as the teacher or the school principal – one of the questions therapists most commonly encounter is "what am I going to do now?" or "what do you recommend?" asked by the client to escape responsibility. Applying this principle might be useful in that *clients evaluate their own behaviour and they learn to take on responsibility*. In addition to that, this principle may also contribute to individuals' personal development.

**Planning the Responsible Behaviour:** Having evaluated his behaviour, the individual admits that his behaviour is irresponsible and he signals that he would like to change. And this means the individual's or the group's taking responsibility in making realistic plans for the change. Individuals with an unsuccessful identity have no experience of planning a successful life. They have limited repertoire in this respect. Re-learning starts at this stage. The client learns the new behaviour by setting up relations with others. Individuals having an unsuccessful identity need success, even a tiny piece of success; therefore, a reasonable plan containing small pieces of success will be useful for the purpose. The importance of the plan lies in providing the client with a framework to experience success. At this stage the therapist helps the client to prepare a plan which will enable him to take small steps and to be successful rather than take giant steps and fail [1, 3, 8].

Besides, the therapist helps the client to develop positive addiction in reality therapy. Positive addiction consists of six criteria: 1. activity will not include a competitor and will be applied approximately an hour a day; 2. it will be easy to perform and will not require much brain power; 3. it will be possible to perform it alone and performing it will not depend on others; 4. it will have physical, mental and psychological value for the individual; 5. the individual will believe enthusiasm leads to development; 6. the individual will perform the activity without criticizing himself. Meditation may be given as an example for such activities [2].

Instilling success step by step and in a planned way will be a *different, motivating and participation-maximizing* approach for a child who is blamed by his family for his unsuccessful attempts and who is punished for failure by his teacher. Since planning the behaviour is a concrete step by step problem solving approach, this principle may be accepted by Turkish society easily.

Apart from that, activities recommended by reality therapy may be appropriate and useful for a society of high income and life standards in an individual's developing the positive addiction. However, when Maslow's hierarchy of needs is considered, this does not seem to be realistic in applicability for the majority of Turkish society having economic

difficulties and experiencing difficulty even in meeting the basic needs.

**Commitment:** Having drawn up a reasonable plan and shown its applicability, a commitment is made to carry on with the plan. The commitment may be oral or written. The written commitments are preferred as they are more influential. The commitment is made to the counselor or to the group; but this stage is not skipped without a promise such as “I do this for both myself and you” so that the plan is performed. The commitment is also binding and motivating. Making a commitment to a group is more influential than making a commitment to the counselor. Therefore, using groups is recommended in reality therapy. Yet, for individuals with unsuccessful identity, it is difficult to make commitments. For this reason, it will be useful if the therapist or the group members support the client in making a commitment for the responsible behaviour.

**Refusing Excuses and Giving No Punishment:** Plans may fail but it is made clear that no excuses will be accepted with the counselor's or group's forcing [9]. Excuses spoil relations and enable the person to escape responsibility. No matter how valid an excuse is, it is not important because it shows failure. When somebody fails, the “why” question is not asked since this question forces the individual to find several reasons to set excuses for not taking the responsibility. In such a case, the plan is revised and a commitment is made again. The therapist ignores failure. He only asks the question “when will you perform this?” [3].

Another stage that is as important as refusing excuses is giving no punishment. Punishing will ruin setting up relations, will reduce trust and will remove the protecting relation holding between the therapist and the client. By ‘punishment’, any behaviour aiming to give the individual psychological and/or physical pain is meant in reality therapy. Counselors cannot put sanctions on commitments because sanctions contribute to the client's loneliness [3, 8, 7].

Giving no punishment is a principle which could increase especially children's and adolescents' participation in consultation and their self-respect and motivation in Turkish society, where punishing a negative behaviour by using force is common. Yet, in addition to its positive sides, a threat is also available in this principle. It may lead to not meeting the commitments.

**Psychotherapy:** The counselor teaches control theory to the clients, he recommends behavioral choices and is active in sessions; thus he functions like a teacher in reality therapy [2, 10]. In this respect, he undertakes a task facilitating the consultation process for individuals attending the consultation sessions. This is an attitude which will facilitate the application in schools for those who have difficulty in decision-making. A didactic and active attitude might contribute to both the counselor's and the client's feeling close to therapy in a society which is inclined to giving and accepting advice.

Another counselor attitude in reality therapy is that counselors support clients' psychologically strong sides [9, 2]. The counselor sees the individual having a problem as an individual who cannot fill the gap between what he owns and what he wants.

This helps the client to have *increased self-confidence* and to *feel more valuable*. For this purpose, he is motivated to consider himself as a person changing his behaviours and attitudes in spite of what happened in the past, not as a person needing help [7]. Once the client is taken taken and is taught the new ways of behaviour, his attitudes will change even if he realizes his former behaviours or not. Ignoring the previos behaviours will make consultation more economic. At the same time, this will put reality therapy in a more superficial position than other approaches. Avoiding considering the clients as ill or miserable and emphasising their strengths will increase the attractiveness of the process.

**Overall Evaluation and Conclusions:** In reality therapy, a group approach with a pragmatic thought rather than looking after the person individually is preferred. Through such applications, reality therapy makes it possible to reach many people with one single application. When seen from this perspective, it will be an approach easy to benefit for Turkish people, most of whom have low economic conditions. Moreover, it might be *simpler, more economical and more common*

for Turkish government - which has liability to offer educational and development opportunities- to implement in schools than other approaches.

Fatalist conception is dominant in Turkish society even though it has been diminishing in recent years. The consequence of behaviours is usually accounted with luck, God, or fate. This thought may be supported by fatalist conceptions such as considering casualties in earthquakes as God's will, failure at school as the teacher's attitude, or blaming politicians for economic crisis. This fatalist belief is also reflected in statements such as "if I encounter, I will put up with it", "whatever is my destiny, it will happen", etc, which are widespread in daily life. In a society having such a thought structure, it is necessary to teach and persuade people that those behaviours and the consequences are indeed a matter of choice. Here it may be stated that the general structure of Turkish society contradicts with the view of reality therapy claiming that "the choice of behaviours belongs to individuals and in consequence of the chosen behaviour the individual experiences joy or pain".

Reality therapy may be implemented in schools composed of individuals with identical life standards and cultural elements; but it is thought that in a school which is composed of individuals coming from differing sub-cultures application difficulties are encountered. Apart from that, questions such as "how much contribution will the approach of focussing only on points that individuals are aware of and solving the problem make in countries like Turkey- where submissive, fatalist, defensive conception is dominant?" and "how permanent will the solutions be?" are asked in relation to reality therapy.

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