

The Effectiveness of Group Reality Therapy on the Psychological Well-being of students

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ABSTRACT

Background: Reality therapy aims to foster responsibility-taking and help individuals establish a successful identity. This study investigates the effectiveness of group reality therapy on students' psychological well-being.

Methods: The study population comprised all Payame Noor University students enrolled at Ghorveh branch during 2022. The research employed an experimental design with both experimental and control groups. A random sample of 30 students was selected, with 15 participants assigned to the experimental group, which received nine 90-minute sessions of group reality therapy. The remaining 15 students formed the control group. Data were collected using Carol Ryff's Psychological Well-Being Scale.

Results: The findings showed descriptive information regarding psychological well-being in pretest and posttest for both control and experimental groups. Psychological well-being mean value of students in experimental group in pretest was 308.01 ± 9.38 , while posttest mean value for the same group was 317.73 ± 8.99 . In contrast, psychological well-being mean value of students in control group in pretest was 309.93 ± 8.84 , with posttest mean value for this group being 310.46 ± 8.96 . The findings revealed that group reality therapy significantly improved the students' psychological well-being ($p < 0.05$).

Conclusion: Group reality therapy is an effective intervention for enhancing students' psychological well-being. Therefore, this method can be used to improve the psychological well-being of students.

Keywords: Reality Therapy, Psychotherapy, Psychological Well-Being

Introduction

The university is the country cultural body, established with the aim of creating the necessary facilities for thinking growth and development of students and helping them develop their talents. Reality therapy helps people examine their wants, needs, behavioural values, and the ways that assist them in fulfilling their needs (Wubbolding, Al-Rashidi et al. 1998). In this approach, facing reality, accepting responsibility, understanding fundamental needs, making moral judgments about behaviour as correct or incorrect, focusing on the here and now, exercising internal control, and consequently acting with the identity of success are emphasized, which are directly related to self-esteem (Wahyuningsih 2018). Glasser (Glasser 1981) stated that people should accept responsibility for enjoying better feelings towards themselves and life. According to the theory of choice, each human being enjoys five basic needs including 1. belonging and social inclination (love); 2. progress and power; 3. freedom; 4. recreation; and 5. the need for survival.

The individual needs to recognize the behaviour that they are seeking to reform, direct all of their own being towards it, and make no excuse for rejecting their accountability (Varkoohi, Pakdel et al. 2011). The primary aim of reality therapy is to change the unsuccessful identity and create responsible behaviour in the person, since irresponsible human behaviour results in anxiety and discomfort (Shafi Abadi and Naseri 2011). The philosophical basis of this approach, which has a positive view, emphasizes personal responsibility and human interest. Reality therapy is a view of life, humanity, and society that can entail more benefits (Shilling, 2022). In addition, mental health is one of the most important factors affecting the promotion and perfection of humans. This issue assumes importance, especially among students. Efforts for attaining a favourable life have always existed in all centuries, and noble men have always looked to find a more useful and constructive life. The psychology of 21st century has noticed that humans have to spend their own rational energy on their positive experi-

ences (Myers and Diener 1995). Psychological well-being has been extensively examined in literature in the last two decades, and its scope of study has ranged from individual life to social interactions (Cole 2006). Ryff, while laying emphasis on the fact that positive health is something more than lack of illness, states that psychological well-being refers to what humans need for well-being (Ryff 1989).

In a far-reaching analytical and explanatory process, Luthans (Luthans 2002) has stated that at first glance, mental well-being is affected by individual factors, and in this context, he has emphasized psychological capital. For him, psychological capital is a combined and interrelated construct that involves four components of perception and cognition, i.e., hope, optimism, self-efficacy, and tolerance. These components give meaning to human life in an interactive and evaluative process (Wood, Kendall et al. 2020), sustain human efforts for changing stressful pressures (Erez and Judge 2001), prepare him for entering scenes of action (Judge and Bono 2001), and guarantee his hardiness and resistance in the achievement of goals (Parker, Baltes et al. 2003). Hence, Creed et al. have admitted that these four sources serve as a resisting shield against pressures and stressors in a coherent system and thus act to enhance and form each other (Creed, Machin et al. 1999).

This conceptual construct is a subset of positive psychology, characterized by the following features: the individual's belief in their abilities to acquire success in conducting certain duties, creating positive outcomes in regard to here and now and future situations, enjoying perseverance in seeking goals and following necessary solutions for reaching success, and tolerating problems and returning to the normal level of function and even going beyond that to reach success. In a study, Irina et al. demonstrated that people with a higher level of psychological well-being are satisfied with their own lives, establish good relations, and have many friends (Paci, Szleifer et al. 2007). Veenhoven (Veenhoven 2008), in a study, showed that

psychological factors affect somatic functions and those with higher psychological well-being enjoy better somatic health. Research suggests the practical execution of reality therapy methods in countries such as the United States, Canada, Korea, Japan, Singapore, England, Norway, Ireland, Germany, Spain, Slovenia, Croatia, Italy, Colombia, Kuwait, Russia, Australia, New Zealand, and Hong Kong (Mason and Duba 2009). Various studies have indicated that reality therapy has been effective in multicultural societies (Wubbolding, Brickell et al. 2004)

Studies across the world have indicated the effectiveness of reality therapy on different components including mental and cognitive problems and disorders such as adults' depression (Bhargava 2013); women's resilience (Sadat Bari, Bahrinian et al. 2013); increasing happiness (Hakak 2013); improving educational functions (Kianipour and Hoseini 2012); source of control, self-confidence, and countering stress (Kim 2005); accepting social responsibility (Kim 2002); positive self-concept (Peterson, Chang et al. 1998); self-esteem (Varkoohi, Pakdel et al. 2011)); happiness and mental health; and general health, life expectancy, and anxiety (Tarjomi, Firoozabadi et al.)

Kim (Kim 2008) investigated the effects of reality therapy group counselling on internet addiction and self-esteem among Korean students. The experimental group participated in a reality therapy group-counselling program twice a week for five consecutive weeks. Therefore, in order to plan appropriate measures, promote mental health services, psychological well-being, and the establishment of related policies in the community, it is necessary to become acquainted with appropriate treatments, including reality therapy for students. Having information about this method of treatment can be effective in the implementation of medical and psychological processes for those in need, so that they can improve psychological well-being in these students. Thus, identifying and implementing effective group reality therapies to promote students' psychological well-being is paramount. This paper investigates the effectiveness of group reality therapy on students' psychological well-being. It

aims to practically assess the psychological well-being of Ghorveh students using a control group and an experimental group, with the experimental group receiving group reality therapy.

Methods

The method in this research is experimental, with experimental and control groups. The research population includes all Payame Noor University students of Ghorveh branch in Iran who were enrolled in 2022. In this research, population included 550 undergraduate students, of which 30 students were selected through simple random sampling method as the research sample size. Experimental group consisted of 15 students who received group reality therapy, while control group consisted of 15 students who did not participate in group reality therapy. Experimental group attended nine 90-minute sessions of group reality therapy, while control group did not receive any training. Inclusion criteria were the consent of the individuals selected for attending treatment sessions and having motivation to promote psychological well-being. Exclusion criteria were having a disorder or illness, being treated for a disorder or illness, simultaneously attending other treatments, reluctance, and lack of consent to attend meetings. Descriptive statistics (mean, standard deviation) as well as inferential statistics (one-way covariance analysis) using SPSS-20 were applied to analyze data. The significance level was considered to be 5% in this study. Psychological Well-Being Scale was used for data collection.

Psychological Well-Being Scale: This scale was developed by Carol Ryff in 1989 (Ryff 1989). This test had 84 questions and 6 factors. Participants responded to the questions on a 6-point scale (from totally disagree to totally agree). As many as 47 questions were scored directly, while 7 questions were inversely scored.

The Cronbach's alpha obtained in Ryff's study was as follows: self-acceptance (0.93); positive relations with others (0.91); self-autonomy (0.86); control over the environment (0.9); purposeful life (0.88); and personal development (0.87). The reliability coefficient was found to be 0.82 via the



Psychological Well-being Inventory's retest method, while with regards to subscales of self-acceptance, positive relations with others, self-autonomy, control over the environment, purposefulness in life, and personal growth, the reliability coefficient values were 0.71, 0.77, 0.8, 0.90, 0.70, and 0.78, respectively. The reliability coefficient in the present study was 0.86 through Cronbach's alpha.

2.1 Summary of sessions

– First session: Introducing reality therapy programs, the theory of choice, and performing the pretest.

– Second session: Regulating rules and objectives of the group, and discussing the theory of choice.

– Third session: Familiarizing members with the concept of taking responsibility for their conduct, and understanding the significance and necessity of responsibility in life.

– Fourth session: Introducing the five basic human needs: love and belonging, freedom and power of choice, progress and power, recreation, and the physiological need for survival.

– Fifth session: Familiarizing members with basic needs in real life, the effects of these needs on life, and their ability to choose the best way to meet these needs.

– Sixth session: Familiarizing members with the process of planning and resolving problems in their current life.

– Seventh and eighth session: Understanding the theory of choice and its role in personal behaviours, resolving conflicts, general behaviour components, the concept of the qualitative world, contradiction, and the ability to face it, finding alternative activities, destructive behaviours, and linking behaviours.

– Ninth session: Performing the post-test.

Results

The mean age of participants was 21 years old, with a range from 19 to 23 years old; of the 30 individuals, 15 were female, and 15 were male ($p < 0.05$). Table 1 shows the descriptive information regarding psychological well-being in pre-test and post-test for both control and experimental groups (Table 1).

Table 1. Descriptive information on psychological well-being in the pretest and posttest of control and experimental groups

Group	Stage	Psychological well-being	
		Mean	Standard deviation
Experimental	Pre-test	308.01	9.38
	Post-test	317.73	8.99
Control	Pre-test	309.93	8.84
	Post-test	310.46	8.96

Table 2 indicates that the homogeneity of slopes, with an F-value of $F(1, 26) = 1.97$ for psychological well-being, was not significant. Therefore, the assumption of homogeneity of regression slopes for the psychological well-being variable was fulfilled. The results of Leven's test for the homogeneity of

variances in psychological well-being ($F = 0.463$, $p = 0.502$) were not significant at the 0.05 level. This suggests that the variance in psychological well-being between experimental and control groups was not significantly different, supporting the assumption of homogeneity of variance (Table 2).

Table 2. The results of the homogeneity of slopes assumption test in pre-test and post-test of control and experimental groups

Variables	Sum of Squares	d.f	Mean Square	F	Sig.	Eta square
Group	4.242	1	4.242	4.610	0.041	0.151
Pre-test	2232.781	1	2232.781	2426.543	0.000	0.989
Pre-test * group	1.814	1	1.814	1.972	0.172	0.070
Error	23.924	26	0.920			

Based on these findings, covariance analysis was used to examine the hypothesis, and the results are presented in Table 3. Table 3 shows that the F value ($F = 652.477$) and the significance level (0.001) for the group variable show a significant difference between the two groups in the post-test.

Based on these results, group reality therapy is effective in improving the psychological well-being of the students. Additionally, the value of $\eta^2 = 0.96$ further supports the high effectiveness of this method on this variable (Table 3).

Table 3. Results of covariance analysis on pre-test and post-test mean scores for psychological well-being in - control and experimental groups.

Variables	Changes sources	Sum of Squares	d.f	Mean Square	F	Sig	Eta square	Observed power
Psychological well-being	Pre-test	2232.929	1	2232.929	2342.417	0.001	0.989	1
	Group	621.979	1	621.979	652.477	0.001	0.960	1
	Error	25.738	27	0.953				

Discussion

The current research was conducted to determine the effectiveness of group reality therapy on students' psychological well-being. Based on the findings, it can be concluded that employing reality therapy can effectively enhance students' psychological well-being.

These results align with previous studies by Sadat Bari, Bahrinian et al. (Sadat Bari, Bahrinian et al. 2013), and Kim (2005); In these studies, reality therapy has increased resilience and countering stress, which are components of positive psychology and are consistent with the results of the present study. As a result, it can be argued that reality therapy can be effective in the components of positive psychology. In the meetings, people become familiar with the process of planning and solving problems in their current lives, and also members became familiarize with the concept of taking responsibility for their conduct, and understood the significance and necessity of responsibility in life, which led to the increase in positive psychology components (well-being, women's resilience and

happiness) in these studies. Considering that one of the components of psychological well-being is increasing resilience and coping with stress, and since in reality therapy sessions, participants try to solve their own life problems in a realistic way with proper planning, and they are taught that they must accept responsibility for their lives and have a good plan to solve life problems with responsibility, it becomes easier for them to cope with stress and manage stress, and they can better manage the stress and pressures of life. This recognition and awareness of problems and efforts to solve them, and as a result, success, can lead to psychological well-being, which is similar to the results of Sadat Bari, Bahrinian et al. (2013) and Kim (2005).

It can also be argued that reality therapy helps individuals confront the realities of their behaviors and choices, allowing them to recognize that they, rather than external factors, are responsible for their difficulties. It is essential for individuals to overcome denial and reassess their behaviors and desires, enabling them to make improved choices that can lead to a more satisfying life, and ultimately, a



more flexible, meaningful, and enjoyable existence.

One of the results of reality therapy sessions was an increase in happiness, since participants became familiar with basic needs in real life, realized their effects on life, and achieved the ability to choose the best way to meet these needs, increasing psychological well-being, which is consistent with Hakak's (2013) results. It can be stated that the ability to choose the best way and method to meet basic needs and become familiar with these needs, including love and belonging, freedom and power of choice, progress and power, recreation, and physiological needs for survival and trying to meet them, can lead to psychological well-being.

The findings are consistent with those of Kim (2002), Varkoohi, Pakdel et al. (2011), and Kianipour and Hoseini (2012). It can be suggested that one of the reasons for the similar results of these studies is the implementation of reality therapy in groups. Group therapy provided an opportunity for individuals to discuss their issues and challenges, express their feelings within the group, and receive constructive feedback. Through active participation, individuals can enhance their social skills and improve their relationships with others. Group therapy enables participants to build a social network with other group members, which can facilitate life changes. Participants in group therapy can benefit from interactive exchanges that promote the perception and acceptance of shared values and goals, while also learning specific behaviors and attitudes. This process contributes to improved psychological well-being. Additionally, open communication, expression of feelings, and attention to thoughts and beliefs are critical for mental health, fostering communication and social abilities, and ultimately enhancing psychological well-being. Factors such as an atmosphere of sincerity and respect, the free expression of feelings, group solidarity, and empathic understanding within the group therapy setting, along with the shared experiences of participants, foster a shift in attitude towards treatment. This change in perspective can improve relationships between group members and contribute to the enhancement of their psychologi-

cal well-being. Both groups aimed to improve future prospects, promote self-satisfaction, and ultimately enhance the psychological well-being of the individuals involved. In group therapy, group members found a sense of social solidarity with each other by understanding similarities, and creating hope became particularly important and created the basis for improving mental health. Factors such as a sincere and respectful atmosphere, free expression of emotions, group solidarity, and empathetic understanding in the methods used in group therapy, emphasizing concepts related to the self along with the characteristics of individuals, created a different attitude compared to the beginning of the treatment period in the participating adolescents. This change in attitude improved the relationships between the members of the two groups and increased hope for improving the future path of life and having a sense of self-satisfaction and improving mental health in most participants.

These results align with the findings of Etemadi, Nasirnejhad et al. (Etemadi, Nasirnejhad et al. 2014). In reality therapy sessions, the followings are taught: understanding the theory of choice and its role in personal behaviors, resolving conflicts, general behavior components, the concept of the qualitative world, contradiction, and the ability to face it, finding alternative activities, destructive behaviors, and linking behaviors. Therefore, they can play an effective role in stress management and psychological well-being.

Focusing on the dimension of responsibility is the core of reality training. Therefore, reality can be effective in learning responsibility behavior in a person and thus preventing anxiety in a person. The therapist concentrates all his efforts on behavior, creating a private and active relationship in a responsible manner, especially considering the client's current behavior in order to succeed. The therapist does not spend time devoting himself to the role of the workshop and the searcher and listening to the accusations of the authorities, but tries to focus on the behavior of a person more easily rather than being threatened, providing the basis for responsible behavior and successful

health. He/she can strengthen character by reducing anxiety and intimidation (Shafie Abadi and Naseri, 2011), explaining the impact of reality education on the well-being of students.

The limitations of the present study included the interference of classroom activities with treatment sessions and the non-selection of subjects based on their psychological well-being. Another limitation was lack of a follow-up phase.

Conclusion

By addressing negative thoughts, group reality therapy promotes effective planning for goal attainment and reinforces overall psychological health. Reality therapy, grounded in choice theory, is not only a therapeutic approach, but also a philosophy and way of life that individuals can adopt. This method is compatible with Iranian culture, integrating the principles of Islamic religion, which emphasize accountability, reasonableness, and simplicity of concepts. The therapeutic approach does not impose limitations on the educational orientation for training therapists. It serves as a comprehensive approach that bridges various therapeutic methods in psychology. Given its positive qualities, it is recommended that future studies incorporate a follow-up process.

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Code of ethics

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Authors' Contributions

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