

sonal problems; while methods like "negative practice" or "desensibilization" give the psychologist the easy and impersonal role of the prescribing physician.

Adlerian Psychology
and the Medical Profession

The M.D.'s among us should reflect upon how far they still feel like physicians. Personally, I never yet have met a true Adlerian M.D. who would have been interested in the practice of medicine and who did not try to escape from it, in order to devote himself exclusively to psychology. This is easy to understand, since the first consequences of a true understanding of Adler is the desire to become a teacher of logical living, to help by solving psychic problems, and not to fumble with bodies. It seems to me that most of those who come to us from medical practice would never have taken that detour had they known Adler's teachings before starting in the field of medicine.

This is very important, because there has been a tendency in our movement to concentrate all efforts upon getting physicians to join us, regardless of whether or not they had that philosophical mind and the disposition to be an educator which the Adlerian

M.D.'s will doubtless find in themselves. I think that too much importance has been given to the physical symptoms that might accompany psychic difficulties and too little to the type of mind needed for Adlerian work, be it psychological practice or the spreading of Adlerian thought. If my thesis is accepted, that Adlerianism is, today, more a philosophy of logical living and an educational program than a method of curing neuroses, we must all, M.D.'s and not M.D.'s, teach, teach, teach, and create a new generation of well-trained Adlerians, no matter from what field of activities they come to us. It is the attitude toward life that counts most, not previous education; and the attitude of the average M.D. is absolutely un-Adlerian.

We, the personal pupils of Adler, have twenty or thirty years more of active work life. Let us use them well. It has often been said that those who have not been in personal contact with Adler cannot be true Adlerians. I do not think this is absolutely true. I have probably learned more from pupils of Adler than from Adler himself, and I know we all can train new Adlerians if we only look for the right type of mind and attitude toward life.

Let us work together. All of us.

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Child Guidance as a Community Service

B. Brind, Ph.D.

Settlement houses, community centers, and similar institutions seem to offer excellent opportunities for establishing child guidance clinics. The Queen's Nursery School serves the New Housing Project at Long Island, New York. For 2½ years I have been conducting a consultation service for parents of problem children. Thirty-six of the hundred children attending the nursery school were referred for consultations by the teachers, who discussed the cases with the principal prior to referral.

After a child was referred to me, I observed him during the playing and eating periods. Every child was given a test (Buehler or Stan-

ford-Binet). Then the parents, usually both, were invited to the office. After two or three consultations with the parents, I visited the home to check whether the given directions were being followed, and how the child was handled at home. Thereafter, children and parents came together to the office. The parents complained mostly of bed-wetting, speech defects, untidiness, and unmanageability.

During the winter months, all the parents of the nursery school children were invited to general meetings with lectures about the education of the normal and the difficult child.