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# Logotherapy and Existential Analysis

## “Man’s Search for Meaning” 51 Years On

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### Abstract

50 years ago NZAP was founded - one year after the publication of Professor Viktor Frankl’s book, *Man’s Search for Meaning* published on his release from a Nazi concentration camp in 1946. Initially inspired by Freud, Frankl later tried to integrate the biological and psychological dimensions with a specifically human dimension, the noetic or spiritual dimension. Logotherapy and Existential Analysis aims to counter some of the self-fulfilling prophecies, introspection and therapeutic nihilism inherent in other treatments. Logotherapy aims to enable the patient to identify and fulfil meaning potentialities, such as by bringing out their capacity for self-transcendence.

Logotherapy and Existential Analysis can be used clinically in situations as diverse as mid-life crisis, fear of death, phobias and anxiety, alcohol dependence and other problems of living. There has also been some research interest in existential approaches over many years in New Zealand.

### Historical Background

Viktor Emil Frankl was born on March 26th, 1905 in Vienna. His father had begun as a medical student, but soon had to get work as a public servant in the Department of Education due to economic pressures, as his father was a bookbinder. (Bazzi and Fizzotti 1986)

Viktor Frankl’s mother came from a family with its roots in Prague, but with frequent contact with Viennese culture. He had very happy memories of being indulged by his parents and their friends. (Frankl 1981)

WWI and the downturn in the fortunes of the Austro-Hungarian Empire brought hardship to the family, and Frankl and his younger brother and sister

(both born in South Moravia - Südmähren, the same part of the Empire as Freud's birthplace, Freiburg) begged for bread and stole pumpkins from the fields. After WWI he returned to Vienna and entered Sigmund Freud's old Grammar School (Realgymnasium) where he suddenly showed his interest in Natural Science. However, Frankl tells the story that he disagreed passionately with his chemistry teacher, who said that ultimately life is nothing but a process of oxidation and reduction, and the thirteen year old student broke with etiquette and sprang to his feet without putting his hand up, saying "But what then is the meaning of life?"

His concern at reductionism and nihilism intensified when one of his school companions was found having committed suicide with a book by Friedrich Nietzsche in his hands. Soon after this, Frankl began to write to the now well-known neurologist, Sigmund Freud. ... And Freud kept writing back.

Frankl's first articles were published in the youth section of a Vienna paper, followed shortly (1924) by an article in the *International Journal of Psychoanalysis* (edited by Freud, who had already had his first operation for oral cancer in 1923).

In 1925 Frankl had an article published in Adler's *International Review of Individual Psychology* with the title 'Psychotherapy and World View'. Frankl was already moving away from Freud, believing that Individual Psychology was much better suited to consider questions about the meaning of life than Psychoanalysis, especially when Freud said "The moment someone asks himself the meaning of life, he is sick."

### Logotherapy and Existential Analysis

Key concepts in Frankl's approach are the existence of the 'Noetic' or spiritual dimension, and 'the Will to Meaning'. He defines the 'Noetic' dimension as the dimension which gives rise to the specifically human phenomena of self-transcendence, conscience and humour. It is related to, but distinct from the physical and psychological dimensions. While some disorders may be due to physical changes, such as thyroid overactivity causing irritability and tremor, Frankl affirms the usefulness of psychodynamic theory and learning theory in explaining other conditions, such as hysterical conversion reaction. However, without the noetic dimension, Frankl asserts that it is not possible to explain many important aspects of human experience and behaviour.

While he acknowledges the existence of the unconscious, including drives such

as libido, Frankl emphasises that humans have a capacity to choose to go against their instincts and drives, in order to act in ways that are compatible with their personal values. "We are concerned above all with man's freedom to accept or reject his instincts." (Frankl 1973) Frankl sees the conscience as an important part of the noetic dimension – not the internalisation of parental reinforcements as in Freud's superego. In terms of the "Will to Meaning", Frankl highlights the significance of this being a will, rather than a drive as in Freud's *Lustprinzip* (Pleasure Principle).

## **Empirical Research and the Noetic Dimension**

By definition, the Noetic Dimension relates to intangible processes and can therefore not be directly measured. Yalom points out the irony of the consequences of limiting research to those phenomena which are readily observable and measurable. "Again and again one encounters a basic fact of life in psychotherapy research: the precision of the result is directly proportional to the triviality of the variables studied. A strange type of science!" (Yalom 1980 p 24)

"...an entire class of potentially important variables is being overlooked in current research and (to a lesser extent) practice in the area of addictive behaviours. These are *spiritual* variables. By "spiritual" I refer to transcendent processes that supersede ordinary material existence. This includes, but is not limited to, systems of religion... At our present state of understanding, we are accounting for only a minority of variance in addictive behaviours and treatment outcomes through psychological, biological and social variables combined. That is, most of the variability in the onset, process and outcome of addictions remains unexplained at present, and we can ill afford to ignore any class of variables with potential explanatory power." (Miller 1990)

In spite of Miller's comments, there are several research tools which can be used to examine existential constructs empirically. Probably the best known and most widely used is the Purpose in Life test (PIL). (Crumbaugh and Maholick 1964). Thirty three years after its development, it has been cited in many research papers. I will quote from just two in this article, and refer readers to the work of William Black for a more detailed assessment.

The PIL is a test consisting of 20 items with a seven point Likert-type scale. One Australian study where 58 university students completed the PIL contrasted this with their written response to an open ended question designed

to assess their world view. (Sharpe and Viney 1973) Their responses were evaluated by 3 clinical psychologists who assessed each response as either positive or negative on 3 criteria relating to evaluation of the world, purpose, and self-transcendent goals. Inter-rater reliability was measured. All three judges agreed strongly for purpose and self transcendent goals, but two of the judges sometimes gave contrasting ratings on evaluation of the world. Even on this point, they agreed more often than they disagreed ( $\chi^2 = 6.79, P < 0.01$ ). Four factor ANOVA was carried out examining the effects of subject and ratings for PIL scores and ratings for evaluation of the world, purpose and self transcendent goals. The three characteristics of the world view protocols were calculated to account for 61% of the variance of PIL scores.

However, Dyck has expressed concerns that the original design of the PIL is flawed. (Dyck 1987) He argues that the test was designed to examine two sets of criteria, namely existential relevance and the ability to discriminate patients from non patients. As well as citing other instances from the literature, Dyck cited his own research which showed significant correlation between the PIL and the Beck Depression Inventory ( $r = -.58$ ) the Centre for Epidemiological Studies - Depression Scale ( $r = -.53$ ) and the Automatic Thoughts Questionnaire ( $r = -.58$ ). He refers to other evidence that indicates that the PIL is not just a measure of depression. He concludes that the PIL may reflect a construct related to existential vacuum, although he feels that it would be better to development a replacement measure, perhaps drawing on related constructs, such as anomie.

A new psychometric test developed in Vienna has recently been translated into English, but only the German version has been validated at this stage. It is called the Existenzskala (Existential Scale) and its authors designed it to measure levels of self-transcendence, self-detachment, freedom and responsibility, as well as giving an overall score. (Orgler and Längle 1990, 1996)

Dr William Black has written an excellent review of the research literature on Purpose in Life and addictive behaviour. (Black 1991) His keynote address in Sydney at the 5th International Conference on the Treatment of Addictive Behaviours (ICTAB-5) gave a fascinating overview of the relationship between philosophy and psychology. He drew parallels between existentialism and social learning theory, particularly Bandura's reciprocal determinism and self-efficacy. Whereas Existentialism and Behaviourism have always been considered to be diametrically opposed on the issue of free will vs determinism, Bandura

postulated a “continuous reciprocal interaction between behavioural, cognitive and environmental influences.” (Bandura 1978) This is in contrast to BF Skinner who apparently viewed human behaviour as totally determined by the environment.

I found Black’s observations a great help in formulating my own ideas on the application of Frankl’s work in the area of alcohol dependence and related problems. (Wurm 1997a) I have also been greatly influenced by Dr Leslie Drew’s concept of Alcohol Dependence as a “Way of Life Leading to Predicaments.” (Drew 1986) This takes into account the role of choice when a person decides to find and use alcohol, while acknowledging that social, psychological and physiological consequences such as withdrawal symptoms may make it hard to choose differently. Sometimes the pattern of drinking becomes so entrenched that it is hard to see that there are conscious decisions involved. (Wurm 1997b)

Some of Black’s earlier research examined existential issues in prison inmates and people with alcohol dependence. He was also Honorary Secretary of NZAP for several years. His paper also introduced me to the work of Emmy van Deurzen-Smith, who gave one of the 3 keynote lectures at the opening ceremony of the 1st Congress of the World Council for Psychotherapy in June 1996 in Vienna. Originally from the Netherlands, she later studied in France and then came to England to work with RD Laing. She subsequently became Dean of Psychotherapy and Counselling at Regent’s College in London and chaired the Society for Existential Analysis for several years until 1993 when she became more involved with the UK Council for Psychotherapy. Her work differs from Frankl’s in its emphasis, but still has much in common. The “Existential Analysis” promoted by the Society for Existential Analysis in the UK is based more on Binswanger’s “*Daseinsanalyse*”, rather than Frankl’s “*Existenzanalyse*”. Both terms have unfortunately been translated from German into English with the same phrase, “Existential Analysis” which leads to some confusion. Each, of course, contrasts with Freud’s Psychoanalysis.

Frankl first spoke of “*Existenzanalyse*” in 1932. He distinguishes his approach from Binswanger’s by pointing out that “*Daseinsanalyse*” accentuates “the illumination of existence understood in the sense of being. Existential Analysis, on the other hand, over and above all illumination of *being*, dares to make the advance to an illumination of meaning. The accent thus shifts from an illumination of ontic-ontological realities to an illumination of the possibilities of meaning.” (Frankl 1967 p. 133-134)

The current Chair of the Society for Existential Analysis is Dr Ernesto Spinelli, and his writing also elaborates on the work of Husserl, Heidegger, Binswanger, Laing and van Deurzen-Smith. (Spinelli 1989, 1992, 1994)

Another important figure in the development of Existential Psychotherapy in New Zealand was Dr R W Medlicott from Ashburn Hall. (Medlicott 1969) This paper was quoted by Frankl in his discussion of the treatment of anxiety, with particular reference to the technique of "Paradoxical Intention." (Frankl 1978 p. 142) "Medlicott (1969) used paradoxical intention to influence not only the patient's sleep, but also his dreams. He applied the technique especially in phobic cases and found it extremely helpful even to an analytically oriented psychiatrist, he reported." While many modern (and "post-modern") therapists express enthusiasm for paradoxical strategies, Frankl was one of the first to systematically describe the therapeutic use of paradox. (Frankl 1967; Ascher 1989)

More recently, David Simpson has spoken about the relevance of Existentialism to contemporary New Zealand. (Simpson 1996) He believes that many New Zealanders see Existential philosophy as irrelevant and outdated, "Colleagues remind me that the writers I quote, from Kierkegaard to Heidegger, Sartre, Kafka or Frankl were all born in a Europe characterised by invasion, revolution, holocaust or war." Simpson, however sees considerable scope for the application of key Existential ideas in New Zealand, particularly at a time when the teenage suicide rate is the highest in the world. He quotes Irvin Yalom, Viktor Frankl and Carl Jung all recognising lack of meaning as a major clinical problem, distinct from other recognised forms of psychiatric illness. Simpson emphasises that not all existential writing is necessarily helpful. He acknowledges Sartre as a highly gifted writer and psychological observer. However, he adds; "I find his psychology pessimistic. Like Viktor Frankl, I see working to help clients resolve existential crises as a most positive, pragmatic and useful endeavour".

### **Philosophy and Psychotherapy**

Existential fears are part of what it is to be human. Anxiety is not viewed simply as a symptom to be obliterated with tranquillisers, but a part of life, which may be an important way of bringing attention to discrepancies between one's goals and reality. "Decisions are difficult for many reasons, some reaching down into the very socket of being..... for every yes there must be a no."

(Yalom 1991 p 10)

“The aim of existential counselling is to clarify, reflect upon and understand life. Problems in living are confronted and life’s possibilities and boundaries are explored... Clients are considered not to be ill but sick of life or clumsy at living...

The assistance provided is aimed at finding direction in life by gaining insight into its workings. The process is one of reflection on one’s goals and intentions and on one’s general attitude towards living. The focus is therefore on life itself, rather than on one’s personality.” (van Deurzen-Smith 1988 p. 20-21)

“The majority of so-called mental illnesses encountered by family physicians, however, are existential crises, and these are problems of the human spirit rather than illnesses.” (McWhinney 1989 p. 68)

Existentialism shares its historical origins with Phenomenology, but relatively few psychotherapists have any formal training in philosophy of any kind. Professor PJV Beumont has written about the importance of Phenomenology in the development of psychiatry, particularly in Australia and New Zealand. (Beumont 1992) Phenomenology is named after the Greek word for appearance. This reminds us that we only know about anything through our experiences, and these only relate to the external appearance, rather than things as they really are. This whole approach has been refined by Husserl and Heidegger. Spinelli emphasises the benefits in clinical practice of listening and exploring with an open mind. (Spinelli 1989) Then it is possible to obtain a clear description of what that patient has experienced. It is still crucial to avoid jumping to conclusions. If carefully observed, these guidelines can help avoid some of the pitfalls of making grossly misguided interpretations based on the therapist’s enthusiasm for any theoretical system. I should immediately confess that it is equally possible to make this kind of mistake in existential psychotherapy!

One of Frankl’s key techniques is the use of “Socratic Dialogue”. This is, of course neither new, nor exclusive to existential psychotherapy. However it illustrates clearly the importance of the therapist taking care to offer questions, rather than answers.

“The client should be asked, what he or she anticipates would occur if drinking continued unchanged. The purpose of this question is Socratic: to elicit awareness, which is then consolidated by reflection.” (Miller 1983 p. 163)

“Education is more than teaching, and Socrates’ chief aim was not to impart information but to make the other man think, and thus to make him a better person. ....He practised ‘midwifery’, his mother’s profession, in bringing men’s hidden thoughts to life.” (Ehrenberg 1973 p 381)

Similarly today the Professor of Psychiatry at Stanford University, Irvin Yalom exhorts us to do the same in his classic textbook, “Existential Psychotherapy” when he says: “The therapist’s *raison d’être* is to be midwife to the birth of the patient’s yet un-lived life.” (Yalom 1980 p. 408)

Much has happened over 51 years, but despite the passage of time and the diversity of cultures, philosophy has always had much to offer psychotherapy, whether in Ancient Greece, wartime Europe or contemporary New Zealand. Once, the closest thing to psychotherapy was a discussion with a philosopher. Later people brought their concerns to priests, who were also the first doctors in many cultures. As clinicians, we would now expect a non-clinical counsellor to recognise the limits of their training and refer on clients who appear to have more serious psychological problems. If clients come to us with serious spiritual or philosophical questions, don’t we have a similar obligation to develop our own expertise or refer accordingly?

Perhaps it is time for psychotherapists to consider the origins of their role and reflect on the parallels with philosophy and ministry. There are, of course, major differences, but what do we risk, if we forget - or deny - the similarities?

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