

THE SPIRITUAL DIMENSION IN EXISTENTIAL ANALYSIS AND LOGOTHERAPY¹

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Existential Analysis (*Existenzanalyse*) and logotherapy are really the same, insofar as both represent a certain aspect each of one and the same theory. On the other hand, *Existenzanalyse* should not be confused with *Daseinsanalyse*, both of which German terms have been translated into English as "existential analysis" (I, Chapt. 16: Logotherapy and Existential Analysis; 15; 17; 18).²

EXISTENTIAL ANALYSIS AND DASEINSANALYSIS

Existential Analysis and Daseinsanalysis both strive for something like the illumination of existence (*Existenzerhellung*, Karl Jaspers). The accent of Daseinsanalysis, however, is placed on 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* (16). The accent thus shifts from an illumination of ontic-ontological realities to an illumination of the possibilities of meaning. That is perhaps why Existential Analysis supercedes each bare analysis and is a therapy, viz. logotherapy, whereas Daseinsanalysis, at least according to the definitions given by leading Daseinsanalysts themselves, does not in itself represent a (psycho-)therapy in the true sense of the word. Medard Boss, e.g., writes: "Daseinsanalysis has nothing to do with psychotherapeutic practice" (3, p. 184). *Logos* signifies first of all meaning. Thus logotherapy is a psychotherapy that is oriented toward meaning and reorients the patient toward meaning (6).

I have previously pointed out: "It is rather obvious that L. Binswanger's Daseinsanalysis amounts to an ontologizing of A. Adler's tenet of tendentious apperception" (10, p. 14). Daseinsanalysis (which is sometimes, perhaps more rightly, called onto-analysis) sets

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²The term Existential Analysis as used in the present paper applies only to the theory developed by Dr. Frankl, while the term Daseinsanalysis applies to the theory of Ludwig Binswanger. Quite independently of the endeavors of Binswanger which were later formulated as *Daseinsanalyse*, Dr. Frankl began to speak of *Existenzanalyse* as early as 1932 and used the term in publications beginning in 1937 and 1939 (4, 5).—Translator's note.

out to lay bare what it calls the a priori structure of *Daseinsgestalten*. This refers to the specific mode of being-in-the-world which corresponds to a specific subjective mode of experiencing the world. What Adler called the person's style of life, of which the tendentious apperception, the subjective mode of experiencing the world, is an aspect, represents the same general idea.

I am aware that Daseinsanalysts would abhor speaking of a "subjective mode of experiencing," for this would presuppose an objectively given world. Logotherapy, however, holds that no matter how subjective (or even pathologically distorted) the segment which we are "cutting out" of the world (which as a whole always remains inaccessible to a finite spirit) may be—nonetheless it is cut out of the objective world. The typical Daseinsanalytic terminology which claims to have closed the gap between subjectivity and objectivity, seems to me to be self-deceptive. Man is neither capable of bridging such a gap, nor would such an accomplishment be commendable. Cognition is grounded, indispensably, on a field of polar tension between the objective and the subjective, for only on this basis is the essential dynamic of the cognitive act established. I call this dynamic "noodynamic"—in contrast to all psychodynamics.

Daseinsanalysis has contributed to our understanding of psychosis; Existential Analysis, on the other hand, attempts to be of service to the treatment of neurosis. In this sense, Daseinsanalysis and Existential Analysis are not contrary to each other; rather they complement each other. To further the understanding of psychosis, Daseinsanalysis focuses upon the unity of being-in-the-world (*In-der-Welt-sein*, Martin Heidegger), while Existential Analysis emphasizes the manifold character of body-mind-spirit within and in spite of the unity of human existence. It does this in order to be able to appeal to what is called in logotherapy the defiant power of man's spirit (*Trotz-macht des Geistes*). If it should allow the spiritual person to be dissolved in a neutral noetic-psychic-somatic existence, as this occurs in Daseinsanalysis, then to what could such an appeal be made? Whose defiant power could be appealed to? How could such an appeal be made when the distinction between the spiritual person and the psychosomatic pathological process has been lost as in this monistic picture of man? The psychotic individual, whose unique mode of being-in-the world Daseinsanalysis sets out to clarify so successfully, is so dominated by, and imprisoned within, this existential mode that it is necessary to speak of an infiltration of psychosis into the individual's existence. In the view of Daseinsanalysis there is no way for the psychotic individual to get out of his psychotic skin, his peculiar mode of being-in-the-world.

Existential Analysis attempts to be not only an analysis of the concrete person, that is, an analysis in the ontic sense, but also an analysis in the ontological sense; in other words, it attempts to be an analysis, an explication, an unfolding of the essence of personal existence, apart from the self-unfolding of personal existence as this happens in life and is made visible in biographies.

THE DIMENSION OF SPIRIT

One characteristic of human existence is its transcendence. That is to say, man transcends his environment toward the world (and toward a higher world); but more than this, he also transcends his *being* toward an *ought*. Whenever man transcends himself in such a manner, he rises above the level of the somatic and the psychic, and enters the realm of the genuinely human. This realm is constituted by a new dimension, the noetic; it is the dimension of spirit. Neither the somatic nor the psychic alone constitute the genuinely human; rather, they represent only two sides of the human being. Thus, there can be absolutely no talk of a parallelism in the sense of dualism, nor of an identity in the sense of monism. Nevertheless, in spite of all the ontological variations of the somatic, psychic, and noetic, the anthropological unity and wholeness of a human being are preserved and saved as soon as we turn from an analysis of existence to what I call a dimensional ontology (10, p. 161; 11).

In an exclusively one-sided psychodynamic approach the genuinely human is necessarily portrayed in distortion. Indeed, certain human phenomena will entirely escape one, such as meaning and value. They must disappear from the field of vision as soon as instincts and dynamics are alone considered valid, for the simple reason that values do not drive me, they pull me. A great difference exists between driving and pulling, which we must recognize whenever we seek, in the sense of a phenomenological analysis, an access to the total, unabridged reality of human being.

Furthermore, it must appear questionable to speak of a "moral instinct" in the same sense as of a sexual instinct, or of a "religious instinct" as of an "aggression instinct" (2). This would tend to make us see the essence of something like morality in the satisfying of a moral drive, or in the quieting of the superego, or in the appeasing of conscience. A good man, however, is not good for the sake of his conscience, but for a cause, for the good cause; or, a man is good because of, or for the sake of a person, or for the sake of God. Were a good

man really good only in order to have a good conscience, then we would be truly confronted with a case of Pharisaism. To have a good conscience can never be the purpose of our ethical behavior; it is the result. Also, it is scarcely to be assumed that the saints would have become holy if that had been their main concern. Then, they would actually have become perfectionists, and perfectionism is one of the typical hindrances on the way toward perfection. Certainly a good conscience is, as the saying goes, the best pillow; we must, nevertheless, beware of making morality into a sleeping pill and ethics into a tranquilizer.

The underlying factor here is the conception, or better said the misconception, of the human psyche as dominated by an entropy, an equilibrium principle, in a word, the stipulation that the principle of homeostasis is regulative. This principle proceeds as if the psyche of man were a closed system and as if it were man's paramount concern to maintain or restore certain psychic conditions through the reconciliation and satisfaction of the claims of the id and superego. In this manner such an anthropology slides into a monadology. The true, the normal man is not concerned about some condition in his soul but about objects in the world; he is primarily ordered and directed toward them. Only the neurotic man is no longer objectively oriented; he is primarily interested in his own subjective condition. A psychotherapy which would acknowledge only the principle of homeostasis and would allow itself to be led by a monadological picture of man, would only reinforce neurotic escapism (14).

CRITIQUE OF SELF-ACTUALIZATION

In this connection we cannot refrain from critical remarks concerning the current catchwords of self-fulfillment and self-actualization. Self-fulfillment and self-actualization cannot possibly be life's final purpose or man's last aim; on the contrary, the more man directs himself toward them, the more he will miss them. This is true for every subjective condition, e.g., pleasure; the more man strives for pleasure, the more it eludes him, and many sexual neuroses have their etiological basis precisely in this law. The hunt for happiness frightens the object away; the pursuit of happiness borders upon a self-contradiction.

Actually, man's concern is not to fulfill himself or to actualize himself, but to fulfill meaning and to realize value. Only to the extent to which he fulfills concrete and personal meaning of his own existence

will he also actualize himself. Self-actualization occurs by itself—not through intention, but as effect.

When is man so concerned with self-actualization? When does he, in this sense, reflect upon himself? Is not such reflection in each instance an expression of an intention toward meaning that has missed its goal and been frustrated? Does not the forced striving after self-actualization betray a frustrated striving for the fulfillment of meaning? Here the analogy of a boomerang comes to mind. Its purpose, as it is generally supposed, is to return to the hunter who has thrown it. But this is not so; only that boomerang returns to the hunter which has missed its target, the prey. Likewise, only that man comes back upon himself and is intent upon his own condition who has forgotten that outside in the world a concrete and personal meaning awaits him, that out there a task is waiting to be fulfilled by him and him alone. Man is close to himself only to the extent that he is close to the things in the world, to the extent that he stands in and for the world.

WILL-TO-MEANING

We maintain: only when the primary, objective orientation is lacking and has run aground, does that interest in one's condition arise which is so strikingly manifest in neurotic existence. Therefore the striving for self-actualization is in no way something primary; rather we see in it a deficient mode and a reduced level of human existence. Man's primary concern is not self-actualization, but fulfillment of meaning. In logotherapy we speak of a will-to-meaning (12); with this we designate man's striving to fulfill as much meaning in his existence as possible, and to realize as much value in his life as possible.

The will-to-meaning is something elementary, something genuine and authentic, and as such ought to be taken seriously by psychotherapy. But a psychology that designates itself as an unmasking one, is out to unmask this too; it presents man's claim to a maximally meaningful existence as a camouflage of unconscious instincts, and disposes of it as a mere rationalization. What is needed, I would say, is an unmasking of the unmasker! Although in some cases unmasking may be right, the tendency to unmask must be able to stop in front of that which is genuine in man; else, it reveals the unmasking psychologist's own tendency to devaluate.

Least of all can psychotherapy afford to ignore the will-to-meaning; instead, calling upon it involves a psychotherapeutic principle of

the first rank. This can, under some circumstances, not only effect the preservation of psychic or somatic health but may be outright life-saving. Here not only clinical but other types of experiences, though no less empirical and practical, present themselves. In the tormenting "experiment" (*experimentum crucis*) of war prisons and concentration camps scarcely anything enabled one more to survive all these "extreme situations" (*Grenzsituationen*, in the sense of Karl Jaspers) than the knowledge of a life task (7, 13). This "experiment" has confirmed Nietzsche's words: "He who has a *why* to live for, can bear almost any *how*." The validity of these words depends, however, upon the fact that such a "why" pertains not just to any situation: it *must* pertain to the unique life task, the singularity of which corresponds to the fact that each man's life is singular in its existence and unique in its essence.

EXISTENTIAL FRUSTRATION

The will-to-meaning can become frustrated. In logotherapy we speak of an *existential frustration* (8, 9) since it appears justified to designate as existential that which applies to the meaning of existence, including the will-to-meaning. The feeling of meaninglessness is not pathological; it is something generally human, even the most human of all that there may be in man; it is not something all-too-human, something morbid. We must learn to distinguish between the human and the morbid, lest we confuse two essentially different things, viz., spiritual distress and psychic illness (13, p. 101). In itself existential frustration is far from being morbid.

A patient of our acquaintance, a university professor of Vienna, had been assigned to us because he had tormented himself with the question of the meaning of his life. It turned out that he suffered from a recurrent endogenous depression; however, he brooded over and doubted the meaning of his life not during the phases of his psychic illness, but rather in the intervals, that is, during the time of healthiness.

Today existential frustration plays a more important role than ever. Man today suffers not only an increasing loss of instinct but also a loss of tradition; and herein may well be one of the causes of existential frustration. We see its effect in a phenomenon which we in logotherapy call *existential vacuum* (8, 9), that is, inner emptiness, the feeling of having lost the meaning of existence and the content of life. This feeling then spreads and permeates the whole of life.

The existential vacuum may become manifest or remain concealed. It becomes manifest in the condition of boredom. The phenomenon of boredom, in-

cientally, invalidates the principle of homeostasis as applied to man's psychic life. If complete satisfaction of our needs were our primary aim, then such satisfaction would not result in existential fulfillment but rather in emptiness in the deepest sense of existential vacuum.

When Schopenhauer once said that humanity apparently is doomed to swing back and forth between the two extremes of need and boredom, he was not only quite correct; he seems to have foreseen that in our generation boredom gives us psychiatrists more work than does need, including the sexual need. Increasing automation gives man a greater amount of leisure time than he has previously had and than he knows how to use. Also the aging population is faced with the problem of how to fill its time and with its own existential vacuum. Finally, we can also see many ways in which the will-to-meaning is frustrated in youth and adolescence. Delinquency can only in part be traced to the acceleration of physical development; spiritual frustration, as is more and more being recognized, is also decisive.

Existential frustration can certainly also lead to neurosis. And so we speak in logotherapy of a *noogenic neurosis*, by which we understand a neurosis which has originally and genuinely been caused by a spiritual problem, a moral conflict, or an existential crisis; and we place the noogenic neurosis heuristically over against neurosis in the strict sense of the word, which is by definition a psychogenic illness.

LOGOTHERAPY

The specific therapy of noogenic neurosis can only be a psychotherapy which dares to follow man, his sickness and its etiology into the noetic, spiritual dimension. Such a therapy is logotherapy. When we distinguish between logotherapy and psychotherapy, we use the latter term in the narrow sense, and, at that, intend the distinction only in a heuristic way. *Logos* now means not only *meaning*, but also the *spiritual* (6). The will-to-meaning is the subjective side of a spiritual reality in which the meaning is the objective side; at least it is objective insofar as the will is concerned with "finding" meaning and not at all with "giving" it.

Noetic therapy is, however, not only applicable in cases of noogenic neuroses; rather, a psychogenic neurosis often represents a psychic development that has become rampant because of a spiritual vacuum, so that the psychotherapy will not be complete unless the existential vacuum is filled and the existential frustration is removed.

Logotherapy is more concerned with the attitude of the patient toward the symptom than with the symptom itself; for all too often it is the wrong attitude that is really pathogenic. Logotherapy, therefore, distinguishes different attitude formations (10, p. 128), and

attempts to bring about within the patient a transformation of attitude; in other words, it is really a conversion therapy (not implying the religious connotation). To this end it provides specific methods and techniques such as *dereflection* and *paradoxical intention* which have been described elsewhere (10, 18).

Logotherapy attempts to orient and direct the patient toward a concrete, personal meaning. But it is not its purpose to *give* a meaning to the patient's existence; its concern is only to enable the patient to *find* such a meaning, to broaden, so to speak, his field of vision, so that he will become aware of the full spectrum of possibilities for personal and concrete meanings and values.

If the patient is to become conscious of a possible meaning, then the doctor must know and remain conscious of all the possibilities for meaning, above all the meaning of suffering. Suffering from an incurable disease, for example, conceals in itself not only the last possibility for the fulfillment of meaning and the realization of value, but the possibility for deepest meaning and highest value. In this view, life up to the last moment never ceases to have a meaning. Logotherapy, then, will not only aim toward the recovery of the patient's capacity for work, enjoyment, and experience, but also toward the development of his capacity to suffer, viz., his capacity to fulfill the possible meaning of suffering (13, p. 107).

CONCLUSION

On the whole we think of logotherapy as a supplement rather than a substitute for psychotherapy in the narrow sense of the word. But in addition logotherapy might also make a contribution toward the completion of psychotherapy's picture of man—toward a picture of the whole man, of man in all his dimensions, toward a picture that also includes the genuinely human, that is, the spiritual dimension.

Psychotherapy needs a correct picture of man; it needs this at least as much as an exact method and technique. The doctor, however, who overestimates and idolizes method and technique, and who understands his role merely as that of a medical technician, only proves that he sees man as a mechanism, a machine—*l'homme machine* (Julien O. de Lamettrie)—and does not see the man behind the patient.

I believe that the dream of half a century has been dreamed out. I mean the dream that regarded the psyche as a mechanism and accordingly held that there was a technique for psychic cure. In other

words, the dream considered that an explanation of psychic life in terms of mechanisms was possible, and similarly that the treatment of psychic suffering was to be performed solely with the help of psychic technology. What begins to appear in the dawn are not sketches of a psychologized medicine, but of a humanized psychiatry.

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