Chapter 6

An Optimum Amount of Professional Control

We turn now to a particularly important implication from our data. We saw in earlier chapters that the typical adult successfully chooses and achieves beneficial changes without much help. The person's natural process of intentional change is remarkably effective. Those of us who are professional helpers might be able to build on that natural process. Instead of having too much or too little control, we can shift toward effectively sharing with the person the responsibility for choosing, planning, and implementing changes. The more I learn about intentional changes, the more convinced I become that shifting to the optimum amount of control is a particularly urgent and important implication, a particularly promising direction for improving our contribution to intentional changes.

In this chapter we will focus on one dimension of the interaction that occurs between the changing person and a significant helper. The latter might be a professional helper, such as a counselor, instructor, doctor, therapist, librarian, or social worker. It might be a trained paraprofessional helper in a community agency, crisis center, school, or church. Much of this chapter will also apply to a parent serving as a helper with his or her children, although only one section is written with that purpose in mind.

In any given helping relationship, does the professional helper

have an appropriate amount of control, or too much, or too little? That is our central dimension and question in this chapter. Helpers commonly overcontrol, but occasionally a helper will err in the opposite direction.

Power and control is a significant recurring theme in various fields and professions. Carl Rogers devoted an entire book to examining "power and control in relationships between people" (1977, p. xii) in field after field: education, politics, marriage, and family. A book edited by Fischer and Brodsky (1978) examined the amount of professional control in various human service fields, such as special education, psychological assessment, industrial consulting, classroom teaching, psychiatry, prison management, psychotherapy, medical treatment, maintaining pupil records, and psychological experimentation. A major review of teaching methods research stated that a primary dimension in the vast majority of these studies is the degree to which the teacher exercises control over the behavior of the students (Wallen and Travers, 1963, p. 470).

How much control does the helper have? We can imagine a situation in which he or she has 100% of the control and authority, and the changing person has virtually no power at all. This is represented by the extreme left-hand end of the continuum in figure 1. At the opposite extreme, the person could retain full control, turning none of it over to the helper. This situation, 100% freedom and autonomy, is represented by the right-hand end of the continuum.

This is a useful dimension because it enables us to compare various helping and teaching situations on a crucially important variable. You might find it fascinating to mark on the continuum
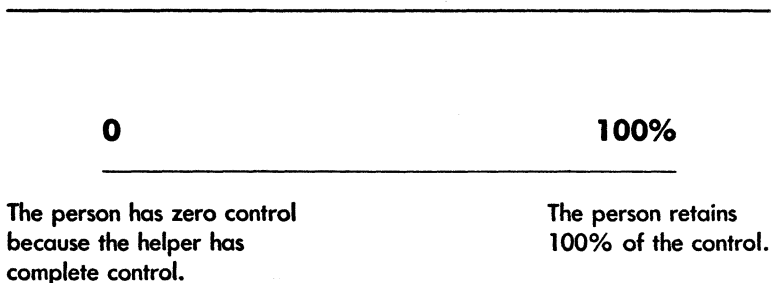
0   **100%**

The person has zero control
because the helper has
complete control.

The person retains
100% of the control.

Figure 1. Who Controls the Choice of the Change, the Strategy Decisions, and the Implementation Activities?

various helping relationships and situations that you have experienced. The fact that it is a continuum also avoids black-and-white thinking: instead of assuming a situation as either helper-controlled or completely free, we realize it can be somewhere in between.

Optimum Range of Control

The continuum is particularly useful in enabling us to compare the actual amount of control with the optimum amount. For any given helper, person, and intended change, there will be an optimum or ideal range on the continuum. In one set of circumstances the person's ideal range of control might be 60–80%, in another situation, 40–60%, and quite different in a third situation. If the helper and the changing person stay within this range, the intended change (and the person's future willingness and ability to choose and guide a change) will be facilitated more than if they move higher or lower on the continuum.

I believe that each of us, when serving as a helper or parent, should avoid overcontrol and undercontrol. We should aim to keep inside the optimum range for this particular person and situation. If in doubt, we should lean toward too little control rather than too much.

We have already seen, in earlier chapters, that most persons have a remarkably rich and successful natural process for choosing, planning, and implementing their changes. They largely handle these tasks on their own, with some help from friends and family. I believe we should usually try to fit into that natural process in a light-handed manner. We can provide helpful information, offer suggestions and our reasons for them, point out the options and their costs and benefits. Note that this sort of help does not take away from the person any of the responsibility for making the major decisions. For me, this makes better sense than intruding in a heavy-handed manner, oblivious to the person's own natural process, being far more controlling and directing and "in charge" than necessary.

As professional helpers, most of us sometimes ignore, distort, or interfere with the person's natural ongoing process of choosing, planning, and implementing changes. Instead of treasuring that process, and fostering and facilitating it, we sometimes take over complete control of the process. Instead of fitting into the person's natural process, we force the person to fit into our process. My guess is that professional and paraprofessional helpers fairly often

control more than the optimum range in figure 1; they control more than is necessary for the person to change effectively. In short, we would often be more helpful if we controlled less. We have seen how effective and successful the person's natural process can be, but all too rarely do we use that powerful personal process as a foundation on which to base our help.

My initial professional training was as a high school teacher of mathematics and English. I was successfully trained to do what classroom teachers do. To earn some income during my teacher training, I tutored a girl in grade ten mathematics. I was surprised to discover that the way I had learned to teach did not fit into her needs and process at all. To be effective with her, I had to behave quite differently from the way I operated as a classroom instructor. I had to sense her natural ongoing learning process in geometry, and then fit into "where she was at."

Not until ten years later did I come across some research that confirmed my experience. Combs (1969) found, in a wide range of helping situations, that the helper's spontaneous responses in the immediate situation (along with positive perceptions of self and others) are far more important for effecting change than are the helper's training, techniques, and theoretical background.

Lyon (1974) has urged that we treat our students, employees, and children the way we treat sunsets "instead of trying to reform them or change them with our 'superior knowledge' of how they ought to be" (p. 505). "When you look at a sunset no one says, 'It needs a little more orange in the cloud cover, a little more pink on the right hand side.' You allow it to become. That's one of the joys of sunsets—they're all unique. You allow them to be just what they are" (p. 505).

Several writers have decried or documented our tendency toward professional overcontrol. Some of them may be rather extreme, but they have performed a useful service in drawing our attention to the control dimension. In five hospitals, Roth (1972) studied institutional control over the behavior of the clientele. Farber (1970) made some biting comments about educational institutions: "Students are niggers. When you get that straight, our schools begin to make sense. . . . The faculty and administrators decide what courses will be offered; the students get to choose their own Homecoming Queen" (pp. 90–91). In a bitter attack on the mental health profession, medicine, and social work, Schrag (1978) suggested that professional helpers do not recognize the private and the ineffable (which might include the person's natural process of change). They

want to control, and cannot tolerate uncertainty and the unpredictable. Illich has declared, "I propose to call the mid-twentieth century the Age of Disabling Professions" (1978, p. 16). Turning specifically to learning and education, he decries "the world-wide discrimination against the autodidact" (p. 16). Professional helpers communicate to the client, "You are deficient; you are the problem," according to McKnight (1977, p. 83). "As *you* are the problem, the assumption is that *I*, the professionalized servicer, *am the answer. You* are not the answer. *Your peers* are not the answer." McKnight also stated that professionals are increasingly claiming the power to decide whether their help is effective. "The client is viewed as a deficient person, unable to know whether he has been helped" (p. 87).

Sometimes professionals keep the person in the dark about their diagnosis, treatment, progress, and likely outcomes. "Don't question; don't try to understand; don't ask me to share my knowledge and expertise with you" is sometimes the message. As a result, the person cannot take an active informed part in the decision-making, and does not gain a larger repertoire of skills or techniques for choosing and achieving future changes. By contrast, in a very inspiring and courageous address that I recall vividly, George A. Miller (1969) urged professionals to "give psychology away" to make psychological knowledge and principles readily available to anyone who can use them beneficially.

So far we have been talking about the optimum amount of professional control in a face-to-face situation, either one-to-one or in a group. Books, too, vary in the extent to which the author tries to control the directions and strategies for change. Some self-help books tell the person exactly what change to strive for, and provide a complete step-by-step procedure for achieving that change. At the opposite end of the continuum, some books help the person choose both the direction and the strategy for change. Somewhere in the middle, Coates and Thoresen (1977) suggest and explain various steps and techniques, but also encourage readers to study their own patterns and develop their own combination of strategies.

The Issue of Control for Three Tasks

In chapter 4, we distinguished three broad tasks that are required for intentional change: choosing the desired change, planning the strategy, and taking the actual steps for achieving the change. Let us

now briefly examine the issue of control for each of these tasks in turn.

With the first task, choosing the change goal, it is particularly important for each of us to struggle against our natural urge to control others. People should be free to choose their own changes, without undue pressure. Each of us, however, sometimes tries to impose our own goals on the other person, either overtly or without the person's awareness and consent. This occurs partly because each of us, as a professional, is devoted to our own area of professional competence or subject matter, rather than to helping people with their total range of potential changes. Sometimes, though, we become too similar to the manufacturers and advertisers whose goal is to sell whatever they have, through convincing people that they need it.

It is natural for each of us to wish that we could somehow make people change in certain ways. If we could just somehow get people to avoid driving after drinking, to refrain from smoking at meetings, to conserve energy, to protest first-strike nuclear weapons, or to be kinder to their children, the world would be a better place. How can we encourage people to change in ways that are beneficial to others? One possibility is to inform the general public about the need for such changes. Through advertising, speeches, demonstrations, organizations, workshops, setting an example, letters to the editor, and other printed materials we can encourage changes that are especially beneficial for society. Some changes, such as avoiding driving after drinking alcohol, are so important that they must be required by law. In my opinion, though, we should hesitate to legislate or compel a change, or subtly coerce or persuade the person to "choose" it, unless we are certain it is essential for the welfare of all.

With the second task, deciding the strategy for change, we professionals are particularly likely to overcontrol. We are so well trained and confident in certain strategies that we become blind to other possibilities. We assume that the techniques of our particular specialty are just what everyone needs.

We turn now to the third task, actually taking the steps that will produce the change. It is quite often appropriate for the person to turn over control and responsibility for this task to a professional helper. In these cases the helper teaches, conducts therapy sessions, reinforces the desired changes, performs surgery, or whatever. Even with this task, however, the professional helper often takes over too much of the control. Once people have performed the first

two tasks successfully, they are often quite capable of performing the third task with little or no professional help.

Some Causes of Overcontrol

As I listen to person after person describe their successful self-guided changes, I wonder why professional helpers sometimes try to overcontrol. Why don't they, with a light touch, simply fit into the person's ongoing natural process of change? Why don't they always give the optimum amount of advice and help instead of sometimes taking over more control than is effective? Why do I and other instructors feel an urge to control what and how our students learn? Why do I and other parents want to tell our kids what to do, how to live, when to go to sleep, and who their friends should be? Why do some husbands have such difficulty in cheerfully leaving their wives free to choose their own activities, interests, friends, work, and life directions? Why are we reluctant to actively encourage our children, students, clients, or patients to be free, to make their own choices without being influenced by our preferences?

In short, what are some of the forces or causes of our human urge to overcontrol others? The various answers to this question can be grouped into six clusters.

1. The professional (and the paraprofessional and the parent) may simply have a false belief or norm: "In the occupation or role I'm in, the appropriate behavior is to be in control of the process and its outcomes. That's simply what we (therapists, teachers, doctors, etc.) do now and have always done. If I sat back and let the person flounder with decisions and methods, I'd obviously be very lazy and not living up to my responsibilities and not earning my money. Besides, it wouldn't work well." Professional training, subtle pressure from colleagues, or the need for license renewal may contribute to this belief or norm. Also, some professional helpers habitually use a set method or approach or sequence, and have simply never thought of the possibility of letting the person choose some other approach.

2. Do you have strong views on what should, and should not, be learned by children in schools? Most of us become upset occasionally when we hear of some change in the curriculum or its emphasis. We *care* whether sex education, human relations, religion, local history, explicit novels, peace, or team sports are included in the curriculum. Perhaps this reaction points to a common human ten-

dency. We strongly want certain sorts of people to learn certain things or change in some definite way. We have certain values, certain beliefs about what is right or important or worthy. No wonder we sometimes find ourselves pushing our children, clients, or patients toward certain specific changes and paths.

3. Deep-seated emotional needs may contribute to high control. As a helper, we may feel happy, strong, or adequate when in control of someone else's change, and may fear the consequences of losing that control. One insightful psychotherapist said to me, after reading the first draft of this section, "I am aware that, for me, control in an interpersonal situation is a way to overcome my fears and insecurities." Being "one up" may feel good: being on a pedestal and looked up to by others may enhance one's self-esteem (Tough, 1979, chap. 14). Gibb (1978, p. 109) has pointed out the "needs of the leader to feel special." Wanting to feel useful and important, to be a rescuer, to have an impact on the world are fairly common human wants. Perhaps the desire to influence one's client in significant ways is little different from the desire to build dams and bridges, to become a corporation president, or to direct a large research and development project.

It is important to note that most overcontrol occurs for very human and understandable reasons, not from greed, malice, or a professional conspiracy. In fact, most professionals are probably simply unaware of their overcontrol and its causes.

4. Sometimes a helper does not treasure autonomy and self-direction in other persons. The helper may be unaware of the amazing diversity in people and their successful directions and paths. In short, the helper may not trust the effectiveness and responsibility of the person choosing and guiding the changes, and may assume that a particular client will change much more effectively with firm guidance from the professional. If the helper does not treasure diversity, autonomy, and self-direction among colleagues and clients, then it will not seem sensible to foster individual choice of directions and paths. Perhaps only 1% of the population reaches a high integrated level of ego development that involves the cherishing of individuality. Perhaps not till the level just below that, called the autonomous stage, does one recognize and respect the other person's needs for autonomy (Loevinger, Wessler, and Redmore, 1970, pp. 6, 10). Only at these two high levels is there "a feeling for the complexity and multifaceted char-

acter of real people and of real situations. There is a deepened respect for other people and their need to find their own way and even make their own mistakes. Crucial instances are, of course, one's own children and one's own parents."

5. In a crisis or a particularly difficult situation, the helper may revert to being authoritarian, traditional, heavy-handed, and controlling. This experience has been reported to me by several instructors who were successfully reducing their control in normal nonstressful situations.

6. Some particularly important and fascinating causes of overcontrol lie within the person being helped. This cluster of causes is a particularly high-priority area for further research. The typical person strongly expects the doctor, teacher, or therapist to take over control of the process. Especially if the person is investing much time and money, he or she may expect some sort of dramatic action by the helper. Students, patients, and clients can become very upset and anxious, even angry and hostile, if the professional fails to fit the expected role, especially if responsibility and effort are shifted to the student or client. Students have succeeded for years at the game of schooling and do not want the rules suddenly changed. We become our own enemies or oppressors: we do it to ourselves, resisting efforts by the instructor or others to increase our responsibility and control. We feel frightened by the first taste of freedom granted by a professional helper, and we fight to retain the status quo.

One of my favorite true stories was told to me by a thoughtful acquaintance called Terry. One day Terry was listening to a friend of his who is a medical doctor. She was complaining about the behavior of her patients: they refused to accept responsibility for their own health and resisted her efforts toward a partnership approach instead of complete doctor control. "Why can't they get up off their knees?" she pleaded. Terry then gently asked her how she behaved when she went to her own doctor. After a stunned moment she swore and said, "You're right. I put him on a pedestal and get down on my knees!"

Shifting from Overcontrol to Shared Responsibility

We have seen that professional helpers sometimes overcontrol for various reasons. Instead of fitting into the person's effective natural

process, they sometimes try to impose their own process and goals. The effectiveness of their help is reduced because they sometimes operate to the left of the optimum range in figure 1.

Many helpers, though, especially during the past few years, have been shifting their position in figure 1. By reducing their own control and letting the person retain plenty of control, they are moving into the optimum range on the continuum. They maximize their usefulness by avoiding the two extremes of overcontrol and undercontrol.

In various fields and professions, these helpers are moving toward shared responsibility with the person. They collaborate. Together they set goals and choose strategies. The professional shares his or her knowledge and expertise with the person, and enthusiastically fits into the person's needs and ongoing natural process. Neither person is on a pedestal nor one down. The helper treasures the person's competence at choosing and guiding changes and the person's success with previous changes. The person's self-image is enhanced. The person feels free, empowered, hopeful, able. His or her change proceeds more effectively and with high energy and enthusiasm. The person becomes more willing and able to take on ever greater responsibility with the next change effort.

There is a delightful paradox here. By striving and controlling less, the professional is actually more helpful. Shared responsibility works better than helper overcontrol. Once this situation is experienced (beyond the initial period of fear and resistance that sometimes occurs), both persons become enthusiastic. After seeing my students learning and changing effectively and enthusiastically with shared responsibility, for instance, I could not return to the overcontrolling way in which I used to teach.

Throughout this chapter it is essential to avoid black-and-white thinking. I am not proposing that the ideal position on the continuum is the extreme right-hand end ("the person retains 100% of the control"). Nor do professional literature and training urge helpers to operate at the other extreme ("the person has zero control because the helper has complete control"). What is happening now is simply a shift along the continuum to a more effective point, to an optimum range, but not to an extreme position. We are learning to reconcile the opposites, to find an effective middle position that will attract people who were formerly at one extreme or the other. I am indebted to Claudio Naranjo for pointing out (in a 1975 workshop) the important need for reconciling the opposites, for finding a way

of bringing together people and positions at extremes such as hedonism and social action, or discipline and permissiveness. I hope the people who are usually near one end of the continuum in figure 1 will be able to listen to helpers at other positions and to see the effectiveness of a flexible position somewhere between the opposite poles.

In a moment we will turn to various specific fields such as health, counseling and psychotherapy, personal growth, social work, adult learning, education (higher, elementary, and secondary), library practice, religion, parenting, and personal liberation movements. In each field we will examine some of the recent efforts to move from high professional control to shared responsibility. First, though, let us look at some writing that is too broad to fit into just one field.

For me, the quotation that best captures the recent trend was written by Spragg (1978). She captures the spirit and the breadth of "this yet-to-be-named movement" in the following words: "People are trying to take charge of their own personal lives; they are taking back power and control. People are learning about their physical and spiritual well-being and taking back some of the power they have given over to the medical profession. Learners are deciding what and how they will learn instead of leaving that up to the educational institutions. People are taking assertiveness training and doing life planning so they can more effectively take charge of their present and future modes of living. And people are getting together in groups and taking back, in bits and pieces, the power that over the course of the 20th C. they had relinquished to big government and giant corporations and we hear talk of neighborhood government, appropriate technology and local self-reliance." Incidentally, Susan Spragg is an active young woman who not only writes about these matters, but also works on related action projects. She was involved in a Denver Free University experiment to foster "self-directed living," and is now writing a manual on self-directed learning.

The opening paragraph of *The Next Whole Earth Catalog* (Brand, 1980, p. 2) includes these words: "A realm of intimate, personal power is developing—the power of individuals to conduct their own education, find their own inspiration, shape their own environment, and share the adventure with whoever is interested." A decade earlier, Maslow (1969, p. 732) pointed out the need to develop "the self-evolving person, the responsible-for-himself-and-his-own-evolution person."

Summarizing several studies, Combs (1969) found remarkable similarities among the most effective helpers regardless of whether they were counselors, teachers, priests, or professors. The most effective helpers "are characterized by a generally positive view of their subjects and a belief in the capacity of the human organism to save itself. It makes a great deal of difference whether helpers perceive their clients as able or unable. If a counselor, teacher, or priest does not regard his clients as able he can hardly permit them, let them, or trust them to act on their own; to do so would be a violation of responsibility" (p. 72). Effective helpers tended to see their clients as dependable and worthy as well as able (p. 73). They also saw their tasks more as freeing than controlling (p. 74).

In his middle seventies, Carl Rogers wrote a fresh comprehensive book on personal power (1977), subtitled on the dust jacket *Inner Strength and Its Revolutionary Impact.* In assessing that book, biographer Kirschenbaum (1979, p. 431) points out its significance in this way: "Whether or not those forces in civilization which aim to give each person dignity, respect and control over his or her life are ultimately triumphant, Rogers will have taken a stand and played a part in the outcome."

In *Tools for Conviviality* (1973, p. xxiv), Illich distinguished whether tools restrict or enhance the person's control and power. "Scientific discoveries can be used in two opposite ways. The first leads to specialization of functions, institutionalization of values, and centralization of power—and turns people into the accessories of bureaucracies or machines. The second enlarges the range of each person's competence, control, and initiative, limited only by other individuals' claims to an equal range of power and freedom."

A comprehensive book on client participation in human services (Fischer and Brodsky, 1978) is subtitled *The Prometheus Principle.* That principle is stated thus: "Knowledge, power, and responsibility should be shared by all parties engaged in offering human services with those receiving such services" (p. ix). More precisely, the principle asserts that "if a citizen is to make optimal use of the human services professions, he must be enfranchised to participate actively both in the gathering and evaluation of information, and then in subsequent decision making and reckoning" (p. vii).

During the past few years, peer self-help groups or mutual aid groups have received much attention from social scientists (see, for example, Lieberman and others, 1979). According to our data in chapter 4, however, people receive even more nonprofessional help in individual one-to-one situations.

A particularly comprehensive and useful book about peer self-help groups has been written by Gartner and Riessman (1977). These groups have been developing rapidly in the fields of mental health, health, social work, and perhaps education. The authors point out that "one of the most significant characteristics of mutual aid groups is the fact that they are *empowering* and thus potentially dealienating. They enable their members to feel and use their own strengths and their own power and to have control over their own lives. This empowering dimension is extremely important for health and mental health" (p. 99). Gartner and Riessman also stated (p. 13) that human services should be centered on the client instead of the professional, and should recognize "the major extent to which the consumer serves himself or herself." On the same page they call for "a fundamental restructuring of the basic nature of the human services. The consumer, not the professional, should stand at the center. . . . Everett Hughes . . . once defined a 'quack' as one who satisfies his clients, but not his peers—a client-centered practice would label as a quack one who satisfies his or her professional peers, but not his or her clients!"

We turn now to several particular fields. In each one I will point out a few examples of recent and current efforts to shift from high professional control to shared responsibility and collaboration. Over the next few years, I hope these fields will strive to create and spread additional practices and techniques that incorporate this important shift.

Physical Health

In several movements within the health field, control and responsibility are being shifted from doctors, nurses, and hospitals to the patient. Most of these movements are still small compared to the total field of health care, but are flourishing and rapidly expanding.

1. Information and education for patients is one of these movements. Williamson and Danaher (1978) document the highly active process that people undertake in seeking information and help after noting symptoms. Increasingly detailed and sophisticated books on health care are being published for the intelligent lay-public. To provide access to medical information and tools, physician Tom Ferguson began *Medical Self-Care* Magazine in 1976. Classes for adults are becoming widespread. Here are the results found by

physician Keith Sehnert, a pioneer in the recent spread of courses for activated patients. "Many of my patients already are their own doctors—sometimes. They've learned to handle minor illnesses and emergencies without help, and major ones without panic. They have 'black bags' of their own, with everything from stethoscope to sphygmomanometer in them. They examine their youngsters' ears with otoscopes when they complain of earaches. They check husbands' and wives' heartbeats and neighbors' blood pressures. . . . They are members of that brand-new breed, the Activated Patient—a kind of hearty hybrid who is three-quarters patient and one-quarter physician. They've learned to speak the doctor's own language, and ask him questions rather than passively sit, honor and obey. . . . They are playing an important and needed role in a health partnership with their doctors" (Sehnert, 1975, p. 3).

2. Peer self-help groups are available for virtually every major health problem. In these groups, peers are the source of information and advice, and each member not only receives help but also helps others. Gartner and Riessman (1977, pp. 75–77) divide these mutual help health organizations into four categories.

- Rehabilitative groups help and encourage patients to adjust to their new condition after mastectomy, ostomy, heart attack or stroke, kidney transplant, or cancer.
- Behavior change groups help their members reduce weight, smoking, alcohol, or other drug abuse.
- Primary care groups are useful where no cure is available, but where chronic care is important. Examples are emphysema, arthritis, and diabetes.
- A smaller number of self-help groups are concerned with prevention and with case finding.

3. A few doctors and clinics are experimenting with having patients (or the parents of very young patients) keep their own medical records, or at least have access to them. This is a move away from the doctor exclusively owning all the knowledge and the expertise.

4. Certain techniques for actively controlling and healing one's own body are rapidly spreading. Of course, people have always been able to control and heal certain conditions, but the range of techniques is expanding. They include biofeedback, relaxation exercises, and imaging.

5. The women's movement has provided health education and information for many women, and has founded several women-run clinics and health centers. The movement has challenged the overall structure of health care as it affects women, particularly the influence exerted by male doctors.

6. Doctors are moving away from center stage during childbirth and are turning that central position over to the mother (natural childbirth) and father (now in the delivery room—a dramatic change since 14 years ago when I was not allowed in). More recently, thanks to the work of French physician Frederick Leboyer, the infant is entitled to center stage. The medical establishment's tendency toward drugs, surgery, and high technology during childbirth is still startlingly strong, though. In Metropolitan Toronto, a task force proposed a central intensive care unit for all high-risk births and "a computerized central registry in which every local pregnant woman would be risk-screened": it rejected a much less expensive plan combining education, nutrition, genetic counseling, midwives, and research (Worthington and Scanlon, 1979).

7. Holistic health centers and practitioners are becoming more widespread. Their approach focuses on emotional and spiritual well-being along with physical health. It also places major responsibility on the person to be at least as active as the professional in prevention and healing.

8. Care of dying patients is being discussed and transformed largely as the result of the pioneering efforts of physician Elisabeth Kubler-Ross. She raised the consciousness of many of us regarding dying persons: they are full-fledged persons with insight, a desire for authentic personal dialogue, and often a distaste for an impersonal high-technology environment. More dying patients, especially children and parents of young children, are being cared for in their natural home environment in the final stages. Hospices, too, are creating a more natural homelike environment in which the patient feels more fully human and significant than in some hospital situations. In some U.S. states, patients with incurable illnesses may now direct their physician to withhold or withdraw life-sustaining equipment without fear of legal liability.

9. Some hospitals and patients' groups have developed lists of patients' rights. A few hospitals give their bill of rights to all patients on admission.

Psychotherapy, Counseling, and Personal Growth

Carl Rogers begins his book on personal power (1977, p. 3) with the following story:

> Three years ago I was first asked about the politics of the client-centered approach to psychotherapy. I replied that there was no politics in client-centered therapy, an answer which was greeted with a loud guffaw. When I asked my questioner to explain, he replied, "I spent three years of graduate school learning to be an expert in clinical psychology. I learned to make accurate diagnostic judgments. I learned the various techniques of altering the subject's attitudes and behavior. I learned subtle modes of manipulation, under the labels of interpretation and guidance. Then I began to read your material, which upset everything I had learned. You were saying that the power rests not in my mind but in his organism. You completely reversed the relationship of power and control which had been built up in me over three years. And then you say there is no politics in the client-centered approach!"

In psychotherapy, counseling, and personal growth, most practitioners are trying or hoping to facilitate certain changes in the person, and most clients are intentionally seeking certain changes. In order to facilitate change more effectively, some professional helpers are trying to shift their stance from professional overcontrol to shared responsibility.

1. Both Carl Rogers and Arthur Combs (Combs, Avila, and Purkey, 1978) have been important in spreading a new view of the therapist. The key characteristics of effective helpers are their spontaneity, empathy, acceptance, respect, caring, self-concept, beliefs, and authenticity, not just their professional knowledge and techniques. They perceive and treat their clients as responsible, powerful, and competent. "The therapist becomes the 'midwife' of change, not its originator. . . . The locus of evaluation, of decision, rests clearly in the client's hands" (Rogers, 1977, p. 15). Richard Farson (1978, p. 9) believes that Rogers "invented a technique to eliminate technique." To be more specific, what happens is that "the therapist enters without benefit of technique, meeting the client person to person, not in control, vulnerable to whatever happens."

2. Within the field of behavior modification, some practitioners are moving toward self-managed change (Kazdin, 1978; Coates and Thoresen, 1979). Clients play a significant role in setting the targets for change, in choosing and modifying a set of strategies, in recording certain information about their own behavior, and in implementing these strategies. Kazdin also devotes half a chapter to certain techniques of cognitive behavior modification, such as rational-emotive therapy and self-instruction training.

3. Cocounseling, too, leaves the control of the process largely in the hands of the person with the problem. Even more important, the whole notion of one person being "one up" and the other being "one down" vanishes because the two people take turns being counselor and client. Two women I know, for example, charge each other $100 an hour for counseling. No money has yet changed hands because they have each received the same number of hours. One widespread form of organized cocounseling is Re-evaluation Counseling, founded by Harvey Jackins. Another leader in cocounseling, especially in Britain, is John Heron. He has provided an excellent foundation for understanding the process in his monograph on catharsis (1977).

4. W.R. Miller (1978) reported encouraging results with many problem drinkers who were given a self-help manual in lieu of group or individual therapy sessions.

5. Especially interested in how mental health professionals can intervene in the person's social network, Sarason (1977, p. 165) has listed six intervention strategies:

> First, family therapists have expanded their work into the social network of schizophrenics. Second, social scientists have worked with large peer groups of urban "dropouts" in an attempt to reach these youth effectively. Third, an institutional psychotherapist has tried to change a resident's network that he conceptualizes as a support for deviant or prosocial behavior. Fourth, community mental health practitioners have moved beyond the environments of families and schools to include all the essential people in a client's network to work towards a solution of the problems. Fifth, mental health people have intervened in networks of people in a crisis situation. Sixth, community mental

health professionals have intervened in naturally occurring day-care networks to improve their scope and functioning.

6. The President's Commission on Mental Health, too, focused attention on the importance of strengthening natural networks. It studied the possibility of "a major new Federal initiative in community mental health to . . . recognize and strengthen the natural networks to which people belong and on which they depend—families, kin, kith, friendship, and neighborhood social networks; work relationships, religious denominations and congregations; and self-help groups and other voluntary associations based on principles of intimacy and mutual aid" (Task Panel on Community Support Systems, 1978, p. 154).

7. In LSD therapy sessions, the therapist often lets the person's processes continue without heavy-handed intervention or interpretation. The most relevant unconscious elements and material usually emerge readily and spontaneously. "Because of this unusual property, LSD can be used as a kind of 'inner radar' that scans the unconscious, identifies the areas of high affective tension, and brings them to the open. . . . The phenomenology of LSD sessions thus reflects the key problems of the subject and exposes the roots and sources of his emotional difficulties on the psychodynamic, perinatal, and transpersonal levels" (Grof, 1975, p. 216).

8. When a young adult has a schizophrenic episode, the traditional model of treatment tries to control and abort the episode. John W. Perry, in contrast, established a center called Diabasis to provide a close trusting relationship so that the schizophrenic episode could continue and be supported. He views such episodes as an attempt at self-healing. The therapist allows the person's natural process to unfold, and does not try to take over control of that process. As one Diabasis staff member said, "What is called madness can best be understood as a journey of exploration and discovery, regulated by the psyche, in which the various elements of the personality can be reorganized in a more fruitful and self-fulfilling way" (B. Heller, quoted in Rogers, 1977, p. 25).

9. In some approaches to therapy or personal growth, the professional helper guides the process but not the content. In fact, the helper may not know what content the person is dealing with at the time, and even afterwards may not find out. In a journal workshop,

for instance, the participants may not be asked to share the content of their writing. In some psychosynthesis exercises the content is controlled by the person's subconscious or higher self, not by the therapist. A primal therapist once explained to me that he often has to sit patiently beside the client for an hour at a time without knowing the content of the client's highly emotional and dramatic process.

10. That same primal therapist tries to teach his clients how to deal with primal experiences so they can then do this on their own. In fact, one of the major outcomes of the widespread human growth movement may simply be that people develop a repertoire of techniques and exercises from which they can choose in future when faced with a problem. Whenever I discuss this notion with my graduate classes, I am impressed by the number of persons who use journal writing, informal cocounseling, dream work, topdog-underdog dialogues, self-guided fantasies, and cathartic emotional expression for dealing with various emotional crises and personal problems. No wonder the theme "Power to the Person" was chosen for one of the annual meetings of the Association for Humanistic Psychology!

11. Many self-help books, too, provide suggestions, exercises, and techniques for use when appropriate. Some self-help books try to overcontrol the person's process, but others offer a variety of suggestions from which the person can choose. *The Dream Game* by Faraday (1976), for instance, outlines three broad ways of working with dreams, rather than a single tightly controlled path.

12. In some approaches to human growth, the content itself emphasizes the power and adequate self-image of the person. I remember Virginia Satir at one workshop drawing three diagrams to illustrate interaction in which (1) I erase myself, (2) I erase the other person, (3) we are both okay. The TA phrase "I'm OK, you're OK" captures a similar stance. Assertiveness training, too, encourages us to stand up for our own rights and needs, but without putting down the other person. In couple communication, the most effective orientation is "I count and I count you—we both count" (Miller, Nunnally, and Wackman, 1975).

13. Peer self-help groups for those with addictions, mental health problems, and emotional crises are rapidly spreading. Groups exist for battered wives, addicted gamblers, alcoholics,

schizophrenics, overweight persons, drug addicts, parents of children with cancer, persons in debt, stutterers, divorced persons, families and individuals with emotional problems, people afraid of flying, former patients of mental institutions, people with high IQs, ex-offenders, parents of children who have died of Sudden Infant Death Syndrome, parents of autistic children, neurotics, parents of abused children, families of prisoners, people with phobias, facially disfigured persons, and widows (Gartner and Riessman, 1977, app. A). Professional helpers are involved at times with some of these groups, but are rarely permitted to overcontrol them. Professionals in several fields are struggling to work out appropriate forms of interaction with self-help groups.

14. The mental patients' liberation movement has documented the inappropriate uses of involuntary commitment, and the ways some mental patients are treated. "Occasional instances of kindness and compassion stand out in sharp contrast to overwhelming isolation and contempt imposed by most forms of 'treatment.' We came together to express our anger and despair at the way we were treated. Out of that process has grown the conviction that we *must* set up our own alternatives, because nothing that currently exists or is proposed fundamentally alters the unequal power relationships that are at the heart of the present mental health system. Power, not illness or treatment, is what the system is all about. It is a power that usually is not spoken about. (Patients who do are often labeled 'paranoid.')" (Chamberlin, 1978, p. xiii). Chamberlin's book also describes some of the genuine alternatives that have been developed for helping people experience great emotional pain and distress.

15. Some psychotherapists and mental hospitals are experimenting with written treatment contracts. During the negotiation process, the patient plays an active role in choosing the problems, treatment goals, and treatment methods. Responsibility is more shared than in traditional psychotherapy. "The participants perform roles that are more equal than is general in the early phase of the therapeutic encounter. Because they are engaged in a common task which demands responsibilities from each, the process conforms to many of the principles of consumerism. That is, the patient is encouraged to behave as someone who has rights, is seeking a service and has to make a series of choices and decisions about the treatment he is offered" (Rosen, 1978, p. 413).

Social Work

Some social workers, instead of themselves being largely in charge of the client's changes, are now working with natural neighborhood helpers, natural support systems such as relatives and neighbors, and mutual help networks. Several of these exploratory ventures have been described by Collins and Pancoast (1974) and by Caplan and Killilea (1976). I was impressed by the size and enthusiasm of a 1980 conference on this theme at the University of Toronto (Shapiro, 1980).

Another important but much narrower approach is to work only with face-to-face groups that meet at scheduled times. These peer self-help or mutual aid groups have been thoroughly examined by Gartner and Riessman (1977) and by Lieberman and others (1979).

The dramatic effects of relating authentically to handicapped children at a summer camp, and encouraging them to break free from imposed activities, are movingly portrayed by Ron Jones (1977).

Adult Learning

Certain shifts from professional overcontrol to shared responsibility are evident in continuing education, management development, professional and staff development, parent education, and other areas of adult education. The need for these shifts has been well documented during the past few years.

The process of self-planned learning has been recognized as widespread and successful in a recent research review (Tough, 1979, postscript). This review of more than 20 research studies pointed out that the learner makes the day-to-day decisions on what and how to learn in 73% of all adult learning efforts. An early study of such learning efforts found that the learner could recall actively performing a median of nine different teaching and planning tasks, such as setting the learning goals and planning the strategy, in each learning effort (Tough, 1967). About 7% of the adult's learning projects are planned by a friend, neighbor, or other nonprofessional. These figures mean that only about 20% of all intentional learning efforts by adults are planned and guided by professionals. About 10% rely on a professionally led group, 7% rely on individual instruction from a professional, and 3% rely largely on the guidance provided by a book or other nonhuman resource.

In a national survey of the United States, Penland (1977, p. 32) studied the reasons people have when they choose to learn on their own instead of taking a course. Here are the four reasons that were most often selected as particularly important from a list of ten:

1. desire to set my own learning pace
2. desire to use my own style of learning
3. I wanted to keep the learning style flexible and easy to change.
4. desire to put my own structure on the learning project

To me, it is highly significant that every one of these common reasons reflects the issue of control. In all four reasons the person wants to retain control and retain his or her own natural process, not have a professional instructor take over. The other six reasons in this study were selected less often, and do not particularly reflect the issue of control. Adult educators traditionally say people lack money and transportation for attending courses, but these two reasons ranked last.

In a report for the U.S. government, Ziegler concluded that "society, in all of its structures and institutions of human interaction, should remain sufficiently open, participatory and pluralistic to enable a robust, noncentralized, highly diversified system of adult learning to flourish. That conclusion suggests that public policy should *not* aim at supporting lifelong learning, for historically public policy support has led to *prescribing, limiting,* and *rendering compulsory* the human activities on which it focuses" (1977a, p. i). He urged that public dollars be allocated to organizations or programs according to how well they nurture adults' competencies in planning and evaluating their own learning, and promote their interest in further learning.

In an important synthesis called *The Missing Link,* Cross (1978) examined the question of what should be done to foster and facilitate adult learning even more than society does now. According to her, the fundamental issue in this debate is the question of who should have the primary responsibility for planning and directing the entire adult learning enterprise: (1) educators, planners, and organizations or (2) individual adult learners. "If one wished to find some middle ground on which to base agreement . . . most people could probably rally around the concept of self-planned learning for adults. Self-planned learning implies that the learner makes the decisions about learning goals, selecting from a wide variety of materials and resources those that best fit his or her goals" (pp. 3–4).

In 1976, the U.S. Congress passed a Lifelong Learning Act, and in 1978 the first annual report under that act was published (Lifelong Learning Project, 1978). After describing various concepts of lifelong learning, the report stated that "the problem with all these views of lifelong learning is that they focus on programs rather than on learning and learners. In this report, *lifelong learning* refers to the process by which individuals continue to develop their knowledge, skills, and attitudes over their lifetimes. . . . All deliberate learning activities are included, whether they occur in the workplace, the home, through formal or nonformal organizations, through traditional or nontraditional methods, or through the self-directed efforts of the individual himself or herself" (pp. 1–2). The report urges "greater emphasis on learners and their learning in government policies, programs, and research" (p. 5). Although the federal government is already heavily involved in adult learning, "the Lifelong Learning Act signals a promising shift in emphasis and perspective. Instead of stressing institutions, degrees, and programs labeled 'education,' it speaks of people, how they learn, what they learn, and where they learn. It considers the things people need to learn throughout their lives in order to survive, cope, be happy and productive, love, and grow old with dignity" (p. 18).

In 1979, Unesco convened a meeting of "European experts on the forms of autonomous learning" in Paris. At that meeting, I was impressed by the widespread interest and experimentation in shifting from classroom teacher control to individual learner participation in the responsibility for pace, methods, and content.

Let us move now to the more specific level: some examples of the shift from high professional control to shared responsibility.

1. Although only about 10% of adult learning efforts are guided by an instructor in a group, this is the stereotype of adult learning that first comes to mind. Also, it is this situation that many professional adult educators first think of changing when they want to shift toward greater sharing of responsibility. Several of their approaches are labeled "self-directed learning" although, in fact, they vary somewhat. Roger Harrison (1977) has successfully provided self-directed learning opportunities for groups of managers and administrators in large organizations. Each participant is encouraged to initiate (or withdraw from) any activity in order to meet his or her own needs. In addition, each person is free to manage his or her individual cycle of moving back and forth between risk/stress and reflection/integration. "We believe that the freedom self-directed

learning gives to follow this stress management cycle is a major reason why our programs can deal with highly charged and deeply personal material with a much lower level of stress than is true of more 'groupy' programs" (p. 87). An unpublished paper by Joffre Ducharme movingly described his success with a self-directed approach to learning in a one-week management workshop with first-line supervisors in Canada's taxation department. Early in the week each supervisor was encouraged to select specific change goals, and then he or she spent the rest of the week using various human and nonhuman resources to achieve these individual goals. In working with groups of illiterates, Paulo Freire (1970) did not arrive with a set of curriculum, but instead helped the people discover words with special meaning and power for them. Several other approaches to self-directed learning occur in university credit courses for adults, and will be described in the following section on higher education.

2. Any workshop or course, regardless of its format, can encourage the participants to continue their learning after the course is finished. In the United States, for instance, the Executive Development Department of Westinghouse Electric Corporation has developed a large form for participants in a three-week program for general managers. Called a continuing personal development plan, this worksheet has four columns. The instructions explain that "the *subject* column is for listing where you want to go—the area where you perceive a significant gap in your level of competence. The *sources/resources* column is to identify how you are going to get there. You might want to list books or articles you may know about, a seminar or course that might be valuable, people you may want to talk to. *Strategies and time frame* is where you spell out the what and when. The *evidence of attainment* column is where you may want to list indicators you will use to judge 'when you have arrived.' These indicators might take the form of operational results, personal evaluations, or evaluations by others." In Canada, at their three-day course in essentials of management, Commonwealth Holiday Inns of Canada provide each learner with a self-assessment instrument and a form for listing changes to be implemented after the course.

3. For evaluating proposed or actual programs in lifelong learning, Ziegler (1977b) has developed a fascinating 30-item instrument. The items rate the extent to which the program enhances or inhibits the following: the learner's responsibility for choosing his

or her learning goals and strategies, the learner's competence at planning and evaluating learning, and the learner's future enthusiasm and opportunities for learning.

4. Individual learning contracts are being used more and more for continuing professional development. A learning contract spells out the person's goals and strategies (and perhaps the methods for evaluating achievement) for one major learning project. A federally funded project in Kansas enabled mental health professionals to develop and carry through their own learning contracts. Details of this project have been reported in the various issues of *Self-Directed Professional Development Newsletter* and in Keeney (1980).

Individual learning contracts also make good sense as one option for professionals who must undertake continuing education in order to retain their professional license or certificate, or in order to maintain or improve their salary level. In some states and professions, recognition is given to individual self-directed learning as well as courses and workshops. Cooper and her committee (1978) have developed a useful document for use by state licensing and continuing education approval bodies. To alleviate the feeling of being locked in by an approved learning contract, their document states that "as the learner carries out the project, the proposed plan may be modified. Expected outcomes or objectives may change [as a result of] new developments or expanded knowledge. Learner's needs or interests may change. . . . Such changes (with rationale) should be incorporated into the final report, but they do not require renegotiation with the approval body" (p. 5).

Individual learning contracts are also used more and more within university credit programs, as we shall see in the section on higher education.

5. In Nancy, France, a person who wants to learn any aspect of English for any purpose is given an excellent range of options at the Centre de Recherches et d'Application Pédagogiques En Langues (Stanchina, 1976). The person chooses his or her own combination of helper, outside help, simulation, task matching, peer matching, personal reading materials, friends and neighbors who speak English, cassettes, written texts, and a sound library. Each helper in the center is skilled at diagnosing particular linguistic difficulties and at suggesting appropriate methods. At the 1979 Unesco meeting on autonomous learning, I did not hear of any other language center or system that gave learners as wide a choice of options. In my opin-

ion, this general approach could be very useful for helping people learn many other types of subject matter too.

6. Learning networks, such as The Learning Exchange serving Evanston and the greater Chicago area (Lewis and Kinishi, 1977), are very close to the learner-control end of the continuum. They do not try to control either the goals or the methods of learning. Instead, they simply provide the names and telephone numbers of persons who can serve as helpers with whatever sort of learning or change the caller wishes. Thousands of learners and helpers have been matched by the successful learning networks.

7. A few agencies are experimenting with group support and stimulation for self-planned projects. Ronald Gross is exploring the possibility of developing centers in major American cities for advanced scholars who are not working at a university or similar institution. In San Francisco, the Humanistic Psychology Institute has launched three mentor programs. According to their 1980 brochure, "the programs are patterned after the medieval mentor-student relationship. . . . The core of the Mentor Program is the working group, composed of the mentor and fellows. Fellows pursue creative individual projects of their choosing; the mentor serves to guide, support, and facilitate these projects. . . . The working group provides the fellows with the opportunity to meet others of like mind and commitment, thus giving valuable support and shared feedback for the mutual realization of their goals."

Higher Education

We turn now to shifts in colleges and universities from high instructor control to shared responsibility. Before examining several recent examples, though, let us briefly note that other examples have a long history. Over the decades, some instructors have given their students a free choice of topic or focus for essays, projects, and other assignments. Many theses and dissertations have been examples of shared responsibility. On many campuses, students have had an option of taking one or two individual reading courses or independent study courses. Some academic advisors have helped students clarify their goals before choosing appropriate courses.

In recent years, some additional efforts to reduce instructor control have been implemented. Although somewhat diverse at first glance, these efforts have one thing in common: an attempt to shift

from a high degree of control by the instructor, from an attitude of "the instructor knows best," to greater choice and control in the hands of the students. The responsibility for choosing what and how to learn is partially shifted away from the instructor. It may be shifted to a set of materials, to the individual learner, to small groups of learners, or to the whole class.

1. Sometimes the detailed control over what and how to learn resides in a set of tape recordings or programmed instruction materials, often called "individualized instruction." Most of these preprogrammed materials shift only two sorts of responsibility to the learner: when to learn and at what pace.

2. Competency-based degree programs have become common in recent years. The competencies required for the degree are spelled out, along with assessment procedures for judging when the student has gained each competency. "The competency-based program has as one of its features a separation of the learning processes from the assessment or certification process, a separation of teacher from assessor. . . . It gives responsibility to different persons for planning and monitoring the two phases" (Josephs, 1978, p. 13). In my opinion, basing credentials and hiring on demonstrated competencies (not on how the person gained the knowledge and skill) is a giant step toward freeing up higher education. The important question of who should decide the appropriate competencies was raised by Daloz (1978). He urged that students be encouraged to write their own competence statements, which may differ from those of other students. Adjusting to such diversity of learning may be painful for the college or university: "It must be willing to take the chance that its 'products' will differ widely from one another, recognizing that 'quality control' is not necessarily synonymous with 'content control' " (p. 26).

3. In a few colleges and universities, students are helped to learn how to set goals and plan their strategies, and generally "learn how to learn." Robert Smith has written a comprehensive paper (1976) on this topic and provides workshops for his students on learning how to learn. A project in England experimented extensively with a variety of approaches to increasing the capacity of students to organize their own learning. These approaches included conversations to help students develop and clarify their own natural language for talking about the purposes, strategies, outcomes, and evaluation of their learning efforts. The report on this project concluded that

"even a small shift in emphasis from teaching to systematically encouraging the development of learning skill would produce a massive educational pay off. . . . Learning-to-Learn should become a central theme. . . . Whether changes in the destiny of humans is brought about by Malthusian type checks or by wisdom or foresight, depends largely on the experience we now offer for learning-to-learn in the classrooms, lecture rooms, studies and laboratories of our educational institutions" (Thomas and Harri-Augstein, 1977, p. 211).

4. Ginny Griffin has developed a highly effective self-directed approach to teaching in her graduate courses. Early in the course she brings differences in learning style and philosophy to the surface through questionnaires and discussion. Throughout the course she increasingly leaves the responsibility for decision-making with the students. Because of her reputation as an excellent teacher, however, some students initially expect her to be strongly in control. As Griffin put it in a highly insightful review of self-directed learning (1978, 1979): "So people come, expecting me to 'do it to them,' to watch the master at work. After about nine hours together, they begin to realize that although I am going to be fully engaged, whatever good that's going to happen to them, they have to make happen themselves. That point of realization used to be called 'dump the professor' night. Now that I'm aware of the process, and try to prepare us all for it, it is more subtly known as the moment when 'the penny drops.' People have taken on responsibility for what happens to them" (1979, p. 13). The students' experiences with Griffin's approach have been described in detail by Bates (1979).

5. Malcolm Knowles (1975, pp. 44–58) has described his approach to a 15-session graduate course. Before and during the third session, each student develops a learning contract, which can subsequently be revised or renegotiated as the student's interests change or become clearer. Certain knowledge and skill that most students have included in their contracts is handled by small groups ("inquiry teams"), who make class presentations during the eighth meeting through the thirteenth meeting. At the end of the course, each student is allotted up to 45 minutes to present evidence, to two peers, of having accomplished his or her objectives.

6. Originally trained as a school teacher, I believed the instructor should control almost all decisions about what and how stu-

dents learn. Later, though, as I listened to more and more interviewees tell me about their highly successful and enthusiastic learning outside of educational institutions, I began to question my own teaching approach in my graduate courses. Perhaps the students would learn more relevant knowledge and skill, and learn it more effectively, if I allowed their course learning to resemble their real-life learning (Tough, 1979, chaps. 10 and 14). As I have let this occur over the years, my teaching has evolved into a rather unusual approach, but it works well for me and for the particular students in the particular graduate courses I teach.

I definitely retain *some control* over what and how students learn. I continue to have some definite structure, requirements, and boundaries even though I keep these to a minimum. I stay within the range of instructor control that is most effective for student learning, but I try to keep near the lower end of that range. I largely control the overall sequence of topics and activities for class sessions and provide brief lectures and other input. Although I facilitate the discussion and group process, I do so with a light hand and without trying to control the detailed content. In order to pass the course, students are required to spend at least 120 hours (more for higher grades) at highly deliberate learning efforts that are clearly within the subject matter boundaries of the course. They also must read 15 books (more for higher grades) from my 60-item course bibliography: they then rate these books, and when I revise the bibliography I am guided largely by their votes. These requirements are negotiable by individual students after they have spent two weeks trying to operate within them.

Within the structure just described, each student has complete *freedom of what and how to learn.* In the 90 hours of learning outside the classroom, each student is largely free to plan and modify an individual learning path. In a sense there are 18 different individual courses within the one graduate course if there are 18 students in the class. I urge the students not to plan too far ahead: their interests, questions, and activities are bound to change as they gain new ideas and experiences early in the course. Class sessions serve largely to open up topics for the students, to provide support and enthusiasm for their individual learning paths, and to provide a safe haven where their difficulties and adventures and new thoughts can be heard sympathetically. I have virtually no power to control the student's grade, and am therefore perceived primarily as a helper or a facilitator of learning with whom the student can be

completely honest, open, and vulnerable without fear of receiving a lower grade as a result.

In my experience, it is not enough for an instructor to set a minimum amount of structure and then to give students plenty of freedom with what and how to learn. In addition, students need *access to plenty of help and resources.* This help is not compulsory and has no strings attached. I became aware of the enormous amount of help that people receive during real-life self-planned learning in my first research study (Tough, 1967), in which I found that the adult receives help from an average of 10.6 individuals during a single learning project. Class sessions provide support and energy, and also help students choose their individual directions. I encourage students to discuss their particular interests with other students in the class who have similar interests, and even to find a learning partner for the entire course from within the class or elsewhere. Exercises, a list of individual interests, coffee breaks, and class discussion all help students discover appropriate resources among the class members. The amount of human interaction is much higher with this teaching approach than in a traditional course. To help students choose and gain access to relevant books, I provide an annotated bibliography and lend my own books to students.

This approach unleashes a surprising amount of energy, enthusiasm, creativity, and diversity. The majority of students report that they read and learn more than in traditional courses. In Toronto, Vancouver, and North Carolina, students in my courses have used an amazing variety of methods and activities (far more than I could have ever suggested to them) to learn a wide variety of knowledge and skill. I treasure the diversity that is evident in their progress reports (they bring copies for everyone in the class) and in their final report to me (they describe the highlights of what and how they have learned).

My approach fails with a few students, however. They may expect and want a different approach, a different climate in the total group, or more time in smaller groups. They may be uncomfortable with the diversity of paths, and want the total group to reach agreement on goals and norms. They may like to engage in power struggles with their instructors, but cannot find a target against which to struggle within this approach.

7. Scott Armstrong has experimented with time contracts in five marketing courses at the Wharton School of the University of Pennsylvania. The students who selected this option kept a daily

diary on course activities, time spent, and knowledge and skill learned. Students who satisfied the instructor that they had spent between 100 and 124 hours at the course received a pass, those with 125–140 hours were graded as "high pass," and those over 140 hours were "distinguished." This approach encourages students to take responsibility for their own learning. "In addition, because the time contract eliminates the need to grade the student's output, it provides a better environment for learning" (J.S. Armstrong, 1980). Armstrong's data indicate that students using time contracts spent more time at learning, felt more responsible for their learning, and were more successful at changing attitudes and behavior, compared to their experiences under traditional teaching approaches.

8. Allender and Silberman (1979) experimented with three variations of student-directed learning. In one version the teacher structured various inquiry activities. A second variation emphasized learning in groups of peers. The third version was an individual mode, in which the student's learning was initiated by his or her own questions, and was organized by the student's own personal timetable. The individual mode was superior on some measures.

9. Most of the changes described so far involve a change within a course in which a group of students begin on a certain date to learn within one subject-matter area. In some colleges, however, students take few or no courses of this type. Instead, each student (in consultation with a faculty advisor or mentor) develops individual objectives and learning activities for each course. If groups of students meet at all, they do so to help and encourage and sometimes evaluate one another, not to learn or discuss content. Many colleges have permitted students to take one or two reading courses, individual study courses, independent study courses, or whatever that college calls an individually developed course. Only recently, though, have some colleges and universities expanded this approach to the student's entire program.

The McMaster University program (in Hamilton, Ontario) that produces medical doctors and other health professionals is one of the best and most widely known programs of individual learning. Much of the student's learning time is spent at individual needs and interests, both academic and practical. One medical student whom I interviewed, for instance, was the only person in her support group who needed to learn biochemistry. She was doing this on her own, with help when needed from one faculty member. The medical doctors produced by this program spend the last two months

studying for nationwide examinations and achieve at least as well on the average as doctors trained in more traditional programs. This certainly points up the absurdity of a comment that I have heard several times after telling audiences about individual learning: "I certainly wouldn't want to use doctors or plumbers or car mechanics who taught themselves!"

Several colleges use individual learning contracts as their basic approach. By having program advisors in most major cities, Campus-Free College (now called Beacon College) has demonstrated the possibility of providing individual programs of study throughout the United States and Canada. Mark Cheren, one of the early leaders in Campus-Free College, produced a manual for the program advisors (1978b) and also studied the transition that students had to make from external direction in learning to greater self-direction in learning at Campus-Free College (1978a).

The section describing learning contracts in MacKenzie, Postgate, and Scupham (1975) described the three "systems of personalized study" at Empire State College, Minnesota Metropolitan State College, and the Community College of Vermont. The first of these has produced an interesting study of the role of the mentor in developing the individual learning projects (Bradley, 1975). Berte (1975), too, has provided useful insight into contract learning.

My only concern with learning contracts is the possibility that they sometimes produce a feeling of being locked in. Even when the student is told that the contract can be renegotiated anytime, I worry that having the objectives and learning activities spelled out on paper will produce a reluctance to reconsider and modify them. The need for flexibility throughout the learning was demonstrated when I asked David Yule to draw a diagram of his learning paths for one individual learning course he did with me. The diagram (reproduced in Keeney, 1980, p. 61) was intricate and complex. There is no way Yule could have sat down at the beginning and developed such a complex diagram. Even more important, his interests and questions and directions kept changing as he went along, because his knowledge and perspective and inquiry kept changing. After all, that is what inquiry and learning are all about!

Holland College in Prince Edward Island provides partially individual personalized programs for its students. One feature is the highly specific analysis of possible learning objectives for each career field that the college provides. This detailed chart of possible objectives helps students choose their optional objectives and learning activities, and also serves as a basis for evaluation and as a

record of achievement. In fact, this chart serves as the student's "diploma," and can show potential employers exactly what knowledge and skills the student has learned.

Such a chart might be useful during job-hunting for the person who has deliberately learned for two or three years without attending college at all. Coyne and Hebert (1972, p. 127) suggested that such persons develop a bound portfolio that includes descriptions or papers they have written.

10. Giving academic credit for learning that occurs at work, as a homemaker, or in other real-life situations is another movement that reduces professional control. Houle (1973) has documented this "third generation" of degree programs for adults. The publications of the Council for the Advancement of Experiential Learning have described various approaches in detail.

Elementary and Secondary Education

Although this book focuses largely on adults, some of the findings and implications probably apply to adolescents and perhaps even to younger children. Briefly, then, let us examine secondary and elementary education.

For at least 40 years, some schools and teachers have experimented with a shift from high teacher control to shared responsibility. Many teachers encourage students to choose a topic or project of interest for an assignment or essay within one course. Some teachers set the learning objectives, but leave students free to choose their own methods and resources. In some schools, students may choose individual or independent study for an entire course.

The Association for Supervision and Curriculum Development established a Project on Self-Directed Learning in 1977 and published a book focusing specifically on that approach in 1979. The book opens with the following declaration: "In a democratic society, students need to have opportunities to learn how to choose *what* is to be learned, *how* it is to be learned, *when* it is to be learned, and *how to evaluate* their own progress" (Della-Dora and Blanchard, 1979, p. 1). The opening chapter describes what one finds (1) toward the school-directed end of the continuum, (2) at the shared responsibility ("self-directed") position on the continuum, and (3) at a point midway between these two positions in each of the following areas: deciding what is to be learned, selecting methods and materials for learning, communicating with others about

what is being learned, and evaluating achievement of goals.

Gibbons and Phillips (1978) described the crises and difficulties for both teachers and students when making a transition from teacher-directed to self-directed learning. After describing several phases characteristic of students who are making this transition, the authors suggest specific strategies for each phase. "Whatever the difficulties involved, it is important that students learn to direct their own education before they leave school. . . . We believe that no educational institution—whether kindergarten or graduate school—has completed its task until its students have demonstrated their ability to plan and implement their own learning programs" (p. 300).

There is a small but growing trend among parents to educate their children at home, at least in the United States. For these children, this is a major step away from high control by the professional educational establishment, although it is also possible for parents to overcontrol. According to Harris (1979), more than 700 parents subscribe to John Holt's *Growing Without Schools* newsletter, and the Council for Educational Freedom in America has launched a campaign to halt state-ordered schooling. Although 32 states have some statutory provision for alternatives to attending school, court battles sometimes occur regarding the quality or standards of the home education.

Library Practice

In recent years, some librarians have been giving particular attention to their clients' natural process of changing, learning, or seeking information, and have been trying to fit into that process more effectively. Some librarians are increasingly seeing themselves as a learning consultant, a helper, a counselor, or a highly flexible link between the client and various information systems and sources.

An intensive study by Carr (1979) of the interaction between librarians and their clients underlines the importance of this shift. His study concluded that the following librarian characteristics, along with several others, were especially important in distinguishing helpful episodes from unhelpful episodes: (a) ability to attend to and know the learner as an individual with an inquiry unlike any other, (b) willingness to explore all potential courses of inquiry, guided by a standard of optimal fit, and (c) sensitivity to the learner's need for self-esteem, autonomy, reassurance, and competence (p. 221).

Religion

For some people, the largest intentional change during their adult years is their spiritual growth. For example, they become closer to God, they seek mystical experiences, they are baptized in the Holy Spirit, or they develop insights into the ultimate meaning of life and the universe. Although a remarkably large number of people are turning to the established religions these days, many other people are following their own paths. On their own or with friends, without help from a religious professional, they meditate, pray, seek God in wilderness solitude or by the ocean, experience cosmic union through psychedelic drugs, create their own religious rituals, seek ultimate meaning through myths or dreams or reading, or pursue mystical experiences through such means as music, chanting, or sex. Wickett's (1977) conception of spiritual growth became wider and wider as his interviewees told him about a surprising variety of personal paths for religious and spiritual change.

Another significant intentional change for many of us is entering into marriage. It is fascinating that to be married we typically turn to a religious professional (priest, minister, rabbi, etc.). Some persons, however, are now planning or writing part of their own marriage ceremony. A small but growing number are choosing to live together without going through a legal or religious service. A few of these hold an unofficial ceremony or celebration with friends and relatives.

Families

I regard parents as quasi-professional helpers with their child's intentional changes. They are designated by social custom, even by law, as the persons responsible for helping their children to change and develop in certain ways. In fact, too, most parents play significant roles in many of their child's changes.

Many parents overcontrol their children. In stores, parks, and streets, I am amazed at the number of commands and criticisms parents direct at their children.

Other parents provide a definite contrast, fortunately. They love their children as they are, and help them choose and achieve the goals and changes that the children want. They fit into each child's particular process of change, growth, unfolding, goal-setting, play, and learning. They provide a good balance of freedom and control, with plenty of help and resources available for the child's use. If

these parents make a decision that affects the child, they will usually give the child plenty of information about the decision and the reasons for it.

Around the middle of this century, according to DeMause (1974), a new mode of parent-child relationships became evident in some families. DeMause called this the helping mode, and he compared it to the socialization mode of the preceding century and a half and the intrusive mode of the eighteenth century. "The helping mode involves the proposition that the child knows better than the parent what it needs at each stage of its life, and fully involves both parents in the child's life as they work to empathize with and fulfill its expanding and particular needs. There is no attempt at all to discipline or form 'habits.' Children are neither struck nor scolded, and are apologized to if yelled at under stress" (p. 52). DeMause has suggested that this sort of parent-child relationship "results in a child who is gentle, sincere, never depressed, never imitative or group-oriented, strong-willed, and unintimidated by authority" (p. 54).

A widely learned approach to child-raising in recent years has been Thomas Gordon's "Parent Effectiveness Training." Gordon (1970) has clearly confronted the issue of power and control. He has spelled out a method of conflict resolution in which child and parent cooperate as partners in a joint search for a solution acceptable to both of them. Gordon called this "a no-power method—or more accurately a 'no-lose' method: conflicts are resolved with no one winning and no one losing. Both win because *the solution must be acceptable to both*" (p. 196). The results are in marked contrast to the battles that occur in the many households in which one or both parents exert power over the child (or in the smaller number of families in which the children are allowed all the power and the parents usually give in).

Gordon has also discussed another type of situation, in which the child's behavior or beliefs do not interfere with the parent's rights or goals in any concrete tangible way. For example, the child or adolescent may believe strongly in the right to choose his or her own friends, values, clothing style, and hair length. Parents sometimes have difficulty at first in accepting Gordon's "principle of allowing the child freedom to become what he wants to become, provided his behavior does not tangibly and concretely interfere with the parent becoming what he wants to become" (p. 273). The P.E.T. approach helps parents handle this situation by modeling their own values, and by offering themselves as a consultant to the

child or teenager. As with consultants in the business world, however, the successful parent-consultant is first clearly "hired" by the child, "*shares* rather than preaches, *offers* rather than imposes, *suggests* rather than demands. Even more critical, the successful consultant shares, offers, and suggests usually no more than *once.* . . . The successful consultant offers his ideas, then *leaves responsibility with his client* for *buying* or *rejecting them*" (pp. 275–276). What a contrast to the hard-sell approach and constant hassling used by most parents to try to change their child's values, clothes, hair length, or lifestyle!

Richard Farson is interested in reducing not only parental overcontrol but also parental guilt at not successfully changing their children into the exact ideal person of the parent's dreams. In *Birthrights* (1974, p. 15), Farson has said that "parents need to be freed from the burden of guilt that comes from believing that they are solely responsible for what their children become." He has also claimed that the hundreds of books giving advice on how to raise children have one overwhelming problem: "They convey the erroneous idea that it is indeed possible to raise children; that there is a way to do it; that one can successfully manage, control, stimulate, and motivate them; that one can make them creative, well-mannered, healthy, adjusted, informed, and aspiring; and that one can discharge these responsibilities with judgment, taste, style, contentment, intelligence, and a minimum of frustration and doubt. What the books don't tell is that being a good parent isn't just difficult, it's impossible. There is simply no way to be a good parent in a society organized against children" (p. 13).

In 1975, Howell pointed out the advantages of each family's relying on itself and on networks instead of relying unduly on institutional and professional help. Here is her position: "I believe that our families could thrive by: (1) working to develop trusting relationships with a wide human network of kin, friends, neighbors, and others with whom we feel a sense of community; (2) insisting that 'experts' share with us the knowledge and skills that we need to conduct our own affairs; (3) utilizing the paid services of professionals at our own convenience—that is, only when *we* wish to do so, and on *our* terms" (p. xiii).

Personal Liberation Movements

In personal liberation movements that have flourished since 1960, many people have developed their feelings of self-esteem, compe-

tence, power, and success. Some of the movements also preach that their members do not have to be "dependent upon systems purporting to meet their 'needs' through individualized professional help" (McKnight, 1977, p. 80). In fact, some movements explicitly reject the views of professionals as erroneous and damaging.

The women's liberation movement helps women sense and treasure their power, competence, success, self-worth, importance, skills, talents, strengths, and contributions. It helps each woman take control of her life, discover and choose the paths that suit her, and become more assertive in gaining her own rights and goals. She is encouraged to stand up for herself as a full-fledged person when dealing with professionals such as lawyers, therapists, loan officers, and medical doctors. It is significant that the women's liberation movement, which I see as the most successful adult change enterprise of the past 20 years, relies largely on peers and volunteers rather than professionals. Some researchers, such as Posluns (1981), are using intensive interviews with women to study the natural change process of becoming free of sex-role stereotyping in attitudes and behavior.

Children, probably more than any other groups, are dramatically overcontrolled. Children suffer from "the root pathology of human relationship in all but the simplest, most egalitarian human societies: the drive to dominate, to mold the other. . . . Most western adults would not dare talk to their peers the way they talk to children or to their elderly parents. Nor would they themselves accept the interruptions, corrections, demands for attentiveness and instant displays of affection that children accept as a matter of course" (Boulding, 1979a, p. 6). In his book on birthrights (1974, p. 27), Farson stated that "children, like adults, should have the right to decide the matters which affect them most directly. The issue of self-determination is at the heart of children's liberation. It is, in fact, the only issue, a definition of the entire concept. . . . Children would, for example, have the right to exercise self-determination in decisions about eating, sleeping, playing, listening, reading, washing, and dressing. They would have the right to choose their associates, the opportunity to decide what life goals they wish to pursue, and the freedom to engage in whatever activities are permissible for adults." Boulding presented a similar theme: "The theme of all human rights covenants, and the motif of all liberation movements, is participation in the shaping of one's own life and that of the society around one, and reasonable access to resources that will make that participation possible" (1979a, p. 7).

Several of the personal liberation movements are refusing to let psychiatrists, psychotherapists, clergy, or other professional helpers define them as deficient, abnormal, or mentally ill. Some former mental patients are organizing against oppression and negative definitions. Gay persons, though no longer officially classified by psychiatrists as mentally ill, must still struggle against being perceived and treated this way by some professional helpers. Some professionals even deny the existence of certain types of people that do, in fact, exist, such as those with bisexual preferences or with psychic sensitivity. Klein's book (1978) has contributed to the recognition and liberation of bisexual persons, and "psychic lib" groups in California are helping psychically sensitive people to accept and treasure their special abilities.

Governments and Society

Until now, this chapter has dealt largely with the interaction between a helping professional (or paraprofessional or parent) and the changing person. Some helpers are shifting from high control to shared responsibility. Some parallel shifts are occurring in the broader spheres of government and politics, economics, and society in general. In this final section, let us examine this broader context.

Two powerful but conflicting movements are gaining momentum in several countries today. On the one hand is the vigorous effort by various levels of government and by credentialed helpers to gain greater influence, information, diagnostic and decision-making power, and responsibility. Government programs, child abuse agencies, mental health professionals, departments of defense and war, and the medical establishment are all expanding their sphere of influence, or at least fighting strongly to do so. On the other hand is an equally vigorous effort by various groups fostering the awareness, competence, liberty, power, and responsibility of the individual person. They believe in tolerating or even encouraging the diversity of goals, lifestyles, religions, and personal mistakes that occur when people can choose freely from a range of opportunities and resources.

I am deeply impressed by the power of each of these opposing movements. Each is energetic, widely supported, and gaining some new ground. I see the clash between them as a major theme in many countries during the next 15 years. At the First Global Con-

ference on the Future in July 1980, I presented a paper on this topic and found that a high proportion of the audience agreed strongly with the topic's significance.

In this chapter, we have already seen several examples of both movements. Let us end this survey with some examples, at the broad societal and governmental level, of the shift from high control to greater individual responsibility. A few of these examples are too extreme to win my wholehearted approval, but I believe it is important to note them as part of the broader context within which to consider the earlier parts of this chapter. Each example is a reflection of our central theme.

1. In the United States, the United Kingdom, and Canada, some efforts have already succeeded in limiting government spending or taxation, the size of government bureaucracy, and (through sunset laws) the duration of legislation and government programs without renewal. Additional efforts are in progress. For instance, the National Taxpayers Union has sparked a drive to get state legislatures to mandate the U.S. Congress to call a national convention to propose a constitutional amendment requiring a balanced federal budget. Further, the National Tax Limitation Committee has sponsored a draft amendment to limit spending at the federal level (Friedman and Friedman, 1980, p. 302).

2. The Libertarian party has become the third major political party in the United States, although it began only in 1971. Libertarian presidential candidate Ed Clark received about 920,000 votes in the 1980 election. In Canada, too, this party has been rapidly gaining ground. Although Libertarian candidates sometimes take extreme views on individual liberty, their positions do stimulate some people to think through their own position. The Libertarian platform opposes the various ways in which governments have allegedly interfered with the rights of people to manage their own lives and property. The major theoretical spokesperson for libertarianism has made the following claim: "While opposing any and all private or even group aggression against the rights of person and property, the libertarian sees that throughout history and into the present day, there has been one central, dominant, and overriding aggressor: the State. . . . The libertarian refuses to give the State the moral sanction to commit actions that almost everyone agrees would be immoral, illegal, and criminal if committed by any person or group in society" (Rothbard, 1978, p. 24).

3. Some parallel principles have been recommended by a psychologist, Will Schutz. Emphasizing individual awareness, self-determination, and self-responsibility throughout a recent book, Schutz developed the following principles for action (1979, pp. 144–146): The aim of any social institution should be the creation of social conditions within which individuals choose to find it easiest to determine their own lives. Permit any action done by an individual, with awareness, that does not impinge on another individual. Provide profoundly simple solutions to problems that individuals choose to have dealt with by institutions. Create conditions within which individuals are unlikely to block themselves from self-determination. Reward self-responsibility and awareness: do not accept obedience or lack of awareness as excuses.

4. Through a series of ten one-hour television programs called "Free to Choose" and a parallel book, Milton and Rose Friedman have aroused a great deal of interest in issues of individual liberty. The Friedmans applauded the principle of equality of opportunity and the liberty to shape one's own life. They suggested that personal liberty is bound to suffer when any government tries to achieve equality of *outcome.* Equality of outcome means that "everyone should have the same level of living or of income, should finish the race at the same time" or should at least receive "fair shares" (Friedman and Friedman, 1980, pp. 128, 135). "A society that puts equality—in the sense of equality of outcome—ahead of freedom will end up with neither equality nor freedom. The use of force to achieve equality will destroy freedom, and the force introduced for good purposes will end up in the hands of people who will use it to promote their own interests. On the other hand, a society that puts freedom first will, as a happy by-product, end up with both greater freedom and greater equality" (p. 148). During one of his television programs (April 9, 1980), Milton Friedman stated an idea that particularly impressed me: freedom is not the natural state of humankind, but is a rare and precious thing; it will take great courage and effort to stop being overgoverned.

5. In a highly influential book, Toffler foresees a rapid transition to "the third wave" characterized by a far more decentralized and diverse and participatory society, a de-massified society and the collapse of consensus, "a far more varied, colorful, open, and diverse society than any we have ever known," a democracy of shared minority power and "a fundamental devolution of power"

(1980, pp. 420, 424, 437, 454). Toffler urges us to support "thousands of conscious, decentralized experiments that permit us to test new models of political decision-making at the local and regional levels in advance of their application to the national and transnational levels" (p. 458).

6. Personal or psychological liberation is a major political issue, according to John Vasconcellos, successfully re-elected several times to the California Assembly. In an interview with Ken Dychtwald, Vasconcellos (1978, pp. 36–37) described a recent revolution in American politics: "Today the political issue that is emerging is for liberation at a psychological level: owning one's own body, mind, and feelings, and being one's self. This includes not passively surrendering ourselves and our power to some authority figure or institution who thinks they know better than we do who we ought to be." Vasconcellos distinguished five major steps in the revolutionary political developments of the last two decades (pp. 37–38): (1) a demystification of authority, moving away from the model in which someone other than us has all the power and authority; (2) breaking out of vertical authority models and shifting toward horizontal models in sharing of power, influence, and responsibility; (3) a movement toward individualization ("we're trying to change from a situation where we fix individuals to fit institutions, to organizing institutions whose function is to fit individuals"); (4) focusing attention and energy on the whole person in public and political policy-making; (5) "a movement toward empowerment—a real effort to evoke, encourage, and support in order to empower individual human beings to be healthy, whole, self-aware persons who are able to live horizontally without mystification and fear."

In much of his writing and speaking, Vasconcellos has underlined the significance of society's view of human nature. If we view people as untrustworthy and irresponsible, unable to make appropriate decisions about their own needs and lives, we will design political institutions and programs to shape, control, and repress. If we have greater faith in the person's capacity for self-direction, personal responsibility, and successful choice, our designs will be quite different. Based on this second set of beliefs, a new humanistic politics is beginning to emerge (Vasconcellos, 1979). Such a movement seems natural in nations based on a democratic form of government, which is built on a belief in the competence, power, and freedom of choice of the individual voter.

7. The New World Alliance has been quite important since it was founded in 1979 in the United States. This political organization (not a party) promotes self-reliance, human growth, a respect for diversity, personal responsibility for one's own behavior, convivial association and participation in decision-making processes, and voluntary certification to replace mandatory licensing (Governing Council of the New World Alliance, 1981).

8. In its approach to rural development, the Unesco plan for 1977–1982 has recognized the power and importance of the rural person's intentional change process. "Experience has shown that rural populations can mobilize their latent productivity for the sake of their own development, especially when they see some advantage to themselves in so doing. The men and women who are the goal of development must also be its agents. In view of this, it seems more and more obvious that rural community leaders and representatives must play a principal role in rural development" (Unesco, 1977, p. 248).

Turning specifically to rural education (adult and out-of-school education as well as schooling), the Unesco report again emphasized individual empowerment. "Education stands out as an essential component in any development program. It must first of all provide rural populations with the instruction that will enable them to make their voice heard and participate fully in the political, economic and social life of the nation" (p. 249).

9. *New Age* editor Peggy Taylor (1978, p. 4) has urged her readers to move from the level of personal individual empowerment to the world stage.

> The feelings of hopelessness and powerlessness that once enshrouded us in our personal lives have begun to fade in light of the increasing evidence to support the power of creative, positive attitudes in healing our bodies and our relationships. . . .
>
> We need to dare extend the metaphor of self-healing to a global dimension and to change some of our self-limiting assumptions about the world, taking inspiration from the small successes we have experienced in our personal lives. This means . . . daring to trust ourselves enough to express our heartfelt humanness in ever larger realms of society, not just in the safety of a circle of supportive friends. It means daring to expose

ourselves to people we may have thus far considered part of the problem. It means consciously testing out our own ability to make a difference, and knocking on some of the imaginary doors that we thought were shut against us.

There is no issue more important for us today than to cultivate a sense of personal responsibility toward the planet, and to learn to develop and trust in our personal power to create the kind of world we can gladly pass on to our children.