Effectiveness of group reality therapy in increasing the students' happiness

Neda Smaeeli Far[1], Hossein Sheikhi[2], Zakiyeh Jafar Pour[1]

1- Kharazmi University, Tehran, Iran
2- Allameh Tabatabaei University, Tehran, Iran

Corresponding Author Email: neda.smaeelifar@gmail.com

Abstract

This study was aimed to explore the effectiveness of group reality therapy in increasing the students' happiness. We employed a quasi-experimental pretest and posttest design with control group. The statistical population comprised all the undergraduate students of psychology (134 individuals) studying in Allameh Tabatabayi University, out of which 24 individuals were selected using convenience sampling. The individuals who scored one standard deviation below the mean were then randomly assigned to the experimental and control groups. The experimental group subsequently underwent ten 90-minute sessions of group reality therapy, while the control group didn't receive any training. The research tool included Oxford Happiness Inventory. Descriptive statics and covariance were used to analyze the data. The research results revealed that reality therapy in group counseling has increased the students'' happiness and its related components (P< 0.05).

Keywords: group counseling, reality therapy, happiness.

Introduction

The emphasis on describing psychological health in terms of 'what is right' has been growing ever since Martin P. Seligman coined the term 'Positive Psychology' in 1998. (Strumpfer, 2006). Over the last several years, psychologists have argued for an increased focus on investigating happiness and other positive emotions (Luthans, 2002). Rather than continue a more traditional focus on negative or dysfunctional forces in daily life, researchers are attempting to understand how to make life better. (Arthaud-Day, Rode, Mooney & Near, 2005).

The history of happiness research is the history of confusion. The term has carried many different meanings and this has hindered productive thinking enormously. Happiness is a complex concept and longstanding theme which came under scrutiny by the ancient philosophers and thinkers. Nowadays, the conceptual explanation of happiness has largely escaped from the deadlock. In fact, the greatest advance achieved is at the conceptual level. Psychology doesn't solely focus on mental illnesses any more. (Arian, 2004). The chief purpose of the mental health is to assist people in living happier, and help them diagnose and prevent behavioral, emotional, psychological, personality and affective disorders. The government's most critical task is quelling the mental disorders in order to create a healthy society and each community that seeks happiness and prosperity must seriously consider the components of happiness and ways of boosting in it (Bahrami, 2002).

There has been an upsurge in studies on happiness (e.g. Diener, Argyle…). Happiness can be defined in terms of the average level of satisfaction over a specific period, the frequency and degree of positive affect manifestations, and the relative absence of negative affect (Argyle, 2001). The concept of Happiness has long interested philosophers and psychologists. This notion seems to be more comprehensive and less illusive than other definitions since one of the components is defined as life

satisfaction and is distinguished from affective appraisal in that it is more cognitively than emotionally driven and has also considered Positive and Negative Affect as two independent dimensions.

The ultimate and common goal of human being is happiness (Ericsson, 2006), and all are trying to achieve it (Bass, 2003). Happiness is missing in the contemporary world and it is a great blessing that has a certain survival value and should be sought and cherished. In respect of happy people's characteristics, the happy appear relatively healthy, both physically and mentally. They are active and open-minded. They feel they are in control of their lives. Their aspirations concern social and moral matters rather than money making. the happy tend to be better educated, rather than from a genuine effect of income. As yet no empirical investigations have focused on consequences of happiness. Nevertheless, some indications can be found in the results of a few longitudinal investigations on life satisfaction and experimental studies on mood. These results suggest that a positive appreciation of life tends to broaden perception rather than paralyses it, to encourage active living rather than induce apathy and to foster social contact rather than lead to selfish individualism. There are strong indications that happiness fosters health and even lengthens lives somewhat. Seeking companionship, sociability in spare time and helping others are amongst the other consequences of happiness. Moreover, Positive affect can occupy a significant role in boosting mental health, job satisfaction, self- ego strength, control belief, esteem, contentment, welfare and progress, creative thinking, social integration, and flexibility in interpersonal relationships.

According to Schwarz & Strack (1991), happy individuals tend to be more optimist in information processing. Diener (2002) defines happiness as self-appraisals and evaluation of life. The relationship between happiness and many variables have been investigated such as education and income (Oswald, 1997; Bradburn, 1969; Argyle, 2001), job satisfaction and life satisfaction (Tait & Padgett, 1988, Adler & Fagley, 2005), and health (Taylor and Chatters, 1988; Eddington & Shuman, 2004; Salovey et al, 2001). According to Seligman, in the 80th a vast number of serious researches have been launched in the related field of happiness mounting to 780 articles in terms of happiness and enjoyment and 5701 articles on life satisfaction in the realm of positive psychology. However, these numbers are slender in comparison to the published articles in other fields, such as, 8072 anger-related articles, 57800 anxiety-related articles and 70856 depression-related articles published from 1887 to 2005.

Researches have shown that school teachers play a vital role in promoting mental health, identifying children at risk of psychological disorders and referring them for receiving professional help (Smaeeli, 2008). All the above-mentioned fact indicate the need for mentally healthy teachers, Since, the basic foundation of formal education is laid in the primary schools, therefore, having a healthy society can't be imagined unless we have happy, optimist teachers who have a high level of life satisfaction, specifically in the elementary levels.

There have been researches into the benefits of different kinds of therapies or changes in life style in order to enhance the happiness of individuals. Reality therapy has been considered to be one of the versions which is addressed to happiness and has been found to be effective. Glasser (1981, 1985) adapted this theory to the clinical setting and formulated it in a way that makes it useful to therapists, counselors, and others. Glasser saw the human being as motivated by five internal forces. These human needs are innate, not learned; general, not specific; and universal, not limited to any specific race or culture. All behavior is aimed at fulfilling the four psychological needs of belonging, power, fun (or enjoyment), and freedom, as well as the physical need for survival. Effective satisfaction of these needs results in a sense of control that other theories refer to as self-actualization, self-fulfillment, or becoming a fully functioning person. Because the theory and practice of reality therapy are based on conscious behavior, wants, needs, and perceptions of human beings, they are applicable in virtually every setting. There are clearly identifiable interventions that constitute the essence of reality therapy. Glasser (1990a) said, "the art of counseling is to weave these components together in ways that lead clients to evaluate their lives and decide to move in more effective directions." Wubbolding (1991a, 1992) the therapist helps clients formulate, clarify, delineate, and prioritize the elements (desires) contained in their quality world of mental pictures. By describing their overall destination, clients become ready to evaluate and change their thinking and behavior. He also asks clients to conduct a searching self-evaluation. Glasser (1990a, 1990b) has described self-evaluation as the core of reality therapy. According to Glasser, all persons generate behaviors to fulfill human needs. As people attempt to accomplish various developmental tasks, they either succeed or fail. When they habitually fail to fulfill their needs effectively, they develop a failure identity (Glasser, 1972, 1985) characterized by ineffective or out-of-control behaviors. Therefore, the

researcher has decided to assess the effectiveness of reality therapy in group counseling in increasing the students' happiness in the present research.

Method

Participants

We employed a quasi-experimental design with the control group pretest posttest. The statistical population comprised all the undergraduate students of psychology (134 individuals) department of Allameh Tabatabayi University, out of which 24 individuals were selected using convenience sampling. The individuals who scored one standard deviation below the mean were then randomly assigned to experimental and control groups.

Measure

The Oxford Happiness Inventory (Argyle, et al., 1989) is a 29-item multiple choice instrument. Each item contains four options, constructed to reflect incremental steps defined as: unhappy or mildly depressed, a low level of happiness, a high level of happiness, and mania. The respondents were asked to "pick out the one statement in each group which best describes the way you have been feeling over the past week, including today." Information about internal consistency, reliability, and construct validity of the Persian translation of the instrument is provided by Alipour and Nor-bala (1999). Argyle, Martin, and Crossland (1989) reported an internal reliability of .90 using Cronbach's alpha, and a 7-week test retest reliability of .78. Construct validity was developed, based on three hypothesized components of happiness. Lewis, Francis, and Ziebertz (2002) administered a German translation of the inventory to a sample of 331 German students. Their findings confirmed the internal reliability of the German version and supported the construct validity of the instrument according to which «happiness is a thing called stable extraversion» (Lewis, Francis, & Ziebertz, 2002, p. 212). Alipour and Nour-bala (1999) translated the inventory into Farsi. Their translation was approved by eight academic members who worked in Iranian universities. Furthermore, the content validity of the Persian/Farsi version of the inventory was endorsed by ten university professors. Internal reliability using Cronbach's alpha in a sample of 101 in Tehran universities was .98, and the 3-week test-retest reliability was .79.

Results

Data collected through the questionnaires was analyzed using ANCOVA. The results of this comparison are presented in the tables below.

Table 1- Comparison of the Pre-Test's Scores of Experimental and Control Groups on the Total Score of Happiness Scale

Groups	Pretest Mean	F	Level of sig	M.d	t	d.f	Level of sig
Experimental	20.40	0.027	0.871	1.33	1.31	22	0.198
Control	19.06	0.027	0.871	1.33	1.31	22	0.198

The data presented here were calculated F=0.027 and t= 1.31that are not statically significant. Therefore, the between group difference is not significant and it's possible to consider these groups as homogenous prior to group reality therapy (p> 0.05).

Table 2- Summary of covariance analysis on the total score of Happiness Scale

source	SS	d.f	S.M	F	Level of Sig
Covariate variable	1024.29	1	1024.29	28.22	0.000
Pretest	0.540	1	0.054	0.001	0.970
Group	14185.37	1	14185.37	390.84	0.000
Error	979.94	21	36.29		
The total revised	16032.80	23			

Table 3- Summery of Covariance Analysis in Terms of Sub-Scales

Life satisfaction	S.S	d.f	S. M	F	Level of Sig
Covariate variable	308.19	1	308.19	21.45	0.000
Pretest	0.350	1	0.350	0.024	0.877
Group	1982.96	1	1982.96	138.02	0.000
Error	387.91	21	14.36		
The total revised	2372.80	23			
Optimism					
Covariate variable	20.69	1	20.69	4.67	0.040
Pretest	7.76	1	7.76	1.75	0.196
Group	703.84	1	703.84	128.83	0.000
Error	119.56	21	4.42		
The total revised	917.86	23			
Self-efficacy					
Covariate variable	72.28	1	72.28	33.41	0.000
Pretest	0.257	1	0.257	0.119	0.733
Group	252.30	1	252.30	116.62	0.000
Error	58.409	21	2.16		
The total revised	310.96	23			
Self-esteem					
Covariate variable	72.64	1	72.64	65.29	0.000
Pretest	0.495	1	0.495	0.445	0.510
Group	34.96	21	34.96	31.42	0.000
Error	30.03	23	1.11		
The total revised	71.36				
Health					
Covariate variable	26.75	1	26.75	10.12	0.004
Pretest	9.55	1	9.55	30.62	0.068
Group	987.57	1	987.57	223.08	0.000
Error	71.11	21	2.63		
The total revised	955.46	23			

The preliminary findings of this research study support the hypothesis proposed in the beginning of this paper. As shown in Table 3, it's revealed that reality group therapy has caused positive changes in the experimental group. A comparison between the groups' means indicate that the scores of respondents in the post test has increased compared to the scores of individuals in the control group and the results found support for the effectiveness of group reality therapy in increasing the individuals' happiness. Moreover, group reality therapy has positive effect on boosting the life satisfaction (138.02, $p < 0.05$)The data analysis shows that the correlations between group reality therapy and the optimism

(128.83, $p < 0.05$) are significant. What's more, group reality therapy was effective in enhancing the individuals' self-efficacy (116.62, $p < 0.05$), self-esteem (31.42, $p < 0.05$) and health (223.08, $p < 0.05$).

Conclusion

Diener (2000) concluded that lasting happiness could result in part from, for instance, working for one's goals, from close social relationships, renewable physical pleasures, and flow activities. As positive psychology turns its attention to interventions that cultivate the good life, perhaps interventions that target meaning will prove most fruitful (Linley and Joseph, in press).

In today's life, most people, if not all people, are in search of happiness (Argyle, 2005). Happiness was rated as the most important component of quality of Life, more important than money, sex and self-esteem among its participants. Happiness depends on many things, including income, labor market status, job characteristics, health, leisure, family, social relationships, security, liberty, moral values and many others (Ahn, 2004). Happiness is affected by external factors such as leisure activities, social life, work satisfaction and marriage and internal factors such as goals, personality and coping styles. Different people look for happiness in different places, depending on the society in which they live. Some look for happiness in external factors such as material goods. Others look for happiness in internal factor such as self-actualization. People may look for happiness in different places, but one thing that is common among people is their goal of finding happiness. Argyle et al (1995) stated that when people are asked to define happiness, they may report that they are experiencing a positive emotional state such as joy, or satisfied with life as a whole or part of it. Happiness is the degree, to which an individual judges the overall quality of his own life as a whole favorably, and it is generally considered to be an ultimate goal in life; virtually everybody wants to be happy. Happiness affects behavior in many positive ways. Happiness can enhance people's health and longevity, work performance, sociability, altruism, creative thinking and problem solving, and acts in favor of people's mental health by acting as a buffer for stress (Argyle, 2005). People can increase their happiness in many ways, some of which include eating, engaging in social activities and sexual intercourse, exercising and playing sports, alcohol and other mood enhancing drugs, putting their skills to use, feeling successful and socially approved, listening to music, doing art work, practicing religion, resting and relaxing (Argyle, 2005; Ahn, 2004). Wilson (1965) described the demographic characteristics that correlated with happiness. Wilson describes a happy person as one who is young, healthy, well-educated, well-paid, extroverted, optimistic, worry-free, religious, married with high self-esteem, high job morale, modest aspirations, of either sex of a wide rate of intelligence. The objective of this study was aimed to explore the perceptions and opinions toward happiness among university students. However, as Positive Psychology is an emerging field of Psychology, there exists a further need to explore and validate the present study.

Reference

Aghajani M, 2002. Effects of life skills training on adolescents' mental health and locus of control, Master's Thesis of General Psychology. Science. Alzahra University.

Aghajani M, 2004. Effectiveness of intervention strategies based on value-based psychodrama and strategies based on the happiness of 15-year-old girls studying in the first district Islamshahr, Master's Thesis, University of Allameh Tabatabayi.

Ahn N, Garcia J R, Jimeno J F, 2004.The impact of unemployment on individual well-being in the EU. Europen Network of Economic Policy Research Institutes, Working paper, 29.

Argyle M, Martin M, Lu L, 1995. Testing for stress and happiness: the role of social and cognitive factors. In C.D. Spielberger and I.G Sarason Eds., Stress and Emotion. 15: 173-187.

Argyle M, 2001. The Psychology of Happiness. 2nd Ed. East Sussex: Routledge.

Argyle M, 2001. The psychology of happiness. Great Britain: Routledge.

Argyle M, 2005. Psychology of Happiness, translated by F. Bahrami et al, second edition. Isfahan: Jahad Press.

Aspinwall L, 2001. Understanding how optimism works: An examination of optimist adaptive moderation of belief and behavior. NE. Change. Optimism and Pessimism: Research and Practice, Washington.D.C: APA.

Buss D M, 2001. The evolution of happiness. American Psychologist.

Corey G, 2002. Theory and practice of group counseling. California. Brooks/ Cole publishing company.

Diner E, 2002. Subjective well-being: the science of happiness and a proposal for a national index. American Psychologist. 55: 34-43.

Diner E, & Suh E, 1997. Subjective well-being: an integrated perspective. Annual review of gerontology and gerontology and geriatrics. New York: Springer.

Epstein A M, 2001. Six factors that influence your level of happiness. www./google.six factorsepestin.

Glaser W, 1965. Reality therapy: The new approach to psychotherapy. New York.

Glasser N, 1980. What are you doing? New York, NY: Harper Collins.

Glasser N, 1989. Control theory in the practice of reality therapy. New York, NY: Harper-Collins.

Glasser W, 1965. Reality therapy. New York, NY: Harper Collins.

Glasser W, 1976. Positive addiction. New York, NY: Harper Collins.

Glasser W, 1981. Stations of the mind. New York, NY: Harper Collins.

Glasser W, 1985. Control theory. New York, NY: Harper Collins.

Glasser W, 1990. A diagram of the brain as a control system chart. Los Angeles, CA: Institute for Reality Therapy.

Glasser W, 1990. The quality school. New York, NY: Harper Collins.

Hossein Pour M H, 2005. Effectiveness of group counseling using the approach of reality therapy in the identity crisis of male and female students, Master's thesis, University of Allameh Tabatabayi.

Khodkonesh A, 2007. Simple and multiple relationships of cognitive-personality and religious circumstances with feeling of happiness and its relationship with mental health and educational efficacy. Shahid Chamran University, PhD Thesis, School of Psychology and Educational Sciences, Shahid Chamran University.

Ramezan Pour E, 2003. Evaluation of mental health of junior high schools' and high schools' students in the school year of 2002-2003 in Mazandaran province.

Shafi Abadi A, 1998. Theories in counseling and psychotherapy. 6th edition. Tehran. Nashr-e- Daneshgahi.

Strumpfer D J W, 2006. The strengths perspective: Fort genesis in Adult Life. Social Indicators Research, 77, 11–36.

Wilson W, 1967. Correlates of avowed happiness. Psychological Bulletin, 67, 294-306.

Wubbolding R, 1988. Using reality therapy. New York, NY: Harper Collins.

Wubbolding R, 1990. Evaluation: The cornerstone in the practice of reality therapy. Omar Psychology Practitioner Series, 2, 6–27.

Wubbolding R, 1991. Understanding reality therapy. New York, NY: Harper Collins.