

A therapist who ignores the spiritual is giving away one of his most valuable assets.

The Concept of Man in Psychotherapy

A WELL-KNOWN psychiatrist once said that Western Humanity had turned away from the priest to the doctor. Another psychiatrist complained that nowadays so many patients approached the medical man with problems which should really be put before the priest; but when one tried to send them to a priest they would not go. Actually, we find that patients repeatedly come to us with such problems as the meaning of their existence. It is by no means true, however, that we doctors attempt to carry philosophy over into medicine, though this is often said of us; it is the patients themselves who bring us philosophical problems—the problems of their own concept of life.

It may well be that the individual doctor, confronted with such problems, is somehow driven into a corner; but medicine, and psychiatry in particular, has thereby been compelled to review a new world of problems.

Even now, a doctor can make things easy for himself; just as before, he can escape from these new questions. For instance, he may escape into the sphere of psychology, proceeding as if the

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spiritual distress of a human being, striving for a meaning to his existence, were nothing but a psychological phenomenon and a pathological one at that.

Man lives in three dimensions: the somatic, the mental, and the spiritual. Psychologism ignores this third dimension, the spiritual dimension—although this is the very one which *makes* a being human. It may often be that man's concern about a meaning in life, which should be worthy of life, is not in itself a sign of disease or of neurosis. The differential diagnosis between "achievement and symptom"—to use the antithesis of Oswald Schwartz—can only be made by someone who can see the spiritual. At any rate, the worry about the meaning of his life, the existence of this worry, this spiritual agony, may have very little connexion with a disease of the psyche.

Psychoanalysis has put forward its theory of the principle of pleasure; individual psychology has told us about the "Geltungsstreben." The principle of pleasure could be termed the will-to-pleasure; the Geltungsstreben, on the other hand, corresponds to the will-

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to-power. But where do we hear of that which most deeply inspires and pervades man; where is the innate, albeit often unconscious and sometimes even repressed, desire to give as much meaning as possible to one's life, to realize as many values as possible—what I would call the will-to-meaning?

Psychotherapy would turn this will-to-meaning—this most human phenomenon of all (since an animal certainly never worries about the meaning of its existence)—into a human frailty, a pathological phenomenon, a complex, or something of the kind. A therapist who ignores the spiritual, and is thus forced to ignore the will-to-meaning, is giving one of his most valuable assets away, for it is this very will-to-meaning that we should evoke, it is to this will that a psychotherapist should appeal. Again and again we have seen that, even under the most unfavourable conditions, both within and without, an appeal to continue life, to survive such situations, can only be made when such a survival appears to have a meaning. Above all, when a specific, personal mission is concerned; a meaning of existence, which can be realized by this one and only person; for we must not forget that every man is unique in the universe and we believe he exists but once in all time.

I remember my dilemma in a concentration camp when faced with a man and a woman who were close to suicide; both had told me the same thing—that they expected nothing more from life. In that moment the indicated therapy was to try to achieve a kind of Copernican switch by asking both my fellow-prisoners whether the question was really what we expected from life or, rather, was it not what life was expecting from us. I suggested that life was awaiting something from them. In fact, the woman was being awaited by

her child abroad and the man by a series of books which he had begun to write and publish, but had not yet finished.

A GOAL can only be a goal of life, however, if it has a meaning. Now I am prepared for the argument that psychology and its medical application, psychotherapy, belong to the realm of science and are, therefore, not concerned with values; but I believe there is no such thing as psychotherapy unconcerned with values, only one that is blind to values. A psychotherapy which not only recognizes the spiritual, but actually starts *from* the spiritual, may be termed Logotherapy. In this connexion Logos is intended to signify "the spiritual" and beyond that "the meaning." The Giessen psychiatrist, Richard Kraemer, once, so aptly, said with regard to logotherapy: Up to now the spirit was regarded "as the enemy of the soul" (he was referring to the famous book by Ludwig Klages); now the spirit has become fellow-fighter for the soul's health. Now we attack the disease with three armies: somatotherapy, psychotherapy, and logotherapy.

It is, of course, not the aim of logotherapy to take the place of psychotherapy within the usual meaning of that term, but only to complement it, thus complementing the concept of man to form a picture of complete man, the completeness of whom includes essentially the spiritual dimension. In the first place such a therapy, which is directed towards the spiritual, will be indicated in cases in which a patient turns to a doctor because of spiritual distress and not actual disease. One can, of course, if one wants to, speak of neuroses even in such cases, neuroses within the widest sense of the term; the Utrecht psychiatrist Ruemke, has only re-

cently said that neuroses are but syndromes. And if one speaks of neuroses in this very wide sense one may also call the despair over an unsuccessful striving for a meaning to life a neurosis, say an *existential* neurosis as opposed to the clinical neurosis. And just as, for example, sexual frustration may—at least according to psychoanalysis—lead to neuroses, it is also conceivable that a frustration of the will-to-meaning, may also be pathogenic, that is to say, may lead to a neurosis. I call this frustration existential frustration. The Head of the Psychotherapy Out-Patients' Department of the Neurological Policlinic in Vienna noted that 12% of the cases were existential neuroses. Ruth Volhard and D. Langen in their report on the Psychotherapy Out-Patients' Department of the Neuropsychiatric Clinic at Tübingen University (under Professor Kretschmer) found roughly the same percentage.

In these cases logotherapy is a specific therapy; in other cases it is a non-specific therapy; that is to say, there are cases in which the disease, in particular the neurosis, is psychogenic in the usual sense of the term, and yet the therapy can only be carried to its full success when concluded by logotherapy.

Thus we have shown when logotherapy is a specific therapy and when it can be effective though non-specific; but there are also cases in which it is no therapy at all, but something else, namely medical spiritual care. As such, it is to be used not only by the neurologist or the psychiatrist, but by every doctor, since, for example, the surgeon needs it just as much when faced with inoperable cases or with those that he must maim by removing a limb. Likewise the orthopaedic surgeon is confronted with problems of medical spirit-

ual care when he is dealing with cripples; finally, the dermatologist when dealing with disfigured patients, and the physician with incurables.

In all these cases there is, of course, more at stake than psychotherapy has hitherto been aiming at. Its aims were capacity to work and capacity to enjoy life; medical spiritual care is concerned with the capacity to suffer. Thus we are faced with an interesting problem; the question as to what fundamental possibilities there are at all of giving life a meaning, of realizing values. The answer is that life can be given a meaning by realizing what I have called creative values, or by achieving a task. But one can also give meaning to one's life by realizing experiential values, by experiencing the Beautiful, the Good, the True, or by experiencing one single human being in his uniqueness. And to experience one human being as unique, truly as Thou, means to love him. But even a man who finds himself in the most dire distress in which neither activity nor creativity can bring values to life, nor experience give meaning to it—even such a man can still give his life a meaning by the way in which he faces his faith, his distress, in which he takes his destined suffering upon himself as a burden to be borne; in this he has been given a last chance of realizing values.

THUS life has a meaning to the last breath. For the possibility of realizing values by the very attitude with which we face our destined suffering: this possibility is there to the very last moment. I call such values attitudinal values. The right kind of suffering—facing your fate boldly—is the highest achievement which has been granted to man. Thus, even where man must renounce the realization of creative and experiential values he can still achieve

something. I should like to illustrate my point by the following case: A nurse in my department suffered from a tumor which was shown by laparotomy to be inoperable. In her despair the nurse asked me to visit her and our conversation revealed that the cause of her despair was not so much her illness in itself as her incapacity to work. She had loved her profession above everything and now she could no longer follow it, hence her despair. What should I say? Her situation was really hopeless; nevertheless I tried to explain to her that to work eight hours or ten hours or any number of hours per day is no great thing, many people can do that; but to be as eager to work as she was, and so incapable of work, and yet not to despair—that would be an achievement few could attain. And then I asked her “Are you not really being unfair to all those thousands of sick people to whom you have dedicated your life as a nurse; are you not being unfair if you now act as if the life of a sick or incurable person, that is to say, of someone incapable of working, were without meaning?” I said: “If you despair in your situation, then you are behaving as if the meaning of our life consisted in being able to work so many hours a day; but in so doing you would take away from all sick and incurable people the right to live and the justification for their existence.”

It goes without saying that the realization of attitudinal values, the achievement of meaning through suffering, can only take place when the suffering is unavoidable and unescapable.

It may well be asked if such an approach as I have described can still be said to belong to the sphere of medicine, and I can certainly be reproached with the fact that medicine thus extended can at least no longer be said to

belong to the realm of pure natural science. For my part, I would then immediately admit that the methods of natural science are most certainly necessary, for instance, to amputate a leg; but I should just like to permit myself the question, how can pure natural science help us to prevent the patient from committing suicide, either after, or even before, the amputation? The great psychiatrist Dubois once said so rightly: “Of course, one can manage without all that and still be a doctor, but one should realize that then the only thing that makes us different from a veterinary surgeon is the clientele.”

Thus the fact remains that even where we, as doctors in the narrower sense of the word, must resign, we can still work as doctors in the wider sense by medical spiritual care, and I am sure that this work still belongs to the proper sphere of medical activity. Not for nothing did Emperor Francis Joseph II dedicate the great General Hospital in Vienna, which even to-day houses most of the university clinics: “*Saluti et solatio aegrorum.*”

And how easy it is for a doctor to provide consolation. I should like to quote the case of a colleague, an old practitioner, who turned to me because he still could not get over the loss of his wife who had died two years earlier. His marriage had been very happy and he was very depressed. I asked him quite simply “Tell me what would have happened if you had died first and your wife had survived you?” “That would have been terrible,” he said, “quite unthinkable; how my wife would have suffered.” “Well, you see,” I answered, “your wife has been spared that, and it was you who spared her, though, of course, you must now pay by surviving and mourning her.” In that very moment his mourning had been given a meaning—the meaning of a sacrifice.

I have said earlier that man should not ask what he can expect from life, but should rather understand that life expects something from him. One might also formulate it like this: in the last resort man should not ask, what is the meaning of my life, but realize that he himself is the one on trial; life is putting its problems to him, and it is up to him to face the problems by shouldering his responsibility, thus answering *for* his life.

LIFE is a task, and religious man differs from the apparently irreligious one only by experiencing his existence not simply as a task but as a mission. This means that he also experiences the taskmaster, the origin of his mission. For thousands of years this authority has been called God.

I said before that logotherapy is no substitute for psychotherapy, but its complement; but least of all does medical spiritual care aspire to be a substitute for the proper care of souls; that is practised by the priest. Now, what is the relation between the medical and the priestly care of souls? What is the relation between psychotherapy and religious care? In my view the answer is simple: the goal of psychotherapy is to heal the soul, to make it healthy; the aim of religion is something essentially different—to save the soul. So much for the different aims of psychotherapy and religious care of souls. But if instead of asking what is being aimed at we try to see what is the result, the, so to speak, unintended side-effect, we will find that the side-effect of religious care of souls is an eminently psycho-hygienic one. This is due to the fact that religion provides man with a spiritual anchor and with a feeling of security, such as he can find nowhere else. But to our surprise, psychotherapy can produce an analogous unintended side-effect;

for although the psychotherapist is not concerned with, must not even be concerned with, helping his patient to achieve a capacity for faith beyond restitution of his capacity to work, enjoy and suffer—in spite of this, in certain felicitous cases the patient regains his capacity for faith, although in the course of his psychotherapeutic treatment neither he nor his doctor had aimed at that.

For such a result can never be the aim of psychotherapy from the beginning, and a doctor will always have to beware of forcing his philosophy upon the patient. There must be no transference (or rather, counter-transference) of a personal philosophy, of a personal concept of values, to the patient. The logotherapist must be careful to see that the patient does not shift his responsibilities on to the doctor. Logotherapy is ultimately education to responsibility; and with this responsibility the patient must push forward independently towards the concrete meaning of his personal existence; must choose it on his own. Thus we have spoken of the necessity and the possibility of psychotherapy, particularly in the form of logotherapy, caring for the spiritual distress of contemporary man. Now that we have passed out of the sphere of the purely clinical into a meta-clinical domain, that of existential neurosis, we may proceed to the para-clinical realm of collective neurosis, the realm of a pathology of the "Zeitgeist," the spirit of our time, as one might call it.

Anxiety is usually called the disease of our time, and we speak of the age of anxiety; but Freyhan has pointed out that previous centuries probably suffered much more from anxiety and had much more reason for anxiety than ours. It is also very doubtful whether the relative incidence of anxiety neurosis has increased. Nor is it right to

say that speed is the disease of our time, although one might gain that impression when faced with a phenomenon like "managers' disease." Of course, I am not referring to speed as the producer of increased numbers of accidents, though even here psychological elements—or rather spiritual factors—are dominant. As Joachim Bodamer recently has shown in Central Europe the car is to-day for the man in the street the highest criterion of a living standard, and the average man there frequently works himself to the bone just to buy a car for reasons of prestige; and then it may well happen that he falls a victim to the so-called "managers' disease." I know of cases in which people have, in this way, died of their car before they even owned it. Of course not everyone is satisfied with owning a car, and perhaps the most classical example of "managers' disease" I ever came across in my practice was that of a foreign industrialist who had one wish, a wish that dominated his entire life: he was wealthy enough to afford a private plane, but cherished the ambition to own a jet instead. . . .

As far as one can speak about collective neurosis at all—in a purely para-clinical sense—the collective neurosis of our time is characterized by four symptoms, which I shall briefly describe.

First there is a planless, day-to-day attitude towards life. Contemporary man is used to living from one day to the next. He learned it in the last World War and since then this attitude has, unfortunately, not been modified. While people used to live in this way because they were waiting for the end of the war and further planning, therefore, made no sense, the average man of to-day says: "Why should I act, why should I plan? Sooner or later the

atom bomb will come and wipe everything out." And thus he slides into the attitude: "Après moi, la bombe atomique!" And just as any other anticipatory anxiety, this anxiety of anticipating atomic warfare is dangerous, since, like all fear, it tends to make that which it fears come true.

The second symptom is the fatalist attitude to life. This again has been learned in the last World War. Man was pushed. He let himself drift. The day-to-day man considers planned action unnecessary; the fatalist considers it impossible. He feels himself to be the product or result of outer circumstances or inner conditions.

The third symptom is collective thinking. Man would like to submerge himself in the masses. Actually he is only drowned in the masses; he surrenders himself as a free and responsible being.

The fourth symptom is fanaticism. While the collectivist ignores his own personality, the fanatic ignores that of the other man, the man who thinks differently. The other man does not count, only his own opinion is valid. In reality his opinions are those of the group and those he does not really have; they have him.

JUST as a normal conflict, a conflict of conscience, can become pathogenic by leading to an existential neurosis, so we can understand how as long as man is capable of a conflict of conscience he will be immune to fanaticism and to collective neurosis in general; conversely, a man who suffers from collective neurosis will overcome it to the degree to which he is re-enabled to hear the voice of his conscience and to suffer from it; existential neurosis will then cure the collective one! Some years ago I spoke on this subject at a congress where, among others, were

colleagues who lived under a totalitarian regime. After the lecture they came to me and said: "We know this phenomenon very well: we call it 'functionary's disease.' A certain number of party functionaries are ultimately driven by the increasing burden of their conscience into a nervous breakdown and then they are cured of their political fanaticism."

Fanaticism crystallizes in the form of slogans, and these again produce a chain reaction; this psychological chain reaction is even more dangerous than the physical one, such as forms the basis of the atom bomb. For the latter could never be put into action if it had not been preceded by the psychological chain reactions of slogans.

Thus, if we speak of this pathology of the spirit of our time as of a mental epidemic, we might add that somatic epidemics are typical consequences of war, while mental epidemics are potential origins of war. In tests carried out by my collaborators with non-neurotic patients, only one was completely free of all the four symptoms of collective neurosis, whereas 50% of them showed at least three of the four symptoms,

Ultimately, all these four symptoms can be traced back to man's fear of responsibility and his escape from freedom. Yet responsibility and freedom compose the spiritual domain of man. Contemporary man, however, and this is characteristic, has become weary of the spiritual and this weariness is perhaps the essence of that nihilism which has so often been quoted and so rarely defined. This would have to be counteracted by a collective psychotherapy. It is true that Freud once declared in conversation: "Humanity has always known that it possesses a spirit: it was my task to show that it has instincts as well." But I myself feel that humanity has certainly in the last years dem-

onstrated *ad nauseam* that it has instincts or rather drives. And to-day it appears after all more important to remind man that he has a spirit, that he is a spiritual being. And psychotherapy itself should remember this fact, particularly in face of collective neurosis! And now we find ourselves immediately faced with the question of the concept of man in psychotherapy. Every form of psychotherapy has a concept of man, albeit not always consciously; but then it will be up to us to make it conscious. Or do we, who have learned from Freud, really have to point out how dangerous the unconscious can become? We must explicate the unconscious, the implicit concept of man in psychotherapy, we must develop it just as one develops a negative, bringing it out of its latency towards clear manifestation. For a psychotherapist's concept of man, under certain circumstances, can be such that it reinforces the patient's neurosis, for it can itself be entirely nihilistic.

THREE FACTORS characterize human existence as such: man's spirituality, his freedom, his responsibility. The spirituality of man is no epiphenomenon. It cannot be derived from and causally explained by something not spiritual; it is irreducible and indeducible. Spiritual life may very well be conditioned by something, without therefore being caused by it. Normal somatic functions are conditional to the unfolding of spiritual life, but they do not cause or produce it. Again I should like to illustrate this point by an advertisement from "The Times," published some years ago: a witty gentleman inserted the following: "Unemployed. Brilliant mind offers its services completely free; the survival of the body must be provided for by adequate salary."

A normally functioning psychophysical organism is thus no more or less than the condition for the unfolding of the spiritual self.

Now freedom means freedom in face of three things: (1) the instincts; (2) inheritance; and (3) environment.

Certainly man has drives, but these drives do not have him. We have nothing against the drives, not even against man accepting them, but we hold that such an acceptance must presuppose that he also had the possibility of rejecting a drive, that there was thus freedom of decision. We have nothing against the acceptance of drives, but we are, above all, concerned with man's freedom in the face of them.

As for inheritance, the most serious research on heredity has shown how high is the degree of human freedom in the face of predisposition. In particular, research on twins has shown how different lives can be built up on the basis of identical predispositions. I should only like to remind you of the identical twins of Lange, where one partner became a cunning criminal, while his brother became an equally cunning criminologist. Both were born with cunning, but this characteristic in itself implies no values, neither vice nor virtue. I myself am in possession of a letter from a woman psychologist abroad who wrote to me that her character was down to every detail identical with that of her twin sister. They like the same clothes, the same composers, and the same men. There is just one difference: one sister is full of life and the other utterly neurotic.

As for environment, we know that it does not make man, but that everything depends on what man makes of it, on his attitude towards it. Freud once said: "Try and subject a number of very strongly differentiated human beings to the same amount of starvation. With the increase of the impera-

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tive need for food all individual differences will be blotted out, and, in their place, we shall see the uniform expression of the one unsatisfied instinct." But in the concentration camps we witnessed the contrary, we saw how, faced with the identical situation, one man became a swine while the other attained almost saintly status. And Robert J. Lifton (1954, "Amer. J. Psychiat.," 110, 733) writes about American soldiers in North Korean prisoner-of-war camps: "There were examples among them both of altruistic behaviour as well as the most primitive forms of struggle for survival."

Thus man is by no means a product of inheritance and environment. Tertium datur: the decision—man ultimately decides for himself! And in the end education is just education towards the ability to decide.

But also psychotherapy must direct its appeal to the ability for decision, to the freedom of attitude. Thus it appeals not only to what we have called man's will-to-meaning but also to the freedom of man's will.

THIS WILL cannot simply be derived from the instincts—no more than we can deduce the "should" from the "would." And so we come to the third factor—after the spirituality and the freedom of man: his responsibility. To whom is man responsible? First of all, to his conscience. But this conscience again is also irreducible and indeducible, thus an original phenomenon and no epiphenomenon! One day I was sitting in a restaurant with an internationally famous psychoanalyst. He had just given a lecture and we were discussing it. He was denying that such a thing as a conscience, as an original phenomenon, existed at all, and asked me to tell him what this conscience was. I answered briefly: "Con-

science is that which has made you present us to-night with such a splendid lecture." Whereupon he waxed furious and screamed at me: "That isn't true—I did not deliver this lecture for my conscience, but to please my narcissism!"

To-day modern psychoanalysts themselves have come to the conclusion that "true morality cannot be based on the concept of a super-ego" (Weiss, F. A., 1952, "Amer. J. Psychoan.," p. 41).

We are thus confronted with two original phenomena which cannot be reduced to other phenomena or rather deduced from them. The first phenomenon was man's freedom, the second man's responsibility. In the face of these two, dynamic or genetic contemplation is insufficient; drives cannot repress themselves. But neither can man be responsible to himself, at least not in the last analysis. Behind his conscience stands, albeit often unknown to him, an extra-human authority. Freud once said: "Man is not only often much more immoral than he believes, but also often much more moral than he thinks." I should like to add that he is often much more religious than he suspects. These days people see more in man's morality than an introjected father-image; and in his religion more than a projected father-image. And they have long ceased to consider religion a general obsessional neurosis of humanity.

I have said that man is often more religious than he himself suspects. But we must not make the mistake of looking upon religion as something emerging from the realm of the id, thus tracing it back again to instinctual drives. Even the followers of Jung have, alas, not avoided this error. They reduce religion to the collective unconscious respectively to archetypes. Once I was



asked after one of my lectures whether I did not admit that there were such things as religious archetypes, since it was remarkable that all primitive peoples ultimately reached an identical concept of God, and this could after all only be explained with the help of a God-archetype. I asked my questioner whether there were such a thing as a Four-archetype. He did not understand immediately, and so I said: "Look here, all people discover independently that two and two make four—perhaps we do not need an archetype for an explanation—perhaps two and two really do make four. And perhaps we do not need a divine archetype to explain human religion either—perhaps God really does exist."

There is, ultimately, no such thing as repression of drives by themselves,

just as there is no such thing as responsibility to oneself; we can only be responsible to an entity higher than ourselves, and, if we derive the ego from the id and the super-ego from the id and the ego, what we achieve is not a correct picture of man but in some way a caricature of man. This sounds like a tall story of Baron Münchhausen with the ego pulling itself out of the bog of the id by its own super-ego shoelaces.

There is a danger that we may corrupt a man, that we may work into the hands of his nihilism and thus deepen his neurosis if we present him with a concept of man which is not the true concept of man; if we make man into a homunculus. The modern homunculus is not produced in the alchemist's vaults and in retorts, but wherever we present man as an automaton of reflexes, as a mind-machine, or as a bundle of instincts, as a pawn of drives and reactions, as a mere product of instinct, inheritance, and environment.

It occurs, in short, whenever we draw from biological data conclusions which are solely biologicistic, from psychological data, psychologicistic conclusions.

I became acquainted with such biologism in my second concentration camp, in Auschwitz. For that is where biologism led to, right into the gas chambers of Auschwitz, that was the ultimate consequence of the theory that man is nothing but a product of inheritance and environment, or, as they liked to say in those days, of "Blood and Soil." I am absolutely convinced that the gas chambers of Auschwitz, Treblinka, and Maidanek, were ultimately not prepared in some Ministry or other in Berlin but rather at the desks and in the lecture halls of nihilistic scientists and philosophers.