Rudolf Dreikurs, or “Dr. D” as he was so fondly referred to by many of his students and colleagues, was 71 years of age when I met him. Meeting Dr. D was clearly one of the more important and formative experiences of my life. I often have given thanks that he did not retire from professional work at 65 or 70. Dr. D did some of his most influential work between the years of 70 and his death at age 75, when he might have been living a life of leisure. Students, colleagues, and other professionals were continually touched by his ability to turn theory into practice before our eyes as we watched him help people improve their lives. His enthusiasm for spreading the knowledge and use of Adlerian theory and technique was infectious.

The American Society of Adlerian Psychology (as NASAP was know when Dr. D was alive) enjoyed its greatest growth from about 1967 until a few years after his death in 1972. It was during these last five years of his life, while he was retired from practice, that he was most active as a teacher and consultant across North America and internationally. I recall that for some years after his death many Adlerians had difficulty getting through a presentation or demonstration without mentioning his name several times as in “Dr D used to say,” or, Dreikurs often emphasized. . .” We commonly referred to Dr. Dreikurs more often that we referred to Adler, although his students and colleagues clearly recognized we were indebted to both these geniuses.

It was when our esteemed colleague, the clarifier and purifier of Adlerian theory, Heinz Ansbacher, finally watched Dreikurs provide a family counseling demonstration, that Ansbacher wrote to Dreikurs
how much he enjoyed the experience and how it allowed him “to learn what cannot be learned otherwise.” (Terner and Pew, 1978) In 1975 Kurt Adler acknowledged, “The main trend today seems to be toward prevention. Adlerian psychology . . . has always been in the forefront in this area. Many years ago in Vienna, Adler adopted the motto “teach the teachers’” . . . In this country, however, Dreikurs demonstrated that the parents themselves could be trained, and the tremendous impetus he gave . . . has already made an enormous impact, occupying the major efforts of many Adlerian groups and Societies.” (Terner and Pew, 1978)

A point that I wish to emphasize by sharing these thoughts and memories with you is that the very Adlerian theoretical constructs that so many watched Dr. D use to help change people’s lives, continue to provide the foundation mental health workers need to use more broadly today. Occasionally one of us adds an innovative technique, but the theory is as alive and well in 2009 as it was in 1967. One of the keys to the continued spread of the knowledge and use of Individual Psychology is to keep “Dr. D’s” work alive in our minds, to refer to his books, articles, and videotapes, and finally, but very importantly, help mental health workers, parents and teachers learn how to apply our theory and techniques to the emerging problems of our times. No school of psychological thought is better prepared to understand and treat the majority of children who have been diagnosed as having the attention deficit hyperactivity disorder and no school of psychological thought is better prepared to understand and treat the burgeoning number of children caught up in the pseudo-epidemic of autism. No school of psychological thought is better prepared to provide a frame of reference to help prison inmates make life enhancing changes while learning the life skills necessary to function outside of correctional institutions. No school of psychological thought is better prepared to provide families with the insight and techniques to raise responsible and cooperative children, and none is better prepared to provide the framework that will enable children in our schools to become more responsible citizens who have truly learned to care about fellow human beings.
I do not want to under emphasize the opportunity available to introduce Adlerain/Dreikursian principles and techniques in pre-school education. It is always worth repeating how Adler reminded us the most important role of a mother is to spread the interest of a child from the child, to the mother, to father, to other members of the family, and then out to other members of society. (Ansbacher and Ansbacher, 1956) It is critical to the welfare of young people that child care administrators and teachers accept the importance of their role in helping to increase the level of social interest in pre-school children during this time in history when a very significant portion of the role of “mothering’ has become the responsibility of the child care provider.

There is no shortage of challenging social and psychological problems where we can continue to apply, or strengthen our applications, or create applications of Adlerian theory. Earlier I mentioned autism, a mental health condition for which the diagnostic manual criteria has been broadened so in the last half dozen years that most children we see today carrying the diagnosis bear little resemblance to such children we might treat in previous years. Over twenty years ago when the diagnosis was much more narrowly defined, an administrator for the state psychiatric institute in Columbia called our Adlerian Child Care Centers office to explain that the institute’s outpatient program would be closed for six weeks around Christmas and he needed to place an autistic child in care for the period. Our center had been recommended and he wished to know if we would take the child. We did. The Adlerian Child Care Center director asked the teacher and children to treat the child as any other in our center, inviting him into the full range of activities, applying the same techniques we would with others, and in addition, to pay no attention to his frequently unusual and occasionally bizarre behavior. When the boy returned to the psychiatric institute, the director of the child care center received a phone call from the administrator wanting to know what we had done that had brought about such changes that the boy no longer met the criteria for the diagnosis of autism. Additionally he requested that his staff members be
permitted to come to observe the practices in our center.

Much more recently, after attending a conference on autism, I happened to leave a book on parenting of autistic children on a restaurant table. Our waitress came hurrying to return it to me. She wanted to tell me she had a grandson with autism. She told how difficult he was to handle, and that the family could not even erect a Christmas tree prior to Christmas day, because the child would have a terrible temper tantrum if a tree was erected and there were no gifts for him. Well friends, I think most of you could handle that one. I want you to know the book on parenting of autistic children that she returned to me was archaic by Adlerian standards in so far as the techniques that were recommended. It was supposed to be state of the art, and yet reflected no thorough understanding of the purposive nature of behavior, the detrimental influences of reward and punishment, or the powerful influence of underdeveloped social interest in such children. Friends, you and I can help in this area. If we are willing to broadly apply the powerful guiding principles and creative techniques available to us, collectively we, along with those with whom we share this knowledge, can help provide solutions to social problems many have thought unsolvable. As Dr D used to say “Adlerian psychology is fifty years ahead of its time.” Well, if that was true fifty years ago, undoubtedly, this is its time.

References
