Adler's Individual Psychology:
My journey/ My perspective/ My concerns/ My hopes

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With the autumn of 2020, I enter my 50th year in the mental health profession. It also marks the 45th anniversary of my introduction to, and involvement with, Alfred Adler's Individual Psychology (IP). Reaching such milestones (plus pandemic social isolation!) has led me to step back, pause, and reflect upon my professional journey with IP and where it has led in regard to my perspectives on, concerns about, and future hopes for IP.

Allow me now to share some of these thoughts and reflections. Hopefully, by so doing, those new to Adler's IP might be encouraged to contribute to the task of furthering the growth and development of IP theory and practice. That is, to build upon, improve and expand the contributions of Individual Psychology toward the promotion of mental health and social wellbeing in all aspects of life.

[Part 1]
My Journey with IP

"The dots in your life always connect, but, you can't connect the dots looking forward, you can only connect them looking backward".
Steve Jobs, 2005 commencement address, Stanford University

In 1971, I completed my undergraduate degree majoring in both psychology and sociology. I was particularly influenced by my family sociology professor, Dr. Murray Strauss, founder of the field of family violence research. His research on the effects of family violence and corporal punishment on child behavior and development led to the establishment of the national Family Research Center (i.e., a precursor to today's ACEs/Trauma research). Consequently, upon graduation, I sought work in residential facilities for troubled youth. But, a chance conversation would lead me down a slightly different path.

The public schools were apparently experiencing a 'critical shortage' of special education teachers for "emotionally disturbed children". I had no education training whatsoever but was informed that I could complete the required certification coursework while employed. Within days I was offered my first job as an "emotionally disturbed teacher" (Yes, that's how I was referred to back then, and rather apropos, eh?). I spent the next several years working in the schools with children (ages 5-13) experiencing significant behavioral and learning disorders.

My work with these young students began just as new state and national laws mandating increased mainstreaming or integration of special needs children into regular classrooms were implemented. This shed yet more light on my undergrad studies and the importance of understanding children's behavior within the social contexts (often adverse) of family, classroom, school, and community environments Accordingly, I chose to focus not on academics per se ,but rather on making my classroom a safe, encouraging haven for these troubled students. The school system had also contracted for the consulting services of a mental health center's head clinical psychologist who, for the next four years, provided me with weekly supervision (a priceless experience) and encouraged me to follow my intuitive approach.

At the same time, in order to fund my graduate education, I worked nights and weekends in a social service agency serving court referred youth from a low income, inner city housing project. Working in this setting greatly expanded my understanding of cultural, racial, economic, and social contexts in children's social adjustment and behavior!

Upon then completing my master's degree in mental health counseling (along with certification in school counseling), I was offered a position as a school counselor (K-6). It was here that I was introduced to (perhaps, "*thrown into*" is more accurate!) Adlerian Psychology. During the previous year, the counseling staff had attended a one-week professional development seminar at the University of Vermont (UVM) on Adler's Individual Psychology (IP) in the schools. It was taught by Dr. Bill Marchant and his mentor, Dr. Oscar Christensen. Subsequently, the school counseling program had successfully obtained a grant to introduce Adlerian parent education, teacher training, and open forum family counseling throughout the school system. I arrived on the scene just as the initial implementation stage began possessing neither training in, nor knowledge of, Adler's Individual Psychology.

Realizing the need for me to be "caught up", my colleagues chose that I be the one sent off to attend two week-long advanced professional development programs in Adlerian Psychology (IP). The objective was for me to return and share my "advanced" training. Thus, quite ironically, this ignorant newcomer became the in-house "expert and trainer"! The first seminar was at the University of Vermont (UVM) with perhaps the foremost authority on Adler's IP theory, Dr. Heinz Ansbacher. He was accompanied by a team of highly regarded Adlerians including Drs. Rowena Ansbacher, Dr. Helene Papenak and Dr. Bob Powers. A week later, I attended a second, intensive week of training in Lifestyle Assessment with Dr. Harold Mosak. The IP model, I quickly discovered, fit perfectly with what I had experienced and concluded from my previous positions.

Over the next two years, my school counseling duties included conducting weekly parent education classes (Children the Challenge) and co-counseling in weekly Adlerian Open Forum Family Counseling sessions held evenings in a school amphitheater. A professor from a nearby university, trained by a well-respected Adlerian, Dr. Hugh Allred, provided weekly supervision in the Adlerian open forum family counseling model!

But, then life presented a significant dilemma! I was offered directorship of the Open Forum Family Counseling /Parent Education program. But, I was also offered a counseling position at an international school in The Netherlands. My personal interest ino travel now clashed with my professional career path. I chose the international option! The next four years, living and working in a different culture with internationally mobile kids and families (65+ nationalities), greatly enriched my understanding of cultural contexts and multicultural, cross cultural, and transcultural dynamics.

This international experience unexpectedly opened yet another pathway in my career journey. Ever since then, I've provided consulting services and professional development training (based in IP) for international schools, the U.S. Department of State, and both universities and mental health organizations in numerous countries across five continents. These many years working with multiple cultures and with internationally mobile families led to co-authoring a book, "*Resilience and the Internationally Mobile Family*".

In 1979, I again attended another week-long training seminar at UVM with the Ansbachers. There, I met and profited from collaborating with another prominent Adlerian, Dr. Manfred Sonstegard. Sonste encouraged me to go on for my doctoral degree and directed me to the University of Arizona to study with Dr. Oscar 'Chris' Christensen, arguably the foremost Adlerian in child & family counseling. I met Chris at a NASAP conference in 1980 and observed him conducting a most unique family counseling demonstration. It involved two, late-twenty aged 'house parents' for a group home for disabled adults and their 41 yr. old "problem child". It was a most remarkable session! I knew immediately that this was the person under whose mentorship I should complete my doctoral studies. It is also rather ironic that, though I'd never before met Chris, it was he who was indirectly responsible for my initial introduction to Adler some 6 years earlier.

I completed my PhD under Dr. Christensen along with an internship in a state prison's psychological services unit. This opened my eyes to the realities of the "school to prison pipeline". Most of my inmate clients had a long history of trauma filled childhoods, special education placements, school suspensions/expulsions, school failure, and ultimately school drop-out. The need for school reform and introducing prevention/early intervention services was brought home quite clearly!

Providing training in IP (both pre-service and in-service) would then become my primary focus for the next 30+ years. I served as a professor of counseling at three different universities teaching family counseling, mental health counseling and school counseling. I also provided numerous professional development training seminars and served for years as the

national trainer in Brief Counseling for the American Counseling Association. All these courses and trainings were firmly grounded in Adler's Individual Psychology. Along the way, I would also maintain a private counseling practice, become president of the Ohio Counseling Association, Vice-President of the North American Society for Adlerian Psychology (NASAP), serve on the ICASSI faculty, and serve as the North American representative to re-write the by-laws of IAIP.

The value of my initial training via week-long professional development seminars with individuals such as Drs. Heinz & Rowena Ansbacher, Harold Mosak, Manfred Sonstegard, and others eventually came full circle. The need for more training in Adler's IP led me, along with, Drs. Oscar Christensen, Clair Hawes, and James Bitter, to develop the Adlerian Training Institute (ATI). For the next 15+ years, our ATI provided training programs, manuals, and videos on Adlerian counseling and therapy; first in the U.S. and then in many European locations including the UK, Ireland, Switzerland, The Netherlands, Malta, Russia, Slovakia, Greece, and so forth. But, with the passing of my dear friends and esteemed colleagues, Drs. Christensen and Hawes, ATI disbanded.

Today, retired from academia, my wife, Monica, and I have established the Resilience Counseling & Training Center (RCTC). We provide IP based counseling, coaching and consulting services both in our office and via telehealth with clients worldwide. We consider the concept of Resilience to be the logical extension of Adler's concept of Social Interest as a framework for mental health and social wellbeing

And, ATI's IP training function has now been assumed by our Resilience Counseling & Training Center (RCTC). RCTC assists organizations, schools and universities around the world in developing training programs in the practical applications of Adler's (IP). Indeed, in 2021, RCTC is set to assist in launching yet another IP training program. This will be a one-year post-graduate Adlerian Counseling & Psychotherapy certificate program via the University of Malta. To maximize accessibility, it will be offered as a hybrid program combining some intensive, 3-6 day on-campus classes with online supervision practicums. Who would have thought that this is where that initial school counseling position would lead?

Looking back on these past 50 years I feel fortunate to have been provided (stumbled into?) so many opportunities to learn from, and work with, outstanding IP scholars and practitioners. How the "dots" of my professional journey with Adler's IP have connected seems now quite clear.

However, over recent years I have grown increasingly concerned regarding several issues that, if left unaddressed, I fear might well lead to IP becoming relegated to obscurity in the greater mental health field. Allow me then to now proceed forward to **Part 2**, '***My Perspective'*** on IP today. Then, in **Part 3,** I'll articulate some of '***My Concerns'*** about IP's current status and finally in **Part 4**, '***My Hopes'*** for the future growth and development of Adler's Individual Psychology.

[Part 2]
My Perspective on IP

"T*he most sensible estimate of the value of any activity is its helpfulness to all [humankind] present and future"* (Adler, 1929)

Many authors have published books and manuscripts delineating their understanding of Adler's Individual Psychology theory and practice. However, the ideas and writings of Alfred Adler and Rudolf Dreikurs have often become entwined and somewhat confused. So, let's begin by delineating what, to me, are the most fundamental concepts of Adler's IP. These are the cornerstones upon which the rest of Adler's theory and practice is constructed. I'll then move on to explore some concerns about the current status of IP (Part 3) as well as possible areas where IP might yet grow and develop further; to evolve and move from "*minder zu hocher*" (Part 4).

Adler's Foundational Concepts
During Dr. Heinz Ansbacher's tenure as the editor (1957-1973) of The Journal of Individual Psychology, he noted that the journal, "…*is devoted to a holistic, phenomenological, teleological, field theoretical and socially oriented approach to psychology and related fields*." In simple, practical terms this suggests that IP ultimately rests upon four foundational concepts: Lifestyle, Purposiveness, Social Embeddedness, and Social Interest/Community Feeling. Any therapeutic approach that incorporates most or all of these concepts might thus be considered compatible with, or an extension of, IP. Accordingly, they need to be recognized and embraced as kindred theories and practices to be collaborated with in the effort to continually expand and enhance the usefulness of Adler's Individual Psychology.

Purposiveness

Purposiveness is the first cornerstone of Adler's Individual Psychology. The idea that symptoms serve a purpose or function can be found in early Native American and 7-10th C. Chinese cultures (Bankart, 2007). However, it appears to be Adler who first introduced this 'Copernican Shift" to western psychology. Rather than looking backward or inward to seek the "causes" of behavior, IP instead looks forward and outward so as to understand the purpose or function of behaviors and emotions.

Thus, purposiveness is viewed as the master motive behind all behavior; the moving toward goals as opposed to reacting to innate drives and neurological processes. *"Every psychic phenomenon, if it is to give us an understanding of a person, can only be grasped and understood if regarded as a preparation for some goal"* (Adler, 1925; p. 4). The cardinal dynamic motivating all psychological movement is the idiosyncratic nature of an individual's attempt to move from a perceived minus position in life to a perceived plus (*'minder zu hocher*). Adler thus offered a psychology of use (i.e. purpose) as opposed to one of possession (i.e. chemical imbalance, brain disorder, genetic traits, or mental illness). It is the individual's apperceptive schema and the subsequent purpose (goal) of their behaviors and emotions which is of central interest in IP.

Lifestyle

The second cornerstone is that of the Individual Lifestyle. This concept embraces a phenomenological perspective to understanding personality and consequently behavior, motivation, and emotion. The focus is upon each individual's unique, socially constructed patterns of perceiving, acting, emoting and living. Therapy thus centers on assisting people to understand and correct faulty or dysfunctional apperceptions, convictions, and goals. Dysfunctional apperceptions restrict personal behavior patterns, create self-fulfilling prophecies, and impede positive, socially constructive growth and development (Bitter, Christensen, Hawes and Nicoll, 2002). Adler *"emphasized the importance of understanding the patient within the framework of his own conscious experiences. For Adler, therapy consisted of attempting to unravel how the person perceived and experienced the world"* (Beck, Rush, Shaw & Emery, 1979, p.8).

This foundational concept, lifestyle, is seen over and over again in most current theories of personality and psychotherapy including Constructivism's 'superordinate constructs", Cognitive and Cognitive-Behavioral therapy's "cognitive schemas", and cognitive science's schema theory. As noted by Dowd, Cognitive Theory's emphasis on schema identification and change, and the importance of meaning structures in human psychological functioning aligns itself with Adler's Individual Psychology and the concept of the Individual's Style of Life. Both recognize the importance of the individual's idiosyncratic apperceptive schema for understanding oneself, one's world, and others (1997).

In essence then, Adler's Individual Psychology theory suggests that in order to fully understand an individual one must assess his or her behavior at three distinct levels: the '*How*', the '*What For'* and the '*Why*'. The first level is the observable, the "*How*". How is the client acting (behavior) and feeling (emotion)? The second, deeper level is the '*What For?'*. This involves assessing the purpose (goal or function) these behaviors and emotions serve (or are intended to serve) within their social context. However, for complete understanding, the third and deepest level must be understood, the "*Why?*". This refers to the cognitive assumptions, beliefs, apperceptions or personal constructs which guide the individual's behavioral choices, i.e. the individual's Style of Life or cognitive schema.

It is here that Adler's IP nicely aligns with the ideas of General Systems Theory which postulates that, "*all systems function on the basis of a very small, yet highly salient set of rules which govern all operations of the system*." (Von Bertellanfy, 1968). IP views the individual as a biopsychosocial system whose functions are governed by the personality (Individual Lifestyle) which consists of a relatively small set of highly salient '*rules for social interaction*" (Nicoll, 2014). These idiosyncratic 'rules' guide our unique "manner of perceiving (i.e. meaning making') and acting in life. Here, Adler's IP echoes ancient Buddhist teachings "*All that we are is the result of what we have thought.... We are what we think. All that we are arises with our thoughts. With our thoughts, we make the world.*" (Buddha, c. 483 B.C.).

Most psychological theories are now in agreement with Adler's recognition of the central importance of the individual's beliefs, assumptions and apperceptions and their role in both psychosocial well-being and maladjustment. For example, Kelly's theory of personal constructs psychology (Constructivist Theory) emphasizes the importance of personal constructs and super-ordinate constructs which *"emphasize the role of beliefs in the controlling and changing of thoughts, feelings and behaviors"*. Similarly, Aaron Beck states in Cognitive Therapy that, ""*Psychological distress is largely a function of disturbances in cognitive processes.... [thus] the focus in therapy is on changing cognitions to produce desired changes in affect and behavior*). Albert Ellis noted, "*We have a strong tendency to make and keep ourselves emotionally*

disturbed by internalizing self-defeating beliefs…" and William Glasser's Reality Therapy/Choice Theory states that in therapy, "*Discussions centering on feelings, without strongly relating them to what people are doing and thinking, are counterproductive*". Clearly, the mental health counseling and psychotherapy field is now fairly well aligned on this IP cornerstone concept.

Social Embeddedness

The third cornerstone of IP is that of Social Embeddedness. Here, IP recognizes the contextual influence of cultural and social environment factors on human behavior, motivation, emotion and cognition. IP is based in the recognition that an individual cannot be understood apart from his/her social and cultural contexts. *"Individual Psychology regards and examines the individual as socially embedded. We refuse to recognize and examine an isolated human being"* (Adler, 1926, p. ix). Here, Adler offered a field theory of personality focusing on how the individual attempts to find his or her place within the social environments or cultures in which he or she is embedded. IP thus aligns with the earlier ideas of Charles Darwin who noted that the weaker animals are never found living alone; they survive and thrive by learning to cooperate through group life.

This concept aligns IP with the ideas of multicultural and transcultural counseling. Indeed, Ansbacher (1968) suggested that Adler adopted the term "lifestyle" from the writings of the sociologist, Max Weber, who was interested in what he termed the "Collective Lifestyles" of socio-economic classes. Collective Lifestyle refers to the shared views, beliefs, values and normative behaviors that distinguish one group from another. Adler appears to have adopted Weber's term for his concept of an individual's idiosyncratic beliefs, apperceptions, and values, i.e., their "Individual Lifestyle".

The concepts of both "social embeddedness" and "lifestyle" have been further extended to understanding family systems via the "family lifestyle" or shared worldview, values and beliefs (Nicoll & Hawes, 1985; Deutsch, 1967). The 'Social embeddedness' and 'Lifestyle' concepts are also reflected in the research identifying the key role played by corporate, organizational, school, and professional "cultures" (i.e. Collective Lifestyles) for determining effectiveness vs. dysfunction. Social Embeddedness calls our attention to not only the understanding of an individual's "lifestyle", but to doing so within the contexts of the multiple, larger and interacting cultural systems (e.g., family, ethnicity, nationality, racial, socioeconomic, religious, occupational, etc.) in which one is embedded.

Social Interest and Community Feeling (Gemeinschaftsgefuhl)

The fourth and final cornerstone of Adler's Individual Psychology is that of Community Feeling ("*Gemeinschaftsgefuhl"*), aka: Social Interest. This is arguably the most important, albeit least well developed, concept in Adler's theory. IP is unique among psychological theories in its attempt to define and promote mental health. The concept of purposiveness, the striving from a felt minus toward a perceived plus position in life, can be viewed as the master motive for behavior. However, it is Community Feeling (gemeinschaftsgefuhl) that is the cardinal indicator as to the relative degree of mental health observed in such striving.

The mental health field has historically, and rather ironically, largely ignored the issue of mental health. Rather, the primary focus has been upon defining and treating psychopathology, mental illnesses, or disorders. Treatment interventions have consequently focused more on symptom control or management. Adler's IP offers a much more optimistic and health promoting perspective. He instead advocated for adopting a mental health promoting approach to intervention, "*The patient must be guided away from himself, toward productivity for others; he must be educated toward social interest*" (Ansbacher & Ansbacher, 1979, p. 200).

The construct of Community Feeling or Social Interest very much aligns with the recent research on resilience as well as the ideas of positive psychology and social wellbeing promotion. IP views the mentally healthy individual as functioning from a position of feeling connected, respected, worthwhile, and competent within his/her social environments. The mentally healthy, well-adjusted individual feels at home with others, is empathetic and has a sense of responsibility to contribute to the greater welfare of others and the world.

While the terms, Social Interest and Community Feeling (gemeinschaftsgefuhl) are often used as if synonymous, I would argue they are related but differ to some degree. Community feeling appears to refer to a broader, more spiritual and global sense of connection and contribution to not only humankind but the greater environment ("*the cosmos*" as Adler's put it). Social Interest, on the other hand, might be viewed as a subcategory under Community Feeling confined more to interpersonal relationships. Ansbacher & Ansbacher summarized Adler's many statements on the concept of Social Interest by referring to it as an understanding, appreciation and valuing of the subjective views of others.

Community Feeling and Social Interest are the barometers of one's relative mental health. The mentally healthy person demonstrates a sense of belonging and respectful connection with others in his/her social environments, a valued, equal and respected fellow man. He or she is empathic and acts in an ethical, responsible, and cooperative manner striving to contribute toward social harmony and the well-being of all humankind, the environment, and life in general.

Adler suggested that the fundamental meaning of happiness, a key concept now in Positive Psychology, is the feeling that one is worthwhile, valued, needed, and making a valued contribution. Happiness, social wellbeing and emotional wellness derive from the feeling that one counts for something and that you'd be missed if not there (Ansbacher, 1977, p. 90). IP postulates that. *"The most sensible estimate of the value of any activity is its helpfulness to all [humankind] present and future"* (Adler, 1929, p.78). Further development of the practical applications of Adler's Community Feeling concept appears to hold tremendous potential for being infinitely useful and helpful to all humankind in both the prevention and treatment of mental health difficulties.

Without doubt, Adler's IP provides a powerful, useful, and now empirically validated model for understanding human behavior and promoting social well-being, i.e. mental health. So why is IP today not more prominent in the larger mental health field? I'll explore this issue next in Part 3, "My Concerns".

Part 3
MY CONCERNS FOR IP

"The moment you say, 'we are great', you are already on the road to mediocrity".
Jim Collins, 2001 (in, 'Good to Great')

Over the past four decades, there has been a marked decline in the visibility and status of Adler's IP within the greater mental health profession. The North American Society of Adlerian Psychology (NASAP) has decreased from approximately 1500 members in the late 1970's to about 400-500. Presentations on Adlerian theory and practice at national and international conferences have all but disappeared. Many, if not most, counseling graduate programs largely overlook Adler focusing instead upon newer, less developed (albeit largely compatible) theoretical models. Adlerian based research and articles are now rarely found in prominent professional journals. And, the availability of quality professional training programs in IP practice, though quite prominent until the 1980's, are today relatively few.

So, what has happened? Three interrelated issues come to mind as being at least partial explanations for this decline: 1) stagnation in the development of IP theory and practice, 2) parochialism and the failure to connect, collaborate and integrate with new research or compatible schools of thought and, 3) failure to address critical issues not addressed by Adler. Adler himself once stated that though his name may not be remembered in the future what is more important is that the ideas of IP continue to be spread and developed. Allow me then to offer some thoughts and suggestions for the revitalizing and further spreading of Adler's Individual Psychology

STAGNATION in IP
The Belgian psychologist, Paul Verhaeghe (2004) perhaps stated it best, *"Every time someone risks leaving the beaten path, the chance of something new appears. The associated paradox is that, following this fruitful side track, a group of disciples emerges to defend the master's orthodoxy. Anything is allowed so long as it is written by the master. In the name of an original thinker, originality itself becomes forbidden!"* This seems quite applicable to Adler's IP today.

Quotes from Adler (and Dreikurs) are all too often shared and posted as if citing biblical scripture; the original words of "the master". But, Adler himself openly acknowledged that he never "discovered" anything; rather, he had merely integrated the wisdom and ideas of the philosophies and religions of the world into a practical, useful psychology. Similarly, phrases such as, "…*As Adlerians, we believe that*…" are often heard. This implies the existence of some monolithic mindset among all those who practice from an Individual Psychology perspective; this is just simply not true! There should always be room in IP for creative thinking, differing perspectives, and intellectual diversity.

Such a perspective seems quite antithetical to the founding principles of IP. Indeed, it was this very issue that led Adler to break off from Freud's Wednesday Psychoanalytic Society and form the Society for Free Psychoanalytic Research. Adler and several colleagues rejected Freud's insistence upon the adherence of all members to his theoretical views. Dr. Heinz

Ansbacher once suggested that the new group's name most likely referred to being '*free from Freud'*" and his insistence on dogmatic acceptance and adherence to his theoretical perspectives.

A corollary to Verhaeghe's observation might well be that of Jim Collins in his book, '*Good to Great'*. In researching consistently high performing businesses and organizations versus those who initially succeed and then decline, Collins noted that, **"The moment you say, 'We are great!' you are already on the road to mediocrity**". This observation also seems quite applicable to IP today.

The questioning of, and expanding upon, Adler's theory is vital if IP is to survive and thrive. As Sir Isaac Newton said in 1675, "**If I've seen further, it is by standing on the shoulders of Giants".** This is the attitude that must be promoted among the new generation of Adlerians! As Adler stated, "**Life is not a question of being, but rather of becoming**". Does it not then logically follow that for IP the question is not, '*What is Adlerian theory or practice?'* but rather, '*What is Adler's IP theory and practice becoming?".*

Research on mental health and resilience now points to the importance of adopting a 'Growth Mindset', i.e., the perspective that, with effort, one can continually grow and improve. Adler's IP must also be based in such a Growth Mindset. Adler's Individual Psychology is not a great theory! Rather it is a very good theory. A theory that with continuous effort can and must grow, improve and expand its applicability and usefulness! IP must strive to grow from "*minder zu hocher*" (lesser to higher) as an ever more useful theory and practice.

In the past, others have called for further developing and expanding IP theory. For example, Dr. Jon Carlson, while editor of the Journal of Individual Psychology, called for going "Beyond Adler". This was met with considerable controversy and resistance; consequently few have dared since to take up this call. Similarly, IP organizations have remained relatively unchanged for over a half century despite a tidal wave of changes in areas such as the mental health profession, technology, professional credentialing and licensure, and the dissemination of information.

Today, Adler's original concepts such as lifestyle, birth order, social interest, and early recollections along with those of Dreikurs' (e.g., goals of misbehavior, logical and natural consequences, and encouragement) still dominate Adlerian literature, research, and practice. Too little attention is being paid to expanding upon and/or revising some IP concepts and techniques in the light of new research and new developments in the larger mental health field. This is exactly what Collins found to be at the root of the downfall of so many successful businesses and organizations, stagnation via defending of the status quo.

Ironically, the classic Adlerian theory texts written by Heinz and Rowena Ansbacher consistently acknowledged and traced the growth, development and evolution of Adler's ideas over his lifetime. In nature, all vibrant, living organisms continue to grow and develop over their lifespan. When growth stops, the process of decline, decay and death begins; psychological theories are very much the same! Evolution is defined as a process of gradual and continual development from the simple to the more complex; a process of change and growth over time. Here, the ideas of Adler and Darwin are quite in agreement! Therefore, adopting an unhealthy "Fixed Mindset" that IP "*is great*" and then "circling the wagons" or "shooting messengers" whenever questions or concerns are raised about the "master's theory" is to choose to begin the slide toward mediocrity and the extinction of IP. I fear this slide has already begun.

Perhaps we might learn from the Roman Emperor, Marcus Aurelius. He is said to have always appointed a servant to walk just behind him through the adoring crowds of Rome. The servant's task was to whisper constantly in his ear, *"Remember, you are just a man, a mortal!"* Perhaps, all Adlerian conferences and training programs should appoint one person to continually walk thru the conference hallways chanting, "*Remember, Adler was just a man, a mortal!"* Doing so might encourage new scholars, practitioners and researchers to have the courage to '*Go beyond Adler'* and to sit upon his shoulders in order to see yet further.

PAROCHIALISM
The social theorist, Pitrim Sorokin, once wrote that the psychosocial sciences suffered from two interrelated defects. The first is **professional amnesia**, the tendency to ignore or remain ignorant of earlier works, achievements, and discoveries within the field. The second is the "**discoverer's complex**", an apparent need to claim 'original discoveries' within the various psychosocial branches of knowledge by "members of their clique". These two interrelated defects are sustained in turn by two processes: a) focusing only upon current theories or ideas and thus remaining ignorant of the field's past history and, b) limiting readings and research citations to only those produced by members of your small circle of like-

minded colleagues, your theoretical 'clique'. Both 'defects' appear, unfortunately, to be all too prevalent among IP organizations and proponents today.

It is fairly easy to trace most, if not all, Adler's concepts and ideas back to other theorists, writers, philosophers, researchers and educators in history. Adler himself acknowledged this quite openly stating that he never "discovered" anything but rather, had merely incorporated the wisdom and knowledge of the ages into a theory of psychology. For example, Adler incorporated the earlier words of Greek philosophers into his IP theory including those of Aristotle, "*the whole is more than the sum of its parts*", as well as those of Epictetus, "*men are disturbed not by things, but by the view which they take of them*" and, "*it's not what happens to you but how you react that matters*". The philosophical writings of Kant (equality and respect) and Vaihinger (as if) are also found in Adler's theory. And, the concept of social interest is a fundamental principle ('the Golden Rule') of every known religion in the world as is so beautifully portrayed by the artist, Norman Rockwell, in his classic painting, "Golden Rule".

Adler's ideas on education can as well be traced back to those of many others including both his contemporaries and those from prior centuries. For example, Adler stated that, "*many people now debate whether we should teach a child to learn subjects and facts, or educate the child's personality. We in IP believe that the two can be combined*" (Adler, 2006, p. 174). His words echo the mission statement proposed many years prior by Dr. John Smith in his 1781 founding of Phillips Exeter Academy. Dr. Smith stated that, "*…the disposition of the minds and morals of the youth under their [instructors]charge will exceed every other care; … goodness without knowledge is weak and feeble, yet knowledge without goodness is dangerous, and that both united form the noblest character and lay the sweet foundation of usefulness to mankind*". The Greek philosopher, Aristotle likewise stated that, "*Educating the mind without educating the heart is no education at all*".

Many authors have since built upon the foundation laid by Adler's IP such as Maslow, Horney, Rogers, Ellis, Beck, Kelly, Glasser, and Seligman. We find these connections in person centered, cognitive, cognitive-behavioral, dialectical behavioral, feminist, constructivist, rational emotive, reality/control theory, emotion focused, positive psychology and so forth. All reflect the further development and evolution of Adler's theory. Much to his credit, Dr. Richard Watts has recognized IP's compatibility with other emerging models such as constructive psychology and positive psychology. Such reaching out to connect, cooperate and collaborate with others is very much needed today.

Yet, all too often, proponents of Adler's IP function in relative isolation from these like-minded schools of thought. Or, perhaps even worse, they become indignant (feel superior?) when areas of similarity are noted and argue all too often that 'Adler said it first' and therefore must be acknowledged as the original 'discoverer', (i.e., the psychological version of the 'Christopher Columbus' discoverer myth). By not connecting and collaborating with other theoretical models and therapeutic techniques, IP risks leaving itself isolated and stuck on a sidetrack while the other mental health field trains rumble past.

A similar situation holds in the area of psychological research. Sorokin's admonishments can be seen in the often total ignorance of IP proponents regarding research findings by those not in their "clique". For example, parenting effects research begun by Baumrind in the early 60's and greatly expanded upon by many researchers in the 80's to early 2000's have provided a myriad of empirical support for the parenting approach advocated by both Adler and Dreikurs albeit with some modifications (e.g., four parenting styles and using the term authoritative rather than democratic). The Adverse Childhood Experiences (ACEs) and trauma research have also provided empirical support for Adler's ideas on lifestyle development and the impact of the social contexts (social embeddedness) of family, school and community.

At times, the status of Adler's IP seems much like that of the hare in Aesop's fable, *The Tortoise and the Hare*. Adler creatively built upon the ideas of others and led the way to a new, broader and more useful approach to the mental health field. But IP, much like the Hare, began to rest and bask in its lead in the race. But, while basking in his lead and napping, the hare was eventually passed by the steadily moving tortoise. Interestingly, a similar Native American fable entitled, *The Coyote and the Race*, perhaps offers IP a similar but more useful Adlerian lesson. In this fable, the Coyote runs past the other struggling animals and crosses the finish line first. But nobody celebrates his victory with praise and adulation. It is only when the 'Great Spirit' directs the coyote to go back and rerun the race helping all the animals to cross the finish line together that the animals of the forest come out to celebrate their combined accomplishment (i.e. gemeinschaftsgefuhl at its finest!).

Hopefully, the next generation of IP proponents will reach out and collaborate with all emerging theories, practices, and research such that, like the Coyote, we all work cooperatively in promoting the mental and social wellbeing of all humankind in all areas of life. Indeed, that was Adler's original goal for Individual Psychology!

FAIURE to ADDRESS CRITICAL ISSUES

A third factor contributing to the decline of Adler's theory is its failure to evolve and expand adequately to address new, emerging issues that were inaccurately or never addressed. This concern arises directly out of the two previous issues of stagnation and parochialism. As noted previously in Part 2, Adler stated that, *"Individual Psychology regards and examines the individual as socially embedded. We refuse to recognize and examine an isolated human being"*. It follows logically that IP and the ideas of both Adler and Dreikurs must also be recognized and examined as socially embedded within the cultural and historical contexts of their times. Some ideas are in need of being updated to better address 21st c. life circumstances, cultural changes, and new research findings.

Some of today's mental health issues were not as prevalent in the times of Adler and Dreikurs. Still other issues were unfortunately misunderstood, ignored, or unaddressed due to political and cultural factors of the times. As the mental health field has progressed, IP has all too often remained in its own traditional "bubble" of theory and practice merely reiterating the original words of the 'masters". Let's look at just two examples of such issues, substance abuse/addiction and abuse/trauma.

Substance Abuse and addiction (drug and alcohol in particular) is today widely recognized as constituting a mental health crisis. Yet, IP is largely absent from the substance abuse field. IP potentially has much to offer in regard to both better understanding the dynamics of addiction and more viable, effective treatment interventions. Adler never fully addressed the issue of alcohol and drug abuse during his time. Indeed, when he did, his ideas were firmly rooted in early 20th century cultural misunderstandings. He referred to addicts as "failures" and combined them into a general category of "perverts, drunkards, and morphia-maniacs" (Adler, 1956, pg. 270). He also suggested alcoholics and drug addicts were most often the products of pampering in childhood and thus lacked social interest. This is clearly not consistent with what we've more recently learned about addiction and the abuse of drugs and alcohol.

Ironically, the current empirical knowledge base on substance abuse and addiction is actually quite consistent with Adler's foundational concepts. For example, Dr. Gabor Mate, a leader in the addictions field, notes that addictions "*always originate in pain, whether felt openly or hidden in the unconscious"* and thus drugs and alcohol serve the purpose of being, "***emotional anesthetics***". Similarly, the Swiss psychologist, Alice Miller, has likewise suggested that addiction is a sign, a signal, a symptom of personal distress (i.e., purposiveness). The primary treatment question Mate suggests should not be, "*Why the addiction*?' but rather, "*Why the pain*?". Dr. Vincent Felitti concurs noting from his studies that addiction is better understood if seen as being ***"experience dependent"*** __*not*__ ***"'substance' dependent!"*** (i.e., Lifestyle and social embeddedness).

It is concerning that, given the importance of the addiction and substance abuse problem, Individual Psychology is not "seated at the table"! Addiction is a very complex problem and thus calls for complex, multidimensional solutions. Attempts to merely squeeze the 'square peg' of traditional Adlerian therapy into the 'round hole' of addictions treatment would be all too simplistic. As H.L. Mencken's wrote, ***"For every complex problem there is a clear and simple solution; which is wrong!"***. However, if a broader lens is employed, the foundational concepts of IP theory makes it uniquely equipped to address substance abuse treatment intervention from a holistic perspective. Further development of IP in this area might include the incorporating of individual apperceptive dynamics along with the contributing influence of the social, spiritual and occupational tasks of life along and the interplay among biological, cognitive, and behavioral factors. The cornerstones are present in IP upon which to build more complex understandings of, and treatments for, substance abuse and addictions.

A second example of the failure to address critical issues is that of abuse and maltreatment. Adler focused primarily on the idea of the pampered, self-centered child in conceptualizing most of his cases. The issue of domestic violence, abuse (physical, sexual, emotional, verbal) are almost entirely ignored. Undoubtedly this is not because such problems did not exist in that era's cultural context of authoritarianism and male privilege. In fact, recently discovered writings of Freud indicate he was well aware of the role of sexual abuse in the etiology of the psychological problems of many clients. However, such a topic was simply not acceptable in 19th and early 20th century society. In fact, to do so would have risked being rejected and shunned within the scientific and aristocratic communities. Hence, Freud revised his early thinking to instead suggest 'sexual fantasies', not actual experiences, to be at the root of much psychopathology.

It only stands to reason that Adler as well must have encountered sexual and physical abuse issues in the psychological distress of many of his clients. Why were such issues not then addressed? The explanation is likely that the cultural imperative was to "turn one's head" and 'not see' or recognize domestic violence and child abuse. This social norm continued well into the 20th century including the time of Dreikurs' writings.

Again, rather ironically, many IP principles are highly applicable to understanding and integrating abuse and trauma recovery into therapeutic practice. For example, the most common cognitive responses to a history of early abuse or trauma have been identified as being self-stigmatization, self-blame, insecurity (anxiety), and loss of trust (in self and others). When such themes are dominant within a client's lifestyle (i.e., apperceptional schema), it follows logically that they will develop adaptive survival strategies (symptomatic behaviors) to cope with their adverse social ecosystem(s). Such strategies then prove counterproductive and problem maintaining within the larger social environments in which they live.

The reluctance in IP to "go beyond" or "expand upon" the ideas of Adler and Dreikurs has again and again left IP largely absent from "*a seat at the table*" addressing so many current issues in counseling/psychotherapy practice including the two noted here as well as additional areas such as gender orientation, sexual orientation, cultural differences, etc.). Verhaeghe's observations noted previously are once again brought to mind," ***In the name of an original thinker, originality itself becomes forbidden!***

A FINAL THOUGHT

So, why do these problems of IP stagnation, parochialism, and failure to address new issues exist and continue? The writer, Tom Englehardt, once stated, "*words (issues) denied mean analysis not offered, things not grasped…which means that mistakes are repeated*". This is the hard issue for IP to face! It calls for a looking inward. It means recognizing, as the comic book character Pogo noted , "*I've met the enemy and he is us*!"

Perhaps the Adlerian technique of asking "The Question" might be helpful. That is, if IP and its professional groups and organizations could magically become widely popular and draw an infinitely larger number of new proponents, researchers and practitioners, how would life change for us all? As both Dr. Bruce Perry and Dr. Amos Wilson have noted, if you want to understand a problem, don't ask who suffers but rather ask, who profits or benefits (economically, politically or status)…it is those who have the greatest vested interest in maintaining the status quo who are the most resistant to change. This is a central principle of Alfred Adler's IP theory, homeostasis and stability of the "individual lifestyle". We see it in therapy with clients as they at first resist insight and changing oneself, and we see it in the "collective lifestyles" of groups, organizations and institutions.

In Part 4 of these reflections on IP, I'll discuss some of my hopes for the next generation of IP proponents; where they might "sit on Adler's shoulders" and hopefully facilitate the evolution of IP and increase its usefulness to the promotion of social wellbeing in all spheres of life.

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Part 4
MY HOPES for the FUTURE OF IP

"Life (and IP) is not a question of being, but rather of becoming" (A. Adler)

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Adler's Individual Psychology provides a broad and useful foundation for the understanding of human behavior and the improving of mental health/social wellbeing. It is applicable in all aspects of life: the personal, social, familial and occupational. However, IP needs to adhere to its own basic tenets. It must continually strive to move from "*minder zu hocher*" (lesser to higher); from being a "good" theory/practice toward becoming an ever "greater and more useful" theory/practice.

Hopefully, the next generation of IP professionals will "*take up the baton*" and move IP forward. Adler's theory was grounded in, and built upon, the knowledge, ideas, and philosophies of many who came before him. Today, there are many areas in which IP needs to be further developed, enhanced, refined, and/or modified. Moving from "lesser to higher" involves seeking to ever more effectively address the issues about which Adler wrote, the issues he did not fully address, and the unaddressed issues that were not prevalent in his time.

Among the areas that seem particularly important for the further development of IP would include: substance abuse, sexuality and sexual identity, the DSM/ICD psychobiological) narrative, cultural issues (cross, multi and transcultural) issues, education reform, violence and crime prevention, and the seeking of ever more effective and comprehensive treatment strategies.. As Adler stated, *"The honest psychologist cannot shut his eyes to social conditions which prevent the [individual] from becoming a part of the community and from feeling at home in the world, and which allow him to grow up as though he lived in enemy country. Thus the psychologist must work against nationalism when it is so poorly understood that it harms mankind as a whole; against wars of conquest, revenge, and prestige; and against unemployment which plunges people into hopelessness; and against all other obstacles which interfere with the spreading of social interest in the family, the school, and society at large"*. (Ansbacher & Ansbacher, 1956, p. 454)

For now however, let's limit the discussion to just one issue within each of the four cornerstone concepts. Perhaps this might serve as a starting point for moving toward an improved "Individual Psychology, Version 2.0".

Social Interest: Operationalizing the concept

It has always seemed rather ironic that mental health professionals tend to know very little about mental health per se; rather, they are trained primarily in the treating of mental illnesses and disorders. But, it is here that Adler opened a very important door by attempting to define mental health as Community Feeling or Social Interest. This, I suggest, is potentially Adler's greatest contribution for both treatment and prevention. But unfortunately, it is the least well developed concept in IP. Much like the old adage about the weather, *"it's much talked about but nobody does anything about it!'*.

The importance of prevention and mental health promotion in youth was advocated by Adler in the post WWI era. But, this was by no means a new idea. Adler's initiatives promoting healthy psychosocial development via school and parent guidance centers was one of many such efforts. In the mid-late 19th c there were the progressive education ideas of people such as Dewey (USA) Harbart (Germany) and Bosco (Italy). There was also the character education movement of the early 20th century and the 1906 initiating of school classroom guidance programs in the United States along with national competitions to develop "morality codes" and character education programs in American schools. Similar initiatives also arose later in the 1960's (e.g., Values Clarification and the Adlerian based DUSO program) and new programs continue to appear today including the Second Step, Tribes, Passport2Peace, and the European based RESCUR programs.

So what has gone wrong, why is it not working? As the famous American "philosopher", Yogi Berra, once said, *"You've got to be very careful if you don't know where you're going because you might not get there"*. Without a clear understanding as to what 'mental health' is exactly, we are left embracing overly simplistic, ineffective, or even counterproductive strategies. This is where Adler's Social Interest (SI) concept could be particularly valuable if further defined, developed and operationalized.

Ansbacher (1968) summarized Adler's ideas on Social Interest as developing in three stages: 1) an <u>innate aptitude</u> which must be developed, 2) teaching of the <u>objective skills</u> of SI leading to, 3) the formation of a <u>subjective attitude</u> toward life and others. Thus, stage 2, the teaching of the objective skills of SI, would be the primary focus for mental health (SI) promotion. Today this is referred to as social-emotional learning (SEL)

The resilience research (Benard, 2004) provides empirical support for Adler's IP noting that resilience is found to develop whenever a child is provided with both supportive social environments and taught a set of social-emotional competencies. Calls for Social-Emotional Learning in the schools is today heard worldwide and advocated for by organizations such as the European Network for Social Emotional Competence (ENSEC) and the Center for Academic, Social & Emotional Learning (CASEL). But unfortunately, the voice of IP is largely silent. Though some initial ideas have been put forward on the teaching of SI skills by parents and teachers (***http://www.resiliencecounselingcenter.com/publications.html***), much more needs to be done.

Lifestyle: Role of ACEs, Abuse & Trauma

A further area of IP in need of further development is in regard to the underlying dynamics of mental/emotional disorders and social adjustment difficulties. While Adler emphasized the 'pampered' (self-centered) child in case conceptualizations, he spoke all too little about the role of abuse and maltreatment and its impact upon a child's developing Individual Lifestyle; the child's apperceptive schema regarding self, others and life.

At the turn of the 20th century, Frank Parsons, father of the counseling movement in the US, called for viewing clients not as mentally ill, but rather as being,*"...normal individuals dealing with adverse life conditions*". Almost 100 years later, the research of Anda, Felitti, McEwen, Sapolsky, Harris, and many others have repeatedly confirmed this perspective. This has led, in turn, to a far greater understanding of the critical importance of Adverse Childhood Experiences (ACEs) on mental health. The Center for Disease Control's study of ACES, for example, concluded that there is a fundamental link between trauma/abuse and both chronic diseases (e.g. heart disease and autoimmune diseases) and mental health disorders (e.g. substance abuse, domestic violence, depression, anxiety).

Adler's IP framework is very much compatible with the ACE's research. But, IP is must expand and incorporate this (ignored or overlooked?) issue of abuse, trauma, and maltreatment in the development of, and interventions for, child and adult mental disorders and social adjustment difficulties. Chronic exposure to stressful life conditions, we now know, leads not only to a breakdown of neurological processes, i.e. allostatic overload and dysregulation (McEwen, 2000; Sapolsky, 2004) but also to the development of destructive cognitive schemas regarding self, life and others. Common "schemas of apperception" (an early term of Adler for 'Lifestyle') found to commonly occur due to abuse and trauma include: self-stigmatization, loss of trust, self-blame and an increased sense of helplessness, hopelessness, pessimism, worthlessness, powerlessness.

The ACEs research indicates that by providing wellness promoting conditions such as safe, supportive social environments (family, school and community) along with training in essential social-emotional competencies (e.g., emotional self-regulation, empathy, problem solving and positive relationship skills, etc.) the adverse effects of abuse/trauma can be effectively prevented or reversed. This again empirically affirms Adler's idea that the goal of therapy should not be to merely decrease or control symptoms, but rather to increase the client's Social Interest (mental health). IP would be well served by connecting Adler's IP with the ACEs research findings so as to improve our understanding of and interventions for mental and emotional difficulties.

Purposiveness: Re-thinking & expanding the concept

Individual Psychology postulates that all behavior is purposive, i.e., goal directed. The direction of this striving is, however, largely referred to in rather vague, general terminology (e.g., socially useful vs. useless, perceived plus, belonging, or significance). Moreover, the focus is usually upon the purpose of problematic behaviors such as client symptoms or misbehaving children (e.g. attention, power, revenge, avoidance, or superiority). It would seem highly beneficial for promoting mental health (SI) if IP also delineated, in more specific and practical terms, the purpose of mentally healthy behavior; the goals of positive behavior.

The question largely unaddressed is that of toward what goals does the mentally healthy individual strive? And, perhaps even more importantly, how do we provide opportunities for individuals (adults and children) to experience these positive, socially constructive goals? If positive goals (psychosocial needs) are more readily attainable, compensatory symptoms or "misbehaviors" are no longer needed? Research and clinical observations offer substantial evidence that providing opportunities to develop a positive self-identity and experience being a valued, worthwhile member of society is a far more effective way to improve mental health than merely gaining insight into, or seeking to control or decrease, problematic behaviors and emotions.

The greater effectiveness of making positive goals more attainable rather than managing problem behaviors can be seen in the Rat Park studies and programs such as The Iceland Youth Project, the Valued Youth Project, and Project LIFT. These have all demonstrated that when opportunities are provided for healthier social experiences, lives can be turned from risk to resilience and psychosocial well-being. Individuals become empowered when given the chance to realize their need to fulfill healthy, positive goals. They develop a more positive self-identity via a sense of connection, being valued, worthwhile, and a contributing member of society. A cognitive apperception schema develops (i.e., Lifestyle) based in Social Interest and Community Feeling. The goal of Adlerian therapy, after all, is to increase mental health, "*The patient must be guided away from himself, toward productivity for others; he must be educated toward social interest*" (Ansbacher & Ansbacher, 1979, p. 200). How can we more effectively move individuals toward SI?

Clearly, IP would be significantly enhanced in its usefulness to all humankind by re-thinking and expanding upon the concept of purposiveness. The current IP terminology of "mistaken" beliefs or children's "misbehaviors", for example, are outdated and, ironically, rooted in an authoritarian perspective. The resilience and trauma informed research suggests problematic behaviors would be better understood if considered not in judgmental terms but rather as the 'logical'

conclusions and 'creative, adaptive' behavioral strategies which arise in order to cope with, or survive difficult life situations, insufficiently nurturing social ecosystems, or adverse experiences.

In this manner, IP would better be better aligned with the emerging research on resiliency, ACEs, and trauma. Adaptive/compensatory behaviors, albeit problematic, arise whenever opportunities for striving toward positive, healthy goals appear insufficient, unavailable or blocked. Toxic or low nurturing social ecosystems are characterized by adversities such as: instability, unpredictability, neglect, maltreatment, over-control, and abuse (including (physical, sexual, verbal and emotional). This perspective is more optimistic and encouraging. It also better meets Adler's contention that a therapist must align with, not against, the client's symptoms. Client and therapist must work collaboratively to better understand and appreciate the creative and functional dynamics of presenting symptoms as well as the counterproductive, problem maintaining aspects of these very same behaviors.

One idea as to the possible purposive or goals of positive behavior has been suggested as the seeking to meet our essential psychosocial needs of: recognition & connection, individual autonomy, equality/respect, meaningful contribution and, competence (Nicoll, 2017). When these psychosocial needs are blocked, the five adaptive compensatory goals become those of seeking: attention/service, control (of self or situations), superiority, revenge, and avoidance (of emotional pain or failure). Developing treatment intervention strategies based on increasing the opportunities for experiencing such positive goals might better serve as "antidotes" to adversity and facilitate increased mental health (SI).
[For further information: *http://www.resiliencecounselingcenter.com/newsletters/Newsletter-9-April-2017.pdf* OR, *https://www.researchgate.net/publication/344252936_The_Evolution_of_Adlerian_Family_Counseling-Version_20_Building_on_Oscar_Christensen's_Legacy*;].

Social Embeddedness: Increased focus on cultural contexts
The Social Embeddedness concept in IP recognizes that humans are innately social animals. Thus, understanding individuals requires examining the cultural contexts (i.e. social ecosystems) in which they develop, live, and function. *Individual Psychology regards and examines the individual as socially embedded; we refuse to recognize and examine an isolated human being*" (Adler, 1926).

In nature, all healthy organisms require a nurturing, supportive ecosystem in order to grow, be healthy and to thrive. When fish, animals, or plants fail to thrive, we examine the toxins present or nutrients absent from their ecosystems. Intervention is directed toward improving the health of the ecosystem rather than "healing" the organism itself. Humankind is very much the same! We can only understand and address mental health difficulties by broadening our lens and assessing the degree of "nutrients and toxins" present in the social ecosystems (aka: cultures) in which people live. This includes not only ethnic cultures, but the whole multitude of cultural contexts in which we are each embedded simultaneously including: family, school, workplace, socioeconomic, religious, community, political, geographical, racial cultures and so forth.

IP's social embeddedness concept calls for us to widen our professional 'lens' and address the task of improving the nutrients present in the social ecosystems in which people are embedded. How do these various ecosystems promote or hinder psychosocial well-being? IP could be enhanced by exploring methods for fostering more nurturing, health promoting social ecosystems (i.e. cultures). Adler began down this road with his work in schools and it has been extended today to IP-based parent education programs. It should now be expanded further to addressing the workplace, community and ever larger cultural contexts?

This implies employing a transcultural perspective. What dynamics contribute to the relative health vs toxicity of all cultural contexts or social ecosystems? Moreover, this would require examining the relative 'health' of our own mental health culture and paradigms! As Evan Watters (2010) notes in his book, *"Crazy Like Us: The globalization of the American psyche",* the DSM's "*flattening of the landscape*" in mental health is the biggest issue yet to be addressed in the mental health field; it is the proverbial 'elephant in the room'.

Tolstoy once said, "*Happy (healthy) families all look the same, unhappy families are each unhappy in their own way*". The same holds true for human cultures (social ecosystems). So what then are the commonalities found among healthy, nutrient-rich human cultures? The effective schools research, for example, has consistently observed that highly effective schools differ from less effective schools not in regard to organizational structures or curriculum but rather, in regard to the "school ethos" or culture. Similarly, the early research of Peterman & Waters and lately that of Jim Collins on consistently successful businesses and organizations note that their success lies in the relative health of the organizational

culture. As Collins put it, "*culture eats strategy for breakfast*!". Perhaps advocates for IP in schools, families, businesses and organizations have overly focused on strategies or techniques rather than on the larger context of cultural change and the promoting of healthier cultural ecosystems.

The Jungian psychologist, James Hillman, once noted in his keynote address to the North American Society for Adlerian Psychology, that the "depth" of the psychologies of Freud and Jung's focused on the "in here", the internal . Adler's depth, he suggested, was instead focused on the "out there", the social contexts. It would seem that IP has so much more to offer by further developing the concept of social embeddedness, the "out there"! This will involve the articulating of IP's transcultural perspective on the commonalities found amongst all healthy social ecosystems; including the family cultures, community cultures, school culture, religious cultures, organizational cultures, ethnic cultures, and so forth).

In Conclusion

Hopefully, through sharing my journey, perspectives, concerns, and hopes those relatively new to Adler's Individual Psychology theory and practice might be encouraged to "sit on Adler's shoulders" so as to see still further. IP offers a strong foundation upon which to build an even greater, more useful theory and practice. But, IP must move from merely preserving this foundation and instead toward building upon it, improving it, and expanding IP theory and practice in all areas. Only by so doing can IP continue to move from lesser to higher, to focus on 'becoming' rather than merely 'being' and continue to grow in its contributions to the social wellbeing of all humankind.

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