Persons experiencing traumatic events such as hurricane Katrina often (and understandably) struggle from discouragement or demoralization. These folks, like many of the clients we see in counseling and psychotherapy, “lack hope . . . and one of our key tasks as counselors is to assist in restoring patterns of hope” (Littrell, 1998, p. 63). For Adlerians, this “restoring patterns of hope” is a key, fundamental aspect of the encouragement process in counseling. Encouragement, both as an attitude and as a set of skills, is salient for every person or client system with whom counselors may work. Regardless of one’s theoretical orientation, the Adlerian encouragement process may be usefully integrated in a counselor’s approach to counseling. The assumptions, characteristics, and methods of encouragement help to create an optimistic, empowering, and growth-enhancing environment for clients; a place where they feel en-abled rather dis-abled (Carlson, Watts, & Maniacci, 2006; Dinkmeyer, 1972; Watts, 1999, 2003; Watts & Phillips, 2004; Watts & Pietrzak, 2000; Watts & Shulman, 2003). Below is a brief description of an Adlerian understanding of encouragement and the encouragement-focused process in counseling.

Adlerian therapy is a positive psychology and approach to therapy that emphasizes prevention, optimism and hope, resilience and growth, competence, creativity and resourcefulness, social consciousness, and finding meaning and a sense of community in relationships. Adlerian psychology a growth model that emphasizes the holistic, phenomenological, teleological, field-theoretically, and socially-embedded aspects of human functioning; thus, it is an optimistic perspective that views people as unique, creative, capable, and responsible. In the post-Freudian term of his career, Adler progressively moved from a primary focus on abnormal human behavior to one emphasizing normal human development. Adlerians eschew the “medical model” orientation to maladjustment and embrace a nonpathological perspective. Clients are not sick (as in having a disease) and are not identified or “labeled” by their diagnoses. Because Adlerians believe the growth model of personality makes more sense than the sickness model, they see clients as discouraged rather than sick. Thus, Adlerians are not about “curing” anything; therapy is a process of encouragement. In fact, Adlerians consider encouragement a crucial aspect of human growth and development (Carlson, Watts, Maniacci, 2006; Dinkmeyer, 1972; Manaster & Corsini, 1982; Mosak & Maniacci, 1999; Watts, 1999, 2003; Watts & Pietrzak, 2000).

Hoyt (1994) identified three clinical-practical characteristics that constructivists approaches share: They place strong emphasis on developing a respectful therapeutic relationship; they emphasize strengths and resources; and they are optimistic and future-oriented. These characteristics mirror what Adlerians have historically called encouragement, or the therapeutic modeling of social interest (Watts, 1999, 2003; Watts & Pietrzak, 2000; Watts & Shulman, 2003). For Adlerians, encouragement is both an attitude and a way of being with clients in therapy. Dreikurs (1967) noted the essential necessity of encouragement in psychotherapy. He stated that presenting problems are “based on discouragement” and without “encouragement, without having faith in himself restored, [the client] cannot see the possibility of doing or functioning better” (p. 62). Adler (1956) once asked a client what he thought made the difference in his successful experience in therapy. The client replied: “That’s quite simple. I had lost all courage to live. In our consultations I found it again” (p. 342).

Adler and subsequent Adlerians consider encouragement a crucial aspect of human growth and development. This is especially true in regard to psychotherapy. Stressing the importance of encouragement in therapy, Adler (1956) stated: “Altogether, in every step of the treatment, we must not deviate from the path of encouragement” (p. 342). Dreikurs (1967) agreed: “What is most important in every treatment is encouragement” (p. 35). In addition, Dreikurs stated that therapeutic success was
largely dependent upon “[the therapist’s] ability to provide encouragement” and failure generally occurred “due to the inability of the therapist to encourage” (pp. 12-13).

Mosak (2000) described the Adlerian therapeutic process in terms of “faith, hope, and love” (p. 67). That is, expressing faith in the client, developing the client’s faith in himself or herself, and both the client and therapist having faith the therapeutic process; engendering hope in clients who present with varying levels of hope of improvement; and love, in the broadest sense, in that the client experiences a relationship with a caring, empathic, nonjudgmental, genuine human being. Adlerian therapy is an optimistic and encouragement-focused approach to psychotherapy. Encouragement, in Adlerian therapy, is both an attitude and a way of being with clients. The encouragement-focused process helps build hope and the expectancy of success in clients by demonstrating concern, active listening and empathy, communicating respect and confidence, focusing on strengths, assets and resources, helping clients generate perceptual and behavioral alternatives, focusing on efforts and progress, and helping clients see the humor in life experiences (Carlson, Watts, & Maniacci, 2006; Dinkmeyer, 1972; Dinkmeyer, Dinkmeyer, & Sperry, 1987; Watts, 1998, 1999, 2003; Watts & Phillips, 2004; Watts & Pietrzak, 2000).

References