

EXISTENTIAL ESCAPISM

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Existential philosophy has been blamed frequently in recent years for overemphasizing tragic aspects of human existence. Logotherapy, one of the schools of existential psychiatry, has been accused of centering too much on dying and suffering. However, since logotherapy, as its name betrays, focuses on meaning (*logos* means meaning) it therefore cannot avoid confronting the patient with pain, death and guilt, or, as I call it, the tragic triad of human existence.

These three existential facts of life should be faced by the patient rather than blurred and clouded by the doctor. This is a particularly important assignment and requirement in psychotherapy since at the present it is no more than the instinctual aspects of human existence which are subject to repression, but rather man's spiritual aspirations. And, the lack of sexual awareness is seldom the cause of neurosis as a mode of escape (this was true only for the Victorian age!). Today our neurosis is an attempt to obscure existential facts, and an old-fashioned, one-sided psychodynamic indoctrination may well shunt the actual problems by providing the patient with a pandeterministic self-image which does not allow for change and growth. We may now understand how justified Arthur Burton was in pointing out that when fear of death is indiscriminately analyzed away or reduced to castration anxiety, this constitutes a form of denial of an existential fact.¹

Dying and suffering are not inventions of logotherapy. They belong to the human condition. Therefore, one should not approach them as if, in a given case, he just had to deal with bad luck. Pain, death, and guilt are inescapable and the neurotic only entangles himself in additional suffering in any attempts to escape them.

Although the tragic triad is an undeniable fact inherent in human existence, it is rationalized away by means of technical progressivism and scientism. But even in the United States—where society is so permeated by the belief that sooner or later science will resolve man's predicament—there are rumors that after all man is a finite and moral being who inevitably has to face dying—and even before this—suffering.

This article is specifically and explicitly concerned with man's mortality and life's transitoriness. As we teach in logotherapy, the essential transitoriness of human existence itself adds to life's meaningfulness. If man were immortal, he would be justified in delaying everything; there would be no need to do anything right now. Only under the urge and pressure of life's transience does it make sense to use the passing of time. Actually the only transitory aspects of life are the potentialities. As soon as we have succeeded in making actual a potentiality, we have transmuted it into an actuality, and thus rescued it into the past. Once an actuality, it is one forever. Everything in the past is saved from being transitory. Therein it is irrevocably stored rather than irrecoverably lost.

This is true irrespective of whether there is still anyone around who may remember that which has been. I deem it a thoroughly subjectivistic view if one assumes that

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¹ See Burton, "Death as a Countertransference," *Psychoanalysis and the Psychoanalytic Review* 49, 3-20, 1962-63.

everything depends on the presence of an individual's memory in which alone there is duration. Clemens E. Benda certainly did not escape such a subjectivistic interpretation of the true ontological state of affairs when he wrote, "It is obvious that the past exists only through its impact on the imagery, which has duration."²

Usually, to be sure, man only considers the stubble field of transience and overlooks the full granaries of the past wherein he has salvaged once and for all his deeds, his joys, and also his sufferings. Nothing can be undone, and nothing can be done away with. I should say that having been is still a form of being, even its most secure form.

Imagine what consolation this would bring to a war widow who has experienced only a few weeks of marriage. She could feel that this experience can never be taken from her. It will remain her inviolable treasure, preserved and delivered into her past. Her life then can never be meaningless even if she remains childless. (The assumption that procreation is the only meaning of life contradicts and defeats itself; something that by itself is meaningless can never be made meaningful merely by perpetuating it.)

I think that the logotherapeutic attitude of the past implies both activism and optimism. Man is called upon to make the best use of any moment, and to make the right choice at any time, be it knowing what to do, or whom to love, or how to suffer.

About two millennia ago a Jewish sage, Hillel, said, "If I don't do this job, who will do it? And if I don't do this job right now, when shall I do it? But if I carry it out only for my own sake, what am I?" The first two portions of this saying suggest that each man is unique and each man's life is singular; by the same token, no man can be replaced and no man's life can be repeated. Both this very uniqueness of each human being and the singularity of his existence—and the singularity of each moment which holds a specific and particular meaning to fulfill—add to man's responsibility. The third portion of Hillel's dictum, then, grapples with self-transcendence as the foremost and paramount trait and feature of human existence (insofar as man's life always points to something (beyond himself). Life is always directed toward a meaning to fulfill rather than a self to actualize, or one's potentialities to develop.

This means activism. As to optimism, let me remind you of the words of Lao-tse: "Having completed a task means having become eternal." This is true not only for the completion of a task but for our experiences and for our brave sufferings as well.

What threatens man is his death in the future and his guilt in the past. Both are inescapable, both he must accept. Thus man is confronted with the human condition which is both fallible and mortal. The acceptance of this twofold human finiteness adds to life's being worthwhile, since only in the face of guilt does it make sense to improve, and only in the face of death is it meaningful to act.

What man has done, cannot be undone. Whereas he is responsible for what he has done he is not free to undo it. As a rule, being human implies being free and responsible. In the exceptional case of guilt, however, man still is responsible but no longer free. While arbitrariness is freedom without responsibility, guilt is responsibility without freedom.

Without freedom . . . except for the freedom to choose the right attitude to guilt. Through the right attitude unchangeable suffering is transmuted into a heroic and victorious achievement. In the same fashion, a man who has failed cannot change what happened by repentance, but he can change himself. Everything depends on the right attitude in the same way and manner as in the case of his suffering. The difference lies in the fact that the right attitude is then a right attitude to himself.

² Benda, "Existentialism in Philosophy and Science," *Journal of Existential Psychiatry*, 1, 284-314, 1960.

Professor Farnsworth of Harvard University recently contended before the American Medical Association that "medicine is now confronted with the task of enlarging its function . . . Physicians must of necessity indulge in philosophy." Doctors today are approached by many patients who in former days would have seen a pastor, priest or rabbi. Hence, they are confronted with philosophical problems rather than emotional conflicts. What is more, the patients often refuse to be handed over to a clergyman.

In those cases in which the doctor has to deal with an incurable disease he should not only treat the disease but also care for the patient's attitude toward it. It may well be that, thereby, the patient is offered consolation. The logotherapist will gladly and readily take this risk. I am fully aware of the fact that die-hard psychoanalysts abhor the interpretation of their job in terms of consolation. A logotherapist, however, understands his task in a different way; if need be—that is to say, in a helpless case, in a hopeless situation—he does not withhold from the patient the right to be comforted. The logotherapist does not deny the patient this right; he does not dismiss his duty simply as a pastoral rather than a medical responsibility. The demand for consolation exceeds the supply furnished by pastoral care. "Preachers are no longer the pastors of the souls, but the doctors have become such," said Kierkegaard. Anyway, coping with despair in the face of an incurable disease constitutes a challenge to the doctor, too. To him also are addressed the words, "Comfort ye, comfort ye My people." (Isaiah 40:1.)

How this is enacted in actual practice may be shown by the following excerpt from an interview with one of my patients. The patient was eighty years of age and suffering from a cancer which had eventuated in metastasis so that she could not be helped by surgery. She knew this, and had become increasingly depressed.

Frankl: What do you think of when you look back on your life? Has life been worth living?

Patient: Well, Doctor, I must say that I had a good life. Life was nice, indeed. And I must thank the Lord for what it held for me. I went to theaters, I attended concerts, and so forth. You see, Doctor, I went there with the family in whose house I have served for many decades as a maid. In Prague, at first, and afterwards in Vienna. And for the grace of all of these wonderful experiences I am grateful to the Lord.

I nevertheless felt that she was doubtful in so far as the ultimate meaning of her life as a whole was concerned. And this was the reason why I wanted to steer and pilot her through her doubts. I still had to provoke them, however, and then to wrestle with them. Wrestle with them as Jacob did with the angel until he blessed him—that is how I wanted to wrestle with my patient's repressed and unconscious existential despair until the moment when she, too, finally could "bless" her life, say yes to life in spite of everything. So my task consisted of having her question the meaning of her life on the conscious level rather than repressing her doubts.

Frankl: You are speaking of some wonderful experiences; but all this will have an end now, won't it?

Patient: (thoughtfully): In fact, now everything ends . . .

Frankl: Well, do you think now that all of the wonderful things of your life might be annihilated and invalidated when your end approaches? (And she knew that it did!)

Patient: (still more thoughtfully): All those wonderful things . . .

Frankl: But tell me: do you think that anyone can undo the happiness, for example, that you have experienced—can anyone blot it out?

Patient: (now facing me): You are right, Doctor: nobody can blot it out!

Frankl: Or can anyone blot out the goodness you have met in your life?

Patient: (becoming increasingly involved emotionally): Nobody can blot it out!

Frankl: What you have achieved and accomplished—

Patient: Nobody can blot it out!

Frankl: Or what you have bravely and honestly suffered; can anyone remove it from the world—remove it from the past wherein you have stored it, as it were?

Patient: (now moved to tears): No one can remove it! (After a while): It is true, I had so much to suffer, but I also tried to be courageous and steadfast in taking life's blows. You see, Doctor, I regarded my suffering as a punishment. I believe in God.

Per se, logotherapy is a secular approach to clinical problems. However, when a patient stands on the firm ground of religious belief, there can be no objection to making use of the therapeutic effect of his religious convictions and thereby drawing upon his spiritual resources. In order to do so, the logotherapist may put himself in the place of the patient. That is exactly what I now tried to do.

Frankl: But cannot suffering sometimes also be a challenge? Is it not conceivable that God wanted to see how Anastasia Kotek will bear it? And perhaps He had to admit, "Yes, she did so very bravely." And now tell me, can anyone remove such an achievement and accomplishment from the world, Frau Kotek?

Patient: Certainly no one can do it!

Frankl: This remains, doesn't it?

Patient: It does!

Frankl: By the way, you had no children, had you?

Patient: I had none.

Frankl: Well, do you think that life is meaningful only when one has children?

Patient: If they are good children, why shouldn't it be a blessing?

Frankl: Right, but you should not forget that for instance the greatest philosopher of all times, Immanuel Kant, had no children; would anyone venture to doubt the extraordinary meaningfulness of his life? I rather think if children were the only meaning of life, life would become meaningless because to procreate something which in itself is meaningless, certainly would be a most meaningless thing. What counts and matters in life is rather to achieve and accomplish something. And this is precisely what you have done. You have made the best of your suffering. You have become an example for our patients, as to the way and manner in which you take your suffering upon yourself. I congratulate you on behalf of this achievement and accomplishment, and I also congratulate your roommates who have the opportunity to watch and witness such an example. (Addressing myself now to my students): *Ecce homo!* (My audience now bursts into a spontaneous applause.) This applause concerns you, Frau Kotek. (She is weeping now.) It concerns your life which has been a great achievement and accomplishment. You may be proud of it, Frau Kotek. And how few people may be proud of their lives . . . I should say, your life is a monument. And no one can remove it from the world.

Patient: (regaining her self-control): What you have said, Professor Frankl, is a consolation. It comforts me. Indeed, I never had an opportunity to hear anything like this . . . (Slowly and quietly she leaves the lecture hall.)

Apparently, she now was reassured. A week later she died, like Job one could say, "saturated of years." During the last week of her life, however, she was no longer depressed, but on the contrary, full of faith and pride! Obviously, the interview which we had had together had made her aware that her life was meaningful and that even her suffering had not been in vain. Prior to this, she had admitted to Dr. Gerda Becker, who was in charge of her on the ward, that she felt agonized, and more specifically, ridden by the anxiety that she was useless. The last words, however, which she uttered, immediately before her death, were: "My life is a monument. So Professor Frankl said it, to the whole audience, to all students, in the lecture hall. My life was not in vain . . ."

We may be justified in assuming that Frau Kotek, like Job, "went to her grave as the harvest was brought to the granary."