Introduction

Alfred Adler was the first psychiatrist of the modern era to do family therapy. His approach was systemic long before systems theory had been applied to psychotherapy (Carich & Willingham, 1987). After World War I, Adler set up more than thirty child-guidance clinics in Vienna, where he conducted therapy sessions in an open forum before parents, teachers, and members of the local community. All of these clinics were eliminated by Hitler’s Nazi Party by 1934 (Christensen, 2004). Rudolf Dreikurs brought the process to the United States in the form of family-education centers. He systematized and refined Adler’s early work with family constellation and purposeful behavior, delineating the goals of children’s misbehavior and developing an interview and goal-disclosure process that produced a recognition reflex in children (Terner & Pew, 1978).

A basic assumption in Adlerian family therapy is that both parents and children often become locked in repetitive, negative interactions based on mistaken goals that motivate all parties involved. Further, these negative interactions and patterns are a reflection of the autocratic/permission dialectic that has permeated much of the Euro-American social heritage. In most cases, therefore, the problems of any one family are common to all others in their social and ethnic community. Although much of Adlerian family therapy is conducted in private sessions, Adlerians also use an educational model to counsel families in public, in an open forum at schools, community agencies, and specially designed family-education centers. At these centers, the therapist engages both a family-in-focus
and the audience in an exploration of motivations and a reorientation of the family based on encouragement and the use of natural and logical consequences (Bitter, Roberts, & Sonstegard, 2002; Christensen, 2004; Sherman & Dinkmeyer, 1987).

Oscar Christensen, Professor Emeritus from the University of Arizona and one of America’s foremost Adlerian family counselors, used an open forum when he met with the Lohman family (Christensen, 1979). Joyce and Tim Lohman were the parents of four children: David (age 14), Michael (age 12), Donna (age 10), and Nick (age 8). David and Donna were African-American children adopted by Joyce and Tim—both of whom were Caucasian. Michael and Nick came to the family by birth.

During the initial interview, the parents were asked to help the counselor learn about each of the children. David was described as “bossy, bright, but not a hard worker.” Michael was described as “hard working, responsible, and the ‘good’ child.” Given Adler’s focus on the influence of psychological birth order, which I will develop more fully later, it is interesting to note that Michael seems to have found an area of weakness in David (“not a hard worker”) and capitalized on it. Donna was presented as “liking to be the center of attention, thriving in a social context; happy at times, but also competitive and not so easy going.” Nick is the “baby of the family, shy, quiet, and needing people to do things for him.” Joyce further noted that Donna probably didn’t have a special place as the “only girl,” because both parents tended to see boys and girls as pretty much the same.

The presenting issues for the Lohman family start with a problem regarding lost or stolen money in the home. Michael has a paper route and he has kept the money he collects in a jar on the bookshelf in the living room. His money is now missing, and there has been a lot of accusing going on. Everyone in the family denies taking the money and Michael has now taken to locking his money up in the trunk of the family car. The parents also are concerned about the fighting that seems to happen most often between David and Donna. Tim believes that they seem to enjoy it, but that “the rest of the family does not.” And finally, there is some concern about Nick in relation to doing work around the house. He may have the job of sweeping, but he “forgets,” has to reminded by David or mom, and sometimes even gets others to do his work.

Listening to the descriptions and issues offered by the parents, Dr. Christensen (1979) described the family system in the following manner:

I think we really have two oldest children in this family: Dave finds his place by being the leader, the responsible person, and many things in that direction. Mike’s power, I think, is in his goodness. He gets an awful lot of mileage out of the missing money, and all the rewards and the good-guy things he was trying to do with the money. Donna finds her place by being the one nobody loves; she feels left out, and she creates a lot of situations in which people prove that she is right. And Nick, of course, is the super baby, whose greatest strength is putting others in his service. It’s as if his great power over people, really, is in being helpless or needing assistance.

What do you think of Dr. Christensen’s summary of the family system? Is that how you would describe these children or do you have a different picture? What influence do you think the attitudes, values, beliefs, and convictions of the parents have on the family unit? Do you think, in general, that parents or siblings have a greater influence on individual personality development? What role do you think race or ethnicity play in this family and the difficulties that are reported here? What effect do you think adoption has in this family? David and Donna were adopted when they were younger than five years old: Would it have
made a difference in the development of the family system if they had been older when they were adopted? Are you concerned at all with the idea that parents within the dominant culture in the United States are raising children from a discriminated and marginalized culture? Do you think David and Donna will lose a significant part of their heritage and culture being raised by the Lohmans? How might a consideration of race, ethnicity, and culture inform and structure this family counseling session?

In this initial session, Dr. Christensen was interested in getting to know the children psychologically, paying special attention to the mistaken goals that might be motivating the problem behaviors described by the parents. Here is the interview that he conducted with the four children in relation to the first issue the parents raised.

**Christensen:** Mike, mom tells me that there’s some money missing at your house that you had. Can you tell me a little bit about it?

**Mike:** Quite a bit of money was missing. I had it on a shelf, and then I noticed it was missing the next day. This was my money from collection when I do my route.

**Christensen:** How does that make you feel?

**Mike:** I don’t like it at all: Distrustful of the kids in my family. Since it was taken, I don’t let them use any of my stuff or go in my room.

**Christensen:** That’s kind of sad, isn’t it? You don’t feel like you can trust them. Did you ask the other kids who did it? You don’t think they did—or do you?

**Mike:** Yes, I think so, because no one else came in the house.

**Christensen:** So who do you think it is?

**Mike:** Well, Donna’s taken some money before, and Nick has. But I don’t think it’s Nick, because I threatened that no one could use stuff in my room, and Nick, he likes to use stuff, like my football. So Donna could have done it.

**Christensen:** Maybe Donna, huh? Donna, it looks like you might want to say something to that. Do you want to say something?

**Donna:** (head slightly down with no eye contact) Yeah. I wouldn’t do it, because before Mike offered us each a dollar if any of his stuff wasn’t stolen. So, I am trying not to go in his room at all or steal anything from anybody in the family.

**Christensen:** Well, that’s pretty neat. And how do you “try” hard?

**Donna:** I try by not thinking of money anymore.

**Christensen:** Okay, do you have any idea why you maybe stole money before?

**Donna:** I don’t know.

**Christensen:** Could it have been your way to show everybody you’re the boss?

**Donna:** I don’t think so.

**Christensen:** I don’t think so either. Could it possibly be that this is your way of kind of getting even with everybody?

**Donna:** Might have been.

**Christensen:** Might have been. That’s a possibility, huh? So sometimes you like to hurt other people’s feelings, because your feelings are hurt?

**Donna:** Yes.

**Christensen:** Could it be that sometimes Mike and Dave hurt your feelings?

**Donna:** Yeah.

**Christensen:** Could you tell me how they do it?

**Donna:** They call me names! Saying I’m stupid.
Christensen: That would hurt anybody’s feelings, I suspect. Why do you suppose they do that?

Donna: I don’t know.

Christensen: I’m not sure either, but do you suppose you sometimes do something to make them call you stupid?

Donna: Sometimes. Because they think I’m trying to be better than they are, and they just want to try to make me feel bad, because my feelings get hurt easy.

Christensen: And when your feelings get hurt easy, what do you make them do?

Donna: I don’t know.

Christensen: Could it be that sometimes you feel sad, because this is a way you have to feel a little bit sorry for yourself? And when you feel sorry for yourself, what does that give you a right to do . . . when you’re feeling oh-so-sad?

Donna: (shrugs) I don’t know.

Christensen: Sometimes, does it let you kind of get even with the boys? (pause) So what do you do when you are really mad at the boys? Sometimes, do you think about taking something of theirs that means a lot to them? Maybe really get even with them? [Donna’s face suggests a recognition reflex as described later in this chapter.] That’s a possibility.

Dr. Christensen turns the conversation toward Nick in an effort to help him understand the motivation for his forgetfulness. Adlerian family counselors and therapists use a tentative goal-disclosure process to see if the child will indicate through a little smile and a twinkling in the eyes (what Dreikurs called a recognition reflex) that the purpose has been revealed.

Christensen: Nick, mom tells me that you have some difficulty getting the sweeping done. In fact, you’ve had the sweeping job for a couple of weeks now and still haven’t gotten around to it. How come you do that?

Nick: Because I keep forgetting.

Christensen: How come you’re such a good forgetter?

Nick: I don’t know.

Christensen: I just don’t know if I’ve ever met anybody who has such a good forgetter as you do. Are you probably the best in the whole family at forgetting?

Nick: (shrugs) Un-huh.

Christensen: Must take a lot of skill to be able to forget that well: Do you have any idea why you forget so good?

Nick: Nope.

Christensen: I’m not sure either, but could it be that this is a good way for you to have people help you—and take care of you?

Nick: Maybe. (with a recognition reflex)

Christensen: Maybe. And could it be your way to have mom and dad treat you a little extra-special . . . because you’re the baby.

Nick: Un-huh.

Christensen: Would you like to change that? (Nick: Un-huh.) Nick, one thing I’m going to tell your mom and dad—and I think your big brothers and big sister, too—is that in order to show you how much we respect you, we’re going to quit doing so much for you. That’s how we allow you to grow up. And that’s where big guys in the family, like Dave, come in: Dave is an important person in your life, and I’d like to ask Dave to not help Nick so much. Let him be the person who helps for a change.
Dr. Christensen then engages Dave and Mike in a conversation about the ways in which they become involved in fighting with Donna, their younger sister. Donna sometimes may provoke one of them into fights that go on until one of the parents gets upset. This happens most often with Dave. Mike, on the other hand, has such an investment in being the “good guy” that he sits back and smiles when Donna gets in trouble. This encourages Dave to keep Donna down. It is suggested that both of them sometimes work at keeping Donna the “bad one.” Dr. Christensen wonders if it might be possible for the boys to walk away when provoked and for them to refuse to fight with her.

Children most often misbehave in direct relation to the parent value system. Here, the parents value harmony and cooperation, so fighting is a response that both gains attention and demonstrates power.

Christensen: I think most people would perceive Donna to be the problem child. I don’t think she is. I think she has perceived that the best way to fit into this family is through her sadness. I’m not impressed with her sadness, and I would like to see [the rest of the family] become less impressed with it. She’s much too strong a child to feel sorry for her. She can handle these three boys and any other six just like them.

Staying out of the children’s fights will minimize the first-child dominance of Dave, as well as the moral superiority of Michael, the former demonstrating power through bossiness and the latter through moral goodness. Nick demonstrates his power by being helpless and putting others in his service. The recommendation for the family is to never do things for Nick that he can do for himself.

Key Concepts

Adlerians believe that human beings are essentially social, purposeful, subjective and interpretive in their approach to life (Sweeney, 1998). These attributes are no accident. They are required at least in part from the moment of birth. Without the social, physical, and emotional nurturing provided in the family, no infant would survive. Within the family, children quickly become active agents, defining and redefining the family constellation or system; striving for growth, significance, and meaning; and acting in line with their subjective, and too often mistaken, interpretations of life.

Parents should be the natural leaders of families. They are older, more experienced, and carry societal mandates for rearing the next generation. Too often, however, children have a far greater impact on the development and interactions of the family than do the parents. Even in functional families, children seem more capable of influencing adult behavior than the other way around. In part, this is because most adults have very little effective preparation for parenting. When push comes to shove, most parents re-enact the autocratic or permissive upbringings that they experienced themselves.

Family Atmosphere

“The conjunction of all the family forces—the climate of relationships that exist between people—is termed family atmosphere” (Sherman & Dinkmeyer, 1987, p. 9). Because the family is a system, each member exerts an influence on every other member. In each family, an atmosphere or climate develops that can be said to characterize how the family members relate to each other. We already have noted that both autocratic and permissive atmospheres are common in western Euro-American culture and easily become incorporated in family life as a need for power and control.

Family atmosphere, however, is unique to each family. The relationship between the parents is often the clearest indication of what will constitute the family’s way of being and
interacting. Parents are the models for how one gender relates to the other, how to work and participate in the world, how to get along with other people. Children may experience these models as joyful, angry, loving, frightening, strict, easy-going, involved, indulgent, protective/overprotective, hostile, nurturing, challenging, or respectful, to name a few. What the family comes to value plays a significant role in the development of children and family life. When both parents maintain and support the same value, Adlerians call it a \textit{family value}. It is a value that cannot be ignored and that will require each child to take a stand in relation to it. Common family values emerge around education, religion, money, achievement, right and wrong.

An essential ingredient in family atmosphere is the manner in which the members communicate. Who speaks to whom? Do they tend to be hostile, critical, commanding, direct, indirect, attentive, preoccupied, active, passive, cooperative, competitive? Are they warm, caring, and able to negotiate differences? Do they utilize double messages, create openness or rigidity, fear or seriousness? Is there a sense of tension, challenge, or ease? (Sherman & Dinkmeyer, 1987, p. 10)

Each person within the system learns to negotiate within the limitations of the climate established. With rare exceptions, the atmosphere in which we are raised tends to become the model for how we expect life and the world to be.

\section*{The Family Constellation}

Adler (1930, 1931, 1938) often noted that the family system or constellation consisted of the parents, children, and even extended family members, but then he would immediately shift to a discussion of birth order. Adler made reference to essentially five birth positions: only, oldest, second of only two, middle, and youngest.

Both only children and oldest children have their parents all to themselves at least for a short period of time, and parents seem to have a strong influence on their early development. Only and oldest children will tend to have a high achievement drive, regardless of whether they actually do succeed in achieving, and both will be interested in continuing what the family values. Only children, however, will never be dethroned by the birth of another sibling. They will remain the center of the adult world. They may develop adult language sooner than other children, and they will be almost forced to take a stand for or against the parents’ value system: They either embrace it or fight it, but seldom take a middle ground. If only children are pampered or over-protected, they easily can become spoiled, but they also can respond to care, affection, and additional resources with a high degree of success.

It is hard for oldest children not to become impressed with the position of being “first” or “on top,” and they will do almost anything to stay in that position. When this position is threatened, oldest children may seem timid, extremely sensitive, or easily hurt. Many oldest children are dependable, serious, responsible, “good” individuals who seek adult approval. They may tend toward perfectionism and can sometimes want to do only those things at which they already know they can succeed. They often are expected by their parents to “set a good model” for their siblings, and younger children will consider them bossy.

The child who is the second-of-only-two is extremely focused on the oldest child. Indeed, the oldest child has far more influence on the child in the second position than the parents ever will have. In most cases, the second-of-only-two will decide to be the opposite of whatever she or he believes the firstborn to be. It is as if the second born is in a race, always trying to catch up, and in constant competition. The second-of-only-two will never have the parents’ undivided attention, so children in this position seek to be different: The things at which the oldest child excels, the second child will avoid—and visa-versa.

When a third child is born, second children become middle children. They quickly learn that they are squeezed between an oldest child, who always seems to be on top, and a youngest child, who seems to be able to get privileges and service from the parents. Life seems
unfair to middle children. They also may believe that the oldest and the youngest align against them, leaving the middle child to take the blame for problems or simply leaving them out altogether. They are sensitive to criticism and easily angered when being bossed around. They may seek a peer group to whom they give more allegiance than the family. They even may rebel against expectations and traditions. But they never stop comparing themselves to others: Suffering by comparison too often becomes a constant in life.

Youngest children will never be dethroned. A true youngest is always the baby of the family. Typically, youngest children use helplessness and dependent behaviors to put others—especially parents—in their service. They also can be good entertainers and good observers. Often, they will use their observations to develop in areas and ways that none of their siblings have attempted and often they will outshine all of their brothers and sisters. Being the baby can lead them to the conclusion that they are special, but they also can decide they are unwanted. Those who believe they are special may seek pampering or over protection: They can become easily spoiled. Those who think that they do not have a place may begin to feel hated or neglected.

These five positions represent vantage points from which children view the world. It is not the position, however, that counts, but rather the meaning and interpretation the child gives to that position. In this sense, every person’s birth position is unique and uniquely defined. Adler’s (1931) emphasis on phenomenological interpretation of family position (or perceived place within the family) was so strong that, even when he talked about parents in an unhappy marriage, he believed children would intervene as active agents. Although he acknowledged the dangers of raising children in a disruptive marriage, he also thought that the children would become skilled at reading dissension and play one parent against the other. Adlerians believe that children do not merely react: They interact, often having more influence on the responses of parents than the other way around.

In addition to a phenomenological assessment of birth position, Adlerians consider a number of additional variables in describing the family constellation. How many years are there between the siblings? Is a child the only boy or girl in the family? What are the effects of being special (for example, being twins; being the favorite of a parent or grandparent; being ill, physically challenged, traumatized, or facing death; or being talented or beautiful)? What are the effects of family structure (for example, being in a single parent home or in a blended family, or being part of an extended family)? Taken together, each of these considerations contributes to the development of a pattern that indicates how family members fit into the system and how each is likely to act and interact. “It is the actions and interactions within the family and the interpretations that each person assigns to these that give initial meaning to children’s lives and to the family as a whole” (Bitter, Roberts, & Sonstegard, 2002, p. 46).

Adlerian family therapists view the family constellation as a description of how each person finds a place within the system. How does each child relate to the parents, guardians, or extended family members? How does each child relate to and define “self” in relation to the other children? Who is most different from whom? Which children have aligned with each other? Against whom? Which parents have aligned with which children? Toward what end? How does each child address family values; negotiate within and influence the family atmosphere; or handle the impact of culture, age and gender differences, and the demands of school and society?

A typical investigation of a family constellation may start by asking the parents to describe each of the children. These descriptions often reveal both the effects of birth order and the unique ways in which each child has adapted behaviors to engage or challenge what is important to the parents. Many Adlerians use genograms to develop a graphic picture of the family system (Sherman & Dinkmeyer, 1987; Bitter, 1988, 1991a). A phenomenological perspective can be gained by asking family members, especially the index person or a child the family identifies as having difficulties, to provide three adjectives for each person in the
genogram. In 1932, Adler noted that descriptions of family members reveal a statement about self within various relationships. He stated:

... there is no character trait without a relationship to others. When the patient says, “My father was kind,” this means “he was kind to me.” When he says his mother was critical, the idea which penetrates is that he attempted to keep at a distance from his mother. (Ansbacher & Ansbacher, 1979, p. 194)

Although descriptions of parents tend to reveal essential information about the describer’s sense of belonging, adjectives assigned to siblings require a knowledge of the relationship the person has with each of the siblings. Knowing that my sister is “happy, achieving, and pleasing” is only useful if the therapist knows whether the describer is similar to or the opposite of this sister. In the Adlerian model, a genogram says nothing in and of itself. It is a starting point from which clients communicate the meaning in their lives. When whole families construct a genogram, there are often as many interpretations as there are family members.

**Mistaken Goals: An Interational View**

Adlerians make a distinction between the life goals that account for the development of lifestyles and the more immediate goals that account for everyday behavior. Dreikurs (1940a, 1940b) first delineated four goals of children’s misbehavior as a motivational typology for the everyday behaviors of children. These goals are **attention getting, power struggle, revenge, and a demonstration of inadequacy** (also called an **assumed disability**). They act as “short-hand explanations/descriptions of consistent patterns of misbehavior in children” (Bitter, 1991b, p. 210), and they reflect increasing levels of discouragement with each additional goal.

Dreikurs (1950) and Dreikurs & Soltz (1964) also developed a systematic approach to goal recognition based on (a) descriptions of the child’s misbehavior, (b) the parents’ reactions to the misbehavior, and (c) the child’s reaction to the parents’ attempts at discipline. The goal recognition criteria can be summarized using the following chart:

**Figure 5.1**

Identifying the Mistaken Goals of Children’s Misbehavior.
Using these four goals as tentative hypotheses, Dreikurs found that he could suggest mistaken goals to children, and that a recognition reflex (a smile or a twinkle in the eyes) would indicate which goals the children sought. Let us say that two children are constantly fighting in the family, often drawing one or both parents in as referees. Dreikurs' goal disclosure process would take the following form:

**Therapist:** Do you know why the two of you fight all the time?
**Child:** (shrugging shoulders) Well, he starts it.
**Therapist:** Maybe, but I have a different idea. Would you like to hear it?
**Children:** (shrugging shoulders again, but looking attentive).
**Therapist:** Could it be that the two of you fight all the time to see if you can get your mom or dad to tell you to stop?

In this example, the goal of attention getting has been suggested in terms that the children will understand. The other three goals might be tentatively advanced in the following manner:

**Power:** Could it be that you want to show your parents that you are the boss or that they can't make you stop?

**Revenge:** Could it be that you feel hurt, and this is a way to get back at them, to get even?

**Assumed disability:** Could it be that you want to be left alone?

I have added three additional goals to this Adlerian conceptualization that I believe act as conscious motivations for some behaviors, especially in very young children. These goals are getting, self-elevation and avoidance (Bitter, 1991b). For example, some children simply operate on the mistaken notion that they should get whatever they want, no matter what it is or to whom it belongs. Because the child has no prohibition against taking what he or she wants, the motivation of getting can be wholly conscious. Adults may call the misbehavior "stealing," but the child is simply getting what is wanted. Another example of a conscious motivation is lying. In order to lie, a child must know the truth and consciously choose to say something that is false. If the child does not know a statement is false, she or his is mistaken, but not lying. When we ask, "What is the purpose of lying?"; two immediate goals tend to account for this misbehavior: Self-elevation or avoidance. In the case of self-elevation, children tell stories that make them feel or appear more important than they really are. By far, however, the most common goal for lying is avoidance in all of its various forms: avoidance of punishment or criticism; avoidance of embarrassment or humiliation; avoidance of responsibilities or commitments; or even avoidance of hurting other people's feelings or disappointing others.

In addition to delineating the mistaken goals of children, several Adlerian writers have suggested interactional, mistaken goal patterns between adults and children (Bitter, Roberts, & Sonstegard, 2000; Main, 1986). In one of Dreikurs' (1948) early books, he suggested that parents had mistaken goals that often aligned with the mistaken goals of children. Based on Dreikurs' suggestion, I developed the chart, shown in Figure 5.2, that outlined this interactional goal process (Bitter, Roberts, & Sonstegard, 2002). Adults tend to create a picture of themselves as good parents (adult goal #1). This picture includes certain attributes, ways of being, and desired child behaviors that are deemed essential to being a good parent. Children see this picture and read its meaning in everything the parent does, and they use it as a button
they can push to get attention. Either constant button pushing or power struggles can lead parents to seek control (adult goal #2), which in turn invites more power struggles. When parental control is constantly challenged or the child acts in ways designed to get even, parents may resort to seeking revenge (adult goal #3). When this happens, the family usually has developed an interactive process that is pathological. In rare cases, parents become totally discouraged and give up, seeking to demonstrate that raising this child is hopeless (adult goal #4).

By keeping these interactive goal patterns in mind, Adlerians are able to make sense of both the children’s behaviors and the parental actions and reactions reported in family process. Goal recognition and disclosure is central to Adlerian family counseling and therapy (Christensen, 2004; Bitter, Christensen, Hawes & Nicoll, 1998). It systematizes the interviewing process and allows parents and children to back away from mistaken behaviors in favor of more functional and effective approaches.

## Therapy Goals

Adlerian family therapists want to engage parents in a learning experience and a collaborative assessment. Part of this assessment includes an investigation of the multiple ways in which parents function as family leaders—or lose the ability to do so. Under most conditions, a goal of therapy is to establish and support parents as effective leaders of the family.

Using the information gathered during assessment, Adlerians explicate the systemic process in the family by describing the place that each person has assumed and the interactive
processes that are repeated in daily living. Goal disclosure also is used to facilitate an understanding of the motivations involved. These interventions serve another goal of therapy: to replace automatic, often non-conscious, negative interactions with a conscious understanding of family process.

Adlerian family therapists characterize their approach as motivation modification rather than behavior modification. The therapist develops with families specific changes in process that are designed to replace mistaken goals with those that favor functional family interactions. During the last half of the 20th century, Adlerians developed a wide range of parenting skills and interventions that constitute what is now called authoritative-responsive parenting or democratic child-rearing (Dinkmeyer, McKay & Dinkmeyer, 1997; Lew, 1999; Popkin, 1993). Based on an understanding of the family’s specific motivational patterns, parents often leave the therapy session with suggestions designed to initiate a reorientation of the family.

The Therapist’s Role and Function

Adlerian family therapists function as collaborators who seek to join the family from a position of mutual respect. Within this collaborative role, Adlerians stress the functions of systemic investigation and education (Bitter et al., 1998; Bitter, Roberts, & Sonstegard, 2002). The systemic investigation focuses on (a) the family constellation or system, (b) the motivations behind problematic interactions, and (c) the family process throughout a typical day. The results of this investigation are used to disclose and discuss the mistaken goals or ideas that may be involved in problematic parent–child interactions. In raising mistaken goals to a conscious consideration, the therapist is able to develop with the family interventions and recommendations designed to correct mistaken goals and provide parents with an understanding of parenting skills associated with more effective and harmonious living.

Adlerian family therapists often use a public therapy process they call open-forum family counseling (Bitter et al., 1998, Christensen, 2004). Similar to the process first used by Adler in Vienna, the therapist counsels a family in front of a group of parents, teachers, and other community members. The counselor in these sessions has two clients: the family-in-focus and the audience. The process emphasizes interactions within the family. Very little is disclosed that could not be observed by anyone watching the family in public. By working with the commonalities between the family and the audience, the therapist educates many families through one. It is not uncommon for families in the audience to get more out of the session than the family-in-focus.

Techniques

The open-forum process used by Adlerians has been delineated in several texts over many years (Christensen, 2004; Dinkmeyer & Carlson, 2001; Dinkmeyer, & Sperry, 2000; Dreikurs, Corsini, Lowe, & Sonstegard, 1959). More recently, the process has been incorporated as part of Adlerian brief therapy (Bitter et al., 1998). In this model, the parents generally are interviewed initially without the children, a process that supports the establishment of parents-as-leaders in the family. The therapist joins with the parents and the audience through an exploration of the family constellation. The experience of parent–child relationships held in common between the family and the audience links the two, allowing members of each system to have a therapeutic influence on the other.

Problem Descriptions and Goal Identification. Adlerian therapists use specific examples to understand the concerns that parents present. While listening to a description of specific problem incidents, the counselor often asks the parent(s): ”When was the last time that this problem..."
happened? What did you do about it?” These questions help to establish the negative interaction pattern that is likely to be repeated many times during the day. The therapist also asks the parent(s): “How did you feel (or react) when . . . ?”. Parents’ feelings and reactions are often the most reliable clue to both mistaken goals in children and adults. (See the earlier discussion of mistaken goal for the relationship between child motivation and parental response.)

Typical Day. Adlerians often assess the family atmosphere and family interactional patterns by asking the family to describe a typical day. An exploration of a typical day will reveal repeated patterns of interaction and the ways in which children meet their immediate goals—as well as the atmosphere and family values supported by the parents’ approach to each other and to child-rearing. An investigation of a typical day is especially useful when parents are unable to present specific incidents of concern. Adlerians expect that the same parent–child interactions reported while trying to wake up the children will be repeated a number of times before bedtime.

The Child Interview and Goal Disclosure. Parent interviews generally yield tentative hypotheses about the goals of children’s misbehavior. These guesses are shared with the parents, but they remain only possibilities until they are confirmed in an interview with the child(ren). Goal disclosure with children works best in relation to a specific event or misbehavior, rather than a general discussion. When such an event or misbehavior has been clarified with the child, goals are suggested tentatively. Using Dreikurs’ intervention model, Adlerians often ask: “Do you know why you do . . . ?”. Children’s answers are neither accepted nor rejected, but are acknowledged as a transition to disclosure: “That’s a possibility. I have another idea. Would you like to hear it?”. As much as possible, goals are suggested in language that has meaning for the child. Again, using Dreikurs’ four goals with a child who skips school:

- “Could it be that you skip school to keep dad busy with you?” (attention)
- “Could it be that you skip school to show mom that you’re the boss and that no one can make you go?” (a power struggle)
- “Could it be that you skip school to get even with dad?” (revenge)
- “Could it be that you skip school because you want to be left alone?” (an assumed disability)

If the therapist is correct with any of these guesses, the child often will exhibit a recognition reflex. This reflex is a confirmation of the motivational diagnosis. Without a recognition response, the counselor’s original assessment of the purposes for misbehavior is suspect and a re-evaluation must be considered based on the development of new data.

Reorienting and Re-educating the Family. Adlerians use the concept of reorientation to suggest that most families merely need to be re-directed toward a more useful path. In the rare situations in which families seem to need re-structuring, Adlerians would seek to help parents become effective leaders of the family, working in cooperation with each other for the welfare of the children. Family reorientation requires an understanding of the essential needs and purposes of the system, as well as the individuals within the system. The first essential needs are safety and encouragement. Caring about the welfare of the family is a foundation for meeting this need. People and systems grow, adapt, and change when strengths are appreciated and the individuals involved have faith in each other, are able to choose among options, and realize their hopes for happiness. Reframing and normalizing family experiences are two interventions that support the development of hope.

Families can change dysfunctional interactions when even one person is able to disengage from repetitive, negative patterns. In general, Adlerians believe parents are more likely to disengage when they understand the mistaken goals of their children’s misbehavior and, perhaps, even their own mistaken goals in relation to raising the children. It is extremely difficult to
maintain useless interactions when purposes have been disclosed and unconscious processes have been made conscious. Because Adlerians want parents to be the natural leaders of the family, helping parents exercise self-control in their adult–child interactions is an essential step.

Leadership in families is supported when each parent feels like a valued team member, and there is a sense of trust and mutual respect between them. This does not mean that both parents need to handle the children in exactly the same way. Indeed, each parent may approach the children differently as long as the other parent is not undermined in the eyes of the children. In many instances, Adlerians simply charge each parent to “mind your own business”: When one parent is handling a situation, the other one stays out of it—or even supports it. In cases in which there is a lot of dissension between the parents, work on the couple’s relationship is necessary before family work can continue.

When parental leadership seems sound, Adlerian counselors and therapists will tend to engage in some form of parent education, co-developing recommendations for change specifically designed to re-direct mistaken goals or interactions. Effective recommendations are based on the implementation of natural and logical consequences, encouragement, and emotional/psychological support (see Dinkmeyer et al., 1997; Dreikurs & Grey, 1968; Gottman, 1997; Popkin, 1993). Adlerians believe that effective parent education is based on democratic living and real, social equality with children.

Neither individuals nor families change in therapy sessions. Change is enacted between therapy sessions. Because nothing succeeds like success, Adlerians often will tailor recommendations to address one issue at a time—and often the problem addressed may be the easiest of the parent’s essential concerns. Encouragement of parents is an important part of the reorientation process: In an open forum, both ideas for change and encouragement most often come from audience members. In private sessions, therapists help the family generate their own options for change.

Once a process for change has been identified, the Adlerian family therapist or counselor always seeks a commitment from the parents to engage the children differently. When a parent says that she or he will “try,” the therapist knows that some re-evaluation of the commitment to change is needed. Sometimes, the planned changes are too much for one or both of the parents to handle. Sometimes the relationship between re-directing mistaken goals and the parent recommendation is unclear. And sometimes parents simply find it hard to rely only on self-control and give up their more familiar attempts to control the child. When parents are able to commit to change, especially in front of an audience in an open forum, change in the family will be noticeable generally within a week.

### An Adlerian Therapist With the Quest Family

Paul and Jane Quest bring all four of their children to the first meeting with an Adlerian therapist. Jane had initially come to a family education center where she watched another family counseled in an open forum. Although she felt encouraged by attending the session, she still felt that her family needed more privacy than an open forum would allow, and she made arrangements for private therapy with the therapist. The Adlerian therapist began the sessions by welcoming everyone and by meeting and greeting each family member. She noted that she knew very little about the family, but that she had met Jane a few days earlier, and Jane had given her a brief idea of the family history. Starting with Paul, she asked each family member how he or she felt about coming to the session.

Paul noted that he was very busy at work and always had been. He felt he relied on Jane to handle matters at home, but he also wanted to be involved. He was excited about having the boys join the family, but the changes had been hard on everyone, and he wanted whatever help the family could get. Jane said she was relieved to be there. She felt the family she had seen counseled at the center had
really been helped, but she felt her family had more serious problems. Amy and Ann both indicated that they were there because their parents wanted them to come. They were okay with their parents’ decision to add the boys to the family, but they didn’t really feel connected to them yet. “The boys can be difficult,” Amy noted. The boys were very talkative, interrupting often, and in constant motion.

In the therapy room, Jane tried to corral the boys once or twice and tried make them sit down. Sometimes they would sit briefly, but then they would be on the move again. The therapist asked her how she felt trying to get the boys to sit down. Jane said that they did this all the time. They exhausted her. She felt irritated with them at the moment, but she thought she would be feeling angry quite soon. “What would happen for the time being if we just let them do what they want to do?” the therapist asked. “There is really nothing they can hurt in here or that will hurt them.” Jane thought that would be okay, if the therapist didn’t mind.

Amy and Ann sat together next to their father and across from the two empty chairs placed close to their mother for the boys. Addressing Paul and Jane first, the therapist began the session.

**Therapist:** Could the two of you describe your family for me. What are all of you like—maybe three adjectives for each person? Something like that.

**Jane:** Well, Paul is a doctor, very dedicated to his work and gone a lot. Is that what you mean? [therapist nods] He’s very intelligent, very goal-oriented, very dedicated to his patients.

**Therapist:** And Paul, how would you describe Jane?

**Paul:** Jane is really the head of our household. Without her, nothing works. She has done a terrific job raising Amy and Ann, and she is doing the best that anyone could do with the boys at this point.

**Therapist:** So tell me about each of the children.

**Paul:** Amy is bright, but doesn’t pay attention to details. She is messy, but if I ask her to do something, she is very dependable. Ann works hard at everything. She, too, is very dependable. And she is our neat one. Like her mother, she likes everything just so.

**Therapist:** Can you tell me about Jason and Luke now?

**Jane:** Both of the boys were terribly hurt in their young lives, and they often seem intent on hurting each other even more. Jason likes to be the boss of Luke, and Luke sometimes goes along with it and sometimes not. Jason is very loud. Luke is quieter. Jason doesn’t like to be held. Luke would sit in my lap all day if I let him. Luke can play by himself pretty well. Jason can’t handle playing alone. He always needs someone interacting with him.

Just as the therapist is about to ask another question, a small fight breaks out between the boys. Jane immediately gets up and makes both of the boys sit down in the circle.

**Jane to Jason:** I don’t care if he did push you, we don’t hit your brother.

**Jason:** I didn’t hit him.

**Jane:** No. You kicked him.

**Jason:** Well, I didn’t mean to.

**Therapist:** Jason, can I tell you a short story my father told once me?

**Jason:** No!

**Therapist:** Okay, would anyone else like to hear it?

**Luke:** Me!

**Therapist:** Okay, Luke, I will tell you the story, and if Jason doesn’t want to hear it, he can cover his ears. [Jason covers his ears, but looks very intently at the therapist.]
There once was a boy who lived in the woods. His best friend was a big, kind, gentle bear. One day, the boy was sleeping on the ground, and a fly came along and landed on the boy’s nose. The bear thought: “That fly will bother my friend, the boy, and wake him up. I have to get rid of the fly.” So the bear got up from the rock he had been sitting on, picked up the rock, and dropped it on the fly that was still sitting on the boy’s nose. Do you think the rock hurt the boy?

**Luke:** The rock hit the boy?

**Jason:** The bear dropped the rock on the boy hard.

**Therapist:** Yes, but you can’t be mad at the bear, Jason; after all, the bear didn’t mean to hurt the boy, did he?

**Jason:** No.

**Jane:** But the boy was still hurt by the rock.

**Therapist:** Jason, do you ever feel hurt? [Jason shakes his head, no.] But sometimes you fight with your brother. Do you ever hurt him? [Again, Jason shakes his head, no.]

**Luke:** Yes, he does.

**Therapist:** [to Jane] When they fight, do they cause bruises, draw blood, anything like that.

**Jane:** No, not really.

The therapist now asks Paul and each of the older girls if anyone can remember the boys doing serious damage to each other and no one can. They have done damage to the neighbor’s dog; Luke has taken things from each of the older girls; and both boys have taken food and money from neighbors as well as family members. But no one can remember a time when they did serious damage to each other.

**Ann:** They are just very loud when they fight. You can hear them all over the house.

**Therapist:** Give me an example. When was the last time this happened?

**Jane:** They were fighting this morning over the television. One of them wanted it on the Disney channel, and the other wanted it on Nickelodeon. When I came into the television room, Jason had Luke pinned to the floor, hitting him in the chest and on the shoulders.

**Therapist:** And what did you do?

**Jane:** I pulled them apart. I told Jason again that he was not allowed to hit his brother. I swatted Jason on the bottom, I turned the television off, and I sent them to their rooms.

**Therapist:** Did they go?

**Jane:** Yes.

**Therapist:** Did that stop the fight?

**Ann:** Not for long. We maybe had five minutes of peace, before something else got started, and I had to go break them up again.

**Therapist:** Jane, how do you feel when you are breaking up these fights?

**Jane:** Exhausted. Frustrated. Angry at Jason most of the time.

The therapist shifts the interview toward an investigation of how a typical day goes in their home. Both Amy and Ann have to catch a school bus before 7:00 A.M. Even though they try to be quiet, because their “father has worked late and mother is exhausted,” the two boys are almost always awake before they go. Amy fixes them something to eat, and Ann gets them settled in front of a video with admonitions to be quiet so “mom and dad can rest.” Paul gets up about the time that Amy and Ann leave for school. He shaves and showers before coming downstairs. He finds that he can talk to the boys early in the morning, although only Jason responds. Luke holds a blanket and sucks his thumb. He stays quiet. When Paul starts to fix breakfast and
coffee for himself and coffee for Jane, Luke scrambles upstairs to get in bed with Jane. She usually wakes shortly after Luke arrives, and they snuggle for a while.

Jane: In the morning, it is like herding cats. I get up too late, I know, and I am always in a hurry. I can get Jason dressed if I keep on him, although it is always an argument about what he will wear. Luke just doesn’t move. I have to do everything for him. And sometimes, when I get him dressed and go to get dressed myself, he actually takes all his clothes off again and sits in front of the television in just his underwear. It makes me so mad. I generally have yelled at least once before we leave for school. That’s another thing: Jason is due at school at 8:20. We are lucky to leave for the ten-minute drive before 8:15. Often we are right down to the tardy wire when we arrive at his school. Then I drop Luke at pre-school.

Jane goes on to say that she picks Luke up at 1:00 P.M. from pre-school and Jason at 3:00 P.M. The girls arrive home on the bus about 3:45. Amy has extracurricular activities, and sometimes gets home later. Ann has cut back on almost all of her outside activities to help with the boys. It is after school when the real fighting occurs, and either Ann or Jane is constantly separating the boys. If the boys are outside playing, Ann has to go check on them at regular intervals to make sure they are not hurting someone’s pet or another child. Either Ann or Jane will make dinner. Amy and Paul are often gone. Paul usually gets home after Jane has spent almost two hours trying to get the boys to bed. She starts trying to get Luke in bed at 7:30, and they are usually both down by 9:30 or a quarter to ten.

Therapist: I think I have a pretty good picture of how things go. Jane and Paul, I would like to start by acknowledging the obvious. You really have two families. Amy and Ann constitute your first family and Jason and Luke are your second family. And as such, psychologically, you have two oldest children in the family and two children who are the second of two. The four of them really haven’t integrated into a family of four, nor are they likely to do so. There is also a framework developing around each set of children: Amy and Ann are the “good” kids, and Jason and Luke are the “difficult” or “bad” kids. Further, it is clear that Paul favors the first set, and you, Jane are working hard to make room for the second set, but you wind up feeling pretty much alone—which you would be if it were not for Ann’s help.

Paul: I think you have described it perfectly.

Therapist: I want to talk to just the boys for a moment, but my general feeling, Paul, is that both Jane and the boys need you to be more involved with them. The boys need a father to show them how gentle men act and behave. And Jane, I believe, needs to feel that the two of you are in this together. How does that sit with you?

Paul: I think you are probably right. It has been hard for me to do that, because I don’t know what to do often, and I often feel like I just get in Jane’s way.

Therapist: Okay. Let me talk with the boys for a minute.

The therapist moves her chair to form a triangle with Jason and Luke. She starts very directly and concretely, mentioning that fighting seems to happen quite a lot between the two of them. She asks them if they know why they fight, to which Jason points out several things that Luke does “wrong.”

Therapist: That may be, but I have another idea. Would you like to hear it?

Jason & Luke: [heads nod]

Therapist: Could it be that you fight to see how many times you can get your mother to tell you to stop? [Jason shakes his head, no; but Luke gets a twinkle in his eyes and a little smile across his face, a recognition reflex: then he says, “No.”] Could it be that the two of you
fight to show your mom that she can’t make you stop? [A recognition reflex appears on Jason’s face.] Maybe that’s it.

The therapist now turns her attention back to the whole family. She acknowledges that bringing two new people into the family has been difficult—for the boys as well as everyone else. Blending a family with large age differences, different genders, different histories, and different developmental needs is a daunting task, and she commends everyone for being willing to create a better world for these young boys. “It may be useful, however, not to think of them as “the boys” so much and to begin to see each of them as individuals trying to find a place in the family and in the community.”

The therapist goes on to note that Jason seems to feel that he counts only when he is in a power struggle with adults. He wants to feel big and important, but both his age and life experience negate this. He compensates by getting bigger people to fight with him. Luke, on the other hand, feels his smallness and wants someone to take care of him. He requires service in the morning and he expects so many extras at night that it takes hours to get him to bed. Any time the parents or the young women in the family try to control Jason or give into Luke, the first family merely proves to “the boys” that their interpretations of self and life are correct.


Jane: So what can we do when they start fighting?

Therapist: What would work for you that would basically keep you out of it and let them handle it? Keeping in mind that they don’t seem to really want to hurt each other: If they did, it would have happened by now. Is it possible to ignore it?

Ann: Not really.

Jane: I could if it weren’t in the house.

Therapist: Okay. So the next time they start to fight, you might go to them without talking, take them by the hands, and deposit them outside.

The therapist concludes this session by noting that there is room in this family for four “good” kids. She suggests to Jane that telling the boys not to fight—or not to do anything—only feeds a power struggle in Jason and tells Luke what to do to get attention. It is important to talk when she is encouraging any of the children (five times a day at least) or when she is listening to them and using active listening to paraphrase what they say and reflect what they feel. When it is time to correct a problem, however, the therapist suggests to Jane, Paul, Amy, and Ann that they need to act, and not talk. If they need to remove something dangerous from one of the boys, do it pleasantly but without talking. If they need to protect one from the other, separate them without talking. If they need to have the boys go outside to finish a fight or argument, take them there without talking. Talking only gives the boys a clue as to how to respond: It does no good anyway, because the boys are becoming selectively deaf to others in the family.

Through all of this discussion, Paul nods. He seems to understand what is being proposed and, when, asked for his reaction, he says, “I think I just needed a plan, and to know what to do.” The therapist continues with Paul, asking if he can arrange to come home earlier to be with the boys before they go to bed, as well as spend some special time each week with each of his new children alone, so that he gets to know them individually. He agrees to do this, and the session ends.
Summary and Multicultural Evaluation

Adler was the first psychiatrist to focus on the goal orientation of human beings and human movement or process. His student/colleague, Rudolf Dreikurs, systematized this teleological perspective, creating a foundation for Adlerian family therapy and the development of open-forum family education centers. In open-forum family counseling centers, as opposed to the private session used by the Quest family, the therapist asks the parents and the audience to generate new approaches that will end mistaken interactions and lead to more democratic, harmonious, and effective family living (Evans & Milliren, 1999). Recommendations that come from the audience are often more easily received by the family-in-focus than those that come from the counselor. Families-in-focus often experience the audience as peers in the therapy process. In the final phase of counseling, therefore, the therapist serves as a leader and educator, helping the family and the audience make the best use of the ideas that are generated. In private sessions, the therapist often serves in place of the audience, validating a change in perspective as well as useful and effective approaches to redirecting children’s mistaken goals. Adlerian family therapists also use a lot of encouragement to strengthen parents in their resolve and help children find new purpose in life.

Adlerians note that confidentiality is impossible in an open-forum setting, and the therapist cannot guarantee it. The process relies on families to self-monitor what they say and what they present. Most of the Adlerian family interview focuses on information that is already public—that almost anyone could see if they followed the family around for a short period of time. Christensen (2004) suggests that what is lost in confidentiality is gained in accountability, since every part of the change process must “make common sense” to the members of the audience. Based on Dreikurs (1971) original formulations, most Adlerians seek to develop social equality—the sense that everyone has an equal right to be valued and respected—in the family. This is a development welcomed by feminists and much needed at a time when abuse of power in families is at such high levels.

Although it is probably not true of all Adlerians, it is clear from their writings that both Adler and Dreikurs were pro-feminist. Indeed, Adler was married to and collaborated with a woman from Russia, Raissa Epstein Adler, who was heavily involved in feminist causes at the beginning of the 20th century (Balla, 2003). His early writings on the myth of masculine superiority refuted the alleged inferiority of women and called for new relationships based on mutual respect and social interest. Adler’s position was both echoed and developed in the more pragmatic writings of Rudolf Dreikurs (1948, 1971), who called for an end to the war between the sexes and between the generations.

Adlerians add a teleological lens to family therapy and counseling that helps clinicians discover and understand the purposes, goals, and private logic (ideas or notions) that motivate problem behaviors and useless interactions. Adlerians remind us that individuals, couples, and families are always in movement toward a desired end, and it is the intended goal that unifies movement and makes sense out of family process. Adlerian family therapy provides clinicians with a structure for discovering the goals behind parent–child and spousal interactions. It also values therapeutic guessing as a means of suggesting goals and purposes to both adults and children. Dreikurs’ discovery of the recognition reflex in children made it possible for Adlerians to confirm their teleological hypotheses and effectively guide the redirection of families.

From teleology to social equality, the principles and ideas espoused by Adlerian family practitioners are now eagerly embraced in many psychology, counseling, and social work programs. Indeed, a strong case can be made for infusing the Adlerian model into introductory marriage and family courses (LaFountain & Mustaine, 1998).

If you are interested in a more in-depth study of this approach, we recommend the following sources: Bitter, Christensen, Hawes and Nicoll (1998); Bitter, Roberts, and Sonstegard, (2002); Christensen (2004); Sherman (1999); and Sherman and Dinkmeyer (1987).
Contributions to Multicultural Counseling and Gender Issues

Adlerians approach culture phenomenologically. Similar to birth order, culture becomes a vantage point from which individuals and families view life. It is not the vantage point that determines the individual’s position, but rather the interpretation the individual gives it. Indeed, in any given family, there may be multiple interpretations that individual members assign to their culture. This is especially true in families that are experiencing acculturation. Older members may hold to the values of their culture-of-origin with as much or more dedication than they would have done in their home country, while older children who come to a new host culture may try to bridge both worlds. Often complicating family values further, children born in the new or host country may adopt the perspectives of that country through their interactions with the school system and other children. Adlerians believe that the interpretation each family member gives to the culture will be a very strong factor in how the person sees self and life, and interacts with other people. Sometimes, the most effective initial intervention is to listen carefully to all family members and to help them sort out the various positions that each person has adopted.

Many Adlerians have made contributions to multicultural perspectives, with some exceptional work by Miguel Arciniega and Betty Newlon (1995). In 7 of 11 multicultural categories, ranging from being competent in the individual’s or family’s language-of-origin to considerations of oppression and racism, they noted that Adlerian theory and practice rates positively. The next closest rating—with 5 positives—is Ivey’s developmental theory. Corey (1991) echoed this positive assessment of Adlerian theory, noting “Adler’s ideas are certainly compatible with many of the macrostrategies for future delivery of services to a culturally diverse population.” (p. 54)

For more than 30 years, Adlerians have conducted an international summer school called ICASSI, a two-week Adlerian international convocation, held each summer. Over the years, both trainers and participants have come together from every continent on Earth. This international symposium seeks to develop Adlerian ideas through a professional and cultural interchange both in established centers and new, often underdeveloped countries. In the last decade, ICASSI has been held in Canada, the Czech Republic, Lithuania, Latvia, Romania, Israel, England, and Ireland, to name a few. Smaller programs have been offered in Malta, parts of the old Soviet Union, Greece, Hungary, Italy, Peru, New Zealand, Australia, and Japan. Manford Sonstegard and Oscar Christensen have instituted family education centers throughout the world, and Bill Nicoll has established certification programs in more than eight countries outside of the United States.

There are very few limitations related to this approach in multicultural settings. One limitation may exist in using a public setting for some cultures: Such cultures may prefer private sessions to ones held in an open forum. A sensitive interest in and valuing of the extended family and culture are, however, part of the Adlerian model. The focus on parents as leaders, as well as an understanding and redirecting of mistaken notions in children, fit well with both individualistic and collectivist cultures. Learning to control oneself in the face of provocation also can be effectively incorporated into a broad range of cultures. But the single most effective intervention in diverse cultural families is an investigation of birth order, a phenomenological understanding that holds across cultures.

As I have already noted, the Adlerian perspective on social interest and social equality goes a long way toward creating a foundation for effective relationships. Adler (1931) believed that true safety for all couples was guaranteed when each partner treated the welfare of the other as more important than their own.

The fundamental guarantee of marriage, the meaning of marital happiness, is the feeling that you are worthwhile, that you cannot be replaced, that your partner needs you, that you are acting well, and that you are a fellow [hu]man and a true friend. (p. 267)
This same focus on mutual respect and the feeling of belonging has been translated into the most used Adlerian parent–child training programs in the world [STEP (Dinkmeyer, McKay, & Dinkmeyer, 1997) and Active Parenting (Popkin, 1993)]. It is also the foundation for the collaborative relationship that Adlerian therapists seek to bring to their work with families.

Although most feminist commentaries ignore the Adlerian model, I believe they would find strong support for valuing the voice and perspectives of women and children in the writings of Adler, Dreikurs, Carlson, Christensen, Sperry, Bitter, Nicoll, and others. Adler’s early pro-feminist positions, including his belief in the right of women to choose whether or not to have children (Ansbacher & Ansbacher, 1978) and his call for equality between the sexes are foundational elements in both feminist and Adlerian theory.

### Exercises for Personal and Professional Growth

You can use an Adlerian phenomenological approach to assessing the family constellation to gain a greater understanding of who you are and what influences have made an impact on your life. Start by identifying your mother and father by name. If you came from an extended family and had lots of contact with other family members (grandparents, aunts, uncles, etc.), list all of them too. If you came from single-parent family, were there other people who served as significant others for you? If you came from a blended family, list all of the adults associated with your family. A drawing of my parents would look like this:

![Drawing of parents](image)

Now list three adjectives for each of your parents and/or the significant others in your life. For Greg, I might list the words conservative, religious, and dedicated. For Betty, I might list the words fun, loving, and social. These words say more about me than they do about my parents. My sister, for example, might list completely different characteristics for our parents. Adler, in 1932, suggested that descriptions of family members always revealed a statement about self within the relationship.

... there is no character trait without a relationship to others. When the patient says, “My father was kind,” this means “he was kind to me.” When he says his mother was critical, the idea which penetrates is that he attempted to keep a distance from his mother. (Ansbacher & Ansbacher, 1979, p. 194)

So when I say my mother was fun and loving, I mean she was fun and loving with me, which is not a bad way to start life. She was also social, and not just with me, but with everyone; she made a place for people in our home, and people always felt that they could come to visit. My description of my father suggests more distance between us and the importance to him of doing things the right way: I still can hear him telling me to do it right the first time so I wouldn’t have to do it over. If I were to use words to describe the relationship between my father and my mother, I would say close and loving. Taken together, these traits and attributions added up to what I felt was a stable life and world.

- What words characterized your parents as individuals?
- Were there other people who were significant to your early life? What words or traits would you assign to them?
- What do these assigned words suggest about your relationships to these people?
- Do you have any of the traits you have assigned to others?
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- Are you like your mother or father or both? In what way?
- What words characterize your parents’ relationship? What does that tell you about the kind of atmosphere in which you were raised? Was it safe? Was it fun? Or, perhaps, was it more like a jungle, with lots of anger outbursts and aggression?
- Does this say anything to you about what you expect when you raise children?

Now let’s look at your siblings and birth order from a phenomenological (subjective) point of view. Name them, oldest to youngest, on a piece of paper, like this:

<table>
<thead>
<tr>
<th>Oldest—Age</th>
<th>Second—Age</th>
<th>Etc.—Age</th>
<th>Youngest—Age</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adjectives</td>
<td>Adjectives</td>
<td>Adjectives</td>
<td>Adjectives</td>
</tr>
</tbody>
</table>

- If you were an only child, what are three adjectives that describe you when you were little, say nine years old or less? What are three of your strengths and three of your weaknesses now? Given what you said earlier about your parent(s), do these childhood traits and current strengths and weaknesses make sense to you now?
- If you had one or more siblings, which one was most different from you? In what way? Which one was most like you? In what way? And again, what are three adjectives that describe you when you were little?
- Was there a large age gap (six or more years) between any of the siblings? Was it like having more than one family in the same house?
- How did you and your siblings align and individuate? Do you still have the same kind of relationships now that you did when you were children?
- Are there patterns to your life that started long ago in your family that you can see operating today? What cognitions and emotions go along with these patterns?

Finally, think back again to when you were little, before the age of nine. Think of something that happened at one time. “One time, something happened.” Write down this memory. Then look at it and answer the following questions:

- What part of it stands out? What were you feeling at that exact moment?
- If this were a newspaper story, what would the headline be?
- Is there a moral to the story, a lesson, or a conviction? Does the moral, lesson, or conviction tell you something about how you see life right now?

Now repeat the process, gathering two to three more memories. Adlerians believe that we select these memories to guide us in our daily living now. Does this have any meaning for you as you look at your memories?

Taken together, family constellation, birth order, family atmosphere, and early memories form the basis of what Adlerians call a lifestyle assessment. For a more in-depth look at what this process can tell you about yourself, see either Powers and Griffith (1987) or Shulman and Mosak (1988).

Where to Go from Here

Adlerians in New York, led by the children of Alfred Adler, and Dreikurs in Chicago started a national Adlerian society more than 50 years ago. Today that organization is called the North American Society of Adlerian Psychology (NASAP). NASAP is responsible for the publication of a quarterly journal called the *Journal of Individual Psychology*. It conducts an annual
meeting that rotates between Vancouver, British Columbia, Tucson, Arizona, Chicago, Illinois, and specially selected sites in the eastern part of the United States and Canada. Information about the conventions and training programs offered by NASAP is available at:

**North American Society of Adlerian Psychology®**
50 Northeast Drive, Hershey, PA 17033
Phone: 717-579-8795
Fax: 717-533-8616
Web site at: [http://www.alfredadler.org](http://www.alfredadler.org)

For those interested in the Adlerian international summer training community, information can be found at:

**International Committee of Adlerian Summer Schools and Institutes**
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Web site at: [http://www.icassi.net](http://www.icassi.net)

### Recommended Readings

Ansbacher, H. L., & Ansbacher, R. R. (Eds.). (1956). *The individual psychology of Alfred Adler*. New York: Basic Books. The “Bible” of Adlerian psychology: Ansbacher and Ansbacher were introduced to each other by Alfred Adler and spent their highly productive careers organizing, translating, and integrating Adler’s most important writings.


Carlson, J., Sperry, L., & Lewis, J. A. (2003). *Family therapy techniques: Integrating and tailoring treatment*. New York: Brunner Routledge. This comprehensive family therapy book uses Adlerian principles to guide the counselor/therapist in the tailoring of treatment to a wide range of families that we currently meet daily in practice. If I were going to keep only one book on my shelf, this is the one I would keep.

Christensen, O. C. (Ed.). (2004). *Adlerian family counseling* (3rd ed.). Minneapolis, MN: Educational Media Corp. This manual is designed to teach the structure and process of Adlerian family counseling, whether enacted in private or in an open forum. This is the book that guides all Adlerian family counselors and therapists when they first get started.

Dreikurs, R. (1958). *The challenge of parenthood*. New York: Plume. (Original work published 1948) This is one of Dreikurs’ first works on parenting, and it lays the foundation for seeing parent–child interactions as purposeful exchanges.


Dreikurs, R., & Soltz, V. (1964). *Children: The challenge*. New York: Hawthorn. This is one of the most-used texts on childrearing in the history of publishing, with more than 600,000 copies in print and still available (through Plume) almost 40 years after it was first published. This is a step-by-step guide to effective parenting, and it is the basis for both the **STEP program** and **Active Parenting**.

MA: Addison Wesley. The most-complete biography of Adler ever written, completed with a psychological historian’s eye for detail and accuracy. It is the most-beneficial glimpse into the life and work of one of psychology’s great geniuses.


Terner, J., & Pew, W. L. (1978). The courage to be imperfect: The life and work of Rudolf Dreikurs. New York: Hawthorn. This superb biography also presents the ideas, principles, and practice of a man whose writings included more than 300 articles and books, as well as countless training programs, institutes, lectures, presentations, and courses.

DVD References

Rudolf Dreikurs systematized Adler’s approach to families and provided a teleological framework for understanding adult-child behaviors. Teleology is the study of final causes, and in the case of families, it involves the discovery of what purposes or goals might be motivating the behaviors and interactions in the family system.

In the video that accompanies this theory, Dr. Bitter interviews Joel and his two children. Joel is married, but his wife is unable to be present due to her work schedule. Dr. Bitter first gets a sense of the family constellation from the father and then proceeds to focus on problem interactions in an effort to discover the mistaken goals that might be operating in both the children and the parents.

References


couples, and families. *Directions in Counseling and Clinical Psychology*, 8(8), 95–111.


Christensen, O. C. (Speaker). (1979). *Adlerian family counseling* [Educational Film]. (Available from Educational Media Corp., Box 21311, Minneapolis, MN 55421-0311.)


Main, F. (1986). *Perfect parenting and other myths*. Vermillion, SD: Main Press.


Endnote

1 Christensen (1979) notes that the idea of no one else in the family enjoying the fighting cannot be true; children don’t fight unless it engages others and draws attention to themselves.