CHAPTER 3

Adler: Individual Psychology

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In 1937, a young Abraham Maslow was having dinner in a New York restaurant with a somewhat older colleague. The older man was widely known for his earlier association with Sigmund Freud, and many people, including Maslow, regarded him as a disciple of Freud. When Maslow casually asked the older man about being Freud's follower, the older man became quite angry, and according to Maslow, he nearly shouted that

this was a lie and a swindle for which he blamed Freud entirely, whom he then called names like swindler, sly, schemer... He said that he had never been a student of Freud or a disciple or a follower. He made it clear from the beginning that he didn't agree with Freud and that he had his own opinions. (Maslow, 1962, p. 125)

Maslow, who had known the older man as an even-tempered, congenial person, was stunned by his outburst.

The older man, of course, was Alfred Adler, who battled throughout his professional life to dispel the notion that he had ever been a follower of Freud. Whenever reporters and other people would inquire about his early relationship with Freud, Adler would produce the old faded postcard with Freud’s invitation to Adler to join Freud and three other physicians to meet at Freud’s home the following Thursday evening. Freud closed the invitation saying, “With hearty greetings as your colleague” (quoted in Hoffman, 1994, p. 42). This friendly remark gave Adler some tangible evidence that Freud considered him to be his equal.

However, the warm association between Adler and Freud came to a bitter end, with both men hurling caustic remarks toward the other. For example, after World War I, when Freud elevated aggression to a basic human drive, Adler, who had long since abandoned the concept, commented sarcastically: “I enriched psychoanalysis by the aggressive drive. I gladly make them a present of it” (quoted in Bottome, 1939, p. 64).

During the acrimonious breakup between the two men, Freud accused Adler of having paranoid delusions and of using terrorist tactics. He told one of his friends that the revolt by Adler was that of “an abnormal individual driven mad by ambition” (quoted in Gay, 1988, p. 223).

**Overview of Individual Psychology**

Alfred Adler was neither a terrorist nor a person driven mad by ambition. Indeed, his individual psychology presents an optimistic view of people while resting heavily on the notion of social interest, that is, a feeling of oneness with all humankind. In addition to Adler’s more optimistic look at people, several other differences made the relationship between Freud and Adler quite tenuous.

First, Freud reduced all motivation to sex and aggression, whereas Adler saw people as being motivated mostly by social influences and by their striving for superiority or success; second, Freud assumed that people have little or no choice in shaping their personality, whereas Adler believed that people are largely responsible for who they are; third, Freud’s assumption that present behavior is caused by past experiences was directly opposed to Adler’s notion that present behavior is shaped by people’s view of the future; and fourth, in contrast to Freud, who placed very heavy
emphasis on unconscious components of behavior, Adler believed that psychologically healthy people are usually aware of what they are doing and why they are doing it.

As we have seen, Adler was an original member of the small clique of physicians who met in Freud’s home on Wednesday evenings to discuss psychological topics. However, when theoretical and personal differences between Adler and Freud emerged, Adler left the Freud circle and established an opposing theory, which became known as individual psychology.

**Biography of Alfred Adler**

Alfred Adler was born on February 7, 1870, in Rudolfsheim, a village near Vienna. His mother, Pauline, was a hard-working homemaker who kept busy with her seven children. His father, Leopold, was a middle-class Jewish grain merchant from Hungary. As a young boy, Adler was weak and sickly and at age 5, he nearly died of pneumonia. He had gone ice-skating with an older boy who abandoned young Alfred. Cold and shivering, Adler managed to find his way home where he immediately fell asleep on the living room couch. As Adler gradually gained consciousness, he heard a doctor say to his parents, “Give yourself no more trouble. The boy is lost” (Hoffman, 1994, p. 8). This experience, along with the death of a younger brother, motivated Adler to become a physician.

Adler’s poor health was in sharp contrast to the health of his older brother Sigmund. Several of Adler’s earliest memories were concerned with the unhappy competition between his brother’s good health and his own illness. Sigmund Adler, the childhood rival whom Adler attempted to surpass, remained a worthy opponent, and in later years he became very successful in business and even helped Alfred financially. By almost any standard, however, Alfred Adler was much more famous than Sigmund Adler. Like many secondborn children, however, Alfred continued the rivalry with his older brother into middle age. He once told one of his biographers, Phyllis Bottome (1939, p. 18), “My eldest brother is a good industrious fellow—he was always ahead of me . . . and he is still ahead of me!”

The lives of Freud and Adler have several interesting parallels. Although both men came from middle- or lower-middle-class Viennese Jewish parents, neither was devoutly religious. However, Freud was much more conscious of his Jewishness than was Adler and often believed himself to be persecuted because of his Jewish background. On the other hand, Adler never claimed to have been mistreated, and in 1904, while still a member of Freud’s inner circle, he converted to Protestantism. Despite this conversion, he held no deep religious convictions, and in fact, one of his biographers (Rattner, 1983) regarded him as an agnostic.

Like Freud, Adler had a younger brother who died in infancy. This early experience profoundly affected both men but in vastly different ways. Freud, by his own account, had wished unconsciously for the death of his rival and when the infant Julius did in fact die, Freud was filled with guilt and self-reproach, conditions that continued into his adulthood.

In contrast, Adler would seem to have had a more powerful reason to be traumatized by the death of his younger brother Rudolf. At age 4, Adler awoke one
morning to find Rudolf dead in the bed next to his. Rather than being terrified or feeling guilty, Adler saw this experience, along with his own near death from pneumonia, as a challenge to overcome death. Thus, at age 5, he decided that his goal in life would be to conquer death. Because medicine offered some chance to forestall death, Adler decided at that early age to become a physician (Hoffman, 1994).

Although Freud was surrounded by a large family, including seven younger brothers and sisters, two grown half-brothers, and a nephew and niece about his age, he felt more emotionally attached to his parents, especially his mother, than to these other family members. In contrast, Adler was more interested in social relationships, and his siblings and peers played a pivotal role in his childhood development. Personality differences between Freud and Adler continued throughout adulthood, with Freud preferring intense one-to-one relationships and Adler feeling more comfortable in group situations. These personality differences were also reflected in their professional organizations. Freud’s Vienna Psychoanalytic Society and International Psychoanalytic Association were highly structured in pyramid fashion, with an inner circle of six of Freud’s trusted friends forming a kind of oligarchy at the top. Adler, by comparison, was more democratic, often meeting with colleagues and friends in Vienna coffeehouses where they played a piano and sang songs. Adler’s Society for Individual Psychology, in fact, suffered from a loose organization, and Adler had a relaxed attitude toward business details that did not enhance his movement (Ellenberger, 1970).

Adler attended elementary school with neither difficulty nor distinction. However, when he entered the Gymnasium in preparation for medical school, he did so poorly that his father threatened to remove him from school and apprentice him to a shoemaker (Grey, 1998). As a medical student he once again completed work with no special honors, probably because his interest in patient care conflicted with his professors’ interest in precise diagnoses (Hoffman, 1994). When he received his medical degree near the end of 1895, he had realized his childhood goal of becoming a physician.

Because his father had been born in Hungary, Adler was a Hungarian citizen and was thus obliged to serve a tour of military duty in the Hungarian army. He fulfilled that obligation immediately after receiving his medical degree and then returned to Vienna for postgraduate study. Adler became an Austrian citizen in 1911. He began private practice as an eye specialist, but gave up that specialization and turned to psychiatry and general medicine.

Scholars disagree on the first meeting of Adler and Freud (Bottome, 1939; Ellenberger, 1970; Fiebert, 1997; Handlbauer, 1998), but all agree that in the late fall of 1902, Freud invited Adler and three other Viennese physicians to attend a meeting in Freud’s home to discuss psychology and neuropathology. This group was known as the Wednesday Psychological Society until 1908, when it became the Vienna Psychoanalytic Society. Although Freud led these discussion groups, Adler never considered Freud to be his mentor and believed somewhat naively that he and others could make contributions to psychoanalysis—contributions that would be acceptable to Freud. Although Adler was one of the original members of Freud’s inner circle, the two men never shared a warm personal relationship. Neither man was quick to recognize theoretical differences even after Adler’s 1907 publication of Study of Organ Inferiority and Its Psychical Compensation (1907/1917), which
assumed that physical deficiencies—not sex—formed the foundation for human motivation.

During the next few years, Adler became even more convinced that psychoanalysis should be much broader than Freud’s view of infantile sexuality. In 1911, Adler, who was then president of the Vienna Psychoanalytic Society, presented his views before the group, expressing opposition to the strong sexual proclivities of psychoanalysis and insisting that the drive for superiority was a more basic motive than sexuality. Both he and Freud finally recognized that their differences were irreconcilable, and in October of 1911 Adler resigned his presidency and membership in the Psychoanalytic Society. Along with nine other former members of the Freudian circle, he formed the Society for Free Psychoanalytic Study, a name that irritated Freud with its implication that Freudian psychoanalysis was opposed to a free expression of ideas. Adler, however, soon changed the name of his organization to the Society for Individual Psychology—a name that clearly indicated he had abandoned psychoanalysis.

Like Freud, Adler was affected by events surrounding World War I. Both men had financial difficulties, and both reluctantly borrowed money from relatives—Freud from his brother-in-law Edward Bernays and Adler from his brother Sigmund. Each man also made important changes in his theory. Freud elevated aggression to the level of sex after viewing the horrors of war, and Adler suggested that social interest and compassion could be the cornerstones of human motivation. The war years also brought a major disappointment to Adler when his application for an unpaid lecture position at the University of Vienna was turned down. Adler wanted this position to gain another forum for spreading his views, but he also desperately desired to attain the same prestigious position that Freud had held for more than a dozen years. Adler never attained this position, but after the war he was able to advance his theories through lecturing, establishing child guidance clinics, and training teachers.

During the last several years of his life, Adler frequently visited the United States, where he taught individual psychology at Columbia University and the New School for Social Research. By 1932, he was a permanent resident of the United States and held the position of Visiting Professor for Medical Psychology at Long Island College of Medicine, now Downstate Medical School, State University of New York. Unlike Freud, who disliked Americans and their superficial understanding of psychoanalysis, Adler was impressed by Americans and admired their optimism and open-mindedness. His popularity as a speaker in the United States during the mid-1930s had few rivals, and he aimed his last several books toward a receptive American market (Hoffman, 1994).

Adler married a fiercely independent Russian woman, Raissa Epstein, in December of 1897. Raissa was an early feminist and much more political than her husband. In later years, while Adler lived in New York, she remained mostly in Vienna and worked to promote Marxist-Leninist views that were quite different from Adler’s notion of individual freedom and responsibility. After several years of requests by her husband to move to New York, Raissa finally came to stay in New York only a few months before Adler’s death. Ironically, Raissa, who did not share her husband’s love for America, continued to live in New York until her own death, nearly a quarter of a century after Adler had died (Hoffman, 1994).
Raissa and Alfred had four children: Alexandra and Kurt, who became psychiatrists and continued their father’s work; Valentine (Vali), who died as a political prisoner of the Soviet Union in about 1942; and Cornelia (Nelly), who aspired to be an actress.

Adler’s favorite relaxation was music, but he also maintained an active interest in art and literature. In his work he often borrowed examples from fairy tales, the Bible, Shakespeare, Goethe, and numerous other literary works. He identified himself closely with the common person, and his manner and appearance were consistent with that identification. His patients included a high percentage of people from the lower and middle classes, a rarity among psychiatrists of his time. His personal qualities included an optimistic attitude toward the human condition, an intense competitiveness coupled with friendly congeniality, and a strong belief in the basic gender equality, which combined with a willingness to forcefully advocate women’s rights.

From middle childhood until after his 67th birthday, Adler enjoyed robust health. Then, in the early months of 1937, while concerned with the fate of his daughter Vali who had disappeared somewhere in Moscow, Adler felt chest pains while on a speaking tour in the Netherlands. Ignoring the doctor’s advice to rest, he continued on to Aberdeen, Scotland, where on May 28, 1937, he died of a heart attack. Freud, who was 14 years older than Adler, had outlived his longtime adversary. On hearing of Adler’s death, Freud (as quoted in E. Jones, 1957) sarcastically remarked, “For a Jew boy out of a Viennese suburb a death in Aberdeen is an unheard-of career in itself and a proof of how far he had got on. The world really rewarded him richly for his service in having contradicted psychoanalysis” (p. 208).

Introduction to Adlerian Theory

Although Alfred Adler has had a profound effect on such later theorists as Harry Stack Sullivan, Karen Horney, Julian Rotter, Abraham H. Maslow, Carl Rogers, Albert Ellis, Rollo May, and others (Mosak & Maniaci, 1999), his name is less well known than that of either Freud or Carl Jung. At least three reasons account for this. First, Adler did not establish a tightly run organization to perpetuate his theories. Second, he was not a particularly gifted writer, and most of his books were compiled by a series of editors using Adler’s scattered lectures. Third, many of his views were incorporated into the works of such later theorists as Maslow, Rogers, and Ellis and thus are no longer associated with Adler’s name.

Although his writings revealed great insight into the depth and complexities of human personality, Adler evolved a basically simple and parsimonious theory. To Adler, people are born with weak, inferior bodies—a condition that leads to feelings of inferiority and a consequent dependence on other people. Therefore, a feeling of unity with others (social interest) is inherent in people and the ultimate standard for psychological health. More specifically, the main tenets of Adlerian theory can be stated in outline form. The following is adapted from a list that represents the final statement of individual psychology (Adler, 1964).

1. The one dynamic force behind people’s behavior is the striving for success or superiority.
2. People’s subjective perceptions shape their behavior and personality.
3. Personality is unified and self-consistent.
4. The value of all human activity must be seen from the viewpoint of social interest.
5. The self-consistent personality structure develops into a person’s style of life.
6. Style of life is molded by people’s creative power.

Striving for Success or Superiority

The first tenet of Adlerian theory is: The one dynamic force behind people’s behavior is the striving for success or superiority.

Adler reduced all motivation to a single drive—the striving for success or superiority. Adler’s own childhood was marked by physical deficiencies and strong feelings of competitiveness with his older brother. Individual psychology holds that everyone begins life with physical deficiencies that activate feelings of inferiority—feelings that motivate a person to strive for either superiority or success. Psychologically unhealthy individuals strive for personal superiority, whereas psychologically healthy people seek success for all humanity.

Early in his career, Adler believed that aggression was the dynamic power behind all motivation, but he soon became dissatisfied with this term. After rejecting aggression as a single motivational force, Adler used the term masculine protest, which implied will to power or a domination of others. However, he soon abandoned masculine protest as a universal drive while continuing to give it a limited role in his theory of abnormal development.

Next, Adler called the single dynamic force striving for superiority. In his final theory, however, he limited striving for superiority to those people who strive for personal superiority over others and introduced the term striving for success to describe actions of people who are motivated by highly developed social interest (Adler, 1956). Regardless of the motivation for striving, each individual is guided by a final goal.

The Final Goal

According to Adler (1956), people strive toward a final goal of either personal superiority or the goal of success for all humankind. In either case, the final goal is fictional and has no objective existence. Nevertheless, the final goal has great significance because it unifies personality and renders all behavior comprehensible.

Each person has the power to create a personalized fictional goal, one constructed out of the raw materials provided by heredity and environment. However, the goal is neither genetically nor environmentally determined. Rather, it is the product of the creative power, that is, people’s ability to freely shape their behavior and create their own personality. By the time children reach 4 or 5 years of age, their creative power has developed to the point that they can set their final goal. Even infants have an innate drive toward growth, completion, or success. Because infants are small, incomplete, and weak, they feel inferior and powerless. To compensate for this deficiency, they set a fictional goal to be big, complete, and strong. Thus, a person’s
final goal reduces the pain of inferiority feelings and points that person in the direction of either superiority or success.

If children feel neglected or pampered, their goal remains largely unconscious. Adler (1964) hypothesized that children will compensate for feelings of inferiority in devious ways that have no apparent relationship to their fictional goal. The goal of superiority for a pampered girl, for example, may be to make permanent her parasitic relationship with her mother. As an adult, she may appear dependent and self-deprecating, and such behavior may seem inconsistent with a goal of superiority. However, it is quite consistent with her unconscious and misunderstood goal of being a parasite that she set at age 4 or 5, a time when her mother appeared large and powerful, and attachment to her became a natural means of attaining superiority.

Conversely, if children experience love and security, they set a goal that is largely conscious and clearly understood. Psychologically secure children strive toward superiority defined in terms of success and social interest. Although their goal never becomes completely conscious, these healthy individuals understand and pursue it with a high level of awareness.

In striving for their final goal, people create and pursue many preliminary goals. These subgoals are often conscious, but the connection between them and the final goal usually remains unknown. Furthermore, the relationship among preliminary goals is seldom realized. From the point of view of the final goal, however, they fit together in a self-consistent pattern. Adler (1956) used the analogy of the playwright who builds the characteristics and the subplots of the play according to the final goal of the drama. When the final scene is known, all dialogue and every subplot acquire new meaning. When an individual’s final goal is known, all actions make sense and each subgoal takes on new significance.

The Striving Force as Compensation

People strive for superiority or success as a means of compensation for feelings of inferiority or weakness. Adler (1930) believed that all humans are “blessed” at birth with small, weak, and inferior bodies. These physical deficiencies ignite feelings of inferiority only because people, by their nature, possess an innate tendency toward completion or wholeness. People are continually pushed by the need to overcome inferiority feelings and pulled by the desire for completion. The minus and plus situations exist simultaneously and cannot be separated because they are two dimensions of a single force.

The striving force itself is innate, but its nature and direction are due both to feelings of inferiority and to the goal of superiority. Without the innate movement toward perfection, children would never feel inferior; but without feelings of inferiority, they would never set a goal of superiority or success. The goal, then, is set as compensation for the deficit feeling, but the deficit feeling would not exist unless a child first possessed a basic tendency toward completion (Adler, 1956).

Although the striving for success is innate, it must be developed. At birth it exists as potentiality, not actuality; each person must actualize this potential in his or her own manner. At about age 4 or 5, children begin this process by setting a direction to the striving force and by establishing a goal either of personal superiority or
of social success. The goal provides guidelines for motivation, shaping psychological development and giving it an aim.

As a creation of the individual, the goal may take any form. It is not necessarily a mirror image of the deficiency, even though it is a compensation for it. For example, a person with a weak body will not necessarily become a robust athlete but instead may become an artist, an actor, or a writer. Success is an individualized concept and all people formulate their own definition of it. Although creative power is swayed by the forces of heredity and environment, it is ultimately responsible for people’s personality. Heredity establishes the potentiality, whereas environment contributes to the development of social interest and courage. The forces of nature and nurture can never deprive a person of the power to set a unique goal or to choose a unique style of reaching for the goal (Adler, 1956).

In his final theory, Adler identified two general avenues of striving. The first is the socially nonproductive attempt to gain personal superiority; the second involves social interest and is aimed at success or perfection for everyone.

**Striving for Personal Superiority**

Some people strive for superiority with little or no concern for others. Their goals are personal ones, and their strivings are motivated largely by exaggerated feelings of personal inferiority, or the presence of an *inferiority complex*. Murderers, thieves, and con artists are obvious examples of people who strive for personal gain. Some people create clever disguises for their personal strivings and may consciously or unconsciously hide their self-centeredness behind the cloak of social concern. A college teacher, for example, may appear to have a great interest in his students because he establishes a personal relationship with many of them. By conspicuously displaying much sympathy and concern, he encourages vulnerable students to talk to him about their personal problems. This teacher possesses a private intelligence that allows him to believe that he is the most accessible and dedicated teacher in his college. To a casual observer, he may appear to be motivated by social interest, but his actions are largely self-serving and motivated by overcompensation for his exaggerated feelings of personal superiority.

**Striving for Success**

In contrast to people who strive for personal gain are those psychologically healthy people who are motivated by social interest and the success of all humankind. These healthy individuals are concerned with goals beyond themselves, are capable of helping others without demanding or expecting a personal payoff, and are able to see others not as opponents but as people with whom they can cooperate for social benefit. Their own success is not gained at the expense of others but is a natural tendency to move toward completion or perfection.

People who strive for success rather than personal superiority maintain a sense of self, of course, but they see daily problems from the view of society’s development rather than from a strictly personal vantage point. Their sense of personal worth is tied closely to their contributions to human society. Social progress is more important to them than personal credit (Adler, 1956).
Subjective Perceptions

Adler’s second tenet is: *People’s subjective perceptions shape their behavior and personality.*

People strive for superiority or success to compensate for feelings of inferiority, but the manner in which they strive is not shaped by reality but by their subjective perceptions of reality, that is, by their fictions, or expectations of the future.

Fictionalism

Our most important fiction is the goal of superiority or success, a goal we created early in life and may not clearly understand. This subjective, fictional final goal guides our style of life, gives unity to our personality. Adler’s ideas on fictionalism originated with Hans Vaihinger’s book *The Philosophy of “As If”* (1911/1925). Vaihinger believed that fictions are ideas that have no real existence, yet they influence people as if they really existed. One example of a fiction might be: “Men are superior to women.” Although this notion is a fiction, many people, both men and women, act as if it were a reality. A second example might be: “Humans have a free will that enables them to make choices.” Again, many people act as if they and others have a free will and are thus responsible for their choices. No one can prove that free will exists, yet this fiction guides the lives of most of us. People are motivated not by what is true but by their subjective perceptions of what is true. A third example of a fiction might be a belief in an omnipotent God who rewards good and punishes evil. Such a belief guides the daily lives of millions of people and helps shape many of their actions. Whether true or false, fictions have a powerful influence on people’s lives.

Adler’s emphasis on fictions is consistent with his strongly held teleological view of motivation. *Teleology* is an explanation of behavior in terms of its final purpose or aim. It is opposed to *causality*, which considers behavior as springing from a specific cause. Teleology is usually concerned with future goals or ends, whereas causality ordinarily deals with past experiences that produce some present effect. Freud’s view of motivation was basically causal; he believed that people are driven by past events that activate present behavior. In contrast, Adler adopted a teleological view, one in which people are motivated by present perceptions of the future. As fictions, these perceptions need not be conscious or understood. Nevertheless, they bestow a purpose on all of people’s actions and are responsible for a consistent pattern that runs throughout their life.

*Beyond Biography*  Why did Adler really break with Freud?

For motivations behind the Adler-Freud breakup, see our website at [www.mhhe.com/feist7](http://www.mhhe.com/feist7)

Physical Inferiorities

Because people begin life small, weak, and inferior, they develop a fiction or belief system about how to overcome these physical deficiencies and become big, strong, and superior. But even after they attain size, strength, and superiority, they may act as if they are still small, weak, and inferior.
Adler (1929/1969) insisted that the whole human race is “blessed” with organ inferiorities. These physical handicaps have little or no importance by themselves but become meaningful when they stimulate subjective feelings of inferiority, which serve as an impetus toward perfection or completion. Some people compensate for these feelings of inferiority by moving toward psychological health and a useful style of life, whereas others overcompensate and are motivated to subdue or retreat from other people.

History provides many examples of people like Demosthenes or Beethoven overcoming a handicap and making significant contributions to society. Adler himself was weak and sickly as a child, and his illness moved him to overcome death by becoming a physician and by competing with his older brother and with Sigmund Freud.

Adler (1929/1969) emphasized that physical deficiencies alone do not cause a particular style of life; they simply provide present motivation for reaching future goals. Such motivation, like all aspects of personality, is unified and self-consistent.

**Unity and Self-Consistency of Personality**

The third tenet of Adlerian theory is: **Personality is unified and self-consistent.**

In choosing the term *individual psychology*, Adler wished to stress his belief that each person is unique and indivisible. Thus, individual psychology insists on the fundamental unity of personality and the notion that inconsistent behavior does not exist. Thoughts, feelings, and actions are all directed toward a single goal and serve a single purpose. When people behave erratically or unpredictably, their behavior forces other people to be on the defensive, to be watchful so as not to be confused by capricious actions. Although behaviors may appear inconsistent, when they are viewed from the perspective of a final goal, they appear as clever but probably unconscious attempts to confuse and subordinate other people. This confusing and seemingly inconsistent behavior gives the erratic person the upper hand in an interpersonal relationship. Although erratic people are often successful in their attempt to gain superiority over others, they usually remain unaware of their underlying motive and may stubbornly reject any suggestion that they desire superiority over other people.

Adler (1956) recognized several ways in which the entire person operates with unity and self-consistency. The first of these he called organ jargon, or organ dialect.

**Organ Dialect**

According to Adler (1956), the whole person strives in a self-consistent fashion toward a single goal, and all separate actions and functions can be understood only as parts of this goal. The disturbance of one part of the body cannot be viewed in isolation; it affects the entire person. In fact, the deficient organ expresses the direction of the individual’s goal, a condition known as organ dialect. Through organ dialect, the body’s organs “speak a language which is usually more expressive and discloses the individual’s opinion more clearly than words are able to do” (Adler, 1956, p. 223).
One example of organ dialect might be a man suffering from rheumatoid arthritis in his hands. His stiff and deformed joints voice his whole style of life. It is as if they cry out, “See my deformity. See my handicap. You can’t expect me to do manual work.” Without an audible sound, his hands speak of his desire for sympathy from others.

Adler (1956) presented another example of organ dialect—the case of a very obedient boy who wet the bed at night to send a message that he does not wish to obey parental wishes. His behavior is “really a creative expression, for the child is speaking with his bladder instead of his mouth” (p. 223).

Conscious and Unconscious

A second example of a unified personality is the harmony between conscious and unconscious actions. Adler (1956) defined the unconscious as that part of the goal that is neither clearly formulated nor completely understood by the individual. With this definition, Adler avoided a dichotomy between the unconscious and the conscious, which he saw as two cooperating parts of the same unified system. Conscious thoughts are those that are understood and regarded by the individual as helpful in striving for success, whereas unconscious thoughts are those that are not helpful.

We cannot oppose “consciousness” to “unconsciousness” as if they were antagonistic halves of an individual’s existence. The conscious life becomes unconscious as soon as we fail to understand it—and as soon as we understand an unconscious tendency it has already become conscious. (Adler, 1929/1964, p. 163)

Whether people’s behaviors lead to a healthy or an unhealthy style of life depends on the degree of social interest that they developed during their childhood years.

Social Interest

The fourth of Adler’s tenets is: The value of all human activity must be seen from the viewpoint of social interest.

Social interest is Adler’s somewhat misleading translation of his original German term, Gemeinschaftsgefühl. A better translation might be “social feeling” or “community feeling,” but Gemeinschaftsgefühl actually has a meaning that is not fully expressed by any English word or phrase. Roughly, it means a feeling of oneness with all humanity; it implies membership in the social community of all people. A person with well-developed Gemeinschaftsgefühl strives not for personal superiority but for perfection for all people in an ideal community. Social interest can be defined as an attitude of relatedness with humanity in general as well as an empathy for each member of the human community. It manifests itself as cooperation with others for social advancement rather than for personal gain (Adler, 1964).

Social interest is the natural condition of the human species and the adhesive that binds society together (Adler, 1927). The natural inferiority of individuals necessitates their joining together to form a society. Without protection and nourishment from a father or mother, a baby would perish. Without protection from the family or clan, our ancestors would have been destroyed by animals that were stronger,
more ferocious, or endowed with keener senses. Social interest, therefore, is a necessity for perpetuating the human species.

Origins of Social Interest

Social interest is rooted as potentiality in everyone, but it must be developed before it can contribute to a useful style of life. It originates from the mother-child relationship during the early months of infancy. Every person who has survived infancy was kept alive by a mothering person who possessed some amount of social interest. Thus, every person has had the seeds of social interest sown during those early months.

Adler believed that marriage and parenthood is a task for two. However, the two parents may influence a child’s social interest in somewhat different ways. The mother’s job is to develop a bond that encourages the child’s mature social interest and fosters a sense of cooperation. Ideally, she should have a genuine and deep-rooted love for her child—a love that is centered on the child’s well-being, not on her own needs or wants. This healthy love relationship develops from a true caring for her child, her husband, and other people. If the mother has learned to give and receive love from others, she will have little difficulty broadening her child’s social interest. But if she favors the child over the father, her child may become pampered and spoiled. Conversely, if she favors her husband or society, the child will feel neglected and unloved.

The father is a second important person in a child’s social environment. He must demonstrate a caring attitude toward his wife as well as to other people. The ideal father cooperates on an equal footing with the child’s mother in caring for the child and treating the child as a human being. According to Adler’s (1956) standards, a successful father avoids the dual errors of emotional detachment and paternal
authoritarianism. These errors may represent two attitudes, but they are often found in the same father. Both prevent the growth and spread of social interest in a child. A father’s emotional detachment may influence the child to develop a warped sense of social interest, a feeling of neglect, and possibly a parasitic attachment to the mother. A child who experiences paternal detachment creates a goal of personal superiority rather than one based on social interest. The second error—paternal authoritarianism—may also lead to an unhealthy style of life. A child who sees the father as a tyrant learns to strive for power and personal superiority.

Adler (1956) believed that the effects of the early social environment are extremely important. The relationship a child has with the mother and father is so powerful that it smothers the effects of heredity. Adler believed that after age 5, the effects of heredity become blurred by the powerful influence of the child’s social environment. By that time, environmental forces have modified or shaped nearly every aspect of a child’s personality.

### Importance of Social Interest

Social interest was Adler’s yardstick for measuring psychological health and is thus “the sole criterion of human values” (Adler, 1927, p. 167). To Adler, social interest is the only gauge to be used in judging the worth of a person. As the barometer of normality, it is the standard to be used in determining the usefulness of a life. To the degree that people possess social interest, they are psychologically mature. Immature people lack Gemeinschaftsgefühl, are self-centered, and strive for personal power and superiority over others. Healthy individuals are genuinely concerned about people and have a goal of success that encompasses the well-being of all people.

Social interest is not synonymous with charity and unselfishness. Acts of philanthropy and kindness may or may not be motivated by Gemeinschaftsgefühl. A wealthy woman may regularly give large sums of money to the poor and needy, not because she feels a oneness with them, but, quite to the contrary, because she wishes to maintain a separateness from them. The gift implies, “You are inferior, I am superior, and this charity is proof of my superiority.” Adler believed that the worth of all such acts can only be judged against the criterion of social interest.

In summary, people begin life with a basic striving force that is activated by ever-present physical deficiencies. These organic weaknesses lead inevitably to feelings of inferiority. Thus, all people possess feelings of inferiority, and all set a final goal at around age 4 or 5. However, psychologically unhealthy individuals develop exaggerated feelings of inferiority and attempt to compensate by setting a goal of personal superiority. They are motivated by personal gain rather than by social interest, whereas healthy people are motivated by normal feelings of incompleteness and high levels of social interest. They strive toward the goal of success, defined in terms of perfection and completion for everyone. Figure 3.1 illustrates how the innate striving force combines with inevitable physical deficiencies to produce universal feelings of inferiority, which can be either exaggerated or normal. Exaggerated feelings of inferiority lead to a neurotic style of life, whereas normal feelings of incompleteness result in a healthy style of life. Whether a person forms a useless style of life or a socially useful one depends on how that person views these inevitable feelings of inferiority.
**Style of Life**

Adler’s fifth tenet is: *The self-consistent personality structure develops into a person’s style of life.*

**Style of life** is the term Adler used to refer to the flavor of a person’s life. It includes a person’s goal, self-concept, feelings for others, and attitude toward the world. It is the product of the interaction of heredity, environment, and a person’s creative power. Adler (1956) used a musical analogy to elucidate style of life. The separate notes of a composition are meaningless without the entire melody, but the melody takes on added significance when we recognize the composer’s style or unique manner of expression.

A person’s style of life is fairly well established by age 4 or 5. After that time, all our actions revolve around our unified style of life. Although the final goal is singular, style of life need not be narrow or rigid. Psychologically unhealthy individuals often lead rather inflexible lives that are marked by an inability to choose new ways of reacting to their environment. In contrast, psychologically healthy people behave in diverse and flexible ways with styles of life that are complex, enriched, and changing. Healthy people see many ways of striving for success and continually seek to create new options for themselves. Even though their final goal remains constant, the way in which they perceive it continually changes. Thus, they can choose new options at any point in life.

People with a healthy, socially useful style of life express their social interest through **action**. They actively struggle to solve what Adler regarded as the three major problems of life—neighborly love, sexual love, and occupation—and they do so through cooperation, personal courage, and a willingness to make a contribution to the welfare of another. Adler (1956) believed that people with a socially useful style of life represent the highest form of humanity in the evolutionary process and are likely to populate the world of the future.

**FIGURE 3.1 Two Basic Methods of Striving toward the Final Goal.**
Creative Power

The final tenet of Adlerian theory is: Style of life is molded by people's creative power.

Each person, Adler believed, is empowered with the freedom to create her or his own style of life. Ultimately, all people are responsible for who they are and how they behave. Their creative power places them in control of their own lives, is responsible for their final goal, determines their method of striving for that goal, and contributes to the development of social interest. In short, creative power makes each person a free individual. Creative power is a dynamic concept implying movement, and this movement is the most salient characteristic of life. All psychic life involves movement toward a goal, movement with a direction (Adler, 1964).

Adler (1956) acknowledged the importance of heredity and environment in forming personality. Except for identical twins, every child is born with a unique genetic makeup and soon comes to have social experiences different from those of any other human. People, however, are much more than a product of heredity and environment. They are creative beings who not only react to their environment but also act on it and cause it to react to them.

Each person uses heredity and environment as the bricks and mortar to build personality, but the architectural design reflects that person’s own style. Of primary importance is not what people have been given, but how they put those materials to use. The building materials of personality are secondary. We are our own architect and can build either a useful or a useless style of life. We can choose to construct a gaudy façade or to expose the essence of the structure. We are not compelled to grow in the direction of social interest, inasmuch as we have no inner nature that forces us to be good. Conversely, we have no inherently evil nature from which we must escape. We are who we are because of the use we have made of our bricks and mortar.

Adler (1929/1964) used an interesting analogy, which he called “the law of the low doorway.” If you are trying to walk through a doorway four feet high, you have two basic choices. First, you can use your creative power to bend down as you approach the doorway, thereby successfully solving the problem. This is the manner in which the psychologically healthy individual solves most of life’s problems. Conversely, if you bump your head and fall back, you must still solve the problem correctly or continue bumping your head. Neurotics often choose to bump their head on the realities of life. When approaching the low doorway, you are neither compelled to stoop nor forced to bump your head. You have a creative power that permits you to follow either course.

Abnormal Development

Adler believed that people are what they make of themselves. The creative power endows humans, within certain limits, with the freedom to be either psychologically healthy or unhealthy and to follow either a useful or useless style of life.

General Description

According to Adler (1956), the one factor underlying all types of maladjustments is underdeveloped social interest. Besides lacking social interest, neurotics tend to (1) set their goals too high, (2) live in their own private world, and (3) have a rigid
and dogmatic style of life. These three characteristics follow inevitably from a lack of social interest. In short, people become failures in life because they are overconcerned with themselves and care little about others. Maladjusted people set extravagant goals as an overcompensation for exaggerated feelings of inferiority. These lofty goals lead to dogmatic behavior, and the higher the goal, the more rigid the striving. To compensate for deeply rooted feelings of inadequacy and basic insecurity, these individuals narrow their perspective and strive compulsively and rigidly for unrealistic goals.

The exaggerated and unrealistic nature of neurotics’ goals sets them apart from the community of other people. They approach the problems of friendship, sex, and occupation from a personal angle that precludes successful solutions. Their view of the world is not in focus with that of other individuals and they possess what Adler (1956) called “private meaning” (p. 156). These people find everyday living to be hard work, requiring great effort. Adler (1929/1964) used an analogy to describe how these people go through life.

In a certain popular music hall, the “strong” man comes on and lifts an enormous weight with care and intense difficulty. Then, during the hearty applause of the audience, a child comes in and gives away the fraud by carrying the dummy weight off with one hand. There are plenty of neurotics who swindle us with such weights, and who are adepts at appearing overburdened. They could really dance with the load under which they stagger. (p. 91)

External Factors in Maladjustment

Why do some people create maladjustments? Adler (1964) recognized three contributing factors, any one of which is sufficient to contribute to abnormality: (1) exaggerated physical deficiencies, (2) a pampered style of life, and (3) a neglected style of life.

Exaggerated Physical Deficiencies
Exaggerated physical deficiencies, whether congenital or the result of injury or disease, are not sufficient to lead to maladjustment. They must be accompanied by accentuated feelings of inferiority. These subjective feelings may be greatly encouraged by a defective body, but they are the progeny of the creative power.

Each person comes into the world “blessed” with physical deficiencies, and these deficiencies lead to feelings of inferiority. People with exaggerated physical deficiencies sometimes develop exaggerated feelings of inferiority because they overcompensate for their inadequacy. They tend to be overly concerned with themselves and lack consideration for others. They feel as if they are living in enemy country, fear defeat more than they desire success, and are convinced that life’s major problems can be solved only in a selfish manner (Adler, 1927).

Pampered Style of Life
A pampered style of life lies at the heart of most neuroses. Pampered people have weak social interest but a strong desire to perpetuate the pampered, parasitic relationship they originally had with one or both of their parents. They expect others to
look after them, overprotect them, and satisfy their needs. They are characterized by extreme discouragement, indecisiveness, oversensitivity, impatience, and exaggerated emotion, especially anxiety. They see the world with private vision and believe that they are entitled to be first in everything (Adler, 1927, 1964).

Pampered children have not received too much love; rather, they feel unloved. Their parents have demonstrated a lack of love by doing too much for them and by treating them as if they were incapable of solving their own problems. Because these children feel pampered and spoiled, they develop a pampered style of life. Pampered children may also feel neglected. Having been protected by a doting parent, they are fearful when separated from that parent. Whenever they must fend for themselves, they feel left out, mistreated, and neglected. These experiences add to the pampered child’s stockpile of inferiority feelings.

**Neglected Style of Life**
The third external factor contributing to maladjustment is neglect. Children who feel unloved and unwanted are likely to borrow heavily from these feelings in creating a neglected style of life. Neglect is a relative concept. No one feels totally neglected or completely unwanted. The fact that a child survived infancy is proof that someone cared for that child and that the seed of social interest has been planted (Adler, 1927).

Abused and mistreated children develop little social interest and tend to create a neglected style of life. They have little confidence in themselves and tend to overestimate difficulties connected with life’s major problems. They are distrustful of other people and are unable to cooperate for the common welfare. They see society as enemy country, feel alienated from all other people, and experience a strong sense of envy toward the success of others. Neglected children have many of the characteristics of pampered ones, but generally they are more suspicious and more likely to be dangerous to others (Adler, 1927).

**Safeguarding Tendencies**
Adler believed that people create patterns of behavior to protect their exaggerated sense of self-esteem against public disgrace. These protective devices, called safeguarding tendencies, enable people to hide their inflated self-image and to maintain their current style of life.

Adler’s concept of safeguarding tendencies can be compared to Freud’s concept of defense mechanisms. Basic to both is the idea that symptoms are formed as a protection against anxiety. However, there are important differences between the two concepts. Freudian defense mechanisms operate unconsciously to protect the ego against anxiety, whereas Adlerian safeguarding tendencies are largely conscious and shield a person’s fragile self-esteem from public disgrace. Also, Freud’s defense mechanisms are common to everyone, but Adler (1956) discussed safeguarding tendencies only with reference to the construction of neurotic symptoms. Excuses, aggression, and withdrawal are three common safeguarding tendencies, each designed to protect a person’s present style of life and to maintain a fictional, elevated feeling of self-importance (Adler, 1964).
Excuses
The most common of the safeguarding tendencies are excuses, which are typically expressed in the “Yes, but” or “If only” format. In the “Yes, but” excuse, people first state what they claim they would like to do—something that sounds good to others—then they follow with an excuse. A woman might say, “Yes, I would like to go to college, but my children demand too much of my attention.” An executive explains, “Yes, I agree with your proposal, but company policy will not allow it.”

The “If only” statement is the same excuse phrased in a different way. “If only my husband were more supportive, I would have advanced faster in my profession.” “If only I did not have this physical deficiency, I could compete successfully for a job.” These excuses protect a weak—but artificially inflated—sense of self-worth and deceive people into believing that they are more superior than they really are (Adler, 1956).

Aggression
Another common safeguarding tendency is aggression. Adler (1956) held that some people use aggression to safeguard their exaggerated superiority complex, that is, to protect their fragile self-esteem. Safeguarding through aggression may take the form of depreciation, accusation, or self-accusation.

Depreciation is the tendency to undervalue other people’s achievements and to overvalue one’s own. This safeguarding tendency is evident in such aggressive behaviors as criticism and gossip. “The only reason Kenneth got the job I applied for is because he is an African American.” “If you look closely, you’ll notice that Jill works hardest at avoiding work.” The intention behind each act of depreciation is to belittle another so that the person, by comparison, will be placed in a favorable light.

Accusation, the second form of an aggressive safeguarding device, is the tendency to blame others for one’s failures and to seek revenge, thereby safeguarding one’s own tenuous self-esteem. “I wanted to be an artist, but my parents forced me to go to medical school. Now I have a job that makes me miserable.” Adler (1956) believed that there is an element of aggressive accusation in all unhealthy lifestyles. Unhealthy people invariably act to cause the people around them to suffer more than they do.

The third form of neurotic aggression, self-accusation, is marked by self-torture and guilt. Some people use self-torture, including masochism, depression, and suicide, as means of hurting people who are close to them. Guilt is often aggressive, self-accusatory behavior: “I feel distressed because I wasn’t nicer to my grandmother while she was still living. Now, it’s too late.”

Self-accusation is the converse of depreciation, although both are aimed toward gaining personal superiority. With depreciation, people who feel inferior devalue others to make themselves look good. With self-accusation, people devalue themselves in order to inflict suffering on others while protecting their own magnified feelings of self-esteem (Adler, 1956).

Withdrawal
Personality development can be halted when people run away from difficulties. Adler referred to this tendency as withdrawal, or safeguarding through distance. Some people unconsciously escape life’s problems by setting up a distance between themselves and those problems.
Adler (1956) recognized four modes of safeguarding through withdrawal: (1) moving backward, (2) standing still, (3) hesitating, and (3) constructing obstacles.

**Moving backward** is the tendency to safeguard one’s fictional goal of superiority by psychologically reverting to a more secure period of life. Moving backward is similar to Freud’s concept of regression in that both involve attempts to return to earlier, more comfortable phases of life. Whereas regression takes place unconsciously and protects people against anxiety-filled experiences, moving backward may sometimes be conscious and is directed at maintaining an inflated goal of superiority. Moving backward is designed to elicit sympathy, the deleterious attitude offered so generously to pampered children.

Psychological distance can also be created by **standing still**. This withdrawal tendency is similar to moving backward but, in general, it is not as severe. People who stand still simply do not move in any direction; thus, they avoid all responsibility by ensuring themselves against any threat of failure. They safeguard their fictional aspirations because they never do anything to prove that they cannot accomplish their goals. A person who never applies to graduate school can never be denied entrance; a child who shies away from other children will not be rejected by them. By doing nothing, people safeguard their self-esteem and protect themselves against failure.

Closely related to standing still is **hesitating**. Some people hesitate or vacillate when faced with difficult problems. Their procrastinations eventually give them the excuse “It’s too late now.” Adler believed that most compulsive behaviors are attempts to waste time. Compulsive hand washing, retracing one’s steps, behaving in an obsessive orderly manner, destroying work already begun, and leaving work unfinished are examples of hesitation. Although hesitating may appear to other people to be self-defeating, it allows neurotic individuals to preserve their inflated sense of self-esteem.

The least severe of the withdrawal safeguarding tendencies is **constructing obstacles**. Some people build a straw house to show that they can knock it down. By overcoming the obstacle, they protect their self-esteem and their prestige. If they fail to hurdle the barrier, they can always resort to an excuse.

In summary, safeguarding tendencies are found in nearly everyone, but when they become overly rigid, they lead to self-defeating behaviors. Overly sensitive people create safeguarding tendencies to buffer their fear of disgrace, to eliminate their exaggerated inferiority feelings, and to attain self-esteem. However, safeguarding tendencies are self-defeating because their built-in goals of self-interest and personal superiority actually block them from securing authentic feelings of self-esteem. Many people fail to realize that their self-esteem would be better safeguarded if they gave up their self-interest and developed a genuine caring for other people. Adler’s idea of safeguarding tendencies and Freud’s notion of defense mechanisms are compared in Table 3.1.

**Masculine Protest**

In contrast to Freud, Adler (1930, 1956) believed that the psychic life of women is essentially the same as that of men and that a male-dominated society is not natural but rather an artificial product of historical development. According to Adler, cultural and social practices—not anatomy—influence many men and women to
overemphasize the importance of being manly, a condition he called the **masculine protest**.

**Origins of the Masculine Protest**

In many societies, both men and women place an inferior value on being a woman. Boys are frequently taught early that being masculine means being courageous, strong, and dominant. The epitome of success for boys is to win, to be powerful, to be on top. In contrast, girls often learn to be passive and to accept an inferior position in society.

Some women fight against their feminine roles, developing a masculine orientation and becoming assertive and competitive; others revolt by adopting a passive role, becoming exceedingly helpless and obedient; still others become resigned to the belief that they are inferior human beings, acknowledging men’s privileged position by shifting responsibilities to them. Each of these modes of adjustment results from cultural and social influences, not from inherent psychic difference between the two genders.

**Adler, Freud, and the Masculine Protest**

In the previous chapter we saw that Freud (1924/1961) believed that “anatomy is destiny” (p. 178), and that he regarded women as the “‘dark continent’ for psychology” (Freud 1926/1959b, p. 212). Moreover, near the end of his life, he was still asking, “What does a woman want?” (E. Jones, 1955, p. 421). According to Adler, these attitudes toward women would be evidence of a person with a strong masculine

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**TABLE 3.1**

**Comparison of Safeguarding Tendencies with Defense Mechanisms**

<table>
<thead>
<tr>
<th>Adler’s Safeguarding Tendencies</th>
<th>Freud’s Defense Mechanisms</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Limited mostly to the construction of a neurotic style of life</td>
<td>1. Found in everyone</td>
</tr>
<tr>
<td>2. Protect the person’s fragile self-esteem from public disgrace</td>
<td>2. Protect the ego from the pain of anxiety</td>
</tr>
<tr>
<td>3. Can be partly conscious</td>
<td>3. Operate only on an unconscious level</td>
</tr>
<tr>
<td>4. Common types include:</td>
<td>4. Common types include:</td>
</tr>
<tr>
<td>A. excuses</td>
<td>A. repression</td>
</tr>
<tr>
<td>B. aggression</td>
<td>B. reaction formation</td>
</tr>
<tr>
<td>(1) depreciation</td>
<td>C. displacement</td>
</tr>
<tr>
<td>(2) accusation</td>
<td>D. fixation</td>
</tr>
<tr>
<td>(3) self-accusation</td>
<td>E. regression</td>
</tr>
<tr>
<td>C. withdrawal</td>
<td>F. projection</td>
</tr>
<tr>
<td>(1) moving backward</td>
<td>G. introjection</td>
</tr>
<tr>
<td>(2) standing still</td>
<td>H. sublimation</td>
</tr>
<tr>
<td>(3) hesitating</td>
<td></td>
</tr>
<tr>
<td>(4) constructing obstacles</td>
<td></td>
</tr>
</tbody>
</table>
protest. In contrast to Freud’s views on women, Adler assumed that women—because they have the same physiological and psychological needs as men—want more or less the same things that men want.

These opposing views on femininity were magnified in the women Freud and Adler chose to marry. Martha Bernays Freud was a subservient housewife dedicated to her children and husband, but she had no interest in her husband’s professional work. In contrast, Raissa Epstein Adler was an intensely independent woman who abhorred the traditional domestic role, preferring a politically active career.

During the early years of their marriage, Raissa and Alfred Adler had somewhat compatible political views, but in time, these views diverged. Alfred became more of a capitalist, advocating personal responsibility, while Raissa became involved in the dangerous Communist politics of her native Russia. Such independence pleased Adler, who was as much a feminist as his strong-willed wife.

Applications of Individual Psychology

We have divided the practical applications of individual psychology into four areas: (1) family constellation, (2) early recollections, (3) dreams, and (4) psychotherapy.

Family Constellation

In therapy, Adler almost always asked patients about their family constellation, that is, their birth order, the gender of their siblings, and the age spread between them. Although people’s perception of the situation into which they were born is more important than numerical rank, Adler did form some general hypotheses about birth order.

Firstborn children, according to Adler (1931), are likely to have intensified feelings of power and superiority, high anxiety, and overprotective tendencies. (Recall that Freud was his mother’s firstborn child.) Firstborn children occupy a unique position, being an only child for a time and then experiencing a traumatic dethronement when a younger sibling is born. This event dramatically changes the situation and the child’s view of the world.

If firstborn children are age 3 or older when a baby brother or sister is born, they incorporate this dethronement into a previously established style of life. If they have already developed a self-centered style of life, they likely will feel hostility and resentment toward the new baby, but if they have formed a cooperating style, they will eventually adopt this same attitude toward the new sibling. If firstborn children are less than 3 years old, their hostility and resentment will be largely unconscious, which makes these attitudes more resistant to change in later life.

According to Adler, secondborn children (such as himself) begin life in a better situation for developing cooperation and social interest. To some extent, the personalities of secondborn children are shaped by their perception of the older child’s attitude toward them. If this attitude is one of extreme hostility and vengeance, the second child may become highly competitive or overly discouraged. The typical second child, however, does not develop in either of these two directions. Instead, the secondborn child matures toward moderate competitiveness, having a healthy desire to overtake the older rival. If some success is achieved, the child is likely to develop
a revolutionary attitude and feel that any authority can be challenged. Again, children’s interpretations are more important than their chronological position.

Youngest children, Adler believed, are often the most pampered and, consequently, run a high risk of being problem children. They are likely to have strong feelings of inferiority and to lack a sense of independence. Nevertheless, they possess many advantages. They are often highly motivated to exceed older siblings and to become the fastest runner, the best musician, the most skilled athlete, or the most ambitious student.

Only children are in a unique position of competing, not against brothers and sisters, but against father and mother. Living in an adult world, they often develop an exaggerated sense of superiority and an inflated self-concept. Adler (1931) stated that only children may lack well-developed feelings of cooperation and social interest, possess a parasitic attitude, and expect other people to pamper and protect them. Typical positive and negative traits of oldest, second, youngest, and only children are shown in Table 3.2.

Early Recollections

To gain an understanding of patients’ personality, Adler would ask them to reveal their early recollections (ERs). Although he believed that the recalled memories yield clues for understanding patients’ style of life, he did not consider these memories to have a causal effect. Whether the recalled experiences correspond with objective reality or are complete fantasies is of no importance. People reconstruct the
events to make them consistent with a theme or pattern that runs throughout their lives.

Adler (1929/1969, 1931) insisted that early recollections are always consistent with people’s present style of life and that their subjective account of these experiences yields clues to understanding both their final goal and their present style of life. One of Adler’s earliest recollections was of the great contrast between his brother Sigmund’s good health and his own sickly condition. As an adult, Adler reported that

One of my earliest recollections is of sitting on a beach . . . bandaged up on account of rickets, with my healthier elder brother sitting opposite me. He could run, jump, and move about quite effortlessly, while for me movement of any sort was a strain. . . . Everyone went to great pains to help me. (Bottome, 1957, p. 30)

If Adler’s assumption that early recollections are a valid indicator of a person’s style of life, then this memory should yield clues about Adler’s adult style of life.

### Table 3.2

<table>
<thead>
<tr>
<th>Positive Traits</th>
<th>Negative Traits</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Oldest Child</strong></td>
<td></td>
</tr>
<tr>
<td>Nurturing and protective of others</td>
<td>Highly anxious</td>
</tr>
<tr>
<td>Good organizer</td>
<td>Exaggerated feelings of power</td>
</tr>
<tr>
<td></td>
<td>Unconscious hostility</td>
</tr>
<tr>
<td></td>
<td>Fights for acceptance</td>
</tr>
<tr>
<td></td>
<td>Must always be “right,” whereas others are always “wrong”</td>
</tr>
<tr>
<td></td>
<td>Highly critical of others</td>
</tr>
<tr>
<td></td>
<td>Uncooperative</td>
</tr>
<tr>
<td><strong>Second Child</strong></td>
<td></td>
</tr>
<tr>
<td>Highly motivated</td>
<td>Highly competitive</td>
</tr>
<tr>
<td>Cooperative</td>
<td>Easily discouraged</td>
</tr>
<tr>
<td>Moderately competitive</td>
<td></td>
</tr>
<tr>
<td><strong>Youngest Child</strong></td>
<td></td>
</tr>
<tr>
<td>Realistically ambitious</td>
<td>Pampered style of life</td>
</tr>
<tr>
<td></td>
<td>Dependent on others</td>
</tr>
<tr>
<td></td>
<td>Wants to excel in everything</td>
</tr>
<tr>
<td></td>
<td>Unrealistically ambitious</td>
</tr>
<tr>
<td><strong>Only Child</strong></td>
<td></td>
</tr>
<tr>
<td>Socially mature</td>
<td>Exaggerated feelings of superiority</td>
</tr>
<tr>
<td></td>
<td>Low feelings of cooperation</td>
</tr>
<tr>
<td></td>
<td>Inflated sense of self</td>
</tr>
<tr>
<td></td>
<td>Pampered style of life</td>
</tr>
</tbody>
</table>

Adler (1929/1969, 1931) insisted that early recollections are always consistent with people’s present style of life and that their subjective account of these experiences yields clues to understanding both their final goal and their present style of life. One of Adler’s earliest recollections was of the great contrast between his brother Sigmund’s good health and his own sickly condition. As an adult, Adler reported that

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If Adler’s assumption that early recollections are a valid indicator of a person’s style of life, then this memory should yield clues about Adler’s adult style of life.
First, it tells us that he must have seen himself as an underdog, competing valiantly against a powerful foe. However, this early recollection also indicates that he believed he had the help of others. Receiving aid from other people would have given Adler the confidence to compete against such a powerful rival. This confidence coupled with a competitive attitude likely carried over to his relationship with Sigmund Freud, making that association tenuous from the beginning.

Adler (1929/1964) presented another example of the relationship between early recollections and style of life. During therapy an outwardly successful man who greatly distrusted women reported the following early memory: "I was going with my mother and little brother to market. Suddenly it began to rain and my mother took me in her arms, and then, remembering that I was the older, she put me down and took up my younger brother" (p. 123). Adler saw that this recollection related directly to the man’s current distrust of women. Having initially gained a favorite position with his mother, he eventually lost it to his younger brother. Although others may claim to love him, they will soon withdraw their love. Note that Adler did not believe that the early childhood experiences caused the man’s current distrust of women, but rather that his current distrustful style of life shapes and colors his early recollections.

Adler believed that highly anxious patients will often project their current style of life onto their memory of childhood experiences by recalling fearful and anxiety-producing events, such as being in a motor vehicle crash, losing parents either temporarily or permanently, or being bullied by other children. In contrast, self-confident people tend to recall memories that include pleasant relations with other people. In either case the early experience does not determine the style of life. Adler believed that the opposite was true; that is, recollections of early experiences are simply shaped by present style of life.

**Dreams**

Although dreams cannot foretell the future, they can provide clues for solving future problems. Nevertheless, the dreamer frequently does not wish to solve the problem in a productive manner. Adler (1956) reported the dream of a 35-year-old man who was considering marriage. In the dream, the man “crossed the border between Austria and Hungary, and they wanted to imprison me” (p. 361). Adler interpreted this dream to mean that the dreamer wants to come to a standstill because he would be defeated if he went on. In other words, the man wanted to limit his scope of activity and had no deep desire to change his marital status. He did not wish to be “imprisoned” by marriage. Any interpretation of this or any dream must be tentative and open to reinterpretation. Adler (1956) applied the golden rule of individual psychology to dream work, namely, “Everything can be different” (p. 363). If one interpretation doesn’t feel right, try another.

Immediately before Adler’s first trip to the United States in 1926, he had a vivid and anxious dream that related directly to his desire to spread his individual psychology to a new world and to free himself from the constraints of Freud and Vienna. The night before he was to depart for America, Adler dreamed that he was on board the ship when suddenly it capsized and sunk. All of Adler’s worldly possessions were on it and were destroyed by the raging waves. Hurling into the ocean, Adler was forced to
swim for his life. Alone he thrashed and struggled through the choppy water. But through the force of will and determination, he finally reached land in safety.

(Hoffman, 1994, p. 151)

Adler interpreted this dream to mean that he had to muster the courage to venture into a new world and to break from old worldly possessions.

Although Adler believed that he could easily interpret this dream, he contended that most dreams are self-deceptions and not easily understood by the dreamer. Dreams are disguised to deceive the dreamer, making self-interpretation difficult. The more an individual’s goal is inconsistent with reality, the more likely that person’s dreams will be used for self-deception. For example, a man may have the goal of reaching the top, being above, or becoming an important military figure. If he also possesses a dependent style of life, his ambitious goal may be expressed in dreams of being lifted onto another person’s shoulders or being shot from a cannon. The dream unveils the style of life, but it fools the dreamer by presenting him with an unrealistic, exaggerated sense of power and accomplishment. In contrast, a more courageous and independent person with similar lofty ambitions may dream of unaided flying or reaching a goal without help, much as Adler had done when he dreamed of escaping from a sinking ship.

**Psychotherapy**

Adlerian theory postulates that psychopathology results from lack of courage, exaggerated feelings of inferiority, and underdeveloped social interest. Thus, the chief purpose of Adlerian psychotherapy is to enhance courage, lessen feelings of inferiority, and encourage social interest. This task, however, is not easy because patients struggle to hold on to their existing, comfortable view of themselves. To overcome this resistance to change, Adler would sometimes ask patients, “What would you do if I cured you immediately?” Such a question usually forced patients to examine their goals and to see that responsibility for their current misery rests with them.

Adler often used the motto “Everybody can accomplish everything.” Except for certain limitations set by heredity, he strongly believed this maxim and repeatedly emphasized that what people do with what they have is more important than what they have (Adler, 1925/1968, 1956). Through the use of humor and warmth, Adler tried to increase the patient’s courage, self-esteem, and social interest. He believed that a warm, nurturing attitude by the therapist encourages patients to expand their social interest to each of the three problems of life: sexual love, friendship, and occupation.

Adler innovated a unique method of therapy with problem children by treating them in front of an audience of parents, teachers, and health professionals. When children receive therapy in public, they more readily understand that their problems are community problems. Adler (1964) believed that this procedure would enhance children’s social interest by allowing them to feel that they belong to a community of concerned adults. Adler was careful not to blame the parents for a child’s misbehavior. Instead, he worked to win the parents’ confidence and to persuade them to change their attitudes toward the child.

Although Adler was quite active in setting the goal and direction of psychotherapy, he maintained a friendly and permissive attitude toward the patient. He established himself as a congenial coworker, refrained from moralistic preaching,
and placed great value on the human relationship. By cooperating with their therapists, patients establish contact with another person. The therapeutic relationship awakens their social interest in the same manner that children gain social interest from their parents. Once awakened, the patients’ social interest must spread to family, friends, and people outside the therapeutic relationship (Adler, 1956).

Related Research
Adlerian theory continues to generate a moderate amount of research on such topics as career choice, eating disorders, binge drinking, and other important issues. Each of these topics can provide a potentially rich source for understanding various Adlerian concepts.

Early Recollections and Career Choice
Do early recollections predict career choice among young students? Adler believed that career choices reflect a person’s personality. “If ever I am called on for vocational guidance, I always ask the individual what he was interested in during his first years. His memories of this period show conclusively what he has trained himself for most continuously” (Adler, 1958, as quoted in Kasler & Nevo, 2005, p. 221). Researchers inspired by Adler therefore predicted that the kind of career one chooses as an adult is often reflected in one’s earliest recollections.

In order to test this hypothesis, Jon Kasler and Ofra Nevo (2005) gathered earliest memories from 130 participants. These recollections were then coded by two judges on the kind of career the memory reflected. The recollections were classified using Holland’s (1973) vocational interest types, namely Realistic, Investigative, Artistic, Social, Enterprising, and Conventional (see Table 3.3 for description of these interest types). For example, an early recollection that reflects a social career interest later in life was: “I went to nursery school for the first time in my life at the age of four or five. I don’t remember my feelings that day but I went with my mother and the moment I arrived I met my first friend, a boy by the name of P. I remember a clear picture of P playing on the railings and somehow I joined him. I had fun all day” (Kasler & Nevo, 2005, p. 226). This early recollection centers around social interaction and relationships. An example of an early recollection that reflects a realistic career interest was: “When I was a little boy, I used to like to take things apart, especially electrical appliances. One day I wanted to find out what was inside the television, so I decided to take a knife and break it open. Because I was so small I didn’t have the strength and anyway my father caught me and yelled at me” (Kasler & Nevo, 2005, p. 225).

Career interest of participants was assessed by a self-report measure, the Self-Directed Search (SDS) questionnaire (Holland, 1973). The SDS measures vocational interests, which were independently categorized into the same six Holland types that early recollections were placed into. The researchers therefore had early recollections and adult career interests both classified into the six career types, and they wanted to examine whether early recollections matched career interest.

Kasler and Nevo (2005) found that early recollections in childhood did match career type as an adult, at least for the three career types that were well represented
TABLE 3.3

Qualities of Holland’s Six Career Types: Realistic, Investigative, Artistic, Social, Enterprising, and Conventional

**Realistic**
- Likes to work with animals, tools, or machines; generally avoids social activities like teaching, healing, and informing others;
- Has good skills in working with tools, mechanical or electrical drawings, machines, or plants and animals;
- Values practical things you can see, touch, and use like plants and animals, tools, equipment, or machines; and
- Sees self as practical, mechanical, and realistic.

**Investigative**
- Likes to study and solve math or science problems; generally avoids leading, selling, or persuading people;
- Is good at understanding and solving science and math problems;
- Values science; and
- Sees self as precise, scientific, and intellectual.

**Artistic**
- Likes to do creative activities like art, drama, crafts, dance, music, or creative writing; generally avoids highly ordered or repetitive activities;
- Has good artistic abilities—in creative writing, drama, crafts, music, or art;
- Values the creative arts—like drama, music, art, or the works of creative writers; and
- Sees self as expressive, original, and independent.

**Social**
- Likes to do things to help people—like teaching, nursing, or giving first aid, providing information; generally avoids using machines, tools, or animals to achieve a goal;
- Is good at teaching, counseling, nursing, or giving information;
- Values helping people and solving social problems; and
- Sees self as helpful, friendly, and trustworthy.

**Enterprising**
- Likes to lead and persuade people, and to sell things and ideas; generally avoids activities that require careful observation and scientific, analytical thinking;
- Is good at leading people and selling things or ideas;
- Values success in politics, leadership, or business; and
- Sees self as energetic, ambitious, and sociable.

**Conventional**
- Likes to work with numbers, records, or machines in a set, orderly way; generally avoids ambiguous, unstructured activities;
- Is good at working with written records and numbers in a systematic, orderly way;
- Values success in business; and
- Sees self as orderly, and good at following a set plan.
in their sample (Realistic, Artistic, and Social). The general direction of a participant’s career path could be identified from themes seen in early recollections. These vignettes are consistent with Alder’s view of early recollections and demonstrate how style of life may relate to occupational choice.

Early Childhood and Health-Related Issues

Psychologists have been studying health-related issues for a number of years, but only recently have these topics become of interest to Adlerian psychologists. As it turns out, Adler’s theory of inferiority, superiority, and social feeling can be applied to explain health-related behaviors such as eating disorders and binge drinking.

According to Susan Belangee (2006), dieting, overeating, and bulimia can be viewed as common ways of expressing inferiority feelings. Belangee cites a report by Lowes and Tiggeman (2003), who looked at body satisfaction in 135 children 5 to 8 years old and found that 59% of them wanted to be thinner. Other research found that 35% of young dieters progressed to pathological dieting. Adlerian psychologists have recognized this progression and have seen it as a means of compensating for inferiority or a sense of worthlessness. In other words, the eating disorder and its striving toward superiority are an unhealthy means of compensating for inferiority. Moreover, eating disorders suggest that a person’s Gemeinschaftsgefühl, or social feeling, is out of whack. Rather than being focused on helping others and feeling compassion for others, persons with eating disorders are very much focused on their own lives and difficulties (Belangee, 2007).

Adlerian theory can also shed light on another health-related behavior—binge drinking. Although heavy drinking among college students has a long and destructive history, this pattern of alcohol consumption has increased in recent years with male students being more likely than female students to engage in excessive drinking over a relatively short period of time (Brannon & Feist, 2007). College men and women between the ages of 18 and 30 have the highest risk for heavy drinking. However, drinking rates among these students have not been analyzed according to birth order, gender of siblings, ethnicity, and other Adlerian topics.

Recently, however, Teresa Laird and Andrea Shelton (2006) examined the issue of binge drinking and birth order among men and women attending college. These researchers found significant differences among students with regard to family dynamics, alcohol consumption, and drinking patterns. That is, the youngest children in a family were more likely to binge drink, whereas older children demonstrated more drinking restraint. The authors explained this association using Adlerian theory: Youngest children are more dependent upon others, and when people who are dependent are stressed, they are more likely to cope by heavy drinking.

Early Recollections and Counseling Outcomes

If early recollections are fictional constructions amenable to present shifts in a person’s style of life, then early recollections should change as style of life changes. This hypothesis is difficult to test because researchers would need to (1) measure early recollections, (2) assess current style of life, (3) bring about changes in style of life,
and (4) reassess early recollections. If changes in early recollections tend to track changes in personality variables, then ERs could be used as criteria for measures of psychotherapy outcomes.

Some evidence exists that early recollections do change through the course of counseling. For example, Gary Savill and Daniel Eckstein (1987) obtained early recollections and mental status of psychiatric patients both before and after counseling and compared them to ERs and mental status of a matched group of control participants. They found significant changes in both mental status and early recollections for the counseling group but not for the controls. Consistent with Adlerian theory, this finding indicates that when counseling is successful, patients change their early recollections.

Similarly, Jane Statton and Bobbie Wilborn (1991) looked at the three earliest recollections of 5- to 12-year-old children after each of 10 weekly counseling sessions and compared them with the early recollections of a control group of children that did not receive counseling. The researchers found that the counseling group showed greater changes in the theme, character, setting, amount of detail, and level of affect of their early memories. In addition, they reported one dramatic example of how early recollections can change as style of life changes. One young child recalled that

my uncle and dad took me fishing. They were fishing and my uncle got his line hung on a tree stump in the water. He yanked on the pole and the hook came back and hooked me in the head. . . . I waited for them to pull it out of my head. (p. 341)

After counseling, the child recast this passive early recollection in a more active light.

I went fishing when I was about 5. . . . I caught a fish . . . and my uncle threw his line out and he got it hung on a tree stump and he yanked it back and the hook came back and got me in the head. . . . I pulled it out. (p. 344)

This research is intriguing because it suggests that early recollections may change as a result of psychotherapy or some other life-altering experience. These results tend to support Adler’s teleological approach to personality; namely, early childhood experiences are less important than the adult’s view of those experiences.

**Critique of Adler**

Adler’s theory, like that of Freud, produced many concepts that do not easily lend themselves to either verification or falsification. For example, although research has consistently shown a relationship between early childhood recollections and a person’s present style of life (Clark, 2002), these results do not verify Adler’s notion that present style of life shapes one’s early recollections. An alternate, causal explanation is also possible; that is, early experiences may cause present style of life. Thus, one of Adler’s most important concepts—the assumption that present style of life determines early memories rather than vice versa—is difficult to either verify or falsify.

Another function of a useful theory is to *generate research*, and on this criterion we rate Adler’s theory above average. Much of the research suggested by
individual psychology has investigated early recollections, social interest, and style of life. Arthur J. Clark (2002), for example, cites evidence showing that early recollections relate to myriad personality factors, including dimensions or personality clinical disorders, vocational choice, explanatory style, and psychotherapy processes and outcomes. In addition, Adler’s theory has encouraged researchers to construct several social interest scales, for example, the Social Interest Scale (Crandall, 1975, 1981), the Social Interest Index (Greever, Tseng, & Friedland, 1973), and the Sullivan Scale of Social Interest (Sulliman, 1973). Research activity on these scales and on birth order, early recollections, and style of life gives Adlerian theory a moderate to high rating on its ability to generate research.

How well does Adlerian theory organize knowledge into a meaningful framework? In general, individual psychology is sufficiently broad to encompass possible explanations for much of what is known about human behavior and development. Even seemingly self-defeating and inconsistent behaviors can be fit into the framework of striving for superiority. Adler’s practical view of life’s problems allows us to rate his theory high on its ability to make sense out of what we know about human behavior.

We also rate Adlerian theory high on its ability to guide action. The theory serves the psychotherapist, the teacher, and the parent with guidelines for the solution to practical problems in a variety of settings. Adlerian practitioners gather information through reports on birth order, dreams, early recollections, childhood difficulties, and physical deficiencies. They then use this information to understand a person’s style of life and to apply those specific techniques that will both increase that person’s individual responsibility and broaden his or her freedom of choice.

Is individual psychology internally consistent? Does it include a set of operationally defined terms? Although Adlerian theory is a model for self-consistency, it suffers from a lack of precise operational definitions. Terms such as goal of superiority and creative power have no scientific definition. Nowhere in Adler’s works are they operationally defined, and the potential researcher will look in vain for precise definitions that lend themselves to rigorous study. The term creative power is an especially illusory one. Just what is this magical force that takes the raw materials of heredity and environment and molds a unique personality? How does the creative power transform itself into specific actions or operations needed by the scientist to carry out an investigation? Unfortunately, individual psychology is somewhat philosophical—even moralistic—and does not provide answers to these questions.

The concept of creative power is a very appealing one. Probably most people prefer to believe that they are composed of something more than the interactions of heredity and environment. Many people intuitively feel that they have some agent (soul, ego, self, creative power) within them that allows them to make choices and to create their style of life. As inviting as it is, however, the concept of creative power is simply a fiction and cannot be scientifically studied. Due to lack of operational definitions, therefore, we rate individual psychology low on internal consistency.

The final criterion of a useful theory is simplicity, or parsimony. On this standard we rate individual psychology about average. Although Adler’s awkward and unorganized writings distract from the theory’s rating on parsimony, the work of Ansbacher and Ansbacher (Adler, 1956, 1964) has made individual psychology more parsimonious.
Concept of Humanity

Adler believed that people are basically self-determined and that they shape their personalities from the meaning they give to their experiences. The building material of personality is provided by heredity and environment, but the creative power shapes this material and puts it to use. Adler frequently emphasized that the use that people make of their abilities is more important than the quantity of those abilities. Heredity endows people with certain abilities and environment gives them some opportunity to enhance those abilities, but we are ultimately responsible for the use they make of these abilities.

Adler also believed that people's interpretations of experiences are more important than the experiences themselves. Neither the past nor the future determines present behavior. Instead, people are motivated by their present perceptions of the past and their present expectations of the future. These perceptions do not necessarily correspond with reality, and as Adler (1956) stated, "meanings are not determined by situations, but we determine ourselves by the meanings we give to situations" (p. 208).

People are forward moving, motivated by future goals rather than by innate instincts or causal forces. These future goals are often rigid and unrealistic, but people's personal freedom allows them to reshape their goals and thereby change their lives. People create their personalities and are capable of altering them by learning new attitudes. These attitudes encompass an understanding that change can occur, that no other person or circumstance is responsible for what a person is, and that personal goals must be subordinated to social interest.

Although our final goal is relatively fixed during early childhood, we remain free to change our style of life at any time. Because the goal is fictional and unconscious, we can set and pursue temporary goals. These momentary goals are not rigidly circumscribed by the final goal but are created by us merely as partial solutions. Adler (1927) expressed this idea as follows: "We must understand that the reactions of the human soul are not final and absolute: Every response is but a partial response, valid temporarily, but in no way to be considered a final solution of a problem" (p. 24). In other words, even though our final goal is set during childhood, we are capable of change at any point in life. However, Adler maintained that not all our choices are conscious and that style of life is created through both conscious and unconscious choices.

Adler believed that ultimately people are responsible for their own personalities. People's creative power is capable of transforming feelings of inadequacy into either social interest or into the self-centered goal of personal superiority. This capacity means that people remain free to choose between psychological health and neuroticism. Adler regarded self-centeredness as pathological and established social interest as the standard of psychological maturity. Healthy people have a high level of social interest, but throughout their lives, they remain free to accept or reject normality and to become what they will.
Key Terms and Concepts

- People begin life with both an innate striving force and physical deficiencies, which combine to produce feelings of inferiority.
- These feelings stimulate people to set a goal of overcoming their inferiority.
- People who see themselves as having more than their share of physical deficiencies or who experience a pampered or neglected style of life overcompensate for these deficiencies and are likely to have exaggerated feelings of inferiority, strive for personal gain, and set unrealistically high goals.
- People with normal feelings of inferiority compensate for these feelings by cooperating with others and developing a high level of social interest.
- Social interest, or a deep concern for the welfare of other people, is the sole criterion by which human actions should be judged.
- The three major problems of life—neighborly love, work, and sexual love—can only be solved through social interest.
- All behaviors, even those that appear to be incompatible, are consistent with a person’s final goal.
- Human behavior is shaped neither by past events nor by objective reality, but rather by people’s subjective perception of a situation.
- Heredity and environment provide the building material of personality, but people’s creative power is responsible for their style of life.
- All people, but especially neurotics, make use of various safeguarding tendencies—such as excuses, aggression, and withdrawal—as conscious or unconscious attempts to protect inflated feelings of superiority against public disgrace.
- The masculine protest—the belief that men are superior to women—is a fiction that lies at the root of many neuroses, both for men and for women.
- Adlerian therapy uses birth order, early recollections, and dreams to foster courage, self-esteem, and social interest.