

# ADLER, FREUD, AND AMERICAN SOCIAL WORK

HAROLD D. WERNER, ACSW

*Morris County Guidance Center, Morristown, New Jersey*

Most American social workers probably have never heard the term "social interest," despite the fact that the very practice of social work is an outstandingly fine example of social interest. This ironic situation is possible because the almost exclusive commitment of social work schools and agencies to some form of Freudian orientation has hindered social workers from becoming acquainted with other theories of behavior and treatment.

Psychology and psychiatry have done better in this respect. Psychological and psychiatric practice based on non-Freudian theory evokes no special stir, and the journals in these two professions frequently publish articles which depart from psychoanalytic concepts. Social work, however, while its strong original allegiance to Freud has lately been somewhat modified by dilution and "eclecticism," in the main still turns to him for its understanding of human behavior.

In the graduate schools of social work and in the supervision given to agency workers by their supervisors, there is inculcated the attitude that Freud's interpretation of human behavior is the definitive one. It is true that room is allowed for variations and modifications. It is also true that there are exceptions, notably the Pennsylvania School of Social Work with its Rankian orientation. Nevertheless, by and large, most American professional social workers do not question the notion that one cannot understand the human condition without recourse to psychoanalytic doctrine. Social work journals and educators contribute to this state of affairs by seldom exposing practitioners and students to *fundamentally* different theoretical systems.

## THE "SOCIAL" IN SOCIAL WORK

This is particularly regrettable in regard to Individual Psychology, whose principles are more in consonance with the expressed beliefs of the social work profession than is a Freudian orientation. In 1922, Mary Richmond stated the view that social casework consists of "those processes which develop personality through adjustments consciously effected, individual by individual, between men and their social environment" (5, p. 98). Adler's treatment approach

called for exactly the same thing. Since he believed that human failure was due to insufficient social interest, i.e., insufficient ability to live cooperatively with one's fellows, he thought that the chief responsibility of the helping person was to foster in his client the development of a greater social interest, or social feeling as Adler's original term, *Gemeinschaftsgefühl*, has also been translated. In this way, the therapist would be consciously effecting an adjustment between a man and his environment.

Conversely, Adler believed in correcting defects in environment, which make it difficult for children to develop this social feeling and which contribute to their reaching mistaken conclusions about themselves and their world. In discussing the social responsibility of the psychologist (therapist), he wrote:

The honest psychologist cannot shut his eyes to social conditions which prevent the child 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 unemployment which plunges peoples into hopelessness; and against all other obstacles which interfere with the spreading of social interest in the family, the school, and society at large (1, p. 454).

In taking this position, Adler was pointing to the obligation of therapists to persuade society to effect adjustments in itself.

Freud, on the other hand, was not interested in adjusting people to society and vice versa. His theories do not support or enrich the principle generally accepted by social workers that the problems clients bring to social agencies are *psychosocial* problems. Freud viewed the mental sufferings of individuals as consequences of their failure to cope with the biological urges within them, with no special importance attached to their social situation. Strict adherence of social workers to Freud's basic postulates effectively takes the "social" out of social work, yet his theoretical system has been used for more than a generation by the social work profession as its guide to the understanding of human behavior.

#### UNIQUENESS OF THE INDIVIDUAL

Helen Harris Perlman, one of social work's leading contemporary theoreticians, in discussing the client of social agencies finds that, "with all his general likenesses to others, he is as unique as his thumbprint. By nuance and fine line and by the particular way his bone and brain and spirit are joined, he is born and grows as a personality different in some ways from every other individual of his family, genus, or species." She goes on to point out that each person

is a whole in any moment of his living. He operates as a physical, psychological, social entity, whether on the problem of his neurotic anxieties or of his inadequate income; he is product-in-process, so to speak, of his constitutional makeup, his physical and social environment, his past experience, his present perceptions and reactions, and even his future aspirations. It is this physical-psychological-social-past-present-future configuration that he brings to every life-situation he encounters (4, pp. 6-7).

The kinship of Perlman's outlook with that of Adlerian psychology is self-evident. Adler's entire approach rests on his belief in the uniqueness of each individual. "We attempt to examine the nuances" (1, p. 180). He treats the troubled person by first discovering his particular subjectively conceived goal of success and the style of life he has developed to achieve this objective. The role of the therapist is then to impart to the patient his understanding of the patient and put the latter on the road to correcting his mistaken life style, the behavior pattern that has brought him failure. Within this framework, Adler allows for an infinite variety of life styles and goal strivings.

Perlman's belief in the uniqueness of the individual is shared by all professional social workers, but a Freudian orientation gives little support to this view. It seems quite clear that Freud moved in the opposite direction, toward a conviction that human beings could be understood in terms of universal characteristics that were common to all. He came to believe that every person's inborn impulses toward his fellows were aggressive; that all individuals had to pass through a situation in which they struggled with their sexual attraction to the opposite parent and their wish to replace the parent of the same sex; and that sexual libido was the main dynamic force in human behavior most facets of which were manifestations or sublimations of the sex drive. With this kind of orientation, the analytically-oriented helping person tends to look for evidences in the history of his client or patient which will fit him into the Freudian blueprint. He in effect emphasizes that we are all the same rather than that we are all different.

#### STYLE OF LIVING

By contrast, the Adlerian views man as being born with a potential for cooperative living which can be developed. The impulses that each man displays toward his fellows vary greatly, depending on the degree to which the potential for social feeling has been cultivated in him by his parents and his society. As for the Oedipal or Electra conflict, Adler denied their universality, rightfully observing

that the excessive attachment of children to the opposite parent was usually *not* sexually motivated. He postulated instead that such behavior was part of the child's effort to secure a more favored position for himself in terms of attention and practical advantages. Each child had his own unique goals and style of life, which in treatment it would be the therapist's task to discover.

Adler did not support the idea of the all-pervasiveness of the sex drive. He saw the sex drive as just one of several. He preferred to regard neurosis as not exclusively a manifestation of sexual conflict, but more generally as a style of living in which certain behavior patterns safeguarded the individual from having to face what he feared in life. For Adler, the outside demands and problems of life which were so threatening would be different in the case of each person; for Freud the neurosis was always a protection against instinctual (sexual) demands.

It is hardly necessary to comment that Perlman's grasp of the wholeness of each person in any moment is a restatement of Adler's holistic conception of human behavior: each man's opinion of himself leads him to strive for a particular kind of success and to create a total, self-consistent behavior pattern directed toward that end. We can understand each man if we understand each man's goal, which is the unifying force in his life. On the other hand, Freud's approach was not to synthesize, but to analyze, i.e., break down into parts. He did not see man as a whole. He sectioned the psyche into id, ego and superego, and regarded behavior as a consequence of separate drives or conflicts.

#### INFERENCES AND OBJECTIVE DATA

Social work literature has frequently made the point that techniques of helping people involve both science and art. The case-worker uses objective facts he has learned about the client to form the scientific component of a tentative conclusion about the nature of the presenting problem. In addition, the social work profession has been characterized by a tradition of genuinely reaching out to the troubled person, human being to human being, with the worker using his experience and intuition as the artistic component of his judgment. It would therefore seem logical for this profession to turn to a theory of behavior which would provide a basis for understanding human functioning through both an objective and subjective approach. However, in turning to Freud, social work acquired a theo-

retical framework within which its practitioners have to concentrate mainly on the subjective approach.

The psychoanalytically oriented caseworker functions on the premise that, as Littner believes, "the main feelings that disturb the client are unknown to him because they are unconscious" (3, p. 73). The author of this paper has commented elsewhere that, since the client is believed not to know the main feelings that are disturbing him, and since he is presumed to be controlled by forces of which he is unaware, he cannot tell the worker of their existence. Each [analytically oriented] worker therefore has to infer what they are, and diagnosis becomes a process of subjective guessing about the nature of the problem and its causes (6, p. 22).

Adler also believed in hypothesizing about his patient at the beginning stages of treatment, so as to give a tentative direction to the therapy. However, in his view the patient knew what was disturbing him: some type of failure in social living. Adler would make a guess as to the specific nature of the problem, and then help the patient to piece together his life story and supply sufficient facts to either confirm or repudiate the original estimate. He therefore did not stop at merely fitting his patient into a preconceived blueprint by inference alone. His subjective evaluation did not become final unless it was fully confirmed by objective data, which Freudians would claim were not available in their frame of reference.

#### SOCIAL INTERACTION AND GOALS

Again, Individual Psychology seems much closer in spirit to the basic beliefs of social work than the Freudian outlook. It was an illogical and self-contradictory development for social work, dedicated to the solution of psychosocial problems, to embrace an intrapsychic psychology of man. Individual Psychology could do far more to enrich and expand social work's conception of people as being understandable only in their interaction with society. Adler too saw man as completely "embedded in society" and not capable of being understood except in terms of his relationship to it. Freud, on the other hand, believed the determinants of human behavior were man's biological drives and the ways he coped with them. The characteristics of the particular environment in which each man lived were of no special significance.

Adler opposed a causal interpretation of behavior. He did not believe behavior was the consequence of a specific drive or conflict. Instead, he favored a teleological approach, and held that a person acts in a certain way to advance a particular life plan he has developed

for himself. Drives and instincts can and will be controlled if a person's goal requires it. The psychotherapist's task is not to make the troubled individual aware of his drives, but to help him acquire a goal which is in the orbit of social interest, i.e., on the useful side of life. In this sense, Individual Psychology may be considered to have character development as one of its aims. Here again, Adler's hopes coincided with the long-standing endeavors of American social work to improve the quality of community living. Adler believed that a child should be educated to work for the betterment of his community from his earliest years, rather than aim at the egocentric goal of private pleasure or success. He thought that a child should be developed into a "giver" instead of a "taker."

### CONCLUSION

There is general agreement in American social work on the following principles:

1. Social casework should promote mutual adjustment between individuals and their social environment.
2. Each human being is unique.
3. The difficulties of people who come to social agencies are psychosocial problems.
4. Individuals cannot be understood in isolation, but only in terms of their relationship to society.
5. Techniques of helping people require both art and science.

For an understanding of human behavior, American social work embraced Freudian doctrine as its theoretical framework. This was a self-contradictory development, for the psychoanalytic viewpoint has little in common with the aforementioned principles and does nothing to confirm or enrich them. In fact, the Freudian orientation has tended to weaken some of these convictions and take the "social" out of social work.

The utilization of Adlerian psychology by social workers would provide a theoretical rationale that completely supports the traditions and beliefs of social work. Because Individual Psychology and social work have the same basic approach to people, an association between the two would avoid the philosophical schizophrenia which now exists in some quarters. For example, there are two well-known social casework texts (2, 4), both of which acknowledge their accept-

ance of the Freudian interpretation of behavior. Each then proceeds to elaborate methods of working with clients for which Freudian doctrine appears to have little relevance and which can be understood without a Freudian rationale. In a similar way, many practitioners seem to make a point of declaring their allegiance to Freud, although their daily work reflects little psychoanalytic orientation. Furthermore, when one discusses with colleagues the inadequacies of psychoanalytic thinking for social work practice, a frequent response will be that the colleague does not believe or strictly follow all of Freud's doctrines. It is rather anomalous to espouse a viewpoint which one does not use fully as a guide to practice or about which one has major reservations.

To round out the picture, it should be stated that social workers could have some logical reservations about aspects of Adlerian theory. The writer's own reservations are not major in character, primarily because Adlerians appear to be relatively non-dogmatic and, like Adler himself, willing to modify or expand a prior conception if such alteration will lead to a more accurate understanding of a patient or client.

Outside the scope of this article, but of great interest to the writer, would be a re-evaluation of Adler's premise that all human failures are due to the inability to practice social interest. While this may be true for many or even most cases, the concept should be amplified to allow for other sources of failure as well. The author also wonders about assigning only a single role to neurosis, that of safeguarding the individual from having to face the demands of life. It would seem that in some persons neurosis could serve other purposes. Finally, experience in working with the clients of social agencies suggests that goals of success and style of life can be formed after the age of five, which Adler seemed to think was the very latest time. Perhaps this too merits further discussion.

Just as Alfred Adler took his Individual Psychology into the Vienna public schools, because he believed he could make an important contribution to the education and development of young children, so should modern-day Adlerians act in regard to the graduate education of students entering the mental hygiene field. Since Individual Psychology is so close to the American social work profession in spirit and practice, it should find ways to introduce its theory and treatment technique into one of the new graduate schools of social work that may soon be established.

## REFERENCES

1. ADLER, A. *The Individual Psychology of Alfred Adler*. Edited by H. L. & Rowena R. Ansbacher. New York: Basic Books, 1956.
2. HOLLIS, FLORENCE. *Casework: a psychosocial therapy*. New York: Random House, 1964.
3. LITTMER, N. The impact of the client's unconscious on the caseworker's reactions. In H. J. Parad (Ed.), *Ego psychology and dynamic casework*. New York: Family Serv. Ass. of America, 1958.
4. PERLMAN, HELEN H. *Social casework: a problem-solving process*. Chicago: Univer. Chicago Press, 1957.
5. RICHMOND, MARY E. *What is social case work?* New York: Russell Sage, 1922.
6. WERNER, H. D. *A rational approach to social casework*. New York: Association Press, 1965.

## CONTRIBUTORS TO THIS ISSUE

(continued from page 2)

College, Pa. He has published, and is conducting research, in the temporal aspects of personality, and social behavior of animals and man.

IRA PROGOFF, Ph.D., a New York psychotherapist, is a member of the graduate faculty of Drew University. His first book was the widely used *Jung's Psychology and its Social Meaning*. As a Bollingen fellow, he worked closely with Dr. Jung during 1952-1953 and 1955. Since then he has extended the Jungian perspective in his books *The Death and Rebirth of Psychology*, *Depth Psychology and Modern Man*, and *The Symbolic and the Real*.

DAVID SHIVERICK is a teaching fellow in psychology at the University of Vermont where he received his B.A. in 1963. He is presently engaged in a research project on imprinting.

KATHLEEN SHIVERICK is a medical technologist who took several courses in psychology toward her B.S. at the University of Vermont, earned in 1965.

ROBERT E. TAYLOR, Ph.D., University of Tennessee, is a clinical psychologist in private practice with research interests in perception and personality, dynamic developmental theory, and creativity. He also maintains a part-time affiliation with the University of Georgia as an assistant professor.

BERNARD H. SHULMAN, M.D., is an assistant professor of psychiatry at Northwestern University and is head, section of psychiatry, Saint Joseph Hospital, Chicago. His monograph, *Essays in Schizophrenia*, will be published by Williams & Wilkins, Baltimore, later this year.

HANS W. VON SASSEN, born in 1915 in Munich, came to Holland 12 years later, graduated from technical college, worked in building construction and town planning. Spending part of the war in concentration camps convinced him that knowledge of man was now more urgent than technical knowledge. After coming across Individual Psychology, he took courses with Drs. P. Ronge and A. Müller, and then decided to study psychology at the University of Amsterdam. Since 1954 he has been occupied with courses, research, and consulting in the field of training, group dynamics, management, and organization, at the Netherlands Educational Institute.

HAROLD D. WERNER, M.S.S.W., Columbia University Graduate School of Social Work, 1947, is a member of the Academy of Certified Social Workers. He is chief psychiatric social worker, Morris County (N.J.) Guidance Center, on the executive committee of Psychiatric Outpatient Centers of America, and occasionally teaches at Fairleigh Dickinson University. He is author of *A Rational Approach to Social Casework*, Association Press, 1965, reviewed in this *Journal*, 1966, 22, 248-249.

PHILIP WORCHEL, Ph.D. in psychology, Cornell University, 1947, was assistant professor at Tulane University, 1947-1948. Since 1948 he has been at the University of Texas where he is now professor of psychology and director of the Human Relations Training Laboratory. Currently he is in Saigon, engaged in a socio-psychological study of the Vietnamese peoples.