The concept of man's creative power is central in Adler's Individual Psychology, and thus a discussion of the utilization of the therapist's creativity appears to be particularly germane to the Adlerian framework. We shall in the following present briefly (a) Adler's concept of creativity, (b) his view of mental disorder as a "creation," (c) his therapy as guidance toward a creative reconstruction, and then (d) present some of the areas of the therapist's creativity.

**Man's Creative Power**

Adler's psychology is founded on the presupposition that man is not completely determined by heredity and environment, but that once he has been brought into existence he develops the capability of influencing and creating events, as witnessed by the cultural products all around us, beginning with language.

Heredity and environment merely supply the raw material, the equipment, which the individual uses for his purposes through his own creative power. To quote Adler: "The important thing is not what one is born with [or what one finds around oneself], but what use one makes of that equipment" (5, p. 86). To understand this it is "necessary to assume... still another force: the creative power of the individual" (5, p. 87).

In this sense Adler advocated a "third-force" psychology, stressing human self-determination, while psychoanalysis stressed essentially heredity, and behaviorism stressed environment (7). This means in practice that the two last named look for objective causes in the past to explain behavior, as most psychologies do—while Adlerian psychology looks for the individual's intentions, purposes, or goals, which are of his own creation, to understand behavior.

Creativity is thus an essential part of Adler's model of man in general. Its criterion is the capacity to formulate, consciously or

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most often unknowingly, a goal of success for one's endeavors and to develop planful procedures for attaining the goal, i.e., a life plan under which all life processes become a self-consistent organization, the individual's style of life. Only in the truly feebleminded is such purposeful creative power absent (5, pp. 46-47).

Adler's assertion of creativity as a general human phenomenon was later paralleled by George Kelly's assertion of the use of certain scientific principles by all men (11, pp. 3-5). Both Adler and Kelly abide by the principle of reflexivity which maintains that the same basic human nature and form of operating must hold for the experimenter as for the subject, and for the therapist as for the patient (13), just as both consider man to live in a world of his own personal construction—in Adler's terms, in accordance with the individual's "schema of apperception."

### The Patient's Creativity

The concept of creativity in general predicates a starting point, a goal to be achieved, and the charting or inventing of ways and means for reaching the goal (12). The patient's creative process is characterized by more serious errors than is ordinarily the case, which has brought him to the predicament in which he finds himself. From his mistaken premises and mistaken goals follow mistaken means of attaining the goals, his behavior, including the manifest symptomatology. The patient's symptoms are considered to be his own "arrangements" (4, pp. 284-286) to serve as excuses for not meeting the problems of life—the problems of social relations, love and marriage, and occupation.

In most cases it is very understandable how the patient arrived at his mistakes: the circumstances were conducive to mistaken constructs. As Adler stated it, "Every neurotic is partly right" (4, p. 334). But Adlerian psychology does not accept these adverse circumstances as binding. It is in general a psychology of overcoming existing difficulties. This is the way of human progress, the belief in which is an intrinsic part of Adler's psychology (5, pp. 23-28). Thus the patient is right in that there were "traumas" and all sorts of "frustrations" in his life, which can easily be construed as having "caused" his present difficulties. But he is only partly right in that he was not obligated to construct his life in the inexpedient way in which he did. Others with similar experiences constructed their lives differently.

Psychotherapy is the endeavor to help the patient reconstruct
his assumptions, goals, and means in a more satisfactory and generally more useful way. Thereby, most importantly, his behavior will be modified—despite all the past objective adversities which, in any event, neither psychotherapy nor any other effort could alter.

**THE THERAPIST'S CREATIVITY**

The therapist brings his own creative power to bear, to influence that of the patient. To do so, the therapist must have some idea of the goal to be attained through the therapy. This involves a general conception of mental health.

In his consistently holistic approach, Adler not only accepted the individual as a unit which must not be divided any further, but saw him embedded in larger units, from the original family to ever-widening social groupings, and including ultimately the universe. What is more, in Adler's view man has also the capacity to comprehend and to live harmoniously with these facts, through an aptitude for communal feeling.

In cases of mental disorder, the individuals Adler called the failures in life, this aptitude has remained underdeveloped so that they construed their world in a narrow self-centeredness—"the narrow stable of the neurotic" (4, p. 278)—which is at odds with the actual operation of the world. Such a view will not find consensual support; it lacks any validity. "A private meaning is in fact no meaning at all" (3, p. 8). Such people expect from life rather than contribute to it, and consequently will not meet the demands of life with success. But not recognizing their mistake they will feel victimized, and quite free from responsibility.

In mental health we find a developed social interest, through which "there is a sense of acquiescence in the common advantages and drawbacks of our lot. The individual feels at home in life and feels his existence to be worthwhile just so far as he is useful to others and is overcoming common instead of private feelings of inferiority" (1, p. 79). In other words, the mentally healthy individual has created his world and his life style in accordance with a broader, self-transcending perspective which puts him objectively on a much sounder basis.

The function of the therapist is to get the patient to re-construct his invalid and unsatisfactory construction of his situation—a creative act on the part of the psychotherapist. In successful psychotherapy, according to Adler, "the fault of the [patient's] construction is discovered and a reconstruction is accomplished" (2, p. 22).
Areas of the Therapist's Creativity

Focusing on Patient's Actions

The patient at the point of therapy is at an impasse. He sees himself as a cornered victim. Here the therapist aims at getting the patient to see himself in a larger context, which amounts to a certain reconstruction. The patient focuses his attention on what has happened and still is happening to him. Without involving the patient's entire life style, the therapist refocuses by asking, "And what did you do?" When the wife complains, "My husband comes home late at night," the question, "And what do you do?" may elicit the answer, "I scold him." Thereby, however, her eyes are opened to the fact that she "is not merely a victim . . . but a most active participant" (9, p. 269)—a reconstruction. And if she understands that she does act, she will also accept that she could act differently. She could be friendly toward her husband. While she cannot directly change her husband's behavior, she can change her own response to his behavior and thereby influence it indirectly. The therapist creates options for the patient where formerly there were none visible.

Making Inferences Regarding Goals

When the Adlerian therapist makes inferences it is not regarding unconscious "causes" for the patient's behavior but regarding possible intentions and goals of which the patient is unaware. The unawareness of goals has recently found support in the work of Rychlak (14, p. 470). The therapist makes these inferences from the patient's actions and their consequences; he conceptualizes for the patient where he is in fact going. This conceptualization must have a degree of plausibility for the patient; it must be acceptable as, what Rychlak calls, "procedural evidence" (14, pp. 74-77). This is established by what Dreikurs describes as "the recognition reflex" (9, p. 261). By getting the patient to recognize an undesirable goal and connecting his present behavior and symptoms with it, the therapist may enable the patient to substitute a more desirable goal and fit his actions to it.

Conceptualizing the Life Style

Since he does not look for actual "causes" for the patient's behavior, the Adlerian therapist is not obligated to make an exhaustive search of the patient's past, lest important "causes" remain undetected, as would be the case in Sullivanian therapy—
similar though it is in many other ways (8). Instead he need only go far enough to be able to conceptualize the patient's typical modus vivendi including a hypothetical life goal, that is, his life style. The holistic assumption is that it is essentially the life style which is reflected in all of the individual's behavior, so that it is unnecessary to examine more than a sampling, in order to establish the significant constructs in a person's life. This is likely to be enormously time saving.

Using Early Recollections

Early recollections particularly are used by the Adlerian therapist creatively (4, pp. 351-357). A college student complained that she cannot make friends among the other girls, that her advances are not responded to, and that she wants to leave college. The counselor suspects that her behavior toward other girls may have something to do with her lack of success. Her first recollection was, "One Christmas my father had gotten for my mother a washer and a dryer. They were covered with a sheet. I thought it would be a wonderful surprise for her. It seemed like everyone received so much. I received a beautiful doll." A second early recollection was, "Playing in the sand box with a girl from the neighborhood. My mother told me that she was coarse and rough. But I continued playing. I felt sorry for her." Taking these two recollections together we discern a bi-polar category: within the family everybody is treated very nicely, but the outsider is of a lower kind and is looked down upon in pity. This would be further support for our initial suspicion that she did not go about making friends in the right way and for raising this suspicion in the student to a point where she recognizes her shortcoming and can alter her attitude and her behavior.

Employing Dialectical Thinking

Man moves through life, and his dynamics are from a "minus" to a "plus" situation. Thus an understanding of dialectics becomes part of the therapist's creativity. A dialectical conception suggests that things may be something else, even their opposites. "As with Huxley's self-examination," to quote from Rychlak, "happiness suggests sadness, beauty implies ugliness, mortality leads to immortality" (14, p. 356). Adler gives himself as an example when he tells that critical illness as a young child led him to resolve to fight death as a physician (4, p. 199).
The very fruitful contemporary conception of paradoxical com­munication in mental disorder and therapy (10, 16) can be subsumed under dialectics. Although Adler did not have this name available to him, he knew that “it is possible to lie with the truth” (4, p. 272) and quoted Socrates with, “Young man of Athens, your vanity peeps from the holes in your robe” (4, p. 232). If in a suicide note we find a profuse profession of love, this is suspect of being a para­adoxical communication (6). A widow may praise her deceased husband in a way that even the relatively naive observer suspects that their married life was not all that blissful. When Marilyn Monroe complained she was made into a sex symbol by the public relations people, the larger context, in the form of her dreams, recollections, and certain behaviors, raises the suspicion that the original suggestion came quite clearly from her, even if not through verbal communication.

Changing the Importance of the Symptom

Another form in which creativity has been used, beginning with Adler, is through encouraging the symptom or placing it into a different context, as has been so well described by Haley (10). There­by again, as by many surprise responses of the therapist, emphases are changed, and the possibility of reconstruction is introduced. To explain this very briefly we quote from Adler what he would say to a depressed patient:

“Never do anything you don’t like.” This seems to be a very modest request, but I believe it goes to the root of the whole trouble. If a depressed person is able to do anything he wants, whom can he accuse? . . . It is the best situation anyone could be in . . . On the other hand, . . . he wants to dominate and accuse others; if they agree with him, there is no way of dominating them. . . . Sometimes he will reply, “I should like to stay in bed all day.” I know that if I allow it, he will no longer do it. I know that if I hinder him, he will start a war. I always agree (4, pp. 346-347).

Further Areas

The interpretation of dreams and of the family constellation are other areas where the therapist intervenes creatively. The con­frontation techniques, currently described by Shulman (15) are further examples of creative Adlerian intervention. Finally there is the over-all “guessing” technique which Adler recommended throughout in listening to a case. A guess is in fact the ad hoc crea­tion of a specific, mostly minor, hypothesis about a case, which is immediately verified or rejected by asking the patient. This ap-
proach not only amounts to “creative listening,” but has been described as a veritable “training in having ideas” (5, p. 141). More than this mere mentioning of these areas would go beyond the scope of this paper.

**Summary**

The concept of man’s creative power, implying a considerable amount of self-determination, is central in Adler’s Individual Psychology. It is a third force, superseding heredity and environment as the final determiners of our actual lives. From this viewpoint mental disorders are erroneous constructions by the patient’s creativity. Psychotherapy is the therapist’s creative endeavor at a re-construction which is plausible to the patient so that he may accept it and be enabled to correct his errors. Various areas of utilization of the therapist’s creativity are briefly described.

**References**