Now we are going to talk about the Adlerian concept of lifestyle. Alfred Adler coined the term lifestyle which is a word commonly used today, however the contemporary vernacular meaning differs from the way Adlerians use it clinically. Perhaps it would be helpful if we start at the beginning of a person’s life. Adlerians believe that when a child is born he or she is born with their genetics, basic reflexes, and not much else. Adler said the as the child grows up he perceives the world around him and experiences the social context of his family and comes to certain conclusions about them. In a sense, this is the person’s personal philosophy. The Adlerian lifestyle refers to the collection of convictions a person has developed and uses to navigate life. These convictions serve many purposes. First: it gives the person a sense of identity, he develops certain convictions about who he is and what he is capable of and what sorts of things he does. Second: if you have a lifestyle it helps you to understand the world. You may not do it accurately, but you may hang on to it because it makes sense or you genuinely believe it to be true. Using your lifestyle convictions helps you to predict life. Third: having these convictions, or the total lifestyle, helps you or at least you hope helps you maintain control in your life.

Since we create many of our convictions very early in life when we do not have a well developed brain or do not think critically about things there can be errors. For Alfred Adler and his generation of Adlerians they called errors Basic Mistakes. Today, contemporary Adlerians are likely to call them Interfering convictions. These convictions are the rules that may not serve us well today. They could cause unwanted consequences based on the way we express those convictions.

Since the lifestyle is a cognitive construct then how do we deal with feelings? we do not deal with feelings as primary phenomena as some psychologies do. For Adlerians behind every feeling there is a cognition- some idea or belief. So in some other form of therapy where feelings are primary
phenomena a person says I’m angry- then you deal with it as the primary. For us when a person says I am angry the underlying cognition is what we want to explore. Why are you feeling angry.

So if lifestyle convictions are the basis for therapy and understanding symptoms and pathology then how do clinicians lean about the lifestyle? The answer lies in the Lifestyle analysis or the lifestyle protocol. We ask questions about the person’s early childhood to appreciate the context in which the person developed and created many of the lifestyle convictions. We also use Early recollections as an assessment technique to identify specific convictions. I hope this brief review of the lifestyle helps explain some of the ideas behind this important clinical construct.