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Ten theses about the person

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Whenever we speak about person, we involuntarily associate another term that overlaps with the concept of person, the term "individual"; in fact - and this is the first thesis we state here -

1 the person is an *individuum*: The person is something indivisible - it cannot be further subdivided, cannot be split, and this is so because it is unity. Not even in the so-called "split personality disorder" does a division of the person really occur. Also with regard to certain other pathological states, clinical psychiatry does not speak of a split personality, indeed, nowadays not even of "double conscience", but only of alternating consciousness. Even at the time when Bleuler coined the term schizophrenia, he did not envisage a true schizophrenic split, but rather a separation of certain associative complexes - a possibility that was believed at the time by contemporary associative psychology.

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2 The person is not only in-dividuum but also in-summabile; that is to say, it is not only indivisible, but also not fusible, because it is not only unity but also wholeness. As such, it is also impossible that the person completely dissolves in higher entities: in the crowd, in the class, in the race: All these "units" or "wholes" that can be posited above the person are not personal entities, but at most pseudo-personal. The person who believes to be merged in them is in reality merely sub-merged in them; by "being taken up" in them, he actually gives himself up as a person. Unlike the person, however, the organic is indeed divisible and fusible. At least this is what Driesch's well-known experiments, performed on sea-urchin eggs, have taught us and demonstrated. And more than that: divisibility and fusibility are even the condition and prerequisite for something like reproduction. The consequence of this is neither more nor less than this: the person as such cannot be reproduced: it is only the organism that is reproduced in each case, that is created - by the parental organisms; the person, the personal spirit, the spiritual existence - man cannot pass them on.

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3 Every single person is an absolute novelty. Just consider: *post coitum* the father weighs a few grams, and *post partum* the mother a few kilograms less; but the spirit here proves to be a true *imponderabile*. Or do the parents become poorer in spirit when a new spirit arises with their child? When a new *you* arises in their child - a new being that can say "I" to itself - can the parents say "I" to themselves even one iota less? We can already see that with every person who comes into the world, an absolute novelty is brought into being, made a reality; for spiritual existence is non-transferable; a child cannot inherit it from parents. What alone can be reproduced are the building blocks - but not the builder.

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4 The person is spiritual. And so the spiritual person stands in heuristic and facultative opposition to the psychophysical organism. That - the organism - is the totality of organs, that is, of tools. The function of the organism - the task it has to fulfill for the person who carries it (and is carried by it) - is thus, in the first instance, an instrumental one - and, moreover, an expressive one: the person has need of the organism as a means of action and self-expression. As the tool it is in this sense, the organism is a means to an end, and as such it has utility value. The opposite concept to that of utility is that of dignity; dignity, however, belongs to the person alone, and it belongs to the person essentially independently of all vital and social utility.

Only those who overlook this and only those who forget this can consider euthanasia to be justifiable. Anyone, on the other hand, who recognises the unconditional dignity of every single person, will also have unconditional reverence for the human person, including a sick person - even an incurably sick person - and a person with an incurable mental disorder. In truth, there are no "spiritual" illnesses. For the "spirit", the spiritual person itself, cannot become ill at all, and it is still there behind the psychosis, even if hardly "visible" even to the psychiatrist's gaze. I once called this the psychiatric credo: this belief in the continued existence of the spiritual person even behind the superficial symptoms of psychotic illness; for if this were not so, I said, then it would no longer be worthwhile being a doctor to bring the psychophysical organism back into shape, to "repair" it. He who has only this organism in sight and does not see the person behind it, must admittedly be prepared to euthanise the organism - for lack of any useful value - once it has become irreparable: he knows nothing of the dignity of the person, which is independent of such utilitarian considerations. The mode of being a physician represented by a doctor thinking in this way is that of the *medecin technicien*; but this type of doctor, the *medecin technicien*, only reveals with such thinking that for him the sick person is an *homme machine*.

Just as a disease affects only the psychophysical organism, but not the spiritual person, the same holds for the treatment. This applies in particular to the case of leucotomy. Even the knife of the neurosurgeon is not able to

touch the spiritual person. The only thing leucotomy can achieve (or bring about) is to influence the psychophysical conditions under which the mental person stands - and whenever the operation in question was indicated at all, these conditions will eventually be improved. Thus the indication of this intervention ultimately amounts to weighing up the lesser and greater evil in each case; it is to be considered whether the handicap that could be caused by the operation is of less importance than that given by the illness. Only when and only if this is the case is the intervention justified. In the end, all medical action requires a sacrifice - choosing the lesser evil and to make possible conditions under which the person, no longer confined and restricted by the psychosis, may find fulfilment and self-realisation.

One of our own patients who had a very severe obsessive-compulsive disorder had been treated for many years psychoanalytically and by Individual Psychology, but also with insulin, cardiazole and electric shocks - with no effect.¹ After our own unsuccessful attempts at psychotherapy, we arranged for a leucotomy, which produced a striking success. However, let the patient say it in her own words: "I feel much, much better; I can work again as I did when I was healthy; the obsessions are there, but I can fight them off; for example, I used to be unable to read because of sheer compulsion; I had to read everything ten times; now I don't have to repeat anything." What about her aesthetic interests - the fading away of which some authors speak of: "At long last I am very interested in music again." And about her ethical interests? The patient shows lively compassion, and out of this compassion she expresses only one wish: that others, suffering the way she herself had suffered, should be helped in the same way as herself! And now we ask her whether she feels changed in any way: "I now live in another world; one can't really express it in words, but what I lived in before was no world; it was just vegetating along, but no life, I was too tormented. Now all that is gone, and I can quickly overcome the little that still comes up." - "Are you still 'yourself'?" - "I have changed." - "In what way?" - "It's a life again now." - "When were you, or did you become, most 'yourself'?" - "Now, after the operation; it's all much more natural than it was then; at that time everything was compulsion, now everything is more like it should be; I find my way back; before the operation I wasn't human at all, just an evil to humanity and to myself; now other people are also telling me that I have completely changed." To the direct question whether she has lost her identity, she answers: "I had lost that; the operation has brought me back to myself, to my own person." (This term had deliberately been avoided in all questions!) In other words, this person had, if anything, "become" a

¹ "After the shock, I had forgotten everything, even my address - except for the compulsion."

person again through the operation – she had become herself.²

But as physiology cannot touch the spiritual person, psychology cannot either – at least not if it has succumbed to psychologism; in order to become aware of, or at least to do justice, to the person in a categorical way, a *noology* would be required. It is well known that there was once a "psychology without a soul". It has long since been overcome; however, today's psychology cannot be spared the reproach that it is often a psychology without spirit. This psychology without spirit is, as such, not only blind to the dignity of the person as well as to the person himself, but also value-blind – blind to those values that are the worldly correlate to personal being: blind to the world of meaning and values as a cosmos – to the logos.

Psychologism projects values from the space of the spiritual into the plane of the psychic – where they become ambiguous: On this level, be it of psychology, be it of pathology, it is no longer possible to distinguish between the visions of a Bernadette and the hallucinations of any hysteric. I usually try to explain this to my students by pointing out to them that it is not possible to distinguish between a three-dimensional sphere, cone, or cylinder from their identical circular base projections. In psychological projection, conscience becomes a superego or the "introjection" of the "father imago" and God becomes the "projection" of this imago – while in truth this psychoanalytical interpretation is itself a projection, namely a psychologistic one.

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5 The person is existential; this means that it is not factual, that it does not belong to facticity. The human being, as a person, is not a factual but an optional being; it exists as its own possibility, for or against which it can decide. Being human is, as Jaspers has characterised it, "decisive" being: it is still deciding in each case what it will be in the next moment. As decisive being, it is diametrically opposed to what psychoanalysis presents it as: namely, to being driven. Being human is, as I myself repeatedly describe it, deeply and ultimately being responsible. But this also reveals that it is more than just being free: In responsibility, the *what for* of human freedom is also given – what the human being is free to do – what he or she decides for or against.

In contrast to psychoanalysis, the person in the view of an existential analysis, as I have tried to sketch it, is thus not drive-determined but

² Cf. Beringer: "Under certain circumstances, precisely due to the mitigation or elimination of the symptoms of the illness, a re-emergence of the original sides of the personality can occur, i.e. responsibility and conscience can take effect again, which was no longer possible under the rule of the psychosis. In my experience, it is possible that personal decision-making is not reduced after the leucotomy, but increased... The overarching, self-conscious ego, which was bound and incapable of action under the effect of the psychosis or the anankasms that take place without pause, is, as it were, unleashed by the alleviation of the symptoms of the illness.... The rest of the still healthy human being again attains a self-realisation which was not possible for him under the spell of the disease." (Medizinische Klinik 44, 854 and 856, 1949.)

meaning-oriented, is not striving for pleasure but for value. In the psychoanalytical conception of sexual drive (libido!) and in the individual-psychological conception of social bondage (sense of community!) we see nothing else but a deficient mode of a more primal phenomenon: love. Love is always the relationship between an "I" and a "you" – of which only the "it" (sexuality) remains in the psychoanalytical view, while in the individual-psychological view what remains is a ubiquitous sociality – I would say: the "they".

Psychoanalysis sees human existence as dominated by a will to pleasure, and according to individual psychology it is determined by the "will to power", whereas existential analysis sees it as permeated by a will to meaning. It is not restricted to a "struggle for survival" and beyond that, at best also "mutual aid" (Peter Kropotkin), but it is also the struggle for the meaning of existence – and mutual assistance in this struggle. Such assistance is the essence of what we call psychotherapy: It is essentially *Medecine de la personne* (Paul Tournier). This makes it clear that psychotherapy is ultimately not about the dynamic conversion of emotions and drives, but about an existential reorientation.

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6 The person is essentially *ego* ("ichhaft"), and thus not *id* (eshaft): it is not under the dictation of the *id* - a dictatorship that Freud may have had in mind when he claimed that the *ego* is not master in its own house. The person, the *ego*, can by no means be derived from the *id*, from the drive, not only dynamically but also genetically: the concept of "ego drives" is to be rejected altogether as contradictory in itself. However, the person itself is also indeed unconscious: And precisely there, where the spiritual is rooted, – precisely in its source ground the person is not only facultatively, but obligatorily unconscious. In its origin, in its essence, the spirit is unreflective and insofar just pure and unconscious act ("Vollzug"). So we have to distinguish very precisely between the libidinal unconscious, which is all that psychoanalysis had to deal with, and the spiritual unconscious. But to this, to the unconscious spirituality, there also belongs unconscious faith, unconscious religiosity – as an unconscious, indeed not seldom repressed innate relation of human beings to transcendence. It is the merit of C. G. Jung to have illuminated it; the mistake he made, however, was that he located this unconscious religiosity in the same place as the unconscious sexuality: in the libidinous unconscious, in the *id*. However, I am not driven to the belief in God and to God himself, but I have to decide for or against him; religiosity is of the *ego* ("ichhaft"), or it is not at all.

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7 The person is not only unity and a whole (see 1. and 2.), but also *creates* unity and wholeness: it establishes the unity and wholeness of body, soul

and spirit that constitutes the essence of the "human being". This unity and wholeness is only established and guaranteed by the person – it is only created, constituted and preserved by the person. We humans can perceive the spiritual person only in coexistence with its psychophysical organism. The human being thus represents a point of intersection of three layers of being³: the physical, the psychological, and the spiritual. These layers of being must be separated very clearly from each other (cf. Jaspers, N. Hartmann). Nevertheless, it would be wrong to say that man is "composed" of the physical, the psychic and the spiritual: He is, after all, unity and wholeness - but within this unity and wholeness, the spiritual "encounters" the corporeal and psychic in the person. This constitutes what I once called the noo-psychic antagonism. Whereas the psychophysical parallelism is an obligatory one, the noo-psychic antagonism is optional: it is always only possibility, mere potentiality – however, a potentiality which can be appealed to again and again, and indeed must be appealed to especially by the medical side: Time and again it is necessary to call upon the "defiant power of the spirit," as I have called it, against the psychophysis, which is only apparently so powerful. Psychotherapy in particular cannot do without this appeal, and I have called this the second, the *psychotherapeutic* credo: the belief in this ability of the human spirit to somehow, under all conditions and circumstances, move away from and place itself at a fruitful distance from its own psychophysics. According to the first, the *psychiatric* credo, it would not be worthwhile to "repair" the psychophysical organism if there were not an intact spiritual person waiting for this restoration in spite of all illness. And according to the second credo we would not be able at all to invoke the human spirit to defiance against the psycho-physical, if the noo-psychic antagonism would not exist.

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8 The person is dynamic: it is precisely because it is able to distance itself from the psychophysical that the spiritual appears in the first place. As it is dynamic, we must not hypostatise the spiritual person, and therefore we cannot qualify it as substance - at least not as substance in the conventional sense. To ex-sist means to come out of oneself and to face oneself, and a human being does this insofar as – *qua* spiritual person – it faces itself *qua* psychophysical organism. It is this distancing from oneself as a psychophysical organism that defines the spiritual person as such, as spiritual. Only when the human being encounters itself do the spiritual and the psychophysical separate.

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3 Just as well as of "layers" one could of course also speak of "dimensions". Insofar as the spiritual dimension first and only belongs to the human being, it is the actual dimension of human existence. If the human being is projected from the space of the spiritual, in which it essentially "is", into the plane of the merely mental or even corporeal, then not just any one, but the truly human dimension is sacrificed. Cf. Paracelsus: "Only the height of man is man."

9 The animal not a person, because it is not able to place itself above itself, to confront itself. Therefore, the animal does not have the correlate to the person; it does not have a world, but only an environment. If we try to extrapolate from the relation "animal-human" or "environment-world", we arrive at the "meta-world". If we want to determine the relationship between the (narrower) animal environment and the (wider) human world and from this again to an (all-encompassing) meta-world, we can use the golden ratio as a simile: the smaller part relates to the larger part in the same way as the larger part relates to the whole. Let us take the example of a monkey that is given painful injections to obtain a serum. Can the monkey ever understand why it has to suffer? From out of its environment, it is unable to follow the reasoning of the man who harnesses it to his experiments; for the human world, a world of meaning and values, is not accessible to it. It cannot reach it, it cannot reach into its dimension; but must we not assume that the human world itself is overarched by a world that is similarly inaccessible to man, and that only the meaning of this world, its "meta-meaning", could give meaning to his suffering? Just as an animal can never understand the world of man from the context of its environment, human beings could never understand the super-world, except in guessingly reaching out beyond themselves – in faith. A domesticated animal knows nothing about the purposes for which man harnesses it. How should humans be able to grasp what the meta-meaning of the world as a whole might be?

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10 The person can only achieve self-understanding through transcendence. More than this: The human being is only a human being to the extent that it understands itself through transcendence. He or she is a person only to the extent that he is personated by it: resounding and resonating to the call of transcendence. This call of transcendence is heard in one's conscience.

For logotherapy, religion is and can only be an object – but not a standpoint. Logotherapy must therefore remain on this side of the belief in revelation, and must answer the question of meaning on this side of the crossroads between a theistic and an atheistic worldview. Thus, by understanding the phenomenon of faith not as a belief in God, but as the more comprehensive belief in meaning, it is quite legitimate that logotherapy deals with and occupies itself with the phenomenon of faith. In this, logotherapy holds with Albert Einstein, according to whom the question of the meaning of life means to be religious.

Meaning is a wall beyond which we cannot step any farther, which we must rather accept. We have to accept this ultimate meaning because we can ask no further questions – every attempt to question of the meaning of existence already presupposes the existence of meaning. In short, the human belief in meaning is, in Kant's sense, a transcendental category. Just as we have known since Kant that it is somehow meaningless to ask beyond categories such as space and time, simply because we cannot think, and thus cannot ask, without always presupposing space and time, just so human

being is always oriented towards meaning, however little it may be aware of this fact. There is something like a foreknowledge of meaning, and a sense of meaning also underlies what logotherapy calls the "will to meaning". Whether one wants it or not, whether one realises it or not – a human being believes in a meaning until the last breath. Even the suicide believes in a meaning, if not of life, of continuing to live, then at least of dying. If he really believed in no meaning, no meaning at all - he could not actually lift a finger and for that reason alone could not proceed to suicide.

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