Reading sample:

Meaning-Centred Psychotherapy
Viktor Frankl's Logotherapy in Theory and Praxis

THE ANTHROPOLOGICAL FOUNDATIONS
OF LOGOTHERAPY

Elisabeth Lukas

The word logotherapy derives from the Greek word logos and signifies meaning in the context of Frankl's theory. Logotherapy is a meaning centred psychotherapy that acknowledges the fundamental role of the human spirit (Greek nous). The human spirit is rooted in the unconscious, which is why a clear distinction will be made between unconscious instinct, which is psychophysical, and the unconscious spirit. The human spirit, however, is not merely reason and intellect, which are further aspects of the psychophysical dimensions. What is in fact meant is the specifically human dimension of the multidimensional entity that we call the human being.

A specifically human dimension

The term existence is often used in philosophy for the special nature of being human. Frankl characterised as existential every process for which nothing comparable can be found in the animal kingdom. Thus, for example, the explication – in other words the unfolding of the human person – is an existential process as it goes beyond pure psychophysical development and entails unique choices and decisions. Frankl justified his focus on human spirituality with a dual argument…
Compulsion, let go!

Heidi Schönfeld

Mrs C comes to me with a concern that many people express when they are looking for advice and help: she has anxiety. One has to look carefully to see if anxiety really is the underlying illness, or whether it only accompanies a problem whose root cause lies elsewhere. In almost all psychic disorders, anxiety appears as an adjunct.

This was the case with Mrs C. She came in, young and thin and pretty and personable and initially sat bolt upright before me in a highly tense manner. She has a lot of anxiety: there are thoughts in her that she simply can’t control. She doesn’t know whether she is “still completely right in the head”; she has such horrible thoughts. She finds this all dreadful, but she can’t turn her thoughts off. It’s “just crazy”. At home with her father she sees knives lying around, and she is afraid that she will take one and stab someone. As she drives to the shops she thinks that perhaps she will run over a woman standing nearby. She built a house with her partner, and an axe from this project is still hanging in the garage. She sees the axe and is afraid that she could attack and kill the neighbour with her child in a baby carriage. Sometimes she thinks she could hit someone over the head with a bottle. She finds all of this simply dreadful and never wants to do such a thing, but these thoughts come to her and dominate her thought life. She is completely in despair: why does this happen, why does she think such terrible things that she never, ever wants to do?

Why do things like this happen? A pressing question, to which there is ultimately no clear answer. Her thoughts are called “intrusive thoughts”, because they simply intrude upon her. Where do they come from? Her genes are probably partly to blame, perhaps her personality structure as well, her upbringing along with her life history are possibly also mixed in, and the metabolism of her brain will also play a role. Maybe it is a mixture of all of the above, but what is certain is that we don’t have a complete explanation at present.

I tell her that she may just as well think that she is simply a person to whom such thoughts come. When such uninvited comrades show up she should ideally not fight against them at all, but she should invite them in cheerfully: “Come right
on in, all of you – I collect strange little creatures like you. But unfortunately I don’t have much time and I will probably soon throw you in the bin …”

She stares at me, puzzled – and I tell her about the concept of the human being that Frankl has developed. Of the three dimensions of the human condition that he described, what is of particular interest is how the spiritual dimension is the truly human one. Our ability to make decisions and assert ourselves lies within this dimension. This is, at any rate, to be seen as one level more powerful than the psychic dimension, where our thoughts and feelings make their home. This means that the intrusive thoughts can fly past as they please – they belong to the psychic dimension, they are “only” thoughts. The anxiety is also “only” a feeling, even if it is a horrible one.

What is really interesting for us is the spiritual dimension; it is what characterises the individual uniqueness of every person. Here we are rulers and kings, here we decide what to do with the feelings and thoughts that come to us. This consideration carries lasting weight with Mrs C.

I also tell her that intrusive thoughts are extremely common: they are probably the fourth most common mental illness and thus – unfortunately – nothing out of the ordinary. The only really interesting thing is what ones does with the thoughts that flit in and out. We will come up with something and it will be fun! Mrs C is relieved; she had thought she was the only one with such terrible thoughts.

She is not.
I tell Mrs C about the method of paradoxical intention. One of its basic ideas is that one cannot both desire and fear the same thing at the same time. It is also not possible to laugh at something and be afraid of it at the same time. These are mutually exclusive feelings about a particular thing in a particular moment. And that’s just what we can take advantage of. Mrs C can either be afraid that she will actually attack the neighbour with the axe – or she can summon the thoughts with humorous exaggeration. If she has a choice, then Mrs C would rather choose against the fear. So we think up a few humorous paradoxes. What would it be like to become the “ax monster” of her village? She could begin by decimating the people on her own street, just as a start. Or would she prefer to practice with the bottle? How many corpses could she manage with a single beer bottle? Should she use a mineral water bottle instead?
She smiles – not much, but a little. And this little glimmer of a smile should remove the first brick from the wall of her intrusive thoughts.

At first these paradoxes seem really hair-raising: was I trying to turn her into a murderer? Is such an approach not morally questionable in a psychotherapeutic practice? No, it isn’t, if one bears in mind that this paradoxical procedure is shadow-boxing beyond actual reality. The real desire (“just never hurt anyone!”) is not affected by the use of paradoxical intention: the patient does no harm to another person for this very reason – because precisely that is the content of his or her greatest fear. In this way, the paradoxical wish is set against an irrational intrusive thought and takes away all its seriousness. Humorously exaggerated horrors help with an illness that torments its sufferers immensely.

As for the “decimation of whole rows of houses”, it is so far from every reality that it has absolutely nothing to do with a pathological murder. On the contrary, the outrageous exaggeration destroys its reality and invites Mrs C to smile – a first step out of her prison of intrusive ideas. So Mrs C goes away determined to welcome the next intrusive thoughts in a friendly manner and make a first attempt to mock them.

The next time she comes, however, she is even more timid. She had imagined herself attacking people with an axe, picturing scenes with lots of blood – it was gruesome. It is exactly this that scares her off. I have to put a quick stop to this – a grimly imagined blood bath is indeed something to be afraid of. Her mistake here was the bitter seriousness with which she tried to embellish a murder scene – there was no humour in it and nothing at all to laugh about. Paradoxical intention, in contrast, lives on humour – on excessive exaggeration to the point of ridiculousness. In this way all compulsion, all anxiety draws a short straw and disintegrates in the face of a smile. We practise this a little with the axe as our example. If we’re going to do it, let’s do it right: she can use her neighbour as a warm-up exercise, but then she will move on to the rest of the street, then maybe the shopping centre. Or the streets in alphabetical order? Or her own village first and then the neighbouring one? She will become famous for this village massacre and appear in the next day’s newspaper. Or she could kill just the men on Monday, the women on Tuesday, leaving the children to wait until Wednesday. In this way the intrusive thoughts will be made so ridiculous that all seriousness and thus all power will be removed from their threat. …
Topic: intrusive thoughts

Elisabeth Lukas

People who suffer from intrusive thoughts are even worse off than people who suffer from anxiety. Their dilemma is that they don’t dare to tell anyone what is going on in their heads. Intrusive thoughts are usually so abstruse and absurd that anyone who finds out about them is shocked, and often decides to retreat to a safe distance. What are “normal” people to think if, for example, a nice neighbour confides that she is obsessed by the idea of killing them with an axe? One can’t blame them if they break off contact with her and declare her “crazy”.

Sufferers of anxiety, in contrast, receive sympathy from their fellow humans, who admittedly can’t understand how one can be so absurdly anxious, but who know from their own experience what anxiety is like and remember how unpleasant this feeling is. No one who is not afflicted by intrusive thoughts, however, understands anything about them. They are simply incomprehensible to most people, and therefore elicit no sympathy. People who suffer from intrusive thoughts know this, so they stubbornly remain silent, stand alone in their literally unspeakable distress and are tormented by a life distorted by mental anguish. They are often socially isolated. It is common for them to think they are crazy and thus they are drawn even more strongly towards psychopathic derailments. They don’t understand what is wrong with them, and they waste all their energy on fighting the intrusive ideas that are crowding into their heads and avoiding putting them into action. But even if they take the precaution of removing all knives, scissors and sharp objects, repeatedly analyse and reconstruct their actions, constantly monitoring whether they might be about to do something terrible, it doesn’t do them any good. The uncertainty remains. The fear remains. The only thing that doesn’t remain is their strength; they are exhausted.

But this is all unreal. It is a harmless movie. The spectre is just a flicker on a screen unrolled by an excess of imagination. The overwhelming majority of people who suffer from intrusive thoughts are highly honourable and morally upright people who wouldn’t want to hurt anyone. Their conscience is, in fact,
oversensitive. They would like to do everything perfectly, to do their work 100% well; they don’t want to hurt anyone or cause a scandal. An old fashioned expression for this is an anankastic character structure. It is a disposition that – in a moderate form – certainly has its good sides. If a tradesman, for example, is anankastic, then his clients can be sure that he will deliver exactly what has been ordered, hold reliably to delivery dates and in his pedantic way, forget nothing that has been agreed. If he measures something, he does it five times to make sure that he doesn’t make a mistake, and what he makes is precise to the millimetre. Behind all this trouble and effort – to varying degrees – lies the fear of some kind of failure, of making mistakes, of accruing guilt. Anxiety sufferers are afraid for their wellbeing, and ultimately (consciously or unconsciously) terrified of death. Sufferers of obsessive-compulsive disorders are afraid of guilt, and ultimately (consciously or unconsciously) terrified of some kind of “eternal damnation”.

When one is aware of this background, it is easier to understand how such abstruse phantasms can be concocted by the brain. Extremely anankastic people have an oversensitive conscience and perhaps an image of a punitive God or a strongly moralising superego component in their psyche (which may have been reinforced by a harsh upbringing); they want to do everything right “for God’s sake”, and in the meantime they are thinking about the worst thing that could happen, which they want to avoid at all cost. The worst thing that can happen simply can’t be allowed to happen, otherwise they are “lost”. But what is the worst thing that a person can imagine? No wonder that this train of thought leads them to murder and killing. Some men with intrusive thoughts are terrified that they could, in a moment of complete madness, attack and rape a woman. Some priests with intrusive thoughts suffer under the burden of gruelling thoughts that they could commit blasphemy, for example by masturbating in church. And patients who suffer from washing or cleaning compulsions get themselves more worked up by the fear of infecting or afflicting other people with dirt than they do for their own sakes. In reality all these people do nothing of the sort they imagine, they just imagine “mega-guilt” for themselves and it irreparably destroys their existence.

As human beings, we have the insight that everything can be lost: possessions, fame, honour, life. Nothing but our metaphysical security allows us to endure this insight, and if we lose that, we are left with nothing. Only from a place of security can we let go – of everything, if necessary. We are capable of extending our
consent to every loss. For example parents couldn’t raise their children in peace if they couldn’t let go – if necessary. They couldn’t let their son go off happily for a mountain expedition if they couldn’t accept the possibility that he might have an accident. They couldn’t send their daughter to a dance if they couldn’t accept the possibility that she might be seduced. We ourselves couldn’t start a business if we weren’t ready – if necessary – to fail, even to go bankrupt. Only our acceptance in principle of the possibility of a bad outcome gives us enough stability and inner peace to throw ourselves into the bustle of life with hope and flair.

People who suffer from obsessive-compulsive disorders have somehow lost their metaphysical security and fight tooth and nail against a possible bad outcome which they imagine in concrete and horrible detail. This robs them of stability and peace. It hampers their activities. It nails their thoughts to whatever bad outcome they might imagine. It truly nails them to their cross.

Many psychotherapists are driven to their wits’ end by this drama. One encounters decades long case histories in which the patients are sent in despair from one specialist to another, endlessly forced to reflect on their (allegedly) botched childhoods, are often prescribed antipsychotic medications (which are not indicated and have strong side effects) and are unable to find relief anywhere. Frankl’s ingenious method of paradoxical intention provides instant help. It is hard to believe the joy sufferers experience when they discover that they can help themselves. For some of them, it is like a resurrection into a new, free life.

In the application of Frankl’s method, they learn the three step process of objectification, distancing and parodying. Fixations always mean that one is too close to something. If one stands too close to an oil painting, it is no longer possible to see what is represented in it. It is necessary to stand back in order to take it in as a whole. In a similar way, the sufferer from intrusive ideas has to step back from those ideas internally in order to see them for what they are: harmless “movies in the head”. Objectification is achieved by giving them a name. The perplexing parts of the soul called “Mr Compulsion” and “Mrs Anxiety” are baptised, taken out, put on the table – and then the spiritual person who is the sufferer can achieve distance from them, observe, sort, weigh up and – as the high point of their great blow for freedom – make fun of them. Laughter disperses the perplexity. What bloated wraiths have they been living in fear of? Trivialities. …