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The Issue

"Would you have any books on nerves? I mean, how can you tell if someone is having a nervous breakdown?" Does this scene take place in a counselor's office or in the young adult room of a public library? To the counselor, a client's problem has been introduced and the therapeutic process has begun; for the librarian, a complex professional issue has been activated. The librarian must determine how much self-revelation to allow the patron and then set the interpersonal level on which the transaction will take place. In the instant of reply, that decision will be clearly communicated to the patron and the scope of professional service will be defined. The librarian will have taken a position on whether there is a counseling function inherent in the delivery of library service.

The issue of the librarian-as-counselor comes into sharp focus with the quality and direction of the response made to the cry of pain behind the patron's words. The librarian says, "Here are several books on nervous disorders. Perhaps you can find the information you need. If not, let me know and I'll help you find some others." The librarian-as-counselor replies: "Sounds like something we should talk about."

If the scripts were played out, different kinds of interactive processes would come into play and different outcomes would be likely to occur. In the first instance, the librarian and the patron stumble around in reserved, stylistic verbal games, each trying to read the meaning in the other's words. The young patron probably leaves the library with several books that contain answers to her stated request.

In the second instance, the patron has been given permission to explore and articulate the true nature of her need: her mother

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is behaving strangely and she is very frightened. She leaves the library with no books but 1) with a sense of relief that her problem has at last found words and that someone has heard and understood, 2) a sense that she is a valuable person worthy of attentive listening, 3) the name and address of the local mental health agency. The librarian has not "performed" any therapy but yet has effectively assumed a counseling function. The difference between counseling as therapy and counseling as an interpersonal function is significant to the issue.

Therapeutic counseling is a highly complex enterprise in which professional performance requires extensive training and supervised practice. The counseling process has form and structure, theory and research behind it. In many states the practice of counseling requires licensing by credential, experience and examination. The concept of the librarian-as-counselor seems to bear little relationship to the professional practice of counseling-as-therapy.

But it does bear some relationship. Out of the practice and theory of counseling has come an understanding of human interactions that is relevant to all of us, all of the time, whenever we engage in a relationship. From the intensity of the therapy session have evolved strategies for training in organizational settings, educational institutions, professional/client relations and family groups. Paraprofessionals have been taught counseling skills, college students to offer peer counseling, even fifth graders have been taught these skills as relationship-enhancing experiences.¹ The function of "counseling," that is, helping another to explore and resolve a problem, is not the sole prerogative of the professional counselor.

There are times when each of us is counselor to another; there are times when each of us turns to another in distress. The function of counseling is an element in all relationships, whether it is done well or poorly, even if the function is unwillingly and unwittingly assumed. If the function is refused or misused, the lack of it is a dynamic in a relationship, sometimes becoming a most destructive element. The concept of the librarian-as-counselor refers to this interpersonal function, not to the undertaking of a therapeutic encounter.

There is a mystique that surrounds the counseling process that seems to arouse both anxiety and attraction. It is not the pur-

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pose of this article to argue and remonstrate that the librarian should assume a counseling function, although the bias of the writer is in strong evidence throughout. The purpose is rather to dispel some of the cloudiness, to describe what counseling is, how it operates, what it looks like, and how it can interrelate with professional library enterprises.

A Theory of Counseling: What It Is

Counseling is above all else a philosophic stance. In the context of this article it derives its posture from the humanists and from the belief that in each human being there lives the potential for self-determination and self-fulfillment. Counseling, then, is a belief system about human nature. It proposes that the first, basic and irrefutable principle upon which mutual and mature relationships based—either personal or professional, intimate or casual—is a belief in the uniqueness, complexity, primitive intelligence and capacity for growth that resides in one's self and in others. The theory avers that antisocial emotions exist, but not as basic to an individual's nature. Rather they are reactions to the frustration of one's natural strivings for love, belonging and security.²

The productive capacities within an individual—for example, to reverse a failure cycle, to reassess a self-destructive belief, or to break out of a psychic paralysis—can be released within a relationship that is accepting and nonjudgmental. When an individual is provided with these conditions for growth, he will develop constructively, as a seed grows and becomes its potential.

The counseling stance is to provide such a climate wherever people live and work. If it is viewed as a condition of the psychological environment, then the moment of counseling can take place anywhere, under any circumstances. It is not confined to a special room at an appointed hour. The "placeness" of counseling is independent of place, for the aura, this ambience of being free to pound one's chest with pride or beat it in despair, goes beyond the pragmatic. It is an essence that transcends other people in a room and other business waiting to be transacted.

Counseling is a set of behaviors that are intentioned toward closeness rather than distance, self-revelation rather than with-

holding, harmony with another in space and time rather than disjointedness. Responses are authentic, reflecting an internal condition of receptivity within the counselor. The humanness of the other is confirmed by the acceptance of all feelings, even rage and outrage. Counseling behavior supports self-awareness, it speaks truth, it waits patiently, it follows rather than leads. It sometimes confronts, cajoles, urges, and interprets, but it never advises, pries, denies or degrades. It is a set of behaviors that presumes both innocence and wisdom, ambiguity and ambivalence, self-control and self-direction. It says, "I respect your humanness even when you feel weak and I esteem your capability to find your own strength. Now we begin from there."

Counseling is a relationship with many sizes and shapes—long-term and ongoing, or a single moment of encounter; most often it is a brief moment within the flow of a relationship. But there are two elements operating within the moment that make it distinctive: first, that the one who is in the counseling role is trying to move into the life focus of the other and to see the world through the eyes of the other; secondly, that the counselor is not acting out his or her personal needs, problems, goals or values at the expense of the other. What makes the counseling dimension of a relationship a unique interpersonal experience is that the growth of one becomes the mutual concern of both.

Belief determines behavior. Sometimes we are aware of our beliefs and feel compatible with our behavior. But often our behavior seems to belie our beliefs and our philosophy seems to stand in contradiction to our actions. A basic premise in counseling theory is that the way we behave is a manifestation of things we consciously or unconsciously believe. Our behavior may be disguised but it does not lie. It is consistent even in its apparent inconsistency. We can feign liking, acceptance or compliance. But our facade-wearing and maneuvering is then our behavior, a manifestation of our real beliefs. We bluster and bombast when we are insecure, but our pomposity is an operational device to cover that insecurity. On the most profound level, we are what we believe.

It would seem, then, that if we are to look at behavior we must first look at beliefs. If those beliefs confirm the inherent value and potential in other people, then whatever one's role, profession, situation or relationship, one would be reflecting the phil-

osophic stance of counseling. It must be emphasized that intention is not the same as behavior. We may intend to nurture another's self-development with empathy and encouragement, but behind our words are contradicting meta-messages. It must also be emphasized that sometimes our responses are accidentally facilitative, but random behavior does not have the impact of consistency. Finally, it must be emphasized that warmth and attentiveness communicated nonverbally often have more meaning for the client than do verbal responses that are unhelpful. But it is the congruity between intention and behavior and the consistency of beliefs with responses that defines the posture of the counselor.

Responses and Implications: Non-Counseling

It is very difficult to describe an interpersonal process and to capture the nuances, subtleties, levels of meaning, history, circumstances, external contingencies, internal bombardments that operate in even the most brief and simple interaction. But many times one's belief system begins to reveal itself, laying itself out little by little for the other to see. A look at little slices of interaction, while they cannot tell us everything, can begin to indicate a whole pattern, just as looking at a specimen under a microscope can give some clues from a little scrap to a whole whale. The following are a few specimens for examination:

If one were asked to respond quickly and spontaneously to the following kinds of statements, made by a young person who is expressing great agitation or intense pain, the probable responses could be anticipated:

Client Statement: "I don't know where to begin."
Response: "Begin at the beginning."

Client Statement: "Life doesn't seem worth living. Sometimes I'd like to end it all."

Response: "That wouldn't solve anything."

Client Statement: "Do you have any books on death?"

Response: "Yes, we have a collection of books on the subject."

Client Statement: "I think I'm pregnant."

Response: "Have you seen a doctor?"

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Client Statement: "I'm going to quit school. I'm not getting anything out of it."

Response: "If you don't finish school there are many opportunities that will be closed to you."

Client Statement: "Now that I'm crippled I'll never get married."
Response: "Many crippled people have lived rich and full lives. I'm sure you have a good chance of marrying. If you think positively you'll realize that you have much to offer."

Client Statement: "I hate my father. I wish he were dead."
Response: "You don't really mean that. If he were dead you'd realize how much you really love him."

Client Statement: "I wasn't asked to go to the party. I'm ashamed to face my friends."
Response: "Another chance will come along. Next time you'll probably be invited."

Client Statement: "I'm just not attractive to boys."
Response: "Physical beauty isn't everything. Develop some other aspects of your personality."

Client Statement: "I don't know what I want to do when I graduate from high school."
Response: "Have you talked to your counselor?"

Client Statement: "Can I talk to you? I think I'm gay."
Response: "Sometimes young people think they are homosexual, but it's just a stage they're going through."

This exercise in responding has been used numerous times with professional librarians as well as with graduate library school students. The results are almost always the same. With few exceptions the responses are either identical with the one given or some variation with the same implications. Occasionally there is an intuitive response that accurately reflects the belief of the responder and the intent to facilitate a helping relationship. Usually such a response is random, an accident—not the result of awareness and not consistent in subsequent interaction. It is hard to fault these responses. Yet there are some issues at stake that need to be identified, clarified and evaluated.

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First of all, is the chilling fact that the responses are predictable, as though a person and a problem have no uniqueness and responses come in packages. To the receiver of the message a belief becomes evident—that he or she is a problem to be solved, not a person to be encountered.

Many of the responses attempt to offer encouragement and the intent of the responder is to reassure. But the effect is often just the reverse. Does the youngster who has not been invited to the party really believe that she will be invited next time because someone says so? And if she does believe it, does that assure that it will happen? Is she not, in the last analysis, being patronized, dismissed? Does she not know that she is being patted on the shoulder rather than being helped to cope with something that really exists for her? The reassuring responses, to the crippled person, the boy who is gay, the unattractive young woman, do they not destroy trust because the "encouragement" they offer is false? Doesn't the client inwardly mutter, "You just don't understand," or "Just because all those great people made it doesn't mean that I will"? Most importantly, false encouragement discourages. It discourages the client from facing not only externally imposed realities, but the internal processes that have been mobilized to cope with those realities. It shuts off talk. It diminishes trust. It forces the client to repeat and repeat: "No, I'm sure I won't be invited," or "But I really do think I'm gay," or "But most cripples don't get married." Round it goes, until maybe the listener finally hears. Only then can it go forward toward some understanding and insight.

Notice that each response gives a little sermon, either directly or indirectly. The counselor as moralist judges the client as the misguided suppliant. The homily is based on the same theme—if you would only change your attitude, you wouldn't have a problem. Each response represents a belief in the most traditional, conventional, socially acceptable value system—that suicide is immoral, that parents should be loved, that unmarried pregnancy is a misfortune, that education leads to success, that homosexuality is a fate to be avoided, etc., etc. The belief of the responder, that "clean" living and "moral" thinking will set everything right, rings loudly and nobly to the misguided one.

In each example there is beneath the words an undercurrent of intense affect. Yet each response says clearly, "I don't recognize the feeling. I don't want to talk about feelings. I can't deal

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with strong emotions." The belief is again in evidence. People should not exhibit intensity in public. Negative feelings are not acceptable. Notice how consistently there is a hidden message that says, "You shouldn't feel that way." You shouldn't hate, feel rejected or experience futility.

Each response implies that the professional knows and the client should be directed. The responder takes the lead and the client's feeling of incompetence is reinforced. The confounded person has come to the right place, to a stronger, wiser, more responsible human being!

A platitude, a sermon, a question with a hidden meaning—do they really carry such strong implications? Perhaps if one followed the interaction to just the next step in the sequence the implications would become clearer.

Client Statement: "I hate my father. I wish he were dead."

Conventional Response: "You don't really mean that."

Client Reaction: "Yes, I do. He's a drunk. He beats me when he's drunk and he won't let me out of the house when he's sober. We'd all be better off if he were dead."

Consider the course the interaction might take if the response were as follows:

Client Statement: "I hate my father. I wish he were dead."

Counseling Response: "You sound very angry."

Client Reaction: "Yes, I'm angry. I don't know if I can stand it any more. When he gets drunk I'm afraid of him and when he's sober I'm afraid of him. I'm always afraid of him."

Notice the difference. The first response was defensive, trying to convince the other person of the intensity of the feeling and the justification for it. The feeling is still identified as "hate". The problem is identified as the father's, not the client's, and therefore cannot be resolved by the client. The interaction is spiraling, not progressing.

In the second instance, the feeling has been accurately identified as anger, and further understood as fear. The counselor

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has communicated some beliefs: 1) your feelings are valuable even if they are negative; 2) I can handle your emotions even if they are intense; 3) I see you as rational even if I don't yet see your rationale; 4) I'm willing to listen without judging, denying or running away; 5) you can take the lead and I will follow you.

The client has been given permission to explore his feelings; he has been encouraged to talk about himself as "owning" the problem rather than forcing him to focus on a problem that belongs to someone else. A major leap has taken place in one interaction: from saying, "My problem is that my father drinks," the client has moved to saying, "My problem is my own anger and fear. How can I handle and direct them?" The client has by that verbal act gained some understanding that you and I cannot solve someone else's problem or manipulate someone else into changing. We can only together try to understand ourselves.

Counseling Behaviors: What Counseling Looks Like

The most intensely helpful overall behaviors and attitudes that have been identified by those who have studied and practiced in the helping professions involve the following elements:

- 1 Total attentiveness and involvement that is actively communicated through body posture, eyes, fingertips, shoulders, the whole body. The body does not lie; it will betray our resistances and our judgments and contradict our well-intentioned words.
- 2 The ability to quiet our own "internal noise," the voices that remind us of work to be done or "appropriate" responses to make, that nag about an appointment to keep or a pain in the left arm; the ability to shut out the worry: What shall I say next? How shall I solve this person's problem? What if he stops talking? If one is truly listening, the voices inside are quiet and the voice of the other can get through.
- 3 The acceptance of the other person as a rational person whose feelings and behavior, as seen through his or her own perspective, are logical; the belief that the other person has the innate capacity for insight, self-understanding, self-direction and responsibility for his own destiny.

- 4 The belief that that which is denied and avoided produces a negative, enervating force that paralyzes and renders helpless; that feelings expressed and pain described provide a release of energy and potency to act in one's own behalf. Anger denied festers. When it is expressed, accepted and understood, it dissipates, leaving one's rational self free once more.
- 5 A belief in the power of the "talking cure," even though it involves a mystical element that cannot be explained. No advice has been given, no solutions offered, and often an unchangeable situation remains unchanged. Yet the client suddenly sighs or smiles and says, "I feel much better. Thank you for helping me." It is a magic moment that never fails to touch both people with a sense of closeness and progress.
- 6 An understanding of some of the universal themes in human existence, a recognition of the existential loneliness of the human condition and the need to find some meaning in life. Counseling responds not only to the intellectual and the emotional, but the spiritual existence of the client.
- 7 The ability to laugh at one's self and with another.

The most effective verbal behaviors that have been identified as helping responses involve: 1) a minimal encouragement to the client to continue, the assurance that the counselor is involved and attentive (i.e., "Please go on," "Tell me more," "I see," "Can you tell me about it?") "Can you describe it?" Nodding and moving toward the client are highly effective minimal encouragements as is reflecting the feelings that the client is expressing in one's gestures and movements; 2) the accurate and courageous naming of the feeling that the client is communicating. The naming of a feeling or a problem does not bring that feeling or problem into existence; it already exists. On the contrary, it diffuses intensity and provides relief. Only when the intensity has been relieved³ can the client begin to be rational and to problem-solve.

If the examples of "client statements" above were viewed from a counseling focus, a different kind of response would emerge. "Counseling responses" have counseling beliefs imbedded in them. In each of the statements a strong affective element is

present, one that speaks louder and with more insistence than the literal meaning of the words. Rather than avoiding the intensity, the counselor identifies it and puts it out on the table, for otherwise it will remain a frightening, large, unnameable quantity, irreducible in size, threatening to overwhelm and engulf. Fear, pain, anger, and confusion, when expressed, are reduced to manageable size.

Following are the same client-statements with the simple, classical, "reflection-of-feeling" responses, the basic level of empathy that is the most effective element in the counseling-helping relationship:

Client Statement: "I don't know where to begin."

Counseling Response: "There are lots of things going through your mind at once."

Client Statement: "Life doesn't seem worth living. Sometimes I'd like to end it all."

Counseling Response: "Nothing seems worthwhile right now."

Client Statement: "Do you have any books on death?"

Counseling Response: "Death can be a frightening subject."

Client Statement: "I think I'm pregnant."

Counseling Response: "And you're very shaken up about it."

Client Statement: "I'm going to quit school. I'm not getting anything out of it."

Counseling Response: "Being in school isn't doing very much for you."

And so with all the client-statements, the counselor responds to that which is being expressed, the cripple's sense of futility, the anger, humiliation, inadequacy, confusion, panic being expressed in the rest of the examples.

Notice that the client's reaction to these responses, that is, the third move in the interaction, will tend to be a spoken "Yes" rather than a spoken "Yes but" and an unspoken "What about..."

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get it" rather than an unverbaliized "You just don't seem to understand."

Notice that the responses do not deny but rather clarify the meaning of the statements, do not judge the worth of the statement, do not direct the client into the next statement. They do not offer false encouragement or criticize failure, nor do they advise, admonish or even admire. They reflect. They summarize. They accept.

Sometimes lists of examples seem simplistic and inauthentic, even gimmicky. Of course one must respond in one's own words and style and with one's own intuition to the words and style and undercurrent meanings of the client. The examples can only serve to make a point as strongly and explicitly as possible. Counseling is a unique enterprise for each of us and involves the unique exercising of our own personalities, values, beliefs and styles. It is not a technique or a tool but a way of being more authentic with ourselves and with others.

Signalling Behaviors

There is another kind of client, one who does not directly confront a problem, but who acts it out through signalling behavior. Here the tendency of the responding person is to tighten and tense and to react not as a counselor, but as another client!

Signalling behaviors are manifested as anger, disruptiveness, righteous indignation, defensiveness, or prejudicial verbalizations. Conventional responses are counteranger or submission, active counterattack or passive sabotage, counterdefensiveness or intellectualization. We react aggressively or helplessly, and both kinds of behavior represent a client-state rather than a counselor-state: Principles of counseling, whether one is dealing with a client whose pain or problem is acted out through tears or through tantrums, still speak of acceptance, non-judgment, active listening, reflective responding, and above all, the presumption that intense feeling can be diffused and handled constructively if heard and accepted. Hostile feelings represent a reality for the speaker. Sometimes they are directed against the listener, even when they originated outside of the relationship. Whether they are the result of the immediate situation or

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are feelings misdirected, they leave rationality immobilized until the intensity is diffused.

Again here are some examples and their conventional responses:

Patron Statement: "I've been waiting for this book to come in for two weeks and now that I have it the pages that I need have been torn out. That's what happens when blacks take over a place. They destroy everything in sight."

Librarian Response: "I'm sure we can find another book with the material you need."

Notice that the response is submissive and placating, but not problem-solving. The librarian has probably resisted saying something like: "Surely you don't believe that," or "That's not true. Surely there are some blacks you know . . ." The librarian has learned not to make a scene, not to get involved in an encounter, not to confront, but rather to behave "professionally" and avoid emotional issues.

But the problem remains and the anger has not abated. The counseling response to the anger is to name it: "You are very angry." The next statement that the patron makes will probably narrow the issue and relate it to a personal experience. The process will likely be to move from a global statement to a personal one. Again a leap will have taken place, and a small step toward "owning" the problem by the patron.

Patron Statement: "I'd like to speak to the director. My fifteen-year-old brought this book home and I am appalled that the public library would allow such trash to fall into the hands of innocent children. Why, this book has descriptions of different kinds of birth control and how to use them. How dare you allow such things."

Librarian Response: "Would you like to fill out this complaint form?"

Is this appropriate professional behavior? Perhaps. Problem-solving? No. If the librarian's response were: "It really upset you when your daughter showed you this book," an underlining

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message of respect and active listening would have been communicated. Respect for another does not automatically imply agreement, but it is the necessary first step towards values modification.⁴

Patron Statement: A young patron has been told that a book cannot be taken from the library. His response is an obscenity reinforced by an explicit gesture.

Librarian Response: "Don't you speak to me like that, young man. When you can learn to speak civilly you will be welcome in this library."

What are the librarian's goals in this interaction? To force or convince the youngster to mend his ways? To open up a relationship between them so that he or she might have some impact on the young patron? In no way will this interaction accomplish either one. Certainly dropping this kind of barrier will accomplish nothing more than leaving a self-righteous adult face-to-face with a self-righteous youngster, neither listening to, caring about or having any impact on the other.

A counseling posture opens up communication, even if the opinions expressed are unacceptable. An exploration of the anger with the first patron, a validation of the parent's concern for her child in the second, a response to the frustration felt by the third, not condoning, not reinforcing anti-social values or behaviors, but a demonstrated attempt to listen and understand, makes it possible for the real nature of the need or the distress to be spoken. It is only through interaction that values are reevaluated, beliefs challenged, behavior restructured and feelings directed appropriately.

Perhaps the most significant effect of the counseling posture does not lie in its impact on the other, but in its impact on the counselor and on the quality of relationships. The ability to listen attentively and to respond empathically enhance every relationship and the people who live in them.

The Librarian As Counselor: Synergism

The concerns of young adult librarians to provide information that realistically meets the needs of young patrons, to establish

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a trusting relationship, to create an environment of accessibility and satisfaction have been voiced again and again, from the words and works of people like Margaret Edwards to a vocal and involved community of young adult librarians who are beginning to define their professional role in new and expanded ways. The voices describe the essence of the counseling relationship. While librarianship may not have a clinical counseling function, it does view itself as a helping profession, a "client-centered" profession. When a reference question is a coded cry for help, an information need buried beneath embarrassment, self-delusion, or social constraints, of what use is it to deliver the correct information to the wrong question? Of what use is it to give an intellectual response to an emotional need or an emotional response to an intellectual need? To what purpose does one feed the angry or frustrated client with more anger or with a moral lesson? It is these kinds of concerns that bring librarianship and counseling into interaction with each other.

Clients who seek professional service, whether as library patrons or medical patients, can be either enhanced or diminished by the experience. Professional people are often unknowingly involved with people in crisis, sometimes a consuming, life-altering crisis, more often one of life's mild but recurring traumas. Crisis, regardless of its magnitude, makes an individual more vulnerable to rejection and more inclined to self-doubt. It can cause one to see rejection in a detached professional demeanor or to experience the self-doubt that results when a professional is discretely inattentive to intense feelings, thereby inducing the added stress of justifying those feelings to one's self and defending them to others.

Adolescents are particularly vulnerable to feelings of self-negation. Those who live or work with teenagers often find themselves in the counselor role, like it or not. They become "counselors" neither from inclination nor training, but from the inescapable weight and intensity of the encounter. The only real question is often not whether the young adult librarian should act as counselor, but whether the counseling is effective or ineffective.

Adolescence is a volatile time when feelings are not only high but very near the surface. It is a time of testing and trying and learning about self through interaction with others. It is a stage of ambivalence when the

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acy. It is a time of painful growth and joyful discovery. A young person needs nourishment and validation, self-acceptance and the acceptance of others. A sagging self-concept grows taller with attention and respect than with books and programs. Above all, the young people with whom we interact need adults who value what they say and think and feel.

Notes

- 1 Paraprofessional training projects have been developed and tested in a variety of educational and institutional settings by Wayne D. Dyer, Jeanne G. Gilbert and Catherine M. Sullivan, Bernard Guernev, M.M. Leventhal, R.L. Mosher and Norman Sprinthall, and others.
- 2 The counseling theory described reflects the writing and works of the humanistic and existential psychologists: Carl R. Rogers, Erich Fromm, Abraham Maslow, Rollo May, Victor Frankl, Elizabeth Kubler-Ross, S.M. Jourard, and others.
- 3 Helping behaviors have been identified and researched by Robert Carkhuff and C.B. Truax, B.L. Means, Allen Ivey, Elaine Jennerich, and others.
- 4 The training designs of Thomas Gordon's *P.E.T.: Parent Effectiveness Training* (New York: Peter H. Wyden, 1974); Allen E. Ivey's *Microcounseling: Innovations in Interview Training* (Springfield, Ill.: C.C. Thomas, 1976); and Thomas Harris's *I'm Okay You're Okay* (New York: Harper & Row, 1969) are elaborations of the reflective mode of response. An excellent description of the applications of this theory can be found in Alfred Benjamin's *The Helping Interview* (Boston: Houghton Mifflin, 1974).

Public Library Programming for Young Adults: Frill or Necessity?

Maria Pedak

Nothing exists in a vacuum, separate from a past; separate from elements around it. Thus, this article will first focus briefly on some library history and then some analysis of the young adult period of life. It will deal with public library programming as a whole before it zeroes in on programming for young adults in public libraries. Hopefully this approach will help place the specific topic on a theoretical as well as practical foundation. Operating on the premise that assumptions are dangerous and that the same word rarely means the same thing to any two people, I offer the following as my operating definitions to the reader. These definitions apply throughout this article.

PUBLIC. A collection of human beings with diverse interests and needs.

LIBRARY. A place that houses print and audiovisual materials; has staff trained and willing to assist the public within whose community it is located; offers its services free of charge.

PROGRAMMING. The process of thinking, planning and executing one or more activities that are special or unique to the public served.

YOUNG ADULT. A member of the public who is in transition from childhood to adulthood; usually between the ages of 13 and 18; a teenager.

FRILL. Anything which is nice or fun to have if possible, but not essential.

NECESSITY. Anything which is essential.

Historically, public libraries started with offering books on the premise that if the public only had access to books, its members would read and better themselves. As C. W. Davies so clearly pointed out, libraries of the eighteenth and early nineteenth centuries were part of the "culture and uplift" societies