

# The Autonomous Functioning of Adlerian Nonprofessionals

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In recent times much concern has been expressed regarding the shortage of professionals trained to deal with the mental health needs of the public. It is now acknowledged that the available professionals cannot adequately meet these needs nor is there hope that they will be able to do so in the future (Guernsey, 1969, p. 1). Society has thus felt the necessity to expand its helping services and has turned to nonprofessionals to help close the manpower gap. These support personnel are trained to perform some, though by no means all, of the functions of the professionals. Vast numbers of publications have reported situations in which these nonprofessionals proved to be very successful when asked to deal with limited psychotherapeutic and counseling endeavors (Cowen, 1973). However their utilization has always taken place under the direction or jurisdiction of various institutions, organizations or foundations. In this manner the 'experts' have maintained their control over these programs. The planning was designed in such a way as to perpetuate the necessity of this expert's supervision and, in this way, to deny the nonprofessionals the opportunity to function autonomously.

Fifty years ago Alfred Adler was vitally concerned with the necessity and importance of community-based programs which would provide mental health services for the residents. "The child realizes that his difficulty is a community problem (Rayner in Ansbacher and Ansbacher, 1956, p. 394)." With reference to educators in the schools Adler stated that "[t]he teacher must know everything the psychiatrist knows, so that after discussing the child's problem he can proceed on his own, without further help (Adler, 1958, p. 159)." Thus when Adler interviewed children he did so in front of a large audience comprised of psychiatrists, psychologists, social workers, teachers, and parents. In this fashion he disseminated his approach and impressed upon the youngsters that their problem was not a private affair but was of communal concern. This revolutionary method of publicizing counseling sessions was soon extended to Community Centers for the use and education of parents and teachers. In Vienna and later in the United States (under the guidance and with the determination of Rudolf Dreikurs) these community-based Family Education Centers (as they came to be called) were organized, staffed, and directed by professionals. However, in Washington, D.C., and Wilmington, Delaware, the reins of these Centers have

recently been handed to the lay personnel of the community. An Adlerian professional, over a two year period, trained fourteen volunteers from these two localities in the Adlerian model of family counseling. It is now approximately two years since this 'expert' phased himself out of the program and left the responsibility for the Centers' functioning to the inhabitants of the respective communities. He now returns periodically as a consultant. The session-to-session functioning, however, is entirely operated and handled by the lay personnel; from counseling families to the financial administration of the Center. What is unique about these particular Family Education Centers is that they have no official affiliations with any mental health professionals, organizations, or institutions. They are autonomous bodies providing educative services to members of their communities. The question arises though as to how effective they are. Do they function as well now that the professional no longer conducts the family counseling sessions?

Research recently completed at West Virginia University indicates that, with regard to certain skills requisite to Adlerian family counseling, these trained laymen in Washington and Wilmington are as knowledgeable, if not more so, than recently trained Adlerian professional counselors. Utilizing a paper and pencil questionnaire, the research showed that these nonprofessionals (13 of whom participated in this study) could discriminate the goal of a child's misbehavior significantly better than could recently-graduated masters level students, regarded as professionals. When asked to choose an appropriate re-directive approach to use in the re-education of a misbehaving youngster, these two groups exhibited no significant differences in their abilities. Also of great import was the finding that these trained lay counselors fared significantly better than a matched group of untrained laymen in both discriminating goals and suggesting re-directive approaches.

Although this study did not presume to explore the counseling skills of these nonprofessionals, the results do suggest that these individuals have learned certain skills and principles of Adlerian theory and counseling very well. They also indicate that a graduate school education is not necessary to develop these abilities. In addition, it appears that training in Adlerian family counseling methods can be utilized to produce not only qualified professionals but also educated laymen, whether they utilize their training to become nonprofessionals or solely more effective parents and teachers.

This study was a first step in a series of necessary explorations required to discover just how effective Adlerian nonprofessionals really are. Should it be shown that they truly are successful in the absence of the professional Adlerian, it would lend strong support to the idea that professionals utilize their experience and time to train laymen in their methods. This should be done with the goal of inherent obsolescence, i.e., the services of the 'expert' would, after the training period, no longer be required. He could, in good conscience, leave the

entire functioning of the Family Education Center in the hands of its trained members. This does not suggest that psychiatrists, psychologists, counselors, and social workers should be displaced. It does propose, however, that their role definitions be re-examined. In this fashion, Adler's concept of a 'therapeutic community' might truly come to fruition.

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