

Encouraging the Pessimist: A Confronting Technique

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According to Adlerian theory, hope in the discouraged human can be reawakened by many things: an ego-enhancing life event, the appearance of a rescuer, a supporting relationship, the passage of time, and so on. Adlerians consider that *discouragement* is one of the great blocks to the growth of the self and their therapeutic endeavors specifically are designed to encourage their patients and clients. Foremost among the methods they use is that of demonstrating to the client that there are *alternatives* available. Thus, he need not view himself and the world the way he does, he could view them otherwise. His conclusions are not inevitably rational, they could be biased and illogical. He need not behave the way he does, he could behave otherwise.

It is an Adlerian axiom that man acts in the world according to the way he perceives it; that his private reality is subjective. Furthermore, if there is cognitive dissonance between his private reality and the consensual views of others, he will prefer his private reality to the latter and will act according to it. The techniques for revealing to the client his private reality and confronting him with it are many and varied, but there is one such confrontation technique that I learned from Rudolf Dreikurs (who learned it from Alfred Adler) which I have used many times with satisfying results.

Occasionally, one meets a client who is a thorough going *pessimist* with regard to himself, his life, his abilities, his future. Such clients are found in all age groups and with all the nosologic syndromes. The presenting problems often include various failures or simply evasions of life tasks. In work, school, relations to the opposite sex, in friendships and other social endeavors, the hesitating attitude of the client becomes apparent as soon as one peers behind the facade of his symptoms. One important therapeutic goal with such clients is to break down the strongly entrenched wall of pessimism which vitiates his endeavors, leads him to condemn himself or the world and saps him of the courage and confidence to live freely in the world. Such pessimism does not often yield to reason or exhortation. The client can advance his own reasons and he has long ago become deaf to exhortation.

The technique, then, is as follows: The therapist listens to the client's story, examines his childhood to understand the social role he played in his own family, the family values and atmosphere and his relationships to his siblings and parents. He then retrieves the client's earliest memories to

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understand the client's own *Life Style*, his private, subjective view of himself in his world. He looks specifically for what discouraged the client and having established it to his own satisfaction is ready to begin.

First the therapist points out the discouragement in an accepting and non-critical manner. Then he says, "It is no surprise that you feel hopeless. Much of your early life has been a training in hopelessness. You decided long ago that you had no chance (because of this or that event or handicap). It is even important for you to prove that there is no hope. If some hope came along you would deny it. It is necessary for you to feel hopeless in just this way so you can build the kind of case you want against the world and its demands. You have achieved your goal. Now you are excused from trying to change things. Here and there in your childhood are the examples of how you train yourself and reinforce the hopelessness. Here and there in your memories are your ways of seeing the world."

The object of such confrontation is to redefine an attitude. The client believes something has happened to him. The therapist defines it as something he is doing. The client feels justified in his hopelessness. The therapist redefines it as an attitude he has developed and cultivated. If the client protests that he is truly justified, the therapist argues the client's subjectivity.

Thus, "Naturally, if one starts out with the idea that life is supposed to be paradise (or whatever the mistaken assumption is), then you have a right to conclude that life will never be good enough."

The purpose of redefinition is to shake the client's blind belief in his own private sense by labeling it *private* and denying its validity. It is the deliberate creation of cognitive dissonance in the therapeutic situation in order to cut the client free from a fixed attitude and leave him open to alternatives. We define his hopelessness as his own personal construct, as a deliberate deception of himself, as something he *did* to himself.

As the prophet Nathan said to King David concerning the rich man who took the poor man's only lamb to entertain the traveler, so say we to the client concerning his pessimism: "Thou art the man!"

George was 12 when his mother brought him for consultation because he was so poor in his school work. He was in the sixth grade, had already lost a year, and seemed either disinterested in school or would try furiously for a while and then give up. Mother did not know what to do. She was disappointed in George and angry at the school because they complained about George but could offer no constructive help. George sat passively with a frown on his face and contributed no comments. Finally I asked George if he would be willing to answer questions. He answered with a shrug and did not look at me. I asked if he would prefer Mother to leave the room. George shrugged again.

“O.K., George, I’ll ask some questions and let’s see if you want to answer them. First, George, what do you think, do you think you are a dummy?”

For the first time George looked at me. “Yes.”

“But I know he isn’t dumb,” expostulated Mother. “He’s smart about so many things. He’s helpful at home —.”

I stopped Mother and said, “Listen to how George feels about himself. George, is school too hard for you?”

“Yes.” George was now looking directly at me. “I try, but I can’t get it.”

Further conversation showed that George had always considered himself backward in school and out of his discouragement had given up. He had already tried and had only failed. Furthermore, by this time he actually disliked school and while not a behavior problem, he spent most of his day passively resisting the teacher’s efforts to pour some learning into him. “Well, George,” I went on, “if you are dumb then we shouldn’t expect you to learn in school. And if you believe you are dumb, then you have a right not to try any more. But would you like to find out if you *really are dumb* or if you haven’t figured out how to learn? After all, if it’s the second, and you’re not really dumb, then you better stop thinking you’re a dummy and get started learning.”

George was quite interested by this time and I arranged for him to have a test with one of our psychologists. That test showed that George had better than average intelligence and I told him so.

“George, you have got to be doing something wrong if you have learned to think and act dumb. You could be doing differently. But it’s no use asking you to try again in school when you don’t know how to do it.”

At my suggestion, Mother arranged for George to visit a tutor twice a week for two hours. These meetings with the tutor were during school time. Therefore, the amount of time he spent passively resisting the school teacher was reduced. Because it shortened the hated school day, he was eager to see the tutor. When they returned to see me a month later, George was smiling and talkative. He was doing better in school. Mother was very pleased. The school teacher was happy with George’s progress. George had changed his mind about being a dummy.